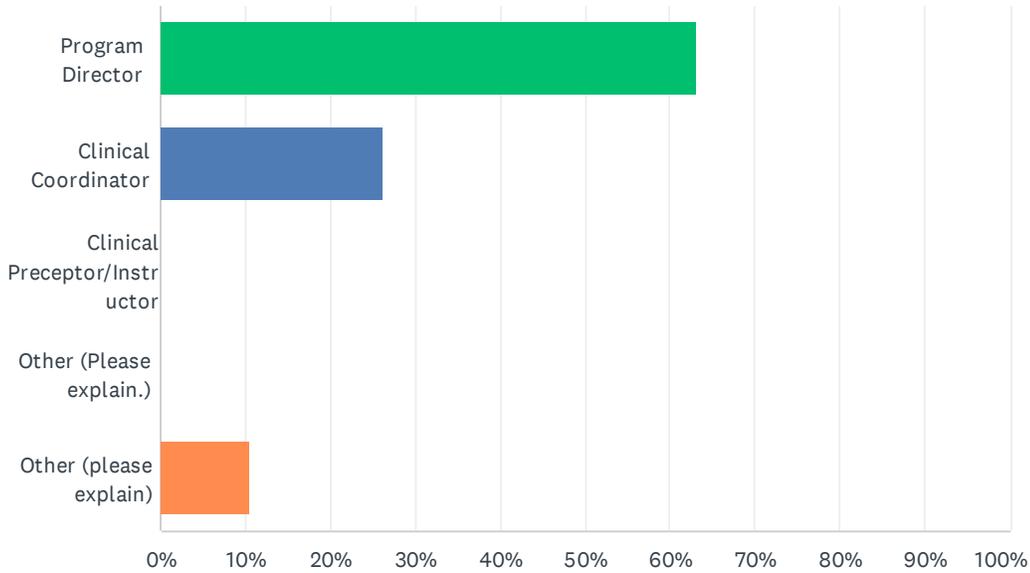


## Q1 Position in program

Answered: 19 Skipped: 0

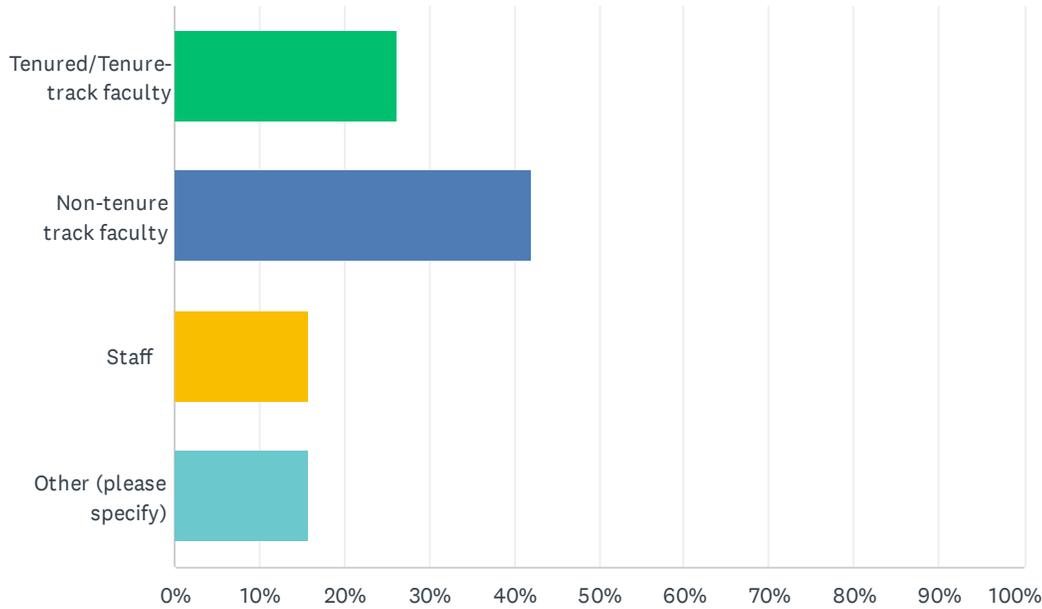


ANSWER CHOICES	RESPONSES	
Program Director	63.16%	12
Clinical Coordinator	26.32%	5
Clinical Preceptor/Instructor	0.00%	0
Other (Please explain.)	0.00%	0
Other (please explain)	10.53%	2
<b>TOTAL</b>		<b>19</b>

#	OTHER (PLEASE EXPLAIN)	DATE
1	Dosi Manager and point person/liaison for school	
2	Associate Director of Center	

## Q2 Type of appointment

Answered: 19 Skipped: 0

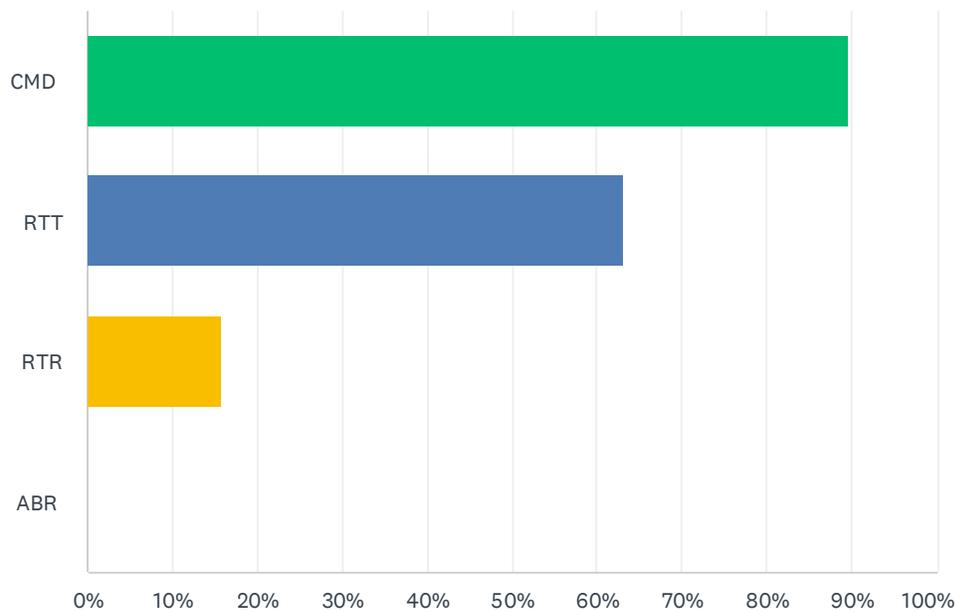


ANSWER CHOICES	RESPONSES
Tenured/Tenure-track faculty	26.32% 5
Non-tenure track faculty	42.11% 8
Staff	15.79% 3
Other (please specify)	15.79% 3
<b>TOTAL</b>	<b>19</b>

#	OTHER (PLEASE SPECIFY)	DATE
1	Chief Dosimetrist	
2	Administrator of Clinical site	
3	Hospital based certificate program	

### Q3 What certifications do you hold? (Select all that apply.)

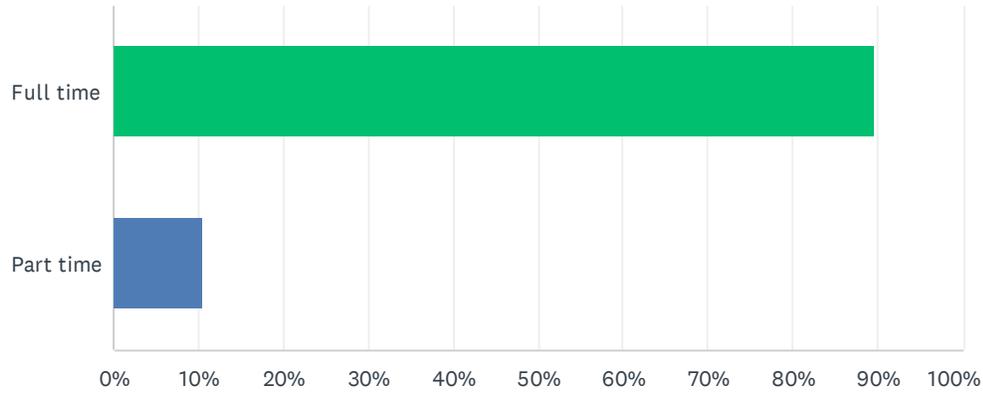
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
CMD	89.47%	17
RTT	63.16%	12
RTR	15.79%	3
ABR	0.00%	0
Total Respondents: 19		

## Q4 Are you full time or part time?

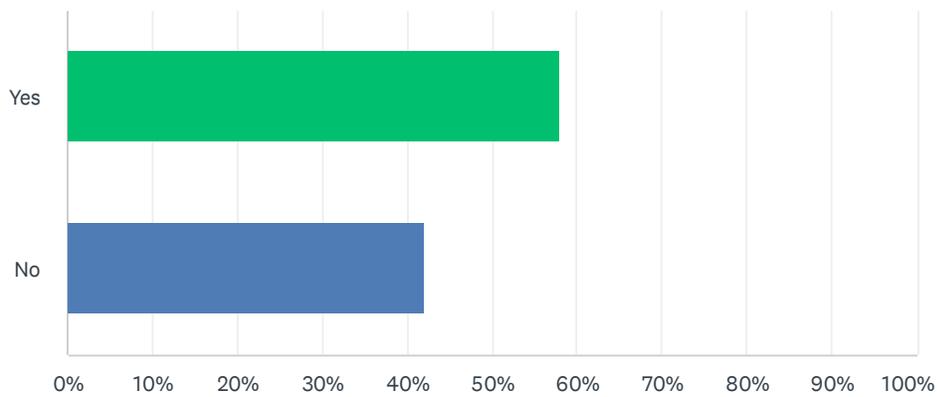
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Full time	89.47%	17
Part time	10.53%	2
TOTAL		19

## Q5 Are you a practicing clinical dosimetrist?

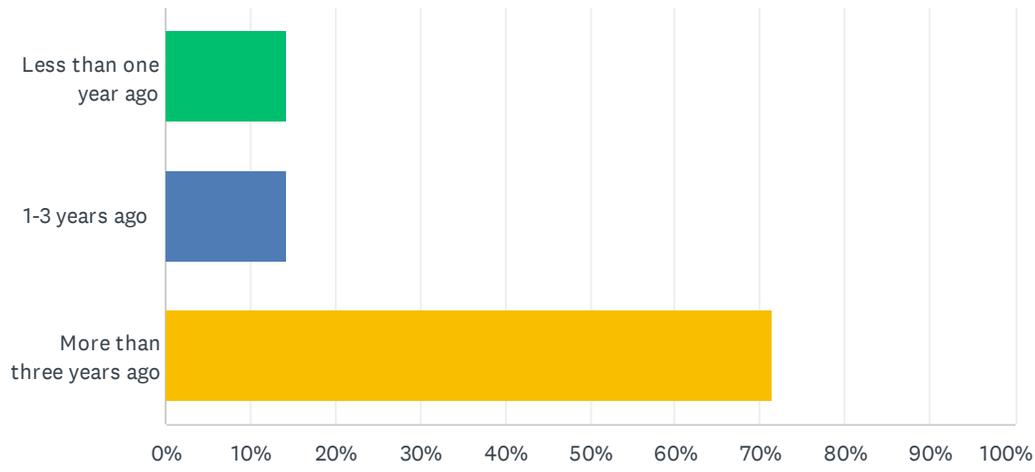
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	57.89%	11
No	42.11%	8
<b>TOTAL</b>		<b>19</b>

## Q6 If answered no to Question 5, when did you leave the clinic?

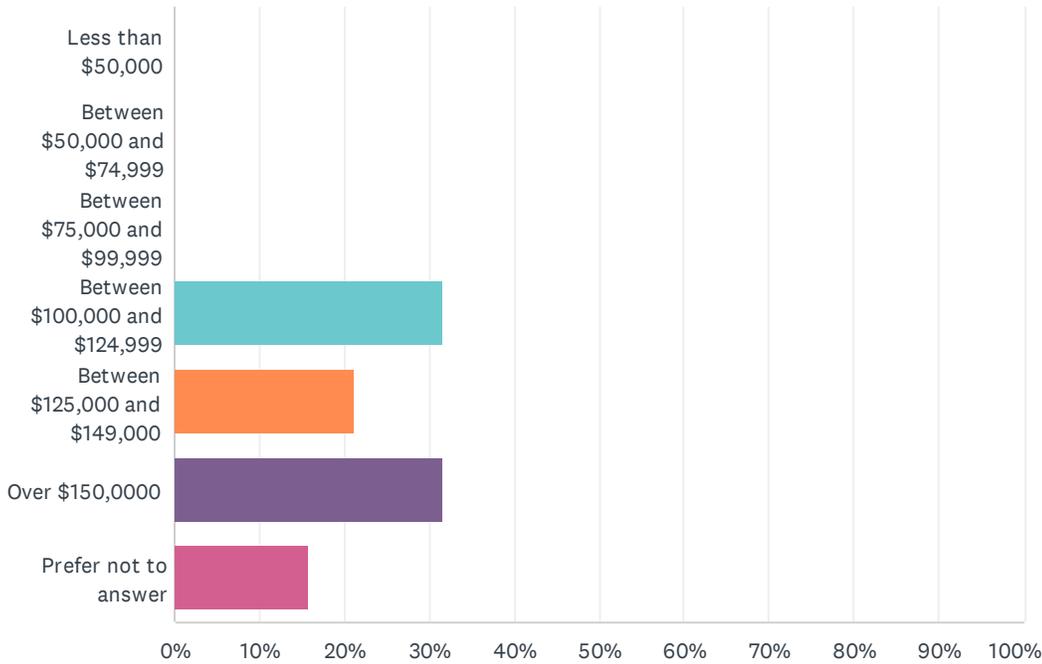
Answered: 7 Skipped: 12



ANSWER CHOICES	RESPONSES
Less than one year ago	14.29% 1
1-3 years ago	14.29% 1
More than three years ago	71.43% 5
TOTAL	7

### Q7 Please select the salary range that best fits your total annual income from your primary employer in 2024, excluding benefits.

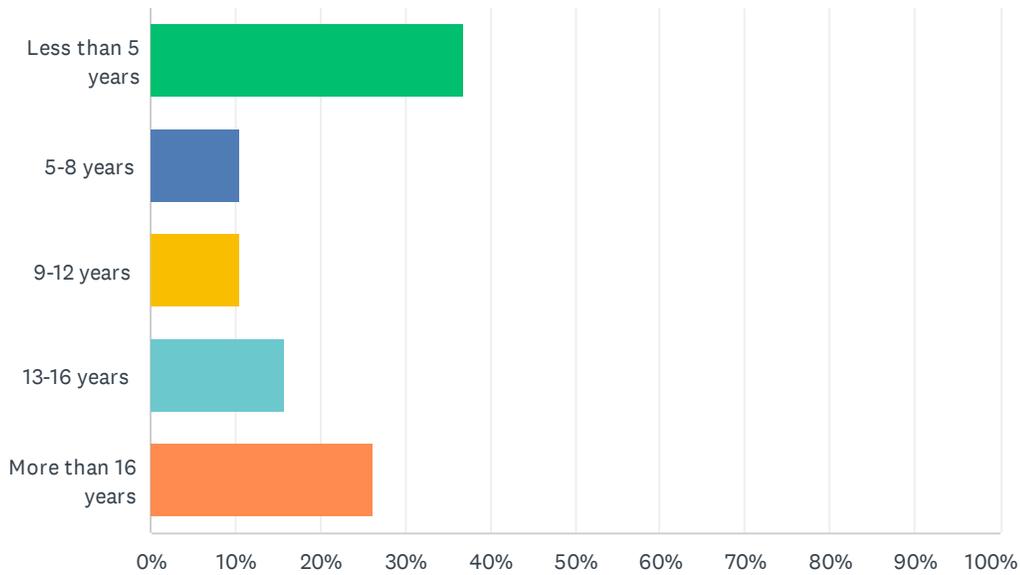
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Less than \$50,000	0.00%	0
Between \$50,000 and \$74,999	0.00%	0
Between \$75,000 and \$99,999	0.00%	0
Between \$100,000 and \$124,999	31.58%	6
Between \$125,000 and \$149,000	21.05%	4
Over \$150,000	31.58%	6
Prefer not to answer	15.79%	3
<b>TOTAL</b>		<b>19</b>

### Q8 Please indicate the number of years you've held your current position.

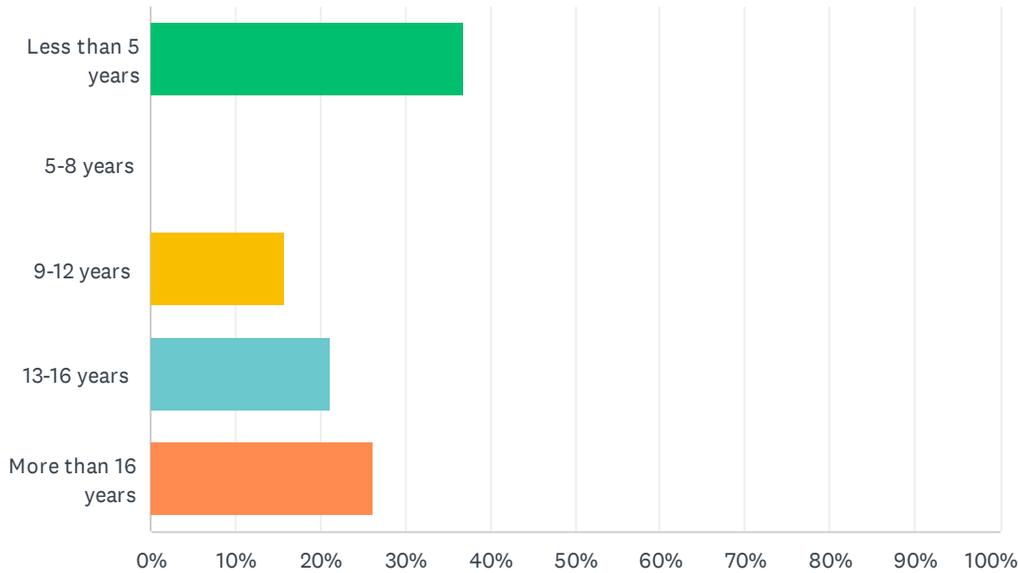
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Less than 5 years	36.84%	7
5-8 years	10.53%	2
9-12 years	10.53%	2
13-16 years	15.79%	3
More than 16 years	26.32%	5
<b>TOTAL</b>		<b>19</b>

### Q9 How long have you been working in education (instruction in didactic or clinical settings)?

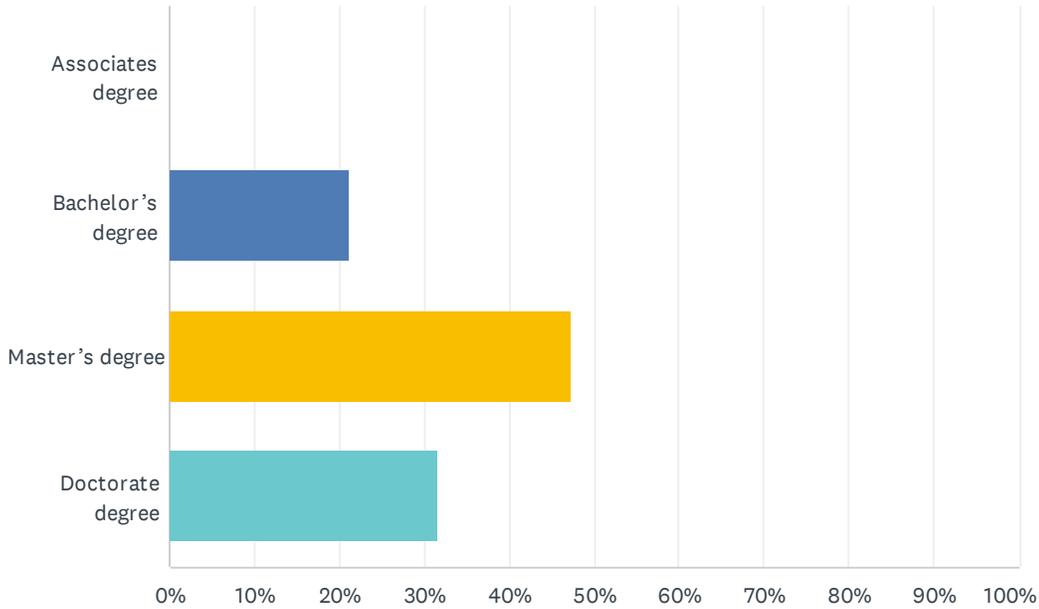
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Less than 5 years	36.84%	7
5-8 years	0.00%	0
9-12 years	15.79%	3
13-16 years	21.05%	4
More than 16 years	26.32%	5
<b>TOTAL</b>		<b>19</b>

### Q10 Please select your highest degree attained.

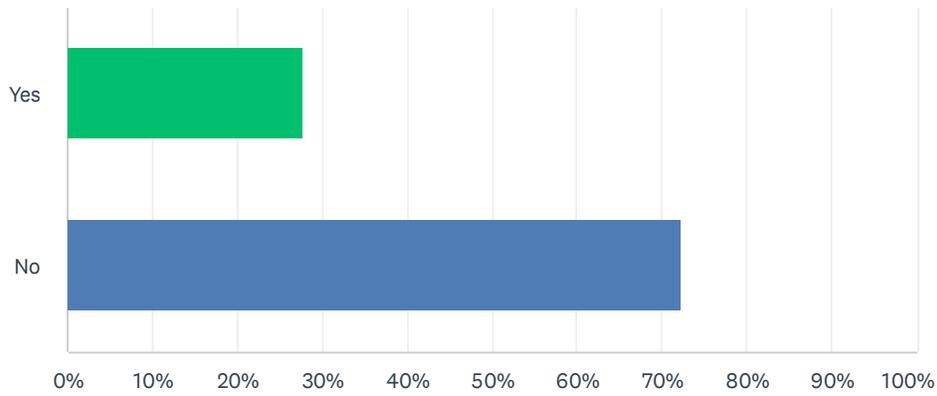
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES
Associates degree	0.00% 0
Bachelor's degree	21.05% 4
Master's degree	47.37% 9
Doctorate degree	31.58% 6
<b>TOTAL</b>	<b>19</b>

### Q11 Are you currently pursuing or plan to pursue an advanced degree?

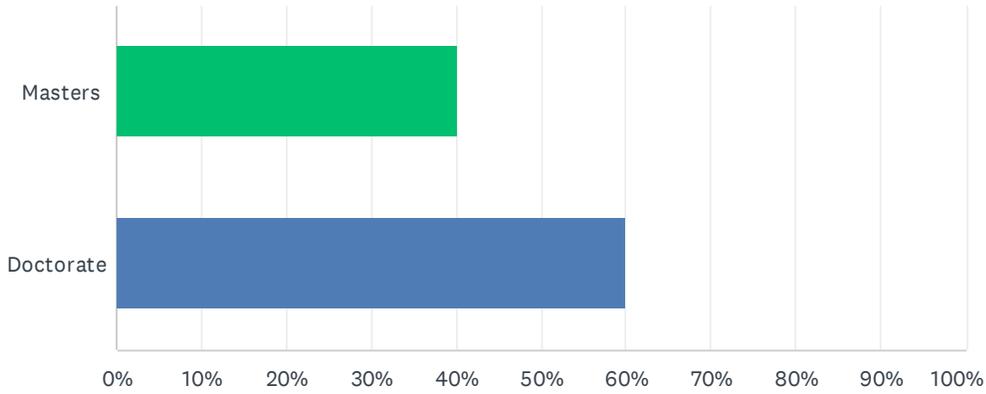
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	27.78%	5
No	72.22%	13
TOTAL		18

### Q12 If yes to pursuing an advanced degree, what type of degree?

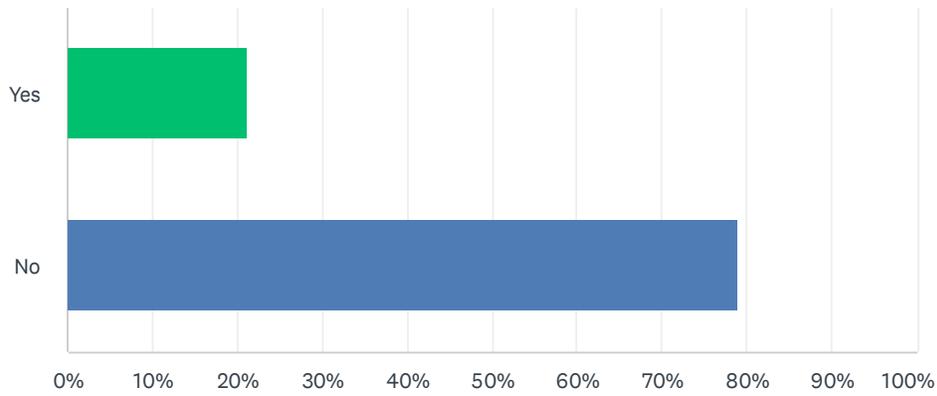
Answered: 5 Skipped: 14



ANSWER CHOICES	RESPONSES	
Masters	40.00%	2
Doctorate	60.00%	3
TOTAL		5

### Q13 Are you planning on leaving your position in the next five years?

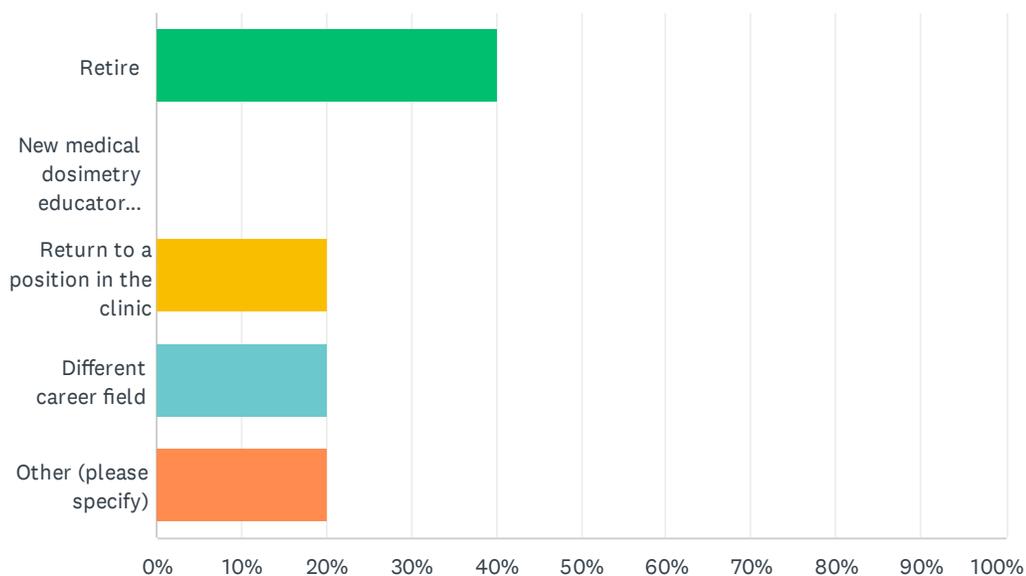
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	21.05%	4
No	78.95%	15
TOTAL		19

### Q14 If yes, why are you leaving your position in the next five years?

Answered: 5 Skipped: 14

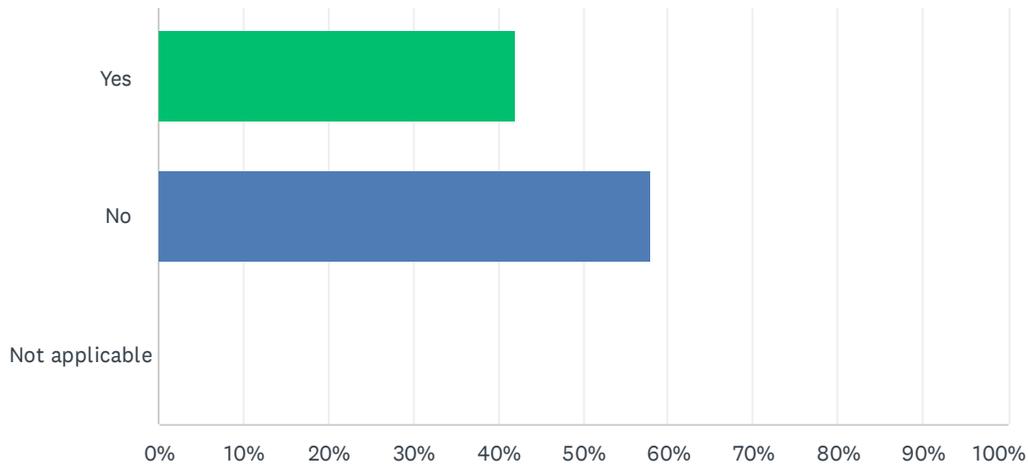


ANSWER CHOICES	RESPONSES	
Retire	40.00%	2
New medical dosimetry educator position	0.00%	0
Return to a position in the clinic	20.00%	1
Different career field	20.00%	1
Other (please specify)	20.00%	1
<b>TOTAL</b>		<b>5</b>

#	OTHER (PLEASE SPECIFY)	DATE
1	I wasn't planning to leave but starting to consider it due to budget cuts to education and our program	

## Q15 Does your employer expect you to conduct research and to publish?

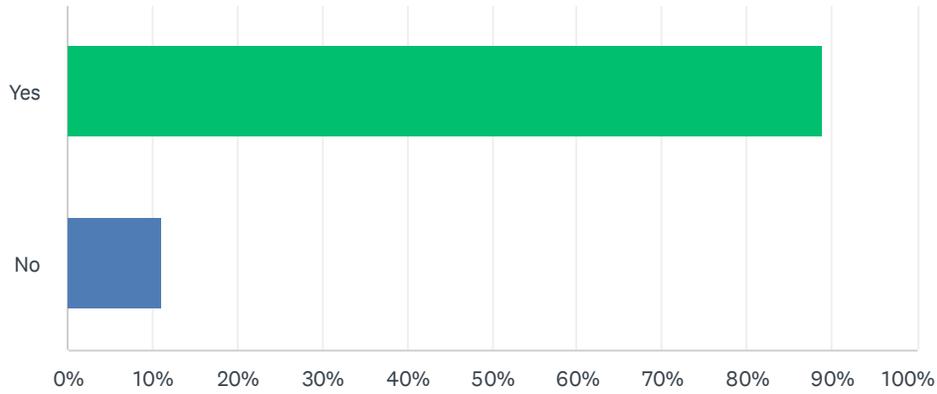
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	42.11%	8
No	57.89%	11
Not applicable	0.00%	0
<b>TOTAL</b>		<b>19</b>

### Q16 Are you an AAMD member?

Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	88.89%	16
No	11.11%	2
TOTAL		18

## Q17 If no, why are you not an AAMD member?

Answered: 1 Skipped: 18

#	RESPONSES	DATE
1	Current with ASRT, but will renew next year	

## Q18 What can the AAMD do to help or advocate for medical dosimetry educators?

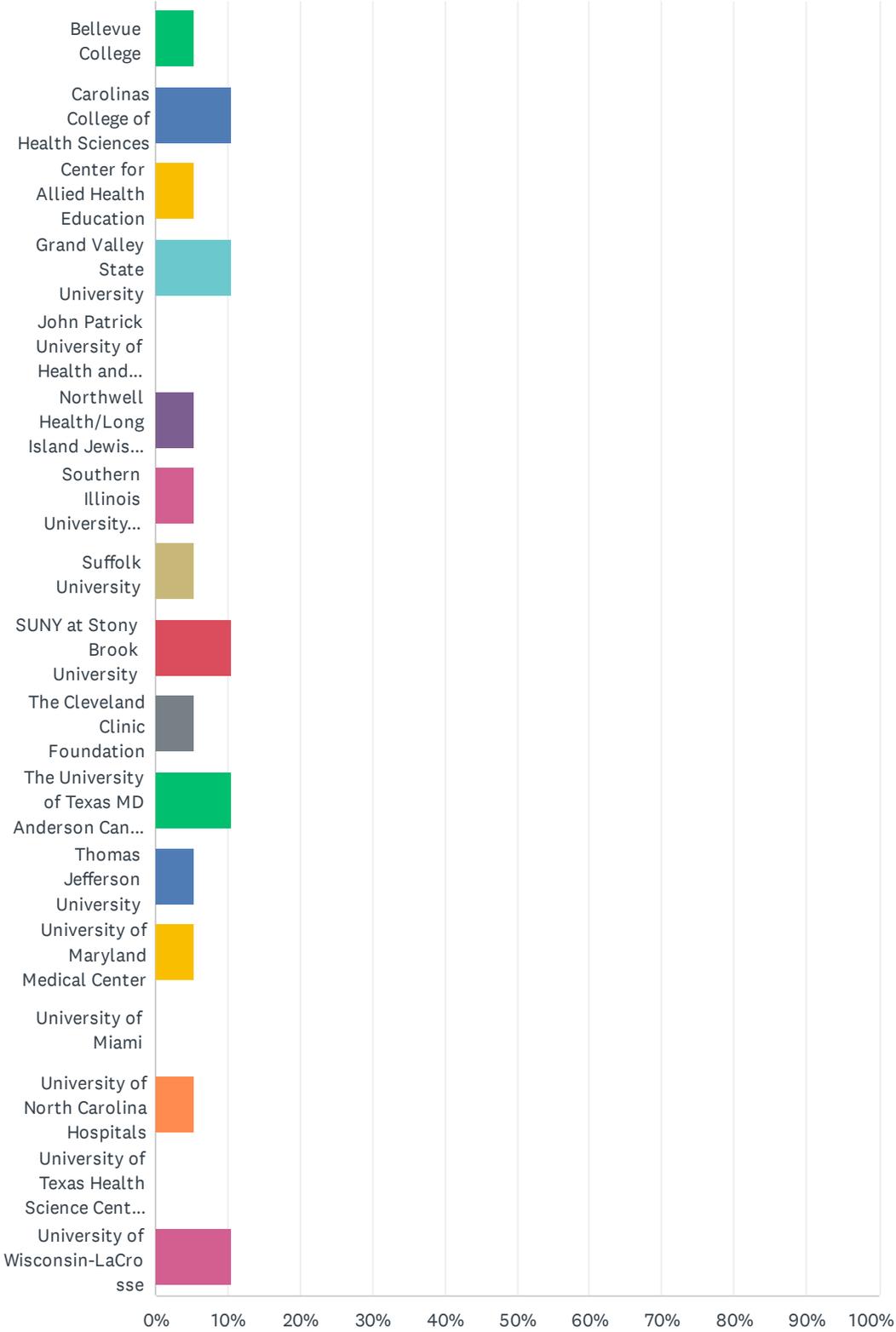
Answered: 11 Skipped: 8

#	RESPONSES	DATE
1	Help to quantify the financial cost/value of a clinical coordinator	
2	The call for clinical sites was extremely helpful! I wonder if some videos or material could be created exploring what it is like being an instructor/preceptor. This will vary a bit program to program but it might be helpful for those considering but worried about the commitment. It could also highlight benefits, etc. I think more resources on the different TPS programs would be helpful also. There are some in the student resources but having more or ones that are more specific could be beneficial to students who only see one program.	
3	Overall, a salary survey would be helpful for educators specifically	
4	A dedicated salary survey for medical dosimetry educators would help ensure that new faculty are hired at appropriate and competitive salary levels. We often hear that educators earn less than clinical dosimetrists, which poses a challenge for recruitment. Having a salary survey focused specifically on educators would provide administrators with the data needed to advocate for fair and equitable compensation. Also, it would help if the programs can use AAMD website to advertise for their new programs or offerings at very low rate. Another help is providing information about medical dosimetry (video about their roles, interview with dosimetrists, podcasts, etc.) so programs can refer applicants to learn more about the field and the role of medical dosimetrists.	
5	encourage dosimetrists to continue to education and become clinical sites. Also, push a hybrid work model and not fully remote.	
6	advocate for high demand stipend to supplement pay difference between healthcare and education. Promote the idea of becoming an educator.	
7	Provide research grants	
8	It would be interesting to have some dedicated webinars on the AAMD webpage that are geared towards new medical dosimetry educators, similar to how there are webinars for new students in the field. Any information on what to expect for JRCERT accreditation site visits, self-study reports, etc. would be extremely helpful.	
9	(1) We need help advocating for higher salaries. (2) Free TPS training from the vendors (win-win for all parties involved). 3. Continue spreading the word about the need for clinical placement sites.	
10	pay	
11	Continue to provide educational (CE) opportunities that are relevant to educators	

**Q19 What medical dosimetry education program are you affiliated with?**  
**\*\*Please note, none of the survey responses will be associated or identified with an individual program.\*\***

Answered: 19 Skipped: 0

# 2025 Med Dos Educators Survey

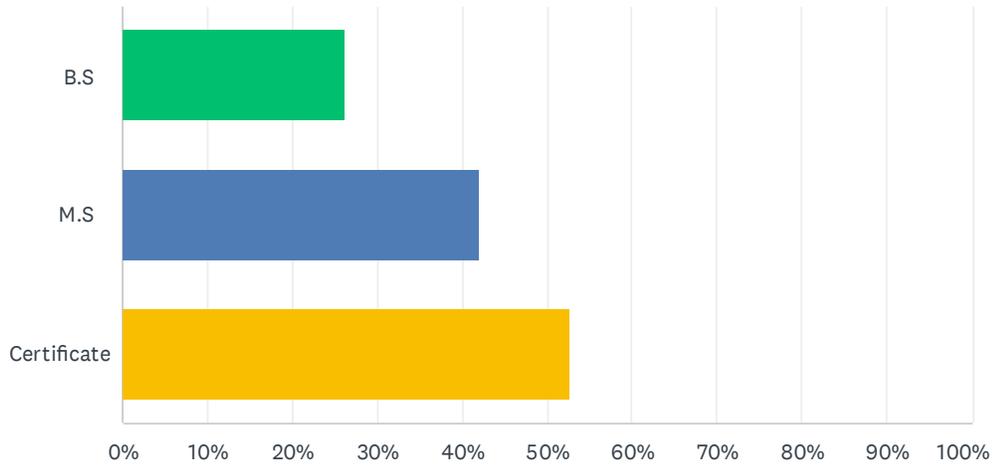


## 2025 Med Dos Educators Survey

ANSWER CHOICES	RESPONSES	
Bellevue College	5.26%	1
Carolinas College of Health Sciences	10.53%	2
Center for Allied Health Education	5.26%	1
Grand Valley State University	10.53%	2
John Patrick University of Health and Applied Sciences	0.00%	0
Northwell Health/Long Island Jewish Medical Center	5.26%	1
Southern Illinois University Carbondale	5.26%	1
Suffolk University	5.26%	1
SUNY at Stony Brook University	10.53%	2
The Cleveland Clinic Foundation	5.26%	1
The University of Texas MD Anderson Cancer Center	10.53%	2
Thomas Jefferson University	5.26%	1
University of Maryland Medical Center	5.26%	1
University of Miami	0.00%	0
University of North Carolina Hospitals	5.26%	1
University of Texas Health Science Center at San Antonio	0.00%	0
University of Wisconsin-LaCrosse	10.53%	2
<b>TOTAL</b>		<b>19</b>

### Q20 What type(s) of degree(s) does your program offer? Select all that apply.

Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES
B.S	26.32% 5
M.S	42.11% 8
Certificate	52.63% 10
Total Respondents: 19	

## Q21 How many students are you approved by JRCERT to enroll at any one time in your program?

Answered: 18 Skipped: 1

#	RESPONSES	DATE
1	4	
2	28	
3	~24	
4	5	
5	50	
6	15	
7	40	
8	50	
9	14	
10	10	
11	2	
12	15	
13	15	
14	16	
15	37	
16	4	
17	40	
18	10	

## Q22 What is the average number of students you enroll at any one time?

Answered: 19 Skipped: 0

#	RESPONSES	DATE
1	2	
2	50	
3	20	
4	? we take 1-2 students at our sites each year	
5	3	
6	30-35	
7	5	
8	35	
9	35	
10	12	
11	5	
12	2	
13	10	
14	8	
15	16	
16	28	
17	2	
18	40	
19	6	

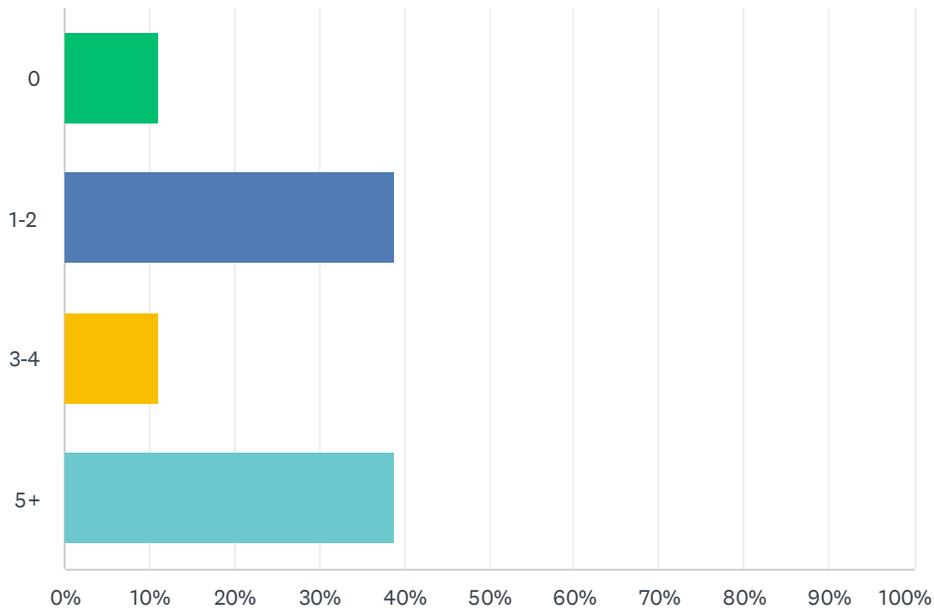
## Q23 How many full-time faculty are in your program?

Answered: 17 Skipped: 2

#	RESPONSES	DATE
1	46	
2	2	
3	2	
4	2?	
5	2	
6	2	
7	2	
8	2	
9	unfortunately zero at this time, we have been actively recruiting to fill an approved full time position since Dec 2024	
10	1	
11	1	
12	4	
13	1	
14	1	
15	1	
16	3	
17	1	

## Q24 How many part-time/adjunct faculty are in your program?

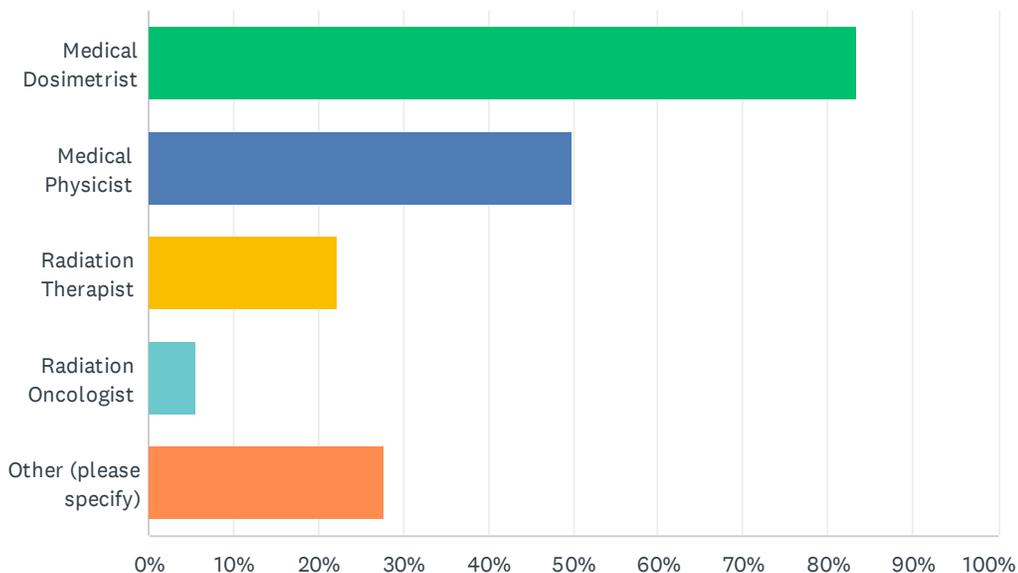
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
0	11.11%	2
1-2	38.89%	7
3-4	11.11%	2
5+	38.89%	7
TOTAL		18

## Q25 Please indicate the positions held by part-time faculty. Select all that apply.

Answered: 18 Skipped: 1

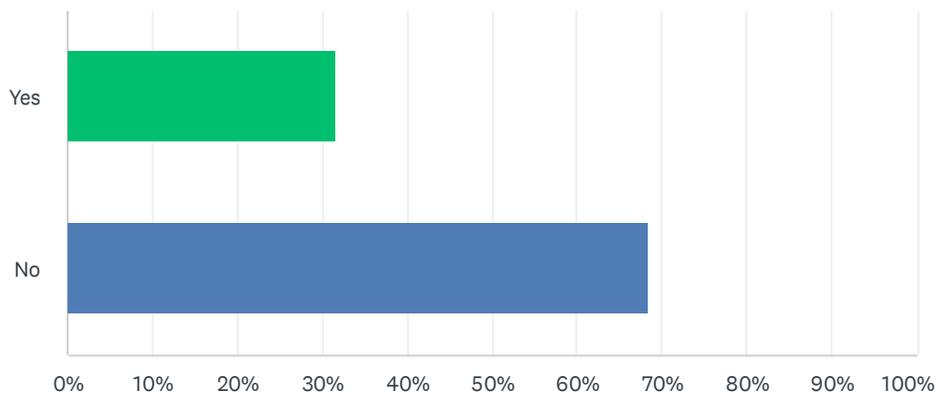


ANSWER CHOICES	RESPONSES
Medical Dosimetrist	83.33% 15
Medical Physicist	50.00% 9
Radiation Therapist	22.22% 4
Radiation Oncologist	5.56% 1
Other (please specify)	27.78% 5
Total Respondents: 18	

#	OTHER (PLEASE SPECIFY)	DATE
1	we have research advisors that are adjunct. Other than that it is a physicist for our research course and a dosimetrist for our dosimetry labs.	
2	Radiobiologist	
3	Director of Med Phys; Radiographer	
4	CT Technologist, Radiation Oncology Nurse	
5	Medical Dosimetrist Manager	

## Q26 Do you require applicants to have a radiation therapy background?

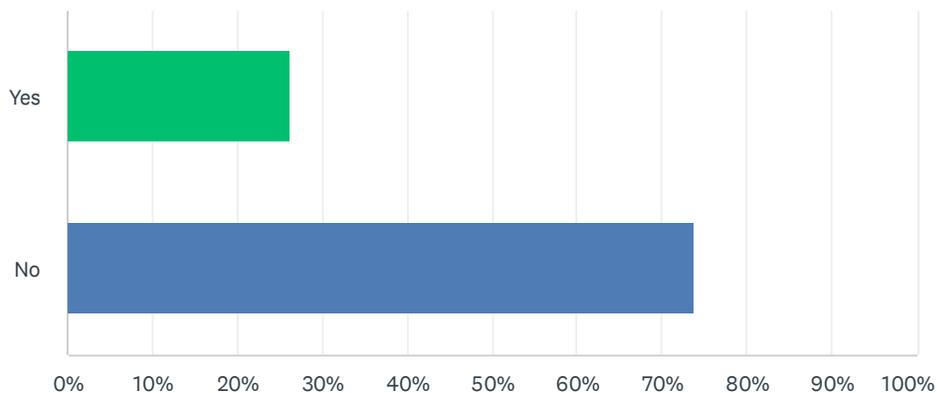
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	31.58%	6
No	68.42%	13
TOTAL		19

## Q27 Do you require applicants to shadow medical dosimetrists?

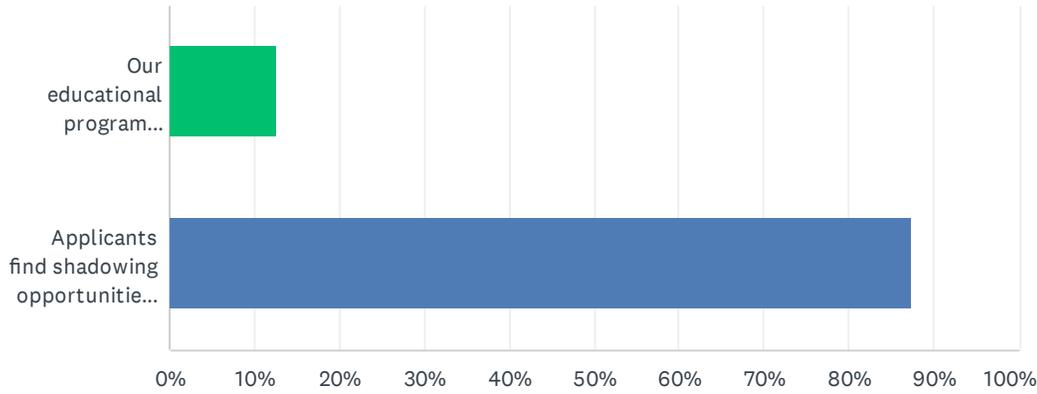
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	26.32%	5
No	73.68%	14
TOTAL		19

## Q28 If yes, how do applicants find shadowing opportunities?

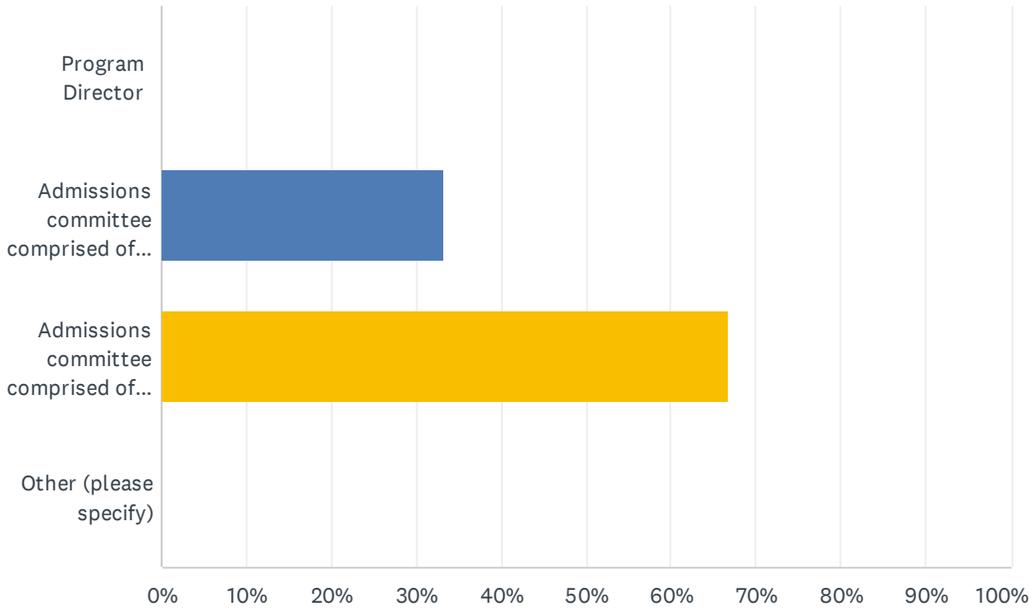
Answered: 8 Skipped: 11



ANSWER CHOICES	RESPONSES	
Our educational program coordinates/provides shadowing	12.50%	1
Applicants find shadowing opportunities themselves	87.50%	7
<b>TOTAL</b>		<b>8</b>

## Q29 Who selects new students from the applicant pool?

Answered: 18 Skipped: 1

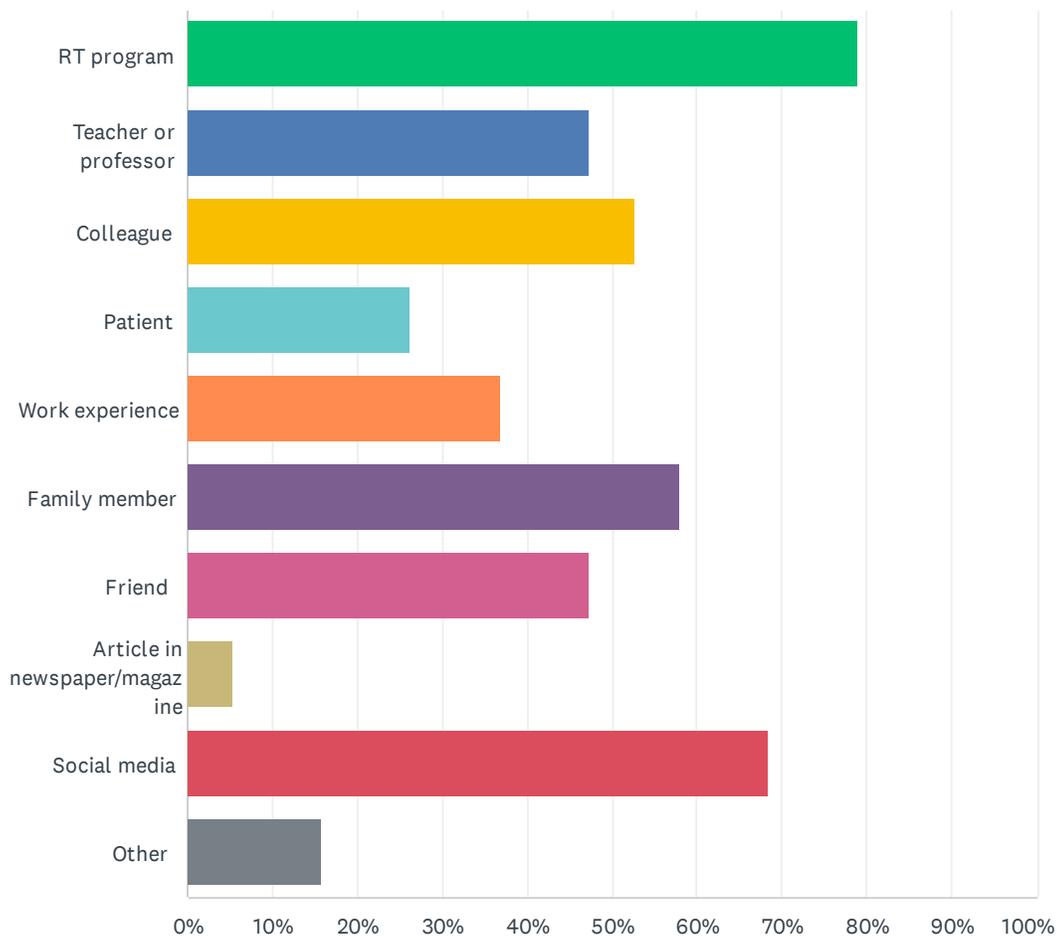


ANSWER CHOICES	RESPONSES	
Program Director	0.00%	0
Admissions committee comprised of program faculty	33.33%	6
Admissions committee comprised of program faculty and clinical site representatives	66.67%	12
Other (please specify)	0.00%	0
<b>TOTAL</b>		<b>18</b>

#	OTHER (PLEASE SPECIFY)	DATE
	There are no responses.	

### Q30 How do your applicants typically learn about dosimetry? Select all that apply.

Answered: 19 Skipped: 0

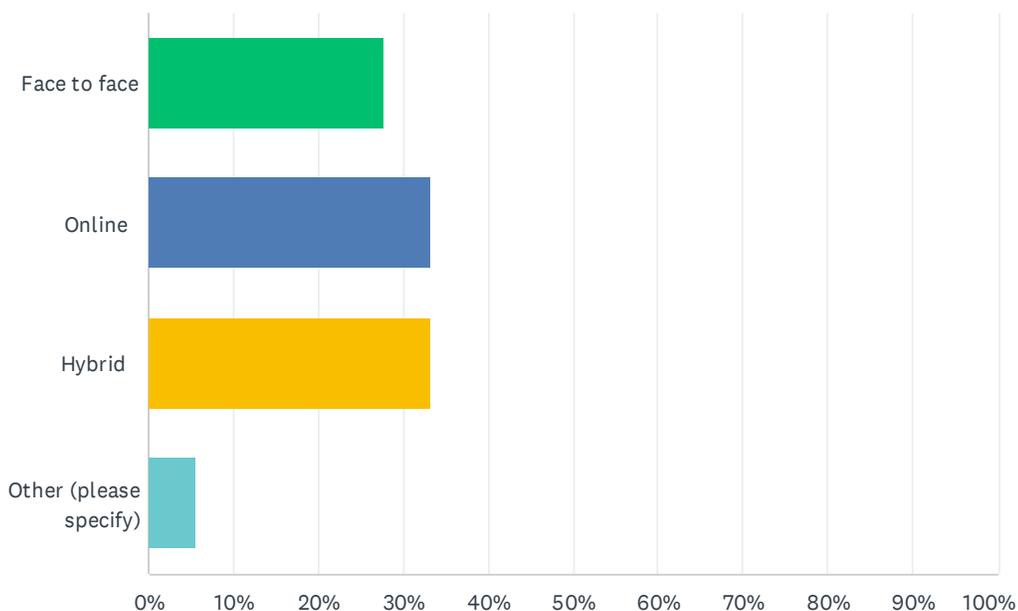


## 2025 Med Dos Educators Survey

ANSWER CHOICES	RESPONSES	
RT program	78.95%	15
Teacher or professor	47.37%	9
Colleague	52.63%	10
Patient	26.32%	5
Work experience	36.84%	7
Family member	57.89%	11
Friend	47.37%	9
Article in newspaper/magazine	5.26%	1
Social media	68.42%	13
Other	15.79%	3
Total Respondents: 19		

### Q31 What is your program's current mode of didactic instruction?

Answered: 18 Skipped: 1

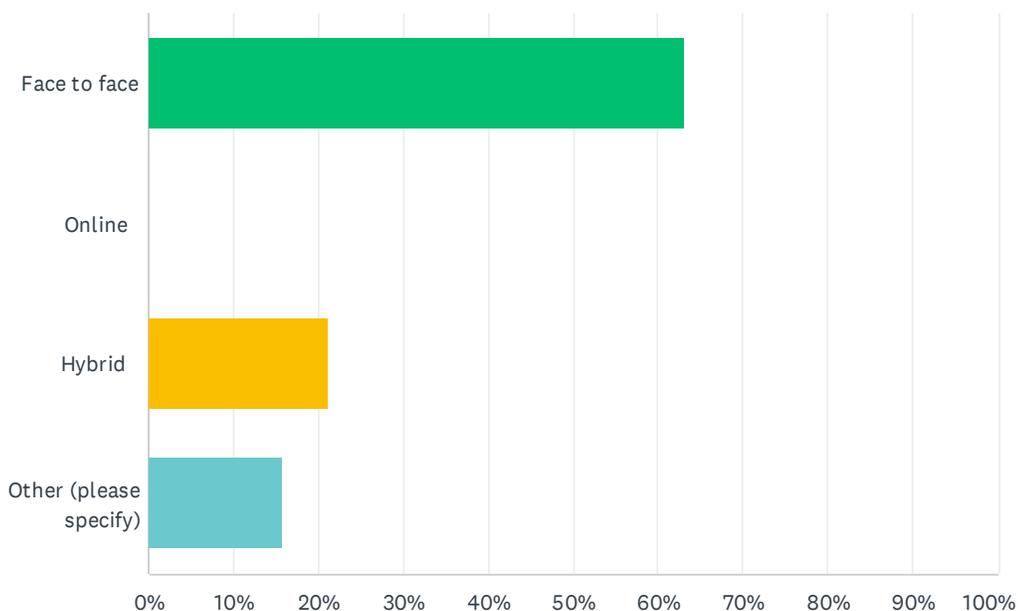


ANSWER CHOICES	RESPONSES
Face to face	27.78% 5
Online	33.33% 6
Hybrid	33.33% 6
Other (please specify)	5.56% 1
<b>TOTAL</b>	<b>18</b>

#	OTHER (PLEASE SPECIFY)	DATE
1	both face to face and hybrid. Also, online synchronous and asynchronous	

## Q32 What is your program's current mode of clinical instruction?

Answered: 19 Skipped: 0

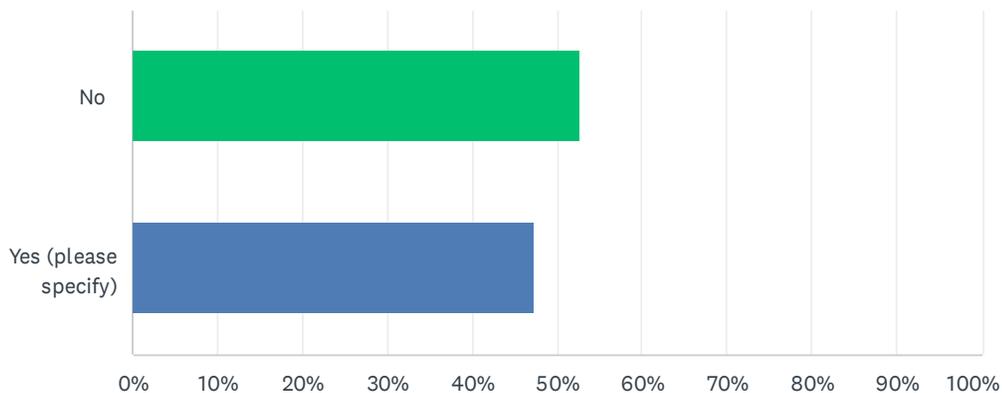


ANSWER CHOICES	RESPONSES
Face to face	63.16% 12
Online	0.00% 0
Hybrid	21.05% 4
Other (please specify)	15.79% 3
<b>TOTAL</b>	<b>19</b>

#	OTHER (PLEASE SPECIFY)	DATE
1	both face to face and online/hybrid	
2	Up to one third of clinical may be remote with permission	
3	Mostly F2F but a couple clinics are hybrid.	

### Q33 Does your program offer specialty courses (i.e., carbon ion, protons, etc.)?

Answered: 19 Skipped: 0

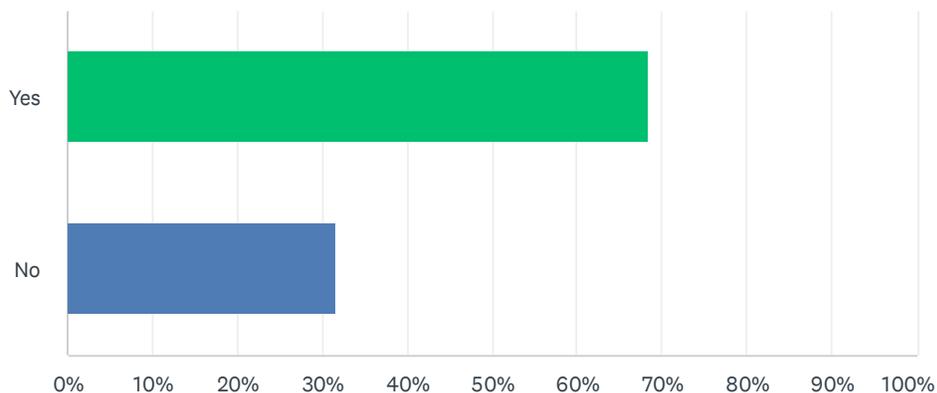


ANSWER CHOICES	RESPONSES
No	52.63% 10
Yes (please specify)	47.37% 9
<b>TOTAL</b>	<b>19</b>

#	YES (PLEASE SPECIFY)	DATE
1	Protons	
2	Protons, brachy, GammaKnife	
3	protons	
4	proton planning in a laboratory environment	
5	Content is built into the current course structure. There are no courses dedicated specifically to these topics.	
6	protons, brachy, AI, sensitive practice, mrl, rapidplan, etc	
7	Protons	
8	protons	
9	The do one week at gamma knife and proton	

### Q34 Does your educational program have access to a treatment planning system (TPS) outside of your clinical rotations for use in didactic or laboratory exercises?

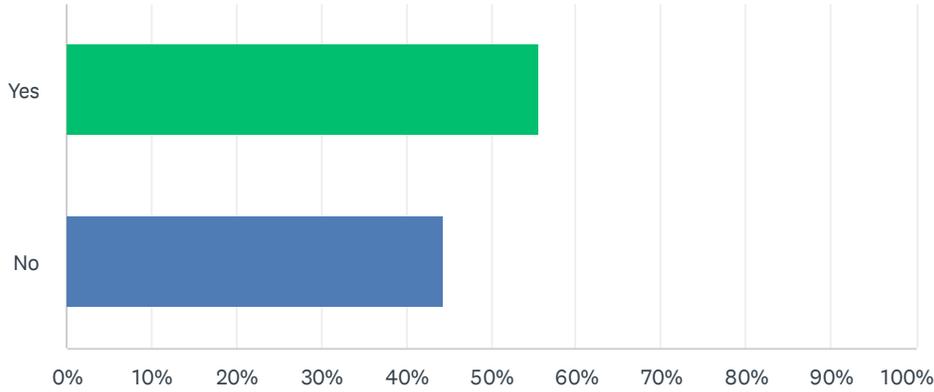
Answered: 19 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	68.42%	13
No	31.58%	6
TOTAL		19

### Q35 Does your educational program have a stated policy concerning the appropriate or allowed use of artificial intelligence (AI) in academic and clinical coursework?

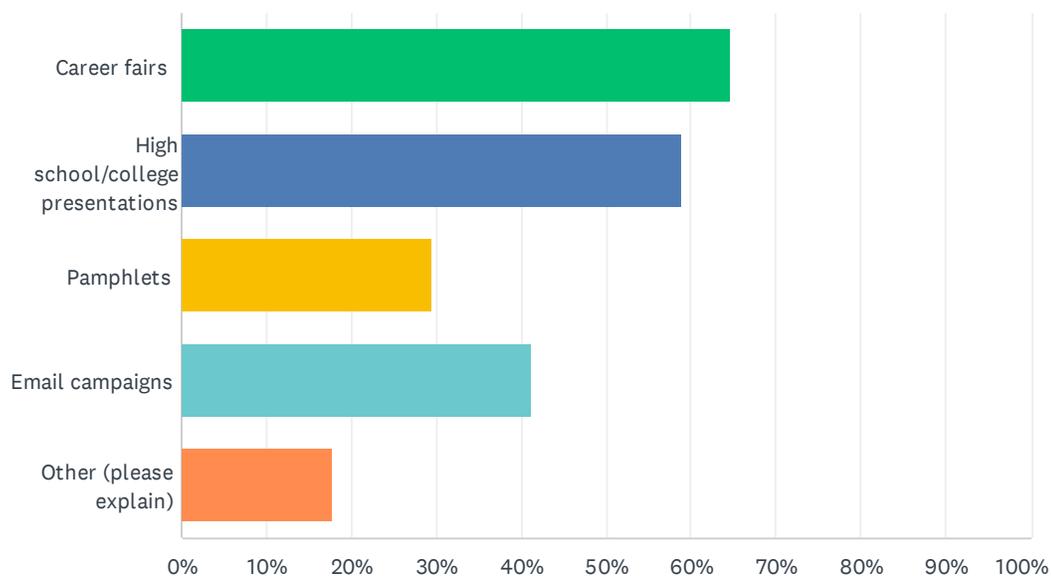
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	55.56%	10
No	44.44%	8
TOTAL		18

### Q36 How do you market your program? (Select all that apply.)

Answered: 17 Skipped: 2

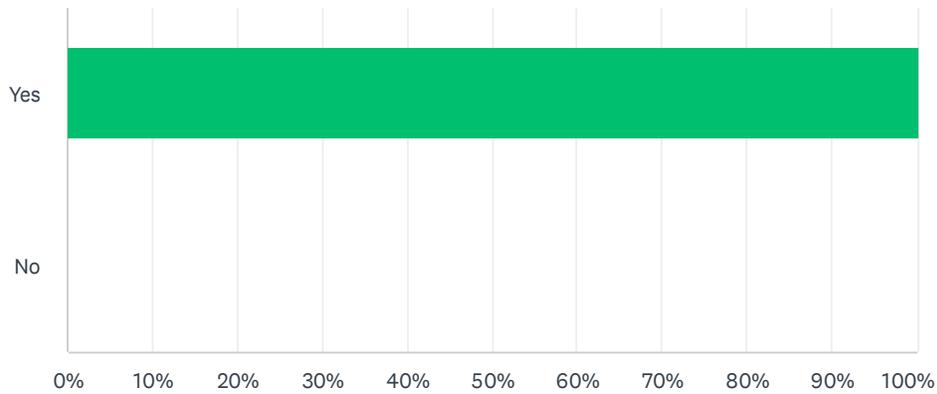


ANSWER CHOICES	RESPONSES	
Career fairs	64.71%	11
High school/college presentations	58.82%	10
Pamphlets	29.41%	5
Email campaigns	41.18%	7
Other (please explain)	17.65%	3
Total Respondents: 17		

#	OTHER (PLEASE EXPLAIN)	DATE
1	Program Website only	
2	Social Media	
3	Mostly word of mouth-we haven't had to market as much recently	

### Q37 Do you have more applicants than available student spots?

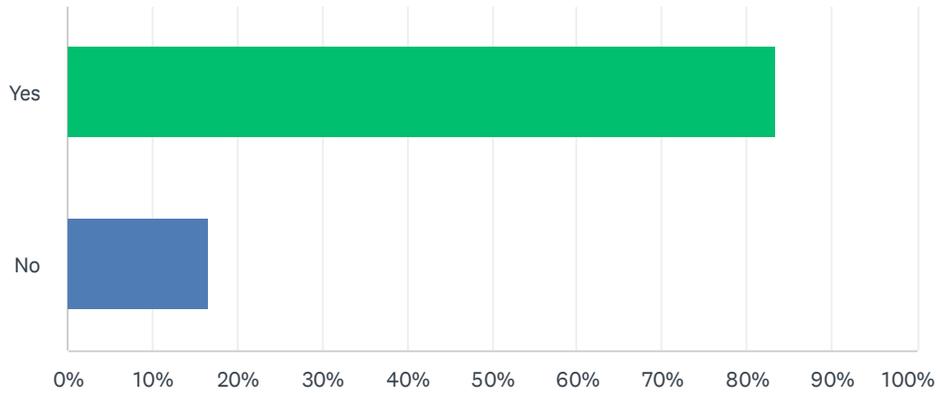
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	100.00%	18
No	0.00%	0
TOTAL		18

### Q38 In the latest application cycle (2024-2025), have you noticed an increase in the number of applicants compared to previous years?

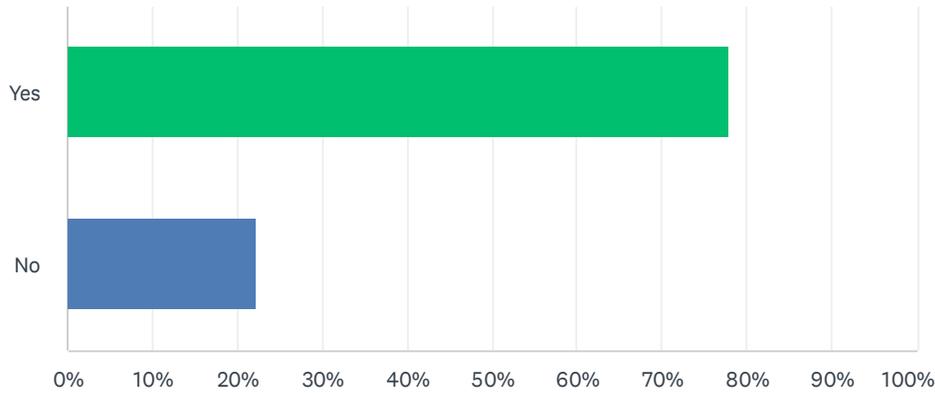
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	83.33%	15
No	16.67%	3
TOTAL		18

### Q39 Over the last five years (2020-2025), has your program increased your number of clinical sites?

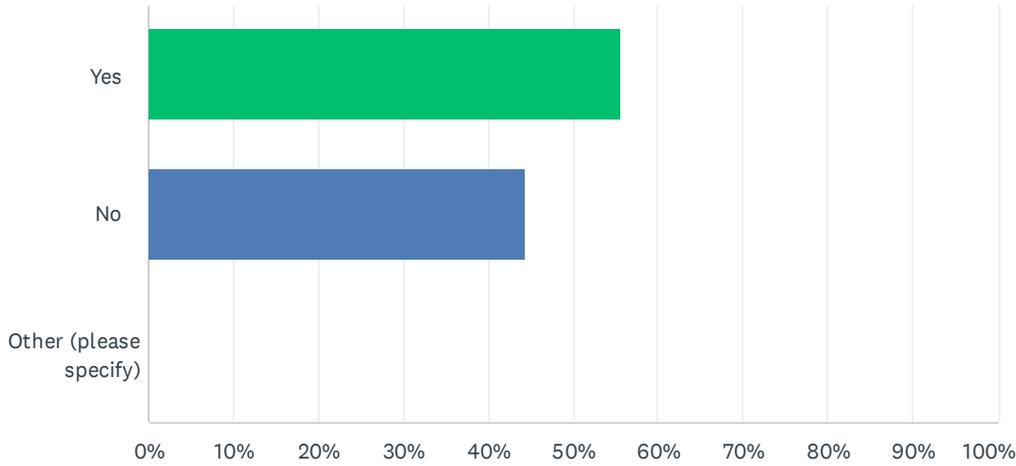
Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	77.78%	14
No	22.22%	4
TOTAL		18

## Q40 Is it difficult to find clinical training sites?

Answered: 18 Skipped: 1



ANSWER CHOICES	RESPONSES
Yes	55.56% 10
No	44.44% 8
Other (please specify)	0.00% 0
<b>TOTAL</b>	<b>18</b>

#	OTHER (PLEASE SPECIFY)	DATE
	There are no responses.	

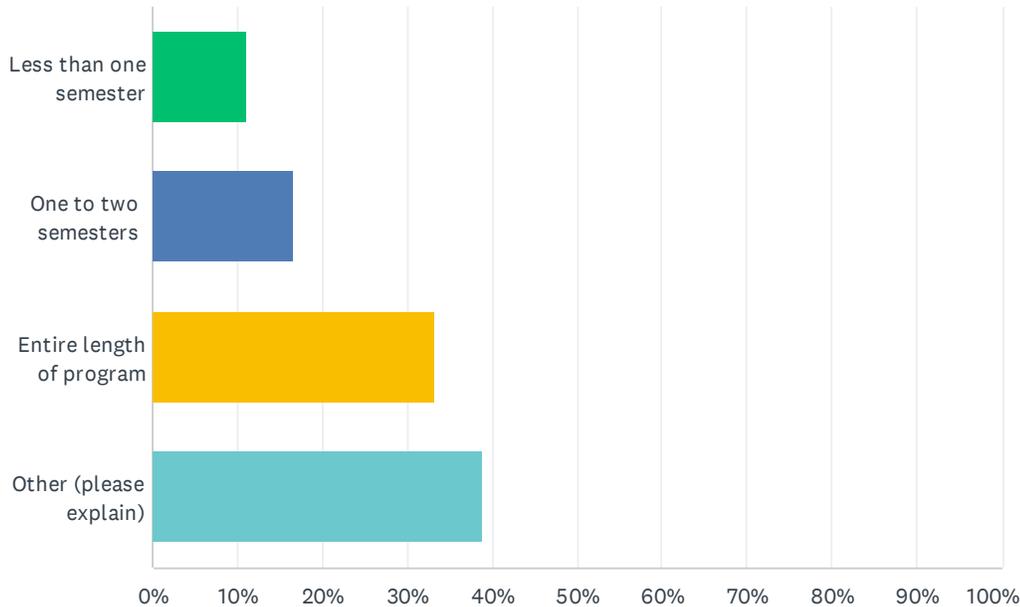
### Q41 How many active clinical sites, with assigned students, did your program have during the last academic year (2024-2025)?

Answered: 18 Skipped: 1

#	RESPONSES	DATE
1	3	
2	33	
3	5	
4	4 sites for two students to rotate through	
5	3	
6	29	
7	6	
8	8	
9	33	
10	11	
11	4	
12	1	
13	7	
14	7	
15	8	
16	26	
17	7	
18	6	

## Q42 When a student is assigned to a clinical site, how long does the student spend at that particular clinical site?

Answered: 18 Skipped: 1

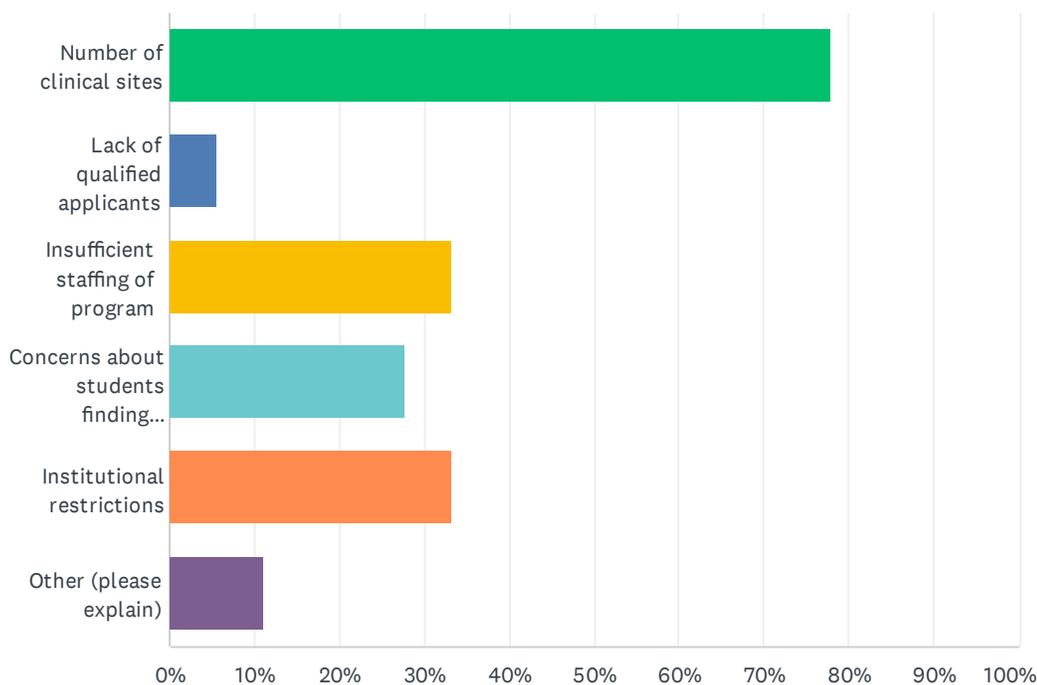


ANSWER CHOICES	RESPONSES
Less than one semester	11.11% 2
One to two semesters	16.67% 3
Entire length of program	33.33% 6
Other (please explain)	38.89% 7
<b>TOTAL</b>	<b>18</b>

#	OTHER (PLEASE EXPLAIN)	DATE
1	they rotate thru the clinical sites in 5 week rotations	
2	We have a main site where they spend the majority of their time and rotate to the other sites for a few months	
3	usually the entire length. On occasion, a site will have multiple sites that they rotate the student through (typically 2-3 max)	
4	Either the entire length of the program (5 semesters over two years) or only during the senior year	
5	Clinical experience is one year; rotations length from one month to three months	
6	Varies. Most spend the one year and others rotate to affiliated clinics.	
7	Depends upon the clinical site.	

### Q43 List barriers to accepting more students. (Select all that apply.)

Answered: 18 Skipped: 1

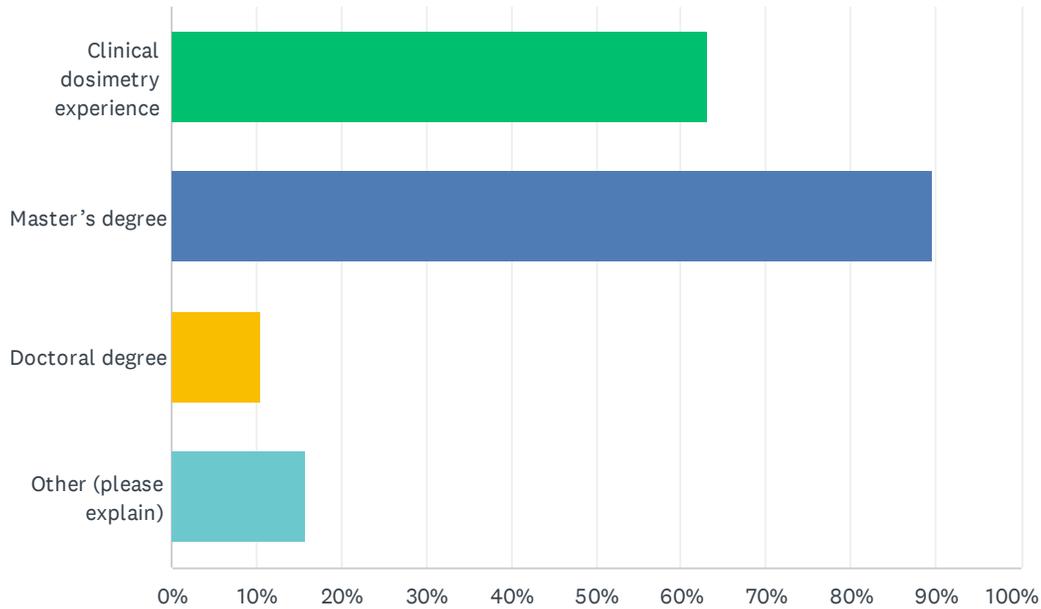


ANSWER CHOICES	RESPONSES	
Number of clinical sites	77.78%	14
Lack of qualified applicants	5.56%	1
Insufficient staffing of program	33.33%	6
Concerns about students finding employment if we enroll too many	27.78%	5
Institutional restrictions	33.33%	6
Other (please explain)	11.11%	2
Total Respondents: 18		

#	OTHER (PLEASE EXPLAIN)	DATE
1	The institution has concerns that the program operations are too costly - and it does not generate enough enrollments or tuition	
2	The faculty want to maintain a quality program and not just increase student enrollment.	

### Q44 In your opinion, what should the minimum qualifications be for an educator to start or manage a dosimetry program? (Select all that apply)

Answered: 19 Skipped: 0

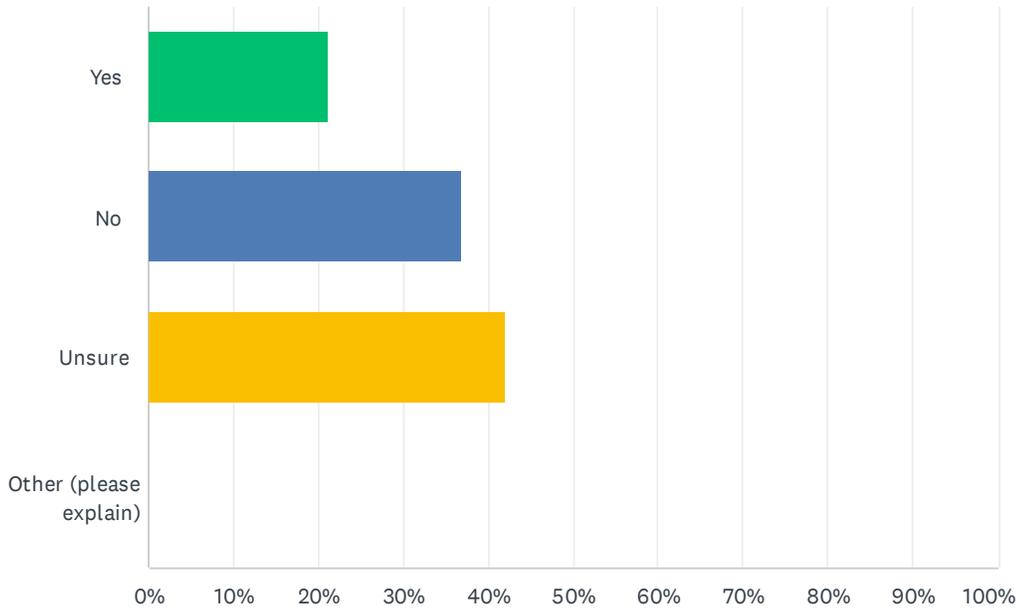


ANSWER CHOICES	RESPONSES
Clinical dosimetry experience	63.16% 12
Master's degree	89.47% 17
Doctoral degree	10.53% 2
Other (please explain)	15.79% 3
Total Respondents: 19	

#	OTHER (PLEASE EXPLAIN)	DATE
1	CMD	
2	Plus experience with curriculum design and budget	
3	Education and leadership experience	

### Q45 In your opinion, are there enough qualified educators to start or manage new dosimetry programs?

Answered: 19 Skipped: 0

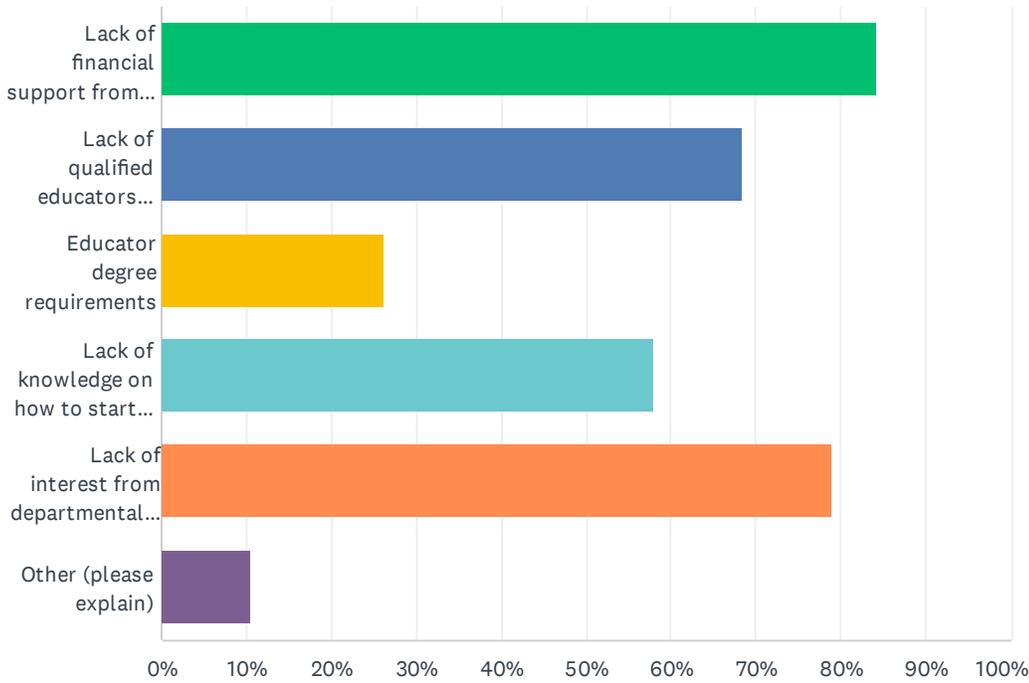


ANSWER CHOICES	RESPONSES
Yes	21.05% 4
No	36.84% 7
Unsure	42.11% 8
Other (please explain)	0.00% 0
<b>TOTAL</b>	<b>19</b>

#	OTHER (PLEASE EXPLAIN)	DATE
	There are no responses.	

### Q46 What barriers do you think are faced by universities or hospitals that wish to start new dosimetry programs? (Choose all that apply)

Answered: 19 Skipped: 0

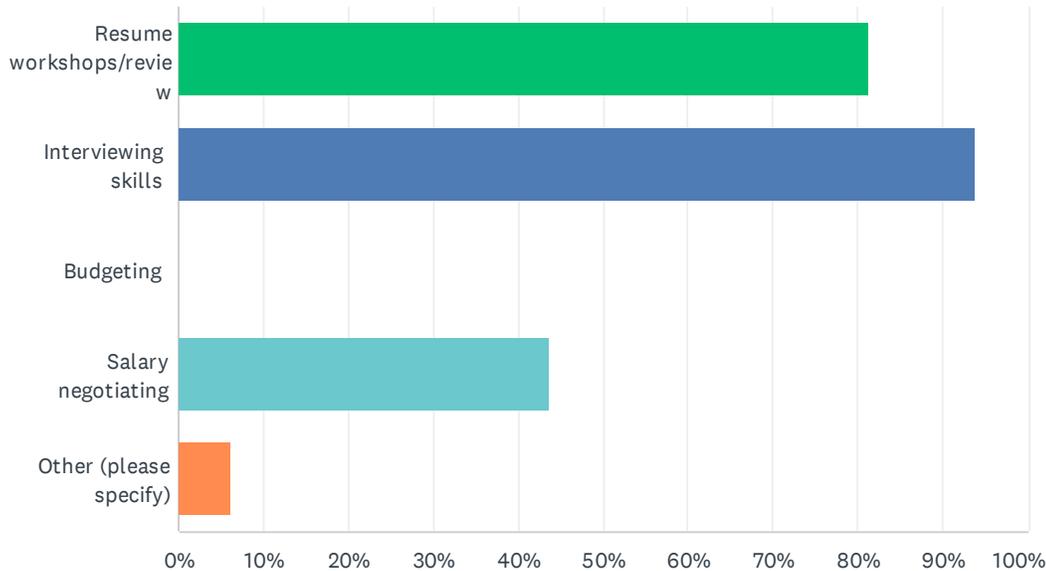


ANSWER CHOICES	RESPONSES
Lack of financial support from administration	84.21% 16
Lack of qualified educators (clinical and/or didactic)	68.42% 13
Educator degree requirements	26.32% 5
Lack of knowledge on how to start a program/accreditation process	57.89% 11
Lack of interest from departmental staff (dosimetrists, physicians, physics, administration etc.)	78.95% 15
Other (please explain)	10.53% 2
Total Respondents: 19	

#	OTHER (PLEASE EXPLAIN)	DATE
1	Institutional admin do not understand or appreciate the intricacies of program operations and accreditation standards	
2	Dosimetry programs are not typically large programs so the ROI for investing is low. Faculty are also higher paid individuals compared to other professions.	

### Q47 Does your program provide any of the following career services to students? (Select all that apply)

Answered: 16 Skipped: 3

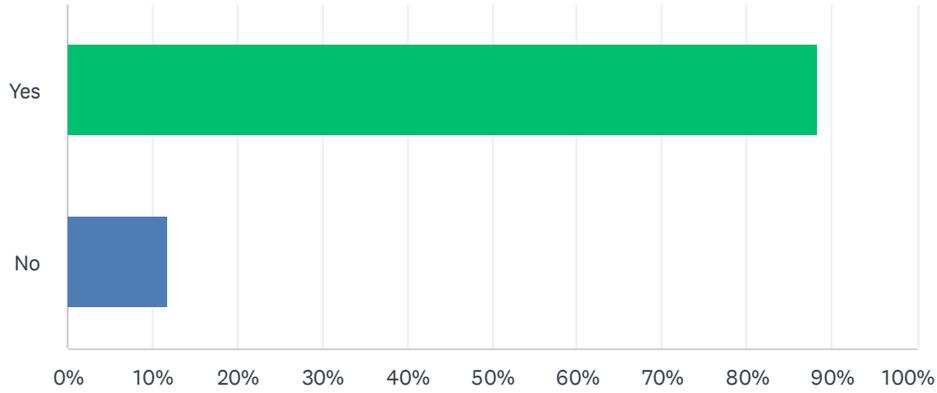


ANSWER CHOICES	RESPONSES	
Resume workshops/review	81.25%	13
Interviewing skills	93.75%	15
Budgeting	0.00%	0
Salary negotiating	43.75%	7
Other (please specify)	6.25%	1
Total Respondents: 16		

#	OTHER (PLEASE SPECIFY)	DATE
1	We review resume, we share job opportunities, we meet with them if needed for any career advice, we financially support their travel to AAMD annual conference so they expand their professional network, we require them to participate in poster presentation and student writing competition, we encourage their professional engagement, we even send them job opportunities after graduation if needed, we provide a board review preparation for them for free after graduation	

### Q48 Do you have established relationships with employers to assist your students with finding jobs?

Answered: 17 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	88.24%	15
No	11.76%	2
TOTAL		17

## Q49 What qualities/skills do employers say they are looking for in new graduates?

Answered: 16 Skipped: 3

#	RESPONSES	DATE
1	Time management Technical skills Collegiality, Integrity, Commitment	
2	strong clinical skills	
3	Accountable, thoroughness in their work, high attention to detail, ability to multi-task	
4	Plan quality and contouring quality	
5	Communication skills, willingness to learn.	
6	Quick learner, good communicator, responds well to feedback, technical skills, professional	
7	Clinical skills, soft skills, confidence, ability to communicate with the radonc team	
8	They are looking for clinical skills.	
9	Proficiency with basic planning skills, confidence and effective interpersonal skills, work ethic	
10	Clinical proficiency.	
11	Solid clinical skills, ability to work independently (after initial training)	
12	Good communication and time management skills. Experience or cross training with diverse treatment planning systems, and supplemental software systems such as MiM, EZFluence, and auto planning features such as MCO, Auto Planning in Pinnacle, and RapidPlan.	
13	They are seeking not only good planners with a solid skillset that includes 3D and inverse planning, but they also desire critical thinkers and problem solvers with good ability to visualize what is happening in the room. They also want graduates who can be on-site, at the very least for the first 3-6 months of employment.	
14	Clinical competence and professional traits.	
15	Social skills	
16	IMRT and SBRT planning experience	

## Q50 What qualities/skills do employers say they need more of?

Answered: 15 Skipped: 4

#	RESPONSES	DATE
1	Time management Technical skills Collegiality, Integrity, Commitment	
2	strong clinical skills	
3	People who are flexible, adaptable, and interested to grow professionally	
4	I am not sure. We haven't received much for negative feedback I don't think, but a lot of our students do their clinical hours and then work at their site so it might help with this.	
5	Proactive, involved in research, more comfortable with online communication	
6	training on various TPS	
7	Working with real patient plans, presenting plans to physicians, etc.	
8	Proficiency with basic planning skills and specialized techniques such as stereotactic, brachytherapy, proton, cyberknife, motion management, surface guidance, image registration, understanding automation	
9	Clinical proficiency.	
10	Willingness to relocate/not only work remotely	
11	Leadership qualities since there are a number of smaller clinical settings where the dosimetry and physics teams are only consisted of a handful of individuals. They also are looking for more experience with multitasking since many clinical sites are expecting new graduates to be able to handle a much heavier case load after onboarding. Also experience with complex cases such as retreatment cases.	
12	More on-site presence. They are wary of new grads who want to be 100% remote before they have proven themselves.	
13	Clinical competence and professional traits.	
14	Employers say that new graduates are lacking 3D skills	
15	Students who have had very good clinical experience and clinical hours	

## Q51 What makes your graduates stand out from other job seekers?

Answered: 16 Skipped: 3

#	RESPONSES	DATE
1	Ability to operate at a higher technical level compared to peers Ability to operate independently and problem solve.	
2	Their knowledge and ability to plan immediately upon graduation	
3	Well rounded experience during their clinical rotations, being exposed to 4 different centers with different numbers of patients and staffing structure	
4	Exceptional clinical experience	
5	A lot of our students are adult learners and really want to be successful. They are driven and are eager to learn. I would say we get a lot of feedback that they are clinically competent which I think is a mix of making sure to have strong clinical sites as well as our non clinical Eclipse didactic lab.	
6	robust didactic work, professionalism series	
7	The level of their training	
8	We have over 1200 clinical education hours and students work on real patient plans. We have a non-clinical eclipse program that allows us to run lab courses so that students get hands on treatment planning skills from the school, not just their clinical site. We focus on their planning skills during the didactic courses too, not just passing the MDCB exam.	
9	Readiness and adaptability	
10	So far it seems we are addressing the concerns related to questions 49 and 50. Our graduates seem to be meeting the clinical proficiency requirements and expectations of employers.	
11	Well-respected institution, consistent clinical experience, planning for actual patients	
12	I do feel that the in-person approach to clinical instruction has positively benefited the students in our program. I have found that it can help to give a broad and well-rounded perspective on dosimetry to new graduates since the students get to overhear conversations/debates and see more procedures done by radiation therapists, physicists, and physicians. This element of exposure to how other radiation oncology team members interact with dosimetrists in the patient planning and treatment process help to give concrete examples of how to troubleshoot and contribute to dynamic centers that want more in person support from their dosimetrists in an ever-increasing age of remote planning/dosimetry services.	
13	Experience with 2 TPS, in-person education, proton experience.	
14	Clinical competence and professional traits.	
15	Exposure to a variety of advanced cases. Research experience.	
16	We work hard to ensure that our students are clinically strong, they have to prove high competency in treatment planning before we graduate them. In addition to that, they have to meet a minimum grade on their final mock exam to graduate.	

**Q52 Over the last five years (2020-2025), what percentage of your graduates entered medical dosimetry and continued working within the field as a medical dosimetrist?**

Answered: 17 Skipped: 2

#	RESPONSES	DATE
1	93%	
2	100%	
3	100%	
4	100%	
5	>95%	
6	100%	
7	100% of those pursuing for a dosimetry position	
8	probably over 90%	
9	90%	
10	100%	
11	90%	
12	100%	
13	100%	
14	100%	
15	100%	
16	95%+	
17	Our program is new, currently all graduates are working in the field	

**Q53 Over the last five years (2020-2025), what percentage of your graduates were hired on for employment at the clinical site where they were placed or with your institution/affiliate institution?**

Answered: 17 Skipped: 2

#	RESPONSES	DATE
1	86%	
2	66%	
3	25%	
4	50%	
5	65-75%	
6	75%	
7	Many are hired by their assigned clinic not all, it depends on the clinic's opening for a position at the time of the student graduation	
8	I don't have the exact numbers for this, but probably about 65%	
9	85%	
10	67%	
11	50%	
12	~80%	
13	50%	
14	36%	
15	~40%	
16	unknown	
17	75% (Again, program new)	

## Q54 Closing Question - Please provide us with any additional information regarding any difficulties that you face in medical dosimetry education or any information that you think will be useful for us to know about

Answered: 12 Skipped: 7

#	RESPONSES	DATE
1	Recruitment and retention of clinical coordinators. Requirements to maintain a program are largely the same regardless of the number of students. Our students are not a revenue source. The compensation of an experienced medical dosimetrist is significant, but as will many other fields, educators are not as highly compensated. This makes for a challenge to retain junior talented educators as they develop, and it is difficult to recruit more experienced educators, who might be well suited but cannot sacrifice the income.	
2	finding clinical space for the students	
3	Getting clinical sites to agree to train, because most institutions aren't staffed appropriately	
4	As a new program director, information on student resources for contouring and studying for the boards.	
5	Students are trained using the treatment planning system (TPS) available at their assigned clinical site. While exposure to multiple TPS platforms is ideal, obtaining licenses for various systems is often very expensive for educational programs. Additionally, schools must have qualified faculty to teach each platform. AAMD's efforts in providing workshops on different TPS and related software are extremely valuable for students. Scholarships that support student participation in vendor-led TPS/software workshops are also beneficial. Likewise, funding for students to attend board review courses, either in person or online, can significantly enhance their preparation. Students also gain important career-readiness skills through interview and resume writing workshops. While the AAMD FEC is doing excellent work to support students, these represent additional opportunities to further enrich their educational experience. Another challenge for programs is seeking affiliated clinical sites. The number of students we take is limited by the number of available clinical spots. Thank you for seeking input from educators and for your continued support.	
6	There seems to be a shift in more awareness of medical dosimetry earlier on, so students are going through a radiation therapy program just to be able to go into dosimetry. This is causing some issues for radiation therapy programs, as clinical staff does not always like taking a lot of time to train students who will not be working as a radiation therapist.	
7	Institutional admin do not understand or appreciate the intricacies of program operations and accreditation standards. We find it it easier to recruit faculty and clinical sites for Radiation Therapy and more difficult for Medical Dosimetry. We constantly defend our programs from being cut since the college does not profit other than reputational value. Admin do not often recognize the value of a good reputation or see us as serving the community.	
8	I believe the shift to fully remote planning presents challenges (and opportunities) for the field of medical dosimetry and dosimetry education. As we look ahead, it's essential for leaders in the field to think strategically about how to sustain professional visibility, thoughtfully integrate AI, and ensure students develop the skills needed to thrive in a rapidly evolving landscape. In our program, we've seen that students gain the most when learning in person alongside CMDs, where mentorship and hands-on collaboration enrich their education. At the same time, I understand that in-person training isn't feasible for every program or market, and respect that flexibility is necessary to meet diverse needs. I appreciate this survey and the opportunity to contribute to a broader conversation. My hope is that all programs, regardless of format, will embed meaningful exposure to research, AI and its applications, enabling future CMDs to be dynamic, collaborative, and integral members of the radiation oncology team. By evolving together, we can strengthen the profession and expand the scope and impact of medical dosimetrists across the field.	
9	I feel fortunate to be a part of such a closeknit and supportive community such as the one in	

## 2025 Med Dos Educators Survey

medical dosimetry education. Through resources from the AAMD and JRCERT, support from the clinical staff at our participating sites and colleagues within our college, as well as using social media such as LinkedIn to connect to educational leaders in the field, I have felt more than adequately supported in my educational and professional endeavors. The greatest challenge I feel facing the future of our program, is the lack of funding from the College to provide competitive salaries for full time faculty in medical dosimetry. This is why we rely on these studies to help give more context to the working salaries of other full time faculty members at different institutions. Thank you for the critical work you do in these surveys!

10	<p>With more and more clinics going to hybrid/remote work, it's harder for students to get an "in-person" experience of all those aspects of the job that cannot be fully replicated remotely. Examples include troubleshooting patient setups, getting comfortable with bolus fabrication and placement etc. Students are also further removed from physicians which is a lost opportunity for learning what they are looking at during plan review as that often involves discussion of aspects of the patient's oncological or medical history/condition that cannot be captured in a plan directive. In terms of curriculum, I feel like I am constantly trying to play catchup. When new grads are being asked if they have experience with breast VMAT and brain SRS during interviews, I question whether I am short changing them because there is only so much room in the curriculum for potential additional competencies. I still teach a lot of 3D in our program because I feel those are so fundamental and are still very much used especially in palliative settings. But this takes away from experiences such as the aforementioned two examples. Even with over 1300 clinical hours, I find it hard to fit in all the competencies so I am not sure how programs with fewer hours are able to do it. I'd love to learn from them! Lastly, how can we get more people interested in education? Some programs end up closing when the PD retires and no one else is willing to step in the role. Surely, there is more we can do to show administration and clinics about the value of these educator positions. Any program that has recently gone through a hiring process for a CC will attest to having received very few applications.</p>	
11	<p>Universities are reducing support for travel, meeting attendance, etc. This impacts the ability to retain quality faculty.</p>	
12	<p>I think the biggest challenge is trying to get individuals to be preceptors. The clinics are so busy, and it takes a lot of their time, when staffing is low it is even harder on the preceptors.</p>	