

# FACULTY of HEALTH SCIENCES

# DEPARTMENT of RADIOGRAPHY

The above department offers four programmes

- Diagnostic Radiography
- Diagnostic Sonography
- Nuclear Medicine
- Radiotherapy

This handbook offers information on all four programmes.

# What is a University of Technology?

A university of technology is characterized by being research informed rather than research driven where the focus is on strategic and applied research that can be translated into professional practice. Furthermore, research output is commercialized thus providing a source of income for the institution. Learning programmes, in which the emphasis on technological capability is as important as cognitive skills, are developed around graduate profiles as defined by industry and the professions.

# NOTE TO ALL REGISTERED STUDENTS

Your registration is in accordance with all current rules of the Institution. If, for whatever reason, you do not register consecutively for every year/semester of your programme, your existing registration contract with the Institution will cease. Your reregistration anytime thereafter will be at the discretion of the institution and, if permitted, will be in accordance with the rules applicable at that time.

# **IMPORTANT NOTICES**

The rules in this Departmental handbook must be read in conjunction with the General Rules (G Rules) contained in the DUT General Handbook for Students as well as the relevant module Study Guides.

Your attention is specifically drawn to Rule G1 (8), and to the process of dealing with students' issues.

# FACULTY of HEALTH SCIENCES FACULTY VISION, MISSION, GOALS & VALUES

# Vision

Leading Transformative and Innovative Health Sciences Education

# **Mission Statement**

Developing Holistic Professionals responsive to Healthcare needs Through Excellence in:

- Teaching and Learning
- Research, Innovation and Engagement
- Fostering Entrepreneurship

# Goals

The Faculty aims to:

- I. Respond to National human resource and industry needs within the health sector.
- 2. Ensure the offering of entrepreneurial and leadership skills as a core component of all programmes within the Faculty of Health Sciences.
- 3. Continue to develop community based projects to foster social responsibility through collaborative projects between programmes.
- 4. Enhance established quality management frameworks to support teaching and learning.
- 5. Develop applied research that is responsive to community and industry needs.
- 6. Develop mechanisms for the dissemination and application of research outcomes to inform teaching and learning, assessment, community engagement and further research.
- 7. Improve research participation and output through increased post graduate student enrolment, publications and establishment of research groups.
- 8. Enable the generation of third stream income through research and innovation (patents and or / artefacts) in order to supplement existing sources of income for the next five years.
- 9. Attract and retain diverse quality staff while promoting advancement of individual potential.
- 10. Position DUT Health Sciences Nationally.

# Values

The Faculty is guided by the following core values:

- o Transparency, openness, honesty, and shared governance
- Professional and personal respect for others
- Educational relevance, equity and transformation (curriculum, access and success)
- Loyalty, accountability, dignity and trust

# DEPARTMENTAL VISION, MISSION, GOALS & VALUES

# Vision

A Global Leader in Transformative Radiography Education

# Mission

Develop Medical Imaging and Therapeutic Professionals" through *excellence* in:

- Student-centred teaching and learning
- Technology transfer and applied research
- Entrepreneurship and engagement

# Goals

To be a leading Department of Radiography that exists to embrace the holistic education of the student by:

- Providing advancement of knowledge, skills and attitudes to enable effective teaching, learning, research, community engagement and entrepreneurship, thereby,
- Producing quality radiographers that will become useful members of society, and by this means,
- Serving the needs of the community and industry within a regional, national and global context.

# Values

# Professionalism

To work within ethical, legal and regulatory standards. To develop and maintain professional expertise and good work ethic

# Integrity

To conduct ourselves with strong moral principles. To be honest, transparent and authentic. To do what is ethical and just

# Ubuntu

To treat people with respect, fairness, courtesy, politeness and kindness

# Collaboration

To work together as effective team players. To create more than the sum of the parts

# Accountability

To accept responsibility for one's actions

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# I. DEPARTMENTAL AND FACULTY CONTACT DETAILS

#### All departmental queries to:

Secretary: Tel No: Fax No: Email: Location of department:

All Faculty queries to: Faculty officer: Tel No: Fax No: Email: Location of Faculty office:

Executive Dean: Executive Dean's Secretary Tel No: Fax No: Email: Location of Executive Dean: Ms Zamanguni (Gugu) Gumede 031 3732450 0865508774 zamangunig@dut.ac.za DH1102, Gate 6, Ritson Campus, Steve Biko Rd, Durban

Thembelihle Mayisela 031 3732701 031 3732407 thembim@dut.ac.za Gate 8, Ritson Campus, Steve Biko Road, Mansfield Site Area

Professor A. Ross Mrs Bilkish Khan 031 3732704 0866740237 bilkishk@dut.ac.za Gate 8, Ritson Campus, Steve Biko Road, Floor above the Faculty office

2. STAFFING	Name and Qualification
Head of Department:	<b>Dr PB Nkosi</b> PhD: Health Sciences (DUT); Master of Business Leadership (UNISA); M Tech: Rad (Therapy) (UJ); B Tech: Rad (Therapy) (TN); Nat. Higher Dip: Rad (Therapy) (TN); ND: Rad (Diag) (Wits Tech)
Senior Lecturers:	Mrs S Naidoo Master of Applied Sciences (MRT) (U.Sydney); B Tech: Rad (NM) (TN); ND: Rad (Diag) (KEH VIII); HDip: Ed. Technical (Rad) (Unisa)
Lecturers:	<b>Mr S Madlala</b> MSc: H Sci (SGUL), ND: Rad (Diag) (TN)
	<b>Dr T Khoza</b> <b>PhD: Health Sciences (DUT)</b> M Tech: Rad (Diag) (UJ) B Tech: Rad (Diag) (UJ) ND: Rad (Diag) (UJ)
	<b>Ms P Naidoo</b> Master of Laws: Medical Law, Bioethics Forensic Medicine (UKZN) B Tech Rad (Ther) (TN) ND: Rad (Diag) (KEH)
	<b>Mr T Motaung</b> Masters in Business Administration (DUT); B Tech: Rad (Diag) (TN); ND: Rad (Diag) (TN)
Junior Lecturer:	<b>Mrs N Khuluse</b> B Tech: Rad (US) (DUT) ND: Rad (US) (DUT)

Clinical Instructors	<b>Mrs P Kismath</b> B Tech: Rad (Diag) (DUT) ND: Rad (Ther) TN); ND: Rad (Diag) (TN)
	<b>Mrs RM Pillay</b> B Tech: Rad (Diag) (DUT) ND: Rad (Diag) (DUT) Mammography Short Course (DUT)
	<b>Mrs FB Ennos</b> B Tech: Rad (Diag) (DUT) ND: Rad (Diag) (TN)
	<b>Ms LN Shanglee</b> B Tech: Rad (Diag) (DUT) ND: Rad (Diag) (DUT)
Secretary:	<b>Miss Z (Gugu) Gumede</b> B Tech: Bus Admin (DUT) ND: OMT (MUT)
Technical Assistant	<b>Miss P Ngwenya</b> B Tech: Business Administration (DUT) ND: OMT (DUT)
Admin Assistant	<b>Mr MF Ahmed</b> B Tech: OMT (DUT) ND: OMT (DUT)

# 3. DEPARTMENTAL INFORMATION & RULES

# 3.1. PROGRAMMES OFFERED BY THE DEPARTMENT

This department offers four programmes, namely;

- Diagnostic Radiography
- Diagnostic Sonography
- Nuclear Medicine
- Radiotherapy

# 3.2. QUALIFICATIONS OFFERED BY THE DEPARTMENT

Learning programmes are offered in this department which will, upon successful completion, lead to the award of the following qualifications:

QUALIFICATION	Qual. Code	SAQA Qual ID Number	Important Dates
Bachelor of Health Sciences in Diagnostic Radiography Bachelor of Health Sciences in Diagnostic Sonography Bachelor of Health Sciences in Nuclear Medicine Bachelor of Health Sciences in Radiotherapy	BHDRD I BHDSN I BHNMDI BHRDT I	94832 94679 94803 94800	
Master of Health Sciences in Radiography	MHRADI	72200	
Doctor of Radiography	DRRADI	72111	

# 3.3. DEPARTMENTAL INFORMATION

# 3.3.1. Academic Integrity

Please refer to the General Rules pertaining to academic integrity G13 (1)(0). These will be enforced wherever necessary to safeguard the worthiness of our qualifications, and the integrity of the Faculty of Health Sciences at the DUT.

# 3.3.2. Code of Conduct for Students

In addition to the General Rules pertaining to Student Conduct SR3(3), a professional code of conduct pertaining to behaviour, appearance, personal hygiene and dress shall apply to all students registered with the Faculty of Health Sciences, at all times. Refer to the Radiography WIL Code of Conduct for the additional requirements for the Radiography clinic and/or clinical training centres.

# 3.3.3. Uniforms

Students must adhere to instructions regarding specific uniforms required during practicals and hospital/clinic sessions. Uniform specifications are supplied by the department and all orders are placed with the preferred supplier who will take measurements on campus during the orientation week. Refer to the WIL Code of Conduct for more details.

### 3.3.4. Attendance

Students are encouraged to achieve 100% attendance for all planned academic activities as these are designed to provide optimal support for the required competencies. Where absence is unavoidable, the student must timeously advise the department of the reason. Only exceptional reasons will be accepted for absence from guest lectures, industry or field trips. Poor attendance records may lead to penalties.

# 3.3.5. Health and Safety

Students must adhere to all Health and Safety regulations both while at DUT and in WIL placements. Failure to do so will be treated as a breach of discipline.

#### 3.3.6. Lectures

Lectures are offered at the Ritson, ML Sultan and Steve Biko Campuses of the DUT. Clinical training / placement could be in any HPCSA accredited clinical training centre in KwaZulu-Natal. Lectures are conducted during the day; however some lectures may be conducted during the evenings and on weekends.

# 3.3.7. Academic Terms and Student Year Planner

All undergraduate programmes/qualifications have a WIL component which will be detailed in the study guide/s. Due to the integrated nature of the WIL component in these undergraduate programmes, workplace based learning will extend beyond the academic terms as determined on the DUT Academic Calendar. This will include all recess periods and may include public holidays.

A department Student Year Planner indicates the DUT and WIL blocks, per level of study. Students are expected to comply with the requirements of the programme in order to complete the qualifications.

# 3.3.8. Work Integrated Learning (WIL)

- As indicated above, all undergraduate students will be required to attend workplace learning at the relevant HPCSA accredited clinical training centres and placement will be the responsibility of the Department of Radiography at the DUT. The required WIL hours may exceed the minimum hours recommended by the Health Profession Council of South Africa (HPCSA), and is calculated as per the Department Student Year Planner.
- It is important to note that placement of students in the relevant accredited clinical training centres include the Durban and Midlands areas and students may be rotated between the hospitals in the different levels of study. All travel, accommodation, uniform and other related costs would be the responsibility of the student. These need to be budgeted for prior to registration. All rules and regulations associated with attendance, behaviour, and attitude of students during WIL must be adhered to (refer to WIL Code of Conduct). Disciplinary action will be taken when the WIL Code of Conduct is contravened. (Verbal and written warnings, as well as possible expulsion will be the consequences of any individual who does not respect the rules and regulations whilst a registered student in any programme).

#### 3.3.9. Assessment and Moderation

The continuous (ongoing) assessment method is used for all modules/modules in all the programmes. As such, there are no Final and Supplementary examinations. The results for these modules are determined through a weighted combination of assessments, which includes theory and practical assessments; individual and group assignments/projects; written and oral presentations; portfolios and OSCEs. Students are encouraged to work steadily through the period of registration in order to achieve the desired academic results. The assessment plan/schedule for each module/module is included at the back of this handbook. Moderation follows the DUT assessment policy and assessment guidelines. Detailed information on each module/module can be found in the relevant module/module Study Guides. A student who fails a module/module more than once is deemed to be making unsatisfactory academic progress and may not be allowed to reregister for the module.

#### 3.3.10. Special Tests and Condonement

No summative assessments will be condoned. Summative means all assessment marks contribute to the final **mark** of a module/module.

 If a student misses a summative written, oral or practical test, for reasons of illness, a special test may be granted on condition that the student provides a valid medical certificate specifying the duration of the illness, and a declaration that for health reasons it was impossible for the student to complete an assessment. This certificate must be submitted to the programme coordinator, no later than one week after the date of the missed assessment.

- In addition, a special test may be granted to student with borderline academic results.
- The special assessment may take the form of an oral. It may be set at the end of the period of registration and includes a wider scope of work than the original assessment.
- Any other student who misses an assessment and does not qualify for a special assessment, or qualifies for a special assessment but fails to write it, shall be awarded a zero mark for the missed assessment.
- A student who qualifies for a special test granted for borderline academic results, but fails to write it, or achieves lower than their original result, shall be awarded their original results.

# 3.3.11. Student Appeal

Rule GI (8), in the DUT General Handbook applies.

# SECTION A: UNDERGRADUATE QUALIFICATIONS

# 4 BACHELOR OF HEALTH SCIENCES (BHSc): Diagnostic Radiography; Diagnostic Sonography; Nuclear Medicine; Radiotherapy

# 4.1 PROGRAMME INFORMATION

This department offers four professional degrees at NQF level 8. The degrees have a minimum number of 480 SAQA credits with modules offered at HEQSF levels 5 through 8 with various SAQA credits. Whilst the majority of the modules are core, some of them are generic in nature and these are offered by both the Faculty of Health Sciences and the institution at large. At each level of study the student has an opportunity to choose from at least two of the elective modules and students will also register for research modules. The areas of specialisation include:

- Bachelor of Health Sciences (BHSc) in Diagnostic Radiography
- Bachelor of Health Sciences (BHSc) in Diagnostic Sonography
- Bachelor of Health Sciences (BHSc) in Nuclear Medicine
- Bachelor of Health Sciences (BHSc) in Radiotherapy

# **Diagnostic Radiography**

Diagnostic Radiography is the creation of radiographs; photographs made by exposing a photographic film or other image receptors to x-rays. Since x-rays penetrate solid objects, but are slightly attenuated by them, the picture resulting from the exposure reveals the internal structure of the object. A radiographer should be able to apply scientific knowledge and technologies, applicable to the clinical presentation, for the production of optimum image quality in a chosen elective; be able to plan, develop and apply total quality management with consideration for equipment, human resources, quality assurance and health care needs; be able to manage a radiographic service; be able to apply research skills and principles, and be able to apply advanced ethical principles to daily practice.

#### **Diagnostic Sonography**

Sonography uses high-frequency sound waves and a computer to create images of blood vessels, tissues, and organs. A Sonographer is qualified to perform abdominal and transvaginal ultrasound scans to determine the size, shape and dimensions of pelvic organs, ovarian follicle production, and the existence of tumours, enlargements or inflammations. Doppler and 3-D ultrasound help identify pathologies such as gallstones, kidney stones, cancers, hematomas and tumours. A Sonographer must operate various types of diagnostic ultrasound equipment and care for patients competently. He or she does not make a diagnosis, as this falls within the scope of a qualified doctor such as a radiologist, obstetrician, surgeon or physician. The sonographer does however report his or her findings.

#### **Nuclear Medicine**

This is a medical specialty that uses small amounts of radioactive substances to show the function of a body organ, as well as its anatomy. It has diagnostic as well as addlications. Nuclear medicine radiographers therapeutic administer radiopharmaceuticals to patients and then monitor the characteristics and functions of tissues or organs in which the drugs localize, with the use of specialized equipment. The radiographers also perform a number of laboratory related procedures. They should be able to apply scientific skills and technologies to the clinical presentation for the production of optimum image quality in the specialised fields and research units of Nuclear Medicine. They need to also plan, develop and manage a Nuclear Medicine department as well as apply strategic management and administration to ensure a quality Nuclear Medicine service.

#### **Radiotherapy**

Radiotherapy is the treatment of tumours (malignant tumours [known as cancers] and some benign tumours [e,g keloids], using radiation—such as x-rays, gamma rays, electrons or other ionizing radiation. Radiotherapy radiographers plan radiation treatment and deliver treatment dose of radiation to treat these tumours. They deliver the dose using sophisticated technology machines whereby the source of radiation can be externally or internally (brachytherapy). In addition to this, they advise on general care, care of skin and diet during treatment with radiation. Radiotherapy radiographers function in a multidisciplinary environment which includes radiotherapists (cancer treatment specialists), oncologists (chemo doctors), medical physicists, nurses as well as surgeons, psychologists, dieticians, etc. Some patients diagnosed with cancer are followed up lifeti

# 4.2 **PROGRAMME STRUCTURE:** all four programmes

# 4.2.1 Bachelor of Health Sciences (BHSc) in Diagnostic Radiography (DR) (Qualification Code: BHDRDI) (4yr Minimum) – SAQA ID: 94832

YEAR	OF STUDY – I					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMIOI	5	12	С	
SPI	Physiology la	PYSA101	5	12	С	
SPI	Cornerstone	CSTN101	5	12	С	
SPI	Chemistry	CSTY 101	5	8	С	
SPI	Diagnostic Practice & Procedures la	DPPAIOI	6	8	С	
SPI	FGE – student to select one module: isiZulu for Health Care Professionals I Issues of Gender & Society within Health Care	IZHP101 IGSH101	5	12	E	-
SP2	Physiology Ib	PYSBIOI	5	12	С	
SP2	Professional Practice & Management I	PPRM101	6	12	С	
SP2	Diagnostic Imaging Sciences I	DGIS101	5	8	С	
SP2	Diagnostic Practice & Procedures Ib	DPPB101	6	12	С	
SP2	Physics	PHIS101	5	8	С	-
SP2	IGE – student to select Imodule: Values in the Workplace ICT Literacy Skills Cultural Diversity	VWKPI0I ICTLI0I CLDVI0I	5	8	E	
SPI+2	Clinical Diagnostic Practice & Procedure I	DPPC101	6	8	С	
YEAR	OF STUDY – 2				1	
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP3	Anatomy II	ANTM201		12	С	ANTMIOI
SP3	General Pathology	GNLPIOI	5 6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice & Management II	PPRM201	6	8	С	PPRMIOI
SP3	Diagnostic Practice & Procedures IIa	DPPA201	6	16	С	ANTMIOI, PYSAIOI, PYSBIOI, DPPAIOI, DPPBIOI DPPCIOI
SP3	IGE – student to select one module: HIV & Communicable Diseases in KZN The Global Environment	HCDKI0I GENVI0I	6	8	E	
SP3	FGE – student to select one module: Environmental Awareness for Health Care Professionals IsiZulu for Health Care Professionals	EVAH101 IZHP101	6	12	E	IZHP101
SP4	Diagnostic Imaging Sciences II	DGIS201	6	16	С	DGIS101

SP4	Diagnostic Practice & Procedures IIb	DPPB201	6	16	С	ANTMIOI, PYSAIOI, PYSBIOI, DPPAIOI, DPPBIOI,
						DPPC101
SP4	Health Sciences Research I	HSRSIOI	6	12	С	
SP3 + 4	Clinical Diagnostic Practice & Procedure II	DPPC201	6	16	С	ANTMIOI,PYSAIOI, PYSBIOI, DPPAIOI, DPPBIO, DPPCIOI
YEAR	OF STUDY – 3	•				
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP5	Management for Health Professionals	MNHPI0I	6	8	С	
SP5	Diagnostic Imaging Sciences III	DGIS301	7	16	С	DGIS201
SP5	Diagnostic Practice & Procedures IIIa	DPPA301	7	16	С	ANTM201, GNLP101 DPPA201, DPPB201, DPPC201
SP5	IGE – students to select one module: HIV & Communicable Diseases in KZN Entrepreneurial Edge	EQDV101 TENE101	6	8	E	DFFC201
SP6	Diagnostic Practice & Procedures IIIb	DPPB301	7	16	С	ANTM201, GNLP101 DPPA201, DPPB201, DPPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRSIOI
SP6	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETMLIOI	7	12	С	
SP6	<b>FGE – student to select one module:</b> Educational Techniques I IsiZulu for Health Care Professionals II	EDUT101 IZHP301	7	12	E	IZHP201
SP5 + 6	Clinical Diagnostic Practice & Procedure III	DPPC301	6	16	с	ANTM201,GNLP101, DPPA201, DPPB201, DPPC201
YEAR	OF STUDY – 4		-	-		_
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP7	Professional Practice & Management III	PPRM302	8	12	С	PPRM201
SP7	Diagnostic Imaging Sciences IV	DGIS401	8	16	С	DGIS301
SP7	Diagnostic Practice & Procedures IVa	DPPA401	8	16	С	DPPA301, DPPB301, DPPC301
SP8	Diagnostic Practice & Procedures IVb	DPPB401	8	16	С	DPPA301, DPPB301, DPPC301
SP8	Small Business Management	SBSM101	6	8	С	
SP8	Clinical Mentoring & Assessment	CLMA101	8	12	С	
SP7+8	Health Sciences Research III	HSRS301	8	28	С	HSRS201
SP7+ 8	Clinical Diagnostic Practice & Procedures IV	DPP401	6	20	С	DPPA301, DPPB301, DPPC301

SP – Study Period; C – compulsory;

E - elective

IGE – Institutional General Education; FGE – Faculty General Education

# 4.2.2 Bachelor of Health Sciences (BHSc) in Diagnostic Sonography (US) (Qualification Code: BHDSNI) (4yr Minimum) SAQA ID - 94679

YEAR	OF STUDY – I	., (.,		) <b>.</b>		
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMIOI	5	12	С	
SPI	Physiology Ia	PYSAIOI	5	12	С	
SPI	Cornerstone	CSTN101	5	12	С	
SPT	Chemistry	CSTY101	5	8	С	
SPI	Ultrasound Practice & Procedures la	UPPA101	6	8	С	
SPI	FGE – student to select one module: isiZulu for Health Care Professionals I Issues of Gender & Society within Health Care	IZHP101 IGSH101	5	12	E	
SP2	Physiology Ib	PYSBIOI	5	12	С	
SP2	Professional Practice & Management I	PPRMIOI	6	12	С	
SP2	Ultrasound Imaging Sciences I	UMISTOT	5	8	С	
SP2	Ultrasound Practice & Procedures Ib	UPPB101	6	12	С	
SP2	Physics	PHIS101	5	8	С	
SP2	IGE – student to select one module: Values in the Workplace ICT Literacy Skills Cultural Diversity	VWKPI0I ICTLI0I CLDVI0I	5	8	E	
SPI+2	Clinical Ultrasound Practice & Procedure I	UPPC101	6	8	С	1
YEAR	OF STUDY – 2	1	1	1	1	
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP3	Anatomy II	ANTM201	5	12	С	ANTMIOI
SP3	General Pathology	GNLP101	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice & Management II	PPRM201	6	8	С	PPRMIOI
SP3	Ultrasound Practice & Procedures IIa	UPPA201	6	16	С	ANTMI01,PYSA101, PYSB101, UPPA101, UPPB101,UPPC101
SP3	IGE – student to select one module: HIV & Communicable Diseases in KZN The Global Environment	HCDK101 GENV101	6	8	E	
SP4	Ultrasound Imaging Sciences II	UIMS201	6	16	С	UIMS101
SP4	Ultrasound Practice & Procedures IIb	UPPB201	6	16	С	ANTMIOI,PYSAIOI, PYSBIOI, UPPAIOI, UPPBIOI, UPPCIOI
SP4	Health Sciences Research I	HSRSIOI	6	12	С	

	FGE – student to select one module:					
SP4	Environmental Awareness for Health Care Professionals IsiZulu for Health Care Professionals II	EVAH101 IZHP201	6	12	E	IZHP101
SP3+4	Clinical Ultrasound Practice & Procedure II	UPPC201	6	16	С	ANTMIOI,PYSAIOI, UPPAIOI, UPPBIOI, UPPCIOI
YEAR O	F STUDY – 3					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP5	Management for Health Professionals	MNHP101	6	8	С	
SP5	Ultrasound Imaging Sciences III	UIMS301	7	16	С	UIMS201
SP5	Ultrasound Practice & Procedures IIIa	UPPA301	7	16	С	ANTM201,GNLP101, UPPA201, UPPB201, UPPC201
SP5	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETMLIOI	7	12	С	
SP6	Ultrasound Practice & Procedures IIIb	UPPB301	7	16	С	ANTM201,GNLP101 UPPA201, UPPB201 UPPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRS101
SP6	IGE – student to select one module: Equity & Diversity Entrepreneurial Edge	EQDVI0I	7	8	E	
SP6	<b>FGE – student to select one module:</b> Educational Techniques I IsiZulu for Health Care Professionals III	EDUT101 IZHP301	7	12	E	IZHP201
SP5+6	Clinical Ultrasound Practice & Procedure III	UPPC301	6	16	С	ANTM201, GNLP101, UPPA201, UPPB201, UPPC201
YEAR	OF STUDY – 4					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP7	Professional Practice & Management III	PPRM302	8	12	С	PPRM201
SP7	Ultrasound Imaging Sciences IV	UIMS401	8	16	С	UIMS301
SP7	Ultrasound Practice & Procedures IVa	UPPA401	8	16	С	UPPA301, UPPB301, UPPC301
SP8	Ultrasound Practice & Procedures IVb	UPPB401	8	16	С	UPPA301, UPPB301, UPPC301
SP8	Small Business Management	SBSM101	6	8	С	
SP8	Clinical Mentoring & Assessment	CLMA101	8	12	С	
SP7+8	Health Sciences Research III	HSRS301	8	28	С	HSRS201
SP7+8	Clinical Ultrasound Practice & Procedures IV	UPPC401	6	20	С	UPPA301, UPPB301, UPPC301

4.2.3 Bachelor of Health Sciences (BHSc) in Nuclear Medicine (NM) -(Qualification Code: BHNMDI) (4yr Minimum) - SAQA ID - 94803

YEAI	YEAR OF STUDY – I							
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites		
SPI	Anatomy I	ANTMIOI	5	12	С			
SPI	Physiology la	PYSA101	5	12	С			
SPI	Cornerstone	CSTN101	5	12	С			
SPI	Chemistry	CSTY101	5	8	С			
SPI	Nuclear Medicine Practice & Procedures la	NMPA101	6	8	С	1		
SPI	FGE – student to select one module: IsiZulu for Health Care Professionals I Issues of Gender & Society within Health Care	IZHP101 IGSH101	5	12	E			
SP2	Physiology Ib	PYSBIOI	5	12	С			
SP2	Professional Practice & Management I	PPRMI0I	6	12	С			
SP2	Nuclear Medicine Imaging Sciences I	NMIS101	5	8	С			
SP2	Nuclear Medicine Practice & Procedures Ib	NMPB101	6	12	С			
SP2	Physics	PHIS101	5	8	С			
SP2	IGE – student to select one module: Values in the Workplace ICT Literacy Skills Cultural Diversity	VWKPI0I ICTLI0I CLDVI0I	5	8	E			
SPI + 2	2 Clinical Nuclear Medicine Practice & Procedure I	NMPC101	6	8	С			
YEAR	OF STUDY – 2	1						
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites		
SP3	Anatomy II	ANTM201	5	12	С	ANTMI0I		
SP3	General Pathology	GNLPIOI	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI		
SP3	Professional Practice & Management II	PPRM201	6	8	С	PPRMIOI		
SP3	Nuclear Medicine Practice & Procedures Ila	NMPA201	6	16	С	ANTMIOI, PYSAIOI, PYSBIOI, NMPAIOI, NMPBIOI, NMPCIOI		
SP3	IGE – student to select one module: HIV & Communicable Diseases in KZN The Global Environment	HCDK101 GENV101	6	8	E			
SP4	Nuclear Medicine Imaging Sciences II	NMIS201	6	16	С	NMIS101		
SP4	Nuclear Medicine Practice & Procedures IIb	NMPB201	6	16	С	ANTMIOI, PYSAIOI, PYSBIOI, NMPAIOI, NMPBIOI,NMPCIOI		
SP4	Health Sciences Research I	HSRSIOI	6	12	С			
		1			1	1		

SP4	FGE – student to select one module: Environmental Awareness for Health Care Professionals IsiZulu for Health Care Professional II	EVAH101 ZHP101	6	12	E	IZHPIOI
	Clinical Nuclear Medicine Practice & Procedures II	NMPC201	6	16		ANTMIOI, PYSIOI, PYSBIOI,NMPAIOI, NMPBIOI,NMPCIOI

YEAR C	DF STUDY – 3					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP5	Management for Health Professionals	MNHP101	6	8	С	
SP5	Nuclear Medicine Imaging Sciences III	NMIS301	7	16	С	NMIS201
SP5	Nuclear Medicine Practice & Procedures IIIa	NMPA301	7	16	С	ANTM201,GNLP101 NMPA201, NMPB201 NMPC201
SP5	IGE – student to select one module: Equality & Diversity Entrepreneurial Edge	EQDVI0I TENEI0I	7	8	E	
SP6	Nuclear Medicine Practice & Procedures IIIb	NMPB301	7	16	С	ANTM201,GNLP101 NMPA201, NMPB201 NMPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRS101
SP6	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETMLIOI	7	12	С	
SP6	<b>FGE – student to select one</b> <b>module:</b> Educational Techniques I IsiZulu for Health Professional III	EDUT101 IZHP301	7	12	E	
SP5 + 6	Clinical Nuclear Medicine Practice & Procedure III	NMPC301	6	16	С	ANTM201, GNLP101, NMPA201, NMPB201, NMPC201
YEAR C	DF STUDY – 4			•		
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP7	Professional Practice & Management III	PPRM302	8	12	С	PPRM201
SP7	Nuclear Medicine Imaging Sciences IV	NMIS401	8	16	С	NMIS301
SP7	Nuclear Medicine Practice & Procedures IVa	NMPA401	8	20	С	NMPA301, NMPB301 NMPC301
SP8	Nuclear Medicine Practice & Procedures IVb	NMPB401	8	28	С	NMPA301, NMPB301 NMPC301
SP8	Small Business Management	SBSM101	6	8	С	
SP8	Clinical Mentoring & Assessment	CLMA101	8	12	С	
SP7+8	Health Sciences Research III	HSRS301	8	28	С	HSRS201

 Clinical Nuclear Medicine Practice & Procedures IV	NMPC401	8	20	С	NMPA301, NMPB301, NMPC301

SP – Study Period;C – compulsory;E - electiveIGE – Institutional General Education;FGE – Faculty General Education

HEQSF - Higher Education Qualification Sub-Framework;

SAQA – South African Qualifications Authority

# 4.2.4 Bachelor of Health Sciences (BHSc) in Radiotherapy (RT) (Qualification Code: BHRDTI) (4yr Minimum) SAQA ID - 94800

YEAR	OF STUDY – I					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMIOI	5	12	С	
SPI	Physiology Ia	PYSAIOI	5	12	С	
SPI	Cornerstone	CSTN101	5	12	С	
SPI	Chemistry	CSTYIOI	5	8	С	
SPI	Radiotherapy Practice & Procedures la	RPPA101	6	8	С	
SPI	FGE – student to select one module: isiZulu for Health Care Professionals Issues of Gender & Society within Health Care	ZHPI0I GSHI0I	5	12	E	
SP2	Physiology	PYSBIOI	5	12	С	
SP2	Professional Practice & Management I	PPRMIOI	6	8	С	_
SP2	Radiation Treatment Sciences I	RTSC101	5	8	С	
SP2	Radiotherapy Practice & Procedures Ib	RPPB101	6	12	С	-
SP2	Physics	PHISIOI	5	8	С	-
SP2	IGE – student to select one module: Values in the Workplace ICT Literacy Skills Cultural Diversity	VWKPI0I ICTLI0I CLDVI0I	5	8	E	
SPI+2	Clinical Radiotherapy Practice & Procedure	RPPC101	6	8	С	
YEAR	OF STUDY – 2					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP3	Anatomy II	ANTM201	5	12	С	ANTMIOI
SP3	General Pathology	GNLP101	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice& Management II	PPRM201	6	8	С	PPRM101
SP3	Radiotherapy Practice & Procedures IIa	RPPA201	6	16	С	ANTMIOI,PYSAIOI, PYSBIOI,RPPAIOI, RPPBIOI,RPPCIOI
SP3	IGE – student to select one module: HIV & Communicable Diseases in KZN The Global Environment	HCDK101 GENV101	6	8	E	
SP4	Radiation Treatment Sciences II	RTSC201	6	16	С	RTSCIOI
SP4	Radiotherapy Practice & Procedures IIb	RPPB201	6	16	С	ANTMIOI, PYSAIOI, PYSBIOI, RPPAIOI, RPPBIOI, RPPCIOI
SP4	Health Sciences Research I	HSRS101	6	12	С	
SP4	FGE – student to select one module: Environmental Awareness for Health Care Professionals IsiZulu for Health Care Professional II	EVAH101 IZHP201	6	12	Е	IZHPIOI

SP3+4	Clinical Radiotherapy Practice & Procedures II	RPPC201	6	16	С	ANTMIOI,PYSAIOI, PSYBIOI, RPPBIOI, RPPBIOI,RPPCIOI
YEAR	OF STUDY – 3					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP5	Management for Health Professionals	MNHP101	6	8	С	
SP5	Radiation Treatment Sciences III	RTSC301	7	16	С	RTSC201
SP5	Radiotherapy Practice & Procedures IIIa	RPPA301	7	16	С	ANTM201,GNLP101 RPPB101,RPPB201, RPPC101
SP5	IGE – student to select one module: Equality & Diversity Entrepreneurial Edge	EQDVI0I TENEI0I	7	8	E	
SP6	Radiotherapy Practice & Procedures IIIb	RPPB301	7	16	С	ANTM201,GNLP101 RPPA201, RPPB201 RPPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRSIOI
SP6	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETML101	7	12	С	
SP6	<b>FGE – student to select one module:</b> Educational Techniques I IsiZulu for Health Care Professionals III	EDUTI0I IZHP30I	7	12	E	IZHP201
SP5+6	Clinical Radiotherapy Practice & Procedures III	RPPC301	6	16	С	ANTM201, GNLP101,RPPA201, RPPB201, RPPC201
YEAR	OF STUDY – 4		_			•
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP7	Professional Practice & Management III	PPRM301	8	12	С	PPRM201
SP7	Radiation Treatment Sciences IV	RTSC401	8	16	С	RTSC301
SP7	Radiotherapy Practice & Procedures IVa	RPPA401	8	16	С	RPPA301, RPPB301, RPPC301
SP8	Radiotherapy Practice & Procedures IVb	RPPB401	8	16	С	RPPA301, RPPB301, RPPC301
SP8	Small Business Management	SBSM101	6	8	С	
SP8	Clinical Mentoring & Assessment	CLMA101	8	12	С	
SP7+8	Health Sciences Research III	HSRA301	8	28	С	HSRS201
SP7+8	Clinical Radiotherapy Practice & Procedures IV	RPPC401	6	20	С	RPPA301, RPPB301, RPPC301

SP – Study Period; E - elective

C – compulsory; E - elective FGE – Faculty General Education IGE – Institutional General Education;

HEQSF - Higher Education Qualification Sub-Framework;

SAQA – South African Qualifications Authority

# 4.3 SELECTION PROCEDURES

All applicants must apply through the Central Applications Office (CAO). In accordance with Rule G7\*, acceptance into the programme is limited. Since more applications are received than can be accommodated, the following selection processes will apply:

- Initial short listing for selection is based on the applicant's academic performance in Grade 11 and/or 12. Applicants are to satisfy the requirements of Table 1 as a minimum in addition to obtaining a minimum of 28 points as calculated as per Table 2.
- Preference will be given to applicants with Radiography disciplines as first and second choices on CAO.

COMPULSORY MODULES	NSC	Senior C	Certificate	NC (V)
COLL OF COULT	Rating	HG	SG	
English (first additional or home language)	4	D	В	70%
Life Sciences/Biology	4	D	В	70%
Mathematics	4	D	В	70%
Physical Sciences	4	D	В	70%

# Table I: Compulsory Modules

• The point scores for the **NSC** or the **SC** or the **NC** (**V**) results is obtained by using the table below:

RESULTS	NSC Senior Co		Certificate	NC (V)
NEGOEI O	Rating	HG	SG	
90 – 100%	8	8	6	4
80 – 89%	7	7	5	4
70 – 79%	6	6	4	4
<b>60 – 69%</b>	5	5	3	3
<b>50 – 59%</b>	4	4	0	0
40 – 49%	3	3	0	0

#### Table 2: Point Scores

#### Note: No points are allocated for ten (10) credit modules.

All applicants that meet the above requirements will receive a selection package from the Department of Radiography with the following:

- All applicants must submit the completed character evaluation form signed by their school principal or former teacher.
- All the applicants must complete eight (8) hours of voluntary service in the relevant Radiography clinical environment and submit the completed log sheet as proof of attendance.
- The applicants must write and submit reports, following the assignment instruction, on their observations and experiences whilst in the clinical environment, as well as reasons for choosing radiography as a career.

• Applicants will be ranked, as in Table 3 below and may be invited to a placement test.

# Table 3: Weighting of Assessments

ASSESSMENT	WEIGHTING (%)
Results of the NSC, SC or NC (V) certificate	40%
Hospital Visits - eight (8) hours	20%
Written Essays	30%
School/work characteristic questionnaire	10%

- Placement testing (SATAB) inclusive of an interview will be conducted.
- Final selection will be determined, based on the results of the placement testing (50%) and the interview (50%).
- Selected applicants will be placed into either the four-year degree or an-
- Successful applicants who are awaiting their final Grade 12 results (NSC, SC or NC (V)) results will be provisionally accepted.
- In the event that the final Grade 12 results do not meet the minimum entrance requirements, this provisional acceptance will be automatically withdrawn.

# 4.4 PROGRAMME RULES

# 4.4.1 Minimum admission requirements

In addition to Rule G7\*, the minimum entrance requirement is a National Senior Certificate (NSC) or a Senior Certificate (SC) or a National Certificate (Vocational) (NC (V)) that is valid for entry into a Bachelor's Degree and must include the following modules at the stated minimum ratings below:

COMPULSORY MODULES	NSC	Senior (	NC (V)	
	Rating	HG	SG	
English	4	D	В	70%
Life Sciences/Biology	4	D	В	70%
Mathematics	4	D	В	70%
Physical Sciences	4	D	В	70%

# 4.4.2 Minimum Admission Requirements in respect of Work Experience, Age, Maturity and RPL

The DUT General Rules  $G7(3)^*$  and  $G7(8)^*$  respectively will apply.

4.4.3 Admission of International students

The DUT Admission Policy for International Students and General Rules G4\* and G7(5)\* will apply.

# 4.4.4 Duration of the Programme

In accordance with the DUT Rule G23  $B(2)^*$  and Rule G23B(3)\*, the minimum duration of study is four (4) years, including any periods of clinical practice and the maximum duration will be six (6) years of registered study, including any periods of clinical practice.

#### 4.4.5 **Progression rules**

In addition to DUT rules G14\* and G16\* the following rules shall apply: Students must pass all pre-requisite modules before he/ she is admitted to the next level (see Tables on page 10 to 17 in the Department Handbook).

# 4.4.6 Exclusion rule

In addition to the DUT General Rule G17\*, a first year student who fails five or more of the modules with an average of less than 40% in the failed modules during that year is not permitted to re-register in the Department of Radiography. De-registration from any module is module to the provisions of Rule G6 (2)\*.

#### 4.4.7 Re-registration

Rule G16\* of the General Handbook for Students applies.

#### 4.4.8 Interruption of studies

Should a student interrupt their studies for a period of more than three (3) consecutive years, the student will need to apply to the Department for permission to re-register and will need to prove currency of appropriate knowledge prior to being granted permission to continue with registration.

#### 4.4.9 Registration as a radiation worker

It is mandatory that all students are registered as trainee radiation workers with the Radiation Protection Services at SABS. The following are requirements for registration:

- (i) First year students must undergo medical examinations blood, urine and eye testing as well as a chest x-ray, within a period of 30 days preceding registration as a trainee radiation worker.
- (ii) First time entering female students are required to sign a declaration that they are not pregnant at the time of registration. Should it be ascertained that a student was pregnant at the time of first registering, such student will have to deregister from the programme with immediate effect.
- (iii) Any returning student who may be or suspects that she is pregnant must notify the HOD immediately, in order to ensure that appropriate safety measures are taken both in the Radiography clinic and during clinical training. Students who fail to disclose their pregnancy absolve the DUT from any consequences of non- disclosure.
- (iv) A pregnant student may need to be exempt from certain clinical training placements in the radiography clinic and clinical training centres, which may extend their clinical training completion time.
- (v) All pregnant students must comply with the standard radiation monitoring

requirements and in addition, use a direct reading pocket alarm dosimeter.

- (vi) The event of a radiation occurrence to a student may result in a delay of completion of the student's studies.
- (vii) First year students should turn 18 years of age before 01 July 2021.

# 4.4.10 Work Integrated Learning (WIL)

- The student must comply with the rules and regulations as set out in the clinical environment where placed. A student shall achieve the required level of clinical competency, determined by the employers/ clinical training centres and department, before application for the issuing of the degree will be made. This includes completion of the required clinical hours.
- Clinical Competency is evaluated through on site assessments.
- In addition, Rule G28\* as contained in the General Handbook for Students applies. Students must familiarize themselves with this rule.
- Students must adhere to the rules and regulations, as indicated in the Department of Radiography's WIL Code of Conduct.
- Students are expected to adhere to all Health and Safety regulations and rules of ethical conduct as stipulated by the respective clinical environments.
- Disciplinary matters arising from breach of the Code of Practice will be referred to the Department for student disciplinary action, and thereafter to the DUT Disciplinary Committee.

# 4.4.11 Registration with the HPCSA – Radiography and Clinical Technology (RCT) Board

Students are required to apply for registration as Student Radiographers with the HPCSA, Clinical Technology and Radiography Professional Board during Term I of first registration; as determined in the regulations set out in the Health Professions Act, 1974 (Act 56 of 1974) [Government Notice R1855 (Dated 16/9/77); No R 1379 (12/7/94)]. Registration fees and submission of registration documents is the responsibility of the student. Students not registered will not be permitted to complete their Clinical Practice.

On successful completion of the qualification and required Clinical Practice, and satisfaction of the requirements of the Professional Board for Clinical Technology and Radiography, a graduate may register as a qualified Radiographer (Community service) with the HPCSA. After completion of the compulsory one year of community service, the registration must be changed to "Independent Practice". This is the sole responsibility of the graduate.

5 BTECH: RADIOGRAPHY: Diagnostic, Nuclear Medicine, Therapy, Ultrasound (*Qualification Codes: BTRAD1, BTRDN1, BTRT1, BTRDU1*) (The teach-out date for these qualifications was 2019, thus no new students will be admitted into them)

#### 5.1 PROGRAMME INFORMATION

#### 5.1.1 Lectures

Lecture are offered at the Ritson Road Campus of the DUT. Lectures are usually conducted over weekends; however lectures may be conducted during week days and in the evenings.

#### 5.1.2 Work Integrated Learning (WIL)

Currently, there is no WIL component in this programme. However; the student must be clinically placed according to the specific learning outcomes. If not clinically placed, permission must be obtained from appropriate clinical centre for access. Written proof must be submitted at time of registration.

Code	Modules	Year of Study	NQF Level	SAQA Credits	Pre-requisite
MPRD101	Management Principles and Practice I	4	7	12	NDip: Rad: D, NM, T, US
RMTQ203	Research Methods and Techniques	4	7	12	NDip: Rad y: D, NM, T, US
RPRD401	Radiographic Practice IV: Diagnostic or	4	7	96	NDip: Radiography: D
RPRN401	Radiographic Practice IV: Nuclear Medicine or	4	7	96	NDip: Rad: NM
RPRT401	Radiographic Practice IV: Radiotherapy or	4	7	96	NDip: Radiography: T
RPRU401	Radiographic Practice IV: Ultrasound	4	7	96	ND: Radiography: US

# 5.2 LEARNING PROGRAMME STRUCTURE

# 5.3 PROGRAMME RULES

#### 5.3.1 Assessment and Moderation

The continuous (ongoing) assessment method is used for all modules in all the programmes, except Management Principles and Practice I. As such, there are no final and supplementary examinations. The results for these modules are determined through a weighted combination of assessments, which includes theory and practical assessments; individual and group assignments/projects; written and oral presentations; portfolios and OSCEs. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessments are listed under each module at the back of this handbook. Moderation follows the DUT assessment policy and assessment guidelines. Detailed information can be found in the relevant module study guides.

# 5.3.2 Special Tests and Condonements

No summative assessments will be condoned. Summative means all assessment marks contribute to the final mark of a module.

- i. If a student misses a summative written, oral or practical test, for reasons of illness, a special test may be granted if the student provides a valid medical certificate specifying the nature and duration of the illness, and a declaration that for health reasons it was impossible for the student to complete an assessment. This certificate must be submitted to the programme coordinator, no later than one week after the date of the missed assessment.
- ii. In addition, a special test may be granted to students with borderline academic results.
- iii. The special assessment may take the form of an oral, may be set at the end of the period of registration, and may include a wider scope of work than the original assessment.
- iv. Any student who misses an assessment and who does not qualify for a special assessment, and any student who qualifies for a special assessment but fails to write it, shall be awarded a zero mark for the missed assessment.
- v. A student who qualifies for a special test granted for borderline academic results, but fails to write it, or achieves lower than their original results, shall be awarded their original results.

# 5.3.3 Minimum Admission Requirements

In addition to Rule G7, the following programme rules apply:

- i. Persons must be in possession of a three year National Diploma: Radiography: Diagnostic or equivalent.
- ii. The two (2) year National Diploma: Diagnostic is no longer accepted as an entrance requirement. Candidates who possess this qualification and who wish to obtain the B Tech: Radiography should contact the Head of Department, Radiography.
- iii. Students must be eligible for registration with the Health Professions Council of South Africa (HPCSA).
- iv. A student wishing to register for the B Tech Radiography programme must have a minimum of I year post-diploma clinical experience.
- v. A student must be placed or employed in the relevant clinical environment, for e.g. CT/MRI, PET/CT, MSK Ultrasound, IMRT/VMAT,/Stereo, etc. in order to meet the outcomes of the programme.

# 5.3.4 Selection Criteria

In accordance with Rule G5, acceptance into the programme is limited to 20 places. The following selection process will determine placement in the programme:

- i. Applications are made through the Department.
- ii. Selection will be on the basis of previous academic performance as determined by a ranking system.
- iii. Interviews may be conducted to assess the suitability of the individual for the BTech programme.

#### 5.3.5 Pass Requirements

Notwithstanding the DUT pass requirements (GI4 and GI5),

and those detailed as follows, students are encouraged to effectively engage with their learning, and strive for the best academic results possible in order to adequately prepare themselves for their future careers, and to maximize possible employment opportunities. A student shall obtain a minimum of 50% in a module to pass that module. Notwithstanding anything to the contrary in the General Rules, no supplementary examinations shall be available for any continuous (on-going) assessment modules in this Department.

# 5.3.6 Re-registration Rules

Please refer to Student General Handbook for re-registration information (Rule G16). A student who fails a module more than once is deemed to be making unsatisfactory academic progress and may not be allowed to re-register for the module.

#### 5.3.7 Interruption of Studies

Should a student interrupt their studies by more than one (1) year, the student will need to apply to the Department for permission to re-register and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

#### 5.3.8 Exclusion Rule(s)

In addition to Rule G17, the following programme rules apply: A student who fails more than one module will not be allowed to repeat the programme and will be instructed to leave the Institution.

# 5.3.9 Minimum and Maximum Duration of Study

The minimum duration is one year of full time registered study or two consecutive years of registered part-time study, including any periods of work integrated learning.

Should be read in conjunction with the DUT Rule G21 A (3)\* and Rule G 21 A (4

# SECTION B- POST GRADUATE PROGRAMMES

# 6 MASTERS OF HEALTH SCIENCES IN RADIOGRAPHY - (Qualification Code: MHRADI)

# 6.1 PROGRAMME INFORMATION

The Master of Health Sciences in Radiography is a full research masters offered at NQF level 9. In addition to Rule G24 (1) of the General Handbook, candidates must be in possession of a Bachelor's degree in Radiography (NQF level 8) or a B Tech in Radiography with conferment of status according to Rule G10A of the General Handbook.

Candidates may also apply for admission via Recognition of Prior Learning (RPL) in accordance with Rule G7 (8) and/or G10B of the General Handbook.

Entry into the MHSc programme is not automatic and in accordance with Rule G5, acceptance into the programme is limited.

Please refer to the General Student Handbook and the Postgraduate Student Handbook.

# 6.1.1 Assessment and Moderation

A dissertation may be submitted for examination only once, although in certain circumstances the examiners may invite a student to revise and re-submit the thesis. A dissertation may be submitted at any time during the year, but prior to submission the PG7 (Intention to submit) form must be completed and submitted through the department to the Faculty Office at least three months prior to submission. At least two examiners, will be selected by the HoD, according to the DUT requirements. Approval for the examiners will be obtained from the Faculty Research and Higher Degrees Committee (RHDC) and this will be ratified by the HDC. Postgraduate assessment is aligned to Postgraduate policies and guidelines. Please refer to the General Handbook and the Postgraduate Student Guide.

# 6.2 LEARNING PROGRAMME STRUCTURE

This programme is a full research option.

Code	Module	level	*CA/E	Credits
MHRADI	Dissertation	9	External Examination	180

# 6.3 PROGRAMME RULES (wef: 08/11/2017)

# 6.3.1 Minimum Admission Requirements

In addition to Rule G24 (1), candidates must be in possession of a Bachelor's degree in Radiography (NQF level 8) or a BTech in Radiography or a Postgraduate Diploma with conferment of status according to Rule G10A. Candidates may also apply for admission via Recognition of Prior Learning (RPL) in accordance with Rule G7 (8) and/or G10B.

# 6.3.2 Selection Criteria

All applicants should meet the minimum admission requirements stipulated under 6.3.1. All applicants must submit a concept paper outlining the research topic, purpose, proposed methodology and a concise literature review to the Department. **Research Committee (DRC)**. Once the committee approves the topic and allocate a supervisor or supervisors, the student may register for the programme.

# 6.3.3 Pass Requirements

Rule G24 of the General Handbook and the Postgraduate Student Guide apply. Students are encouraged to apply themselves to their research, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

#### 6.3.4 Exclusion and Re-registration Rules

- i. In accordance with Rule G24, Senate may exclude or refuse re-registration if in the opinion of the supervisor/s and the Faculty Board, the student fails to maintain satisfactory progress in the research project.
- ii. In accordance with Rule G24, if a student fails to obtain the qualification within the four (4) years from first registration, Senate may refuse to renew the student's registration or it may impose any condition it may deem fit. A student may apply to the Executive Committee of the Faculty Board for an extension.

# 6.3.5 Interruption of Studies

- i. Should there be bona fide reasons for the interruption of studies for a period of one (1) year or more, once the student is formally registered, the student may apply for an interruption of registration. Registration may be interrupted under exceptional circumstances and is not done retrospectively but the decision is taken by the Faculty of Research Committee.
- ii. The student must apply on Form PG4 and is module to the approval of the Faculty.

#### 6.3.6 Minimum and Maximum Duration of study

In accordance with Rule G24 (2), the minimum duration for this qualification shall be one (1) year of registered study and the maximum shall be three (3) years of registered study.

# 7 DOCTOR OF RADIOGRAPHY (Qualification Code: DRRADI)

# 7.1 PROGRAMME INFORMATION

This full research qualification is aligned to Rule G25 and G26 of the General Handbook and the guidelines in the Post Graduate Student Guide. It is a 360 credit qualification and is offered at the HEQSF Level 10.

#### 7.1.1 Assessment and Moderation

A thesis may be submitted for examination only once, although in certain circumstances the examiners may invite a student to revise and re-submit the thesis. A thesis may be submitted at any time during the year, but prior to submission the PG7 (Intention to submit) form must be completed and submitted through the Department to the Faculty Office at least three months prior to submission. At least three examiners (2 locally and one nationally/externally) will be selected by the HOD, according to the DUT requirements. Approval for the examiners will be obtained from the Faculty Research and Higher Degrees Committee RHDC and this will be ratified by the HDC. Postgraduate assessment is aligned to Postgraduate policies and guidelines. Please refer to the General Student Handbook and the Postgraduate Student Handbook.

# 7.2 PROGRAMME STRUCTURE

This programme is a full research option.

Code	Module	level	*CA/E	Credits
DRRADI	Thesis	10	External Examination	360

# 7.3 PROGRAMME RULES

#### 7.3.1 Minimum Admission Requirements

- In addition to Rule G25 (1), candidates must be in possession of a Master's degree in Radiography (NQF level 9) or a M Tech in Radiography with conferment of status according to Rule G10 A.
- ii. Candidates may also apply for admission via Recognition of Prior Learning (RPL) in accordance with Rule G7 (8) and/or G10B.

# 7.3.2 Selection Criteria

All applicants should meet the minimum admission requirements stipulated under 7.3.1. All applicants must submit a concept paper outlining the research topic, purpose, proposed research methodology and a concise literature review to the Department. Once the Department Research Committee (DRC) approves the topic, the student may register for the programme after which a supervisor will be selected and appointed.

### 7.3.3 Pass Requirements

Rule G25 and the Postgraduate Student Handbook apply. Students are encouraged to apply themselves to their research, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

## 7.3.4 Exclusion and Re-registration rules

- i. In accordance with Rule G25, Senate may exclude or refuse re-registration if in the opinion of the supervisor/s and the Faculty Board, the student fails to maintain satisfactory progress in the research project.
- ii. In accordance with Rule G25, if a student fails to obtain the qualification within the four (4) years from first registration, Senate may refuse to renew the student's registration or it may impose any condition it may deem fit. A student may apply to the Executive Committee of the Faculty Board for an extension.

#### 7.3.5 Interruption of Studies

- i. Should there be bona fide reasons for the interruption of studies for a period of one (1) year or more, once the student is formally registered, the student may apply for an interruption of registration. Registration may be interrupted under exceptional circumstances and is not done retrospectively.
- ii. The student must apply on Form PG4 and this is module to the approval of the Faculty Research and Higher Degrees Committee.

#### 7.3.6 Minimum and Maximum Duration of study

In accordance with Rule G24 (2), the minimum duration for this qualification shall be two (2) years of registered study and the maximum shall be four (4) years of registered study.

# 8 MODULE CONTENT AND ASSESSMENTS

8.1 BACHELOR OF HEALTH SCIENCES (BHSc) in Diagnostic Radiography; Diagnostic Sonography; Nuclear Medicine; Radiotherapy

MODULE/MODULE	LEARNING CONTENT	ASSESSMENT	%
Anatomy I	<ul> <li>Introduction to Anatomy</li> <li>Osteology</li> <li>Muscular anatomy</li> <li>Arthrology</li> </ul>	Theory Assessment Practical	50% 50%
Physiology la	<ul> <li>Cells &amp; Tissues</li> <li>Integumentary system</li> <li>Muscular system</li> <li>Nervous system &amp; Special senses</li> </ul>	Theory Assessment Practical	60% 40%
Physiology Ib	Cardiovascular system and Blood     Immunity & Lymphatic system     Respiratory system     Digestive system     Urinary system	Theory Assessment Practical	60% 40%
Physics	Childry system     Thermal physics     Waves & sound     Geometrical optics     Electricity& magnetism     Radioactivity & radiation     Quantum physics	Theory Practical Tutorial	70% 20% 10%
Chemistry	<ul> <li>Chemistry and measurements</li> <li>Matter and Energy</li> <li>Atoms and Elements</li> </ul>	Theory	100%
Professional Practice & Management I	<ul> <li>Students as learners in a University of Technology</li> <li>History of radiography (including the SA perspective).</li> <li>Organisational and hierarchy structures in public &amp; private institutions.</li> <li>Communication and interactions with patients:</li> <li>Human developmental stages - Patient types &amp; age groups classifications</li> <li>Patient care</li> <li>Infection Control – Types and spread of infections</li> <li>Introduction to drugs</li> </ul>	Theory Tests Projects/Assignments/ Practicals	60% 40%
Anatomy II	<ul> <li>Gastrointestinal Anatomy</li> <li>Respiratory Anatomy</li> <li>Cardiovascular anatomy</li> <li>Neuroanatomy</li> </ul>	Theory Assessment Practical	50% 50%
General Pathology	<ul> <li>Basic Medical Terminology</li> <li>Cell adaptations, cell injury &amp; cell death</li> <li>Causes of cell injury &amp; death</li> <li>Infections &amp; parasitic diseases</li> <li>Tissue Responses to injury - inflammation and healing and repair</li> <li>Immunopathology</li> <li>Neoplasia</li> <li>Haemodynamic disorders</li> </ul>	Theory tests Assignment/s/Projects/ Portfolios	60% 40%
Professional Practice & Management II	Communication:     Infection Control     Management of drugs     Venipuncture/Phlebotomy     Principles of Imaging & Treatment for     Paediatrics & Geriatrics     Health & safety:	Theory Assessment Project/Assignment/ Practical	40% 60%

# These are the common modules across the four programmes

	<ul> <li>Recognising academic sources of information</li> <li>Plagiarism &amp; copyright</li> </ul>		
Health Sciences			
Research I	Selection of information using a variety of	<b>T</b> I A	
	search engines	Theory Assessment	30%
	<ul> <li>Analysis, synthesis &amp; evaluation of</li> </ul>	Project/Assignment/	
	information	Presentation/	70%
	<ul> <li>Reviewing academic literature</li> </ul>	Reflective Practice	70%
	<ul> <li>Scientific writing</li> </ul>		
	<ul> <li>Report writing</li> </ul>		
	Reflective writing		
	<ul> <li>Math &amp; Statistics for Health Sciences</li> </ul>		
	Basic concepts and principles		
Ethics and Medical	Human Rights	Theory Assessment	40%
Law	Ethics	Project/Assignment/	60%
	Medical Law	Practical	60%
	Role of student, supervisor and the		
	institution		
	Research terminology		
	<ul> <li>Theories and principles of research</li> </ul>		
	<ul> <li>Research paradigms and types</li> </ul>	Theory Assessment	20%
Lindeb Colonana	<ul> <li>Research problem identification and</li> </ul>	Theory / asessment	
Health Sciences	justification	Critical Analysis of	30%
Research II	Literature review	Literature/Assignment/	
	<ul> <li>Research designs and methodologies</li> </ul>	Electrature// tostgrintent/	
	<ul> <li>Sampling methods &amp; techniques</li> </ul>	Research proposal &	50%
	Qualitative and quantitative data collection	Oral Presentation	30%
	and instruments		
	Principles - research ethics, human rights &		
	medical law		
	Data analysis – quantitative & qualitative		
	Research Plan/Proposal		
Management for	Principles of Management - POLC		
Healthcare	<ul> <li>Tasks of Management</li> </ul>		
Professionals	<ul> <li>Problem identification &amp; Solving</li> </ul>	Theory Assessment	40%
	<ul> <li>Decision making</li> </ul>	Project/Assignment/	
	<ul> <li>Communication</li> </ul>	Case Study	60%
	<ul> <li>Negotiation</li> </ul>	Practical	00,5
	<ul> <li>Conflict Resolution</li> </ul>		1
	<ul> <li>Leadership</li> </ul>		
	<ul> <li>Motivation</li> </ul>		1
Leadership & Supervisory	Leaders verses Managers		
Development	Qualities of a leader		1
	Leadership styles	Theory tests	50%
	Concepts of leadership	Assignments/Projects/	30/0
	Behaviours	Portfolio	50%
	Climate and Culture of leadership	1010010	
	<ul> <li>Leadership Theories</li> </ul>		
	<ul> <li>Conflict Management;</li> </ul>		
	<ul> <li>Cultural Diversity</li> </ul>		
	Leadership Development		
L	<ul> <li>Leadership Development</li> </ul>		

Llashk Caiseraa			
Health Sciences Research III	Conducting research (quantitative or		
Research III	qualitative):	Proposal & Ethics	20%
	<ul> <li>Obtaining permission</li> </ul>	Approval	20%
	• Data collection		
	<ul> <li>Management of the research process</li> </ul>	Data Collection & Data	60%
	<ul> <li>Management of a budget</li> <li>Research ethics</li> </ul>	analysis, Data	
		interpretation,	
	<ul> <li>Writing of research report – introduction,</li> </ul>	presentation of findings	
	literature review and research methodology	/ results.	
	Data analysis - Quantitative & Qualitative	Discussion and	
	methods	conclusion.	
	Project write-up		
	<ul> <li>Presentation of results to peers.</li> </ul>		
	<ul> <li>Preparing a scientific paper for publication</li> </ul>		
	Presentation of results to peers	Preparation of a	20%
		publication	
Professional	Private & Public Practice		
Practice &	<ul> <li>Principles &amp; Applications of :</li> </ul>		
Management III	Strategic management		
	<ul> <li>Organisational development</li> </ul>		
	Change management	Theory Assessment	40%
	Disaster management	Project/Assignment	
	Social responsibility	Case Study	30%
	<ul> <li>Advanced Occupational Health &amp; Safety</li> </ul>	Portfolio	30%
	<ul> <li>Human Resources management</li> </ul>		
	<ul> <li>Labour Relations</li> </ul>		
	<ul> <li>Procurement processes</li> </ul>		
	Quality management		
Small Business			
	Introduction to Entrepreneurship Theory		
Management	Self-awareness & Development of Personal		
	Attributes		
	Industry & Business Classification	-	100/
	<ul> <li>Basic Business Plan Development</li> </ul>	Theory tests	40%
	<ul> <li>Business administration</li> </ul>	Projects/Assignments/	
	Legislation	Case studies/ Presentations	60%
	<ul> <li>Marketing for Entrepreneurs</li> </ul>	Presentations	60%
	Finance		
	<ul> <li>Operations Management</li> </ul>		
	<ul> <li>Human Resources for Entrepreneurs</li> </ul>		
	Presentation skills		
Clinical Mentoring	<ul> <li>Workplace learning – theories &amp; principles.</li> </ul>		
& Assessment	(Co-op learning, Experiential Learning, Work		
	Integrated Learning).		
	<ul> <li>Role of CHE, HEQC, HEQF, DoH, HPCSA,</li> </ul>		
	SETAs, Skills Development		
	Related terminology		
	<ul> <li>Clinical mentoring teaching and learning</li> </ul>		
	strategies	Theory tests	50%
	<ul> <li>Demonstration techniques</li> </ul>	Demonstrations/	
	Compiling a task sheet	Practicals/Assignment/	
	Communication with mentee, patients/clients	Portfolio	50%
	Clinical assessment strategies		
	<ul> <li>Assessment tools/rubrics</li> </ul>		
	<ul> <li>Preparing for an assessment</li> </ul>		
	<ul> <li>Conducting assessments</li> </ul>		
	<ul> <li>Evaluate evidence and making judgements</li> </ul>		
	<ul> <li>Providing feedback</li> </ul>		
	Quality Assurance and evaluation		
	evaluer / issurance and evaluation	1	

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Cornerstone	<ul> <li>concept of journeys, across time, across space, and across human relationships; the first use of the concept will take the journey of the uMngeni River (which is close to all DUT campuses) as a metaphor</li> <li>analysis of a particular issue or metaphor (one critical event or development will be and analysed; the event in focus will be selected on the basis of its connections to the theme of journeys and its relevance to the issues of ethics, diversity and critical citizenry</li> <li>identify and integrate learning from earlier sections, and examine implications for further learning.</li> </ul>	A weekly blog Tutorial attendance (forfeited if student attends less than 80% of tutorials) Visual artefact Written report Oral presentation Peer assessment	20% 10% 15% 30% 15% 10%
Values in the workplace	<ul> <li>A reflection on personal values and move to a discussion on how they intersect with values in the workplace.</li> <li>how to build positive values in the workplace and the vital themes of ethics, respect, interconnectedness, honesty, creativity and human diversity will form the basis for building "sacred spaces at work."</li> <li>leadership values and ethics and ethical decision making</li> <li>to develop social responsibility and their roles as citizens.</li> </ul>	Assignment Oral Presentation Peer Assessment Attendance	50% 30% 10% 10%
ICT Literacies & Skills	<ul> <li>Basics of ICTs Hardware, Software, and Users</li> <li>Internet Search</li> <li>Word Processing</li> <li>Spreadsheets</li> <li>Referencing</li> <li>Security, Legal, Ethical, and Societal Issues</li> <li>Economics of ICTs</li> <li>Presentations</li> </ul>	Quizzes Capstone project- written report & oral presentations	50% 50%
Cultural Diversity	<ul> <li>Culture (local and global context)</li> <li>Social responsibility</li> <li>Issues of anti- discriminatory and anti- oppressive practices.</li> <li>Social justice and the effect of marginalization.</li> <li>Consciousness raising and social action</li> </ul>	Assignments Oral presentation Portfolio	20% 40% 40%
HIV and Communicable Disease in KZN	<ul> <li>Epidemiology of HIV, TB and STIs globally, in sub-Saharan Africa, South Africa and KZN.</li> <li>HIV infection, transmission and prevention</li> <li>Two diseases one person</li> <li>Psychological issues of HIV and TB:</li> <li>Decision making and family autonomy</li> <li>Social isolation and stigma</li> <li>Disclosure</li> <li>Themes – stigma, disclosure, rights, communication, facilitation, advocacy</li> </ul>	Online activities Critical Reflective Diary Communication report	30% 20% 50%
The Global Environment	<ul> <li>Environmental Pollution (Air, water and soil)</li> <li>Population growth vs. natural resources</li> <li>Climate change and global warming</li> <li>Sustainable development</li> </ul>	Oral presentation Web based assignment PBL assignment	30% 30% 40%

		1	
Equality and Diversity	<ul> <li>Concepts and terminology – e.g. diversity, equality, inclusion, power, oppression</li> <li>Parameters of diversity as listed in section 9 of the SA Constitution</li> <li>Prejudice, discrimination and inequality</li> <li>The diversity competence continuum</li> <li>Steps to develop competence/sensitivity in relation to diverse others</li> </ul>	Theory Reflective assignment Group presentation Diversity festival	33% 17% 17% 33%
The Entrepreneurial Edge	Becoming an entrepreneur     Addressing risk     Understanding my market     Planning     Financial objectives     Marketing     Ethics & Social responsibility	Theory Assignment	66% 34%
Issues of Gender & Society in Health Care	<ul> <li>Gender and related concepts: gender power relations, gender roles, manifestation of gender bias, gender as one of the many social determinants of health.</li> <li>The effects of gender discrimination on health matters of the individual.</li> <li>Effective communication with patients in a health care setting, demonstrating an awareness of the practitioner-patient power differential and gender and cultural differences.</li> <li>The impact of health care delivery systems in relation to gender.</li> <li>The workplace impact of gender-based societal and cultural roles and beliefs on health care practitioners.</li> </ul>	Project report & presentation Assignment I Assignment 2	60% 20% 20%
IsiZulu for Health Care Practitioners I	<ul> <li>Cultural &amp; historical background of the Zulus.</li> <li>Grammar</li> <li>Common Zulu terms</li> <li>Anatomical body parts.</li> <li>Greetings and conversations</li> <li>Deep understanding of different responses and cultural etiquette.</li> <li>Personal details (name, surname, address, location, occupation, age, marital status, dependants).</li> </ul>	Practical test Assignment Board game	40% 30% 20% 10%
Educational Techniques	<ul> <li>Introduction to education techniques</li> <li>Learning theories</li> <li>Facilitation &amp; communication skills</li> <li>Learning programme planning</li> <li>Learner motivation &amp; engagement</li> <li>Learning material</li> <li>Assessment &amp; moderation</li> <li>Management</li> <li>eLearning &amp; Blackboard</li> <li>Quality Assurance</li> </ul>	Presentations Portfolio	50% 50%

Community Health Care and Research I	<ul> <li>Brief overview of health systems in South Africa</li> <li>Brief overview of problem identification in communities</li> <li>Brief overview of project development, implementation and evaluation</li> <li>Communication</li> </ul>	Project Assignment Presentation	40% 30% 30%
Community Health Care and Research II	<ul> <li>Health systems in South Africa in comparison with other successful third world countries like Brazil</li> <li>Brief overview of problem identification in communities and identification of sector in which primary problem is embedded</li> <li>Brief overview of project development, implementation and evaluation</li> <li>Communication and consultation to academic community</li> <li>Communication to receivers of care</li> </ul>	Project proposal Implementation Presentation	40% 30% 30%
Community Health Care and Research III	<ul> <li>Transformation of Health systems in South Africa in comparison with other successful third world countries like Brazil</li> <li>Brief overview of project evaluation in communities and identification of and evaluation of performance of sector in which primary problem is embedded</li> <li>Continue project development, implementation and evaluation</li> <li>Communication and consultation to academic community</li> <li>Communication to receivers of care</li> <li>Communication to high level stakeholders</li> </ul>	Project proposal Implementation Presentation	40% 30% 30%

# Discipline/category specific modules per level of study.

BHSc in Diagnost	ic Radiography Levels 1 to 4		
Diagnostic Imaging	Basic principles of medical imaging.		
Sciences I	<ul> <li>X-ray tubes and x-ray production</li> </ul>		
	<ul> <li>Image formation – Scatter and latent image</li> </ul>		
	Image recording	Theory Assessment	60%
	<ul> <li>Introduction to Digital Radiography.</li> </ul>	Practical Assessment	00/0
	<ul> <li>Image processing</li> </ul>	/Assignment/	
	<ul> <li>Image processing</li> <li>Image display</li> </ul>	Presentation	40%
	Radiographic exposure		
	Radiation Protection		
	<ul> <li>Basic principles of other imaging modalities</li> </ul>		
Diagnostic Practice			
and Procedures la	<ul> <li>Fundamentals of diagnostic practice – selection of equipment</li> </ul>		
and Frocedures la	& accessories, basic radiographic procedure, exposure factors, cassettes, darkroom procedure.		
	<ul> <li>Radiographic terminology &amp; general patient positioning</li> </ul>	Theory Assessment	50%
	principles.	Practical/Assignment/	
	Basic radiographic techniques & procedures of the upper &	Image Evaluation	50%
	lower limb, thorax, lungs & heart, abdomen.		
	Normal radiographic anatomy and image evaluation &		
	interpretation of the upper & lower limb, thorax, lungs &		
D: D	heart, abdomen.		
Diagnostic Practice	Fundamentals of diagnostic practice – selection of digital		
and Procedures Ib	equipment & accessories, basic radiographic procedure,	The emil A second and	50%
	exposure factors, image receptors, image manipulation.	Theory Assessment	50%
	Basic radiographic techniques & procedures of the shoulder		50%
	& pelvic girdles, skull, spine, sacrum & coccyx.	Image Evaluation	
	Normal radiographic anatomy and image evaluation &		
	interpretation of the shoulder & pelvic girdles, skull, spine,		
	sacrum & coccyx.		
Clinical Diagnostic	Diagnostic Procedures & Techniques for:		
Practice and Procedures I	<ul> <li>Basic, additional &amp; modified projections of the axial and</li> </ul>		
and Procedures I	appendicular skeleton,	Clinical Assessments:	
	<ul> <li>Skull, abdomen and respiratory system.</li> </ul>	Lland Mashing Tashnique	
	Areas to be covered:	Hand Washing Technique Wheelchair Transfer	
		Technique	
	Upper and lower Limbs	Ward Rotation	100%
	Abdomen	Weekly Assessments	100%
	Bony Thorax - Sternum and SC Joints	Reflective Report	
	Bony Thorax –Ribs	Clinical Tutor Assessment	
	Shoulder and Clavicle	logbook	
	Pelvis and Hips	logbook	
	Cervical Spine – Trauma		
	Cervical Spine		
	Thoracic Spine		
	Lumbar and Sacral Spine		
	Skull – Basic Projections		
	Radiographic pathology of the skeletal and respiratory systems		
	and the acute abdomen.		
	Abnormal radiographic anatomy and image evaluation &		
			1
	interpretation of the musculoskeletal system, chest and abdomen.		

Diagnostic Imaging	Basic components of medical imaging systems		r
Diagnostic Imaging Sciences II	Basic components of medical imaging systems: Generation and supply of electricity.		
Sciences in	<ul> <li>Sensitometry</li> </ul>		
	Radiation exposure factors		
	The radiographic image		
	0 1 0		
	Fluoroscopy and its equipment		
	Digital systems		
	Care and maintenance	<b>T</b> I <b>A</b>	E 00/
	Radiation physics:	Theory Assessment	50%
	Atomic structure and laws of modern physics-	Practical Assessment	20%
	Nature of electromagnetic radiation	Project/Presentation	30%
	X-ray beam quality and quantity		
	Attenuation of electromagnetic radiation		
	Interaction of X-rays with matter.		
	Filtration of electromagnetic radiation		
	<ul> <li>Dosimetry for x - and gamma rays</li> </ul>		
	Radiation protection		
	<ul> <li>Radiobiology - Biological effects</li> </ul>		
	Cellular response to radiation		
Diagnostic Practice	Diagnostic Procedures & Techniques for:		
and Procedures IIa	Additional & modified projections of the skull and respiratory		
	system.		
	Critical Care Radiography – trauma & emergency, ward and		
	theatre		109/
	• Paediatric Radiography – basic general techniques and related	Theory Assessment	60%
	radiographic pathology	Practical/assignment/	40%
	Radiographic pathology of the skeletal and respiratory systems and	Image Evaluation	40%
	the acute abdomen.		
	Abnormal radiographic anatomy and image evaluation &		
	interpretation of the musculoskeletal system, chest and abdomen.		
	Appropriate usage of relevant radiographic equipment.		
	Application of patient care, professional practice and ethics.		
Diagnostic Practice	Diagnostic Procedures & Techniques for Contrast Media Studies –		
and Procedures IIb	arthrography, dacrocystography, sialography, GIT, GUT,		
	Reproductive systems, including radiographic pathology of these		
	systems.	Theory Assessment	40%
	Radiographic pathology of the gastrointestinal, accessory organs,	Practical/Image	40%
	genitourinary and reproductive systems.	Evaluation/Project	30%
	Abnormal radiographic anatomy and image evaluation &		30%
	interpretation of the gastrointestinal, accessory organs,		30%
	genitourinary and reproductive systems.		
	Appropriate usage of radiographic equipment.		
	Application of patient care, professional practice and ethics.		
Clinical Diagnostic	Diagnostic Procedures & Techniques for:		
Practice	Basic, additional & modified projections of the skull, facial		
and Procedures II	bones, sinuses	Clinical Assessments	
	• Critical Care Radiography - trauma & emergency, ward and	General Radiography	1000
	theatre	Mobile Radiography	100%
	• Paediatric Radiography – basic general techniques and related		
	radiographic pathology	Logbook	
	<ul> <li>Contrast media- types, indications, contraindications</li> </ul>		
	<ul> <li>Fluoroscopic studies – techniques, patient care, contrast media</li> </ul>	L	
	Radiographic pathology of the skeletal and respiratory systems and		
	the acute abdomen.		
	Abnormal radiographic anatomy and image evaluation &		
1	interpretation of the musculoskeletal system, chest and abdomen.		
	Appropriate usage of relevant radiographic equipment. Application of patient care, professional practice and ethics.		

Diagnostic Imaging Sciences III	Computed Tomography (CT): Historical development: CT generations; Instrumentation; CT data acquisition, reconstruction and image manipulation; Radiation protection practices and quality control measures. Advanced digital Imaging and exposure: CR and DR; The imaging plate and detectors; Post processing techniques; Radiation exposure and Image quality; PACS and Teleradiology Fluoroscopy/Fluorography: Electromechanical injectors; Operation principles; Design and construction; Radiation dose; Quality Assurance: Radiation control laws, regulations and protocols in South Africa, Room Design, Equipment repair contracts, QA and QC for analogue radiography, QA and QC for DR and CR, Reject analysis. Bone densitometry: Basic concepts and operation principles, Historical development, Module density and radiation absorption, Methods of x-ray production and x-ray detection, Fan and pencil beam, Precision and accuracy.: Magnetic Resonance Imaging (MRI): History of MRI, magnetism, properties of magnetism, MR system components, MR signal production; tissue characteristics; pulse sequencing, imaging parameters and image formation, MRI safety.	Theory Assessment Practical/Assignment/ Projects Portfolio	40% 30% 30%
Diagnostic Practice and Procedures IIIa	<ul> <li>Specialised Radiographic techniques &amp; procedures and related radiographic pathology for:</li> <li>Paediatric Radiography</li> <li>Basic mammography</li> <li>Bone Densitometry – using DEXA, QCT, QUS</li> <li>Digital Angiography</li> <li>Normal radiographic anatomy of the relevant applications Abnormal patterns of diseases related to paediatric, mammographic, and angiographic imaging.</li> <li>Appropriate usage and maintenance of radiographic equipment.</li> <li>Application of patient care, professional practice and ethics.</li> </ul>	Theory Assessment Portfolio/Case Study/ Anatomy Viewing Practical	40% 60%
Diagnostic Practice and Procedures IIIb	Specialised Radiographic techniques & procedures for: Systemic CT Imaging – advanced applications of the CNS, respiratory, GIT, GUT, reproductive and endocrine systems Basic MRI applications in the CNS and Musculoskeletal systems, abdomen and pelvis, thorax. Related radiographic pathology of the nervous, cardiovascular, haemopoeitic and endocrine systems. Abnormal cross-sectional anatomy & imaging evaluation & interpretation on CT & MR images. Appropriate usage and maintenance of radiographic equipment. Application of patient care, professional practice and ethics.	Theory Assessment Portfolio/Case Study/ Anatomy Viewing Practical	40% 60%
Clinical Diagnostic Practice and Procedures III	<ul> <li>Specialised Radiographic techniques &amp; procedures and related radiographic pathology for:</li> <li>Paediatric Radiography</li> <li>Computed Tomography</li> <li>General radiography, poly trauma, ICU mobiles</li> <li>Normal radiographic anatomy of the relevant applications Abnormal patterns of diseases related to paediatric, mammographic, and angiographic imaging Appropriate usage and maintenance of radiographic equipment. Application of patient care, professional practice and ethics.</li> </ul>	Clinical Assessments: CT Brain General/ Mobile Radiography Reflective Portfolio Logbook	100%

Diagnostic Imaging	Advanced CT Technology:		
Sciences IV	<ul> <li>Advanced data acquisition principles: Volumetric imaging;</li> </ul>		
belefices i v	pitch		
	<ul> <li>Advanced image reconstruction &amp; algorithms:</li> </ul>		
	Multidetector row spiral; longitudinal interpolation with Z-		
	axis filtering; interlaced sampling; 3D reconstruction		
	(including software)		
	Archiving & PACS		
	<ul> <li>Image quality in CT: determiners; influencing factors;</li> </ul>		
	measurements by physicists; quality control programmes –		
	principles & common QC tests.		
	<ul> <li>Advanced Radiation Protection Practices: measuring</li> </ul>	Theory Assessment	40%
	patient radiation dose; reducing dose; paediatric doses.	Practical Assessment/	
	<ul> <li>Hybrid systems &amp; fusion Imaging principles</li> </ul>	Project/Assignment/	60%
	Mammography equipment:	Portfolio	
	Design and construction, Focal spot, Heel effect, Compression		
	devices, Filtration devices, the magnification setup, use of grids		
	and automatic exposure controls, applications, radiation		
	protection		
	Advanced Magnetic Resonance Imaging (MRI):		
	MR pulse sequences, image formation and image contrast, MR		
	parameters, imaging options, and QA in MRI, Advanced MRI safety		
	QA and QC in Advanced Imaging Systems:		
	<ul> <li>Principles of QA and QC tests for Fluoroscopy units, CT</li> </ul>		
	systems, Cardiac Cath Labs, MRI		
	<ul> <li>Tendering and commissioning of imaging equipment</li> </ul>		
Diagnostic Practice	Specialised advanced imaging procedures & techniques:		
and Procedures IVa			
	Interventional radiography – vascular & non-vascular	Theory Assessment	50%
	applications	Image Evaluation and	00/0
	Advanced CT imaging – advanced applications in systemic	Interpretation/	50%
	imaging, advanced image processing, contrast media usage	Assignment/Portfolio/Case	30/0
	& optimisation, image quality versus radiation dose, dose	Study	
	optimisation techniques, advanced/abnormal cross		
	sectional anatomy and image evaluation & interpretation.		
	Introduction to fusion imaging and radiotherapy planning. Advanced Quality Assurance Procedures for CT.		
Diagnostic Practice	Specialised advanced imaging procedures & techniques:		
and Procedures IVb	specialised advanced imaging procedures & techniques.	Theory Assessment	50%
and mocedures in D	<ul> <li>Advanced MRI applications – thoracic and abdomino-pelvic</li> </ul>	Image Evaluation and	
	imaging, contrast media usage & applications, MRA,	Interpretation/	
	spectroscopy, DWI, and Paediatric applications	Assignment/Portfolio/Case	50%
	Advanced Quality Assurance Procedures for MRI	Study	
	Future Trends in Radiography		
Clinical Diagnostic	Specialised advanced imaging procedures & techniques: [including		
Practice	learning areas in DPPC201 & DPPC301]		
and Procedures IV	<ul> <li>Interventional radiography – vascular &amp; non-vascular</li> </ul>		
	applications	Clinical Assessments	100%
	Advanced CT imaging – advanced applications in systemic		
	imaging, advanced image processing, contrast media usage &		
	optimisation, image quality versus radiation dose, dose		
	optimisation techniques, advanced/abnormal cross sectional		
	anatomy and image evaluation & interpretation.		
	Introduction to fusion imaging and radiotherapy planning.		
	Advanced Quality Assurance Procedures for CT.		
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BHSc in Diagnost	tic Sonography Level I to 4		
Ultrasound Imaging	Basic principles of medical ultrasound:		
Sciences I	<ul> <li>Sound wave, ultrasound wave generation and detection. Piezo- electric effect, Interaction of ultrasound with human body</li> <li>Ultrasound Equipment:         <ul> <li>Structure of a basic transducer, images display modes-A mode, M Mode and basic principles of real time B Mode.</li> </ul> </li> <li>Introduction to:         <ul> <li>Image artefacts</li> <li>Biohazards and safety in ultrasound imaging</li> </ul> </li> </ul>	Theory Assessment	60% 40%
Ultrasound Practice	Fundamentals of ultrasound practice:		
and Procedures Ia	<ul> <li>Introduction to gynaecology sonography</li> <li>Introduction to obstetrics sonography</li> <li>Points to be noted for the above procedures</li> <li>Anatomy, physiology and detailed pathology associated with the above procedures:</li> <li>Principles of imaging</li> <li>Definitions of terms</li> <li>Indications for the examination</li> <li>Information pertinent to performing the procedure</li> <li>Patient Preparation, drugs or diet, before, during and after the examination.</li> <li>Adhere to safe practices guided by ALARA</li> </ul>	Theory Assessment Project/Assignment/	60% 40%
Ultrasound Practice and Procedures Ib	<ul> <li>Fundamentals of ultrasound practice:</li> <li>Introduction to general abdominal sonography</li> <li>Principles of sonography report writing</li> <li>Points to be noted for the above procedures</li> <li>Anatomy, physiology and detailed pathology associated with the above procedures:</li> <li>Principles of imaging</li> <li>Definitions of terms</li> <li>Indications for the examination</li> <li>Information pertinent to performing the procedure</li> <li>Patient Preparation, drugs or diet, before, during and after the examination.</li> <li>Adhere to safe practices guided by ALARA</li> </ul>	Theory Assessment Project/Assignment/	60% 40%
Clinical Ultrasound Practice and Procedures I			

Ultrasound Imaging	Ultrasound equipment:		
Sciences II	structure of electronic ultrasound transducers,		
	<ul> <li>operation of real time B mode scanners, principles of digital</li> </ul>		
	scan converters and signal processing features and		
	<ul> <li>characteristics of focused and unfocused ultrasound beam.</li> </ul>		
	Principles of Doppler Ultrasound:		
	<ul> <li>the Doppler effect, Doppler frequency shift,</li> </ul>		
	<ul> <li>types of Doppler signal output and</li> <li>principles of continuous and pulsed wave Doppler</li> </ul>	Theory Assessment	50%
	<ul> <li>principles of continuous and pulsed wave Doppler ultrasound.</li> </ul>	Project/Assignment	50%
	Duplex scanners		
	Image Quality:		
	<ul> <li>Resolution- axial, lateral, geometric, temporal and contrast,</li> </ul>		
	Artefacts		
	Hazards and safety:		
	<ul> <li>potential hazards of ultrasound, heating, cavitation, standing</li> </ul>		
	<ul> <li>potential nazards of ultrasound, nearing, cavitation, standing waves, streaming and policies and protocols for safe</li> </ul>		
	practice		
Ultrasound Practice	Gynaecology scanning:		
and Procedures IIa	Scanning technique : Trans vaginal		
and Frocedures na	<ul> <li>Pathologies of the female reproductive organs.</li> </ul>		
	<ul> <li>Image interpretation of abnormal organs: uterus, ovaries</li> </ul>		
	and adnexae		
	Obstetric Sonography:		
	Appropriate scanning technique for different trimesters of		
	pregnancy		
	<ul> <li>Complications in the first trimester</li> </ul>		
	<ul> <li>Routine second trimester scanning</li> </ul>	Theory Assessment	40%
	<ul> <li>Foetal environment monitoring</li> </ul>	Project/Assignment/	1078
	5	Portfolio/Case Study	60%
	Third trimester foetal growth monitoring scanning Report writing skills		00/0
	Points to be noted for the above procedures		
	<ul> <li>Anatomy, physiology and detailed pathology associated with</li> </ul>		
	the above procedures.		
	<ul> <li>Principles of imaging.</li> </ul>		
	<ul> <li>Definitions of terms</li> </ul>		
	<ul> <li>Indications for the examination</li> <li>Information pertinent to performing the procedure</li> </ul>		
	information per anene to performing the procedure		
	Patient Preparation, before, during and after the exam.		
Ultrasound Practice	Adhere to safe practices guided by the ALARA principle		
and Procedures IIb	General abdomen sonography:		
and Procedures lib	<ul> <li>Appropriate scanning technique to evaluate abdominal</li> </ul>		
	organs		
	Clinical indications		
	<ul> <li>Image interpretations of abnormal findings in the : liver and</li> </ul>		
	biliary system, renal tract, pancreas, spleen and spleen.		
	Pancreas, urinary system and associated vascular structures	Theory Assessment	40%
	Sonography report writing skills	Theory Assessment Project/Assignment/	40%
	Points to be noted for the above procedures		60%
	<ul> <li>Anatomy, physiology and detailed pathology associated with the above press during</li> </ul>	TOI LIONO/Case Study	00%
	the above procedures.		
	Principles of imaging.		
	Definitions of terms		
	Indications for the examination		
	Information pertinent to performing the procedure		
	• Patient Preparation, drugs or diet, before, during and after		
	the examination.		
	<ul> <li>Adhere to safe practices guided by the ALARA principle</li> </ul>		

Clinical Ultrasound Practice			
and Procedures II			
Ultrasound Imaging	Ultrasound equipment::		
Sciences III	M Mode scanning		
Sciences in			
	<ul> <li>Elastography</li> </ul>		
	<ul> <li>Image recording devices</li> </ul>		
	PACS		
	Principles of Doppler Ultrasound:	Theory Assessment	50%
	<ul> <li>Doppler spectral analysis</li> </ul>	Project/Assignment	50%
	Colour and power Doppler		
	Image Quality: Resolution		
	Hazards and safety:		
	Intensity and power		
	<ul> <li>Biological effects and Clinical safety</li> </ul>		
	Quality Control: Performance testing tests		
Ultrasound Practice	Advanced procedures in Gynaecology scanning:		
and Procedures IIIa	Interventional procedures		
	<ul> <li>3D and 4D gynaecology scanning</li> </ul>		
	<ul> <li>Advanced image interpretation</li> </ul>		
	<ul> <li>Doppler studies in gynaecology</li> </ul>		
	Advanced procedures in obstetric sonography:		
	<ul> <li>Screening tests for chromosomal anomalies in the first</li> </ul>		
	trimester and second trimester		
	<ul> <li>High Risk Pregnancies:</li> </ul>		
	<ul> <li>Congenital anomalies</li> </ul>		
	<ul> <li>Foetal Growth disorders</li> </ul>		
	<ul> <li>Maternal diseases in pregnancies</li> </ul>		1001
	<ul> <li>Interventional studies</li> </ul>	Theory Assessment	40%
	<ul> <li>Doppler studies in obstetrics</li> </ul>	Project/Assignment/	
	General Abdomen sonography:	Portfolio/Case Study	60%
	Organ transplant		
	Male Reproductive organs		
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES		
	<ul> <li>Anatomy, physiology and detailed pathology associated with</li> </ul>		
	the above procedures.		
	Principles of imaging.		
	Definitions of terms		
	<ul> <li>Indications for the examination</li> </ul>		
	<ul> <li>Information pertinent to performing the procedure</li> </ul>		
	<ul> <li>Patient Preparation, before, during and after the</li> </ul>		
	examination.		
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Ultrasound Practice	Small parts sonography		
and Procedures IIIb	Appropriate scanning technique protocols and procedures		
	for small parts.		
	• Breast		
	• Neck		
	• Chest		
	• Eye		
	Vascular Sonography:		
	<ul> <li>Peripheral arterial upper and lower limbs</li> </ul>		
	<ul> <li>Carotid scanning</li> </ul>		
	<ul> <li>Peripheral venous upper and lower limb</li> </ul>	Theory Assessment	
	Trans cranial Doppler	Project/Assignment/	40%
	Abdominal vessels	Portfolio/Case Study	60%
	Paediatric Sonography:	,	
	Abdomen		
	<ul> <li>Cranial and small parts</li> </ul>		
	Introduction to Musculosketal Sonography and Echocardiography		
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES		
	<ul> <li>Anatomy, physiology and detailed pathology associated with</li> </ul>		
	the above procedures.		
	<ul> <li>Principles of imaging.</li> </ul>		
	<ul> <li>Definitions of terms</li> </ul>		
	<ul> <li>Indications for the examination</li> </ul>		
	Information pertinent to performing the procedure		
	<ul> <li>Patient Preparation, before, during and after the examination</li> </ul>		
Clinical Ultrasound			
Practice			
and Procedures III			
Ultrasound Imaging	Advanced and specialised ultrasound equipment::		
Sciences IV	Latest and future technological advances		
	<ul> <li>3 Dimension and 4 Dimension real time imaging</li> </ul>		
	<ul> <li>Elastography</li> </ul>	Theory Assessment	50%
	0 1 /	Project/Assignment/	
	Contrast agents	Portfolio/Case Study	50%
	Image recording devices and storage devices		
1	Advanced Principles of Doppler Ultrasound:		

	Hazards and safety:		
	Policies and protocols for safe practice		
	Quality assurance and control:		
	<ul> <li>Purpose</li> </ul>		
	<ul> <li>Performance testing tests</li> </ul>		
	<ul> <li>Phantoms, test selection</li> </ul>		
Ultrasound Practice	Musculoskeletal Sonography		
and Procedures IVa	<ul> <li>Appropriate scanning technique for each joint and muscles</li> </ul>		
	<ul> <li>Upper limb and lower limb</li> </ul>		
		Theory Assessment	60%
	Image interpretation of normal and abnormal findings	Project/Assignment/	40%
	<ul> <li>Detailed and concise report writing of sonographic findings</li> </ul>	Portfolio/Case Study	
	Nerve Block		
	Fusion imaging		
	Latest developments and future trends in sonography		
	•		
Ultrasound Practice	Echocardiography		
and Procedures IVb	<ul> <li>Scanning technique trans thoracic. TEE B Mode, M Mode</li> </ul>		
	<ul> <li>Image interpretation normal and abnormal</li> </ul>		
	5 1		
	<ul> <li>Detailed and concise report writing of sonographic findings</li> </ul>		
	Latest developments and future trends in echocardiography		
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES	Theory Assessment	60%
		Project/Assignment/	40%
	<ul> <li>Anatomy, physiology and detailed pathology associated with</li> </ul>	Portfolio/Case Study	
	the above procedures.		
	<ul> <li>Principles of imaging.</li> </ul>		
	<ul> <li>Definitions of terms</li> </ul>		
	<ul> <li>Indications for the examination</li> </ul>		
	<ul> <li>Information pertinent to performing the procedure</li> </ul>		
	• Patient Preparation, before, during and after the		
	examination.		
Clinical Ultrasound			
Practice			
and Procedures IV			
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BHSc in Nuclear	Medicine Levels I to 4		
Nuclear Medicine Imaging Sciences I	Nuclear Medicine Sciences         Radioactivity         Radionuclides         "hot-lab" rules and regulations; construction and design         Quality control tests         Mechanisms of localization of radionuclides/radiopharmaceuticals         Regulations and legal aspects of radiopharmaceuticals         Nuclear Medicine Equipment         Fundamentals of Nuclear Medicine Equipment; basic design and principle of operation of gamma camera, Na-l crystals, photomultipliers tubes, collimators.	Theory Assessment Project/Assignment/ Portfolio/Case Study	50% 50%

Nusleau Madiai	De die weeligten and De die gebeuwen en stierte	1
Nuclear Medicine Practice and	Radionuclides and Radiopharmaceuticals	
Practice and Procedures la	Musculoskeletal System	
riocedures la	<ul> <li>Technetium-99m labelled radio-pharmaceuticals for bone and joint imaging</li> </ul>	
	and joint imaging Endocrine System:	
	Thyroid imaging agents	
	Detailed information for all of the above in terms of the	
	Physical chamical his distribution and other supportion of the	F 00/
	Theory Assessment	50%
	body. Project/Assignment/	50%
	dispensing and administration of the various radionuclides	50%
	different radionuclides used for the same body systems	
	radiation dosimetry to the relevant organs when administering	
	radiopharmaceuticals	
	premedication needed for the different studies	
	contraindications for certain studies	
	types of medication and / or food substances that would interfere	
	with the procedure.	
	differences between radiopharmaceuticals/radionuclides that are	
	used for therapeutic purpose those that are used for diagnostic	
	purposes	
	dispensing of all radiopharmaceuticals for the various nuclear	
	medicine procedures the preparation of standard solutions for procedures where	
	necessary	
	the accurate handling and dispensing of	
	radionuclides/radiopharmaceuticals	
	the use of ALARA principles	
	Nuclear Medicine Procedures: (this will include a theory and	
	practical component)	
	bone imaging	
	<ul> <li>thyroid imaging</li> </ul>	
	points to be noted for the above procedures	
	<ul> <li>anatomy, physiology and detailed pathology associated with the above procedures.</li> </ul>	
	Principles of imaging.	
	Definitions of terms	
	Indications for the examination	
	<ul> <li>Information pertinent to performing the procedure</li> </ul>	
	<ul> <li>Patient Preparation, drugs or diet, before, during and after the</li> </ul>	
	examination.	
	<ul> <li>Radiopharmaceuticals used, precautionary measures, routes</li> </ul>	
	of administration, adult and paediatric doses, radiation effects:	
	T I/2 physical, biological, effective, target organ, whole body	
	dose received	
	<ul> <li>Instrumentation used, quality control, instrument calibration,</li> </ul>	
	choice of instruments for specific studies	
	<ul> <li>Image acquisition and data processing, patient positioning</li> </ul>	
	orientation, variation of views to show special areas of	
	interest, artefacts	
	Interventions (where applicable)	
	Image interpretation and reporting	
	<ul> <li>Recognition of normal and abnormal patterns of</li> </ul>	
	radionuclide/radiopharmaceutical activity.	
	Sources of error	
1	Quality Control	1

Nuclear Medicine	Radionuclides and Radiopharmaceuticals		
Practice and	Lung perfusion agents		
Procedures Ib	<ul> <li>Radioactive gases for lung ventilation agents</li> </ul>		
	<ul> <li>Radio aerosol inhalation pulmonary agents</li> </ul>		
	Detailed information for all of the above in terms of the		
	Physical, chemical, bio distribution, and other properties of the		
	radionuclides and radiopharmaceuticals of different systems of the		
	body.		
	dispensing and administration of the various radionuclides		
	different radionuclides used for the same body systems	Theory Assessment	50%
	radiation dosimetry to the relevant organs when administering	Project/Assignment/	30%
	radiopharmaceuticals	Portfolio/Case Study	50%
	premedication needed for the different studies	i oi ciolio/ Case study	5078
	contraindications for certain studies		
	types of medication and / or food substances that would interfere		
	with the procedure.		
	differences between radiopharmaceuticals/radionuclides that are		
	used for therapeutic purpose those that are used for diagnostic		
	purposes		
	dispensing of all radiopharmaceuticals for the various nuclear		
	medicine procedures		
	the preparation of standard solutions for procedures where		
	necessary		
	the accurate handling and dispensing of		
	radionuclides/radiopharmaceuticals		
	the use of ALARA principles		
	Nuclear Medicine Procedures: (this will include a theory and		
	practical component)		
	Respiratory System:		
	<ul> <li>pulmonary ventilation</li> </ul>		
	<ul> <li>pulmonary perfusion</li> </ul>		
	points to be noted for the above procedures		
	<ul> <li>anatomy, physiology and detailed pathology associated with</li> </ul>		
	the above procedures.		
	Principles of imaging.		
	Definitions of terms		
	<ul> <li>Indications for the examination</li> </ul>		
	<ul> <li>Information pertinent to performing the procedure</li> </ul>		
	<ul> <li>Patient Preparation, drugs or diet, before, during and after the</li> </ul>		
	<ul> <li>Fatient Preparation, drugs or diet, before, during and after the examination.</li> </ul>		
	<ul> <li>Radiopharmaceuticals used, precautionary measures, routes</li> </ul>		
	<ul> <li>Radiopharmaceuticals used, precautionary measures, routes of administration, adult and paediatric doses, radiation effects:</li> </ul>		
	T 1/2 physical, biological, effective, target organ, whole body		
	dose received		
	<ul> <li>Instrumentation used, quality control, instrument calibration, choice of instruments for specific studies.</li> </ul>		
	choice of instruments for specific studies		
	<ul> <li>Image acquisition and data processing, patient positioning aniastation, variation of views to show appendix and</li> </ul>		
	orientation, variation of views to show special areas of		
	interest, artefacts		
	<ul> <li>Interventions (where applicable)</li> </ul>		
	Image interpretation and reporting		
	<ul> <li>Recognition of normal and abnormal patterns of</li> </ul>		
	radionuclide/radiopharmaceutical activity.		
	Sources of error		
1	Quality Control	1	1

Clinical Nuclear	Radiopharmacy and radiopharmaceuticals:	
Medicine	<ul> <li>Introduction to radiopharmacy — basic principles, definitions</li> </ul>	
Practice and	and basic quality control within a nuclear medicine	
Procedures I	laboratory,	
	<ul> <li>Basic nuclear medicine instrumentation, quality control and</li> </ul>	
	use of; dose calibrators, survey meters and gamma cameras.	
	<ul> <li>Practical knowledge of the radiochemistry of radionuclides</li> </ul>	
	and radiopharmaceuticals used in specific musculoskeletal,	
	endocrine and pulmonary imaging procedures.	
	<ul> <li>Radiopharmaceutical compound selection, handling,</li> </ul>	
	preparation, dispensing and administration.	
	<ul> <li>Basics of Radiation protection- safe handling of radionuclides,</li> </ul>	
	safety procedures and radiation hazards, radiation dosimetry	
	to the relevant organs, modification of radiation doses	
	appropriate to adult and/or pediatric patients and application	
	of the ALARA principles.	
	<ul> <li>Safe clinical practices – radiation safety and hygiene,</li> </ul>	
	pharmaceutical technology and aseptic techniques, application of current Good Radiopharmacy Practice	
	(cGRPP), quality assurance, record keeping and waste	
	management.	
	management.	
	Nuclear Medicine Imaging Procedures:	
	Principles of bone, thyroid and lung imaging procedures     Clinical Assessments	00%
	<ul> <li>Clinical application of medical and radiographic terminology</li> </ul>	
	<ul> <li>Clinical pertinent information such as; knowledge of specific</li> </ul>	
	indications for each examination, patient preparation,	
	anatomical, physiological and pathological appearances	
	related to musculoskeletal, endocrine and pulmonary	
	scintigraphy.	
	<ul> <li>Instrumentation- Selection of appropriate equipment, quality</li> </ul>	
	control and calibration of equipment.	
	<ul> <li>Image acquisition - selection and modification of appropriate</li> </ul>	
	image acquisition parameters, gamma camera and patient	
	positioning principles.	
	<ul> <li>Patient care- application of the Batho Pele Principles, patient</li> </ul>	
	radiation protection and ALARA principles.	
	<ul> <li>Data processing, Image interpretation and reporting-</li> </ul>	
	selection, application and manipulation of appropriate image	
	processing tools and activities for bone, thyroid and lung	
	scintigraphy, recognition of normal and abnormal patterns of	
	radionuclide/radiopharmaceutical activity and identification of	
	possible sources of error.	
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Nuclear Medicine	Interaction of radiation with matter; Photoelectric absorption,		
Imaging Sciences II	Compton interaction, Pair production, Relative importance of		
	interaction process, Different energies used in Nuclear. Medicine.		
	Imaging. <u>Measurement of Radiation</u>		
	<u>Radiation Detectors</u> : Ion collection detectors, Use & calibration,		
	Scintillation detectors, Associated electronic devices, Ionisation,		
	chamber, Geiger Muller counter, Survey meters		
	<u>Computers</u>		
	Gamma camera,		
	Na I (TI) crystal, Photomultiplier tube		
	Collimators, Parallel hole, Diverging, Converging, Pinhole, Others,	Theory Assessment	50%
	Sensitivity, Resolution, Uniformity, Resolving time, Uniformity	Project/Assignment/	30/0
	correction, Count density, Field uniformity & sensitivity, Photopeak	Portfolio/Case Study	50%
	calibration	,	
	operational characteristics, Image Recording accessories , Image		
	formation,		
	<u>CT scanners</u> - basic principle of operation.' basic Quality control		
	<u>PET -</u> Principle of operation		
	<u>Radiopharmacy:</u> "B" and "C" type laboratory; rules and		
	regulations; principles and techniques for the separation of		
	biological compounds, quality control procedures associated with		
	the eluate, generator elution, radiochemistry, radiopharmacology associated with specific organ systems		
Nuclear Medicine	Radionuclide and Radiopharmaceuticals	Theory Assessment	40%
Practice and	<ul> <li>Laboratory and general procedures.</li> </ul>	Project/ Assignment	
Procedures IIa	<ul> <li>Radioactive waste disposal</li> </ul>	Portfolio/Case Study/	30%
	<ul> <li>Endocrine System: adrenal and parathyroid imaging agents</li> </ul>		
	<ul> <li>Gastrointestinal system agents</li> </ul>		
	Nuclear Medicine Procedures		
	Endocrine system		
	Gastrointestinal imaging		
	Note: Detailed information and Points to be noted as in NM		
	Practice & Procedures Ia		
Nusless Madisias	De dia analisha ana di De dias ha musa annoi an la		
Nuclear Medicine	Radionuclide and Radiopharmaceuticals		
Practice and Procedures IIb	Cardiovascular system agents	Theory Assessment	40%
riocedures iib	Renal agents	Project/ Assignment	TU /o
	Nuclear Medicine Procedures	Portfolio/Case Study/	30%
	Cardiac imaging	i oi tiolio/ Case Study/	50/8
	<ul> <li>Renal imaging</li> <li>Note: Detailed information and Points to be noted as in NM</li> </ul>		
	Practice & Procedures Ia		
Clinical Nuclear			
Medicine	Radiopharmacy		
Practice and	<ul> <li>Laboratory- types, designs, operation, maintenance, assembly and cleaning of laboratory aquipment &amp; glassy are</li> </ul>		
Procedures II	and cleaning of laboratory equipment & glassware contamination		
i i occidar es ir	<ul> <li>Practical knowledge of the radiochemistry of radionuclides</li> </ul>		
	and radiopharmaceuticals used in specific endocrine,		
	gastrointestinal cardiovascular and genitourinary imaging		
	procedures.		
	<ul> <li>Radiopharmaceutical compound selection, handling,</li> </ul>		
	preparation, dispensing, quality control and administration.	WIL Clinical	100%
	<ul> <li>Radiation protection- safe handling of radionuclides, safety</li> </ul>	Assessments	
	procedures and radiation hazards, decontamination		
	equipment, protocols and procedures, radiation dosimetry		
	to the relevant organs, modification of radiation doses		
	appropriate to adult and/or pediatric patients and application		
	of the ALARA principles.		
	<ul> <li>Safe clinical practices – radiation safety and hygiene,</li> </ul>		
	pharmaceutical technology and aseptic techniques, application		
	of current Good Radiopharmacy Practice (cGRPP), quality		
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	assurance, record keeping and waste management.		

	Nuclear Medicine Imaging Procedures:		
	<ul> <li>Principles of adrenal, parathyroid, myocardial perfusion,</li> </ul>		
	gastrointestinal, and renal imaging.		
	Clinical application of medical and radiographic terminology		
	Clinical pertinent information such as; knowledge of specific		
	indications for each examination, patient preparation,		
	anatomical, physiological and pathological appearances		
	related to adrenal, parathyroid, myocardial perfusion,		
	gastrointestinal, and renal imaging.		
	Instrumentation- Selection of appropriate equipment, quality		
	control and calibration of equipment.		
	<ul> <li>Image acquisition - selection and modification of appropriate</li> </ul>		
	image acquisition parameters, gamma camera and patient		
	positioning principles.		
	• Patient care- application of the Batho Pele principles, patient		
	radiation protection and ALARA principles.		
	<ul> <li>Advanced data processing, Image interpretation and</li> </ul>		
	reporting- selection, application and manipulation of		
	appropriate image processing tools and activities in adrenal,		
	parathyroid, myocardial perfusion, gastrointestinal, and		
	renal imaging, recognition of normal and abnormal patterns		
	of radionuclide/radiopharmaceutical activity and identification		
	of possible sources of error.		
NI I M P.			
Nuclear Medicine	Gamma camera,		
Imaging Sciences III	Na I (TI) crystal, Photomultiplier tube		
	Collimators, Parallel hole, Diverging, Converging, Pinhole, Others,		
	Sensitivity, Resolution, Uniformity, Resolving time, Uniformity		
	correction, Count density, Field uniformity & sensitivity, Photo peak		
	calibration		
	operational characteristics, Image Recording accessories , Image formation,		
	<u>CT scanners</u> - principle of operation.' Quality control	Theory Assessment	50%
	PET and PET/CT- Principle of operation. Quality control	Project/Assignment/	
	In-vitro counting	Portfolio/Case Study	50%
	Other Imaging Modalities	,	
	Radiopharmacy Sciences: "B" and "C" type laboratory ; advanced		
	rules and regulations; principles and techniques for the separation		
	of biological compounds, advanced quality control procedures		
	associated with the eluate, generator elution, radiochemistry,		
	radiopharmacology associated with specific organ systems; namely		
	brain and cardiac.		
Nuclear Medicine	Radionuclide and Radiopharmaceuticals		
Practice and	<ul> <li>Cardiac imaging agents- myocardial perfusion imaging</li> </ul>		
Procedures IIIa	<ul> <li>Nervous system - brain imaging agents</li> </ul>		
	Breast imaging agents		
	Sentinel node imaging agents		
	Nuclear Medicine Procedures: (this will include a theory and	Theory Assessment	50%
	practical component)	Project/ Assignment	
	<ul> <li>Cardiac imaging - myocardial perfusion imaging</li> </ul>	Portfolio/Case Study/	50%
	<ul> <li>Genitourinary - renal imaging</li> </ul>	, ,	
	<ul> <li>Nervous system - brain imaging</li> </ul>		
	Breast imaging		
	<ul> <li>Sentinel node imaging</li> </ul>		
	Other newer imaging applicable to the third level of study		
	Note: Detailed information and Points to be noted as in NM		
	Practice & Procedures Ia		
	·		

Nuclear Medicine	Padionuclida and Padiopharmacouticals		
Practice and	Radionuclide and Radiopharmaceuticals		
Procedures IIIb	<ul> <li>Tumour and Infection imaging agents</li> <li>Other newer radiopharmaceuticals</li> </ul>		
Frocedures mb		Theory Assessment	50%
	Nuclear Medicine Procedures: (this will include a theory and practical component)	Project/ Assignment	30%
	,	Portfolio/Case Study/	50%
	Tumour and Infection imaging	i oi tiolio/Case Study/	50%
	Imaging with labelled blood products		
	• Other newer imaging applicable to the third level of study		
	Note: Detailed information and Points to be noted as in NM Practice & Procedures Ia		
Clinical Nuclear	Radiopharmacy:		
Medicine	<ul> <li>Practical knowledge of the radiochemistry of radionuclides</li> </ul>		
Practice and	<ul> <li>Practical knowledge of the radiochemistry of radionucides and radiopharmaceuticals used in nuclear medicine for</li> </ul>		
Procedures III			
Procedures III	tumor, infection, cardiovascular, nervous system, breast and		
	lymphatic imaging procedures.		
	Radiopharmaceutical compound selection, handling,		
	preparation, dispensing, quality control and administration.		
	Radiation protection- safe handling of radionuclides, safety		
	procedures and radiation hazards, decontamination		
	equipment, protocols and procedures, radiation dosimetry		
	to the relevant organs, modification of radiation doses		
	appropriate to adult and/or pediatric patients and application		
	of the ALARA principles.		
	<ul> <li>Safe clinical practices – radiation safety and hygiene,</li> </ul>		
	pharmaceutical technology and aseptic techniques,		
	application of current Good Radiopharmacy Practice		
	(cGRPP), quality assurance, record keeping and waste		
	management.		
	Nuclear Medicine Imaging Procedures:		
	<ul> <li>Principles of tumor, infection, cardiovascular, nervous</li> </ul>		
	system, breast and lymphatic imaging procedures.		
	Clinical application of medical and radiographic terminology	WIL Clinical	100%
	<ul> <li>Clinical pertinent information such as; knowledge of specific</li> </ul>	Assessments	100/6
	indications for each examination, patient preparation,	, (SSCSSITICITES	
	anatomical, physiological and pathological appearances		
	related to tumor, infection, cardiovascular, nervous system,		
	breast and lymphatic imaging procedures.		
	<ul> <li>Instrumentation- Selection of appropriate equipment, quality</li> </ul>		
	control and calibration of equipment.		
	Image acquisition - selection and modification of appropriate		
	image acquisition parameters, gamma camera and patient		
	positioning principles.		
	Patient care- application of the batho pele principles, patient		
	radiation protection and ALARA principles.		
	<ul> <li>Advanced data processing, Image interpretation and</li> </ul>		
	reporting- selection, application and manipulation of		
	appropriate image processing tools and activities in tumor,		
	infection, myocardial perfusion, renal, nervous system, breast		
	and lymphatic nuclear medicine studies, recognition of		
	normal and abnormal patterns of		
	radionuclide/radiopharmaceutical activity and identification of		
	possible sources of error.		
	<ul> <li>Knowledge of appropriate interventions applicable to specific</li> </ul>		
	studies.		
Nuclear Medicine	Equipment and Instrumentation	Theory Assessment	40%
Imaging Sciences IV	Scintillation detector systems	Practical/Image	
	Principles of scintillation detection Properties of detector materials	Evaluation and	

r			
	Survey meter: Operating principles, Quality control consistent	Project/Assignment/	60%
	with NRC regulations Source selection	Portfolio/Case Study	60%
	Interpretation of QC results		
	Dose calibrator;		
	Operating principles, Types of quality checks, Frequency of quality		
	checks, Source selection		
	PET detector materials: . Sodium iodide (Nal), Bismuth germinate		
	(BGO), Lutetium oxyorthosilicate (LSO), Gadolinium		
	oxyorthosilicate (GSO)		
	<u>Terminology</u> ; Aperture size, Field of view, Overlap, Bed positions,		
	Full ring tomograph, Partial ring tomograph, Panel detector		
	Gamma PET camera		
	Quality control; Normalization, Blank scan, Gains (singles)		
	Cross-calibration, System performance, Scatter fraction		
	Noise equivalent count rate,		
	Theory of operation; Principles of coincidence detection		
	True coincidence; Lines of response (LOR); Randoms		
	Scatter; Delayed event; Coincidence window and timing		
	Image formation and reconstruction; Sinograms, 2-D, 3-D, Fourier		
	rebinding Single slice rebinding, Filtered back projection (FBP),		
	Iterative reconstruction, Ordered subset expectation		
	maximization (OSEM), Maximum likelihood expectation		
	maximization (MLEM), Image filters, Matrix selection,		
	Data processing and corrections; Normalization corrections,		
	Decay corrections, Dead time corrections, Arc corrections,		
	Randoms corrections, Scatter corrections, Attenuation		
	corrections		
	Radiation Protection Personal protection and monitoring		
	Area / facilities monitoring		
	<ul> <li>Packaging and storage of radioactive materials</li> </ul>		
	<ul> <li>Radioactive decontamination</li> </ul>		
	Disposal of radioactive waste		
	<ul> <li>Medical events-definition and reporting, Radiation safety</li> </ul>		
	with positron decay, Hot cells, Facility monitoring		
	considerations, Personnel		
	Exposure from patients		
	Radiopharmacy: PET Radionuclides and Radiopharmaceuticals,		
	Physical properties of radioactive materials, Types of emissions		
	(decays), Energies, Decay rate and half-life (physical half-life),		
	Radiopharmaceutical quality control, Clearance from the body		
	(biological half-life), Kinetics of distribution in the body, dosage		
	determination, Dosage preparation and administration, assay in		
	dose calibrator, proper radiopharmaceutical labeling,		
	administration records, PET radiopharmaceutical principles		
	(Positron decay, coincidence events.		
Nuclear Medicine	Radionuclides and Radiopharmaceuticals:		
Practice and	Physical properties of radioactive materials -PET/CT		
Procedures IVa	• Types of emissions (decays, . Energies, Decay rate and half-		
	life (physical half-life),		
	<ul> <li>Radiopharmaceutical quality control,</li> </ul>		
	Clearance from the body (biological half-life), kinetics of		
	distribution in the body,		
	Dosage determination,	Theory Assessment	50%
	Calculation of radiopharmaceutical/pharmaceutical doses,	Project/ Assignment	
	calculation of pediatric dose, volume determination	Portfolio/Case Study/	50%
	<ul> <li>Dosage preparation and administration,</li> </ul>		
	<ul> <li>Verify correct radiopharmaceutical for exam, Assay in dose</li> </ul>		
	calibrator, Proper radiopharmaceutical labeling,		
	Administration technique, Administration records		
	PET radiopharmaceutical principles, Positron decay,     Pagirron energy and effect on recolution, coincidence		
	Positron energy and effect on resolution, coincidence		
	events, Bremsstrahlung radiation		
	<ul> <li>Decay factors, (HVL) – lead and concrete</li> </ul>		

Nuclear Medicine Practice and Procedures IVb Clinical Nuclear	Nuclear Medicine Procedures: (this will include a theory and practical component)         Colon cancer, Head/neck cancer, Oesophageal cancer,         Lung cancer, Breast cancer, Melanoma         Note: Detailed information and Points to be noted as in NM         Practice & Procedures Ia         Radionuclides and Radiopharmaceuticals:         As in NM Practice and Procedures Iva         Nuclear Medicine Procedures: (this will include a theory and practical component)         Lymphoma, Thyroid cancer, Ovarian cancer, Sarcoma, other         Note: Detailed information and Points to be noted as in NM         Practice & Procedures Ia         Radiopharmacey	Theory Assessment Project/ Assignment Portfolio/Case Study	50%
Medicine Practice and Procedures IV	<ul> <li>Radiochemistry- Physical, biological and chemical properties of radioactive materials used in PET/CT imaging, quality control</li> <li>Radiopharmaceutical compound selection, handling, preparation, dispensing and dose/volume determination, quality control and administration</li> <li>Radiation protection- safe handling of high energy (18F, Ga68) radionuclides, safety procedures and radiation hazards, decontamination equipment, protocols and procedures, radiation dosimetry to the relevant organs, modification of radiation doses appropriate to adult and/or pediatric patients and application of the ALARA principles.</li> <li>Safe clinical practices – radiation safety and hygiene, pharmaceutical technology and aseptic techniques, application of current Good Radiopharmacy Practice (cGRPP), quality assurance, record keeping and waste management.</li> <li>Nuclear Medicine Procedures:         <ul> <li>Principles of PET/CT imaging for Thyroid cancer, Ovarian cancer, Sarcoma, Colon cancer, Head/neck cancer, Esophageal cancer, Lung cancer, Breast cancer and Melanoma.</li> <li>Clinical application of advanced medical and radiographic terminology.</li> <li>Clinical application of Advanced medical and pathological appearances related to specific tracers used in PET/CT imaging.</li> <li>Instrumentation- Selection of appropriate equipment, quality control and calibration of PET/CT equipment.</li> <li>Image acquisition parameters and patient positioning principles.</li> <li>Patient care- application of the batho pele principles, patient radiation protection and ALARA principles.</li> </ul> </li> <li>Patient care- application of the batho pele principles, patient radiation protection and ALARA principles.</li> <li>Patient care- application of the batho pele principles, patient radiation protection and ALARA principles.</li> <li>Patient care- application of the batho pele principles, patient radiation protec</li></ul>	WIL Clinical Assessments	100%

BHSc in Radiotherapy Levels I to 4         Radiation       Basic Radiation physics         Treatment       Radiation physics of         Sciences I       Radiotherapy Equipment         Radiation Protection -       Imaging and Target volume developments in         imaging Quality Control       Common terminology relevant to radiation	50% 50%
TreatmentRadiation physics of Radiotherapy Equipment Radiation Protection - Imaging and Target volume developments in 	50%
Radiation Protection -         Imaging and Target volume developments in         imaging Quality Control         Radiotherapy       Common terminology relevant to radiation	
Radiation Protection -         Imaging and Target volume developments in         imaging Quality Control         Radiotherapy       Common terminology relevant to radiation	
imaging Quality Control       Radiotherapy       Common terminology relevant to radiation	
imaging Quality Control       Radiotherapy       Common terminology relevant to radiation	
Radiotherapy Common terminology relevant to radiation	
Practice therapy and oncology practice and procedures.	
and Procedures la Description of basic Radiographic Positions	
<ul> <li>Head and Neck cancers,</li> </ul>	
<ul> <li>Cancers of the GI tract, Chest -Lung</li> </ul>	
cancer,	
Pelvis Cancers - male & female     Theory Assessment	50%
reproductive system, Cancers in the Project/Assignment/	50%
urinary system Practical	00/0
Treatment planning and delivery	
<ul> <li>Mould room and Immobilisation devices</li> </ul>	
Simulation and Planning of various cancer	
treatments	
<ul> <li>Manual planning and calculations</li> </ul>	
<ul> <li>Planning Units and CT Simulation</li> </ul>	
Room & equipment preparation for planning &	
treatment delivery	
Radiotherapy Modalities available for cancer treatment	
Practice (Surgery,	
and Procedures Ib Chemotherapy, Radiation Therapy):	
Conventional (Xrt, 3D- CRT, IMRT, Rapid-	
Arc, Stereo-tactic radiotherapy),	
immunotherapy, Hormonal therapy, Radio	
Nuclide therapies Treatment delivery	
Mould room and Immobilisation devices	
	50%
Simulation and Planning of various cancer Theory Assessment treatments Project/Assignment/	50%
Manual planning and calculations     Practical	50%
Room & equipment preparation for	
planning & treatment delivery	
<ul> <li>Describe the indications, contra-</li> </ul>	
indications, side effects and emergency	
drugs for contrast media used in	
radiotherapy	
Modalities available for cancer treatment	
o Surgery, Chemotherapy,	
Radiation Therapy Equipment:	
Treatment Units,	
Planning Units and CT Simulation,  Prochytherroy and Treatment Accessories	
Brachytherapy and Treatment Accessories	
Clinical UNIT I - Treatment delivery at WIL centres	
Radiotherapy (Prepare the patient for a radiotherapy	
Practice and procedure):	
Procedures I • Patient identification, informed consent,	
explanation of XRT procedure, patient care	
pre-during-post radiotherapy, infection	
control,	
The use of the mould room and the type of	
immobilization devices used for therapy WIL Clinical	

treatment Masks/Shalls Vaclak Pita Placks	Assessments	100%
treatment. Masks/Shells, Vaclok, Bite-Blocks, Breast-board, Hip, Knee, Ankle fixation	Assessments	100%
devices,		
<ul> <li>Simulation and Planning of various cancer</li> </ul>		
treatments,		
<ul> <li>Manual planning and calculations,</li> </ul>		
Prepare the room, equipment and     accessories for a radiotherapy planning and		
accessories for a radiotherapy planning and		
treatment delivery,		
<ul> <li>Identify and describe contrast media used during preparatory imaging for radiotherapy</li> </ul>		
CT simulation, planning and treatment,		
<ul> <li>Describe the indications, contra- indications,</li> </ul>		
side effects and emergency drugs for		
contrast media used in radiotherapy (acute,		
acute-chronic, chronic side effects of		
radiotherapy).		
<b>UNIT 2</b> – Treatment delivery Treatment		
delivery at WIL centres (Perform the following		
in the radiotherapy procedure):		
• <b>ASSESS</b> patient and his/her history prior to		
commencement of radiation planning and		
treatment in terms of:-		
i)-tumour classification		
ii)-diagnostic and staging procedures		
<li>iii)-presenting signs and symptoms</li>		
iv)-the correlation of disease with		
epidemiological and aetiological patterns.		
<ul> <li>LOCALISE tumour using appropriate</li> </ul>		
tumour localisation methods and use such		
information to plan radiotherapy treatment.		
<ul> <li>PLAN patients using manual and computer</li> </ul>		
methods AND to gain further experience in		
mould-room techniques and calculate		
measurements for compensators.		
PERFORM treatment time/monitor dose		
calculations for a variety of treatment set-		
ups. Students are expected to be		
knowledgeable of the manual calculation		
methods.		
ACCURATELY treat patients, operating all		
department equipment under supervision by		
a qualified person.		
GAIN competency in the various sites /		
systems including thorax, head and neck,		
pelvis, abdomen.		
ASSIST with quality assurance of patient     treatment set ups varification films shacking		
treatment set-ups, verification films checking treatment vs. planning parameters.		
<ul> <li>MAINTAIN accurate records and statistics</li> </ul>		
<ul> <li>of all treatment given.</li> <li>COMMUNICATE with patients-emphasis</li> </ul>		
COMMUNICATE with patients-emphasis     particularly on providing patient with		
concise and correct information about skin		
care, side effects of treatment, diet, etc.		
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Dediction	Padiahialan		
Radiation	Radiobiology	<b>T</b> I <b>A</b>	F.09/
Treatment	Basic Radiation physics	Theory Assessment	50%
Sciences II	Radiation physics of Radiotherapy	Project/Assignment/	50%
	Equipment Basic principles of	Portfolio/Case Study	
	operation; basic quality control:		
	- CT Scanners for Virtual and CT-simulation		
	- Radiotherapy Planning Systems for 3D planning		
	- PET/CT Scanner		
	-Radiation		
	protection		
	-Imaging and		
	-Target volume		
	-Image interpretation in radiotherapy		
	-Quality Control		
Radiotherapy	Treatment of malignancies:		
Practice	Aetiology, Epidemiology, Signs and symptoms,		
and Procedures IIa	Staging, Treatment modalities, Radiotherapy	Theory Assessment	40%
	treatment, planning and treatment delivery for	Project/ Assignment	60%
	the following:		
	Integumentary system		
	Bone tumours		
	Soft tissue tumours		
	• Breast		
	Haemopoeitic and lymphatic systems		
Radiotherapy	Treatment of malignancies:		
Practice	Aetiology, Epidemiology, Signs and		400/
and Procedures IIb	symptoms, Staging, Treatment modalities,	Theory Assessment	40%
	Radiotherapy treatment, planning and treatment	Project/Participation	60%
	delivery for the following:	, 1	
	<ul> <li>Special senses: eye and ear</li> </ul>		
	<ul> <li>Endocrine system-</li> </ul>		
	Nervous system		
	Paediatrics		
	Non-malignant conditions		
	Emergency radiotherapy		
Clinical	<b>UNIT I</b> - Treatment delivery at WIL centres		
Radiotherapy	(Prepare the patient for a radiotherapy		
Practice and	procedure):		
Procedures II	<ul> <li>Patient identification, informed consent,</li> </ul>		
	explanation of XRT procedure, patient care		
	pre-during-post radiotherapy, infection		
	control,		
	• The use of the mould room and the type of		
	immobilization devices used for therapy	WIL Clinical	100%
	treatment. Masks/Shells, Vaclok, Bite-Blocks,	Assessments	100/0
	Breast-board, Hip, Knee, Ankle fixation		
	devices,		
	Simulation and Planning of various cancer		
	treatments,		
	<ul> <li>Manual planning and calculations,</li> </ul>		
	<ul> <li>Prepare the room, equipment and</li> </ul>		
	accessories for a radiotherapy planning and		
	treatment delivery,		
	<ul> <li>Identify and describe contrast media used</li> </ul>		
	during preparatory imaging for radiotherapy		
	CT simulation, planning and treatment,		
l			

	Describe the indications, contra- indications		
Radiation	<ul> <li>Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy).</li> <li>UNIT 2 - Treatment delivery Treatment delivery at WIL centres (Perform the following in the radiotherapy procedure):</li> <li>ASSESS patient and his/her history prior to commencement of radiation planning and treatment in terms of-i)-tumour classification         <ol> <li>i)-diagnostic and staging procedures</li> <li>ii)-presenting signs and symptoms</li> <li>iv)-the correlation of disease with</li> </ol> </li> <li>epidemiological and aetiological patterns.</li> <li>LOCALISE tumour using appropriate tumour localisation methods and use such information to plan radiotherapy treatment.</li> <li>PLAN patients using manual and computer methods AND to gain further experience in mould-room techniques and calculate measurements for compensators.</li> <li>PERFORM treatment time/monitor dose calculations for a variety of treatment setups. Students are expected to be knowledgeable of the manual calculation methods.</li> <li>ACCURATELY treat patients, operating all department equipment under supervision by a qualified person.</li> <li>GAIN competency in the various sites / systems including thorax, head and neck, pelvis, abdomen.</li> <li>ASSIST with quality assurance of patient treatment set-ups, verification films checking treatment vs. planning parameters.</li> <li>MAINTAIN accurate records and statistics of all treatment given.</li> <li>COMMUNICATE with patients-emphasis particularly on providing patient with concise and correct information about skin care, side effects of treatment, diet, etc.</li> </ul>		
Radiation Treatment Sciences III	-Clinical radiation beam dosimetry -Measurement of radiation output for radiation beams -Filters in radiotherapy -Radiotherapy treatment apparatus -Radiation protection -Particle beams in radiotherapy -Practical radiotherapy and fractionation (radiobiology) -Radioactivity	Theory Assessment Project/Assignment/ Portfolio/Case Study	50% 50%

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Radiotherapy	Integumentary system		
Practice	<ul> <li>Staging, histopathological types, tumour</li> </ul>		
and Procedures	localisation and treatment planning, dose		
Illa	fractionation, total skin irradiation.	Theory Assessment	40%
	Bone tumours	Assignment	60%
	<ul> <li>Staging, histopathological types, cytotoxics,</li> </ul>	Ū	
	immunotherapy, neutron therapy, hemi-body		
	therapy.		
	Soft tissue tumours		
	- Interstitial brachytherapy and neutron therapy.		
	Breast		
	- Clinical mark-up, electron treatment,		
	hormonal treatment		
	Immobilisation methods, megavoltage and DXR		
	techniques, and brachytherapy.		
Radiotherapy	Haemopoeitic and lymphatic systems		
Practice	– Immunotherapy, dose fractionation, total		
and Procedures	body irradiation.		
IIIb	Special senses: eye and ear – Cryotherapy,		
	brachytherapy		
			409/
	Endocrine system	Theory Assessment	40%
	- Hormonal therapy, unsealed lodine -131,	Project/ Assignment	60%
	stereotactic radiosurgery.		
	Nervous system		
	<ul> <li>Brachytherapy, immunotherapy, stereotactic</li> </ul>		
	radiotherapy, hyper fractionation.		
	Paediatric		
	- Bone marrow transplant, brachytherapy,		
	isotope therapy.		
	Non-malignant		
	0		
	- DXR or electron - keloids, beta plaque -		
	pterygium lodine-131.		
	Treatment techniques and protocols for		
	all of the above.		
Clinical	<b>UNIT I</b> - Treatment delivery at WIL centres		
Radiotherapy	(Prepare the patient for a radiotherapy		
Practice and	procedure):		
Procedures III	Patient identification, informed consent,		
	explanation of XRT procedure, patient care		
	pre-during-post radiotherapy, infection		
	control,		
	*		
	• The use of the mould room and the type of		
	immobilization devices used for therapy	WIL Clinical	100%
	treatment. Masks/Shells, Vaclok, Bite-Blocks,	Assessments	100%
	Breast-board, Hip, Knee, Ankle fixation		
	devices,		
	Simulation and Planning of various cancer		
	treatments,		
	<ul> <li>Manual planning and calculations,</li> </ul>		
	• Prepare the room, equipment and		
	accessories for a radiotherapy planning and		
	treatment delivery,		
	<ul> <li>Identify and describe contrast media used</li> </ul>		
	during preparatory imaging for radiotherapy		
	CT simulation, planning and treatment,		
L	er sindadon, planning and d cadnent,	1	1

	<ul> <li>Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy).</li> <li>UNIT 2 – Treatment delivery Treatment delivery at WIL centres (Perform the following in the radiotherapy procedure):</li> <li>ASSESS patient and his/her history prior to commencement of radiation planning and treatment in terms of:-         <ul> <li>i)-tumour classification</li> <li>ii)-diagnostic and staging procedures</li> <li>iii)-presenting signs and symptoms</li> <li>iv)-the correlation of disease with</li> </ul> </li> <li>Epidemiological and aetiological patterns.</li> <li>LOCALISE tumour using appropriate tumour localisation methods and use such information to plan radiotherapy treatment.</li> <li>PLAN patients using manual and computer methods AND to gain further experience in mould-room techniques and calculate measurements for compensators.</li> </ul>		
Radiation Treatment Sciences IV	<ul> <li>Radiobiology - Other Radiation Modalities</li> <li>Advanced Radiotherapy Equipment: Planning</li> <li>and Treatment with Advanced Methods and</li> <li>Techniques: <ul> <li>Advanced immobilisation devices</li> <li>Thermoplastic shells, precise mouthbite, custom head rests, vaclok, hip-fix, knee-fix, ankle-fix, breast board</li> <li>Virtual simulation, CT simulation</li> <li>Contrast agents</li> <li>Fusion imaging modalities – CT, PET, MRI, US</li> <li>4DTIC-Trilogy, IGRT, respiratory gating</li> <li>IMRT vs 3D Conformal XRT</li> <li>Rapid arc / VMAT vs IMRT</li> <li>Stereotactic radiotherapy</li> <li>Radiation Protection –</li> <li>advanced principles</li> <li>Technological Advances</li> <li>PACS</li> <li>Image Recording Devices</li> <li>Quality Control and Advanced Performance</li> </ul> </li> </ul>	Theory Assessment Assignment/ Portfolio/Case Study	40%
Radiotherapy Practice and Procedures IVa	<ul> <li>Advanced treatment planning:</li> <li>Intensity Modulated Radiotherapy (IMRT) vs 3D conformal radiotherapy planning, quality assurance and quality control, advantages and disadvantages).</li> <li>Virtual-simulation, quality assurance and quality control, advantages and</li> </ul>		

	1. 1		1
	disadvantages.	Theory Assessment	50%
	VMAT treatment planning	Project/Assignments	50%
	versus IMRT) Advanced		5078
	treatment delivery:		
	<ul> <li>Image Guided Radiotherapy – IGRT,</li> </ul>		
	quality assurance and quality control,		
	immobilization and application		
	<ul> <li>Respiratory gating, advantages and</li> </ul>		
	disadvantages, and application		
	<ul> <li>Rapid arc treatment delivery, quality</li> </ul>		
	assurance ad quality control,		
	, , , , , , , , , , , , , , , , , , , ,		
	immobilisation, advantages and		
	disadvantages, and application		
	Stereotactic radiosurgery, immobilisation,		
	quality assurance and quality control,		
	advantages and disadvantages, and		
	application		
Radiotherapy	Advanced treatment planning:		
Practice	<ul> <li>Intensity Modulated Radiotherapy</li> </ul>		
and Procedures	(IMRT) vs 3D conformal radiotherapy		
IVb	planning, quality assurance and quality		
	control, advantages and disadvantages).		
	<ul> <li>Virtual-simulation, quality assurance and</li> </ul>		
	quality control, advantages and		
	disadvantages.	Theory Assessment	50%
	0	·	50%
	Rapid arc treatment planning	Project/Assignments	
	versus IMRT) Advanced treatment		
	delivery:		
	<ul> <li>Image Guided Radiotherapy – IGRT,</li> </ul>		
	quality assurance and quality control,		
	immobilization and application		
	<ul> <li>Respiratory gating, advantages and</li> </ul>		
	disadvantages, and application		
	<ul> <li>Rapid arc treatment delivery, quality</li> </ul>		
	assurance ad quality control,		
	immobilisation, advantages and		
	disadvantages, and application		
	Stereotactic radiosurgery, immobilisation,		
	quality assurance and quality control,		
	advantages and disadvantages, and		
Clinical	application		
Clinical	UNIT I - Treatment delivery at WIL centres		
Radiotherapy	(Prepare the patient for a radiotherapy		
Practice and	procedure):		
Procedures IV	<ul> <li>Patient identification, informed consent,</li> </ul>		
	explanation of XRT procedure, patient care		
	pre-during-post radiotherapy, infection		
	control,		
	• The use of the mould room and the type of		
	immobilization devices used for therapy	WIL Clinical	
	treatment. Masks/Shells, Vaclok, Bite-Blocks,		100%
	Breast-board, Hip, Knee, Ankle fixation	Assessments	
	devices,		
	Simulation and Planning of various cancer		
	treatments,		
	<ul> <li>Manual planning and calculations,</li> </ul>	1	1

<ul> <li>Prepare the room, equipment and accessories for a radiotherapy planning and treatment delivery,</li> <li>Identify and describe contrast media used during preparatory imaging for radiotherapy CT simulation, planning and treatment,</li> <li>Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy).</li> <li>UNIT 2 – Treatment delivery Treatment</li> </ul>	
delivery at WIL centres (Perform the following	
in the radiotherapy procedure):	
ASSESS patient and his/her history prior to	
commencement of radiation planning and	
treatment in terms of:-	
i)-tumour classification	
ii)-diagnostic and staging procedures	
iii)-presenting signs and symptoms iv)- the correlation of disease with	
epidemiological and aetiological patterns.	
<ul> <li>LOCALISE tumour using appropriate</li> </ul>	
tumour localisation methods and use such	
information to plan radiotherapy treatment.	
PLAN patients using manual and computer	
methods AND to gain further experience in	
mould-room techniques and calculate	
measurements for compensators.	
• <b>PERFORM</b> treatment time/monitor dose	
calculations for a variety of treatment set-	
ups. Students are expected to be	
knowledgeable of the manual calculation methods.	
<ul> <li>ACCURATELY treat patients, operating all</li> </ul>	
department equipment under supervision by	
a qualified person.	
<ul> <li>GAIN competency in the various sites /</li> </ul>	
systems including thorax, head and neck,	
pelvis, abdomen.	
• <b>ASSIST</b> with quality assurance of patient	
treatment set-ups, verification films checking	
treatment vs. planning parameters.	
MAINTAIN accurate records and statistics	
of all treatment given.	
COMMUNICATE with patients-emphasis	
particularly on providing patient with	
concise and correct information about skin care, side effects of treatment, diet, etc.	
care, side effects of treatment, diet, etc.	

CHE – Council of Higher Education \* DHET – Department of Higher Education and Training **NB: Students are to read this section in conjunction with the relevant study guide.**