

Appendix 8: Assessment criteria/record

Evidence of competency Plain Film Reporting: Adult Chest and Abdomen/ Musculoskeletal (delete as appropriate) Name of Radiographer: ______ Date of PgC Image Reporting (Musculoskeletal or Adult Chest & Abdomen):

Consultant Assessor: _____ Date: _____

Evidence for extension of practice in Plain Film Reporting – (Paediatrics/ Spine/Rheumatology please state below)

This confirms that ______ has completed their additional training/ Preceptorship and is now authorised to undertake Plain Film Reporting of ______

Consultant Radiologist	Date	

Consultant Radiographer _____ Date _____ Date _____

I declare that I have studied the protocol for the performance of Plain Film reporting and understand the system of work I will practice in my extended role.

File Name: Guideline for Independent Image Interpretation by Consultant Advance Radiography Practitioners (Plain film)	Version: 4.2	Date June 2021
Produced by: Consultant Radiographer	Page 20 of 21	Review Date: November 2024