SOUTHERN
WV COMMUNITY & TECHNICAL COLLEGE

Division of Allied Health and Nursing

Radiologic Technology

Student Handbook

2022 – 2024

This Handbook is reviewed annually and revised as needed. Revisions or additions are noted by dates.

Table of Contents:

Definitions:

Program - refers to the Radiologic Technology Program
Southern or College - refers to the college, Southern WV Community and Technical College
RA = abbreviation for Radiology courses in the Program
ARRT = American Registry of Radiologic Technologists

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The Program Student Handbook Acknowledgement 2022-2024:

Radiologic Technology Students are responsible for reading and complying with the information which appears in the current College Catalog and this Student Handbook. It is the intent of this handbook to ensure patient safety and professional, ethical, and legal conduct of all Radiography Students. Failure to comply with College & Program Policies will lead to a review of student behavior & possible disciplinary action, including dismissal from the Program. Program Faculty and Southern reserve the right to change, delete, supplement or otherwise amend at any time the information, rules, and policies contained herein without prior notice. Changes shall go into effect whenever the proper authorities so determine, and shall apply to both present and prospective students. Changes in the Program Student Handbook will be given to students through a written addendum or email notification if the change is immediate. (8/2022 – HA)

Welcome!

You are entering the exciting and dynamic field of Radiologic Technology!
There will be challenges and milestones for you personally and professionally. Change will always be a part of your future.
New technologies and advancements make this career rewarding.
You will never grow tired of it. Best Wishes!

Southern West Virginia Community and Technical College
P. O. Box 2900 – Dempsey Branch Road
Mount Gay, West Virginia 25637

Mission Statements

The Radiologic Technology program will meet community and employer needs for medical imaging professionals with high quality, student-friendly and accessible educational opportunities and services. The program strives to instill professionalism and transferable behaviors into the work place.

Reviewed and revised April 2015; reviewed 2010, 2011, 2012, 2013, 2014, 2018, 2021, 2022

Mission Statement of the College

Southern West Virginia Community and Technical College provides accessible, affordable, quality education and training that promote success for those we serve.

Reviewed and reaffirmed June 20, 2017
Approved June 18, 2013
Southern WV Community and Technical College
Board of Governors

Vision Statement

Southern aspires to establish itself as a model of leadership, academic excellence, collaboration, and occupational training, equipping its students with the tools necessary to compete and prosper in the regional and global economies of the twenty-first century.

Reviewed and revised 2015,
effective July 1, 2015
Board of Governors

Southern's Core Values

We will accomplish our mission by:

- Achieving excellence in education and service.
- Exhibiting integrity in all that we do.
- Collaborating and communicating actively with others.
- Being committed in word and deed.
- Imparting passion and compassion to our every task.
- Leading by encouragement and support of lifelong learning.
- Embracing change through bold actions.
- Being creative and innovative at all levels.
- Initiating opportunities for the community.
- Celebrating success.

Reviewed and reaffirmed
February 26, 2015
Reviewed and revised 2015,
effective July 1, 2015 Board of
Governors

College and Program Accreditation

Upon successful completion of the program, students are awarded an Associate in Applied Science Degree in Radiologic Technology from Southern, which is accredited by the following agency:

The Higher Learning Commission
230 South LaSalle Street, Suite 7-500 Chicago, IL 60604-1411
Telephone: 800-621-7440 Email: info@hlcommission.org
https://www.hlcommission.org

Southern's Radiologic Technology Program is a two-year program designed to fully educate students on the required principles of radiologic technology. This program is established and operated according to the most current JRCERT Standards. The Program is accredited by the following agency:

The Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182
Phone: (312) 704-5300 Website: www.jrcert.org E-Mail: mail@jrcert.org

JRCERT Standards for an Accredited Educational Program in Radiography

(Effective 1/1/2021) The complete Standards are in the Appendices.

**If a copy of the JRCERT Standards is desired at any time, you may visit the web site listed above. All clinical practice sites are provided with a copy of the Standards.

At the State level:

West Virginia Medical Imaging & Radiation Therapy Technology Board of Examiners
1124 Smith St., Suite B300 Charleston, WV 25301
Phone: (304) 558-4012 Website: www.wvrtboard.org E-Mail: rtboard@wv.gov

Additionally, **the state of WV** must review the program. Their visit is usually in conjunction with the JRCERT. Students are a part of the accrediting process. JRCERT and WV state officials may ask to speak with you. To assure academic and program effectiveness, the College and Program are reviewed through an accreditation process. Documentation of student work and data may be requested.
Samples of student work may be provided to an accrediting body throughout your time in the program or after. The College also completes a self-study for regional accreditation. Samples of student work may be submitted.

The Program and College will ask you to complete a graduate survey six months to five years after graduation. The program will ask your employer to complete a survey asking about you as an employee six months to one year after graduation. By signing the page acknowledging you will abide by Program and College policies, you are permitting the program and college to contact you after graduation and permitting an employer to respond to questions via survey or other communications.

Graduates are eligible to apply for the National Registry Examination given by the American Registry of Radiologic Technologists (ARRT). Completion of the Program does not guarantee passing the ARRT certification exam. Upon successful completion of the registry exam, graduates may become licensed in

any state (following individual state requirements). Registered radiographers and students may apply for membership to our professional society known as the American Society of Radiologic Technologists (ASRT), as well as various state societies. In order to maintain their registered status, radiologic technologists must maintain 24 hours of continuing education every two years, based on their birth date (biennium). They must also fulfill the Continuing Qualification Requirements (CQR) established by the ARRT every 10 years. Refer to www.arrt.org for complete requirements.

STUDENT RESPONSIBILITY STATEMENT

Instructions: Please read carefully and determine if you can and will commit to the requirements. Your signature on this document at orientation indicates that you have been given this document as well as an explanation of each section and that you accept the conditions of the agreement and agree to abide by program rules.

1. I am aware that Essential functions are necessary to complete the radiologic technology program and be employed as a radiologic technologist. (TECHNICAL STANDARDS)

2. I understand that upon admission, I will be required to participate in assessment as dictated by the college and the program.

3. I understand that there will be programmatic fees per course, per semester/term while I am enrolled in the radiologic technology program and said fees must be paid to the business office prior to each semester/term as dictated by the college.

4. As a student in the radiologic technology program, I will be required to attend orientations, tours or other student meetings before the semester begins or at the end of the semester.

5. Once admitted to the radiologic technology program, I understand it is my responsibility to read and adhere to all policies and procedures of Southern West Virginia Community and Technical College as defined in the College Catalog, and the Radiologic Technology Student Handbook (i.e., dress code, attendance, criminal background check, drug screening, cell phone, etc.). I will abide by the current uniform dress code and understand that it is subject to change, if necessary.

6. I agree to not obtain any additional piercings, gauging, and/or potentially visible tattoos that are not in compliance with the radiologic technology dress code until completion of the program. Failure to comply with the dress code could result in dismissal from the program.

7. It is my responsibility to see that a completed health (history and physical) assessment form, list of medications, immunization records (that are requested on form) are submitted by the determined date.

8. I realize that due to the nature of ionizing radiation, it is recommended that the pregnant woman not be subjected to any radiation source whatsoever. There are possible genetic consequences to the fetus which may arise should one become pregnant during the two years in the radiologic technology program. I understand that if I am female and should become pregnant that I may voluntarily disclose this information and will be allowed Option I and Option II in the "pregnancy policy." The pregnancy policy is available from the Program Director and in the student handbook. Additionally, I will receive in-service education on the hazards of radiation from a radiation safety officer or the program director within the first five weeks.

9. I am aware that I must complete any required orientation criteria that clinical sites require, prior to rotations.

10. I am aware that any major change in health status must be reported to my advisor and clinical preceptor. An additional evaluation and release of information by an appropriate health care provider may be required.

11. I realize that since I am a student in the radiologic technology program at Southern that I must complete a criminal background check (on admission) and have mandatory drug and alcohol testing. The cost of the drug screening is paid by the student and includes any random screens that may be necessary (see Allied Health Background Check and Drug and Policy). The criminal background check will be completed through a pre-selected company. Any positive background checks will require the student to complete the ARRT Ethics Review Pre-Application in order to continue in the program. Copies of the policy are available upon request and will be included in the student handbook. Random drug testing, if necessary, will also be the responsibility, and at the expense, of the student. Unauthorized use of controlled substances may result in restriction from the classroom and clinical areas and/or dismissal from the program. All students are reminded of the need to remain drug and alcohol free during their tenure as a student as well as throughout their professional health care career.

12. I realize that I am expected to attend **ALL** radiology classes and clinical courses. I further understand that all courses within the curriculum must have a "C" or better in order to successfully complete the program. I realize that I must have a 2.0 or higher program GPA in order to graduate from the radiologic technology program.

13. I understand that travel is required, for clinical and didactic courses, while enrolled in the radiologic technology program and that said travel is my responsibility. Clinical rotations may include early morning, morning, afternoon or evening hours. I may have an early morning class/clinic following an evening class/clinic.

14. I understand that I will be responsible for any expense incurred as a result of illness or accident while in the radiologic technology program.

15. I understand that e-mail is utilized as a method of communication within the program and will check my e-mail account **DAILY** in order to ensure that I have received information from instructors as well as any programmatic information that may be communicated through e-mail. I also understand that ALL communication from Southern faculty will be through the Southern **e-mail address** and **NO PERSONAL** e-mail addresses will be utilized. This Southern e-mail account is free and must be utilized by RA students throughout their tenure in the radiology program. This account can be utilized as long as the student wishes past graduation as well. I may forward the Southern account to my personal account if that is what I wish to do but the faculty will use the Southern e-mail address for all correspondence.

16. I understand that if I leave the radiologic technology program for any reason that I must abide by the rules of the re-admission policy. I also understand that re-admission is on a space available basis and is not guaranteed. I also understand that upon re-admission I would have to complete a new background check and health assessment.

17. I understand that while I am participating in the radiologic technology program as a student that I must abide by Article 23: 2 & 3 of Chapter 30 of the West Virginia Code. This code states that I may participate in the radiography of patients as a course of study and NOT as outside employment.

18. I am aware that I may not be allowed to take the certification examination by the American Registry of Radiologic Technologists (ARRT) if I have been convicted of a misdemeanor and/or a felony. This may indicate a lack of good moral character for ARRT purposes. I understand that I may request an ethics review pre-application packet to allow ARRT to check to see if I will be eligible. This may be done any time after the first orientation and preferably before the fall class start date. I understand that if my criminal background check comes back positive I **MUST** complete the pre-application and the cost of this is at my own expense ($100 fee). I also understand that if anything occurs during the program that would jeopardize being permitted to take the certification examination I should discuss this with the program director immediately.

19. I further understand that failure to provide the above information or any falsification of records will result in immediate dismissal from the radiologic technology program.

20. I understand that while in the Associate of Applied Science RA program there may be semesters that additional courses will be needed to be considered full time status at Southern. Faculty advisors will guide students using the current RA curriculum as needed.

Reasonable accommodations that will not alter the scope of the program for any of the above requirements may be requested in writing to the Director of the Radiologic Technology Program. Requests will be evaluated by the Director and the Radiologic Technology Faculty on an individual basis. If any of the above statements are not fully understood, it is my responsibility to request clarification from the Director of the Radiologic Technology Program.

I have a clear understanding of what is required of me to be admitted to and to remain in the Associate of Applied Science Radiologic Technology Program. My signature of review of these policies at orientation and review of the Handbook notes my understanding.

Goals and Student Learning Outcomes

1. **Prepare students to become safe and competent radiographers**.
   a. SLO - The student will evaluate radiographic images.
   b. SLO - The student will perform diagnostic quality procedures.
   c. SLO -The student will demonstrate patient care knowledge.
2. **Provide educational opportunities for students to possess critical thinking skills.**
   a. SLO – The student will recognize and solve problems.
   b. SLO – The student will make appropriate decisions regarding clinical procedures and patients abilities.
3. **Demonstrate responsible professional attitudes and behaviors.**
   a. SLO – The student will display professional behaviors.
   b. SLO – The student will participate in a professional development activity or event
   c. SLO - The student will investigate a professional issue of concern.
4. **Use effective communication**.
   a. SLO – The student will understand and demonstrate effective oral communication.
   b. SLO – The student will demonstrate appropriate written communication.
   c. SLO - The student will work well in a team atmosphere.

Reviewed and revised 9/2019;Revised May 2011; 3/2018; 8/2021; Reviewed 8/2022

The Radiologic Technology Faculty

Acting Radiologic Technology Director/Associate Professor

Dr. Havilah Adkins, DNP, APRN, CPNP-PC, BSRT(R)(BD)(ARRT)
Office: 319C Logan Campus
Phone: 304-896-7535 Email: Havilah.Adkins@SouthernWV.edu

Clinical Coordinator/Instructor
Morgan Maynard, BSRT(R)(ARRT)
Office: 123C Logan Campus
Phone: 304-896-7465 Email: Morgan.Maynard@SouthernWV.edu

Clinical Preceptors (CP) - Each clinical education setting designates clinical preceptor(s). Contact information for each CP will be provided in clinical syllabi.

Administration:
President
Dr. Pamela L. Alderman, EdD, MSN, RN
Email: Pamela.Alderman@Southernwv.edu

Dean, Division of Allied Health and Nursing

Administrative Associate
Susan Wolford
Building C, 3rd floor, Logan Campus
Phone: 304-896-7385 Email: Susan.Wolford@SouthernWV.edu

A full organizational chart can be found on the Southernwv.edu website or by request.

Handbook revised August 2022

Program Effectiveness (Benchmarks)

- 75% of graduates will pass credentialing exam on first attempt (5-year average).
- 75% of graduates will be employed within 12 months, (5-year average).
- 50% of students will complete the program within three years.

Program Effectiveness Data

The Radiologic Technology Program is accredited by the JRCERT in Radiography. The following program effectiveness data is made available to the public, prospective students, and communities of interest for compliance to the JRCERT Standards. This data can also be accessed at the JRCERT website, JRCERT.org and at https://www.jrcert.org/programs/southern-west-virginia-community-and-technical-college/

Program Completion Rate: Program #0415

The JRCERT allows each program to set the benchmark for completion rate. For Southern, the annual program completion rate is 50% or higher. Enrollment in the program is defined as those in the program by the drop date of the first semester of the radiologic technology program. The five-year completion rate is 78.5%.

Year:	Number Completing the Program	Number Initially Enrolled	Completion Rate
2017	11	14	11/14 = 78.5%
2018	10	14	10/14 = 71.4%
2019	9	12	9/12 = 75%
2020	11	13	11/13 = 84.6%
2021	10	12	10/12 = 83.3%

Job Placement Rate:

The five-year average for job placement rate of those actively seeking employment will not be less than 75% within 12 months of graduation, as mandated by JRCERT. Not actively seeking employment is defined as the graduate: who fails to communicate with program officials regarding employment status after multiple attempts; unwilling to seek employment that requires relocation; unwilling to accept employment due to salary or hours; on active military duty; or pursuing other education. Job placement has been consistent at 100%.

Year:	Number Employed	Number Actively Seeking Employment	Job Placement Rate
2017	11	11	100%
2018	9	9	100%
2019	10	10	100%
2020	11	11	100%
2021	10	10	100%
5-year average	51	51	51/51 = 100% (2017-2021)

Certification (ARRT) Pass Rate:

Graduates of the program may apply for certification by the American Registry of Radiologic Technologists (ARRT) after completing the program and college requirements for the AAS degree in radiologic technology. The benchmark for the five-year pass rate for the credentialing exam is 75% on the first attempt within 6 months of graduation. The five-year pass rate is 76.5% for 2017-2021.

Year:	Number Passing	Number of Examinees	Percent passage on the first attempt
2017	11	11	100%
2018	9	10	90%
2019	6	9	67%
2020	7	11	64%
2021	6	10	60%
5-year average	39	51	39/51 = 76.5% (2017-2021)

PED updated 8/2022

Program Completion Timeline

In the interest of retention and student success in completing the program the program must be completed in three years of enrollment into the Radiologic Technology program. To be accepted into the program, students must meet criteria for the Allied Health and Nursing programs as outlined in the college catalog and Allied Health and Nursing programs application and College entrance requirements at the time RA courses begin. This means that you may re-enter only once. Enrollment in the program is defined as those in the program by the drop date of the first semester of the radiologic technology program.

If a student must drop due to a D or F grade in any required course, DURING the first semester of the program, the student may be required to resubmit an application for Allied Health and Nursing Programs. This does not guarantee placement in the program. The student will be under the handbook of the class they enter.

If a student earns a D or F in any required course, after the first semester of the program, the student must write a written statement to the Program Director, asking to return. If approved, the student will return in the semester the failed course was taught. If more than one semester of clinic has passed, the student may be required to take a Special Topics course or scheduled labs before re-entering to refresh clinical and didactic competency. If the clinical course was not failed, the student will be required to take the Special Topics course during the repeated semester to maintain clinical competency. Return is not guaranteed. The student will be under the handbook of the class entered.

If a student voluntarily withdraws from the radiologic technology program, (s)he may request to return or reapply according to the above paragraphs, depending on the semester withdrawn.

If the student takes a required non-RA course prior to the semester scheduled, and fails, (s)he will be able to continue with the Program Director's permission if the course is not a pre-requisite for a course in the next semester. All courses within the curriculum must be successfully completed with a grade of C or higher, therefore even support courses taken before acceptance into the program, would have to be repeated if not passed with a C or better.

THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT)

CERTIFICATION REQUIREMENTS

As a radiologic technology student, and future radiographer, the ARRT Standards of Ethics are to be valued and followed.
https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/eac1b19c-a45a-4e65-917b-922115ff2c15/arrt-standards-of-ethics.pdf

Upon graduation, students are eligible to apply for admission to the certification examination in radiography administered by the American Registry of Radiologic Technologists. Graduates who pass the ARRT's examination are certified in Radiography.

Submitting the application*
Applications for the computer-based examinations can be completed up to **3 months prior** to graduation. Examination applications may be submitted for only one category at a time. Applicants should allow approximately 2 days for an online application and at least 30 days for a paper application for ARRT to

process the application. After processing, the candidate will receive a candidate status report providing information on the testing window and scheduling the exam.

Educational Program Completion*

All applicants must have completed the eligibility requirements by the date of the examination. The director of the educational program indicated on the application is contacted to verify that the applicant has successfully completed both clinical and didactic phases of the program as it was accredited. This includes all academic degree requirements if the program is accredited as degree granting. Completion of just the professional component of degree granting programs does not establish eligibility for certification. Southern uses the graduation date as the official date of completion so all program requirements must be met in order to graduate.

ARRT Examination Fees*

The application fee for computer-based examinations is **$225** for the initial application and examination. The fee for repeating this examination is subject to ARRT and is currently $200. Fees are not refundable and may not be transferred to another category of examination. Fees may be paid online by Visa, Mastercard, Discover, or American Express. The program director can request a paper application if desired.

Check the ARRT.org site for candidate handbook and updates.

Ethics Review Pre-Application

Eligibility for certification requires that the applicant for the registry be of good moral character. Conviction of a misdemeanor or felony may indicate a lack of good moral character for ARRT purposes. The ARRT conducts a thorough review of all convictions to determine their impact on eligibility. Documentation will be required. A pre-application may be submitted. If any student has been convicted of a misdemeanor or felony, a pre-application review form may be requested from the ARRT. If there is a need for such form the student should meet with the program director and information for the request will be given or the student may contact ARRT. The pre-application review form may also be downloaded at https://www.arrt.org/pages/earn-arrt-credentials/initial-requirements/ethics/ethics-review-preapplication

Any student with a positive background check showing a conviction of a misdemeanor and/or felony will be required to complete the Ethics Review Pre-Application as soon as possible after the background check is reviewed. The program director must be given a copy of the letter from the ARRT once the Ethics Review is complete. This will be held in the student master file.

Violation of ARRT's Standards of Ethics, including conviction of a misdemeanor or felony, must be reported to the program director within 30 days of the event. Applicants for certification and registration must notify ARRT of any ethics violation within 30 days of the occurrence. Failure to report an incident could constitute an ethics violation and may be subject to disciplinary action independent of discipline related to the initial occurrence.

Violations include:

- Criminal charges and/or convictions
- State licensing issues
- Any other violation of our Standards of Ethics

Have questions or need to report a violation? Call our Ethics Requirements Department at 651.687.0048, select option for "ethics". You can find more detailed information about our ethics requirements and the reporting process at www.arrt.org.
https://www.arrt.org/pages/earn-arrt-credentials/initial-requirements/ethics/ethics-requirements

Eligibility Deadlines
All applicants must have completed eligibility requirements by the date of the examination. The director of the educational program indicated on the application will be contacted to verify that the applicant has successfully completed both clinical and didactic phases of the approved program.

THREE ATTEMPT LIMIT
Candidates who are eligible for primary certification and registration are allowed three attempts to pass the exam. You must complete the three attempts within a three-year period of time that begins with the initial ARRT examination window start date. The window begins after your initial application and will be stated in your candidate status report. After three unsuccessful attempts or three years have expired, you are no longer eligible.

ARRT Continued Qualification
The American Registry of Radiologic Technologists, ARRT, has implemented Continued Qualification Requirements for those individuals awarded ARRT Certifications after January 1, 2011 and thereafter time limited to 10 years. Before the end of the 10-year period, the individual will be required to demonstrate continued qualifications in order to hold certification. Specific details can be found at www.arrt.org.

Official Communication

Students are expected to set up email and computer account through the College. There is no additional cost for this set up and use while the student is enrolled. Please log on and become familiar with the online registration, grade reporting and emailing. The official communication is the Southern email. The My Southern portal is the student's confidential access to financial information, transcripts, Degree Works, as well as where to register for classes.

The student is responsible for notifying the College and Radiologic Technology faculty of email, phone, or address changes.

Radiologic Technology faculty will use email & Brightspace to send information to individuals or classes. Students may access faculty by phone using the directory located through the "Directory" link on the SouthernWV.edu webpage or information provided in syllabi.

Students will be given contact information for each clinical site and clinical preceptor at clinical education setting orientation. It is the student's responsibility to check Southern email for information sent from Southern. During the summer, the program director will be available by email. Check online courses before the course begins. Syllabi may be distributed or in the Brightspace course information.

Job Shadowing

Prior to final acceptance into the program, interested students will complete job shadowing following guidelines discussed at the pre-orientation in the spring. This limited but useful observation time may assist the student in making his or her final decision regarding pursuing a career in radiologic technology. The guidelines and form will be available from the Coordinator/Program Director. Prospective students will complete shadowing at preapproved sites. Prior to shadowing, students may be required to complete online or on-site education, which may include HIPAA/confidentiality or other policies.

Didactic/Lab Attendance

- Radiologic Technology students are expected to attend every class and lab. Each instructor may enforce an attendance policy for the course, as stated in the syllabus.
- If the student must be absent from class or lab, they must notify the instructor before class or lab start time or as soon as possible. Students are responsible for obtaining missed assignments.
- Recommended notification can be made by phone or email to the instructor or administrative assistant. A follow-up email must be sent using the Southern email if this not the primary means of notification.
- Unless otherwise stated in the course syllabus, missed work, tests, quizzes, etc. must be made up before the next scheduled class/lab or with prior arrangement from the instructor.
- Excessive absences may be grounds for course grade reduction, and/or dismissal from the program.
- If the student needs additional assistance and time in the lab to view radiographs, arrangements must be made with the instructor.

ABSENCES

Excused/Unexcused Absences for class or lab on campus

Excused absences are in two categories:

1- **Institutional:** snow days, power outage, other occurrence closes a campus
>Days the College calls off classes, or places them on late schedule.
>The college may delay or cancel only specific campus locations. Only morning or afternoon or evening classes may be cancelled or delayed.
Example: evening classes are cancelled by Southern and you have BS 124 class at 3:30 and lab at 6. You would attend class from 3:30 – 5. The last hour of class and the entire lab would be cancelled.

When the institution (college) cancels classes, these days do not have to be made up and do not count as an absence. All work missed may be made up at the instructor's discretion. The course schedule may be adjusted to reflect covering more or less of the material.

2- **Unavoidable:** death in immediate family, illness with physician's note, or illness of spouse or children with physician's note
>Documentation must be presented to the instructor or program coordinator.
>These days do not have to be made up and do not count as an absence. All work missed may be made up at the instructor's discretion. The course schedule may be adjusted to reflect covering more or less of the material. It is the responsibility of the student to obtain assignments.

>When three or more unavoidable excuses occur within the same semester, the instructor will meet with the student to discuss attendance. Extended absence may impact ability to complete required work and learn necessary material. Students are expected to attend all classes and clinic. Three violations of any policy may drop course grade.

Unexcused absences are those that do not meet the above categories.

>An unexcused absence is one of which the student does not inform the instructor at all (or informs days later) or an absence that does not meet the above criteria for "excused." A deduction in course grade may be applied for each unexcused absence. See course syllabi.

Excessive unexcused absences may require a meeting with the instructor or Coordinator. Documentation will be placed in the student's file. Excessive unexcused absences may be grounds for dismissal.

Tardiness Policy

Tardiness for Radiologic Technology didactic and clinical courses is defined as 7 (seven) minutes following the scheduled start time. Each didactic course syllabi will address tardiness and its effect on the grade.

After 3 tardies, without proper notification to the instructor, a session will be scheduled. Excessive tardiness will affect the course grade and progression to the next course and may be grounds for dismissal from the program. Documentation of the scheduled student-instructor or Coordinator session to discuss the problem will be placed in the student's file.
See specific tardiness policy for Clinic.

Background Check and Drug Screen **2022**

All students have been contingently admitted to an allied health or nursing program until all information/documentation is received on or before a date designated by the program**.** Failure to provide all requested information, to disclose prior felony, misdemeanor, and/or pending criminal charges will result in immediate dismissal from a program.

BACKGROUND CHECK

Students must satisfactorily complete a background check and drug screen prior to entry into an allied health or nursing program and at any other time as requested by the faculty, coordinators or division head. If a student has been convicted of a ***FELONY***, ***MISDEMEANOR*** or has ***PENDING*** criminal charges, a student may be excluded from admission to a program, may not be allowed to attend clinical rotations held at affiliating health care agencies, and/or may be prevented from taking the required Certification/Licensure Examination. Entry into a health care agency is the sole determination of the clinical facility. Certification/Licensing Boards may prohibit students from taking national examinations based on students' physical status, emotional condition, results of a background check and/or drug screen.

It is the student's responsibility to inform the Program Coordinator prior to entering the program or ***IMMEDIATELY*** after an incidence occurs, of any felony, misdemeanor, or pending criminal charges/conviction. Any falsification or omission of information may result in disciplinary action including, but not limited to, dismissal from a program. Pending felony and/or misdemeanor charges
or convictions that occur while in a program must be reported immediately to the Program Coordinator.

DRUG TESTING/SCREEN

Drug Screening upon Admission

Southern West Virginia Community and Technical College, Division of Healthcare and Business, Programs of Allied Health and Nursing are committed to safeguarding the health and safety of students, faculty, staff, administration, community members, and patients/clients while maintaining a drug-free educational/workplace environment. In order to uphold the highest standard of care, the Programs of Allied Health and Nursing will conduct a drug screen test for all students tentatively admitted to any allied health or nursing program.

The alcohol and drug test must occur at the date and time specified by the Program Coordinator or division head and at a location determined by Quality Drug Testing. The type of specimen is at the discretion of the program. Students contingently admitted are **REQUIIRED** to consult with their attending physician/healthcare provider, in order to determine whether any/all prescribed medication(s) may affect program performance. The student who is contingently admitted to a program **MUST** disclose a list of medications prior to testing. Validation of prescriptions must be supplied promptly upon request to the appropriate individuals.

The cost of any and all expenses associated with the drug testing and/or evaluation is the responsibility of the student. It is the student's responsibility to determine from the physician whether prescribed medications may affect program performance and to disclose a list of medications prior to drug screening. Many prescription drugs alter mental status and may impair the student's ability to perform in the classroom or clinical setting. Impairment in the classroom or clinical setting is not permissible regardless of the source. Any attempt to alter the drug test, attempt to prevent collection (example but not limited to: shaving hair), any positive or diluted test results or failure to follow the proper procedure, failure to have the test performed on the date by the approved company, or refusal of a drug screen will result in withdrawing the selection of the student to the Allied Health or Nursing programs by the respective department. Any future reapplication to an Allied Health or Nursing program may not be considered, due to the facility requirements. A student that is unable to enter a facility for clinicals will not be able to complete the program. Appropriate accreditation/program approval agencies may be notified of the results.

Reviewed August 2022

Electronic Device Usage in the Clinical and Didactic Education Settings

Electronic devices:

1. must be silenced once entering the clinical/didactic education center; some CES's may not allow cell phones in the department (CAMC General) and students must follow site policy

2. will not be used during clinical time or during class or lab; during testing, no electronic devices may be on or near the desk; this includes smart watches, cell phones, tablets, recorders, etc.

3. are restricted to breaks & lunch time

4. may not be used in restricted areas

5. on campus, must be silenced and not visible or used during education time

If you must make an emergency cell phone call in an unrestricted area, please notify your clinical preceptor, technologist, or supervisor before leaving the Imaging department to do so.

Excessive cell phone/text messaging usage will not be tolerated. Violations of cell phone policy will follow program guidelines for other policies including disciplinary action that may include a reduction in grade and meeting with faculty/coordinator after 3 incidents. Excessive violation of the cell phone policy may result in dismissal from the program.

Social Media Policy Division of Allied Health and Nursing

Social media includes powerful communication tools that have a significant impact on organizational and professional reputations. Because the lines are blurred between personal voice and institutional voice, Southern West Virginia Community and Technical College's School of Career and Technical Studies has created a policy to help clarify how to enhance and protect personal and professional reputations when participating in social media.

Social media are designed to be disseminated through social interaction and highly accessible. Examples include but are not limited to LinkedIn, Twitter, Facebook, YouTube, Instagram, Tiktok, etc.

Both in professional and institutional roles, employees, staff, and students need to follow the same behavioral standards online as they would in real life. The same laws, professional expectations, and guidelines for interacting apply online as in the real world. Employees, staff, and students are liable for anything they post to social media sites and may be subject to litigation.

Policies for All Social Media Sites, Including Personal Sites Protect confidential and proprietary information:

- Do not post ANY confidential, disrespectful, or unprofessional information about Southern, clinical affiliates, clients/patients, faculty, staff, or students. You must still follow the applicable federal requirements such as FERPA, HIPAA, NCAA, etc. Adhere to all applicable privacy and confidentiality policies. Any confidentiality violation creates the risk of disciplinary action or dismissal from your respective program and is subject to discipline from respective licensure boards. You **can** be held liable for any postings and may be subject to litigation.
- Do not post any content that might reflect poorly on Southern, the program, or clinical agencies or incite litigation.
- Respect copyright and fair use.
- Do not use Southern logos for personal endorsement or without permission.
- Respect College property.
- Do not utilize or access social media platforms during clinical or class hours. Do not utilize cell phones during clinical hours or class time.

Best Practices:

- Think twice before posting.
- Once you post, you relinquish control of its proliferation forever.
- Be respectful.
- Remember who the audience is.

Approved 8/2011 reviewed 8/2022

Dress Code for on-campus Radiologic Technology labs, tours and field trips.

Students attending radiologic technology labs in room 112C or 113C will wear the approved monogrammed polo shirt. Approved long pants, slacks, or skirt must be worn and khaki or tan in color, in good condition. Leggings and jeans are not appropriate attire. Closed-toe shoes are to be worn with socks. Shirts and pants/slacks/skirts should be wrinkle free, not drag the ground, and not have holes or tears. A professional appearance is to be reflected.

Approved May 2016 reviewed 8/2022

Academic Standing & Curriculum Sequencing

Radiologic Technology students must follow a specific succession of courses as determined by the Coordinator and approved by the college. RA courses must be completed in the semester assigned. Support courses (non-RA) may be taken before the scheduled semester, as long as there is no conflict with RA courses, including clinic. Prerequisites apply in many cases. Some courses may not transfer for a specific area of a degree. Check with the registrar or the transferring college. An official, original transcript must be on file with the registrar.

It is the responsibility of the student to review their transcripts and assure substitutions from other institutions are completed for graduation completion. The student must complete a graduation application several months prior to the anticipated graduation date.

If a student must withdraw due to any reason and applies to return the following year, (s)he will be under the new handbook and curriculum.

RA Courses with labs may have separate requirements. In order to progress to the next sequenced course, you must pass both didactic and lab portions. Unless stated in the syllabus, the lab portion is part of the didactic course grade.

The full description of grading as it applies to transcript can be found on page 35 of the College catalog. In the event that most of the course requirements are completed but not all, an Incomplete may be awarded. The coursework must be finished before the end of the next semester or the "I" is changed to an "F" grade. An "I" will not permit a student to register for the following semester's courses during early registration. Examples of when an "I" may be posted are during emergency conditions like coronavirus, or emergency surgery placing a student in the hospital for extended time.
If a student misses clinic time that can not be made up during the semester due to an emergency an "I" will be posted as the grade. After the semester, the student may make up the clinic time and requirements, and then the "I" will be changed.

Advancement Opportunities

A Baccalaureate degree may be earned by completing additional coursework at a college that accepts Southern's AAS degree in radiologic technology. Some courses may be completed at Southern and apply towards the BS/BA degree. If interested, contact the coordinator or college from which you are seeking the

degree. Bluefield State College has an agreement with Southern's RT program which allows students to pursue a 2 + 2 degree.

More information can be found at:
https://bluefieldstate.edu/academics/degrees/imaging-science-22-program-bs
https://bluefieldstate.edu/academics/degrees/imaging-science-computed-tomography-concentration-bs

Radiologic Technology Program Sequence effective 8/2022

Course Number & Name	Credit hours
First Fall	
BS 124 Human Anatomy and Physiology I	4
MT 121 College Math for Gen Ed (or higher)	3
RA 100 Introduction to Radiologic Technology	3
RA 101 Imaging Procedures I and Image Analysis	3
RA 110 Clinical Practice I*	1
Total Semester Hours:	14
First Spring	
EN 101 English Composition I	3
BS 125 Human Anatomy and Physiology II	4
RA 103 Imaging Procedures II and Image Analysis	3
RA 125 Clinical Practice II*	2
RA 106 Radiologic Science I with lab	3
Total Semester Hours:	15
Summer	
RA 150 Clinical Practice III (40 hours/week)	4
Total Semester Hours:	4
Second Fall	
RA 208 Radiologic Science II with lab	3
RA 200 Clinical Practice IV**	3
RA 202 Pathology	2
RA 203 Imaging Procedures III and Modalities	3
CT 260 Introduction to Computed Tomography	3
Total Semester Hours:	14
Second Spring	
AH 200^ Health Care Ethics and Law	1
CS 103 Introduction to Applications	1
RA 209 Radiologic Science III with lab	3
RA 201 Radiation Biology & Adv Radiation Protection	2
RA 225 Seminar in Radiologic Technology	3
RA 250 Clinical Practice V**	3
Total Semester Hours:	13
60 Total Credit Hours	

* Clinical course meets on Tuesdays and Thursdays during morning, afternoon and evenings
**Clinical course meets on Mondays, Wednesdays and Fridays during morning, afternoon and evenings
^ Designates that this course is on the statewide Core Coursework Transfer Agreement.

Smoking Policy

Southern implemented a no smoking policy for all of its campuses with SCP 1750, tobacco and smoke-free campus policy (July 1, 2017). This includes all forms and types of tobacco, i.e. smoking tobaccos, chewing tobaccos, snuff and E-cigarettes (vaping). No tobacco or smoking products may be used on school property. All clinic sites maintain similar no-smoking policies and students are expected to follow the policy of the site where they are located. Violation of clinic site policies will be addressed in the same manner as violation of policies on school campus with possible punishment up to and including dismissal from program.

Food & Drink Policy in RT Classrooms

Food and drink are permitted in the RT classrooms. Everyone is expected to keep the room clean and use the trash receptacles. Food and drink should not interfere with or detract from learning activities and you may be asked to restrict items if disruptive to others or potentially limiting your participation in class activities.

When the CT and/or X-ray rooms are in use as labs, no food or drink are permitted in the area of the control booths, XR table or tube. No food or drink is permitted in the CT room when a lab is scheduled. When laptops are in use, no food or drink are permitted in the area.

If food or drink containers are not disposed of properly or the room is unkept, faculty may not allow food or drink at any time in either room.

Joint Commission and Clinical Orientation Requirements

The Joint Commission (TJC) mandates that clinical sites require formal and informal education of employees, staff and students. Before entering clinics, students must complete training in a variety of areas. These include fire and electrical safety, hazardous wastes, radiation safety, HIPAA, body mechanics, etc.

Each hospital has a different format for this annual training. You may be required to repeat some of the training aspects at different hospitals. Realize it is for the safety of you, staff and patients.

Your signature on training forms indicates you have completed the training or review of policies. This will be shared with the respective hospital. The initial training will be completed at the college during the orientation prior to clinic rotations and online. Please take it seriously. You may see information on RA quizzes or tests regarding this information. This content must be reviewed each year.

An onsite orientation to each clinical site will be conducted by the Clinical Preceptor, to show you their specific equipment and how to safely operate it. You will also review policies and procedures the first week of clinic rotations. You will complete self-directed clinical orientation.

Health and Communicable and Infectious Diseases

Applicants considering a career in any allied health program should be aware that during their course of study and in subsequent employment, they are likely to work in situations where exposure to infectious diseases will occur. This is an occupational risk for all health care workers. Persons should not become health care workers unless they recognize and accept this risk. Proper education and strict adherence to well established infection control guidelines can reduce the risk. These include routinely using PPE (personal protective equipment) or barrier devices (gloves, googles, etc.), handwashing, and carefully disposing of sharps.

The risk to students is potential exposure to communicable diseases. The means of transmission include, but are not limited to, contact with blood and bodily fluids, and exposure to air borne pathogens. Precautionary measures will be implemented. Failure to apply proper methods of prevention may create risk of injury or illness to students and others.

Coronavirus, other infectious diseases, or emergency situations may require the College and/or Program to alter delivery of coursework and clinical rotations. Every effort will be made to provide alternative similar educational opportunities to complete course requirements. If clinical sites suspend student rotations, assignments may be required in Brightspace or a virtual learning setting. The College and/or clinical sites may adopt temporary or permanent procedures like requiring testing before entry, or mask wearing, etc.

CPR: All clinical sites require that you maintain current CPR certification. Whether you take the course at Southern or through an outside agency, you must have proof. A copy will be kept on file. Any hospital may ask to see your current card. Hospitals accept the AHA BLS Provider course which includes adult, pediatric and infant CPR, choking, & AED.

If your card expires before you complete the program, you are required to renew it by taking an accepted course. You will not be permitted to attend clinic with an expired card.

Health Requirements:

After passing the initial physical for allied health program entry, you will be required to:

1- complete the Hepatitis B series and provide documentation

2- obtain TB test annually

3- obtain influenza vaccination annually (by October 15 or date provided by the program for the current flu season)

For those allergic to eggs or other ingredients of the vaccine or who chose to not receive the vaccine, you will be required to wear a mask when in contact with patients as per hospital policy if allowed. Your placement may be jeopardized. Documentation from a physician must be submitted to the clinical education setting and program coordinator if declining for health reasons. Some CESs will not permit you to attend clinical rotations without an annual influenza vaccination. If requesting religious exemption, documentation must be provided to the program coordinator and prior approval obtained.

4- obtain titers (labs) showing immunity for HepB, varicella, MMR

5- complete an approved COVID vaccination series

HEALTH INSURANCE INFORMATION

Southern does not maintain student health insurance or health care facilities. You are required to acquire health care and accident insurance if you are not covered by your parents' or personal insurance plans. Student insurance coverage can be obtained through local independent agents. The cost of medical treatment or support in the event of illness or injury is your responsibility. Students becoming injured or seriously ill at the College or in facilities used by the College must seek professional medical care and be responsible for any expense. Students are to provide proof that they are covered with adequate medical insurance coverage. A copy of the medical card is necessary. If the card is not in the student's name, a letter from the insurance company is required.

TECHNICAL STANDARD REQUIREMENTS

All students enrolled in the program shall be able to perform the following tasks concerning motor coordination, quantitative abilities, physical capabilities and emotional strength:

- Reach and adjust the x-ray tube that is at a height of 76”-80” above the floor
- Lift and carry up to 20-25 lbs. (e.g. multiple imaging plates, grids, positioning aids) while walking
- Stand for long periods while wearing a 5 lb. lead apron
- Move patients to standard wheelchairs and onto stretchers from various areas in the facility and transport to the radiographic room. Assist physically cooperative patients from the wheelchair and/or stretcher to the radiographic table without causing undue pain or discomfort to the patient or oneself
- Safely move immobile patients from the stretcher to the radiographic table with assistance from department personnel. This requires the use back muscles to support and move patients and involves lifting a minimum of 30 lbs., and supporting up to 175 lbs.
- Position patients for various radiographic exams without injury to patient or oneself
- Manipulate and operate radiographic tables, stands, tubes, and accessory equipment into proper positions including fixed and mobile units
- Transport mobile equipment to various areas of the hospital in a timely and cautious manner - Provide oral and legible written information, read written information and receive oral and written information in English from patients and medical staff relevant to patient care
- Evaluate (read & interpret) the written order and requisition for radiographic procedures requested
- Explain the procedure and give clear effective instruction to the patient who is positioned for the radiograph at a distance of 6-10 ft. from the technologist’s control area
- Have eyesight corrected to read the printed words in a radiographic textbook, read and adjust the control panel, read radiographic technique charts, evaluate a radiographic image for quality and proper positioning for anatomical parts, observe patients, manipulate equipment and accessories and visually monitor patients in dimmed lighting
- Hear instructions from members of the health care team, respond to verbal requests by patients at a distance of 6-10 ft. and hear background sounds during equipment operations
- Assess the condition of all patients assigned for a radiographic exam
- React immediately and appropriately to unusual patient and emergency situations that may otherwise jeopardize a patient’s physical state if expedient care is not administered. Handle stressful situations related to technical and procedural standards and patient care situations
- Provide physical and emotional support to the patient during radiologic procedures
- Must be physically free of non-prescription drugs, illegal drugs, and/or alcohol
- Maintain professional standards of care in emotionally difficulty and stressful situations

These standards are in addition to the health physical.

Professional Organizations

First-year students may join the West Virginia Society of Radiologic Technologists, WVSRT, and attend the annual conference. While attending any function as a Southern student, students must adhere to college policies, including conduct, etc.

Second-year students are required to join the WVSRT. Participation at the annual conference is mandatory. This can be accomplished by at least one of the following:

1- submission of research paper
2- submission of exhibit
3- attending as a student bowl team member or alternate
4- attending student educational sessions and mock registry (second-years only)

5- serve on the WVSRT Board of Directors
6- assist at the conference; introduce speaker, etc.

Students that attend on site will not be required to make up clinic time. Students may receive extra time for attending the conference on a non-clinic day or weekend. Students are responsible for letting instructors know ahead of time about conference attendance, including support courses. Work must be made up or completed beforehand, at the instructor's discretion. Travel, lodging and registration fees are the responsibility of the student, but may be supplemented by the college or approved fundraising. While attending any function as a Southern student, students must adhere to college policies. Students are encouraged to join the American Society of Radiologic Technologists, ASRT, as well.

Other Policies

Refer to the College academic catalog for policies the program does not specifically address; the college catalog will take precedence. The student is responsible for these which are warranted. See the current online catalog for these and other policies in the Student Handbook section.
https://www.southernwv.edu/programs/academic-catalog/

Affirmative Action and Title IX

Family Educational Rights and Privacy Act (FERPA) and Disability services- See Appendix 1 or the college catalog at Southernwv.edu

Right-to-Know (Jeanne Cleary Disclosure of Campus Security Policy Act)

Institutions must publish campus security policies and crime statistics in a timely manner for student/public/community review. To learn more about the Act, go to www.securityoncampus.com and click "public policy."
Data can be obtained from https://ope.ed.gov/campussafety/#/institution/search

Academic Integrity SCP-4710

Policy regarding dishonest or misconduct in academics.
https://www.southernwv.edu/assets/uploads/SCP-4710-Academic-Integrity-.pdf
Academic dishonesty may be addressed through disciplinary action including a failing grade in the course, dismissal from the program, or expulsion from the school.

Grounds for Dismissal

Potential grounds for dismissal from the program include, but are not limited to:
1- D or F in same program course twice
2- Cheating (not limited to looking at another's test, copying homework, photographing coursework or testing items in Brightspace, not doing your own work, etc.)
3- Timecard fraud (clocking someone else in/out; misrepresenting timecard with time or location, etc.)
4- Unethical behavior, not accepting criticism with openness or willingness to learn, inappropriate behavior or speech
5- Clinical setting dismisses student for disorderly or immoral conduct on clinical setting premises

6- Insubordination
7- **Three documentations of the same event/action/behavior in the same semester**
8- Multiple violations of different policies or behavior in the same semester
9- Repeated violations or reprimands across semesters
10- Positive drug screen or failure to complete drug screen in timely manner
11- Convicted of a criminal offense after acceptance into the program; depends on severity
12- Abuse of college policy
13- Dosimeter conduct: repeated late submission; non-payment, late payments, misuse of dosimeter
14- Negligent or misuse of equipment or use without permission
15- Failure to accomplish clinical assignments or objectives
16- Falsifying clinical coursework (signing for the RT, or obtaining signature after allowable window, having different RT sign, etc.)
Others listed in the academic integrity policy, SCP- 4710

Grading Policy

The Radiologic technology program uses the following scale for all RA courses, including clinic:

93-100	A
86-92	B
78-85	C
Below 77.5	Failure in a Radiology assigned course

Note: Rounding occurs at the final course grade only.

Example: Student earns 93.2%, will be recorded as 93%, or A.
Student earns 85.7%, will be recorded as 86%, or B.

For weighted categories within a course, you can average your grade throughout the course. For example: exams 50%, quizzes 25%, final 25%. You average the scores for each category and multiple that by the weight.

Your exam scores are: 95 & 75. 95 + 75 = 170/2 = 85 x weight of 0.5 (or 50%)	**42.5**
Your quiz scores are: 80, 70, 60, 90, 90, 80 = 470/6 = 78.3 x weight of 0.25 (or 25%)	**19.25**
Your final exam score was: 77 x weight of 0.25 (or 25%)	**19.25**

Add the bolded numbers = 81% is your final grade

Allied Health and other courses may use a different scale.

Grades may be viewed on MySouthern at mid and end-term. Midterm progress may be distributed by the instructor as a courtesy.

TEST REVIEW POLICY

The students will be given an opportunity to review their test in class after the test has been graded. The student may request an appointment to review a test with the instructor at a scheduled time. During this time, the student will ***not*** be allowed to write down, record or photograph any questions or other information for any reason. This will be the policy for both didactic and clinical examinations.
If a student wishes a second review, it will be up to the discretion of the instructor whether to schedule an additional review.

Class Representation

Each Radiology class has the opportunity to function as a team at the WVSRT or other conferences, promote the career, and educate the public about health issues. Usually at the end of the first Semester the class will elect officers. These officers will serve the remainder of the two years. Candidates should display honesty, integrity, leadership and great communication skills. Officers may attend Student Government Association meetings and program advisory meetings.

The offices are:
President
Vice President
Secretary/Treasurer

Class officers may be asked to serve as ushers at graduation or pinning of their upperclassmen.
Only Southern approved t-shirt designs may be considered for those attending WVSRT conference or other functions.
No signage may be posted without approval and then only in designated areas.
A class photographer may be designated to record class labs, clinic and outside events like the WVSRT conference. No patients may be in photos. These photos may be used for the pinning ceremony.
All students are encouraged to participate in SGA, Student Government Association, events and/or a college-sponsored group.

Fund Raising Participation

Fundraising events can be non-Southern related or must be preapproved. No faculty may be involved in selling, only completion of the SCP form. Events must be preapproved on a solicitation form three weeks in advance whether held on campus or not.

Monies may only be collected or maintained by a predetermined Southern faculty or employee. If fundraising events bring in money, it must be given to the Foundation/designee to be held until needed. The class secretary/treasurer will be responsible for maintaining a record of money brough it and used while faculty will be responsible for security of physical funds.

Joint Advisory Committee for Radiologic Technology

The Joint Advisory Committee for Radiologic Technology meets once or twice a year. This committee is made up of hospital representatives at which students rotate- a radiologist or radiation safety officer, supervisors, and clinical preceptors. This committee discusses any issues or concerns, reviews assessment data and makes suggestions for improvement. One student from each class will be selected by the program director. This student will be excused from clinic for this meeting, but must make up any class work missed, if it is on a class day. This student may be asked to relay information from the class to the advisory committee or may be asked to speak on the students' behalf on something that is discussed at the meeting. Usually, the student gives a brief summary of the meeting in class. This student must communicate well and be respected by others.

Assessment

Southern WV Community and Technical College is required to perform assessment to indicate student learning. You will receive a letter of notification to attend assessment day or other testing. You will not have to make up clinic if it falls on a clinic day. Classes may be cancelled for Assessment Day. Usually second-year students must attend Assessment Day. Some years, an assessment activity is presented where allied health and nursing students participate in a mock disaster, for example.

Courses are evaluated after midterm. You will be given the opportunity to make comments and evaluate each instructor and course. These evaluations are completed online. You will complete a separate evaluation for clinic rotations. The CES evaluations are shared with each site so that improvements can be made or praises noted.

Professionalism

The Code of Ethics for Radiologic Technologists, found at ARRT.com, states how a technologist or student should conduct him or herself. The faculty would like to promote professionalism while the student is in the program. The following is a list of some, not all, of the ways in which the student can display professionalism.

1. Respect others' opinions
2. Listen as others speak
3. Address faculty as Miss, Mrs., Mr., Dr., or Professor unless directed otherwise by faculty
4. Maintain a clean and neat appearance in class and clinic
5. Use respectful language in an appropriate volume and tone
6. Display positive body language
7. Do not use electronic devices in class, clinic or at conference sessions unless permitted
8. Respond to criticism with openness and willingness to learn

The instructor is responsible for maintaining order that preserves the integrity of the learning environment. If the instructor feels that the behavior of a student is disturbing, interfering with instruction, offensive, or otherwise inappropriate, the student may be dismissed from the learning environment for that class period. Further action may be taken if indicated by the seriousness of the behavior including, **but not limited to,** dismissal from the program.

Felony or Misdemeanor

I understand that a conviction of a felony or misdemeanor requires documentation with a letter of explanation to the Radiology Department of Southern West Virginia Community and Technical College prior to entering the Radiology program.

I understand that such a disclosure does not guarantee that I will be allowed to enter and complete a program in the School of Career and Technical Studies.

If I am allowed to enter the Radiology Program, I understand I must also send a copy of the documentation of the felony or misdemeanor (other than parking/speeding tickets) with the letter of explanation to the American Registry of Radiologic Technologists for determination of eligibility to sit for the ARRT Registry Examination. I must complete the Pre-ethics procedures explained at ARRT.org. The ARRT requires registrants to report such activity within 30 days. The state of WV board of examiners for radiologic technologists may ask for documentation. They may deny licensure depending on the nature and severity of the felony/misdemeanor.

Radiologic Technology Program Costs per Student 2022

Estimates *Revised 5/2022*

In-State				Cost (Estimate)
First Year – Fall Semester				
		Tuition and fees (14 credit hours)		**3078**
		Books (or rental fee $336 built into tuition)		**1022.5**
		Drug Screen, Background Check		150
		Uniform		150
		Leather uniform shoes	Will vary	50-100
		Image Identification Markers		25
		Physical Exam, Immunizations	Will vary	100-200
		CPR Course	Will vary	30-100
		Supplies (pens, paper, notebooks, etc)	Will vary	50
		Travel (clinicals – gas, food, lodging)	Will vary	varies
		Professional State Conference (optional)	Will vary	varies
				$3633 / $4319 +
First Year – Spring Semester				
		Tuition and fees (15 credit hours)		**3153**
		Books (or rental fee $360 built into tuition)		**127**
		Immunizations	Will vary	50-100
		Travel (clinicals)	Will vary	varies
				$3203 / $2970 +
Summer Semester				
		Tuition and fees (4 credit hours)		**976**
		Books (or rental fee $96 built into tuition)		**0**
		Travel (more likely to include lodging)	Will vary	varies
		Financial Aid or scholarships will not cover summer courses. May be eligible for HEAPS as part time student.		**$976 / $880 +**
Second Year – Fall Semester				
		Tuition and fees (14 credit hours)		**3078**
		Books (or rental fee $336 built into tuition)		**310**
		Influenza vaccine	Will vary	0-50
		Supplies (pens, paper, notebooks, etc)	Will vary	50
		Travel (clinicals)	Will vary	Varies
		WVSRT student membership		10
		WVSRT annual conference (registration) – required		100
		WVSRT annual conference (lodging 1-2 nights)	Will vary	300
		WVSRT annual conference (travel)	Will vary	varies
				$3538 / $3512 +
Second Year – Spring Semester				
		Tuition and fees (13 credit hours)		**3003**
		Books (or rental fee $312)		**292.73-443.74**
		Travel (clinicals)	Will vary	Varies
		Review seminar for certification		260
		ARRT Registry application		225
		WV Radiologic Technologist temporary license	May vary by state	40
		National Honor Society + cord (Lambda Nu)	If eligible	30
		Program pin		10
		Graduation photos	If desired	50-100
				$3618 / $3599 +

		Tuition & Books with rental **Tuition & Books without rental**	**13,288** **13,600**
		Other Expenses	**1,680+**
		Total	**$14,968+/15,280+**

Program costs and individual fees are estimates. Some charges are subject to change or may vary from the information available at the time of this document review. Some charges will be flexible; cost may vary by situation (distance traveled for clinic, sharing lodging) or may have options of different cost from which student can choose. Tuition is based on credit hour total and may vary for individual students. Calculation of textbook rental fee accounts for RENTAL only and not extra costs of purchasing books to keep at the end of the semester. This is an estimated TOTAL cost over the two years of the program. It does not take into account scholarships, grants, loans, or other forms of aid. It is not necessarily an estimate of out-of-pocket expense.

Financial Assistance

From time to time, students may need financial assistance for travel costs to/from clinic, textbooks, or other fees. Students should search the scholarships given online and check specific criteria. If the student does not meet scholarship criteria, he or she may approach the Coordinator to pursue assistance from the Southern Foundation. The student must give rationale and justify the amount requested. It is the student's responsibility to complete financial aid forms but (s)he may always seek assistance from the office of financial aid. Hospitals or outside entities may offer various scholarships or aid option.

Policies and Clinical Information
2022-2024

Additional forms and related information may be given out in the corresponding semester with the syllabus.

Health and Abilities of a Radiologic Technologist

To work around the sick, the student MUST be free of Communicable Diseases. The student RT must also be in good physical condition to be able to lift patients and manipulate heavy equipment. The student RT must be alert and mentally sharp to avert equipment malfunctions and select proper technique values per each patient. If the student is suspected of DRUG or ALCOHOL ABUSE while in clinical settings, he/she will be sent home and will receive an UNSATISFACTORY for the day. DRUG or ALCOHOL use may be cause for dismissal from the program. In the presence of concerns, immediate alcohol and/or drug testing may be conducted at the students' expense. These requirements are subject to change.

HEALTH REQUIREMENTS
All students who enter into a field of Health Sciences must have a PHYSICAL EXAMINATION, which is to be submitted prior to clinical placement.
REQUIREMENTS:

1. A recent physical with forms to be submitted to the Program.
2. A recent Tuberculin Skin Test or recent Chest X-Ray (to be repeated annually).
3. A titer (blood test) showing Hep B and varicella immunity.
4. Annual influenza vaccination (October)
5. Vaccination for Hep B, MMR, varicella, tetanus (within last 10 years), and COVID

Handwashing must be performed:

1. prior to all invasive procedures
2. if contaminated with blood and/or body fluids
3. immediately after gloves are removed
4. before and after eating
5. before and after patient care

When contact will occur with a known infectious patient or a patient of high risk, the student must be under the direct supervision of a registered technologist and utilize appropriate PPE. Students are required to comply with facility protocol for proper PPE, precautions, and potential limitations of student involvement with highly infectious patients (such as COVID+ patients or those during a high-risk outbreak).

Physical Attributes

The Radiology student must demonstrate that they possess the following physical attributes:
Mobility: Physical abilities sufficient to move from room to room and to maneuver in small spaces (e.g. between beds, equipment, etc.).
Motor skills: Ability to reach, manipulate and operate equipment, access supplies, & assist patients.
Hearing: Auditory ability sufficient to hear alarms, patients' requests, phone orders from providers, and equipment malfunctions.
Visual: Visual ability sufficient for observation, and assessment of patients during radiographic procedures. Read forms, labels, & instructions, distinguish colors, and visualize detail on an image.
Smell: Sense sufficient to maintain patient & co-worker safety (e.g. smell fire, gas, toxic agents, etc.).

Temperament: Ability to deal effectively with stress and emergency situations.
Physical Requirements: Frequent and long periods of walking, standing, lifting, seeing, hearing, talking, public contact, decision making, equipment and computer operation, reading, reaching, grasping, feeling, handling stress and grief. See also Technical Standards.

Outside Employment

Full time employment outside clinic and didactic course is not recommended. The long hours required may adversely affect the student's ability to meet assignment deadlines, or the ability to function at clinical effectively. Outside obligations or commitments do not excuse absence or failure to complete work or meet requirements.

Standard of Conduct and Performance for Radiology Depts.

All policies, rules, and regulations regarding student rights, responsibilities, and conduct in West Virginia Universities and Colleges apply to the clinical portion of this program. These policies, rules, and regulations are listed in the Southern West Virginia Community and Technical College's Student Handbook and sections in the college catalog.

Additional standards and procedures exist for the Student Radiographer. As stated in the Agreements for Clinical Education, there is a clause, which allows the clinical agencies to reject or dismiss any student whose behavior may be hazardous to that agency. If this occurs, the Faculty and/or College will review the case and render a decision as to the student's status. Students have all rights and privileges under this due process system, recognized in regulations mentioned above.

Student Clinical Assignments and Procedures

Each student in the radiologic technology program will be assigned to clinical rotation sites each semester. It should be noted that most students would be assigned to more than one clinical site to perform their clinical education. The best clinical education includes a variety of clinical sites, personnel, equipment, workload, and patient demographics. Students' travel distance is considered when making schedules as possible. Each semester rotations may or may not be at a different clinical site. The availability of sites for the radiologic technology program is based on a contractual agreement between the facility providing the clinical rotation experience and Southern WV Community and Technical College, as well as mutual agreement on the clinical schedule and student placement for their facility. Based on clinical affiliation site contracts, each clinical site has the right to terminate their affiliation with Southern within a specified time frame but shall not affect those presently enrolled and performing clinical training. If a facility terminates a contract and/or denies permission for a student or students to perform clinical training in their facility, Southern's radiologic technology department will make every effort to find the student another clinical site in the college's service area; however, students should be aware that the only available site may in different locales than the original assignment. Should this situation occur, clinical rotation assignments will be made by the clinical coordinator and based on the availability of appropriate clinical sites. Students not able to be placed in a clinical site will be placed on a waiting list (in order of academic performance in RA courses) and will be placed as soon as an appropriate site becomes available. That student's clinical education will be the same as for all others. A student's failure to comply with facility requirements for clinical placement may limit opportunities and hinder the student's ability to meet program requirements.

A student may be admitted to the radiologic technology program under conditions in which a clinical assignment cannot be guaranteed and/or situations may arise once the student is enrolled that may delay or prevent clinical site assignment. These conditions include, but are not limited to:

1. Students who require accommodation that cannot be reasonably provided – The radiologic technology department will make reasonable attempt(s) to assign the student to a clinical site in a

timely manner. Such a clinical assignment is not guaranteed and the student's completion of the curriculum may be delayed or may not be possible.

2. Students who are impacted by unusual circumstances that require a clinical site or Southern to temporarily or permanently suspend its clinical relationship – The radiologic technology department realizes that such circumstances are without foreknowledge of the student, and that the first responsibility of Southern is to the student enrolled in the curriculum. Every effort is made to re-assign the student within the shortest time frame to another clinical affiliate such that the student's graduation is delayed as little as possible.
3. Students who are convicted of a felony or become involved in criminal acts after admission preventing clinical assignment. Clinical assignment may be delayed or not be possible.

Examples of past clinical rotation schedules may be reviewed in the clinical coordinator's office. It should be noted that these are only examples and schedules are unique each year. Your schedule may or may not be like these examples.

Clinical/ Class Assignments

Clinical rotation times may include early morning to late night. For example, 7:30 am – 4 pm, 7:30 – noon, 6 am – 4 pm or 7:30 am -6 pm, (summer clinic), 3-11 PM second year, 7:30 am – 2 pm. During the first year, efforts are made to keep the number of evening clinical rotations to 0-3 weeks per semester. All students should note that they may have a morning class after evening clinic or early clinic rotation following an evening class.

Didactic courses follow the curriculum sequence. Students are responsible for registering for courses early to assure availability. No didactic classes may be taken on clinical days, unless they are online.

Any course changes in schedules for Radiology students must go through the Coordinator. Any change in clinical assignment must be made through the Clinical Coordinator.

Presence in Authorized Clinical Areas

The student may only enter clinical authorized areas during the scheduled times as an enrolled student in the program due to capacity and confidentiality issues. Student presence at these sites during unscheduled times may be considered trespassing and be subject to infringement of program policy. Furthermore, unauthorized use and/or possession of clinical supplies outside program guidelines is grounds for dismissal. Your uniform is to be worn for scheduled times of clinic rotations.

Clinical Code of Conduct: rules and regulations – these will be included in clinical syllabi

Clinical Absences

Clinical rotations are courses and therefore adhere to attendance, tardiness and weather policies.

EXCUSED clinical absence refers to:

A. **INSTITUTIONAL** (such as snow days, etc…)
   If part of a clinical shift is delayed or cancelled, the student must complete the remaining shift or use available SATO. The student must call the appropriate CI if not attending clinic. Examples:
   a. Southern cancels all Tuesday classes due to icy conditions; if you are scheduled for clinic, you DO not attend.
   b. Southern cancels evening classes (defined as 5-9 pm)- if scheduled for morning/afternoon clinic, you WOULD attend clinic; if scheduled on evenings, 3-11pm, you would attend 3-5 pm unless you choose to use SATO for the 2 hours. See weather policy for clinic.

B. **UNAVOIDABLE**- Death in the immediate family, personal illness (with physician's excuse), illness of child (with physician's excuse), emergency, admitted to hospital. The student must communicate the situation to the CI and Clinical Coordinator or Program Coordinator.

To utilize excused clinical time under this policy, there will be proper and authentic documentation presented to the Clinical Coordinator within one week.

Excused absences (other than Institutional Closings) permitted per semester:

RA 110	One excused absence permitted with proper verifiable documentation presented to the clinical coordinator within one week.
RA 125	One excused absence permitted with proper verifiable documentation presented to the clinical coordinator within one week.
RA 150	One excused absence permitted with proper verifiable documentation presented to the clinical coordinator within one week.
RA 200	Three excused absence permitted with proper verifiable documentation presented to the clinical coordinator within one week.
RA 250	Three excused absence permitted with proper verifiable documentation presented to the clinical coordinator within one week.

- Excused absences in the fall semesters must be made up Monday – Wednesday of Thanksgiving break.
- Excused absences in the spring semesters must be made up Monday – Wednesday of spring break.
- Students must use their **SATO FIRST**. If no SATO remains, a grade reduction will be applied if the absence occurs after the dates described above or the student fails to make up the time.

UNEXCUSED clinical absences: those not meeting the excused criteria. Unexcused clinical absences **cannot** be made up. There may be a 1-letter grade deduction for each occurrence.

Any clinical time accumulated due to professional educational activities must be prearranged and documentation received by the Clinical Coordinator.

Clinical Tardiness

1. Tardiness is when any student reports to the clinical facility after seven (7) minutes from the assigned start time.
2. After receiving 3 tardies, there will be a 1 letter grade deduction.
3. If the student's tardies are excessive it will result in multiple grade deduction(s).
4. Students may not stay over the rotation end time to make up for tardiness.

Student Approved Time Off

Time off will be granted as approved by the Clinical Coordinator **in advance**. The student must document the approved time off (SATO) on the timecard with the CI's initials (or in electronic time management system, such as Trajecsys). The maximum SATO varies per semester and can be used at the student's discretion. One day is defined as the number of hours assigned for one clinic day that semester. No make-up days can occur unless SATO time has been used and the absenteeism is excused based on the documentation provided. Make-up dates must be during the prearranged fall and spring semester break dates. No SATO may be used on scheduled meeting days, orientations, or tours. If an emergency occurs,

contact the Clinical Preceptor and Clinical Coordinator. (Exceptions may be approved based on inclement weather events).

The amount of SATO per semester follows: RA 110, RA 125, RA 150 1 day (equivalent to the hours worked during 1 shift)
During the first year (RA 110, 125, 150) SATO must be taken by the end of the summer semester. No untaken SATO time may be carried over into the second year.

RA 200, RA 250 1 day (equivalent to the hours worked during 1 shift)
During the second year (RA 200 & 250) SATO must be taken by the end of the spring semester.

Accrued SATO can be used with prior approval in whole hour increments.

Inclement Weather Policy for Clinical Education

In the event that inclement weather does occur, the following rules apply:

1. Clinical education is NOT cancelled UNLESS:

- ONE of the campuses is closed & classes are cancelled.
- Program faculty/Clinical coordinator cancel clinical education based upon current or forecasted weather. Students may be notified by phone, email, text message, and/or private group - social media page.
- In the event that scheduled day or evening classes are on a regular schedule and the other shift is cancelled due to changing weather conditions, the students attending that particular shift do not have to attend or make-up that clinical education activity.
- In the event that part of your clinical education shift is cancelled due to changing weather conditions you must still attend the other portion of your shift (i.e. morning classes cancelled you must attend the afternoon portion of your clinical education if applicable or use SATO for afternoon).
- Cancellation of clinical education authorized by the college or program faculty will not be rescheduled unless the student needs to complete specific exam competencies for graduation.

2. During an inclement weather situation, the student will routinely use the county school system decision for the county in which they reside or where the clinical education center is located to assist them in making an informed/safe decision to travel to clinical education. However, if Southern does not cancel classes the clinical education must be rescheduled.
Clinical Sites Counties:
Tug ARH, Pikeville MC – Pike County
LRMC – Logan County
BMH – Boone County
CAMC's, TMH and TIC – Kanawha County

Use the county school system in making this decision. This also applies to the county school system starting time delays. If your resident county or clinical site county has a delay, you may follow their schedule for safety concerns. The missed time will be made up in the restricted time frame or the student will use SATO.

- Please use your discretion and judgment in traveling to your clinical education center.
- HOWEVER, if Southern WV Community & Technical College classes are NOT cancelled, the scheduled clinical education activity must be rescheduled in the restricted

time frame with clinical coordinator/clinical preceptor of the particular clinical education center or the student will use SATO.

- The scheduled clinical education activity will be made up during the SAME shift and CES location & during the restricted period or SATO will be used:

a. **Spring Semester:** Spring break week except Good Friday.

b. **Fall Semester:** Thanksgiving break week except for Thanksgiving Day or Friday.

c. **Summer Semester:** July 4th break week except for the actual holiday.

3. Notify **the facility and clinical coordinator** 30 minutes prior to start time if you are not safe to travel. We do not want you in danger while traveling to clinical education so please use extreme caution when bad/inclement weather does occur. Sign up for college alert system.

Vacation and Attendance Policy

The accrediting body (JRCERT) for Radiology Programs requires that the program hold the student to clinical competency-based education including competencies. These competencies are accomplished during your clinical assignments. Students will receive all breaks as scheduled in the academic calendar. The only period that this program may deviate from the academic calendar is during the summer clinical assignment. During this time there may be a one-week break, usually near the July 4 holiday. If number of weeks or days changes, this may change. For the types of absences, see the attendance policy. Students do not have additional "vacation" time beyond the accrued SATO which should be used judiciously.

Compensatory Time & Staying Over Policy

Compensatory time must be pre-arranged with the Clinical Coordinator and Clinical Preceptor. It is the student's responsibility to see that all time is recorded promptly and accurately on the appropriate forms kept by the Clinical Coordinator. Compensatory time may be granted for out-of-program assignments and seminars- this may be used as clinic time as defined by the Program Director. This must be approved in advance.

If a student is performing a competency exam at the end of a shift, the Clinical Preceptor is to be notified in order for the student to remain at the clinical setting after the scheduled end time. The Clinical Preceptor must initial the student's timecard and state reason (performing comp.). For evening hours when the clinical preceptor is not present, the radiologic technologist who evaluated the student's comp. will initial the timecard and note reason. The minutes over will be rounded to the nearest quarter hour. **This time must be taken on the last clinical day of the same week, by leaving early.** If this occurs on the last clinic day of the week, the student must notify the clinical coordinator who may grant permission to leave early the following clinic day. If the comp. exam is expected to last over a half hour after the scheduled end time, the clinical coordinator must be notified ahead of time.

Withdrawal from Class

Students failing at midterm will be notified by letter or online. Please consult with your advisor should you receive a failing letter. It is the student's responsibility to be aware of his/her average during the semester and to seek counseling accordingly. If you withdraw during the withdrawal period, your grade will be recorded as a "W" and will not count in your grade point average. If you withdraw after the withdrawal period ends, you will be given a "WF" (Withdraw Failing) or "WP" (Withdraw Passing) by the class instructor. A "WF" will appear on your transcript as a "WF" and will be averaged in with your grade point average. A "WP" will appear on your transcript as a "WP" but will not be averaged in with your other grades. Check your college calendar for the last day to withdraw with a "W". (Consult the Tuition Refund Policy online).

WITHDRAWAL FROM A REQUIRED RADIOLOGY COURSE WILL PLACE THE STUDENT OUT OF THE PROGRAM UNTIL THAT COURSE HAS BEEN SATISFIED IN THE SEQUENCE OF COURSES. ALL RADIOLOGY COURSES MUST BE COMPLETED IN A THREE-YEAR PERIOD.

Travel to Clinical Settings

A vital portion of the Radiologic Technology program curriculum is clinical education. To obtain the greatest possible opportunities for competency with different imaging systems and types of equipment, and to maximize availability of procedures, you will be expected to travel to each or most of the clinical sites at some point during the two years. You can arrange to carpool with fellow students or arrange for housing.

I understand that it is my responsibility to arrange travel to and from clinical sites for scheduled clinical rotations, tours, and orientations and to ensure this does not interfere with class or other program obligations. Note: Signature for travel policy obtained at orientation.

Clinical Dress Code

Students must maintain a professional appearance at all times. A conservative appearance in grooming with good personal hygiene is mandatory.

Clinical Uniforms:

□ Only approved Southern Radiology uniforms must be worn. Returning students must adhere to current uniform policy.
□ A plain white, black, gray, or navy shirt may be worn under the top. No writing or logos may be visible.
□ Pants must be approved and must be scrubs (no leggings, yoga pants, joggers, etc.).
□ Students working on portable and surgery may substitute hospital issued scrubs for the assigned uniform. Hospital scrubs may not be removed from the grounds. Students must follow hospital dress code in these situations.
□ Uniforms must be neatly pressed.
□ Pants should not fall below the shoe heel edge and must not drag the ground.
□ Pants must be worn at the waist, not below.
□ Hoodies, sweaters are not permitted. Students may purchase approved uniform jackets or approved fleece jackets.
□ The uniform should be worn only clinical settings or at an approved campus event.
□ The entire uniform must be worn when entering or exiting a clinical site.
□ Uniforms should be well-fitted. Undergarments or bare skin should not show when leaning, bending over, or stretching. An undershirt may be necessary.
□ An approved uniform jacket or fleece jacket may be worn that has the Southern logo and program name.

Shoes & Socks:

□ Standard white or black leather shoes are required, with closed toes and full heel.
□ Good quality shoes will be important to your feet and back.
□ White or black socks or hose must be worn.

Hair & Beards:

□ Hair must be confined neatly out of the face when in patient care areas. If below collar length, it must be pulled up.

□ Bangs must be out of the eyes.

□ Plain, inconspicuous barrettes or simple headband may be worn in addition to hair ties/elastics or bobby pins used to confine hair.

□ Beards and mustaches are permitted if kept clean and neatly trimmed. Students will be required to abide by facility safety policies and facial hair may be restricted if interfering with PPE such as an N95.

□ Hair color must be one considered natural. Student may seek clarification before changes if unsure.

ID Badges and Name Tags:

□ The approved ID will be the Southern ID. Name tags must be visible while at clinical sites and worn at the lapel or upper shirt pocket level, with the name side visible, not covered by stickers, pins, R/L markers.

□ If facility requires additional student ID this must also be worn in accord with facility policy but does not take the place of the Southern ID.

Radiation Monitoring (Dosimeter) Badge:

□ The dosimeter must be worn properly.

□ If only one badge is worn, it will be worn at the collar, outside of the apron, for EDE2 calculations.

□ If wearing two, as for pregnant worker, the second one will be worn under the apron at the waist level.

□ If the student does not have a dosimeter (s)he will be sent home with the remaining hours for the day deducted from clinic SATO.

□ The dosimeter must be worn for on-campus labs.

□ Dosimeters are not to be shared or traded under any circumstances.

Dosimeters are exchanged every quarter. Students may be expected to pay a fee promptly each quarter. For 2022-2023 academic year, badge fees are covered by grant funding. If the student drops out of the program for any reason, they are responsible for the dosimeter fee if it has already been processed for the next quarter. Fees not collected will place a hold on registering for the next semester courses or if not collected by commencement will place a hold on the diploma.

Gum: Gum chewing is not permitted.

Fragrances:

□ Most healthcare facilities are fragrance free. Co-workers, staff, and patients may be allergic or sensitive to cologne or perfumes. This may include scented lotions and sprays.

Jewelry:

□ Jewelry must be kept to a minimum for safety and aesthetic reasons. Engagement rings and/or wedding bands may be worn if you choose EXCEPT in situations where ALL jewelry is contraindicated (operating room, applying sterile gloves, etc.). A small, plain watch may be worn and may be needed as phones cannot be used in patient care areas or while on clinic time.

□ You may wear up to 2 pair of small, inconspicuous post pierced earrings. One hole earrings only – no bar type. For safety and aesthetic reasons, no other piercings may be worn on other body parts while attending clinical rotations.

□ Clear spacers may be used to maintain existing piercings without jewelry.

□ Tongue, eyebrow, nose, or similar piercings should not be obtained during the program as they cannot be easily concealed. Ear gauges should not be obtained during the program.
□ Bracelets (including those to promote a cause or make a statement) are not permitted within clinical facilities for hygiene reasons.
□ You may be permitted to wear a small pin or badge during national RT week or similar events with permission.
□ Even non-visible jewelry may pose a safety hazard in certain settings (such as MRI).

Fingernails, Nail Polish, & Make-up:
□ Fingernails must be kept short and filed smoothly so they do not extend beyond the ends of the fingers. This is to ensure safety of both you and the patients.
□ Acrylic nails, gel, or tips are not permitted. Decals on nails are not permitted.
□ Polish may be "nude" or flesh-tone in color only and must be maintained in good condition if worn (no chips or peeling).
□ No HEAVY make-up is permitted. You are to appear clean and professional.

Tattoos:
□ Tattoos may not be visible whether temporary or permanent. All tattoos must be covered.

R/L Markers

□ Each student must purchase at least one set of markers with three initials. It is recommended that two sets be purchased.
□ Markers not visible on competency means the competency is not graded.
□ Markers must be rectangular in shape, plain colored (no glitter or odd shape), recommended in RED and BLUE only, with student's three initials.

Mismarked Images

Mismarking images is a serious mistake. After the first incident, the CI will document counselling the student as to proper use and find out the reason why it occurred. After the second incident, the CI will inform the Clinical Coordinator, who will document counselling the student and may require additional action. A third incident in the same semester will result in a letter grade cut in that clinical course.

Dress Code at Professional Meetings/Conferences

The student is representing the College at conferences or professional meetings. It is expected that the student will dress and behave professionally. The Southern polo and/or approved t-shirt may be permitted. College and program policies are to be followed.

Individual clinical preceptors reserve the right to send a student home from clinic if these guidelines are not met. There will also be a reduction to total clinical time and assignments that could result in a grade reduction. Documentation will be placed in the student's file.

Disciplinary Action

VIOLATIONS IN THE ANY POLICY WILL RESULT IN DISCIPLINARY ACTION

The Student Session Documentation form is used to note any disciplinary action or progress reports in clinic or didactic courses.

First Offense	Verbal Warning
Second Offense	Written Warning
Third Offense	Deduction of One (1) letter grade in the Clinical or Didactic course

Any three violations (different sources or of the same) will result in one letter grade deduction.

See the form on the next page.

Radiologic Technology Program Southern West Virginia Community and Technical College

Student Session Documentation

Student: _____ Date: _____

Clinic:____ or Class: ___

Reason(s) for Session:

- ☐ Clinical
- ☐ Didactic
- ☐ Disciplinary (Tardiness, clinical dress code, etc.)
- ☐ Student initiated
- ☐ Other Policy or Procedure: ____
- ☐ Positives or Strengths

- ☐ Verbal (1st)
- ☐ Written (2nd)
- ☐ Written (3rd)

Comments/Description:

Suggestions to improve or Action plan:

Signatures:
Student: _____CC/ Instructor: _____

Copy will be maintained in student file.

Radiation Safety Program (ALARA)

I. Purpose:

This policy describes the rules and procedures for maintaining a radiation safety program consistent with the ALARA concept. Note that this policy is written for a hospital imaging services department and has been adapted for the academic setting. Some specifics are not pertinent. When "user" or "worker" are mentioned, it refers to students.

II. Introduction:

Ionizing radiation is among the most versatile and useful tools of medicine and biomedical research. Like many other instruments of medicine, ionizing radiation is potentially hazardous unless used with strict adherence to safety rules and procedures. Thus, the safety rules which govern the uses of radiation are concerned with preventing genetic damages as well as with protecting the health of the exposed individual.

The rules and procedures set forth here have one single, straightforward purpose; to protect the patients, employees and visitors from unnecessary and potentially harmful radiation. The existing safety program has many facets designed to keep levels of exposure to personnel at a minimum. The program has three main phases:

PHASE I

Achieve the objective of maintaining radiation exposures to "As Low As Reasonably Achievable" (ALARA) to employees, visitors, students, and patients who are not under medical supervision of the administration of radiation or radioactive material for diagnostic or therapeutic purposes.

PHASE II

Control operational procedures by the user of radiation sources.

PHASE III

Evaluate the radiation safety program performed by the Radiation Safety Office, health physics consultant, and the Radiation Safety Committee.

RADIATION SAFETY PROGRAM (ALARA)

INTRODUCTION

A. Purpose

This program sets forth the philosophy and general management policies that are established by this facility to achieve the objective of maintaining radiation exposures "as low as reasonably achievable" (ALARA), for employees, visitors, students and patients not under medical supervision for the administration of radiation or radioactive materials for diagnostic or therapeutic purposes.

B. Policy

In addition to complying with the limits set forth in pertinent regulations, guides, and standards, users and supervisors of radiation sources shall make every reasonable effort to maintain radiation exposures, and releases of radioactive materials in effluence to unrestricted areas to as low as reasonably achievable.

MANAGEMENT *(Faculty)* COMMITMENT

A. The management *(faculty)* and the entire staff of this program are committed to the program described herein for keeping radiation exposures, individual and collective, to as low as reasonably achievable.

B. Faculty will perform a formal annual review of the radiation safety program including ALARA considerations. This shall include reviews of operating procedures and past exposure records, inspections, etc., and consultations with the RSO and/or physicist as needed.

a. Modification to operating and maintenance procedures and to equipment and facilities will be made as appropriate and feasible where they will reduce exposures unless the changes are not practical in application. We will be able to demonstrate, if necessary, that improvements have been sought, that modifications have been considered, and that they have been implemented where reasonable. Where modifications have been recommended but not implemented, we will be prepared to describe the reasons for not implementing them.

b. In addition to maintaining doses to individuals as far below the limits as is reasonably achievable, the sum of the doses received by all exposed individuals will also be maintained at the lowest practical level. It would not be desirable, for example, to hold the highest doses to individuals to some fraction of the applicable limit if this involved exposing additional people and significantly increasing the sum of radiation doses received by all involved individuals.

RADIATION SAFETY OFFICER AND CONSULTANT STAFF ARE RESPONSIBLE FOR THE FOLLOWING:

A. Review:

i. Annual review of the Radiation Safety Program. The RSO will perform an annual review of the Radiation Safety Program for adherence to ALARA concepts. Reviews of specific procedures may be conducted on a more frequent basis.

ii. *Review of Occupational Exposures quarterly when students are in clinicals.* The RSO will review at least quarterly the external radiation exposure of authorized users and workers to determine that their exposures are ALARA in accordance with the provisions of paragraph VII of this program.

iii. Quarterly review of records of Radiation Level Surveys. The RSO will review radiation levels in restricted and unrestricted areas to determine that they were at ALARA levels during the previous quarter.

B. Educational Responsibilities for an ALARA Program:

iv. The RSO will schedule briefings and educational sessions to inform students of ALARA program efforts, if necessary and requested by faculty. This will include individual education of participants reporting a pregnancy.

v. The RSO will assure that authorized users, workers and ancillary personnel who may be exposed to radiation will be instructed in ALARA philosophy and informed that management and the RSO are committed to implementing the ALARA concept.

C. Cooperative Effort for Development of ALARA Procedures:

Radiation workers will be given opportunities to participate in the formulation of the procedures that they will be required to follow.

vi. The RSO will be in close contact with all users and workers in order to develop ALARA procedures for working with radioactive materials.

vii. The RSO will establish procedures for receiving and evaluating the suggestion of individual workers for improving health physics practices and encourages the use of those procedures.

D. Reviewing Instances of Deviation from good ALARA Practices:

The RSO will investigate all known instances of deviation from good ALARA practices and, if possible, determine the causes. When the cause is known, the RSO will require changes in the program to maintain exposure to ALARA.

AUTHORIZED USERS

A. **New Procedures Involving Potential Radiation Exposures:**

viii. The authorized user will consult with, and receive the approval of, the RSO and/or RSC during the planning stage before using radiation sources for a new procedure.

ix. The authorized user will evaluate all procedures before using radiation sources to ensure that exposures will be kept ALARA. This may be enhanced through the application of trial runs.

B. **Responsibility of the Authorized User and Those (S)he Supervises:**

x. The authorized user will explain the ALARA concept and her/his commitment to maintain exposures ALARA to all of those (s)he supervises.

xi. The authorized user will ensure that those under her/his supervision who are subject to occupational radiation exposure are trained and educated in good health physics practices and in maintaining exposures ALARA.

PERSONS WHO RECEIVE OCCUPATIONAL RADIATION EXPOSURES

A. The worker will be instructed in the ALARA concept and its relationship to her/his working procedures and work conditions.

B. The worker will know what recourses are available if (s)he feels that ALARA is not being promoted on the job.

ESTABLISHMENT OF INVESTIGATIONAL LEVELS IN ORDER TO MONITOR INDIVIDUAL OCCUPATIONAL EXTERNAL RADIATION EXPOSURES

This institution hereby establishes Investigational Levels for occupational or student external radiation exposure, which, when exceeded, will initiate review or investigation by the Radiation Safety Officer or consultant staff. The Investigational Levels that we have adopted are listed in Table I below. These levels apply to the exposure of the individual workers.

TABLE 1 Ref Reg Guide 10.8 rev 2

Investigational Levels – (mrems per calendar Quarter)

	LEVEL I	LEVEL II
1. Whole body	125mrem/Qtr	375
2. Extremities or skin	1250/mrem/Qtr	3750
3. Lens of eyes	375/mrem/Qtr	1125

The Radiation Safety Officer and Clinical Coordinator or Program Director will review the results of student/personnel monitoring, not less than once in any calendar quarter. The following actions will be taken at the Investigational Levels as stated in Table I:

A. Quarterly exposure of individuals to less than Investigational Level I.

Except when deemed appropriate by the RSO, no further action will be taken in those cases where an individual's exposure is less than Table I values for the Investigational Level I.

B. Personnel exposures equal to or greater than Investigational Level I, but less than Investigational Level II.

The Clinical Coordinator or Program Director will meet with the student and review recent clinical experiences, practices, and exposures within 2 weeks of the identification of the dose. (S)he will consult with the RSO and formulate a plan to address excessive exposure. Action may be required with the student and/or clinical settings to ensure student exposures are consistently ALARA. The RSO will review the exposure of each individual whose quarterly exposures equal or exceed Investigational Level I. (S)he will report the results of her/his reviews at the first RSC meeting following the quarter when the exposure was recorded. If the exposure does not equal or exceed Investigational Level II, no action related specifically to the exposure is required unless deemed appropriate by the Committee. The Committee will, however, consider each such exposure in comparison with those of others performing similar tasks as an index of ALARA program quality and will record the review in the Committee minutes.

C. Exposures equal to or greater than Investigational Level II.

The Clinical Coordinator or Program Director will remove the student from clinical rotation immediately upon identification of the dose and begin an investigation. (S)he will consult with the RSO and formulate a plan to address excessive exposure. Actions may be required with the student and/or clinical settings to ensure student exposures are consistently ALARA. Upon resolution, if the student is cleared to resume clinical experience, the program will provide for appropriate opportunity to make up missed clinical tiem. The RSO will investigate in a timely manner the cause(s) of all personnel exposures equaling or exceeding Investigational Level II and, if warranted, take action. A report of the investigation, actions taken, if any, and a copy of the individual's dosimetry record will be presented to the program faculty following completion of the investigation. The details of these reports will be recorded, documented and maintained in the student's file.

D. ~~Re-establishment of an individual occupational worker's Investigational Level II above that listed in Table I.~~

~~In cases where a worker's or a group of workers' exposure needs to exceed Investigational Level II, a new, higher Investigational Level II may be established on the basis that it is consistent with good ALARA practices for that individual or group. Justification for a new Investigational Level II will be documented.~~

~~The Radiation Safety Committee will review the justification from, and will approve, all revisions of Investigational Level II. In such cases, when the exposure equals or exceeds the newly established Investigational Level II, those actions not listed in paragraph C above will be followed.~~

Section D was stricken from this document as it does not apply to the student radiographer in this setting.

We, the management of this hospital and Southern faculty, are committed to the program procedures and the development of new procedures as appropriate to implement the ALARA concept.

With Permission, Reference: Thomas Memorial Hospital, Imaging Services, Policy and Procedures.
TMH Reviewed / Revised Dates: 2/1/2011 Revised to this handbook, 8/2013; 1/2014; 8/2022
TMH reviewed 7/2013 Reviewed by RSO, 2015; 2018; 2019

Safety screening protocol for students accessing or potentially accessing the magnetic resonance environment

Added 2016; revised 8/20

Southern will screen radiologic technology students upon entering the program and when entering MRI scanner areas, whether observing or entering the scan room, to ensure their safety. Safety instruction will be provided online or in the classroom.

Protocols:

1. All students will be made aware of the magnetic fields used with MRI and understand the consequences of not following safety guidelines.
2. Students accepted into the program or those job shadowing will undergo an initial safety screening by completing the screening questionnaire.
3. Prior to any possible entry, the clinical setting will conduct additional screening either verbally or written specific to their department.
4. It is the student's responsibility to contact the clinical coordinator and/or MRI technologists of any changes to the screening form question answers. For example, if the student has a piercing or transdermal patch.

Safety information:

The powerful magnetic field of the scanner can attract certain metallic objects that are ferromagnetic, causing them to move suddenly and with great force towards the center of the MRI system/scanner. This may pose a risk to you or anyone in the path of the object. Therefore, great care is taken to prevent ferromagnetic objects from entering the MRI scanner room. Additionally, some devices may be damaged or fail to function properly if exposed to the strong magnetic field.

It is vital that you remove metallic objects before entering the MRI static magnetic field, including watches, jewelry, and items of clothing that have metallic threads or fasteners.
Items that need to be removed before entering the MR system room may include:

- Purse, wallet, money clip, credit cards or other cards with magnetic strips
- Electronic devices such as cell phones or tablets
- Hearing aids
- Metallic jewelry, watches
- Pens, paper clips, keys, nail clippers, coins, pocket knives
- Hair barrettes, hairpins, hair ties with metallic attachment
- Any article of clothing that has a metallic zipper, buttons, snaps, hooks, or under-wires
- Shoes, belt buckles, safety pins

Before entering the MRI scanner room, you may be asked to fill out a facility department screening form asking about anything that might create a health risk or even death.

If you have a bullet, shrapnel, or similar metallic fragment in your body, there is a potential risk that it could change position, possibly causing injury. Also, the magnetic field of the scanner can damage an external hearing aid or cause a heart pacemaker to malfunction. Some objects can also cause excessive heating and burns to the skin when exposed to the magnetic field.

Examples of items or things that may create a health hazard or other problems include:

- Pacemaker
- Implantable cardioverter defibrillator (ICD)
- Neurostimulator system
- Aneurysm clip
- Metallic implant
- Implanted drug infusion device
- Implanted shunt
- Foreign metal objects, especially if in or near the eye
- Shrapnel or bullet
- Permanent cosmetics or tattoos (if being scanned)
- Dentures/teeth with magnetic keepers
- Other implants that involve magnets
- Medication patches that contain metal foil (*i.e.*, transdermal patch)

Find additional information in the ACR Manual on MR Safety: 2020.
https://www.acr.org/Clinical-Resources/Radiology-Safety/MR-Safety

The student questionnaire and signature page are in the Handbook appendix.

With permission from Brad Holben MSHA, RT(R)(MR)
MRI Education Program Coordinator
WVU Medicine
WVU Hospitals
Revised: 8/2022

Radiation Protection Policy for Clinical Education and Labs

All students will be issued a dosimeter at the beginning of the program. This badge must be worn at all times in the radiology/imaging departments and during laboratory practice.

No student will hold a patient or image receptor in any situation. All students must be completely behind the lead barrier during exposures unless they are assisting with a fluoroscopy case.

See policies for radiation protection for the CT room (room 112) and diagnostic room (room 113).

Violation of any radiation protection/safety policy will result in student session documentation.

The radiation safety program (ALARA) will be followed.

A lead apron must be worn for portable radiography and during fluoroscopy.

Reviewed and revised 8/2020; 8/21; 8/22

Equipment

Before using any rad tech program equipment, the student must be instructed on its proper use and care. Negligent misuse of equipment is grounds for disciplinary action up to and including possible dismissal from the program. School laptops must be used only for coursework.

CT Lab, Room 112 Use

The following policy and procedures are to be followed for Room 112, CT Lab, Building C. Disciplinary action may be taken if any are violated- refer to the policy in the student handbook. Serious violations involving occupancy during exposures, unsupervised use of equipment will result in immediate counseling with possible suspension or dismissal from the program.

1. Doors to room 112 will remain closed at all times and the control room locked.
2. Students must be directly supervised for all CT machine operations, simulations, exposures and image reviews.
3. Requirements for student use of CT lab:
    a. Instructor led review of basic CT unit, and radiation protection using CT clinical objective as a guide. Objective must be completed before student participation.
    b. Radiation dosimeter must be worn at all times when inside room or control room.
    c. Scheduled times approved and posted on outside door, by the instructor.
    d. While simulating positioning, no students are permitted in the control room.
    e. No students may be inside the room during exposures. The control room door must be closed. Some students must leave the room and remain outside the doors until told to re-enter. Again, the main doors to the room will remain locked.
    f. Exposures may only be made using approved CT phantoms, under direct supervision, after checking that doors are closed.
4. When the “X-ray On” light is illuminated, do not enter the room.

Radiation Safety for Room 113, Diagnostic Lab

The following policy and procedures are to be followed concerning Room 113, Diagnostic Imaging Lab, Building C. Disciplinary action may be taken if any are violated-per policy. Serious violations involving occupancy during exposures, unsupervised use of equipment will result in immediate counseling with possible suspension or dismissal from the program.

1. Doors to room 113 will remain closed at all times when labs are scheduled. A sign must be posted on each door during lab times, stating LAB IN PROGRESS DO NOT ENTER
2. Students must be directly supervised for all machine operations, simulations, exposures and image reviews. Second year students may be indirectly supervised.
3. Requirements for student use of the diagnostic lab:
    a. Instruction of basic radiation protection methods in Introduction module. Complete before student participation.
    b. Radiation dosimeter must be worn at all times when inside room or control room.
    c. Scheduled times approved and posted on outside door, by the instructor.
    d. While simulating positioning, no students are permitted in the control room.
    e. No students may be inside the room during exposures. Prior to the exposure, the radiographer must verbally say, "X-ray, clear the room." Some students may be required to leave the room and remain outside the doors until told to re-enter due to space. Again, the main doors to the room will remain locked.
    f. Exposures may only be made using approved phantoms, under direct supervision, after checking that doors are closed.
    g. The x-ray tube may not be aimed perpendicular to the wall of the CT control room. unless no one is in the CT control room.
    h. The "X-ray on" light will automatically turn on when the machine is on. If you are outside the room when the "X-ray On" light is illuminated, do not enter the room.
    i. If the "Lab in Progress" sign is posted, do not enter unless you have knocked and been admitted by the instructor from inside the room.

Standard for Wearing Radiation Monitors (Dosimeter)

The dosimeter must be worn on the collar of your uniform outside the apron. Any student found in the clinical site without their dosimeter badge on the collar will receive a documented warning following the dress code violation policy. Any student found in the clinical site without it altogether will be issued a warning and sent home, which will result in an unexcused absence and SATO must be used. The dosimeter must be worn at the collar level of the shirt or top, for campus labs. Failure to wear dosimeter for scheduled campus labs may result in 0 attendance grade for the day.

Student Supervision

ALL STUDENTS DURING THEIR CLINICAL ASSIGNMENTS MUST BE SUPERVISED BY THE FOLLOWING STANDARDS:

A qualified registered Radiographer reviews the request for the Radiographic examination:

1. To determine the capability of the student to perform the examination with reasonable success, or
2. To determine if the condition of the patient contraindicates performance of the examination by the student AND
3. To ascertain that the student has obtained the necessary level of competency to perform the procedure.

If any of the above situations are questionable, the Radiographer should perform the exam.

A qualified registered Radiographer checks and approves all radiographs/images prior to dismissal of the patient.

Radiography students must be supervised by a qualified and licensed Radiographer in the state of West Virginia or Kentucky depending on clinic site during the program. There are two types of supervision:

I. **DIRECT SUPERVISION**

The student in this situation must have a Radiographer assigned to them on a one-on-one basis. This is for beginning or first-year students, in all out-of-the-department situations, and with any exam with which the student is unfamiliar.

Direct Supervision Guidelines:

1. Radiographer reviews the request for each examination.
2. Radiographer determines the capability of the student to perform the exam with reasonable success under supervision.
3. Radiographer determines the capability of the patient to complete the exam under the care of the student.
4. Radiographer ascertains that the student has obtained the necessary level of education to participate in the exam or complete it under supervision.
5. If the above criteria are met, the radiographer is present in the radiography room while the student is allowed to perform the exam.

II. **INDIRECT SUPERVISION**:

In this situation a qualified radiographer may be reached by the student vocally, i.e. qualified radiographer in an adjacent room or area. At no time should the student replace a staff radiographer to accommodate department needs. One student per radiographer in the department must be maintained 100% of the time.

Indirect Supervision Guidelines:

1. Once a competency is obtained with a minimum score of 85%, the student will be under indirect supervision for that exam.

2. Exception: C-arm procedures; Portable exams; Trauma exams; Intensive/critical care patients where efficiency, time, and patient condition are of extreme importance.

During these situations, direct supervision must be maintained.

Indirect supervision usually applies to students at a more advanced level of education and competency.

Repeat Policy

Students will be allowed to repeat a radiograph/image ONE time only. Moreover, this must be done with a qualified Technologist present in the radiographic room (direct supervision) to assist if needed. If the repeat is not satisfactory, the Technologist must do the additional radiographs/images while the student observes.

Modality Observations

To allow the student to learn more about modalities, students will be given the opportunity to rotate to several different areas to observe during the second year. Students will be scheduled in CT and Special Procedures. The following additional modalities are available for observation:

1. MRI
2. PET
3. Ultrasound
4. Bone Densitometry
5. Mammography
6. Nuclear Medicine

At any time during the second year, beginning in the fall, a student may request a day for observation. This will take the place of a regular clinic day. This must be scheduled with the Clinical Preceptor and Clinical Coordinator. The Clinical Preceptor will notify the supervisor of the observation modality. All policies must be followed during the observation day. No more than one student may observe on the same day, at the same location. A maximum of two observations can be scheduled per semester, per student.

** Mammography is an optional competency that some students may choose to obtain after the content is covered in RA 203, second fall semester. Prior to completion of mammography course material, an observation may be scheduled.

Protocol for Equitable Mammography

Goal: To ensure compliance with JRCERT Standard Four, Curriculum and Academic Practices, 4.4, to provide equitable learning opportunities for all students.

Since mammography is primarily performed on females, student observation and/or competency may be difficult. Mammography is not a required competency. The sensitivity of the procedure requires a professional attitude and confidence by the person performing the exam. As with all procedures, the patient has the right to ask that any student not observe or assist with the exam. To give both male and female radiography students an opportunity to observe and/or perform mammography exams, at least one clinical education setting has been identified to allow students to observe or perform exams, with the patient's permission. Following didactic education in RA 203 the student showing an interest in mammography, must notify the clinical coordinator who will arrange for the student to rotate/observe at this site, Logan Regional Medical Center.

Laws Involving Radiology Students

According to the JRCERT's Standards, policies and processes by which students may perform related work while enrolled in the program must be published and made known to all concerned IN ORDER TO AVOID PRACTICES in which students are SUBSTITUTED FOR REGULAR STAFF. Students SHALL NOT TAKE THE RESPONSIBILITY OR THE PLACE OF A QUALIFIED STAFF. However, after demonstrating competency, students may be permitted to perform procedures with appropriate supervision.

The West Virginia Radiologic Technology Board of Examiners Laws defines a Radiologic Technologist as one who assumes the act of positioning patients, setting techniques, and making exposures. Therefore, a student technologist is NOT CONSIDERED a Radiologic Technologist, and SHOULD NOT PERFORM the duties of a Radiologic Technologist. Otherwise they will be in VIOLATION OF WEST VIRGINIA CODE 30-23. A copy of the WV Radiologic Health Rules is in the Program Director's office, or can be found at wvrtboard.org under "Regulations."

Student Grievance (Due Process)

The Radiologic Technology Program follows the college policy for any student complaints or grievances. The policy can be found in the College catalog and online at Southernwv.edu.

RA Students are to follow the chain of command by first discussing the issue or concern with the immediate instructor of record (didactic or clinical). An initial conference should be held within 10 class days (or within 10 class days of the start of a new semester). If the issue is not resolved, the student is to notify the following, in the order listed, for example:
If a clinical issue or concern: the student should try to resolve this issue first with the clinical preceptor, Clinical coordinator next, then Program Coordinator.
If not resolved within the department, proceed to the College Student Grievance Procedure on pages 201-2 of the College's Student Handbook.

JRCERT and Complaints (Due Process Policy)

For non-compliance with JRCERT Standards.

Students in the program may submit a complaint or compliance issue in respect to JRCERT Standards. If the complaint cannot be resolved within the program faculty, or through the College Student Grievance procedure, the student may submit a complaint to the JRCERT.

Contact the JRCERT at the following address:

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850 Chicago, IL 60606-3182
Phone: (312) 704-5300 FAX: (312) 5304
E-mail: mail@jrcert.org www.jrcert.org

The JRCERT only accepts written, signed allegations of non-compliance with relevant accreditation standards, and they maintain confidentiality of the complainant's identity unless authorized to disclose identity by the complainant or disclosure is required by legal process.

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Clinical Code of Conduct: rules and regulations – these will be included in clinical syllabus

In the case of exposure to blood or body fluids, the student will be provided guidance on post-exposure care and will complete the following form:

Occupational Blood and Body Fluid Exposure
Refusal/Acknowledgement Form

I, _____ am aware that through my exposure to blood/body fluid, I may have been exposed to a blood-borne pathogen which may include but not be limited to hepatitis B virus (HBV), hepatitis C virus (HCV), and/or human immunodeficiency virus (HIV). My risk of infection from this exposure is not known. I also am aware that post-exposure protocols exist that may be effective in the prevention/treatment of theses blood-borne pathogens. Further, I understand that the Healthcare (Allied Health) Division strongly recommends that I seek health care immediately to discuss options and obtain appropriate treatment from my physician or the nearest emergency room **immediately** after the exposure to blood/body fluid occurs.

Student's/Faculty's Intended Course of Action

- ☐ I have already seen a physician and started a post-exposure protocol.
- ☐ I intend to see a physician and begin a post-exposure protocol.
- ☐ I refuse to participate in a post-exposure protocol.

_____
Student's/Faculty's Name (Please Print)

_____
Student's/Faculty's Signature Date

_____
Program Director's Signature Date

_____
Dean, Division of Allied Health and Nursing Signature Date

Southern West Virginia Community and Technical College
Blood and Body Fluid Exposure Report

Name of Exposed Student/Faculty: _____

Date and Time of Exposure: _____

Type of Exposure: ☐ Needle Stick ☐ Cut ☐ Mucous Membrane ☐ Skin

Type of Fluid: ☐ Blood ☐ Other Body Fluid - What kind? _____

Severity of Exposure (e.g., depth of injury, was fluid injected, condition of skin (chapped, abraded or intact), estimated volume of material):

Description of how and where exposure occurred:

Describe immediate steps taken by exposed to reduce untoward outcomes from exposure:

Was source of exposure able to be identified?	☐ Yes	☐ No
Is exposure source known to be HBV, HCV, or HIV positive?	☐ Yes	☐ No
If NO and source is known, is source being tested with permission?	☐ Yes	☐ No
If status of source is known, list here:		
Has exposed received HBC vaccination?	☐ Yes	☐ No
If yes, is vaccine response known?	☐ Yes	☐ No
☐ Immune ☐ Not immune		
Is exposed pursuing post-exposure management by a physician?	☐ Yes	☐ No

If yes, when and with whom? _____

If not, why? _____

_____

Name of person completing report Date

Treating and Reporting Injury or Exposure to Transmitted Diseases

In the event that a student is injured or exposed to a transmitted disease while at a clinical education setting, the student must notify the clinical preceptor and supervisor of the department immediately. Appropriate incident forms must be filed and will remain confidential. If treatment is needed, the student will report to the emergency room or infection control. The student is responsible for any costs incurred. Student must carry health insurance for the duration of the program.

Filing procedure:

1. Notify clinical preceptor or supervisor of department and clinical coordinator.

2. Report to the emergency room or infection control.

3. Follow protocol for treatment.

4. Assist in documentation of incident.

5. Notify program faculty.

6. The clinical preceptor/coordinator will document the incident and place a copy in the student's file. Faculty will keep a copy.

7. Students are expected to use their personal insurance as primary coverage when health care is needed.

8. A report may be filed at the college, on a case-by-case basis, for coverage.

9. For infectious disease exposure, the infection control nurse/department will be notified. Protocol for treatment will be followed.

10. The student must be released from the emergency room or infection control, with a written statement to return to clinic or class.

11. Follow up with family physician as recommended.

Southern West Virginia Community and Technical College
Report of Injury

To be completed by the supervisor or clinical preceptor

Name of Injured Student: _____

Date of Occurrence: _____ Time: _____

Clinical Site: _____

Describe the injury and how it occurred. (Attach additional pages if necessary)

List any others present? (No patient names)

Was department supervisor or clinical preceptor notified immediately? ____ yes ____ no

Any emergency room treatment needed? If so, describe.

Depending on the nature of the injury, may the student return to clinic/class, per ED, if applicable?

Is follow up with family physician needed?

Student signature: _____

Signature of person filling out report: _____

Notify clinical coordinator immediately and submit this form.

PREGNANCY POLICY

The Radiologic Technology Pregnancy Policy is utilized to permit students in the program to voluntarily notify the program director of their pregnancy and inform students of the precautions and exposure limits that should be taken during pregnancy. In order to be declared pregnant the student will choose to voluntarily notify the program director in writing using the "*Voluntary Pregnancy Verification Form and Checklist*", as soon as possible; otherwise the student cannot be considered pregnant.

If a student does not voluntarily notify the program director the student cannot be counseled and given assistance with the "*Voluntary Pregnancy Verification Form and Checklist*". The program director and/or clinical coordinator in conjunction with the clinical preceptor of the student's clinical education settings will have the student counseled by a radiation safety officer as soon as possible upon voluntary notification. Due to the nature of ionizing radiation, it is recommended that the pregnant woman not be subjected to any radiation source whatsoever. There are possible genetic consequences to the fetus which may arise should one become pregnant during their two years in the radiologic technology program. The human fetus is highly radiosensitive and must be protected from excessive exposure to ionizing radiation. The maximum permissible dose equivalent for the developing fetus is 500 millirems (0.5 rem) during gestation, which is 1/10th the allowable annual level for occupationally exposed members of the radiologic technology profession. (The lowest limit to prompt investigation and intervention for exposure of the student radiographer is 125 millirems per quarter or 500 millirems per year. This is based on full body exposure with monitoring at the collar level, outside of lead apron.) The program of radiologic technology at Southern WVCTC provides the following options to students once pregnancy is voluntarily verified in writing. Each student will be required to sign the Release and Verification policy for pregnancy as set forth by the Program.

I understand that I can **voluntarily** declare my pregnancy under the pregnancy policy and follow the policy options for safety.

I also understand that, if necessary, I can **voluntarily** un-declare my pregnancy by voluntarily notifying the program director in writing utilizing the *"Voluntary Pregnancy Verification Form and Checklist"*.

OPTION I

The student may elect to withdraw from the radiologic technology program and return within a one-year period under the following conditions:

1. The student has achieved satisfactory completion of at least one semester.
2. A vacancy is available at a clinical facility.
3. If the student becomes pregnant at the middle or toward the end of the semester and chooses to withdraw, the student will be allowed to complete the didactic courses which are being taken at that time.
4. The student will have to follow the readmission criteria. Refer to the re-admission policy.

OPTION II

The student may elect to continue in the radiologic technology program fulfilling all program requirements as contained within the curriculum and adhere to all radiation protection guidelines and recommendations as follows:

1. The student may be required to purchase an additional monitoring device to monitor the exposure to the fetus, if one is not provided by the student's major clinical education center.
2. The student will be required to adhere to all provisions in the ALARA program and acknowledge the risks to the embryo/fetus.
3. The student will be counseled by the appropriate radiation safety officer concerning pregnancy risks and protection.
4. Any clinical time missed while pregnant or after pregnancy will be treated under the absenteeism policy and the student will adhere to the college absence policy. Please refer to the clinical absenteeism policy.
5. The student will provide a full release from the attending physician when returning to clinical education. If circumstances occur to prevent the student from attending clinical education, the student will provide a full release from the attending physician upon returning. This must also be provided when returning post-partum. All clinical objectives as well as didactic objectives must be completed in order to progress to the next semester.

RADIOLOGIC TECHNOLOGY PROGRAM VOLUNTARY PREGNANCY VERIFICATION FORM AND CHECKLIST

I,_____, understand that this notification of pregnancy is **voluntary** and, hereby notify the Program Director of my pregnancy and the estimated conception date of_____.

Southern has provided me with the following checklist and documentation, with which I have **voluntaril**y agreed to comply.

Within the next two (2) weeks, I will:

1. Attend a scheduled advising session with the Radiation Safety Officer (RSO) at the clinical site currently attending or location of RSO.

2. Review Section Six and Section Thirteen of the Radiological Health Rule found at

   https://apps.sos.wv.gov/adlaw/csr/ruleview.aspx?document=2743

3. Review and discuss NRC Appendix 8.13 with the Radiation Safety Officer.

4. Receive an additional radiation monitor to be worn at the level of the waist for monitoring fetal radiation doses. I understand that this dose should not exceed 0.5 rem during the gestation period and that I may be required to pay any incurring costs for this badge.

5. Choose one of the following options for radiography students voluntarily declaring pregnancy:

_____OPTION I - The student may elect to withdraw from the radiologic technology program and return within a one-year period under the conditions set forth in the Student Handbook or College Catalog.

_____OPTION II - The student may elect to continue in the radiologic technology program fulfilling all program requirements as contained within the curriculum and adhere to all radiation protection guidelines and recommendations as set forth in the Student Handbook or College Catalog.

UN-DECLARE PREGNANCY: I understand that I may VOLUNTARILY un-declare pregnancy at any time that I choose.

_____I voluntarily notify the program director of my wish to un-declare pregnancy and complete this form. I understand that there will be no need for a meeting of the RSO but this form must be signed by the director and student. I also understand that my second film badge will no longer be necessary and that the readings will be provided to the program for my records.

Student Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

RSO Signature: _____ Date: _____

COMPETENCY BASED CLINICAL EDUCATION

A competency based clinical educational experience has been designed to ensure that all students are exposed to the many facets of Radiologic Technology. This educational system integrates didactic instruction with clinical instruction and competency documentation.

Throughout the course of study, students must demonstrate psychomotor skills at acceptable competency levels. Specific competency evaluations are completed during each semester in accordance with didactic instruction. Each student must exhibit both cognitive and clinical competency in each area.

By correlating didactic and clinical education, a unified goal is achieved in which competent technologists are trained that project professional maturity and a high degree of technical expertise. Imaging examinations performed by, and accompanying responsibilities assigned to, a radiographer shall be at the direction of physicians qualified to request and/or perform imaging procedures. Upon completion of the program, the radiographer shall have met the following learning outcomes:

1. The student will utilize effective communication skills when interacting with the patient and other members of the health care team, demonstrating knowledge of both communication and critical thinking skills necessary to the profession.

2. The student will demonstrate ethical and professional behavior, practicing within the code of ethics and scope of practice for the profession.

3. The student will understand the function of medical image processing, with demonstration of knowledge concerning various forms of image processing and determine the proper sequence for proper filing of a completed radiograph.

4. The student will evaluate radiographic quality, applying the knowledge of positioning and technical selection necessary for diagnostic radiographs.

5. The student will provide the patient with proper care during medical imaging procedures. This will include knowledge of body mechanics, patient immobilization, basic life support techniques, patient education for examinations, and overall patient care and comfort.

6. The student will demonstrate the proper methods of radiation protection and exposure selection with regard to the patient, the equipment, other personnel, and to oneself.

7. The student will properly position the patient in correlation with medical imaging equipment for the production of a diagnostic radiograph.

8. The student will demonstrate knowledge of radiation physics, understanding the basic operation and maintenance of radiographic equipment and the interactions of x-ray with matter.

9. The student will utilize problem solving skills and exercise independent thinking while performing medical imaging examinations.

CLINICAL COMPETENCY POLICY:

Clinical Competency = 85% minimum score on evaluation

Clinical competency achievement follows these steps:

1. Attend and participate in didactic instruction of positioning and equipment. Successful assessment of knowledge will be completed by quiz, exam or informal questioning.

2. Demonstrate positioning in lab settings on campus & actively participate in lab.

3. Observe the exam (positioning) during clinical rotations, as performed by qualified Technologists.

4. Perform the exam with direct supervision.

5. When confident, perform the exam for competency. When 85% or higher is achieved, student may perform the exam with indirect supervision. Exceptions would be in the surgery suite (ie. C-arm), portable exam, or potentially high acuity or fragile patient.

- When the competency exam meets the requirement, it will be recorded on the student's master competency list. The requirements include that the standard projections were completed in addition to the criteria on the competency evaluation form. The clinical coordinator makes the final decision regarding if a competency will be counted.

- The master clinical competency list is the official documentation. All competencies must be submitted by finals week of that semester.

- When the procedure standard is fluoroscopy only, it may not count as the competency exam if done in the department.

- Headwork: if the CES has a head phantom, the CI may have the student perform the additional projections required for competency exam on the same or next day. i.e. if three views of the skull are performed, a 4th may be performed on the head phantom and be graded along with the others.

- In the event mandatory competency exams are not completed by the end of the last semester, simulations or phantom images may be performed by the clinical coordinator abiding to the ARRT simulation definition. Note that not all competencies can be completed by simulation.

- Competency forms must be submitted to the locked box location, to the clinical coordinator, or through Trajecsys online system within two weeks of completion in order to count.

- Once the competency evaluation has begun, it must be completed unless an emergency occurs with the patient. Forgetting a marker or poor positioning does not warrant the RT or student stopping the evaluation.

PROCEDURE: PRACTICE FOR IMAGING PROCEDURES

In a laboratory situation, the student will:

1. Demonstrate correct positioning, stabilizing or immobilizing as needed.
2. Select the correct Image Receptor (IR) size.
3. Align the x-ray tube to part and IR.
4. Adjust the collimator to appropriate field size.
5. Use correct R/L marker.
6. Demonstrate the application of necessary protective shielding.
7. Measure the part by caliper utilization, if applicable.
8. Select & set exposure factors.
9. Notify others that an x-ray exposure is about to be made.
10. Expose the IR (if utilizing phantom).
11. Evaluate the image for accuracy of positioning and exposure quality & exposure index under the supervision of an instructor.

Objectives for clinical areas, rooms, skills, or processes

Objectives for various rooms, skills or processes are completed at clinical sites as means to fulfill course outcomes. Some of the areas have a specific form to be completed during clinical rotations. Further explanations will be given in each clinical syllabus.

COMPETENCY REQUIREMENTS:

Clinical course requirements will include room and equipment objectives, rotational evaluations, competency evaluations, category comps., capstones, image analyses, rechecks, clinical coordinator evaluation, submission of timecards/time sheets, case studies or other online assignments. The amount and type of which requirements will vary per semester. Faculty may change assignments or requirements if needed due to clinical site workload or extenuating circumstances.

All students must successfully complete mandatory and elective competencies required by the ARRT. The Program also requires some elective competencies. The ARRT requires competency in both patient care and imaging procedures.

The activities should be performed on patients whenever possible, but simulation is acceptable for some competencies if state or institutional regulations prohibit candidates from performing the procedures on patients.

Some are completed as part of clinical competencies, objectives, or in supervised labs as part of RA courses.

The Program Director will verify the general patient care competencies.

Per the ARRT clinical Competency Requirements as of 2022, from ARRT.org. See the Appendix for the full document.

There will be a required number of competencies each semester. The clinical syllabus will provide details. Image analysis may be a part of the clinical requirements as determined by the clinical coordinator.

The C-arm objective is to be completed at each site by the CI or designated RT, before Carm competency can be performed. Beginning first spring semester. 9/2018

Any extra competencies after the initial ones are carried over, will be added to the last semester. Note that even if the student is over in the number of competency exams, all ARRT required mandatory exams must be completed.

All forms will be included with the respective clinical syllabus and discussed prior to the start of rotations.

Clinical Exam Rechecks/Category Schedule/Final Competency Policy

1. Radiographic procedures completed by the student may be rechecked during any semester by the clinical preceptor of each clinical education center or clinical coordinator.
2. Recheck examinations are at the discretion of the instructor or coordinator.
3. RA 275 - Returning students will perform recheck radiologic examinations during their first returning semester in clinical education. They may also perform competencies on new examinations during this time. **They are required to perform the same amount of recheck examinations that corresponds to that semester.** Image analysis is included.

4. Recheck examinations are also a component of Final Competency in Categories I and II. These examinations are also at the discretion of the clinical preceptor or clinical coordinator.
5. Category I and II must be completed by determined semesters.
6. Capstone competencies with image analysis will be completed during the second year.

Clinical courses requirements for college grade:

Each RA clinical course consists of required elements that may vary per semester. The elements and criteria will be provided in the syllabus. Items possible are: rotation evaluations, clinical coordinator evaluation, completion of mandatory and elective competencies at the minimum of 85%, room objectives, i.e. Absences, tardies, failure to follow dress code, and other policy violations can result in reduction of course grade.

Computed Tomography in the Clinical Education Setting

All students enroll in CT 260 as a required didactic course in the second fall semester.
All senior (second year) students will be scheduled in the computed tomography area during their last year. This rotation will be for 1-2 weeks depending on their mandatory radiography clinical competency requirements completed at this point.

1. All senior students will have the CT technologist complete a clinical rotation/weekly evaluation for this rotation.
2. All senior students are required to be competent in the following at the end of their CT rotation: **Room Objective**: Gantry and Table Manipulation and Movement
3. Senior students are permitted to be exam competent by the end of their CT rotation in the following six examinations*: **1. Non-Contrast Head 2. Non-Contrast Abdomen 3. Non-Contrast Chest 4. Non-Contrast Pelvis 5. Non-Contrast Sinuses/Facial 6. Non-Contrast spine**
   *****Subject to change as ARRT requirements are revised
4. Senior students are required to complete a CT exam competency evaluation for the above CT examinations. This is an opportunity for all seniors to further their knowledge of the computed tomography area.
5. **Students are not permitted to inject intravenous contrast.**
6. **Students are not permitted to perform CT examinations without direct supervision.**
7. Senior students also may complete the following during this rotation, with direct supervision
   a. Injector loading & unloading
   b. Sterile procedure set-up for biopsy or drainage procedure

CONFIDENTIALITY STATEMENT ***Confidentiality Policy***

It is the obligation of Southern West Virginia Community and Technical College's Department of Radiologic Technology to maintain the confidentiality of all clients' medical record information and to protect the clients' right to privacy.

As a student of the Department of Radiologic Technology, I understand that I am never to discuss or review, for personal purposes, any information from a clients' medical record or information relating to the care and treatment of any and all clients in the clinical or shadowing setting.

I understand that all field/clinical sites that I enter throughout this course will expect I maintain strict patient confidentiality. As a student in Career and Technical Studies, confidentiality means that I will not leave a field/clinical site and discuss patients I have encountered with anyone not involved with the direct care of a patient. I will not identify a patient with personal information such as medical history, assessment findings, and treatment. Any release of information without the express consent of the patient may result in a lawsuit against me for invasion of privacy, libel, slander, or breach of confidentiality.

I understand that violation of any portion of the policies and procedures of the Department of Radiologic Technology or the state and federal regulation governing the client's right to privacy will result in cause for immediate termination as a student in the program of Radiologic Technology.

Revised 5/2015

AUTHORIZATION TO RELEASE INFORMATION

Southern has entered into educational agreements with agencies at which student complete clinical or job shadowing rotations. It is a privilege for students to have access to various hospital/clinic settings within the region.

Students will complete any orientation-required elements prior to rotations, which include those required by The Joint Commission. Students will review department specific policies on the first day of the rotation.

I, _____ , hereby authorize **SOUTHERN WV COMMUNITY AND TECHNICAL COLLEGE** to release to the **West Virginia Radiologic Technology Board of Examiners, American Registry of Radiologic Technologists, and all clinical affiliate organizations** any and all information concerning me. This authorization includes but is not limited to any felony and/or misdemeanor records, disclosure of drug and/or background checks results, medical reports or records relating to my physical, mental, or emotional condition and any treatment rendered to me; any medical or hospital bills relating to my treatment; school transcripts or other records relating to my attendance at any school; employment information, including personnel and wage information; military or government service records; and any records of the West Virginia Workers' Compensation Fund, Social Security Administration, Veteran's Administration, West Virginia Department of Human Services, Department of Labor, or any other agency. A facility may decide to not allow a student to enter their facility if he or she will not release the information.

I hereby waive any privilege I have regarding such information with respect to my attorneys. A photocopy of this authorization shall have the same force and effect as the original.

* Signed during orientation.

Rating Scales

For clinical competency evaluations and objectives, the following ranking scale is used.

POINT SCALE:

1- **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2- **AVERAGE** EXPECTATIONS, SOME ASSISTANCE NEEDED
3- **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

Minimum passing score for image analysis in each position/projection is 13/15.

POINT SCALE for Final Competency categories:

Rank 1-5

1- BELOW expectations; needs maximum assistance; 75-100% error
2- BELOW expectations; needs assistance; 50-75% error
3- SATISFACTORY; expectations met; 25% error
4- ABOVE AVERAGE; expectations met; 10% error
5- EXCELLENT; expectations exceeded; less than 5% error

A= Adult C= child (age 6 and under) I = Infant (under 1 year old)

Geriatric is older adult (at least 65 years of age) who is also physically or cognitively impaired as a result of aging (according to the 2022 ARRT competency requirements) Clinical Preceptor or assigned technologist should use professional judgement in determining geriatric status.

Trauma is considered a serious injury or shock to the body that requires modification in positioning and monitoring of the patient's condition (according to the 2022 ARRT competency requirements)

The student's responsibilities:

Complete the top of the form completely.

Fill in the exam using the master comp. list titles for exams
(c-spine, 5 projections, shoulder with Grashey, etc.); fill in technique.

Have each projection evaluated.

Turn in the form to the locked box, CI, or Trajecsys within 2 weeks of date completed.

Capstone competencies:

During the second year, the student will demonstrate proficiency in selected imaging procedures in a lab or actual setting with the Program Director or Clinical Coordinator.
Each student must perform the items using the competency evaluation items to include set up, positioning, setting technical factors, acquiring images, demonstrating knowledge of anatomy, evaluating the image, finalizing image processing. Also included are aspects of patient care, taking history, problem solving, and critical thinking. The student will be given a patient age and condition. The grading tool will be provided beforehand.
Capstone competencies will include procedures with a minimum of two projections:

1- One extremity procedure (upper or lower)
2- One spine procedure
3- One abdomen or chest
4- Headwork may include lateral, PA/AP, one PA/AP axial (Towne's or Haas), SMV, tangential. May be of different areas like skull, facial bones or sinuses, etc.

Scoring:

The student:
1- may sign up to practice in the lab.
2- will be scheduled a time/day for testing.
3- must pass with a minimum of 85% for each of the 4 above.
4- must repeat any that score below 85%. The repeat may be a different procedure in that category. If the student fails the second attempt, s/he must complete an imaging lab with assigned images before scheduling another attempt. This may delay successful completion of the course thereby delaying graduation.

Southern West Virginia Community & Technical College Radiologic Technology Program

Clinical **C**oordinator **S**emester **E**nd **E**valuation *revised 8/2020*

Student Name: _____ 1st Fall 2nd Fall Summer 1st Spr 2nd Spr yr _____

Scale: 1 = below expectations; complete assistance needed or poor performance
2 = average expectations; minimal assistance needed; average performance
3 = meets expectations; outstanding performance; no assistance needed

Expectation: Minimum of 2.0 average in first year; 2.5 for second year

Indicate the level of student performance in each of the following areas:

	1	2	3
Patient Care: Patient needs assessed & addressed; Caring demeanor			
Interaction: Uses appropriate introduction strategy (AIDET, i.e.) Effective communicator; cooperates with staff; Team player;			
Radiation Protection Methods: Demonstrates proper radiation protection methods; Collimation; Limited repeats			
Proper knowledge & use of exposure factors:			
Proper positioning knowledge & skills: Including anatomy & best demonstrated			
Quality of work: Speed appropriate for student level; Organization; Overall performance			
Quantity of work: Completion of course requirements; Completes more than required			
Ability to make decisions: Analyzes work and can make improvements Critically think Image analysis			
Dependability: Reports on time consistently; uses time wisely; Calls in according to policy			
Professionalism: takes initiative; follows dress code; well groomed Presents in professional attire; appropriate actions Follows program policies and hospital regulations			

Comments or notes: Average: _____

Signatures: Student: _____ Date: _____

Clinical Coordinator: _____ Date: _____

Venipuncture Competency

Venipuncture Guidelines for Radiologic Technology Students:

The ARRT requires competency in venipuncture to be eligible for the Registry exam. The following outline the Program's competency:

The student must:

1. be enrolled in RA 203, Special Procedures Positioning
2. participate in class discussion regarding procedure, safe practices, needle disposal, ethical and legal considerations. (Requires previous knowledge from patient care technology and other classes.)
3. pass quiz or test on the material with minimum or 85% accuracy.
4. participate in venipuncture lab on campus.
5. complete venipuncture check sheet as verified by the instructor.

The student may NOT:

1. perform venipuncture at any clinical site.
2. inject contrast media, manually or by injector.
3. administer any medications.

The form will be distributed before the lab

Class of 2021 - 2023

Radiologic Technology Handbook
Review of General & Clinical Program Policies & Procedures

I have received a copy of the Radiologic Technology Student Handbook and completed orientation. I will abide by Program and College policies. I understand that I will be quizzed on its contents before attending clinical rotations and throughout the program. I must pass the quiz with a minimum score of 85%. The handbook quiz deadline will be provided via online learning system.

Changes may be made at the discretion of the program at any time.

Student Printed Name: _____

Student Signature: _____

Date: _____

Appendix 1

Affirmative Action and Title IX

Family Educational Rights and Privacy Act (FERPA):

The Family Educational Rights and Privacy Act (FERPA) requires institutions of higher education to establish written policies and guidelines governing the review, inspection, release, amendment, and maintenance of student educational records. Southern West Virginia Community and Technical College has established policies and guidelines to ensure that the education records of its students are treated responsibly in accordance with the Act and U. S. Department of Education regulations. These policies and guidelines may be obtained from the Central Records Office. Each student has the right to inspect personal educational records. Under limited circumstances, copies may be obtained from the College with payment of appropriate fees. If a student believes personal education records contain inaccurate or misleading information or violate privacy or other rights, the student may submit a written appeal to the Registrar seeking to amend them. Within twenty days after receipt of the appeal, the Registrar will issue a decision regarding the appeal. If the decision is to refuse to amend the student's educational records, the student may file a written request for a hearing. The student will be provided a full and fair opportunity to present evidence. A final written decision will be rendered based upon the evidence submitted at the hearing. All transcripts and documents submitted from other institutions become the property of Southern West Virginia Community and Technical College, and, as such, come under the control of the Registrar's Office. Southern is not required to provide copies of these documents. Transcripts submitted to Southern for review of transfer credit also become the property of Southern and cannot be returned to the student or forwarded to other institutions. Students may file complaints concerning alleged failures by the College to comply with the Act or regulations promulgated there under with the United States Department of Education (FERPA), Office of the Review Board, Washington, D.C. 20202.

Southern West Virginia Community and Technical College does not discriminate on the basis of race, color, national origin, ethnicity, sex, disability, age, religion, gender, sexual or gender orientation, marital status, and veteran status in the administration of any of its educational programs, activities, or with respect to admission or employment. Faculty, staff, students, and applicants are protected from retaliation from filing complaints or assisting in an investigation. The following persons have been designated to handle inquiries regarding nondiscrimination policies and complaints:

Title IX Coordinator & Affirmative Action Officer
Darrell Taylor
Chief Student Services Officer
Office: 304-896-7432
Darrell.Taylor@southernwv.edu

Debbie Dingess
Director of Human Resources
Office: 304-896-7408
Debbie.Dingess@southernwv.edu

TitleIX@Southernwv.edu Section
504 Coordinator:
Dianna Toler, Director of Disability and Adult Services
Office: 304-896-7315
Dianna.Toler@Southernwv.edu

Disability Services
Consistent with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA), Southern West Virginia Community and Technical College ensures that qualified individuals with disabilities are afforded equal opportunity to participate in its programs and services. Reasonable modifications in policies, practices, and procedures are affected to assure equal access to individuals with disabilities.

Disability Services offers a supportive environment to ensure students with disabilities have equal access to the programs, services and activities offered by Southern. Disability Services provides and coordinates reasonable accommodations and disability-related services, advocates for an accessible learning environment through the removal of physical, informational and attitudinal barriers, and encourages self-advocacy and personal responsibility ono the part of students with disabilities.

Immediately following application to Southern, persons with disabilities should contact Disability Services to plan for potential accommodation.

Reasonable and effective academic accommodations are provided on an individual basis and are based upon appropriate documentation of the disability and the significant functional limitations associated with the disability. Students having accommodation needs must:

- schedule an initial interview with the Office of Disability Services
- provide written documentation of disability from an appropriate professional licensed to diagnose such disability
- request services on an academic term basis

This process of providing disability-related services follows guidelines of the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 and is designed to assure that reasonable accommodations are provided to all qualified students in a timely manner. Information provided regarding Disability Services is considered confidential and is not disclosed without the written permission of the student. For further information contact:

Section 504 Coordinator
Ms. Dianna Toler
Director of Disability and Adult Services
304.896.7315
Dianna.Toler@southernwv.edu

Appendix 2

Alternate Contact Information and Geographic locations for Clinical Education Settings

For clinical education settings: In the event that the clinical preceptor is not available, a secondary contact person is noted. The charge tech., supervisor or director may serve as the alternate contact and may vary. The time listed is the time to/from the Logan campus.

Logan Regional Medical Center 10-15 minutes
Shane Brumfield (CP) & Chris Reed (Director)
Shane.brumfield@LPNT.net CI
Chris.Reed@LPNT.net
831-1192 Fax: 831-1633

Tug Valley ARH Regional Medical Center 30 minutes
Kristin Collins (CP), Tammy Hensley, & Teddy Hall (Director)
krcollins@arh.org
tehall@arh.org
606 237-1700 ext 1741 Fax: 606 237-1600

Boone Memorial Hospital 35 minutes
Tahnee Mullins (Director) & Angel Kimble (CP)
CI 304-369-1230 ext 212
Fax: 304-369-2601

CAMC Memorial Hospital 65 minutes
Eric Halstead – CP Memorial
eric.halstead@camc.org
304 388-9220 Fax: 388-9707
or charge tech. alternate contact- same phone

CAMC General Hospital 65-70 minutes
Collen Webley - CP General

304-388-6045
or charge tech. alternate contact- same phone

Thomas Memorial Hospital 65-70 minutes
Shelby Smith, CP 304 766-3808

Shelby.Smith@ThomasHealth.org
Lora Hall, supervisor
Lora.Hall@ThomasHealth.org
304 766-4581

Thomas Imaging Center 65-70 minutes
Emily Muncy, CI 304 767-7730

Emily.Muncy@ThomasHealth.org

Pikeville Medical Center 60-75 minutes
Pikeville, KY
Donetta Chaney, Director
April B. Stump, CI 606-432-1357 Dept.

For program faculty- The Program Director and Clinical Coordinator are alternate contacts for each other. The contact information is given in the current Handbook. CC info. is in each clinical syllabus also.

In the event of an emergency and family needs to be contacted, the clinical coordinator has student contact information.

Appendix 3

A copy of the JRCERT Radiography Standards (Adoption date 1/2021) are provided to each clinical education site. And Appendix 3 of the Student Handbook

Standards for an Accredited Educational Program in Radiography

Effective January 1, 2021

Adopted April 2020

JRCERT

Excellence in Education

Introductory Statement

The Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiography** are designed to promote academic excellence, patient safety, and quality healthcare. The **Standards** require a program to articulate its purposes; to demonstrate that it has adequate human, physical, and financial resources effectively organized for the accomplishment of its purposes; to document its effectiveness in accomplishing these purposes; and to provide assurance that it can continue to meet accreditation standards.

The JRCERT is recognized by both the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The JRCERT **Standards** incorporate many of the regulations required by the USDE for accrediting organizations to assure the quality of education offered by higher education programs. Accountability for performance and transparency are also reflected in the **Standards** as they are key factors for CHEA recognition.

The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process not only helps to maintain program quality but stimulates program improvement through outcomes assessment.

There are six (6) standards. Each standard is titled and includes a narrative statement supported by specific objectives. Each objective, in turn, includes the following clarifying elements:

- **Explanation** - provides clarification on the intent and key details of the objective.

- **Required Program Response** - requires the program to provide a brief narrative and/or documentation that demonstrates compliance with the objective.

- **Possible Site Visitor Evaluation Methods** - identifies additional materials that may be examined and personnel who may be interviewed by the site visitors at the time of the on-site evaluation in determining compliance with the particular objective. Review of supplemental materials and/or interviews is at the discretion of the site visit team.

Regarding each standard, the program must:

- Identify strengths related to each standard
- Identify opportunities for improvement related to each standard
- Describe the program's plan for addressing each opportunity for improvement
- Describe any progress already achieved in addressing each opportunity for improvement
- Provide any additional comments in relation to each standard

The self-study report, as well as the results of the on-site evaluation conducted by the site visit team, will determine the program's compliance with the Standards by the JRCERT Board of Directors.

Standards for an Accredited Educational Program in Radiography

Table of Contents

Standard One: Accountability, Fair Practices, and Public Information

The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Objectives:

1.1 The sponsoring institution and program provide students, faculty, and the public with policies, procedures, and relevant information. Policies and procedures must be fair, equitably applied, and readily available.

1.2 The sponsoring institution and program have faculty recruitment and employment practices that are nondiscriminatory.

1.3 The sponsoring institution and program have student recruitment and admission practices that are nondiscriminatory and consistent with published policies.

1.4 The program assures the confidentiality of student educational records.

1.5 The program assures that students and faculty are made aware of the JRCERT **Standards for an Accredited Educational Program in Radiography** and the avenue to pursue allegations of noncompliance with the **Standards**.

1.6 The program publishes program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

1.7 The sponsoring institution and program comply with the requirements to achieve and maintain JRCERT accreditation.

1.1 The sponsoring institution and program provide students, faculty, and the public with policies, procedures, and relevant information. Policies and procedures must be fair, equitably applied, and readily available.

Explanation:

Institutional and program policies and procedures must be fair, equitably applied, and promote professionalism. Policies, procedures, and relevant information must be current, accurate, published, and made readily available to students, faculty, staff, and the public on the institution's or program's website to assure transparency and accountability of the educational program. For example, requiring the public to contact the institution or program to request program information is not fully transparent. Policy changes must be made known to students, faculty, and the public in a timely fashion. It is recommended that revision dates be identified on program publications. At a minimum, the sponsoring institution and/or program must publish policies, procedures, and/or relevant information related to the following:

- ☐ admission and transfer of credit policies;
- ☐ tuition, fees, and refunds;
- ☐ graduation requirements;

- grading system;
- program mission statement, goals, and student learning outcomes;
- accreditation status;
- articulation agreement(s); academic calendar; clinical obligations; grievance policy and/or procedures.

Any policy changes to the above must be made known to students, faculty, and the public in a timely fashion.

In addition, programs must develop a contingency plan that addresses any type of catastrophic event that could affect student learning and program operations. Although the contingency plan does not need to be made readily available to the public, program faculty must be made aware of the contingency plan.

Required Program Response:

- Describe how institutional and program policies, procedures, and relevant information are made known to students, faculty, staff, and the public.
- Describe how policies and procedures are fair, equitably applied, and promote professionalism.
- Describe the nature of any formal grievance(s) and/or complaints(s) and their resolution.
- Provide publications that include the aforementioned policies, procedures, and relevant information, including the hyperlink for each.
- Provide a copy of the resolution of any formal grievance(s).

Possible Site Visitor Evaluation Methods:

- Review of institutional and program website
- Review of institutional and program materials
- Review of student handbook
- Review of student records
- Review of formal grievance(s) record(s), if applicable
- Interviews with institutional administration
- Interviews with faculty
- Interviews with staff
- Interviews with students

1.2 The sponsoring institution and program have faculty recruitment and employment practices that are nondiscriminatory.

Explanation:

Nondiscriminatory recruitment and employment practices assure fairness and integrity. Equal opportunity for employment must be offered to each applicant with respect to any legally protected status such as race, color, gender, age, disability, national origin, or any other protected class. Employment practices must be equitably applied.

Required Program Response:

- Describe how nondiscriminatory recruitment and employment practices are assured.
- Provide copies of employment policies and procedures that assure nondiscriminatory practices.

Possible Site Visitor Evaluation Methods:

- Review of employee/faculty handbook
- Review of employee/faculty application form
- Review of institutional catalog
- Interviews with faculty

1.3 The sponsoring institution and program have student recruitment and admission practices that are nondiscriminatory and consistent with published policies.

Explanation:
Nondiscriminatory recruitment practices assure applicants have equal opportunity for admission. Defined admission practices facilitate objective student selection. In considering applicants for admission, the program must follow published policies and procedures. Statistical information such as race, color, religion, gender, age, disability, national origin, or any other protected class may be collected; however, the student must voluntarily provide this information. Use of this information in the student selection process is discriminatory.

Required Program Response:

- Describe how institutional and program admission policies are implemented.
- Describe how admission practices are nondiscriminatory.
- Provide institutional and program admission policies.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with admissions personnel, as appropriate
- Interviews with students

1.4 The program assures the confidentiality of student educational records.

Explanation: Maintaining the confidentiality of educational records protects students' right to privacy. Educational records must be maintained in accordance with the Family Educational Rights and Privacy Act (FERPA).
If educational records contain students' social security numbers, this information must be maintained in a secure and confidential manner. Space should be made available for the secure storage of files and records.

Required Program Response:
Describe how the program maintains the confidentiality of students' educational records.

Possible Site Visitor Evaluation Methods:

- Review of institution's/program's published policies/procedures
- Review of student academic and clinical records, including radiation monitoring reports
- Tour of program offices
- Tour of clinical setting(s)
- Interviews with faculty
- Interviews with clerical staff, if applicable
- Interviews with clinical preceptor(s)
- Interviews with clinical staff
- Interviews with students

1.5 The program assures that students and faculty are made aware of the JRCERT **Standards for an Accredited Educational Program in Radiography** and the avenue to pursue allegations of noncompliance with the **Standards**.

Explanation:
The program must assure students and faculty are cognizant of the **Standards** and must provide contact information for the JRCERT.

Any individual associated with the program has the right to submit allegations against a JRCERTaccredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards and/or JRCERT policies. Additionally, an individual has the right to submit allegations against the program if the student believes that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

Contacting the JRCERT must not be a step in the formal institutional or program grievance policy/procedure. The individual must first attempt to resolve the complaint directly with institutional/program officials by following the grievance policy/procedures provided by the institution/program. If the individual is unable to resolve the complaint with institutional/program officials or believes that the concerns have not been properly addressed, the individual may submit allegations of noncompliance directly to the JRCERT.

Required Program Response:
- Describe how students and faculty are made aware of the **Standards**.
- Provide documentation that the **Standards** and JRCERT contact information are made known to students and faculty.

Possible Site Visitor Evaluation Methods:
- Review of program publications
- Review of program website
- Interviews with faculty
- Interviews with students

1.6 The program publishes program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

Explanation:
Program accountability is enhanced, in part, by making its program effectiveness data available to the program's communities of interest, including the public. In an effort to increase accountability and transparency, the program must publish, at a minimum, its most recent five- year average credentialing examination pass rate data, five-year average job placement rate data, and annual program completion rate data on its website to allow the public access to this information. If the program cannot document five years of program effectiveness data, it must publish its available effectiveness data.
The program effectiveness data must clearly identify the sample size associated with each measure (i.e., number of first-time test takers, number of graduates actively seeking employment, and number of graduates).

Program effectiveness data is published on the JRCERT website. Programs must publish a hyperlink to the JRCERT website to allow students and the public access to this information.

Required Program Response:

- Provide the hyperlink for the program's effectiveness data webpage.
- Provide samples of publications that document the availability of program effectiveness data via the JRCERT URL address from the program's website.

Possible Site Visitor Evaluation Methods:

- Review of program website
- Review of program publications
- Interviews with faculty
- Interviews with students

1.7 The sponsoring institution and program comply with requirements to achieve and maintain JRCERT accreditation.

Explanation:

Programs must comply with all JRCERT policies and procedures to maintain accreditation. JRCERT policies are located at www.jrcert.org. In addition, substantive changes must be reviewed and approved by the JRCERT prior to implementation, with the exception of a change of ownership.

JRCERT accreditation requires that the sponsoring institution has the primary responsibility for the educational program and grants the terminal award. Sponsoring institutions may include educational programs established in colleges, universities, vocational/technical schools, hospitals, or military facilities. The JRCERT does not recognize a healthcare system as the program sponsor. A healthcare system consists of multiple institutions operating under a common governing body or parent corporation. A specific facility within the healthcare system must be identified as the sponsor. The JRCERT requires each program to have a separate accreditation award and does not recognize branch campuses. The JRCERT recognizes a consortium as an appropriate sponsor of an educational program.

The JRCERT requires programs to maintain a current and accurate database. The program must maintain documentation of all program official qualifications, including updated curricula vitae and current ARRT certification and registration, or equivalent documentation. This documentation is not required to be entered into the Accreditation Management System (AMS). Newly appointed institutional administrators, program officials, and clinical preceptors must be updated through the AMS within thirty (30) days of appointment.

No Required Program Response

Possible Site Visitor Evaluation Method:

Review of a representative sample of program official qualifications

Standard Two: Institutional Commitment and Resources

The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Objectives:

2.1 The sponsoring institution provides appropriate administrative support and demonstrates a sound financial commitment to the program.

2.2 The sponsoring institution provides the program with the physical resources needed to support the achievement of the program's mission.

2.3 The sponsoring institution provides student resources.

2.4 The sponsoring institution and program maintain compliance with United States Department of Education (USDE) Title IV financial aid policies and procedures, if the JRCERT serves as gatekeeper.

2.1 The sponsoring institution provides appropriate administrative support and demonstrates a sound financial commitment to the program.

Explanation:
The program must have sufficient institutional support and ongoing funding to operate effectively. The program's relative position in the organizational structure helps facilitate appropriate resources and enables the program to meet its mission.

The sponsoring institution should provide the program with administrative/clerical services as needed to assist in the achievement of its mission.

Required Program Response:

- Describe the sponsoring institution's level of commitment to the program.
- Describe the program's position within the sponsoring institution's organizational structure and how this supports the program's mission.
- Describe the adequacy of financial resources.
- Describe the availability and functions of administrative/clerical services, if applicable.
- Provide institutional and program organizational charts.

Possible Site Visitor Evaluation Methods:

- Review of organizational charts of institution and program
- Review of published program materials
- Review of meeting minutes
- Interviews with institutional administration
- Interviews with faculty
- Interviews with clerical staff, if applicable

2.2 The sponsoring institution provides the program with the physical resources needed to support the achievement of the program's mission.

Explanation:
Physical resources include learning environments necessary to conduct teaching and facilitate learning. The sponsoring institution must provide faculty with adequate office and classroom space needed to fulfill their responsibilities. Faculty office space should be conducive to course development and scholarly activities. Space must be made available for private student advisement and program meetings. Classrooms must be appropriately designed to meet the needs of the program's curriculum delivery methods.

Resources include, but are not limited to, access to computers, reliable and secure Internet service, instructional materials (computer hardware and/or software, technology-equipped classrooms, simulation devices, and other instructional aides), and library resources.

Laboratories must be conducive to student learning and sufficient in size. The sponsoring institution must provide the program with access to a fully energized laboratory. An energized laboratory on campus is recommended. The program may utilize laboratory space that is also

used for patient care. In the event patient flow disallows use of the laboratory space, the program must assure that laboratory courses are made up in a timely manner. A mobile unit and/or simulation software cannot take the place of a stationary/fixed energized laboratory.

The JRCERT does not endorse any specific physical resources.

Required Program Response:
Describe how the program's physical resources, such as offices, classrooms, and laboratories, facilitate the achievement of the program's mission.

Possible Site Visitor Evaluation Methods:

- Tour of the classroom, laboratories, and faculty offices
- Review of learning resources
- Interviews with faculty
- Interviews with students

2.3 The sponsoring institution provides student resources.

Explanation:
Student resources refer to the variety of services and programs offered to promote academic success. The institution and/or program must provide access to information for personal counseling, requesting accommodations for disabilities, and financial aid.

The JRCERT does not endorse any specific student resources.

Required Program Response:

- Describe how students are provided with access to information on personal counseling, disability services, and financial aid.
- Describe how the program utilizes other student resources to promote student success.

Possible Site Visitor Evaluation Methods:

- Tour of facilities
- Review of published program materials
- Review of surveys
- Interviews with faculty
- Interviews with students

2.4 The sponsoring institution and program maintain compliance with United States Department of Education (USDE) Title IV financial aid policies and procedures, if the JRCERT serves as gatekeeper.

Explanation:
If the program has elected to participate in Title IV financial aid and the JRCERT is identified as the gatekeeper, the program must:

- maintain financial documents including audit and budget processes confirming appropriate allocation and use of financial resources;
- have a monitoring process for student loan default rates;
- have an appropriate accounting system providing documentation for management of Title IV financial aid and expenditures; and
- inform students of responsibility for timely repayment of Title IV financial aid.

The program must comply with all USDE requirements to participate in Title IV financial aid.

Required Program Response:

- Describe how the program informs students of their responsibility for timely repayment of financial aid.
- Provide evidence that Title IV financial aid is managed and distributed according to the USDE regulations to include:

o recent student loan default data and o results of financial or compliance audits.

Possible Site Visitor Evaluation Methods:

- Review of records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

Standard Three: Faculty and Staff

The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Objectives:

3.1 The sponsoring institution provides an adequate number of faculty to meet all educational, accreditation, and administrative requirements.

3.2 The sponsoring institution and program assure that all faculty and staff possess the academic and professional qualifications appropriate for their assignments.

3.3 The sponsoring institution and program assure the responsibilities of faculty and clinical staff are delineated and performed.

3.4 The sponsoring institution and program assure program faculty performance is evaluated and results are shared regularly to assure responsibilities are performed.

3.5 The sponsoring institution and/or program provide faculty with opportunities for continued professional development.

3.1 The sponsoring institution provides an adequate number of faculty to meet all educational, accreditation, and administrative requirements.

Explanation:
An adequate number of faculty promotes sound educational practices. Full- and part-time status is determined by, and consistent with, the sponsoring institution's definition. Institutional policies and practices for faculty workload and release time must be consistent with faculty in other comparable health sciences programs in the same institution. Faculty workload and release time practices must include allocating time and/or reducing teaching load for educational, accreditation, and administrative requirements expected of the program director and clinical coordinator.

A full-time program director is required. A full-time equivalent clinical coordinator is required if the program has more than fifteen (15) students enrolled in the clinical component of the program. The clinical coordinator position may be shared by no more than four (4) appointees. If a clinical coordinator is required, the program director may not be identified as the clinical coordinator. The clinical coordinator may not be identified as the program director.

A minimum of one clinical preceptor must be designated at each recognized clinical setting. The same clinical preceptor may be identified at more than one site as long as a ratio of one full-time equivalent clinical preceptor for every ten (10) students is maintained. The program director and clinical coordinator may perform clinical instruction; however, they may not be identified as clinical preceptors.

Required Program Response:
- Describe faculty workload and release time in relation to institutional policies/practices and comparable health sciences programs within the sponsoring institution.
- Describe the adequacy of the number of faculty and clinical preceptors to meet identified accreditation requirements and program needs.
- Provide institutional policies for faculty workload and release time.

Possible Site Visitor Evaluation Methods:
- Review institutional policies for faculty workload and release time
- Review of faculty position descriptions, if applicable
- Review of clinical settings
- Interviews with faculty
- Interviews with clinical preceptor(s)
- Interviews with students

3.2 The sponsoring institution and program assure that all faculty and staff possess the academic and professional qualifications appropriate for their assignments.

Position	Qualifications
	Holds, at a minimum, a master's degree; For master's degree programs, a doctoral degree is preferred;

Program Director	Proficient in curriculum design, evaluation, instruction, program administration, and academic advising;
	Documents three years' clinical experience in the professional discipline;
	Documents two years' experience as an instructor in a JRCERTaccredited program;
	Holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent[1], in radiography.
Clinical Coordinator	Holds, at a minimum, a bachelor's degree; For master's degree programs, holds, at a minimum, a master's degree;
	Proficient in curriculum development, supervision, instruction, evaluation, and academic advising;
	Documents two years' clinical experience in the professional discipline;
	Documents one year's experience as an instructor in a JRCERTaccredited program;
	Holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent[1], in radiography.
Full-time Didactic Faculty	Holds, at a minimum, a bachelor's degree;
	Is qualified to teach the subject;
	Proficient in course development, instruction, evaluation, and academic advising;
	Documents two years' clinical experience in the professional discipline;
	Holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent[1], in radiography.
Adjunct Faculty	Holds academic and/or professional credentials appropriate to the subject content area taught;
	Is knowledgeable of course development, instruction, evaluation, and academic advising.

[1] Equivalent: an unrestricted state license for the state in which the program is located.

Clinical Preceptor	Is proficient in supervision, instruction, and evaluation;
	Documents two years' clinical experience in the professional discipline;
	Holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent[2], in radiography.
Clinical Staff	Holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent[2], in radiography.

Explanation:
Faculty and clinical staff must possess academic and professional qualifications appropriate for their assignment. Clinical preceptors and clinical staff supervising students' performance in the clinical component of the program must document American Registry of Radiologic Technologists (ARRT) certification and registration (or equivalent) or other appropriate credentials. Health care professionals with credentials other than ARRT certification and registration (or equivalent) may supervise students in specialty areas (e.g., Registered Nurse supervising students performing patient care skills, phlebotomist supervising students performing venipuncture, etc.).

No Required Program Response.

[2] Equivalent: an unrestricted state license for the state in which the clinical setting is located.

3.3 The sponsoring institution and program assure the responsibilities of faculty and clinical staff are delineated and performed.

Position	Responsibilities must, at a minimum, include:
Program Director	Assuring effective program operations;
	Overseeing ongoing program accreditation and assessment processes;
	Participating in budget planning;
	Participating in didactic and/or clinical instruction, as appropriate;
	Maintaining current knowledge of the professional discipline and educational methodologies through continuing professional development;
	Assuming the leadership role in the continued development of the program.
Clinical Coordinator	Correlating and coordinating clinical education with didactic education and evaluating its effectiveness;
	Participating in didactic and/or clinical instruction;
	Supporting the program director to assure effective program operations;
	Participating in the accreditation and assessment processes;
	Maintaining current knowledge of the professional discipline and educational methodologies through continuing professional development;
	Maintaining current knowledge of program policies, procedures, and student progress.
Full-Time Didactic Faculty	Preparing and maintaining course outlines and objectives, instructing, and evaluating student progress;
	Participating in the accreditation and assessment process;
	Supporting the program director to assure effective program operations;
	Participating in periodic review and revision of course materials;
	Maintaining current knowledge of professional discipline;

	Maintaining appropriate expertise and competence through continuing professional development.
Adjunct Faculty	Preparing and maintaining course outlines and objectives, instructing and evaluating students, and reporting progress;
	Participating in the assessment process, as appropriate;
	Participating in periodic review and revision of course materials;
	Maintaining current knowledge of the professional discipline, as appropriate;
	Maintaining appropriate expertise and competence through continuing professional development.

Position	**Responsibilities must, at a minimum, include:**
Clinical Preceptor	Maintaining knowledge of program mission and goals;
	Understanding the clinical objectives and clinical evaluation system and evaluating students' clinical competence;
	Providing students with clinical instruction and supervision;
	Participating in the assessment process, as appropriate;
	Maintaining current knowledge of program policies, procedures, and student progress and monitoring and enforcing program policies and procedures.
Clinical Staff	Understanding the clinical competency system;
	Understanding requirements for student supervision;
	Evaluating students' clinical competence, as appropriate;
	Supporting the educational process;
	Maintaining current knowledge of program clinical policies, procedures, and student progress.

Explanation:
Faculty and clinical staff responsibilities must be clearly delineated and support the program's mission. The program director and clinical coordinator may have other responsibilities as defined by the sponsoring institution; however, these added responsibilities must not compromise the ability, or the time allocated, to perform the responsibilities identified in this objective. For all circumstances when a program director's and/or clinical coordinator's appointment is less than 12 months and students are enrolled in didactic and/or clinical courses, the program director and/or clinical coordinator must assure that all program responsibilities are fulfilled.

Required Program Response:

- Describe how faculty and clinical staff responsibilities are delineated.
- Describe how the delegation of responsibilities occurs to assure continuous coverage of program responsibilities, if appropriate.
- Provide documentation that faculty and clinical staff positions are clearly delineated.
- Provide assurance that faculty responsibilities are fulfilled throughout the year.

Possible Site Visitor Evaluation Methods:

- Review of position descriptions
- Review of handbooks
- Interviews with institutional administration
- Interviews with faculty
- Interviews with clinical preceptors
- Interviews with clinical staff
- Interviews with students

3.4 The sponsoring institution and program assure program faculty performance is evaluated and results are shared regularly to assure responsibilities are performed.

Explanation:
Evaluating program faculty, including but not limited to program directors and clinical coordinators, assures that responsibilities are performed, promotes proper teaching methodology, and increases program effectiveness. The performance of program faculty must be evaluated and shared minimally once per year. Any evaluation results that identify concerns must be discussed with the respective individual(s) as soon as possible.

It is the prerogative of the program to evaluate the performance of clinical preceptors who are employees of clinical settings. If the program elects to evaluate the clinical preceptors, a description of the evaluation process should be provided to the clinical preceptors, along with the mechanism to incorporate feedback into professional growth and development.

Required Program Response:

- Describe the evaluation process.
- Describe how evaluation results are shared with program faculty.
- Describe how evaluation results are shared with clinical preceptors, if applicable.
- Provide samples of evaluations of program faculty.
- Provide samples of evaluations of clinical preceptors, if applicable.

Possible Site Visitor Evaluation Methods:

- Review of program evaluation materials
- Review of faculty evaluation(s)
- Review of clinical preceptor evaluation(s), if applicable
- Interviews with institutional administration
- Interviews with faculty
- Interviews with clinical preceptor(s), if applicable
- Interviews with students

3.5 The sponsoring institution and/or program provide faculty with opportunities for continued professional development.

Explanation:

Opportunities that enhance and advance educational, technical, and professional knowledge must be available to program faculty. Faculty should take advantage of the available resources provided on an institutional campus. Program faculty should not be expected to use personal leave time in order to attend professional development activities external to the sponsoring institution.

Required Program Response:

- Describe how professional development opportunities are made available to faculty.
- Describe how professional development opportunities have enhanced teaching methodologies.

Possible Site Visitor Evaluation Methods:

- Review of institutional and/or program policies for professional development
- Interviews with institutional administration
- Interviews with faculty

Standard Four: Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Objectives:

4.1 The program has a mission statement that defines its purpose.

4.2 The program provides a well-structured curriculum that prepares students to practice in the professional discipline.

4.3 All clinical settings must be recognized by the JRCERT.

4.4 The program provides timely, equitable, and educationally valid clinical experiences for all students.

4.5 The program provides learning opportunities in advanced imaging and/or therapeutic technologies.

4.6 The program assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

4.7 The program measures didactic, laboratory, and clinical courses in clock hours and/or credit hours through the use of a consistent formula.

4.8 The program provides timely and supportive academic and clinical advisement to students enrolled in the program.

4.9 The program has procedures for maintaining the integrity of distance education courses.

4.1 The program has a mission statement that defines its purpose.

Explanation: The program's mission statement should clearly define the purpose or intent toward which the program's efforts are directed. The mission statement should support the mission of the sponsoring institution. The program must evaluate the mission statement, at a minimum every three years, to assure it is effective. The program should engage faculty and other communities of interest in the reevaluation of its mission statement.

Required Program Response:

- Describe how the program's mission supports the mission of the sponsoring institution.
- Describe how the program reevaluates its mission statement.
- Provide documentation of the reevaluation of the mission statement.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of meeting minutes

- Interviews with institutional administration
- Interviews with faculty

4.2 The program provides a well-structured curriculum that prepares students to practice in the professional discipline.

Explanation:
A well-structured curriculum must be comprehensive, current, appropriately sequenced, and provide for evaluation of student achievement. This allows for effective student learning by providing a knowledge foundation in didactic and laboratory courses prior to competency achievement. Continual refinement of the competencies achieved is necessary so that students can demonstrate enhanced performance in a variety of situations and patient conditions. The well-structured curriculum is guided by a master plan of education.

At a minimum, the curriculum should promote qualities that are necessary for students/graduates to practice competently, make ethical decisions, assess situations, provide appropriate patient care, communicate effectively, and keep abreast of current advancements within the profession. Expansion of the curricular content beyond the minimum is required of programs at the bachelor's degree or higher levels.

Use of a standard curriculum promotes consistency in radiography education and prepares the student to practice in the professional discipline. All programs must follow a JRCERT-adopted curriculum. An adopted curriculum is defined as:

- the most recent American Society of Radiologic Technologists (ASRT) Radiography curriculum and/or
- another professional curriculum adopted by the JRCERT Board of Directors.

The JRCERT encourages innovative approaches to curriculum delivery methods that provide students with flexible and creative learning opportunities. These methods may include, but are not limited to, distance education courses, part-time/evening curricular tracks, service learning, and/or interprofessional development.

Required Program Response:

- Describe how the program's curriculum is structured.
- Describe the program's clinical competency-based system.
- Describe how the program's curriculum is delivered, including the method of delivery for distance education courses. Identify which courses, if any, are offered via distance education.
- Describe alternative learning options, if applicable (e.g., part-time, evening and/or weekend curricular track(s)).
- Describe any innovative approaches to curriculum delivery methods.
- Provide the Table of Contents from the master plan of education.
- Provide current curriculum analysis grid.
- Provide samples of course syllabi.

Possible Site Visitor Evaluation Methods:

- Review of the master plan of education
- Review of didactic and clinical curriculum sequence
- Review of input from communities of interest
- Review of part-time, evening and/or weekend curricular track(s), if applicable
- Review of course syllabi
- Observation of a portion of any course offered via distance delivery
- Interviews with faculty
- Interviews with students

4.3 All clinical settings must be recognized by the JRCERT.

Explanation:

All clinical settings must be recognized by the JRCERT. Clinical settings must be recognized prior to student assignment. Ancillary medical facilities and imaging centers that are owned, operated, and on the same campus of a recognized setting do not require JRCERT recognition. A minimum of one (1) clinical preceptor must be identified for each recognized clinical setting.

If a facility is used as an observation site, JRCERT recognition is not required. An observation site is used for student observation of equipment operation and/or procedures that may not be available at recognized clinical settings. Students may not assist in, or perform, any aspects of patient care during observational assignments. Facilities where students participate in community-based learning do not require recognition.

Required Program Response:

- Assure all clinical settings are recognized by the JRCERT.
- Provide a listing of ancillary facilities under one clinical setting recognition.
- Describe how observation sites, if used, enhance student clinical education.

Possible Site Visitor Evaluation Methods:

- Review of JRCERT database
- Review of clinical records
- Interviews with faculty
- Interviews with clinical preceptors
- Interviews with clinical staff
- Interviews with students

4.4 The program provides timely, equitable, and educationally valid clinical experiences for all students.

Explanation:

Programs must have a process in place to assure timely, appropriate, and educationally valid clinical experiences to all admitted students. A meaningful clinical education plan assures that activities are equitable, as well as prevents the use of students as replacements for employees. Students must have sufficient access to clinical settings that provide a wide range of procedures for competency achievement, including mobile, surgical, and trauma examinations. The

maximum number of students assigned to a clinical setting must be supported by sufficient human and physical resources. The number of students assigned to the clinical setting must not exceed the number of assigned clinical staff. The student to clinical staff ratio must be 1:1; however, it is acceptable that more than one student may be temporarily assigned to one technologist during infrequently performed procedures.

Clinical placement must be nondiscriminatory in nature and solely determined by the program. Students must be cognizant of clinical policies and procedures including emergency preparedness and medical emergencies.

Programs must assure that clinical involvement for students is limited to not more than ten (10) hours per day. If the program utilizes evening and/or weekend assignments, these assignments must be equitable, and program total capacity must not be increased based on these assignments. Students may not be assigned to clinical settings on holidays that are observed by the sponsoring institution. Programs may permit students to make up clinical time during the term or scheduled breaks; however, appropriate supervision must be maintained. Program faculty need not be physically present; however, students must be able to contact program faculty during makeup assignments. The program must also assure that its liability insurance covers students during these makeup assignments.

Required Program Response:

- Describe the process for student clinical placement including, but not limited to:
  - assuring equitable learning opportunities,
  - assuring access to a sufficient variety and volume of procedures to achieve program competencies, and ○ orienting students to clinical settings.
- Describe how the program assures a 1:1 student to radiography clinical staff ratio at all clinical settings.
- Provide current clinical student assignment schedules in relation to student enrollment.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of clinical placement process
- Review of course objectives
- Review of student clinical assignment schedules
- Review of clinical orientation process/records
- Review of student records
- Interviews with faculty
- Interviews with clinical preceptors
- Interviews with clinical staff
- Interviews with students

4.5 The program provides learning opportunities in advanced imaging and/or therapeutic technologies.

Explanation:

The program must provide learning opportunities in advanced imaging and/or therapeutic technologies. It is the program's prerogative to decide which advanced imaging and/or therapeutic technologies should be included in the didactic and/or clinical curriculum.

Programs are not required to offer clinical rotations in advanced imaging and/or therapeutic technologies; however, these clinical rotations are strongly encouraged to enhance student learning.

Students assigned to imaging modalities such as computed tomography, magnetic resonance, interventional procedures, and sonography, are not included in the calculation of the approved clinical capacity unless the clinical setting is recognized exclusively for advanced imaging modality rotations. Once the students have completed the imaging assignments, the program must assure that there are sufficient physical and human resources to support the students upon reassignment to the radiography department.

Required Program Response:
Describe how the program provides opportunities in advanced imaging and/or therapeutic technologies in the didactic and/or clinical curriculum.

Possible Site Visitor Evaluation Methods:

- Review of clinical rotation schedules, if applicable
- Interviews with faculty
- Interviews with students

4.6 The program assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

Explanation:
Program length must be consistent with the terminal award. The JRCERT defines program length as the duration of the program, which may be stated as total academic or calendar year(s), total semesters, trimesters, or quarters.

Required Program Response:
Describe the relationship between the program length and the terminal award offered.

Possible Site Visitor Evaluation Methods:

- Review of course catalog
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

4.7 The program measures didactic, laboratory, and clinical courses in clock hours and/or credit hours through the use of a consistent formula.

Explanation:

Defining the length of didactic, laboratory, and clinical courses facilitates the transfer of credit and the awarding of financial aid. The formula for calculating assigned clock/credit hours must be consistently applied for all didactic, laboratory, and clinical courses, respectively.

Required Program Response:

- Describe the method used to award credit hours for didactic, laboratory, and clinical courses.
- Provide a copy of the program's policies and procedures for determining credit hours and an example of how such policies and procedures have been applied to the program's coursework.
- Provide a list of all didactic, laboratory, and clinical courses with corresponding clock or credit hours.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of class schedules
- Interviews with institutional administration
- Interviews with faculty
- Interviews with students

4.8 The program provides timely and supportive academic and clinical advisement to students enrolled in the program.

Explanation:

Appropriate academic and clinical advisement promotes student achievement and professionalism. Student advisement should be both formative and summative and must be shared with students in a timely manner. Programs are encouraged to develop written advisement procedures.

Required Program Response:

- Describe procedures for student advisement.
- Provide sample records of student advisement.

Possible Site Visitor Evaluation Methods:

- Review of students' records
- Interviews with faculty
- Interviews with clinical preceptor(s)
- Interviews with students

4.9 The program has procedures for maintaining the integrity of distance education courses.

Explanation:

Programs that offer distance education courses must have processes in place that assure that the students who register in the distance education courses are the same students that participate in, complete, and receive the credit. Programs must verify the identity of students by using methods

such as, but not limited to, secure logins, passcodes, proctored exams, and/or video monitoring. These processes must protect the student's privacy.

Required Program Response:

- Describe the process for assuring the integrity of distance education courses.
- Provide published institutional/program materials that outline procedures for maintaining the integrity of distance education courses.

Possible Site Visitor Evaluation Methods:

- Review of published institutional/program materials
- Review the process of student identification
- Review of student records
- Interviews with institutional administration
- Interviews with faculty
- Interviews with students

Standard Five: Health and Safety

The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

Objectives:

5.1 The program assures the radiation safety of students through the implementation of published policies and procedures.

5.2 The program assures each energized laboratory is in compliance with applicable state and/or federal radiation safety laws.

5.3 The program assures that students employ proper safety practices.

5.4 The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.

5.5 The sponsoring institution and/or program have policies and procedures that safeguard the health and safety of students.

5.1 The program assures the radiation safety of students through the implementation of published policies and procedures.

Explanation:

Appropriate policies and procedures help assure that student radiation exposure is kept as low as reasonably achievable (ALARA). The program must monitor and maintain student radiation exposure data. All students must be monitored for radiation exposure when using equipment in energized laboratories as well as in the clinical environment during, but not limited to, simulation procedures, image production, or quality assurance testing.

Students must be provided their radiation exposure report within thirty (30) school days following receipt of the data. The program must have a published protocol that identifies a threshold dose for incidents in which student dose limits are exceeded. Programs are encouraged to identify a threshold dose below those identified in federal regulations.

The program's radiation safety policies must also include provisions for the declared pregnant student in an effort to assure radiation exposure to the student and fetus are kept as low as reasonably achievable (ALARA). The pregnancy policy must be made known to accepted and enrolled female students, and include:

- a written notice of voluntary declaration,
- an option for written withdrawal of declaration, and
- an option for student continuance in the program without modification.

The program may offer clinical component options such as clinical reassignments and/or leave of absence. Pregnancy policies should also be in compliance with Title IX regulations. The program should work with the Title IX coordinator and/or legal counsel to discuss and resolve any specific circumstances.

Required Program Response:

- Describe how the policies and procedures are made known to enrolled students.
- Describe how the radiation exposure report is made available to students.
- Provide copies of appropriate policies.
- Provide copies of radiation exposure reports.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Review of student radiation exposure reports
- Interviews with faculty
- Interviews with clinical preceptor(s)
- Interviews with students

5.2 The program assures each energized laboratory is in compliance with applicable state and/or federal radiation safety laws.

Explanation:

Compliance with applicable laws promotes a safe environment for students and others. Records of compliance must be maintained for the program's energized laboratories.

Required Program Response:

Provide certificates and/or letters for each energized laboratory documenting compliance with state and/or federal radiation safety laws.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of compliance records
- Interviews with faculty

5.3 The program assures that students employ proper safety practices.

Explanation:

The program must assure that students are instructed in the utilization of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure to patients, selves, and others. These practices assure radiation exposures are kept as low as reasonably achievable (ALARA).

Students must understand basic safety practices prior to assignment to clinical settings. As students progress in the program, they must become increasingly proficient in the application of radiation safety practices.

- Students must not hold image receptors during any radiographic procedure.
- Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.
- Programs must develop policies regarding safe and appropriate use of energized laboratories by students. Students' utilization of energized laboratories must be under the supervision of a qualified radiographer who is available should students need assistance. If a qualified radiographer is not readily available to provide supervision, the radiation exposure mechanism must be disabled.

Programs must establish a magnetic resonance imaging (MRI) safety screening protocol and students must complete MRI orientation and screening which reflect current American College of Radiology (ACR) MR safety guidelines prior to the clinical experience. This assures that students are appropriately screened for magnetic field or radiofrequency hazards. Policies should reflect that students are mandated to notify the program should their status change.

Required Program Response:

- Describe how the curriculum sequence and content prepares students for safe radiation practices.
- Describe how the program prepares students for magnetic resonance safe practices.
- Provide the curriculum sequence.
- Provide policies/procedures regarding radiation safety.
- Provide the MRI safety screening protocol and screening tool.

Possible Site Visitor Evaluation Methods:

- Review of program curriculum
- Review of radiation safety policies/procedures
- Review of magnetic resonance safe practice and/or screening protocol
- Review of student handbook
- Review of student records
- Interviews with faculty
- Interviews with clinical preceptor(s)
- Interviews with clinical staff
- Interviews with students

5.4 The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.

Explanation:

Appropriate supervision assures patient safety and proper educational practices. The program must develop and publish supervision policies that clearly delineate its expectations of students, clinical preceptors, and clinical staff.

The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

- reviews the procedure in relation to the student's achievement,
- evaluates the condition of the patient in relation to the student's knowledge, • is physically present during the conduct of the procedure, and • reviews and approves the procedure and/or image.

Students must be directly supervised until competency is achieved. Once students have achieved competency, they may work under indirect supervision. The JRCERT defines indirect supervision as student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement.

Repeat images must be completed under direct supervision. The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices.

Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.

Required Program Response:

- Describe how the supervision policies are made known to students, clinical preceptors, and clinical staff.
- Describe how supervision policies are enforced and monitored in the clinical setting.
- Provide policies/procedures related to supervision.
- Provide documentation that the program's supervision policies are made known to students, clinical preceptors, and clinical staff.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical preceptor(s)
- Interviews with clinical staff
- Interviews with students

5.5 The sponsoring institution and/or program have policies and procedures that safeguard the health and safety of students.

Explanation:

Appropriate health and safety policies and procedures assure that students are part of a safe, protected environment. These policies must, at a minimum, address campus safety, emergency

preparedness, harassment, communicable diseases, and substance abuse. Enrolled students must be informed of policies and procedures.

Required Program Response:

- Describe how institutional and/or program policies and procedures are made known to enrolled students.
- Provide institutional and/or program policies and procedures that safeguard the health and safety of students.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students

Standard Six: Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement

The extent of a program's effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.

Objectives:

6.1 The program maintains the following program effectiveness data:

- five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
- five-year average job placement rate of not less than 75 percent within twelve months of graduation, and
- annual program completion rate.

6.2 The program analyzes and shares its program effectiveness data to facilitate ongoing program improvement.

6.3 The program has a systematic assessment plan that facilitates ongoing program improvement.

6.4 The program analyzes and shares student learning outcome data to facilitate ongoing program improvement.

6.5 The program periodically reevaluates its assessment process to assure continuous program improvement.

6.1 The program maintains the following program effectiveness data:

- **five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,**
- **five-year average job placement rate of not less than 75 percent within twelve months of graduation, and**
- **annual program completion rate.**

Explanation:
Program effectiveness outcomes focus on issues pertaining to the overall curriculum such as admissions, retention, completion, credentialing examination performance, and job placement.

The JRCERT has developed the following definitions and criteria related to program effectiveness outcomes:

Credentialing examination pass rate: The number of graduates who pass, on first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination, or an unrestricted state licensing examination, compared with the number of graduates who take the examination within six months of graduation.

Job placement rate: The number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences. The JRCERT has defined not actively seeking employment as: 1) graduate fails to communicate with program officials regarding employment status after multiple attempts, 2) graduate is unwilling to seek employment that requires relocation, 3) graduate is unwilling to accept employment, for example, due to salary or hours, 4) graduate is on active military duty, and/or 5) graduate is continuing education.

Program completion rate: The number of students who complete the program within the stated program length. The program specifies the entry point (e.g., required orientation date, final drop/add date, final date to drop with 100% tuition refund, official class roster date, etc.) used in calculating the program's completion rate. When calculating the total number of students enrolled in the program (denominator), programs need not consider students who attrite due to nonacademic reasons such as: 1) financial, medical/mental health, or family reasons, 2) military deployment, 3) a change in major/course of study, and/or 4) other reasons an institution may classify as a nonacademic withdrawal.

Credentialing examination, job placement, and program completion data must be reported annually via the JRCERT Annual Report.

No Required Program Response.

Possible Site Visitor Evaluation Methods:
- Review of program effectiveness data
- Interviews with faculty

6.2 The program analyzes and shares its program effectiveness data to facilitate ongoing program improvement.

Explanation:

Analysis of program effectiveness data allows the program to determine if it is meeting its mission. This analysis also provides a means of accountability to faculty, students, and other communities of interest. Faculty should assure all data have been analyzed and discussed prior to sharing results with an assessment committee or other communities of interest. Sharing the program effectiveness data results should take place in a timely manner.

Programs must use assessment results to promote student success and maintain and improve program effectiveness outcomes. Analysis of program effectiveness data must occur at least annually, and results of the evidence-based decisions must be documented.

In sum, the data analysis process must, at a minimum, include:

- program effectiveness data that is compared to expected achievement; and
- documentation of discussion(s) of data analysis including trending/comparing of results over time to maintain and improve student learning.

o If the program does not meet its benchmark for a specific program effectiveness outcome, the program must implement an action plan that identifies the issue/problem, allows for data trending, and identifies areas for improvement. The action plan must be reassessed annually until the performance concern(s) is/are appropriately addressed.

Required Program Response:

- Describe examples of evidence-based changes that have resulted from the analysis of program effectiveness data and discuss how these changes have maintained or improved program effectiveness outcomes.
- Provide actual program effectiveness data since the last accreditation award.
- Provide documentation of an action plan for any unmet benchmarks.
- Provide documentation that program effectiveness data is shared in a timely manner.

Possible Site Visitor Evaluation Methods:

- Review of aggregated data
- Review of data analysis and actions taken
- Review of documentation that demonstrates the sharing of results with communities of interest
- Review of representative samples of measurement tools used for data collection
- Interviews with faculty
- Interview with institutional assessment coordinator, if applicable

6.3 The program has a systematic assessment plan that facilitates ongoing program improvement.

Explanation:

A formalized written assessment plan allows programs to gather useful data to measure the goals and student learning outcomes to facilitate program improvement. Student learning outcomes must align with the goals and be explicit, measurable, and state the learning expectations. The development of goals and student learning outcomes allows the program to measure the attainment of its mission. It is important for the program to engage faculty and other communities of interest in the development or revision of its goals and student learning outcomes.

The program must have a written systematic assessment plan that, at a minimum, contains: • goals in relation to clinical competency, communication, and critical thinking;

- two student learning outcomes per goal;
- two assessment tools per student learning outcome;
- benchmarks for each assessment method to determine level of achievement; and
- timeframes for data collection.

Programs may consider including additional goals in relation to ethical principles, interpersonal skills, professionalism, etc.

Programs at the bachelor's and higher degree levels should consider the additional professional content when developing their goals and student learning outcomes.

The program must also assess graduate and employer satisfaction. Graduate and employer satisfaction may be measured through a variety of methods. The methods and timeframes for collection of the graduate and employer satisfaction data are the prerogatives of the program.

Required Program Response:

- Describe how the program determined the goals and student learning outcomes to be included in the systematic assessment plan.
- Describe the program's cycle of assessment.
- Describe how the program uses feedback from communities of interest in the development of its assessment plan.
- Provide a copy of the program's current assessment plan.

Possible Site Visitor Evaluation Methods:

- Review of assessment plan
- Review of assessment methods
- Interviews with faculty
- Interview with institutional assessment coordinator, if applicable

6.4 The program analyzes and shares student learning outcome data to facilitate ongoing program improvement.

Explanation:

Analysis of student learning outcome data allows the program to determine if it is meeting its mission, goals, and student learning outcomes. This analysis also provides a means of accountability to faculty, students, and other communities of interest. Faculty should assure all data have been analyzed and discussed prior to sharing results with an assessment committee or other communities of interest. Sharing the student learning data results must take place in a timely manner.

Programs must use assessment results to promote student success and maintain and improve student learning outcomes. Analysis of student learning outcome data must occur at least annually, and results of the evidence-based decisions must be documented.

In sum, the data analysis process must, at a minimum, include:

- student learning outcome data that is compared to expected achievement; and • documentation of discussion(s) of data analysis including trending/comparing of results over time to maintain and improve student learning.
    - If the program does meet its benchmark for a specific student learning outcome, the program should identify how student learning was maintained or improved and describe how students achieved program-level student learning outcomes.
    - If the program does not meet its benchmark for a specific student learning outcome, the program must implement an action plan that identifies the issue/problem, allows for data trending, and identifies areas for improvement. The action plan must be reassessed annually until the performance concern(s) is/are appropriately addressed.

Required Program Response:

- Describe examples of changes that have resulted from the analysis of student learning outcome data and discuss how these changes have maintained or improved student learning outcomes.
- Describe the process and timeframe for sharing student learning outcome data results with its communities of interest.
- Provide actual student learning outcome data and analysis since the last accreditation award.
- Provide documentation of an action plan for any unmet benchmarks.
- Provide documentation that student learning outcome data and analysis is shared in a timely manner.

Possible Site Visitor Evaluation Methods:

- Review of aggregated/disaggregated data
- Review of data analysis and actions taken
- Review of documentation that demonstrates the sharing of results with communities of interest
- Review of representative samples of measurement tools used for data collection
- Interviews with faculty
- Interview with institutional assessment coordinator, if applicable

6.5 The program periodically reevaluates its assessment process to assure continuous program improvement.

Explanation:

Identifying and implementing needed improvements in the assessment process leads to program improvement and renewal. As part of the assessment process, the program must review its mission statement, goals, student learning outcomes, and assessment plan to assure that assessment methods are providing credible information to make evidence-based decisions.

The program must assure the assessment process is effective in measuring student learning outcomes. At a minimum, this evaluation must occur at least every three years and be documented. In order to assure that student learning outcomes have been achieved and that curricular content is well-integrated across the curriculum, programs may consider the

development and evaluation of a curriculum map. Programs may wish to utilize assessment rubrics to assist in validating the assessment process.

Required Program Response:

- Describe how assessment process reevaluation has occurred.
- Discuss changes to the assessment process that have occurred since the last accreditation award.
- Provide documentation that the assessment process is evaluated at least once every three years.

Possible Site Visitor Evaluation Methods:

- Review of documentation related to the assessment process reevaluation
- Review of curriculum mapping documentation, if applicable
- Interviews with faculty
- Interview with institutional assessment coordinator, if applicable

Glossary of Terms

Academic calendar: the official institutional/program document that, at a minimum, identifies specific start and end dates for each term, holidays recognized by the sponsoring institution, and breaks.

Accreditation status: a statement of the program's current standing with the JRCERT. Per JRCERT
Policies 10.000 and 10.700, accreditation status is categorized as one of the following: Accredited, Probationary Accreditation, and Administrative Probationary Accreditation. The program must also identify its current length of accreditation award (i.e., 8-year, 5-year, 3-year, probation). The JRCERT publishes each program's current accreditation status at www.jrcert.org.

Administrator: individual(s) that oversee student activities, academic personnel, and programs.

Campus: the buildings and grounds of a school, college, university, or hospital. A campus does not include geographically dispersed locations.

Clinical capacity: the maximum number of students that can partake in clinical experiences at a clinical setting at any given time. Clinical capacity is determined by the availability of human and/or physical resources. Students assigned to imaging modalities such as computed tomography, magnetic resonance, interventional procedures, and sonography, are not included in the calculation of the approved clinical capacity unless the clinical setting is recognized exclusively for advanced imaging modality rotations.

Clinical obligations: relevant requirements for completion of a clinical course including, but not limited to, background checks, drug screening, travel to geographically dispersed clinical settings, evening and/or weekend clinical assignments, and documentation of professional liability.

Communities of interest: the internal and external stakeholders, as defined by the program, who have a keen interest in the mission, goals, and outcomes of the program and the subsequent program effectiveness. The communities of interest may include current students, faculty, graduates, institutional administration, employers, clinical staff, or other institutions,

organizations, regulatory groups, and/or individuals interested in educational activities in medical imaging and radiation oncology.

Comparable health sciences programs: health science programs established in the same sponsoring institution that are similar to the radiography program in curricular structure as well as in the number of faculty, students, and clinical settings.

Consortium: two or more academic or clinical institutions that have formally agreed to sponsor the development and continuation of an education program. A consortium must be structured to recognize and perform the responsibilities and functions of a sponsoring institution.

Curriculum map (-ping): process/matrix used to indicate where student learning outcomes are covered in each course. Level of instructional emphasis or assessment of where the student learning outcome takes place may also be indicated.

Distance education: refer to the Higher Education Opportunity Act of 2008, Pub. L. No. 110-315, §103(a)(19) and JRCERT Policy 10.800 - Alternative Learning Options.

Asynchronous distance learning: learning and instruction that do not occur in the same place or at the same time.

Distance education: an educational process characterized by the separation, in time and/or place, between instructor and student. Distance education supports regular and substantive interaction synchronously or asynchronously between the instructor and student through one or more interactive distance delivery technologies.

Distance (Delivery) technology: instructional/delivery methods that may include the use of TV, audio, or computer transmissions (broadcast, closed-circuit, cable, microwave, satellite transmissions); audio, computer, or Internet-based conferencing; and/or methodologies.

Hybrid radiography course: a professional level radiography course that uses a mix of face- to-face traditional classroom instruction along with synchronous or asynchronous distance education instruction. Regardless of institutional definition, the JRCERT defines a hybrid radiography course as one that utilizes distance education for more than 50% of instruction and learning.

Online radiography course: a professional level radiography course that primarily uses asynchronous distance education instruction. Typically, the course instruction and learning is 100% delivered via the Internet. Often used interchangeably with Internet-based learning, web-based learning, or distance learning.

Synchronous distance learning: learning and instruction that occur at the same time and in the same place.

[Definitions based on Accrediting Commission of Education in Nursing (ACEN) Accreditation Manual glossary]

Equivalent: with regards to certification and registration, an unrestricted state license for the state in which the program and/or clinical setting is located.

Faculty: the teaching staff for didactic and clinical instruction. These individuals may also be known as academic personnel.

Faculty workload: contact/credit hours or percentages of time that reflect the manner in which the sponsoring institution characterizes, structures, and documents the nature of faculty members' teaching and non-teaching responsibilities. Workload duties include, but are not limited to, teaching, advisement, administration, committee activity, service, clinical practice, research, and other scholarly activities.

Gatekeeper: the agency responsible for oversight of the distribution, record keeping, and repayment of Title IV financial aid.

Master plan of education: an overview of the program and documentation of all aspects of the program. In the event of new faculty and/or leadership to the program, a master plan of education provides the information needed to understand the program and its operations. At a minimum, a master plan of education must include course syllabi (didactic and clinical courses), program policies and procedures, and the curricular sequence calendar. If the program utilizes an electronic format, the components must be accessible by all program faculty.

Meeting minutes: a tangible record of a meeting of individuals, groups, and/or boards that serve as a source of attestation of a meeting's outcome(s) and a reference for members who were unable to attend. The minutes should include decisions made, next steps planned, and identification and tracking of action plans.

Program effectiveness outcomes/data: the specific program outcomes established by the JRCERT. The JRCERT has developed the following definitions and criteria related to program effectiveness outcomes:

Credentialing examination pass rate: the number of graduates who pass, on first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination, or an unrestricted state licensing examination, compared with the number of graduates who take the examination within six months of graduation.

Job placement rate: the number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences. The JRCERT has defined not actively seeking employment as: 1) graduate fails to communicate with program officials regarding employment status after multiple attempts, 2) graduate is unwilling to seek employment that requires relocation, 3) graduate is unwilling to accept employment due to salary or hours, 4) graduate is on active military duty, and/or 5) graduate is continuing education.

Program completion rate: the number of students who complete the program within the stated program length. The program specifies the entry point (e.g., required orientation date, final drop/add date, final date to drop with 100% tuition refund, official class roster date, etc.) used in calculating the program's completion rate. When calculating the total number of students enrolled in the program (denominator), programs need not consider graduates who attrite due to nonacademic reasons such as: 1) financial, medical/mental health, or family reasons, 2) military deployment, 3) a change in major/course of study, and/or 4) other reasons an institution may classify as a nonacademic withdrawal.

Program total capacity: the maximum number of students that can be enrolled in the educational program at any given time. Program total capacity is dependent on the availability of human and physical resources of the sponsoring institution. It is also dependent on the program's clinical rotation schedule and the clinical capacities of recognized clinical settings.

Release time (reassigned workload): a reduction in the teaching workload to allow for the administrative functions associated with the responsibilities of the program director or clinical coordinator or other responsibilities as assigned.

Sponsoring institution: the facility or organization that has primary responsibility for the educational program and grants the terminal award. A recognized institutional accreditor must accredit a sponsoring institution. Educational programs may be established in: community and junior colleges; senior colleges and universities; hospitals; medical schools; postsecondary vocational/technical schools and institutions; military/governmental facilities; proprietary schools; and consortia. Consortia must be structured to recognize and perform the responsibilities and functions of a sponsoring institution.

Awarding, Maintaining, and Administering Accreditation

A. Program/Sponsoring Institution Responsibilities

1. Applying for Accreditation

The accreditation review process conducted by the Joint Review Committee on Education in Radiologic Technology (JRCERT) is initiated by a program through the written request for accreditation sent to the JRCERT, on program/institutional letterhead. The request must include the name of the program, the type of program, and the address of the program. The request is to be submitted, with the applicable fee, to:

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850 Chicago, IL 60606-3182

Submission of such information will allow the program access to the JRCERT's Accreditation Management System (AMS). The initial application and self-study report will then be available for completion and submission through the AMS.

2. Administrative Requirements for Maintaining Accreditation
   a. Submitting the self-study report or a required progress report within a reasonable period of time, as determined by the JRCERT.

   b. Agreeing to a reasonable site visit date before the end of the period for which accreditation was awarded.

   c. Informing the JRCERT, within a reasonable period of time, of changes in the institutional or program officials, program director,

clinical coordinator, full-time didactic faculty, and clinical preceptor(s).

d. Paying JRCERT fees within a reasonable period of time.
Returning, by the established deadline, a completed Annual Report.

e. Returning, by the established deadline, any other information requested by the JRCERT.

Programs are required to comply with these and other administrative requirements for maintaining accreditation. Additional information on policies and procedures is available at www.jrcert.org.

Program failure to meet administrative requirements for maintaining accreditation will lead to Administrative Probationary Accreditation and potentially result in Withdrawal of Accreditation.

B. JRCERT Responsibilities

1. Administering the Accreditation Review Process

The JRCERT reviews educational programs to assess compliance with the **Standards for an Accredited Educational Program in Radiography**.

The accreditation process includes a site visit.

Before the JRCERT takes accreditation action, the program being reviewed must respond to the report of findings.

The JRCERT is responsible for recognition of clinical settings.

2. Accreditation Actions

Consistent with JRCERT policy, the JRCERT defines the following as accreditation actions:

Accreditation, Probationary Accreditation, Administrative Probationary Accreditation, Withholding Accreditation, and Withdrawal of Accreditation (Voluntary and Involuntary).
For more information regarding these actions, refer to JRCERT Policy 10.200.
A program or sponsoring institution may, at any time prior to the final accreditation action, withdraw its request for initial or continuing accreditation.

Educators may wish to contact the following organizations for additional information and materials:

Accreditation: Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850

Chicago, IL 60606-3182 (312) 704-5300 www.jrcert.org

Curriculum: American Society of Radiologic Technologists
15000 Central Avenue, S.E.
Albuquerque, NM 87123-3909
(505) 298-4500 www.asrt.org

Certification: American Registry of Radiologic Technologists 1255
Northland Drive
St. Paul, MN 55120-1155
(651) 687-0048 www.arrt.org

Appendix 4

Student's Name: _____ Date: _____

This questionnaire is designed to assist Southern in determining if it is safe for you to enter into the MRI exam room at any clinical education setting (during a procedure or not). It is important that you answer all of the following questions. **If for some reason you don't understand the question please ask the MRI Technologist for assistance.**

		Circle One	
1.	Do you have a pacemaker, wires, defibrillator, stents, or implanted heart valves?	YES	NO
2.	Have you ever had a head surgery requiring an aneurysm clip or coil?	YES	NO
3.	Have you ever had any type of surgery?	YES	NO
4.	Do you have any metal implanted in your body from a surgical procedure?	YES	NO
5.	Do you have any electronic pumps, stimulators, shunts, or TENS units?	YES	NO
6.	Do you have any metal pins, joints, prosthesis, or metallic objects in or attached to your body?	YES	NO
7.	Have you ever had an injury to your eyes or body where metal fragments could be lodged?	YES	NO
8.	Do you have dentures, hearing aids, or middle/inner ear prosthesis?	YES	NO
9.	Do you have any form of body piercing (ear, tongue, nose, etc.)?	YES	NO
10.	For females: Are you pregnant or is there a possibility that you could be pregnant?	YES	NO
11.	Is there any device or item that you think should be brought to the attention of The MR technologist prior to your entry into the MRI scan room?	YES	NO

If yes, list:_____

I certify that I have read and understand the questions asked in the questionnaire and have responded to the best of my ability. I have read the safety information. I understand that it is my responsibility to inform Southern and the clinical site of any metal or implanted devices that may be in my body and that failing to do so may cause serious injury or be life threatening. I agree that should I have any metal in my body that after review and screening by the physician/technologist, elect to enter the MRI scan room whether having the procedure or not, I agree to release Southern and the clinical site from any and all liability for any injury.

_____	_____	_____
Student Signature	Print Name	Date
_____	_____	_____
Witness or Interpreter	Print Name	Date
_____	_____	_____
Physician/MRI Technologist/Faculty	Print Name and Title	Date

*The physician/MRI technologist/faculty signature will be obtained only if required by the clinical setting. Department specific form/release may be used.

Appendix 5

Radiography

1. Introduction

Candidates applying for certification and registration under the primary eligibility pathway are required to meet the Professional Education Requirements specified in the *ARRT Rules and Regulations*. *ARRT's Radiography Didactic and Clinical Competency Requirements* are one component of the Professional Education Requirements.

The requirements are periodically updated based upon a practice analysis which is a systematic process to delineate the job responsibilities typically required of radiographers. The result of this process is a task inventory which is used to develop the clinical competency requirements (see section 4 below) and the content specifications which serve as the foundation for the didactic competency requirements (see section 3 below) and the examination.

2. Documentation of Compliance

Verification of program completion, including Didactic and Clinical Competency Requirements and all degree-related requirements including conferment of the degree, will be completed on the Program Completion Verification Form on the ARRT Educator Website after the student has completed the Application for Certification and Registration.

Candidates who complete their educational program during 2022 or 2023 may use either the 2017 Didactic and Clinical Competency Requirements or the 2022 requirements. Candidates who complete their educational program after December 31, 2023 must use the 2022 requirements.

3. Didactic Competency Requirements

The purpose of the didactic competency requirements is to verify that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice and hone affective and critical thinking skills required to demonstrate professional competence. Candidates must successfully complete coursework addressing the topics listed in the ARRT Content Specifications for the Radiography Examination. These topics would typically be covered in a nationally-recognized curriculum such as the ASRT Radiography Curriculum. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified in the content specifications and clinical competency documents.

4. Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified by the ARRT have demonstrated competence performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the certification examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.

4.1 General Performance Considerations

4.1.1 Patient Diversity

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

4.1.2 Elements of Competence

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the course of the candidate's formal educational program.

4.1.3 Simulated Performance

ARRT defines simulation of a clinical procedure routinely performed on a patient as the candidate completing all possible hands-on tasks of the procedure on a live human being using the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient.

ARRT requires that competencies performed as a simulation must meet the same criteria as competencies demonstrated on patients. For example, the competency must be performed under the direct observation of the program director or program director's designee and be performed independently, consistently, and effectively.

Simulated performance must meet the following criteria:

- Simulation of imaging procedures requires the use of proper radiographic equipment without activating the x-ray beam.

- A total of ten imaging procedures may be simulated. Imaging procedures eligible for simulation are noted within the chart (see section 4.2.2).
- If applicable, the candidate must evaluate related images.
- Some simulations are acceptable for General Patient Care (see section 4.2.1). These do not count toward the ten imaging procedures that can be simulated.

4.2 Radiography-Specific Requirements

As part of the education program, candidates must demonstrate competence in the clinical procedures identified below. These clinical procedures are listed in more detail in the following sections:

- Ten mandatory general patient care procedures;
- 36 mandatory imaging procedures;
- 15 elective imaging procedures selected from a list of 34 procedures;
- One of the 15 elective imaging procedures must be selected from the head section; and
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.

One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur but not both).

4.2.1 General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

4.2.2 Imaging Procedures

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:

- patient identity verification;
- examination order verification;
- patient assessment;
- room preparation;
- patient management;
- equipment operation;
- technique selection;
- patient positioning;
- radiation safety;
- image processing; and image evaluation

4.2.2 Imaging Procedures (continued)

Imaging Procedures	**Mandatory or Elective**		**Eligible for Simulation**	**Date Completed**	**Competence Verified By**
	Mandatory	Elective			
Chest and Thorax					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
Upper Extremity					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
Trauma: Upper Extremity (Non-Shoulder)*	✓				
Lower Extremity					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		

Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
Trauma: Lower Extremity*	✓				

* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.

4.2.2 Imaging Procedures (continued)

Imaging Procedures	**Mandatory or Elective**		**Eligible for Simulation**	**Date Completed**	**Competence Verified By**
	Mandatory	**Elective**			
Head – Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
Spine and Pelvis					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
Abdomen					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		

Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			

4.2.2 Imaging Procedures (continued)

Imaging Procedures	**Mandatory or Elective**		**Eligible for Simulation**	**Date Completed**	**Competence Verified By**
	Mandatory	**Elective**			
Fluoroscopy Studies – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus (*NOT* Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
Mobile C-Arm Studies					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
Mobile Radiographic Studies					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
Pediatric Patient (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity		✓	✓		
Abdomen		✓	✓		
Mobile Study		✓	✓		

Geriatric Patient (At Least 65 Years Old **and** Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine		✓			
Subtotal					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		