

2022 HANDBOOK





HANDBOOK FOR 2022

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 subject 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:

- 1. 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:

- 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.

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I. DEPARTMENTAL AND FACULTY CONTACT DETAILS

All departmental queries to:

Secretary: Ms Zamanguni (Gugu) Gumede

Tel No: 031 3732450 Fax No: 0865508774

Email: zamangunig@dut.ac.za

Location of department: DH1102, Gate 6, Ritson Campus,

Steve Biko Rd, Durban

All Faculty queries to:

Faculty officer: Thembelihle Mayisela

Tel No: 03 | 373270 | Fax No: 03 | 3732407 | Thembim@dut.ac.za

Location of Faculty office: Gate 8, Ritson Campus, Steve Biko Road,

Mansfield Site Area

Executive Dean: Professor G G Mchunu
Executive Dean's Secretary Mrs Bilkish Khan

 Tel No:
 031 3732704

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 031 3732620

 Email:
 bilkishk@dut.ac.za

Location of Executive Dean: Gate 6, Ritson Campus, Steve Biko Road,

Floor above the Faculty office

2. STAFFING

Name and Qualification

Head of Department:

Dr PR Nkosi

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 Lecturer:

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

Mr S Madlala

MSc: H Sci (SGUL), ND: Rad (Diag) (TN)

Dr TF Khoza

PhD: Health Sciences

M Tech: Rad (Diag) (UJ) B Tech: Rad (Diag) (UJ) ND: Rad (Diag) (UJ)

Ms P Naidoo

Master of Laws: Medical Law, Bioethics Forensic

Medicine (UKZN) B Tech Rad (Ther) (TN) ND: Rad (Diag) (KEH)

Mr T Motaung

 $Master\ in\ Business\ Administration\ (DUT);$

B Tech: Rad (Diag) (TN); ND: Rad (Diag) (TN)

Mrs N Khuluse

MHSc in Radiography B Tech: Rad (US) (DUT) ND: Rad (US) (DUT)

Lecturer:

Ms S Hundah

MHSc in Radiography

Clinical Instructors:

Mrs P Kismath

B Tech: Rad (Diag) (DUT) ND: Rad (Ther) TN); ND: Rad (Diag) (TN)

Mrs RM Pillav

B Tech: Rad (Diag) (DUT)
ND: Rad (Diag) (DUT)

Mammography Short Course (DUT)

Mrs FB Ennos

B Tech: Rad (Diag) (DUT) ND: Rad (Diag) (TN)

Ms LN Shanglee

B Tech: Rad (Diag) (DUT) ND: Rad (Diag) (DUT)

Secretary:

Miss Z (Gugu) Gumede B Tech: Bus Admin (DUT)

ND: OMT (MUT)

Technical Assistant

Miss P Ngwenya

B Tech: Business Administration (DUT)

ND: OMT (DUT)

Admin Assistant

Mr MF Ahmed 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
- Radiotherapy

3.2. OUALIFICATIONS 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 Radiotherapy	BHDRDI BHDSNI BHRDTI	94832 94679 72260	Not applicable
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 DLT

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 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 is included at the back of this handbook. In response to COVID-19 related restrictions, some assessmments might be undertaken virtually using DUT approved Learning Management Systems. Moderation follows the DUT assessment policy and assessment guidelines. Detailed information on each module/subject can be found in the relevant module/subject Study Guides. A student who fails a module/subject more than once is deemed to be making unsatisfactory academic progress and may not be allowed to re-register for the subject.

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/subject.

 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 OUALIFICATIONS

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

4.1 PROGRAMME INFORMATION

This department offers four programmes at the Honours level and 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 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.

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 lifetime.

4.2 PROGRAMME STRUCTURE: all four programmes

4.2.1 Bachelor of Health Sciences (BHSc) in Diagnostic Radiography (DR) (Qualification Code: BHDRD1) (4yr Minimum) – SAQA ID: 94832

YEAR	OF STUDY – I					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMI0I	5	12	C	
SPI	Physiology Ia	PYSA101	5	12	C	
SPI	Cornerstone	CSTN101	5	12	С	
SPI	Chemistry	CSTY101	5	8	С	
SPI	Diagnostic Practice & Procedures Ia	DPPA101	6	8	С	
SPI	FGE – student to select one module: isiZulu for Health Care Professionals I Issues of Gender & Society within Health Care	IZHPI0I IGSHI0I	5	12	E	
SP2	Physiology Ib	PYSB101	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 I module: 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					
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SP3	Anatomy II	ANTM201	5	12	С	ANTMI0I
SP3	General Pathology	GNLP101	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice & Management II	PPRM201	6	8	С	PPRMI0I
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	HCDK101 GENV101	6	8	E	
SP3	FGE – student to select one module: Environmental Awareness for Health Care Professionals IsiZulu for Health Care Professionals	EVAHIOI IZHPIOI	6	12	Е	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, DPPCIOI

SP4	Health Sciences Research I	HSRS101	6	12	С	
SP3 + 4		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	MNHP101	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	EQDVI0I TENEI0I	6	8	Ε	
SP6	Diagnostic Practice & Procedures IIIb	DPPB301	7	16	С	ANTM201, GNLP101 DPPA201, DPPB201, DPPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRS101
SP6	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETML101	7	12	С	
SP6	FGE – student to select one module: Educational Techniques I IsiZulu for Health Care Professionals II	EDUTIOI 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	CLMA 101	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 HEQSF – Higher Education Qualification Sub-Framework;

SAQA - South African Qualifications Authority

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

YEAR	(Qualification Code: BHDSN OF STUDY - I	., (-,,,,,,		JAZA	ر - د.	
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMI01	5	12	С	
SPI	Physiology Ia	PYSA I 0 I	5	12	С	
SPI	Cornerstone	CSTN101	5	12	C	
SPI	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	IZHPI0I IGSHI0I	5	12	E	
SP2	Physiology Ib	PYSB101	5	12	С	
SP2	Professional Practice & Management I	PPRMI0I	6	12	С	
SP2	Ultrasound Imaging Sciences I	UMIS101	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	
YEAR O	OF STUDY – 2					•
SP	MODULE TITLE	Module code	HESQF Level	SAQA Credit	C/E	Prerequisites
CD3	Anatomy II	ANTM201	5	12	С	ANTMI0I
SP3	General Pathology	GNLP101	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice & Management II	PPRM201	6	8	С	PPRM101
SP3	Ultrasound Practice & Procedures IIa	UPPA201	6	16	С	ANTMIOI,PYSAIOI, PYSBIOI, UPPAIOI, UPPBIOI,UPPCIOI
SP3	IGE – student to select one module: HIV & Communicable Diseases in KZN The Global Environment	HCDKI0I GENVI0I	6	8	Е	
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	HSRS101	6	12	С	
SP4	FGE – student to select one module: 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 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	Ultrasound Imaging Sciences III	UIMS301	7	16	С	UIMS201
SP5	Ultrasound Practice & Procedures Illa	UPPA301	7	16	С	ANTM201,GNLP101, UPPA201, UPPB201, UPPC201
SP5	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETML101	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	FGE – student to select one module: Educational Techniques I IsiZulu for Health Care Professionals III	EDUTIOI IZHP30I	7	12	Е	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

SP – Study Period; C – compulsory; E - elective IGE – Institutional General Education; FGE – Faculty General Education HEQSF – Higher Education Qualification Sub-Framework;

SAQA – South African Qualifications Authority

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

60		Module	HESQF	SAQA	0/5	
SP	MODULE TITLE	code	Level	Credit	C/E	Prerequisites
SPI	Anatomy I	ANTMI0I	5	12	C	
SPI	Physiology Ia	PYSA101	5	12	C	
SPI	Cornerstone	CSTN101	5	12	С	
SPI	Chemistry	CSTY101	5	8	C	
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	PYSB101	5	12	С	_
SP2	Professional Practice & Management I	PPRMI0I	6	8	С	
SP2	Radiation Treatment Sciences I	RTSC101	5	8	С	-
SP2	Radiotherapy Practice & Procedures Ib	RPPB101	6	12	С	1
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 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	C	ANTMI0I
SP3	General Pathology	GNLP101	6	8	С	ANTMIOI, PYSAIOI, PYSBIOI
SP3	Professional Practice& Management II	PPRM201	6	8	С	PPRMI0I
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	RTSC101
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	E	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	MNHPI0I	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	Е	
SP6	Radiotherapy Practice & Procedures IIIb	RPPB301	7	16	С	ANTM201,GNLP101 RPPA201, RPPB201 RPPC201
SP6	Health Sciences Research II	HSRS201	7	12	С	HSRS101
SP6	Leadership & Supervisory Development	LDSD101	7	12	С	
SP6	Ethics & Medical Law	ETML101	7	12	С	
SP6	FGE – student to select one module: Educational Techniques I IsiZulu for Health Care Professionals III	EDUTI01 IZHP301	7	12	E	IZHP201
SP5+6	Clinical Radiotherapy Practice & Procedures III	RPPC301	6	16	С	ANTM201, GNLP101,RPPA201, RPPB201, RPPC201
YEAR	OF STUDY – 4		1			
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

 $\begin{array}{lll} \text{SP-Study Period;} & \text{C-compulsory;} & \text{E-elective} \\ \text{IGE-Institutional General Education;} & \text{FGE-Faculty General Education} \\ \end{array}$

 ${\sf HEQSF-Higher\ Education\ Qualification\ Sub-Framework;}$

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 II and/or I2. Applicants are to satisfy the requirements of Table I 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

Table I: Compulsory Subjects

COMPULSORY SUBJECTS	NSC	Senior (Certificate	NC (V)
COM OLSOKI SOBJECTS	Rating	HG	SG	140 (1)
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%

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

Table 2: Point Scores

RESULTS	NSC	Senior C	Certificate	NC (V)
RESOLIS	Rating	HG	SG	140 (1)
90 – 100%	8	8	6	4
80 – 89%	7	7	5	4
70 – 79%	6	6	4	4
60 – 69%	5	5	3	3
50 – 59%	4	4	0	0
40 – 49%	3	3	0	0

Note: No points are allocated for Life Orientation subject.

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%
Interview	40%

- 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.
- 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 subjects at the stated minimum ratings below:

Minimum admission requirements

COMPULSORY SUBJECTS	NSC	NSC Senior Certificate		NC (V)
COM OLSOKI SOBJECTS	Rating	HG	SG	140 (4)
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 subject 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 2022.

4.4.10 WII

- 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.

SECTION B. POST GRADUATE PROGRAMMES

5 MASTERS OF HEALTH SCIENCES IN RADIOGRAPHY

- (Qualification Code: MHRADI)

5.1 PROGRAMME INFORMATION

In addition to Rule G24 (1), 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.

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

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

5.1.1 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 Student Handbook and the Postgraduate Student Handbook.

5.2 LEARNING PROGRAMME STRUCTURE

This programme is a full research option.

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

5.3 PROGRAMME RULES (wef: 08/11/2017)

5.3.1 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 with conferment of status according to Rule G10A or a Postgraduate Diploma. Candidates may also apply for admission via Recognition of Prior Learning (RPL) in accordance with Rule G7 (8) and/or G10B.

5.3.2 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.

5.3.3 Pass Requirements

Rule G24 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

5.3.4 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 two (2) 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.

5.3.5 Interruption of Studies

- i. Should there be bona fide reasons for the interruption of studies for a period of one (I) 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 subject to the approval of the Faculty.

5.3.6 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.

6 DOCTOR OF RADIOGRAPHY (Qualification Code: DRRADI)

6.1 PROGRAMME INFORMATION

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

6.1.1 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.

6.1.2 PROGRAMME STRUCTURE

This programme is a full research option.

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

6.2 PROGRAMME RULES

6.2.1 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.

6.2.2 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 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.

6.2.3 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

6.2.4 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 three (3) 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.

6.2.5 Interruption of Studies

- i. Should there be bona fide reasons for the interruption of studies for a period of one (I) 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 subject to the approval of the Faculty Research and Higher Degrees Committee.

6.2.6 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.

7 SUBJECT/MODULE CONTENT

7.1 BACHELOR OF HEALTH SCIENCES (BHSc) in Diagnostic Radiography; Diagnostic Sonography; Radiotherapy

These are the common modules across the four programmes

MODULE/SUBJECT	LEARNING CONTENT	ASSESSMENT	%
	LLAMINING CONTENT	ASSESSMENT	/0
	Introduction to Anatomy		
Anatomy I	Osteology	Theory Assessment	50%
,	Muscular anatomy	Practical	50%
	Arthrology		
	Cells & Tissues		
Physiology Ia	Integumentary system	Theory Assessment	60%
, 6,	Muscular system	Practical	40%
	Nervous system & Special senses		
	Cardiovascular system and Blood		
Dhysiala sy lh	Immunity & Lymphatic system	Theory Assessment	60%
Physiology Ib	Respiratory system	Practical	40%
	Digestive system		
	Urinary system Thermal physics		
	Waves & sound	Theomy	70%
Physics	Geometrical optics	Theory Practical	20%
, 5.25	Electricity& magnetism	Tutorial	10%
	Radioactivity & radiation	Tutoriai	. 070
	Quantum physics		
	Ç		
	Chemistry and measurements		
Chemistry	Matter and Energy	Theory	100%
	Atoms and Elements		
	Students as learners in a University of		
	Technology		
	History of radiography (including the SA		
	perspective).		
	Organisational and hierarchy structures in		
Professional Practice	public & private institutions. • Communication and interactions with	Theory Tests	60%
& Management I	patients:	Projects/Assignments/	4004
	Human developmental stages - Patient types	Practicals	40%
	& age groups classifications		
	Patient care		
	Infection Control – Types and spread of		
	infections		
	Introduction to drugs		
	Gastrointestinal Anatomy		
Anatomy II	Respiratory Anatomy	Theory Assessment	50%
Anatomy ii	Cardiovascular anatomy	Practicals	50%
	 Neuroanatomy 		
	Basic Medical Terminology		
	 Cell adaptations, cell injury & cell death 	L	
	 Causes of cell injury & death 	Theory tests	60%
General Pathology	 Infections & parasitic diseases 	Assignment/s/Projects/	
	Tissue Responses to injury - inflammation	Portfolios	40%
	and healing and repair		
	Immunopathology		
	Neoplasia		
	Haemodynamic disorders		

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

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

Cornerstone	 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 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 identify and integrate learning from earlier sections, and examine implications for further learning. 	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	A reflection on personal values and move to a discussion on how they intersect with values in the workplace. 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." leadership values and ethics and ethical decision making to develop social responsibility and their roles as citizens.	Assignment Oral Presentation Peer Assessment Attendance	50% 30% 10% 10%
ICT Literacies & Skills	 Basics of ICTs Hardware, Software, and Users Internet Search Word Processing Spreadsheets Referencing Security, Legal, Ethical, and Societal Issues Economics of ICTs Presentations 	Quizzes Capstone project- written report & oral presentations	50%
Cultural Diversity	 Culture (local and global context) Social responsibility Issues of anti- discriminatory and anti-oppressive practices. Social justice and the effect of marginalization. Consciousness raising and social action 	Assignments Oral presentation Portfolio	20% 40% 40%
HIV and Communicable Disease in KZN	 Epidemiology of HIV, TB and STIs globally, in sub-Saharan Africa, South Africa and KZN. HIV infection, transmission and prevention Two diseases one person Psychological issues of HIV and TB: Decision making and family autonomy Social isolation and stigma Disclosure Themes – stigma, disclosure, rights, communication, facilitation, advocacy 	Online activities Critical Reflective Diary Communication report	30% 20% 50%

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

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

Discipline/category specific modules per level of study.

	egory specific modules per level of study. ic Radiography Levels 1 to 4		
Diagnostic Imaging	Basic principles of medical imaging.		
Sciences I	X-ray tubes and x-ray production		
	Image formation – Scatter and latent image		
	Image recording	Theory Assessment	60%
	Introduction to Digital Radiography.	Practical Assessment	
	Image processing	/Assignment/	
	Image display	Presentation	40%
	Radiographic exposure		
	Radiation Protection		
	Basic principles of other imaging modalities		
Diagnostic Practice	 Fundamentals of diagnostic practice – selection of equipment 		
and Procedures la	& accessories, basic radiographic procedure, exposure		
	factors, cassettes, darkroom procedure.		
	Radiographic terminology & general patient positioning	Theory Assessment	50%
	principles.	Practical/Assignment/	3078
	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 &		
Diagnastia Busatias	heart, abdomen.		
Diagnostic Practice and Procedures Ib	 Fundamentals of diagnostic practice – selection of digital equipment & accessories, basic radiographic procedure, 		
and i rocedures ib	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	3070
	Normal radiographic anatomy and image evaluation &		
	interpretation of the shoulder & pelvic girdles, skull, spine,		
	sacrum & coccyx.		
Clinical Diagnostic	Diagnostic Procedures & Techniques for:		
Practice	 Basic, additional & modified projections of the axial and 		
and Procedures I	appendicular skeleton,	Clinical Assessments:	
	 Skull, abdomen and respiratory system. 		
		Hand Washing Technique	
	Areas to be covered:	Wheelchair Transfer	
	Upper and lower Limbs	Technique Ward Rotation	100%
	Abdomen Abdomen	Weekly Assessments	100%
	Bony Thorax - Sternum and SC Joints Bony Thorax - Sternum and SC Joints	Reflective Report	
	Bony Thorax –Ribs Charlet and Charlet	Clinical Tutor Assessment	
	Shoulder and Clavicle Palvia and Ulina Relia and Ulina	logbook	
	Pelvis and Hips Comital Sains Transport	-6	
	Cervical Spine – Trauma Caminal Spine		
	Cervical Spine The reside Series		
	Thoracic Spine Thoracic Spine Thoracic Spine Thoracic Spine		
	Lumbar and Sacral Spine Shull Pagia Projections		
	Skull – Basic Projections		
	Radiographic pathology of the skeletal and respiratory systems		
	and the acute abdomen.		
	Abnormal radiographic anatomy and image evaluation &		
	interpretation of the musculoskeletal system, chest and abdomen.		
	Appropriate usage of relevant radiographic equipment.		
1	Application of patient care, professional practice and ethics.		1

Diagnostic Imaging	Basic components of medical imaging systems:		
Sciences II	Generation and supply of electricity.		
ociences ii	Sensitometry		
	Radiation exposure factors		
	The radiographic image		
	Fluoroscopy and its equipment		
	Digital systems		
	Care and maintenance		
	Radiation physics:	The ami Assessment	50%
	Atomic structure and laws of modern physics-	Theory Assessment Practical Assessment	20%
	Nature of electromagnetic radiation	Project/Presentation	30%
	X-ray beam quality and quantity	1 Tojecu i esentation	3076
	Attenuation of electromagnetic radiation		
	Interaction of X-rays with matter.		
	Filtration of electromagnetic radiation		
	Dosimetry for x - and gamma rays		
	Radiation protection		
	Radiobiology - Biological effects		
	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		60%
	Paediatric Radiography – basic general techniques and related and the second sec	Theory Assessment	
	radiographic pathology Radiographic pathology of the skeletal and respiratory systems and	Practical/assignment/	40%
	the acute abdomen.	image Evaluation	
	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. Radiographic pathology of the gastrointestinal, accessory organs,	Theory Assessment	40%
	genitourinary and reproductive systems.		
	Abnormal radiographic anatomy and image evaluation &	Evaluation/Project	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, facia	ı	
and Procedures II	bones, sinuses	Clinical Assessments	
	Critical Care Radiography - trauma & emergency, ward and		
	theatre	Mobile Radiography	100%
	Paediatric Radiography – basic general techniques and related	Portfolio	
	radiographic pathology	Logbook	
	Contrast media- types, indications, contraindications		
	Fluoroscopic studies – techniques, patient care, contrast media	1	
	Radiographic pathology of the skeletal and respiratory systems and	1	
	the acute abdomen.		
	Abnormal radiographic anatomy and image evaluation 8		
	interpretation of the musculoskeletal system, chest and abdomen.		
	Appropriate usage of relevant radiographic equipment.		
	Application of patient care, professional practice and ethics.	<u> </u>	

	I		
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, Subject 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	Specialised Radiographic techniques & procedures and related radiographic pathology for: Paediatric Radiography Basic mammography Bone Densitometry – using DEXA, QCT, QUS Digital Angiography 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.	Theory Assessment Portfolio/Case Study/ Anatomy Viewing Practical	40%
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	Specialised Radiographic techniques & procedures and related radiographic pathology for: Paediatric Radiography Computed Tomography General radiography, poly trauma, ICU mobiles 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.	Clinical Assessments: CT Brain General/ Mobile Radiography Reflective Portfolio Logbook	100%

Diagnostic Imaging	Advanced CT Technology:		
Sciences IV	Advanced data acquisition principles: Volumetric imaging;		
	pitch		
	Advanced image reconstruction & algorithms:		
	Multidetector row spiral; longitudinal interpolation with Z-		
	axis filtering; interlaced sampling; 3D reconstruction		
	(including software)		
	Archiving & PACS		
	Image quality in CT: determiners; influencing factors;		
	measurements by physicists; quality control programmes –		
	principles & common QC tests.		
	Advanced Radiation Protection Practices: measuring	Theory Assessment	40%
	patient radiation dose; reducing dose; paediatric doses.	Practical Assessment/	
	Hybrid systems & fusion Imaging principles	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:		
	Principles of QA and QC tests for Fluoroscopy units, CT		
	systems, Cardiac Cath Labs, MRI		
	Tendering and commissioning of imaging equipment		
Diagnostic Practice	Specialised advanced imaging procedures & techniques:		
and Procedures IVa			
	 Interventional radiography – vascular & non-vascular 	Theory Assessment	50%
	applications	Image Evaluation and	30%
	 Advanced CT imaging – advanced applications in systemic 	Interpretation/	50%
	imaging, advanced image processing, contrast media usage	Assignment/Portfolio/Case	50%
	& optimisation, image quality versus radiation dose, dose	Study	
	optimisation techniques, advanced/abnormal cross	Study	
	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:	Theory Assessment	50%
and Procedures IVb	Advanced MRI applications – thoracic and abdomino-pelvic	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	Interventional radiography – vascular & non-vascular		
and mocedures iv	applications	Clinical Assessments	100%
	Advanced CT imaging – advanced applications in systemic	Cillical Assessments	10078
	imaging, advanced image processing, contrast media usage &		
	optimisation, image quality versus radiation dose, dose		
	optimisation, image quanty 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.		

BHSc in Diagnos	tic Sonography Level I to 4		
Ultrasound Imaging Sciences I	Basic principles of medical ultrasound: Sound wave, ultrasound wave generation and detection. Piezo- electric effect, Interaction of ultrasound with human body Ultrasound Equipment: Structure of a basic transducer, images display modes-A mode, M Mode and basic principles of real time B Mode. Introduction to: Image artefacts Biohazards and safety in ultrasound imaging	Theory Assessment	60% 40%
Ultrasound Practice and Procedures la	Fundamentals of ultrasound practice: Introduction to gynaecology sonography Introduction to obstetrics sonography Points to be noted for the above procedures Anatomy, physiology and detailed pathology associated with 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. Adhere to safe practices guided by ALARA	Theory Assessment Project/Assignment/	60% 40%
Ultrasound Practice and Procedures Ib	Fundamentals of ultrasound practice: Introduction to general abdominal sonography Principles of sonography report writing Points to be noted for the above procedures Anatomy, physiology and detailed pathology associated with 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. Adhere to safe practices guided by ALARA	Theory Assessment Project/Assignment/	60% 40%
Clinical Ultrasound Practice and Procedures I	Fundamentals of clinical ultrasound practice — selection of equipment, patient preparation use of correct terminology, digital/computed post processing methods and report writing. Identification and evaluation of normal radiographic anatomy and image evaluation & interpretation of the chest, abdomen, skull, spinal column, shoulder and pelvic girdles; and musculoskeletal skeletal system. Introduction to general abdominal sonography: Clinical indications Scanning technique protocols and procedures Image interpretation of normal abdominal organs: liver and biliary system; renal tract, pancreas, spleen and associated vascular structures.	WIL/Clinical practice	100%

Ultrasound Imaging	Ultrasound equipment:		
Sciences II	structure of electronic ultrasound transducers,	Theory Assessment	50%
ociences ii	 operation of real time B mode scanners, principles of digital 		50%
	scan converters and signal processing features and	i i ojecu Assigninent	30%
	characteristics of focused and unfocused ultrasound beam.		
	Principles of Doppler Ultrasound:		
	the Doppler effect, Doppler frequency shift,		
	types of Doppler signal output and		
	principles of continuous and pulsed wave Doppler		
	ultrasound.		
	Duplex scanners		
	Image Quality:		
	Resolution- axial, lateral, geometric, temporal and contrast,		
	Artefacts		
	Hazards and safety:		
	potential hazards of ultrasound, heating, cavitation, standing		
	waves, streaming and policies and protocols for safe		
	practice		
Ultrasound Practice	Gynaecology scanning:		
and Procedures IIa	Scanning technique : Trans vaginal		
	Pathologies of the female reproductive organs.		
	Image interpretation of abnormal organs: uterus, ovaries		
	and adnexae		
	Obstetric Sonography:		
	Appropriate scanning technique for different trimesters of		
	pregnancy		
	Complications in the first trimester		
	Routine second trimester scanning	Theory Assessment	40%
	Foetal environment monitoring	Project/Assignment/	
	Third trimester foetal growth monitoring scanning	Portfolio/Case Study	60%
	Report writing skills		
	Points to be noted for the above procedures		
	Anatomy, physiology and detailed pathology associated with		
	the above procedures.		
	 Principles of imaging. 		
	Definitions of terms		
	 Indications for the examination 		
	Information pertinent to performing the procedure		
	 Patient Preparation, before, during and after the exam. 		
	Adhere to safe practices guided by the ALARA principle		
Ultrasound Practice	General abdomen sonography:		
and Procedures IIb	Appropriate scanning technique to evaluate abdominal		
	organs		
	Clinical indications		
	• Image interpretations of abnormal findings in the : liver and		
	biliary system, renal tract, pancreas , spleen and spleen.		
	Pancreas, urinary system and associated vascular structures		
	 Sonography report writing skills 	Theory Assessment	40%
	Points to be noted for the above procedures	Project/Assignment/	4.0
	 Anatomy, physiology and detailed pathology associated with 	Portfolio/Case Study	60%
	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.		
1	 Adhere to safe practices guided by the ALARA principle 	1	

Clinical Ultrasound Practice and Procedures II	Fundamentals of clinical ultrasound practice – selection of equipment, patient preparation use of correct terminology, digital/computed post processing methods and report writing.	WIL assessment	100%
	Identification and evaluation of normal radiographic anatomy and image evaluation & interpretation of the chest, abdomen, skull, spinal column, shoulder and pelvic girdles; and musculoskeletal skeletal system.		
	Introduction to general abdominal sonography:		
	Clinical indications		
	Scanning technique protocols and procedures		
	Image interpretation of normal abdominal organs: liver and		
	biliary system; renal tract, pancreas, spleen and associated vascular structures		
Ultrasound Imaging Sciences III	Ultrasound equipment:: M Mode scanning Joinension and 4 Dimension real time imaging Elastography Image recording devices PACS Principles of Doppler Ultrasound: Doppler spectral analysis Colour and power Doppler Image Quality: Resolution Hazards and safety: Intensity and power Biological effects and Clinical safety Quality Control: Performance testing tests	Theory Assessment Project/Assignment	50% 50%

Lillens a const Document	Advantage in Committee in Commi		
Ultrasound Practice	Advanced procedures in Gynaecology scanning:		
and Procedures IIIa	Interventional procedures		
	3D and 4D gynaecology scanning		
	Advanced image interpretation		
	Doppler studies in gynaecology		
	Advanced procedures in obstetric sonography:		
	Screening tests for chromosomal anomalies in the first		
	trimester and second trimester		
	High Risk Pregnancies:		
	Congenital anomalies		
	Foetal Growth disorders		
	Maternal diseases in pregnancies		
	Interventional studies	Theory Assessment	40%
	 Doppler studies in obstetrics 	Project/Assignment/	
	General Abdomen sonography:	Portfolio/Case Study	60%
	Organ transplant		
	Male Reproductive organs		
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES		
	 Anatomy, physiology and detailed pathology associated with 		
	the above procedures.		
	Principles of imaging.		
	Definitions of terms		
	Indications for the examination		
	Information pertinent to performing the procedure		
	Patient Preparation, before, during and after the		
	examination.		
	examination.		
Ultrasound Practice	Small parts sonography		
and Procedures IIIb	Appropriate scanning technique protocols and procedures		
	for small parts.		
	Breast		
	Neck		
	• Chest		
	• Eye		
	Vascular Sonography:		
	Peripheral arterial upper and lower limbs		
	Carotid scanning		
	Peripheral venous upper and lower limb	Theory Assessment	
	Trans cranial Doppler	Project/Assignment/	40%
	Abdominal vessels	Portfolio/Case Study	60%
	Paediatric Sonography:	i or tronor case study	
	Abdomen		
	 Cranial and small parts 		
	Introduction to Musculosketal Sonography and Echocardiography		
	DOINTS TO BE MOTED FOR THE ABOVE BROSERIES		
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES		
	Anatomy, physiology and detailed pathology associated with		
	the above procedures.		
	Principles of imaging.		
	Definitions of terms		
	 Indications for the examination 		
	 Information pertinent to performing the procedure 		
1	 Patient Preparation, before, during and after the examination 		

Clinical Ultrasound Practice and Procedures III	Fundamentals of clinical ultrasound practice – selection of equipment, patient preparation use of correct terminology, digital/computed post processing methods and report writing.	WIL assessment	100%
	Identification and evaluation of normal radiographic anatomy and image evaluation & interpretation of the chest, abdomen, skull, spinal column, shoulder and pelvic girdles; and musculoskeletal skeletal system.		
	Introduction to general abdominal sonography:		
	Clinical indications Scanning technique protocols and procedures Image interpretation of normal abdominal organs: liver and biliary system; renal tract, pancreas, spleen and associated vascular structures.		
Ultrasound Imaging Sciences IV	Advanced and specialised ultrasound equipment:: Latest and future technological advances 3 Dimension and 4 Dimension real time imaging Elastography Contrast agents Image recording devices and storage devices Advanced Principles of Doppler Ultrasound:	Theory Assessment Project/Assignment/ Portfolio/Case Study	50%

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	Hazards and safety:		
	 Policies and protocols for safe practice 		
	Quality assurance and control:		
	Purpose		
	Performance testing tests		
	Phantoms, test selection		
Ultrasound Practice	Musculoskeletal Sonography		
and Procedures IVa	Appropriate scanning technique for each joint and muscles		
	Upper limb and lower limb		
	l ''	Theory Assessment	60%
	Image interpretation of normal and abnormal findings	Project/Assignment/	40%
	Detailed and concise report writing of sonographic findings	Portfolio/Case Study	
	Nerve Block		
	Fusion imaging		
	Latest developments and future trends in sonography		
	•		
Ultrasound Practice	Echocardiography		
and Procedures IVb	 Scanning technique trans thoracic. TEE B Mode, M Mode 		
	Image interpretation normal and abnormal		
	Detailed and concise report writing of sonographic findings		
	Latest developments and future trends in echocardiography		
			400/
	POINTS TO BE NOTED FOR THE ABOVE PROCEDURES	Theory Assessment	60%
	Anatomy, physiology and detailed pathology associated with	Project/Assignment/	40%
	the above procedures.	Portfolio/Case Study	
	Principles of imaging.		
	Definitions of terms		
	Indications for the examination		
	Information pertinent to performing the procedure		
	• Patient Preparation, before, during and after the		
	examination.		
Clinical Ultrasound	L		
Practice	Fundamentals of clinical ultrasound practice – selection of	WIL assessment	100%
and Procedures IV	equipment, patient preparation use of correct		
	terminology, digital/computed post processing methods		
	and report writing.		
	and report writing.		
	Identification and evaluation of normal radiographic		
	anatomy and image evaluation & interpretation of the		
	, , ,		
	chest, abdomen, skull, spinal column, shoulder and pelvic		
	girdles; and musculoskeletal skeletal system.		
	Introduction to general abdominal sonography:		
	Clinical indications		
	 Scanning technique protocols and procedures 		
1	 Image interpretation of normal abdominal 		
	organs: liver and		
	Organs, liver and		
	~		
	biliary system; renal tract, pancreas, spleen and associated		
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	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		
	biliary system; renal tract, pancreas, spleen and associated		

BHSc in Radiotherapy Levels I to 4			
Radiation	Basic Radiation physics	Theory Assessment	50%
Treatment	Radiation physics of	Assignment/ Portfolio/	50%
Sciences I	Radiotherapy Equipment	Case Study	
	Radiation Protection -	,	
	Imaging and Target volume developments in		
	imaging Quality Control		
Radiotherapy	Common terminology relevant to radiation		
Practice	therapy and oncology practice and procedures.		
and Procedures la	Description of basic Radiographic Positions		
	 Head and Neck cancers, 		
	 Cancers of the GI tract, Chest -Lung 		
	cancer,		
	Pelvis Cancers - male & female	Theory Assessment	50%
	reproductive system, Cancers in the	Project/Assignment/	50%
	urinary system	Practical	
	Treatment planning and delivery		
	 Mould room and Immobilisation devices 		
	 Simulation and Planning of various cancer 		
	treatments		
	 Manual planning and calculations 		
	 Planning Units and CT Simulation 		
	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		
	Simulation and Planning of various cancer	Theory Assessment	50%
	treatments	Project/Assignment/	50%
	Manual planning and calculations	Practical	
	Room & equipment preparation for		
	planning & treatment delivery		
	Describe the indications, contra-		
	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, 		
	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,		
i i ocedui es i	explanation of XRT procedure, patient care		
	pre-during-post radiotherapy, infection		
	control,		
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•	The use of the mould room and the type of
	immobilization devices used for therapy
	treatment. Masks/Shells, Vaclok, Bite-Blocks,
	Breast-board, Hip, Knee, Ankle fixation
	devices

- Simulation and Planning of various cancer treatments.
- Manual planning and calculations,
- Prepare the room, equipment and accessories for a radiotherapy planning and treatment delivery,
- Identify and describe contrast media used during preparatory imaging for radiotherapy CT simulation, planning and treatment.
- Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy).

UNIT 2 – Treatment delivery Treatment 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.
- LOCALISE tumour using appropriate 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.
- PERFORM treatment time/monitor dose calculations for a variety of treatment setups. 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, 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

WIL Clinical Assessments 100%

	concise and correct information about skin		
	care, side effects of treatment, diet, etc.		
Radiation	Radiobiology		
Treatment	Basic Radiation physics	Theory Assessment	50%
Sciences II	Radiation physics of Radiotherapy	Project/Assignment/	50%
	Equipment Basic principles of operation; basic quality control:	Portfolio/Case Study	
	- CT Scanners for Virtual and CT-simulation		
	- Radiotherapy Planning Systems for 3D planning		
	- PET/CT Scanner		
	-Radiation		
	protection		
	-Imaging and		
	-Target volume		
	-lmage 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		
and Procedures IIb	symptoms, Staging, Treatment modalities,	Theory Assessment	40%
	Radiotherapy treatment, planning and treatment	Project/Participation	60%
	delivery for the following:	, ,	
	Special senses: eye and ear		
	Endocrine system-		
	Nervous system		
	Paediatrics		
	Non-malignant conditions		
CI: · · I	Emergency radiotherapy		
Clinical	UNIT I - Treatment delivery at WIL centres		
Radiotherapy Practice and	(Prepare the patient for a radiotherapy		
Procedures II	procedure):		
11 ocedures ii	 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/Shells, Vaclok, Bite-Blocks,	Assessments	100%
	Breast-board, Hip, Knee, Ankle fixation		
	devices,		
	Simulation and Planning of various cancer		
	treatments,		
	Manual planning and calculations,		
	Prepare the room, equipment and		
	accessories for a radiotherapy planning and		
	treatment delivery,		

	Identify and describe contrast media used		
	during preparatory imaging for radiotherapy		
	CT simulation, planning and treatment,		
	Describe the indications, contra- indications,		
	side effects and emergency drugs for		
	contrast media used in radiotherapy (acute,		
	acute-chronic, chronic side effects of		
	radiotherapy).		
	UNIT 2 – Treatment delivery Treatment		
	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.		
	LOCALISE tumour using appropriate		
	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.		
	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, verification films checking 		
	treatment vs. planning parameters.		
	MAINTAIN accurate records and statistics of all treatment given.		
	of all treatment given.		
	COMMUNICATE with patients-emphasis particularly on providing patient with		
	particularly on providing patient with		
	concise and correct information about skin		
Radiation	care, side effects of treatment, diet, etc.		
Treatment	-Clinical radiation beam dosimetry		
Sciences III	-Measurement of radiation output for radiation beams	The amy Assessment	
Sciences III		Theory Assessment	50%
	-Filters in radiotherapy	Project/Assignment/	50%
	-Radiotherapy treatment apparatus	Portfolio/Case Study	
	-Radiation protection -Particle beams in radiotherapy		
	-Practical radiotherapy and fractionation		
	(radiobiology) 42	l	
	44		

	-Radioactivity		
Radiotherapy	Integumentary system		
Practice	 Staging, histopathological types, tumour 		
and Procedures	localisation and treatment planning, dose		
Illa	fractionation, total skin irradiation.	Theory Assessment	40%
	Bone tumours	Assignment	60%
	 Staging, histopathological types, cytotoxic 	S .	
	drugs, 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,		
IIID	brachytherapy		
	, 1,	TI	40%
	Endocrine system	Theory Assessment	60%
	- Hormonal therapy, unsealed lodine -131,	Project/ Assignment	60%
	stereotactic radiosurgery.		
	Nervous system		
	- Brachytherapy, immunotherapy, stereotactic		
	radiotherapy, hyper fractionation.		
	Paediatric		
	- Bone marrow transplant, brachytherapy,		
	isotope therapy.		
	Non-malignant		
	– DXR or electron – keloids, beta plaque –		
	pterygium lodine-131.		
	Treatment techniques and protocols for		
	all of the above.		
Clinical	UNIT I - 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	
	treatment. Masks/Shells, Vaclok, Bite-Blocks,	Assessments	100%
	Breast-board, Hip, Knee, Ankle fixation	Assessments	
	devices,		
	 Simulation and Planning of various cancer 		
	treatments,		
	 Manual planning and calculations, 		
	Prepare the room, equipment and		
	accessories for a radiotherapy planning and		
	treatment delivery,		
	 Identify and describe contrast media used 		
	during preparatory imaging for radiotherapy		
1	CT simulation, planning and treatment,		

	 Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy). UNIT 2 – Treatment delivery Treatment 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. LOCALISE tumour using appropriate 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 the 		
	measurements for compensators.		
Radiation Treatment Sciences IV	Radiobiology - Other Radiation Modalities Advanced Radiotherapy Equipment: Planning and Treatment with Advanced Methods and Techniques:	Theory Assessment Assignment/ Portfolio/Case Study	40%
Radiotherapy Practice and Procedures IVa	Advanced treatment planning: Intensity Modulated Radiotherapy (IMRT) vs 3D conformal radiotherapy planning, quality assurance and quality control, advantages and disadvantages). Virtual-simulation, quality assurance and quality control, advantages and		
	disadvantages. VMAT treatment planning versus IMRT) Advanced	Theory Assessment Project/Assignments	50% 50%

	T	T	
Radiotherapy Practice and Procedures IVb	treatment delivery: Image Guided Radiotherapy – IGRT, quality assurance and quality control, immobilization and application Respiratory gating, advantages and disadvantages, and application Rapid arc treatment delivery, quality assurance ad quality control, immobilisation, advantages and disadvantages, and application Stereotactic radiosurgery, immobilisation, quality assurance and quality control, advantages and disadvantages and disadvantages, and application Advanced treatment planning: Intensity Modulated Radiotherapy (IMRT) vs 3D conformal radiotherapy planning, quality assurance and quality control, advantages and disadvantages). Virtual-simulation, quality assurance and quality control, advantages and disadvantages. Rapid arc treatment planning versus IMRT) Advanced treatment delivery: Image Guided Radiotherapy – IGRT, quality assurance and quality control, immobilization and application Respiratory gating, advantages and disadvantages, and application Rapid arc treatment delivery, quality assurance ad quality control, immobilisation, advantages and disadvantages, and application Stereotactic radiosurgery, immobilisation, quality assurance and quality control, advantages and disadvantages, and application	Theory Assessment Project/Assignments	50% 50%
Clinical Radiotherapy Practice and Procedures IV	 UNIT 1 - Treatment delivery at WIL centres (Prepare the patient for a radiotherapy procedure): 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 treatment. Masks/Shells, Vaclok, Bite-Blocks, Breast-board, Hip, Knee, Ankle fixation devices, Simulation and Planning of various cancer treatments, Manual planning and calculations, Prepare the room, equipment and accessories for a radiotherapy planning and treatment delivery, 	WIL Clinical Assessments	100%

- Identify and describe contrast media used during preparatory imaging for radiotherapy CT simulation, planning and treatment.
- Describe the indications, contra- indications, side effects and emergency drugs for contrast media used in radiotherapy (acute, acute-chronic, chronic side effects of radiotherapy).

UNIT 2 – Treatment delivery Treatment 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.
- LOCALISE tumour using appropriate 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.
- PERFORM treatment time/monitor dose calculations for a variety of treatment setups. 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, 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.

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.