



## MEDICAL PHOTOGRAPHY

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- Purpose:** To encourage Health Science students to analyze health careers through the use of digital photography, and to use technology in editing and presenting digital pictures.
- Description:** In this event, competitors will use digital photography to illustrate the health professions. Competitors will photograph three different health professionals, edit the photos using computer software technology, and then present the three digital pictures to a panel of judges using a computer and data projector.
- Dress** Competitors must be in official HOSA uniform or proper business attire. Bonus points will be awarded for proper dress.
- Rules and Procedures**
1. Competitors in this event must be active members of HOSA in good standing in the category in which they are registered to compete (Secondary or Postsecondary/Collegiate).
  2. The selection of the three healthcare professionals to be photographed is at the discretion of the competitor. The pictures must be of three different health professionals in three different careers. The selected professionals must be willing to share information about their career with the competitor, and must sign a release form that allows HOSA to use the photograph in the competitive event and in future HOSA publications.
  3. The competitor will make arrangements to photograph three different health professionals. The photos should portray something about the profession or the skills of the professional. Written permission must be obtained from any persons who appear in the photos unless the person is not identifiable.
  4. **RELEASE FORM:** The release form for this event must be signed by each individual photographed. The release form states that the photograph is the property of National HOSA and may be used on HOSA's website and in HOSA publications without further permission from the competitor or person(s) in the photograph. If a release form is not properly signed and included with the photo, the photo will not be judged.
  5. Competitors may use software to edit and enhance the digital photographs. Editing and cropping of the pictures is permitted, but adding graphics, backgrounds, and other elements to the photo is not permitted. The competitor must submit the three (3) images in .jpeg format on a CD-ROM. Each photo (saved file) should be named with the competitor's initials, the health career of the professional pictured, and the number of the photo (1, 2 or 3). (Example: MLSpharmacist3) Do not put the label on the actual photo, only in the file name on the CD-ROM.
  6. The CD-ROM must be labeled with the competitor's name, school and state. Only three photos should be on the CD-ROM, must be in .jpeg format, and each photo must be smaller than 1 mb in size.
  7. In addition to the CD-ROM, the competitor must print the three photos on photo paper and submit the photos as follows:
    - Each photo must be 8 ½" x 11" or smaller. (8 X 10 preferred)
    - The photo should be contained in a clear page (sheet) protector.

- Inside the same sheet protector behind the photo, competitors must include an additional, one-page narrative description about the professional in the photo, labeled with the competitor's name, school and state, and the signed release form.
  - All three pictures must be held in a file folder, pocket folder, large envelope, or ½" or smaller ring binder, the front of which is labeled with the competitor's name, school and state.
8. Competitors shall report to the site of the event at the pre-assigned appointment time. The competitor's event ID number will be written on the CD-ROM with a permanent marker. He or she will give the section leader the three sheet protectors in a folder, envelope or binder, each containing one photo, narratives and permission form, and the CD-ROM.
  9. Event personnel will operate the computer and open the pictures to project on a screen for the judges. For each picture displayed, the competitor will have one (1) minute to describe the profession and what is happening in the picture. The competitor is not permitted to use written notes during the presentation. The competitor will be stopped at the end of the one minute allowed to describe each picture.
  10. Following the description of the photos by the competitor, the competitor will be excused. Judges will have an additional five (5) minutes to review the photos and complete the rating sheet.
  11. The three prints, narratives, permission forms, and CD-ROM used in this event will be the property of National HOSA and will NOT be returned to the competitor after the event.
  12. Competitors must be familiar with and adhere to the **"General Rules and Regulations of the National HOSA Competitive Event Program."**

**Required Personnel (Per Section):** (SS level event; PS/C level event) No sections within levels.

1. One Event Manager (Per Event)
2. One Section Leader
3. One computer operator per section
4. Two-four judges (one-two health care professionals and one art or graphic arts person preferred)
5. Two Courtesy Corps Members

**Facilities, Equipment and Materials (Per Section):**

1. One room with a computer, data projector, screen, table for 2-4 judges, and podium for competitor in clear view of the judges and screen.
2. Table/chairs for event personnel to provide for registration, materials distribution
- \*\*\* 3. CD-ROM with 3 digital photos
- \*\*\* 4. Three prints of photos in clear sheet protectors with a narrative description of each professional photographed and signed release form for each photo, held in a file folder, pocket folder, large envelope, or ½" three ring binder.
5. Permanent ink felt tip pen (Sharpie ©) for labeling CD-ROM.
6. Stopwatch

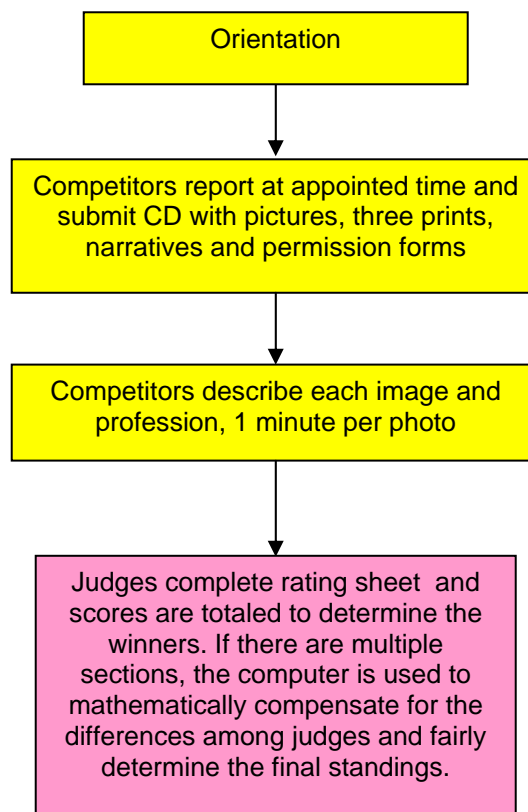
\*\*\* Equipment to be brought to competition by competitor.

**Note to competitors:** The three sheet protectors in a folder, envelope or binder, each containing one photo, narratives and permission form, and the CD-ROM. turned in at the event at the National Leadership Conference will be used by the judges and **WILL NOT** be returned to the competitor.

CHECK WITH YOUR STATE ADVISOR to determine the process used for state competition. You will likely be asked to make extra copies of your photos, narratives and permission forms, and the CD-ROM. if you qualify for national competition.

Competitors are encouraged to make and keep an original copy of all their materials, and provide photocopies of the permission form for state competition, OR, get extra permission forms signed so you will have them if you advance to national competition. Your pictures and documentation WILL NOT be mailed to National HOSA from your state office.

## Event Flow Chart



# MEDICAL PHOTOGRAPHY JUDGES RATING SHEET

Section \_\_\_\_\_

Level \_\_\_\_\_ SS \_\_\_\_\_ PS/C

Competitor # \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

	Items Evaluated	Points Possible					Points Awarded
		Superior	Excellent	Good	Fair	Poor	
1.	<b>Oral and Written Description</b> – demonstrates a clear understanding of the profession and the story illustrated by the photo.						
	• Photo #1	5	4	3	2	1	
	• Photo #2	5	4	3	2	1	
	• Photo #3	5	4	3	2	1	
	<b>Voice</b> – Spoke clearly and distinctly with good grammar and articulation.	5	4	3	2	1	
2.	<b>Photo #1</b>						
	A. Has a clear center of interest, a clearly defined subject (health professional) at work	5	4	3	2	1	
	B. Well balanced with a creative visual perspective and no distractions (avoids mergers)	5	4	3	2	1	
	C. Proper exposure (Colors, brightness and lighting) and focus	5	4	3	2	1	
	D. Photo is an action shot that is interesting and tells a story	5	4	3	2	1	
	E. Originality, creativity and emotion – there is something unique about the photo that makes it memorable	5	4	3	2	1	

	Items Evaluated	Points Possible					Points Awarded
		Superior	Excellent	Good	Fair	Poor	
3.	<b>Photo #2</b>						
	A. Has a clear center of interest, a clearly defined subject (health professional) at work	5	4	3	2	1	
	B. Well balanced with a creative visual perspective and no distractions (avoids mergers)	5	4	3	2	1	
	C. Proper exposure (Colors, brightness and lighting) and focus	5	4	3	2	1	
	D. Photo is an action shot that is interesting and tells a story	5	4	3	2	1	
	E. Originality, creativity and emotion – there is something unique about the photo that makes it memorable	5	4	3	2	1	
4.	<b>Photo #3</b>						
	A. Has a clear center of interest, a clearly defined subject (health professional) at work	5	4	3	2	1	
	B. Well balanced with a creative visual perspective and no distractions (avoids mergers)	5	4	3	2	1	
	C. Proper exposure (Colors, brightness and lighting) and focus	5	4	3	2	1	
	D. Photo is an action shot that is interesting and tells a story	5	4	3	2	1	
	E. Originality, creativity and emotion – there is something unique about the photo that makes it memorable	5	4	3	2	1	
5.	<b>Guidelines</b> – Correctly followed rules for submission of photos, documents and CD-ROM	5					
	<b>TOTAL POINTS</b>	<b>100</b>	<b>76</b>	<b>57</b>	<b>38</b>	<b>19</b>	

# DIGITAL PHOTOGRAPH RELEASE FORM

## Medical Photography

Please complete this form and include it with the print copy for each photograph used in this event. No photographs will be judged without this information. **No faxed permission forms will be accepted.** Type or print clearly.

### Personal Information for Competitor

Name: \_\_\_\_\_

Address : \_\_\_\_\_

Telephone number : \_\_\_\_\_

Current grade/year in school: \_\_\_\_\_ E-mail address: \_\_\_\_\_

### Photograph Information

Name of photograph: \_\_\_\_\_ *Each photo should be labeled with the competitor's initials, the health career of the professional pictured, and the number of the picture (1, 2 or 3). (Example: MLSpharmacist3)*

Names, profession, and a description of all people in the photograph \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Permission for Use of Photograph (Competitor)

I grant permission for the photo made for this event to be viewed by anyone associated with the event, to be stored indefinitely in HOSA files, and to be used by HOSA to promote HOSA's role in preparing students for health careers, in print and electronic documents, now and in the future.

Competitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Required signature of ALL persons who appear in the photo.** If any person is under the age of 18, the signature of a parent or guardian must be included.

I hereby release HOSA, their employees, agents, successors and assigns from any claims or actions which may arise from this photograph. I further agree that the photo shall be the property of HOSA. I give permission for the use of the photo in HOSA competition and in future print or electronic publications.

Name	Date of Birth	Signature (For minors, parent must sign)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____