



Observation Form

Site of observation _____

Name of observer _____ Date _____

(Must be < 1 year of application submission) Observation length

should be a minimum of 4 hours

8-Hour Observation is required as part of the application process. Applicants should plan to wear business casual attire (no jeans, tee shirts, or sneakers).

Procedures	Type of exam	Observations
Orthopedic X-rays (hands, feet, extremities, etc.)		
Chest X-rays		
Abdominal X-Rays		

Portables		
Fluoroscopy		
Emergency Room		
Additional exams/other modalities (MRI, CT, Mammography, Bone Density, etc.)		

Final Impression/Notes:

Instructions: Applicants should send a copy of this completed form to RVCCAdmission@ccsnh.edu or the Admissions Representative Dvestal@ccsnh.edu.

Observer signature:_____

Radiology Department Supervisor/Lead Tech:_____