



FLUOROSCOPY PERMIT COURSE APPLICATION

Course Description:

This course prepares the student to take the State of California Department of Public Health – Radiologic Health Fluoroscopy Permit examination. The course covers radiation safety issues consistent with Title 17 and regulatory provisions. Included in the course topics is an overview of Anatomy and Physiology, biologic effects of radiation on human tissue, image intensification, image recording systems, radiation protection materials and procedures, personnel monitoring, quality control, equipment maintenance, registration and regulations.

NOTE: In addition, fluoroscopy students shall perform 15 hours of laboratory experiments at a clinical site with a current clinical affiliation approval by the State of California Department of Public Health – Radiologic Health Branch and KPSAHS. Laboratory experiments will be supervised by a KPSAHS instructor and conducted on the Saturday following didactic education.

ASRT Approved Category “A” Credit:

This course has been approved by the American Society of Radiologic Technologist (ASRT) for **40 CE Category “A” Credits** and meet the American Registry of Radiologic Technologists (ARRT) criteria for Category “A” continuing education credit.

Course Duration:	40 Contact Hours – One Week Course Lecture: M – F 9:00 AM – 5:00 PM Lab: Sat 9:00 AM - 5:00 PM	Reference Material Included:	Radiation Protection in Medical Radiography, 6 th Edition.S.Scherer, P.Visconti, E.Ritenour, CV Mosby Company, St. Louis 2011 California State Syllabus on Fluoroscopy Radiation Protection 6 th Edition
Location:	Kaiser Permanente School of Allied Health Sciences 938 Marina Way South Richmond, CA 94804	Instructor:	Kelly Angel, MEd, CRT, RT Radiography Educator / Clinical Coordinator
Cost*:	<input type="checkbox"/> \$ 352.50 Kaiser Technologist <input type="checkbox"/> \$ 402.50 Non Kaiser *Fee includes books and supplies		

Prerequisite:

This course is open to Certified Radiologic Technologists licensed by the State of California. Applicants must provide a copy of CRT license. This course is **limited to 20 participants**.

Please Indicate Course Dates:	<input type="checkbox"/> Jan 24 – 29, 2011	<input type="checkbox"/> May 9 – 14, 2011	<input type="checkbox"/> Sep. 12 – 17, 2011
Name (Please Print)	Last Four SS #		Facility
xxx-xx-			
Address	City	State	Zip
E-mail Address	Telephone Number		
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Registration Deadline: To qualify for registration, this form must be postmarked no later than 10 working days prior to the course. Do not send registration or fees via inter-office mail. Any forms/fees received via inter-office mail will be returned. Attendance is limited and registration is on a first come, first served basis. **Please make checks payable to: KPSAHS**

Send Registration forms and fees to:	KPSAHS - Fluoroscopy 938 Marina Way South Richmond, CA 94804	For Additional Information:	(510) 231-5000 / (510) 231-5123 http:// www.kpsahs.org FAX: (510) 231-5002
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Cancellation Policy: If written cancellation is received 10 working days prior to the start of the course, a full refund less a \$10.00 administration fee will be made. No refunds will be made past this date. KPSAHS is not responsible for penalties incurred by the applicant due to course cancellation. Courses require a minimum number of participants and may be canceled for lack of enrollment. If canceled, a full refund will be provided to the participant. Materials utilized are the property of KPSAHS and may not be recorded, videotaped or copied without written permission from KPSAHS.

Processor:	Check #:	Amount:	Date Received:
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