MALLA REDDY VISHWAVIDYAPEETH

SCHOOL OF ALLIED HEALTH CARE SCIENCES AND TECHNOLOGY

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Program

Bachelor of Science (B.Sc.)

Radiation Therapy Technology

RTT-2026

COURSE STRUCTURE

Bachelor of Radiation Therapy Technology

Introduction:

Learning Objectives: At the completion of this course, the student should be -

1. Able to execute all routine radio therapeutic procedures as per prescription and direction of Radiation Oncologist.
2. Able to operate the radiotherapy equipment used in treatment of cancer patient independently and maintain the equipment under the guidance of Medical Physicist.
3. Able to demonstrate and apply adequate knowledge about the safe handling of medical radiation sources, keeping in mind the radiation protection of staff, patients and public.
4. Able to demonstrate patient management skills.

Expectation from the future graduate in the providing patient care.

1. The coursework is designed to train students to work in conjunction with radiation oncology team including radiation oncologist, medical physicists and other members, in the application of prescribed doses of ionizing radiation for the treatment of malignant or benign disease.
2. Course work includes physics, anatomy and physiology, dosimetry, clinical oncology and radiation safety. The student will be skilled in management, administration of prescribed radiation treatment, and provisions of patient support.
3. Employment opportunities can be found in hospitals in both private and public sectors as well as in independent cancer treating centres.
4. After the completion of the course, the graduate is expected to register with the Atomic Energy Regulatory Board (AERB) or with other regulatory/standardizing body instituted by Ministry of Health and Family Welfare. The student is also expected to keep updated information on the live register and must re-register after every 5 years to ensure employability in the market.
5. RTT graduate is encouraged to pursue further qualification to attain senior position in the professional field, also to keep abreast with the advances and new technology, the professional should opt for continuous professional education credits offered by national and international institutes.

Eligibility for admission:

Selection procedure:

1. He/she has passed the Higher Secondary (10+2) or equivalent examination recognized by any Indian University or a duly constituted Board with pass marks (50%) in science subjects.

   OR

   Diploma in Radiotherapy Technology after completing 12th class/ 10 +2 of CBSE or equivalent with minimum aggregate of 50% marks in science subjects.

2. Candidates who have studied abroad and have passed the equivalent qualification as determined by the Association of Indian Universities will form the guideline to determine the eligibility and must have passed in the subjects: Physics, Chemistry, Biology/Mathematics and English up to 12th Standard level.
3. Candidates who have passed the Senior Secondary school Examination of National Open School with a minimum of 5 subjects with any of the following group subjects.
   a. English, Physics, Chemistry, Botany, Zoology
   b. English, Physics, Chemistry, Biology and any other language
4. He/she has attained the age of 17 years as on - (current year) & maximum age limit is 30 years.
5. He/she has to furnish at the time of submission of application form, a certificate of physical fitness from a registered medical practitioner and two references from persons other than relatives testifying to satisfactory general character.
6. Admission to B.Sc. Radiotherapy Technology course shall be made on the basis of eligibility and an entrance test to be conducted for the purpose. No candidate will be admitted on any ground unless he/she has appeared in the admission test and interview.
   a. Entrance test, to be conducted by the university as per the syllabus under 10 +2 scheme of CBSE, subject-wise distribution of questions will be as 30% in Physics, 40% in Biology, 20% in Chemistry, 10% in English (Language & Comprehension) and in General Awareness about health-related methods.
   b. Successful candidates on the basis of written test will be called for the counselling & shall have face an interview board. The interview board should be chaired by an experienced RTT and having hospital administrator and HR Expert apart from other nominees, whose recommendations shall be final for the selection of the students.
   c. During subsequent counselling (s) the seat will be allotted as per the merit of the candidate depending on the availability of seats on that particular day.
   d. Candidate who fails to attend the Medical Examination on the notified date(s) will forfeit the claim for admission and placement in the waiting list except permitted by the competent authority under special circumstances.

e. The name of the student(s) who remain(s) absent from classes for more than 15 days at a stretch after joining the said course will be struck off from the college rolls without giving any notice.

Provision of Lateral Entry:

Lateral entry to second year for allied health science courses for candidates who have passed diploma program from the Government Boards and recognized by State/Central University, fulfilling the conditions specified and these students are eligible to take admission on lateral entry system only if the same subject have been studied at diploma level.

Duration of the course

Duration of the course: 4 years that includes 06 month of internship. 03 years or 6 semesters of academic (1060 hours of Theory & 2180 hours of Practical Classes) and 06 months (720 hours minimum) of internship

Total hours - 3960

Medium of instruction:

English shall be the medium of instruction for all the subjects of study and for examination of the course.

Attendance:

A candidate has to secure minimum-

1. 75% attendance in theoretical
2. 80% in Skills training (practical) for qualifying to appear for the final examination.

No relaxation, whatsoever, will be permissible to this rule under any ground including indisposition etc.

Assessment:

Assessments should be completed by the academic staff, based on the compilation of the student‘s theoretical &clinical performance throughout the training programme. To achieve this, all assessment forms and feedback should be included and evaluated.

Exit Examination:

The pattern of examination would be Semester based. Each Semester would typically last for 5 months which would be followed by a short vacation.

The Student should meet the criteria for Attendance (75% Attendance for Theory and 80% Attendance for Practical) and Assessment Criteria (based on periodic test and maintenance of Log book /Practical Work book) for every Semester.

This would be followed by Theory Examination and Practical Examination which would mark the end of each semester. A student has to secure minimum 40% marks in each theory subject and minimum 40% marks in the Practical Examination to get promoted to the next Semester. Marksheet will be provided at the end of each Semester Examination which would display the passed subjects and the failed subjects. The Marksheet will also mention if the student has passed or has been detained during a particular semester

Arrears Examination:

Maximum Backlog of 2 subjects per semester will be allowed **i**n the case of students not securing the minimum passing marks and having failed the theory/practical examination. The backlog subject will need to be cleared in the subsequent semester along with the present semester. The total backlog during any semester will not exceed 2 subjects.

If a student has failed in more than 2 subjects in a particular semester or has an overall backlog of more than 2 subjects during any semester, the student will be detained during that semester and will be promoted to next semester only if he has cleared the backlog subjects or has a maximum backlog of 2 subjects during any semester.

Backlog examination can also be taken up during the period of Internship.

Passing Certificate:

A student will be provided a Passing Certificate only after successful completion of all the Semesters and the 1 year period of Internship. 80% attendance will be required for the entire duration of the internship.

Curriculum Outline

FIRST SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT-001	Introduction to Healthcare Delivery System in India	60	0	60
BRTT-002	Basic computers and information Science	10	40	50
BRTT-003	Communication and soft skills	20	10	30
BRTT-004	Medical Terminology and Record keeping (including anatomical terms)	40	0	40
BRTT-005	Medical Law and Ethics	40	0	40
BRTT-006	Introduction to Quality and Patient safety (including Basic emergency care and life support skills, Infection prevention and control, Biomedical waste management, Disaster management and Antibiotic resistance)	40	60	100
BRTT-007	Professionalism and values	20	0	20
BRTT-008	Biostatistics and introduction to research methodology	40	20	60
BRTT-009	Principals of Management	40	0	40
BRTT-010	Community orientation and clinical visit (including related practical to course 001)*	0	100	100
TOTAL		310	230	540

SECOND SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT -011	Elementary Mathematics and Physics	30	10	40
BRTT -012	Human Anatomy and Physiology	60	60	120
BRTT -013	Radiographic Anatomy	20	40	60
BRTT -014	Oncology Science- I	60	20	80
BRTT -015	Principles of radiotherapy and radiotherapy techniques	40	20	60
BRTT -016	Radiation Quantities, Units and Detection/Measurement	40	20	60
	RTT Directed Clinical Education – part I (studentship)	-	120	120
TOTAL		250	290	540

THIRD SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT -017	Basic Radiation Physics	60	40	100
BRTT -018	Oncology Science-II	40	20	60
BRTT -019	Radiotherapy Equipment –I	50	50	100
BRTT -020	Radiation Safety	40	40	80
BRTT -021	Patient care, positioning and immobilization	40	20	60
	RTT Directed Clinical Education – part II (studentship)	-	140	140
TOTAL		230	310	540

FOURTH SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT -022	Radiotherapy Equipment –II	40	60	100
BRTT -023	Quality Assurance in Radiotherapy-I	30	50	80
BRTT -024	Basic Radiotherapy Physics	40	25	65
BRTT -025	Biological Effects of Radiation	10	5	15
	RTT Directed Clinical Education – part III (studentship)	-	280	280
TOTAL		120	420	540

FIFTH SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT -026	Clinical Radiobiology	40	40	80
BRTT -027	Mould Room /Motion Management Techniques	30	60	90
BRTT -028	Special RT Techniques and Recent advances	20	50	70
	RTT Directed Clinical Education – part IV (studentship)		300	300
	TOTAL	90	450	540

SIXTH SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
BRTT -029	Radiological/Nuclear Medicine/Other Imaging Techniques in Radiotherapy Planning	20	60	80
BRTT -030	Radiotherapy treatment delivery	20	60	80
BRTT -031	Operational Issues in Radiation Therapy	20	60	80
	RTT Directed Clinical Education – part V (studentship)		300	300
	TOTAL	60	480	540

SEVENTH & EIGHT SEMESTER

Sl. No.	Course Titles	Hours		
		Theory	Practical	Total
	RTT Internship /Externship **INTERNSHIP – minimum 720 hours (calculation based on 8 hours per day for 90 working days in a semester)**		1440	1440

First Semester-

Introduction to National Healthcare System

The course provides the students a basic insight into the main features of Indian health care delivery system and how it compares with the other systems of the world. Topics to be covered under the subject are as follows:

1. Introduction to healthcare delivery system
    a. Healthcare delivery system in India at primary, secondary and tertiary care
    b. Community participation in healthcare delivery system
    c. Health system in developed countries.
    d. Private Sector
    e. National Health Mission
    f. National Health Policy
    g. Issues in Health Care Delivery System in India
2. National Health Programme- Background objectives, action plan, targets, operations, achievements and constraints in various National Heath Programme.
3. Introduction to AYUSH system of medicine
    a. Introduction to Ayurveda.
    b. Yoga and Naturopathy
    c. Unani
    d. Siddha
    e. Homeopathy
    f. Need for integration of various system of medicine
4. Health scenario of India- past, present and future
5. Demography & Vital Statistics-
    a. Demography – its concept
    b. Vital events of life & its impact on demography
    c. Significance and recording of vital statistics
    d. Census & its impact on health policy
6. Epidemiology
    a. Principles of Epidemiology
    b. Natural History of disease
    c. Methods of Epidemiological studies
    d. Epidemiology of communicable & non-communicable diseases, disease transmission, host defence immunizing agents, cold chain, immunization, disease monitoring and surveillance.

REFERENCE TEXT BOOKS

1.Hospital Administration and Management – S.L. Goel
2.Public Health and Preventive Medicine –

Medical terminologies and record keeping

This course introduces the elements of medical terminology. Emphasis is placed on building familiarity with medical words through knowledge of roots, prefixes, and suffixes. Topics include: origin, word building, abbreviations and symbols, terminology related to the human anatomy, reading medical orders and reports, and terminology specific to the student‘s field of study. Spelling is critical and will be counted when grading tests.[24] Topics to be covered under the subject are as follows:

1. Derivation of medical terms.
2. Define word roots, prefixes, and suffixes.
3. Conventions for combined morphemes and the formation of plurals.
4. Basic medical terms.
5. Form medical terms utilizing roots, suffixes, prefixes, and combining roots.
6. Interpret basic medical abbreviations/symbols.
7. Utilize diagnostic, surgical, and procedural terms and abbreviations related to the integumentary system, musculoskeletal system, respiratory system, cardiovascular system, nervous system, and endocrine system.
8. Interpret medical orders/reports.
9. Data entry and management on electronic health record system.

Basic computers and information science

The students will be able to appreciate the role of computer technology. The course has focus on computer organization, computer operating system and software, and MS windows, Word processing, Excel data worksheet and PowerPoint presentation. Topics to be covered under the subject are as follows:

1. Introduction to computer: Introduction, characteristics of computer, block diagram of computer, generations of computer, computer languages.
2. Input output devices: Input devices(keyboard, point and draw devices, data scanning devices, digitizer, electronic card reader, voice recognition devices, vision-input devices), output devices(monitors, pointers, plotters, screen image projector, voice response systems).
3. Processor and memory: The Central Processing Unit (CPU), main memory.
4. Storage Devices: Sequential and direct access devices, magnetic tape, magnetic disk, optical disk, mass storage devices.
5. Introduction of windows: History, features, desktop, taskbar, icons on the desktop, operation with folder, creating shortcuts, operation with windows (opening, closing, moving, resizing, minimizing and maximizing, etc.).

6. Introduction to MS-Word: introduction, components of a word window, creating, opening and inserting files, editing a document file, page setting and formatting the text, saving the document, spell checking, printing the document file, creating and editing of table, mail merge.
7. Introduction to Excel: introduction, about worksheet, entering information, saving workbooks and formatting, printing the worksheet, creating graphs.
8. Introduction to power-point: introduction, creating and manipulating presentation, views, formatting and enhancing text, slide with graphs.
9. Introduction of Operating System: introduction, operating system concepts, types of operating system.
10. Computer networks: introduction, types of network (LAN, MAN, WAN, Internet, Intranet), network topologies (star, ring, bus, mesh, tree, hybrid), components of network.
11. Internet and its Applications: definition, brief history, basic services (E-Mail, File Transfer Protocol, telnet, the World Wide Web (WWW)), www browsers, use of the internet.
12. Application of Computers in clinical settings.

Practical on fundamentals of computers -

1. Learning to use MS office: MS word, MS PowerPoint, MS Excel.
2. To install different software.
3. Data entry efficiency

Medical law and ethics

Legal and ethical considerations are firmly believed to be an integral part of medical practice in planning patient care. Advances in medical sciences, growing sophistication of the modern society‘s legal framework, increasing awareness of human rights and changing moral principles of the community at large, now result in frequent occurrences of healthcare professionals being caught in dilemmas over aspects arising from daily practice.[25]

Medical ethics has developed into a well based discipline which acts as a "bridge" between theoretical bioethics and the bedside. The goal is "to improve the quality of patient care by identifying, analysing, and attempting to resolve the ethical problems that arise in practice".[25] Doctors are bound by, not just moral obligations, but also by laws and official regulations that form the legal framework to regulate medical practice. Hence, it is now a universal consensus that legal and ethical considerations are inherent and inseparable parts of good medical practice across the whole spectrum. Few of the important and relevant topics that need to focus on are as follows:

1. Medical ethics - Definition - Goal - Scope
2. Introduction to Code of conduct
3. Basic principles of medical ethics – Confidentiality

4. Malpractice and negligence - Rational and irrational drug therapy
5. Autonomy and informed consent - Right of patients
6. Care of the terminally ill- Euthanasia
7. Organ transplantation
8. Medico legal aspects of medical records – Medico legal case and type- Records and document related to MLC - ownership of medical records - Confidentiality Privilege communication - Release of medical information - Unauthorized disclosure - retention of medical records - other various aspects.
9. Professional Indemnity insurance policy
10. Development of standardized protocol to avoid near miss or sentinel events
11. Obtaining an informed consent.

Communication and soft skills

Major topics to be covered under Communication course[26] –

1. Basic Language Skills: Grammar and Usage.
2. Business Communication Skills. With focus on speaking - Conversations, discussions, dialogues, short presentations, pronunciation.
3. Teaching the different methods of writing like letters, E-mails, report, case study, collecting the patient data etc. Basic compositions, journals, with a focus on paragraph form and organization.
4. Basic concepts & principles of good communication
5. Special characteristics of health communication
6. Types & process of communication
7. Barriers of communication & how to overcome

Introduction to Quality and patient safety

1. Quality assurance and management - The objective of the course is to help students understand the basic concepts of quality in health Care and develop skills to implement sustainable quality assurance program in the health system.
    a. Concepts of Quality of Care
    b. Quality Improvement Approaches
    c. Standards and Norms
    d. Quality Improvement Tools
    e. Introduction to NABH guidelines

2. Basics of emergency care and life support skills - Basic life support (BLS) is the foundation for saving lives following cardiac arrest. Fundamental aspects of BLS include immediate recognition of sudden cardiac arrest (SCA) and activation of the emergency response system, early cardiopulmonary resuscitation (CPR), and rapid defibrillation with an automated external defibrillator (AED). Initial recognition and response to heart attack and stroke are also considered part of BLS. The student is also expected to learn about basic emergency care including first aid and triage. Topics to be covered under the subject are as follows:
    a. Vital signs and primary assessment
    b. Basic emergency care – first aid and triage
    c. Ventilations including use of bag-valve-masks (BVMs)
    d. Choking, rescue breathing methods
    e. One- and Two-rescuer CPR
    f. Using an AED (Automated external defibrillator).
    g. Managing an emergency including moving a patient

    At the end of this topic, focus should be to teach the students to perform the manoeuvres in simulation lab and to test their skills with focus on airways management and chest compressions. At the end of the foundation course, each student should be able to perform and execute/operate on the above mentioned modalities.

3. Bio medical waste management and environment safety- The aim of this section will be to help prevent harm to workers, property, the environment and the general public. Topics to be covered under the subject are as follows:
    a. Definition of Biomedical Waste
    b. Waste minimization
    c. BMW – Segregation, collection, transportation, treatment and disposal (including colour coding)
    d. Liquid BMW, Radioactive waste, Metals / Chemicals / Drug waste
    e. BMW Management & methods of disinfection
    f. Modern technology for handling BMW
    g. Use of Personal protective equipment (PPE)
    h. Monitoring & controlling of cross infection (Protective devices)

4. Infection prevention and control - The objective of this section will be to provide a broad understanding of the core subject areas of infection prevention and control and to equip AHPs with the fundamental skills required to reduce the incidence of hospital acquired infections and improve health outcomes. Concepts taught should include –
    a. Evidence-based infection control principles and practices [such as sterilization, disinfection, effective hand hygiene and use of Personal protective equipment (PPE)],
    b. Prevention & control of common healthcare associated infections,

c. Components of an effective infection control program, and
d. Guidelines (NABH and JCI) for Hospital Infection Control

5. Antibiotic Resistance-
    a. History of Antibiotics
    b. How Resistance Happens and Spreads
    c. Types of resistance- Intrinsic, Acquired, Passive
    d. Trends in Drug Resistance
    e. Actions to Fight Resistance
    f. Bacterial persistence
    g. Antibiotic sensitivity
    h. Consequences of antibiotic resistance
    i. Antimicrobial Stewardship- Barriers and opportunities, Tools and models in hospitals

6. Disaster preparedness and management- The objective of this section will be to provide knowledge on the principles of on-site disaster management. Concepts to be taught should include-
    a. Fundamentals of emergency management,
    b. Psychological impact management,
    c. Resource management,
    d. Preparedness and risk reduction,
    e. Key response functions (including public health, logistics and governance, recovery, rehabilitation and reconstruction), information management, incident command and institutional mechanisms.

Professionalism and values

The module on professionalism will deliver the concept of what it means to be a professional and how a specialized profession is different from a usual vocation. It also explains how relevant is professionalism in terms of healthcare system and how it affects the overall patient environment.

1. Professional values- Integrity, Objectivity, Professional competence and due care, Confidentiality
2. Personal values- ethical or moral values
3. Attitude and behaviour- professional behaviour, treating people equally
4. Code of conduct , professional accountability and responsibility, misconduct
5. Differences between professions and importance of team efforts
6. Cultural issues in the healthcare environment

Research Methodology and Biostatistics

The objective of this module is to help the students understand the basic principles of research and methods applied to draw inferences from the research findings.

1. Introduction to research methods
2. Identifying research problem
3. Ethical issues in research
4. Research design
5. Basic Concepts of Biostatistics
6. Types of Data
7. Research tools and Data collection methods
8. Sampling methods
9. Developing a research proposal

Principals of Management

The course is intended to provide a knowledge about the basic principles of Management.

1. Introduction to management
2. Strategic Management
3. Foundations of Planning
4. Planning Tools and Techniques
5. Decision Making, conflict and stress management
6. Managing Change and Innovation
7. Understanding Groups and Teams
8. Leadership
9. Time Management
10. Cost and efficiency

Community orientation and clinical visit

The objective of this particular section of the foundation course is to sensitize potential learners with essential knowledge; this will lay a sound foundation for their learning across the under-graduate program and across their career. Innovative teaching methods should be used to ensure the attention of a student and make them more receptive such as group activities, interactive fora, role plays, and clinical bed-side demonstrations. [27]

1. The community orientation and clinical visit will include visit to the entire chain of healthcare delivery system -Sub centre, PHC, CHC, SDH, DH and Medical college, private hospitals, dispensaries and clinics.
2. The student will also be briefed regarding governance at village level including interaction and group discussion with village panchayat and front line health workers.
3. Clinical visit to their respective professional department within the hospital.

Second Semester

Elementary mathematics & physics:

Physics is a key component of all education programmes for RTTs and should comprise a significant proportion of the overall syllabus. The physics modules will provide the scientific basis of dose calculation and treatment planning, the principles of the equipment used routinely in the administration of radiotherapy and an understanding of the basis of radiation protection and safe practice. Students should be able to draw, read, and report on graphs, charts and tables/ calculate ratios/ measure time, temperature, distance, make estimates and approximations and judge the reasonableness of the results and demonstrate an ability to evaluate and draw conclusions.

1. **Elementary Mathematics**
   a. Calculation of percentage, Profit & Loss, Simple interest, compound interest, time & work ,Ratio & proportion, Surds, Indices, Logarithm, Inverse Square Law,
   b. Geometry of triangles, similar triangles, Properties of Triangles.
   c. Trigonometry: Height & Distance.
   d. Graphical Representation of Exponential and Inverse exponential functions, Linear and semi log graphs.
2. Basic Physics, Electrostatics, Magnetism & Current Electricity
   a. Units & Dimension, Newton‘s Laws of Motion, Velocity & Speed, Force, Momentum etc.
   b. Coulomb‘s Law, Electric field & potential, Capacitance, Ohm‘s Law, Heating effect of current, Biot–Savart law, Definition of Tesla and Gauss, Magnetic field due to circular coil. Elementary Principles of-Magnetization of Materials by electric current, Electromagnets. Lorentz force. Magnetic flux. Electromagnetic induction, mutual and self-inductance. Transformer, Eddy current. Alternating Current, RMS and Average Current. Variation of Voltage and current in AC circuit consisting only Resistor, Only Induction and Only Capacitor. Power factor of the AC circuit.
   c. Instruments: Electrometer, Galvanometer, Ammeter, & Voltmeter

Human Anatomy and Physiology

Anatomy is a key component of all education programmes for RTTs and should have a strong focus on organ position, orientation and relationships. The topics provide the student with an understanding of the structure and relationships of the systems and organs of the body which is essential in patient positioning, treatment planning and accurate treatment delivery. The radiographic anatomy component will enable RTTs to evaluate images for treatment planning and verification.

Similarly, Physiology provides the students with knowledge of the function of systems and organs and their relationships and underpins the understanding of how cancer treatments can affect the function of normal tissue leading to late side effects. Physiology is important to all programmes with increased depth of content required where RTTs are being required to take a more active role in side effect recognition and management. This may be in departments where RTTs are increasingly taking some responsibility in this area or in resource constrained environments where nursing or medical staff are limited.

1. Structure and function of cell; cell division; tissue: definition and classification (Gross outline)
2. General Anatomical terms and topography of the body-planes regions, positions, movements.
3. Skeleton & joints- Long bones, vertebrae, pelvic and shoulder girdles, hands and feet, skull , face and teeth; parts of classical long bone; outline of different joints and type of movements.
4. Muscles; Classification, structure and function (Gross outline)
5. Brain & spinal cord with its coverings and cavities including cerebrospinal fluids and pituitary gland (Macroscopic anatomy and surface anatomy only)
6. Head & Neck; Oral cavity & lips, Pharynx, Larynx, Nasal Cavity and Para Nasal sinuses, Salivary Glands, Ear; Orbit & its content; Thyroid Gland and Nodal Areas (Macroscopic Anatomy only)
7. Thorax: Structure of Thoracic cage, Oesophagus, Trachea, Lungs & Pleura, The Mediastinum including Thymus, Heart and Great Vessels and Diaphragm (Macroscopic and Surface Anatomy)
8. Abdomen: Structure of Abdomen & Peritoneum, Retro Peritoneal structures (including Kidney), Stomach, Small Intestine, Colon, Liver, Pancreas, Spleen (Macroscopic and Surface Anatomy)
9. Pelvic and Perineum: Structure of Pelvis, Rectum & Anus, Bladder, Prostate, Female Genital Tract, Male Genital Tract and Inguinal Femoral Region (Macroscopic and surface Anatomy)
10. Lymphatic system and Reticulo-endothelial system (Gross outline only)- Position and function of Lymph Nodal regions (Including Neck, Axilla, Mediastinum, para-aortic, Inguinal) Extra nodal Lymphatic Tissues(Waldeyer‘s Ring, Spleen and Liver, Malt, Bone Marrow, Thymus) and Re System; Lymphatic Drainage.
11. Digestive System- Organs of digestion, histology of the digestive organs (stomach, small intestine, liver, pancreas), process of digestion, absorption and assimilation of food, Vitamins and minerals
12. Respiratory System- Organs of respiration and their histology (lungs and trachea), Respiration (Definition and Mechanism), gas exchange in the lungs, regulation of respiration, basal metabolic rate
13. The skin (Structure and functions)

14. The excretory system- Organs of excretion (kidneys, ureter, bladder), histology of kidney and its functions, formation of urine and its composition, structure of nephron
15. Circulatory System- Composition and functions of blood, the heart anatomy and physiology, the chambers of heart, various vessels and valves present in heart, Circulation of blood, the cardiac cycle and heart sounds, blood pressure, arteries and veins.
16. Nervous System- Central nervous system (Brain and Spinal cord), Peripheral nervous system (cranial and spinal nerves), The reflex action and reflex arc, The transmission of nerve impulse, sense organs (eye, ear, tongue and nose); structure and functions
17. Endocrine System- short description of various endocrine glands and their functions
18. Reproductive System- Male and female reproductive system, Histology of Gonads, ovarian cycle and ovulation, Fertilization, Fertility control.

Imaging in oncology

Emphasis on plain and cross-sectional radiographic anatomy

1. Surface anatomy
2. Plain film / conventional radiographs
3. Mammography
4. Computed Tomography (CT)
5. Magnetic Resonance Imaging (MRI)
6. Ultrasound
7. Nuclear medicine
8. Digitally Reconstructed Radiographs (DRR)
9. Portal imaging

Oncology Science- I

These subject puts cancer, the treatment methods available and the patient pathway into context. It provides the student with an understanding of the other disciplines involved in the management of patients from diagnosis to follow up and how they interact with the radiotherapy department in the overall management of the cancer patient. This underpins how the information gained at the various stages can be used most effectively and appropriately. The topics related specifically to radiotherapy will enable students to analyse and evaluate treatment options and the associated side effects and how this information is used in defining the most appropriate treatment for each individual patient. It will provide students with knowledge of other therapies that patients may avail of and how quality of life issues can be addressed.

1. Pathology- general pathology of tumours
2. Malignancies- local and general effects of tumours and its spread
3. Carcinogenesis
4. Co-morbidities
5. Etiology and epidemiology
6. Genetics
7. Prevention
8. Early detection
9. Signs and symptoms
10. Public awareness on early signs and symptoms
11. High risk groups
12. Staging of tumours

Principles of Radiation and Radiotherapy Techniques

This paper is designed for students to have complete knowledge about various basic treatment techniques in the field of radiation therapy. In this paper, the students study the various technical aspects of treatment techniques, such as FIX, ROTATION, ARC & SKIP therapy techniques, for individual patients. In this paper, the students also study about the utility of various immobilizing devices during patient setup, which are evaluated properly for accurate treatment delivery to the volume of interest. The students study about the various treatment accessories such as Mid Line Block (MLB), customized blocks, wedges, etc., for various sites of interest.

1. Effects of various radiation on normal tissues and malignant tumour: Early and late reaction on Skin, Mucous membrane, GI tract, Genito urinary system, respiratory system, CNS
2. Application of radiotherapy in benign conditions
3. Application of radiotherapy in malignant condition
4. Single and multiple field techniques for all treatment sites (from Head to Feet) with appropriate immobilizing device(s).
5. Fix, Rotation, Arc and Skip therapy procedures.
6. Use of Rubber traction, POP, Orfit, Body Frame in treatment technique.
7. Evaluation of patient setup for simple techniques.
8. Use of Beam Modifying devices, such as wedges, Tissue compensators, Mid Line Block (MLB) in the treatment of respective sites.
9. Customized shielding blocks and its properties.
10. Asymmetric jaws
11. Motorized wedges
12. Simulation procedures including CT simulation

Radiation Quantities, Units and Detection/Measurement

In this paper the students will learn about the various radiation quantities, their measuring units and various types of survey meters/dosimeters.

1. Radioactivity, Flux, Fluence, Kerma, Exposure, Absorbed Dose, Equivalent Dose, Weighting Factors, Effective Dose, Natural Background Radiation, Occupational Exposure Limits, Dose limits to Public.
2. Detection and measurement of radiation - Ionisation of gases, Fluorescence and phosphorescence, Effect on photographic emulsion, Ionisation chambers, Proportional Counters, G.M. Counters, Scintillation Detectors, Liquid scintillator, Pocket Dosimeters, TL Dosimeters and their use in personnel monitoring badges. Advantages and disadvantages of various detectors, appropriateness of different types of detectors for different types of radiation measurement.

RTT Directed Clinical Education – part I (studentship)

Students will observe the basic operations of the radiation oncology clinic while interacting with the multidisciplinary team members involved in providing optimal care to cancer patients. The student will be introduced to oncology terminology, equipment, and techniques used for treatment

Third Semester

Basic Radiation physics

1. Atomic Structure, Nucleus, Atomic No., Mass No., Electron orbit and energy levels, Isotopes and isobars, Radioactivity, Radioactive decay, Half-life, Particle radiation, Electromagnetic Radiation, Production of X-rays, Continuous X-ray spectrum, Bremsstrahlung radiation Characteristic X-rays, Filters, Quality of X- rays, Effect of voltage and current on the intensity of X-rays, Properties of X-rays.
2. Interaction of Radiation with Matter : Photoelectric effect, Compton Effect, Pair production, Ionisation of matter, Energy absorbed from X-rays, X-rays Scattering, X-rays transmission through the medium, linear and mass attenuation coefficient, HVT and TVT, Interaction of charged particle and neutrons with matter.

Oncology Science- II

These subject puts cancer, the treatment methods available and the patient pathway into context. It provides the student with an understanding of the other disciplines involved in the management of patients from diagnosis to follow up and how they interact with the radiotherapy department in the overall management of the cancer patient. This underpins how the information gained at the various stages can be used most effectively and appropriately. The topics related specifically to radiotherapy will enable students to analyse and evaluate treatment options and the associated side effects and how this information is used in defining the most appropriate treatment for each individual patient. It will provide students with knowledge of other therapies that patients may avail of and how quality of life issues can be addressed.

1. Clinical examination
2. Biopsy
3. Laboratory tests
4. Imaging methods
5. Staging and grading
6. TNM staging system, other commonly used systems
7. Treatment intent- radical, adjuvant , palliative
8. Non-malignant diseases
9. Primary management of malignancy
10. Performance status

Radiotherapy Equipment -I

In this paper, the students acquire knowledge about various teletherapy machines, such as telecobalt machines, linear accelerators etc wherein the student learns about the operational and functional aspects of accelerators along with machine properties. Also, in this paper the student studies about equipment accessories needed during treatment.

1. Brachytherapy- Design features, Radiation sources, Technique, High dose-rate (HDR),Low dose-rate (LDR),Pulsed dose-rate (PDR), various types of applicators.
2. Teletherapy Machines & Accessories:
    a. Telecobalt Machines
    b. Medical linear accelerators.
    c. Tomotherapy
    d. Machine properties.
    e. Beam directing, modifying and defining devices.
    f. Other accessories.

Radiation safety the composition of committee should include an experienced RTT

The radiation therapy needs to be carried out carefully with adequate measuring system for the radiation workers, such as Radiation Therapists, which helps in knowing the dose level he/she has received while working in the radiation area.

1. **Radiation Hazard evaluation and control**
   Philosophy of radiation protection, Effect of Time, Distance and Shielding, Calculation of workload, Calculation of Weekly dose to the radiation worker and general public, good work practices in diagnostic radiology and/or radiotherapy practices (including teletherapy and Brachytherapy), Planning consideration for radiology and/or radiotherapy installation including work load, use factor & occupancy factors, effect of different shielding material.

2. **Radiation Emergency Preparedness**
   Safety and security of radiation sources, case histories of emergency situations and preparedness, equipment‘s and tools including role of Gamma Zone Monitor, Regulatory requirements and prevention of emergency, Preventive maintenance and Safety Culture, Role of RTT in handling radiation emergencies.

3. **Regulatory requirements**
   National Regulatory Body, Responsibilities, organization, Safety Standards, Codes and Guides, Responsibilities of licensees, registrants and employers and Enforcement of Regulatory requirements.

4. **Demonstration:**
    - Time, Distance and Shielding, measurement of HVT & TVT
    - Familiarisation of radiation survey meters and their functional performance checks
    - Radiological Protection Survey of Radiotherapy, Simulator and CT Simulator Installations
    - QA on X-ray, Simulator and Radiotherapy Equipment(s)
    - Procedures followed for calibration of measuring and monitoring instruments

Patient care, positioning and immobilization

In this context, patient care refers to all non-radiotherapy related aspects of the work that the RTT does while interacting with patients. This ranges from communication to the identification and referral for radiation related toxicities to cardio-pulmonary resuscitation. The RTT must also be able to apply the principles of positioning to the preparation of the immobilization device. Consideration must be taken of the practical aspects of immobilization device preparation.

1. Hospital procedure: Hospital staffing and organization; records relating to patients and departmental statistics, professional attitude of the Radiation Therapist to patients and other members to the staff; medico-legal aspects accidents in the departments appointments organization; minimizing waiting time, out –patient and follow-up clinics; stock-taking and stock keeping.
2. Care of the patient: First contact with patients in the department, management of chair and stretcher patients and aids for this , management of the unconscious patient, elementary hygiene, personal cleanliness, hygiene in relation to patients (for example clean linen and receptacles, nursing care, temperature pulse and respiration, essential care of the patient who has a tracheotomy, essential care of the patients who has a colostomy, bedpans and urinals, simple application of a sterile dressing. First aid, Infection (Bacteria, spread of infections, auto-infection etc.).
3. Drugs in the department: Storage: Classification; labelling and checking, regulations regarding dangerous and other drugs, unit of measurement, special drugs, anti-depressive, anti-hypertensive etc.
4. Principles of positioning and immobilization
    a. Positioning aids-Breast boards, Lung boards, Belly boards, Head-and-neck fixation devices, Vacuum packs, Stereotactic systems
    b. Internal organ motion control- Bite blocks, Gating systems, Active breathing control, Diaphragm compression, Prostate immobilization, Tracking systems. Laser/ positioning systems
    c. Marking systems
    d. Isocentre determination
    e. Reference points
    f. Treatment couch
    g. Image acquisition for planning (and/or verification)

h. Modalities for image acquisition for planning
i. Simulation- Conventional Simulation, CT Simulation, Virtual Simulation
j. Image processing and archiving
k. Treatment verification
l. Protocols- Imaging protocols: development and implementation, Non-action levels (NAL), On-line/off-line corrections, Matching/co-registration procedures, Geometric uncertainties, Documentation, Adaptive radiotherapy, Information management[29]

RTT Directed Clinical Education – part II (studentship)

Students will gain additional skills in clinical procedures, interaction with patients and professional personnel. Students apply knowledge from previous clinical learning experience under the supervision of a registered radiation therapist. Students are tested on intermediate clinical radiation therapy skills.

Fourth Semester

Radiotherapy Equipment -II

In this paper, the students learn more about the accessories used along with radiotherapy equipment such as on-board imaging, dosimetry accessories, use of computers in RT and various types of networking used in RT:

1. Familiarization with treatment planning systems-external beam planning and brachytherapy
2. Various types of phantoms including the water-phantoms, RFA
3. Various types of dosimeters including in-vivo dosimeters
4. EPID and other on-board imaging systems
5. Record and Verify Systems, Oncology Information Systems, Image/Patient data archiving, storage and transfer.
6. CT Simulator

Quality Assurance in Radiotherapy

Quality assurance (QA) refers to the systematic activities implemented in a quality system so that quality requirements for a product or service will be fulfilled. It is the systematic measurement, comparison with a standard, monitoring of processes and an associated feedback loop that confers error prevention and provides accuracy of treatment. The following topics will be covered: Accessories and tools used for QA tests in Radiotherapy such as Front pointer, Back pointer, Laser Alignment etc. Optical and radiation field congruence, Beam shaping blocks, Beam shaping jaws, Delineator/Diaphragm movements, Isocentre alignment, Patient support system, Beam on and off mechanisms, Technician's role in QA tests on telecobalt /Linear Accelerator / Brachytherapy/ Gamma knife/Simulator/CT Simulator machines.

Basic Radiotherapy Physics

Historical developments in Radiotherapy, Physical components of Telecobalt Unit / Linear Accelerator Unit / Remote After Loading Brachytherapy Unit / Gamma Knife Unit / Simulator /Brachytherapy units and their descriptions, Various types of sources used in Radiotherapy and their properties, Physics of Photons, electrons, protons and neutrons in radiotherapy, Physical parameters of dosimetry such as Percentage Depth Dose, Tissue-Air Ratio, Tissue Maximum Ratio, Physics of Bolus and Phantom materials, Compensators, Wedges, Shielding Blocks, Patient immobilization devices, Port film, processing and development, Special techniques in Radiotherapy such as SRS, SRT, IMRT, IGRT and Tomotherapy.

Biological Effects of Radiation

The Cell, Effect of ionising radiation on Cell, Chromosomal aberration and its application for the biological dosimetry, Somatic effects and hereditary effects, stochastic and deterministic effects, Acute exposure and Chronic exposure, $LD_{50/60}$. Role of RTT in managing the acute effects of radiation.

RTT Directed Clinical Education – part III (studentship)

Students will improve their skills in clinical procedures. Progressive interaction with patients and professional personnel are monitored as students practice radiation therapy in a supervised setting. Additional areas include problem solving, identifying machine components and basic side effect management. Students will demonstrate competence in beginning, intermediate, and advanced procedures.

Practical & Demonstration:

Practical part-1:

1. Preparation of Mould for head & neck case.
2. Preparation of Mould for Pelvis case.
3. Study of mould room equipment in Radiotherapy.
4. Preparation of customize shielding block for Cobalt unit.
5. Preparation of patient set-up in SAD technique.
6. Study of difference between SSD & SAD technique.

Practical part-2:

1. Study of Record and Verify system in External Radiotherapy.
2. Study of operational safety mechanism of Medical Linear Accelerator.
3. Study to Radiological Safety mechanism of Cobalt Unit.
4. Online verification of patient set-up by EPID (Head & Neck).
5. Online verification of patient set-up by EPID (Pelvic).
6. Daily Quality Assurance in Cobalt unit.
7. Daily Quality Assurance in Remote After loader Brachytherapy Unit.

Demonstration:

1. Time Distance and Shielding, measurement of HVT & TVT
2. Familiarization of Radiation survey meters and their function performance checks.
3. Radiation survey of Cobalt and Brachytherapy Units.
4. Time Distance and Shielding, measurement of HVT & TVT
5. Familiarization of Radiation survey meters and their function performance checks.
6. Radiation survey of Cobalt and Brachytherapy Units.
7. Daily Quality Assurance test for Tele cobalt and Brachytherapy unit.

Fifth Semester

Clinical Radiobiology

In simplest terms, radiobiology is the study of the action of ionizing radiation on living structures and organisms. Radiobiology is the basic science behind radiotherapy and it can explain, and occasionally also predict responses of tumours and normal tissues to radiation. Knowledge of the principles of radiobiology allows the RTT to comprehend the effects of different types of radiation, fractionation schemes, the use of radio sensitizers and other interactions he/she observes on a daily basis.

1. Cell kinetics
2. Cell cycle control mechanisms
3. Tumour biology
4. The five ‗R's of radiobiology
5. Tissue structure and radiation effect
6. The Linear Quadratic (LQ) model
7. Tumour control probability (TCP), Normal Tissue Complications Probability (NTCP) models
8. Acute and late side effects
9. Sensitizers/protectors/side effect reduction
10. Fractionation
11. Treatment combinations
12. Treatment scheduling

Mould Room /Motion Management Techniques

Mould room and motion management techniques are essential part of modern precision radiotherapy. An RTT has to be competent in designing various types of moulds for patient immobilization and applicator fixation (in brachytherapy) as well as in various motion management techniques:

1. Historical evolution of the mould materials and techniques to make moulds
2. Thermoplastic moulds
3. Breath hold, motion reduction, tracking and gating techniques

Special RT Techniques and Recent advances

1. Wedges-tissue compensator-irregular field-SSD&SAD technique-oblique field-arc-rotational and moving field
2. Mantle field-irregular field-Hemi body irradiation-whole body irradiation-total body skin irradiation
3. Special techniques in Radiation Therapy, (SRT) – Stereo tactic Radio surgery (SRS) – . Methods – BRW and CRW frames – angiographic localizer box – preparation of target sheets – Quality Assurance – Isocentric check – Treatment execution – care to be taken – check list.
4. Conformal Radiotherapy: Principles of 3 D treatment.

5. Recent developments in radiotherapy and treatment techniques
6. Proton therapy and carbon ion therapy
7. artificial intelligence

RTT Directed Clinical Education – part IV (studentship)

The course provides students the opportunity to continue to develop confidence and increased skill in simulation and treatment delivery. Students will demonstrate competence in beginning, intermediate, and advanced procedures in both areas. Students will participate in advanced and specialized treatment procedures.

Sixth Semester

Radiological/Nuclear Medicine/Other Imaging Techniques in Radiotherapy Planning

An RTT should understand the role of various types of imaging in radiotherapy planning. Also he should be well versed with various types of imaging modalities.

1. 2D (radiography, fluoroscopic, USG), 3D (CT, MRI) and functional (PET/SPECT) imaging and their application in radiotherapy planning
2. Understand Gross Tumour Volume (GTV), Clinical Target Volume (CTV), Internal Target Volume (ITV), Planning Target Volume (PTV), Organs at Risk (OAR) delineation
3. Conduct image fusion at the treatment machine console
4. Do bony matching
5. Do soft tissue matching for estimating the preliminary data for applying shifts
6. Prepare documentation
7. The RTT should understand the principles of: Four-dimensional (4D) planning and be familiarized with IMRT and IGRT planning.

Radiotherapy treatment delivery

Based on Bloom‘s taxonomy, students should be able to analyse, synthesize and evaluate the information acquired in the radiotherapy specific modules in radiotherapy preparation, delivery and patient support. From Bloom‘s taxonomy, _analysis‘ is the ability to break down the information into its component parts and look for interrelationships and ideas, _synthesis‘ is combining information from a range of settings or experiences and _evaluation‘ is judging the value of the information and how it is best applied.

1. Orthovoltage / superficial
2. Supervoltage / Megavoltage
3. Brachytherapy
4. Stereotactic radiotherapy- Stereotactic radiosurgery, Stereotactic radiotherapy, Cranial Extra cranial (Stereotactic body radiotherapy SBRT), Total Body Irradiation (TBI),Total Skin Electron Irradiation (TSEI),Radiation therapy with neutrons, protons, and heavy ions

Operational Issues in Radiotherapy.

Course content is designed to focus on various radiation therapy operational issues. Accreditation, CQI development and assessment techniques will be presented. Human resource issues and regulations impacting the radiation therapist will be examined. Topics include the role of network information systems within the radiation oncology department.

RTT Directed Clinical Education – part V (studentship)

This course is the final in a series of five directed clinical courses. The student will complete the clinical training by practicing all the skills learned in classroom and clinical instruction.

Seventh and Eighth Semester

The internship time period provides the students the opportunity to continue to develop confidence and increased skill in simulation and treatment delivery. Students will demonstrate competence in beginning, intermediate, and advanced procedures in both areas. Students will participate in advanced and specialized treatment procedures. The student will complete the clinical training by practicing all the skills learned in classroom and clinical instruction.

The internship will span at least 06 months (1 semester). This will include 8 hours (min) of practice a day, totaling to 720 hours for one semester assuming 90 working days in a semester. As a part of this, the students will choose a relevant subject and prepare an in-depth project report of not less than 1000 words which will be handed over to the supervisor or trainer. The report can include objective, scope of the project and an in-depth report.

Skills based outcomes and monitorable indicators for Radiation Therapist

Competency statements

1. Demonstrate knowledge to interpret and evaluate a treatment prescription
2. Understands the place of treatment planning processes in RT and performs RTTs role in it (appropriate patient-set-up, immobilization and image scanning with relevant protocols).
3. Communicates relevant information to other members and completes accurate documentation
4. Demonstrates ability to prepare the shielding devices
5. Conducts the simulation and mark-up procedure for all standard treatment techniques
6. Demonstrates ability to carry out the daily organization of the treatment unit
7. Practices accurate treatment documentation
8. Demonstrates ability to interpret, apply and disseminate information as a member of the radiotherapy team
9. Demonstrates professional behaviour
10. Demonstrates a sensitive and caring attitude towards the patient
11. Demonstrates ability to accurately and consistently set-up and treat the patient
12. Demonstrates ability to prepare the patient for their first treatment
13. Evaluates and monitors the patient performance status
14. Monitors, manages and records the patient‘s side effects throughout the course of treatment
15. Advises patient on appropriate nutrition, sexual function, rest, skin care, nausea and other symptoms
16. Demonstrates skill to support and care for the patient during a brachytherapy procedure
17. Demonstrates ability to carry out the necessary data transfer checks

18. Acquires the initial verification images
19. Demonstrates ability to carry out treatment verification as per protocol/under supervision
20. Demonstrates ability to carry out corrective actions as per instructions
21. Follows health and safety procedures
22. Demonstrates ability to interpret, apply and disseminate information as a member of the radiotherapy team
23. Follows necessary radiation protection regulations as per instructions
24. Demonstrates knowledge and skills to carry out the daily patient related QA as per protocols.
25. Participates in research activities

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
1	Be able to interpret and understand the treatment prescription	Identify the area for treatment.	Discuss the tumour stage in the context of treatment	200
		Quantify the practical problems associated with machine and accessory equipment limitations	Accurately deliver the treatment plans	
2	Be able to conduct the simulation and mark-up procedure for all standard treatment techniques	Be familiar with the techniques and equipment used	Analyse the information to prepare the patient for treatment according to departmental protocols	200
		Know the protocols used in the department	Operate the simulation equipment safely and accurately	
			Perform daily QA procedures for simulation equipment and mark-up procedures as per protocol.	
3	Understand the role and importance of treatment planning in the radiotherapy process.	Be familiar with the TPS used	Decide and finalize with other RT team members suitable patient position and appropriate immobilization system. Prepare the patient and perform imaging/ scanning for planning as per protocols.	200
		Know the protocols used in the department	Understand all planning techniques for the clinical site/s	
4	Be able to transfer all relevant information and complete accurate documentation	Recognize the importance of accurate transfer of information to allow for accurate treatment set-up according to the treatment plan and prescription	Construct the most appropriate device for the individual patient within the context of the protocol	100
		Know what should be included	Apply the necessary precautions in production	
		Know the process for workflow for documentation and information	Implement correct QC, storage and handling procedures for shielding devices	
		Be aware of the legal issues relating to documentation		

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
5	Be able to prepare the shielding devices	Know the shielding devices/methods available	Construct the most appropriate device for the individual patient as per the protocol	100
		Know how to use these devices	Apply the necessary precautions in production	
		Recognize the associated health and safety issues	Implement correct QC, storage and handling procedures for immobilization devices	
6	Be able to organize and manage treatment unit	Recognize the importance of team interactions	Participate in the organization of the daily work schedule to maximize efficiency	50
		Explain the principles of effective communication	Inform the patient about the procedure	
		Review the individual patient requirements		
7	Be able to accurately position and immobilize all patients	Discuss the importance of patient identification and how it should be carried out	Interpret the treatment plan and use the equipment accordingly	100
		Be familiar with the treatment plans for all patients on the treatment unit	Identify the patient in accordance with recognized procedures and consistent with the department protocol	
		Identify the co-morbidities that will impact on patient position	Evaluate the patient‘s general condition prior to commencing positioning	
		Recognize the signs and symptoms associated with treatment in different sites	Analyse the information and integrate to define the optimal patient position	
8	Be able to accurately and consistently set-up and treat the patient	Able to interpret the set-up information	Interpret the treatment plan and set-up the patient accordingly	200
		Discuss the importance of reproducible treatment delivery	Work in a team to check setup and treatment parameters and to avoid random errors	
		Be familiar with the treatment plans and techniques for all patients on the treatment unit	Monitor the patient during each treatment	

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
9	Be able to prepare the patient for their first treatment	Be familiar with the treatment plan	Inform and educate the patient as to the treatment procedures	30
		Identify preparatory procedures	Identify and explain the possible side effects to each patient	
			Assess the physical and psychological status of the patient	
			Check all preparatory procedures have been completed	
10	Be able to complete accurate treatment documentation	Recognize the importance of accurate documentation	Complete the treatment documentation accurately	50
		Know what should be included	Ensure all legal requirements have been met	
		Be aware of the legal issues relating to treatment documentation		
11	Be able to evaluate the patient performance status	Identify the systems used for evaluation of performance status	Assess the patient performance status in view of their diagnosis and comorbidities according to institutional guidelines	50
12	Be able to monitor, manage and record the patient‘s side effects throughout the course of treatment	Identify the side effects associated with the individual treatment	Assess the daily physical and psychological status of the patient prior to treatment	50
		Define the effects of concomitant treatment	Record all side effects and any intervention recommended	
		Be familiar with the follow up procedures		
		List support groups that might benefit patients		
13	Advise patient on appropriate nutrition, sexual function, rest, skin care, nausea and other symptoms	Explain the impact of nutritional status on patient tolerance of treatment	Assess the patient‘s nutritional status	50

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
14	Be able to support and care for the patient during a brachytherapy procedure	Be familiar with the treatment procedure	Inform and educate the patient as to the treatment procedure	50
		Identify preparatory procedures	Identify and explain the possible side effects to each patient	
		Know what patient care is relevant for the procedure	Assess the physical and psychological status of the patient	
15	Be able to carry out the necessary data transfer checks	Define and explain the data that must be transferred	Check and verify all treatment parameters	50
			Confirm approval and signatures	
16	Be able to acquire the initial verification images	Explain the different modalities/ methods used to generate verification images	Select the correct settings for imaging	50
			Acquire an appropriate image as per instructions	
17	Be able to carry out treatment verification	Distinguish between systematic and random errors and understand the geometric errors	Compare and contrast bony anatomy and soft tissue matching	50
18	Be able to carry out corrective actions as per instructions	Recognize the critical structures on the verification images	Make corrections in accordance with the protocol/under supervision	50
		Identify the correct imaging protocol	Record any corrections	
19	Be able to check the dose delivered	Understand the Identify the relationship between the prescribed dose, the entrance and exit dose and the dose level of critical organs to the monitor unit or timer setting	Carry out in vivo dosimetry as per the protocol under supervision	50
20	Be able to follow health and safety procedures	Understand the health and safety features/procedures	Assess the safety features and adhere to the same	50

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
21	Be able to interpret, apply and disseminate information as a member of the radiotherapy team	Define and explain the data that must be disseminated	Identify the appropriate personnel to whom specific information should be disseminated	50
			Communicate the correct, relevant and appropriate information	
22	Be able to demonstrate professional behaviour	Explain the legal and ethical guidelines related to the profession	Practice in accordance with legislation regulations and ethical guidelines	200
		Be aware of your own competency levels	Promote collaborative practice	
		Identify the elements that reflect professional appearance and manner		
23	Be able to demonstrate a sensitive and caring attitude to patients	Explain the components of good communication	Self-awareness of their own personality traits	50
		Describe the main personality types	Analyse how the differences in personality influence approach	
		Be aware of the patient‘ gender, age, cultural background, educational level and social situation		
24	Be able to ensure radiation protection legislation is adhered to	Describe the radiation hazards and how they are managed	Routinely inspect the area to ensure that radiation protection measures are in place and functional	50
		Explain the legislation relating to radiation protection		
25	Be able to carry out the daily/weekly Quality Control (QC) checks of patient and related data	Explain Quality management System (QMS), Quality Assurance (QA) and Quality Control (QC)	Perform the daily/weekly QC procedures related to patient treatment data	50
26	Be able to review the literature	Define search terms for specific treatment sites	Identify the appropriate literature in the area of interest	30
27	Be able to follow research findings	Identify relevant sources of Research	Evaluate research with respect to current departmental practice	10

Sl no	Learning outcomes	Knowledge/ Comprehension	Applications / Synthesis /Evaluation	Hours
28	Be able to successfully undertake project work.	Identify literature to support research proposal	Review the literature in the area	10
		Be involved in ways to define the necessary steps in preparing and carrying out research	Help in formulating a research question	
	Total Hours			2180

(S-1)Reference Textbooks;-

Introduction to Healthcare Delivery System in India

- Hospital Administration and Management – S.L. Goel
- Public Health and Preventive Medicine – K. Park

Basic Computers & Information Science

- Fundamentals of Computers – V. Rajaraman
- Computer Fundamentals – P.K. Sinha

Communication & Soft Skills

- Communication Skills for Professionals – Koneru Aruna
- Soft Skills – S.P. Dhanavel

Medical Terminology & Record Keeping

- Medical Terminology: A Short Course – Davi-Ellen Chabner
- Health Information Management – Kathleen LaTour

Medical Law & Ethics

- Medical Ethics – C.M. Francis
- Textbook of Medical Jurisprudence and Toxicology – K.S. Narayan Reddy

Quality & Patient Safety

- Hospital Infection Control – C.G. Mayhall
- Patient Safety and Healthcare Improvement – Charles Vincent

Professionalism & Values

- Professionalism in Healthcare – Jill Thistlethwaite

Biostatistics & Research Methodology

- Biostatistics for Medical Students – B.K. Mahajan
- Research Methodology – Kothari

Principles of Management

- Principles of Management – P.C. Tripathi

(S-2)Reference Textbooks:-

Elementary Mathematics & Physics

- Basic Physics – B.L. Theraja
- Mathematics for Medical Applications – J. Bird

Human Anatomy & Physiology

- Textbook of Anatomy and Physiology – Ross & Wilson
- Human Anatomy – B.D. Chaurasia

Radiographic Anatomy

- Radiographic Imaging and Exposure – Terri L. Fauber
- Sectional Anatomy for Imaging Professionals – Lorrie L. Kelley

Oncology Science – I

- Cancer: Principles and Practice of Oncology – DeVita
- Basic Clinical Radiobiology – Steel

Principles of Radiotherapy

- Radiotherapy in Practice – David Duxbury
- Walter and Miller's Textbook of Radiotherapy – Bomford

Radiation Quantities & Measurement

- Radiation Detection and Measurement – Glenn F. Knoll

(S-3)Reference Textbooks;-

Basic Radiation Physics

- Introduction to Radiological Physics – Frank Herbert Attix
- The Physics of Radiology – Harold Johns

Oncology Science – II

- Oxford Handbook of Oncology – Jim Cassidy

Radiotherapy Equipment – I

- Radiation Oncology Physics – Hendee & Ibbott

Radiation Safety

- Radiation Protection in Medical Radiography – Mary Alice Statkiewicz

Patient Care & Positioning

- Patient Care in Radiography – Ehrlich & Coakes

(S-4)Reference Textbooks;-

Radiotherapy Equipment – II

- Medical Imaging Physics – William R. Hendee

Quality Assurance in Radiotherapy

- Quality Assurance in Radiotherapy – Faiz M. Khan

Basic Radiotherapy Physics

- The Physics of Radiation Therapy – Faiz M. Khan

Biological Effects of Radiation

- Radiobiology for the Radiologist – Eric Hall

(S-5)Reference Textbooks;-

Clinical Radiobiology

- Basic Clinical Radiobiology – Joiner & van der Kogel

Mould Room / Motion Management

- Practical Radiotherapy Planning – Dobbs & Barrett

Special RT Techniques

- IMRT, IGRT, SBRT Techniques – Steve Webb

(S-6)Reference Textbooks;-

Imaging in Radiotherapy Planning

- MRI in Practice – Catherine Westbrook
- CT and MRI Pathology – Hricak

Radiotherapy Treatment Delivery

- Radiation Therapy Planning – Gunilla C. Bentel

Operational Issues in RT

- Radiation Oncology Management Decisions – K.K. Ang