



DIAGNOSTEMPS

Radiology Staffing

CT/MRI Skills Inventory

Technologist _____ Date _____

PLEASE USE THE FOLLOWING KEY WHEN SELF-RATING YOUR LEVEL OF EXPERIENCE IN EACH OF THE SKILLS LISTED BELOW:

1 *No Experience*

2 *Minimal* - Some experience, works with supervision

3 *Experienced* - Works without supervision in most cases

4 *Highly Skilled* - Perform well without assistance

SKILLS CATAGORIES SELF RATING

CT	1	2	3	4
Abdominal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pancreas.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liver.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pelvis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temporomandibular.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adrenal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aorta	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thorax.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brain with Contrast.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brain w/o	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chest.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Orbit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pulmonary Embolism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Internal Auditory Canal.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facial Bones.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sinus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mastoids.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Soft Tissue Neck.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cervical Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thoracic Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lumbar Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Post Myelogram Scans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upper Extremity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lower Extremity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Renal CT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Biopsy Precedures.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CT Guided Drainage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pediatric Head, Chest, Abd	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3-D Reconstruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Cranial Nerves	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abdomen & Pelvis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upper Extremities.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pediatric Extremities.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vasular Imaging.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Multiplanar Reformation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kidney.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TM Joints.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Angiography.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-D & 3-D Imaging	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

List Equipment Used

Certifications / Licensures

Expiration Date

ARRT (R)	_____
ARRT (CT)	_____
ARRT (MR)	_____
BLS	_____
ACLS	_____

The information I have given is true and accurate to the best of my knowledge, and I hereby authorize DiagnosTemps to release this Skills Checklist to staffing clients of DiagnosTemps.

Updated Annually.

MRI	1	2	3	4
Head and Neck.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cervical Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thoracic Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lumbar Spine.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chest.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Technologist Signature/Date

Supervisor Signature/Date