PROSPECTIVE STUDENT AGREEMENT

I have read the Cleveland Community College Radiography Student Handbook. If I am accepted into the program, I will abide by the regulations and policies therein. I also understand that if a policy change occurs, I will receive a revised copy of the Cleveland Community College Radiography Student Handbook. I also understand that changes will be discussed with me in a timely and appropriate manner by program faculty. I further understand that all program requirements must be met as prescribed if I am to continue to the next semester or to graduate, if I am in the last semester. I understand that failure to meet program requirements as prescribed will result in disciplinary action. I also understand that the Radiography Program seeks to instill discipline, integrity, and professionalism in addition to knowledge and skills. Where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Cleveland Community College Radiography Program Student Handbook.

___________________________________
Student Signature

___________________________________
Student ID Number

Date

CONFIDENTIALITY OF MEDICAL INFORMATION

Prospective students and students enrolled in the Radiography Program are exposed to and/or have access to both sensitive and confidential patient information. Prospective and program students have both a legal, ethical and moral obligation to maintain all patient information, written and oral, in complete confidence.

I, ______________________________, understand that I have both a legal, ethical and moral obligation to maintain all patient information, written and oral, in the strictest confidence. I will not discuss any patient information other than what is needed for approved educational purposes and only with appropriate persons who have direct interest in the educational process and who are also aware of the confidentiality of the information. I further understand that violation of the patients’ right to privacy may result in action being taken by the appropriate authorities.

___________________________________
Student Signature

___________________________________
Student ID Number

___________________________________
Student Supervisor (need signature for exposure day only)
INTRODUCTION

The Radiography Student Handbook has been designed specifically for students in the Radiography Program and is to be used in conjunction with the Cleveland Community College Academic Bulletin and Student Handbook. The information contained in these publications provides specific information concerning the College, its programs, and clinical affiliate policies of which the student must be aware, in addition to general material related to the radiographic profession. The information in these handbooks may be subject to change. If a change occurs, students will be notified in a timely and efficient manner. Students will be given a revised copy of the Cleveland Community College Radiography Student Handbook. All prior copies must be discarded. **It is the responsibility of each student to read both the College’s Academic Bulletin Radiography Student Handbook very closely and adhere to all policies. It is also the responsibility of the student to request clarification of any policies and policy changes.**

These policies are established in conjunction with the clinical affiliates and serve as a guide for the student in understanding program policies, procedures, and requirements; all of which must be met as prescribed to remain in the program or graduate from the program.

**Non-discrimination policies** are adhered to as outlined in the Cleveland Community College Academic Bulletin and Student Handbook.

Information on the Colleges’ academic calendar and programs of study may be accessed at [www.clevelandcc.edu](http://www.clevelandcc.edu). You may also access information on RAD Program course offerings and examples of didactic and clinical courses and hours by going to the web site clicking on programs of study, then clicking on Radiography. Where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Radiography Program Student Handbook.
CLEVELAND COMMUNITY COLLEGE MISSION STATEMENT

Cleveland Community College provides diverse and accessible learning opportunities to meet the educational and training needs of our community.
Cleveland Community College Radiography Program Mission Statement

In keeping with the overall mission of Cleveland Community College to provide diverse, and accessible learning opportunities to meet the educational and training needs of our community, the mission of the Radiography Program is to prepare graduates for employment as registered, skilled health care professionals who employ the proper use of radiation to produce radiographic images of the human body in varied facilities and with diverse populations. Graduates of the Radiography Program will acquire the skills and knowledge necessary for successful articulation into the Allied Health Field of Radiologic Technology/Medical Imaging.
Cleveland Community College Program of Radiography Goal

Program Goal

To produce qualified, competent entry level radiographers with the skills and knowledge necessary for successful articulation into the Allied Health Field of Radiologic Technology

Assessment Measures of Program Goal

Assessment of program effectiveness in meeting the program mission and the program goal will be determined based on the following criteria:

A. Students will demonstrate clinical competence consistent with entry level radiography professionals.

B. Students/Graduates will exhibit behaviors consistent with competent entry level radiography professionals in areas pertaining to critical thinking and problem solving,

C. Students will exhibit effective communication skills consistent with competent entry level radiography professionals.

D. Students will exhibit professionalism consistent with competent entry level radiography professionals.
Assessment Measures of **Program Effectiveness**

Criteria based on a mix of the JRCERT Standards and SACS Requirements are also monitored by the program to ensure program effectiveness and is as follows:

**Joint Review Commission on Education in Radiologic Technology Performance Measures**

75%  5 - year American Registry of Radiologic Technology examination pass rate on first attempt within 6 months of graduation

75%  5 - year program completion rate

75%  of graduates actively seeking employment will be employed within 12 months of graduation

*80%  of program completer respondents will report being satisfied with the quality of the College and its programs and services

*80%  of program graduate employer respondents will report being satisfied with the educational training of graduates

**Additional Internal Program Measures**

100%  of students will achieve 90% or higher on terminal student learning outcomes prior to being allowed to graduate

100%  of students will achieve a 5 semester average of 90% or higher on clinical performance evaluations, prior to being allowed to graduate

100%  of students will achieve a 5 semester average of 90% or higher on examination and procedure competencies, prior to being allowed to graduate

100%  of students will achieve 77% or higher on end of program comprehensive testing tools prior to being allowed to graduate

100%  of program graduates will earn degrees within 150% of published program length from date of matriculation

*60%  of the defined cohort will return or graduate from fall to fall

*  a 3 - year minimum enrollment average of 10 students will be maintained
Program Terminal Student Learning Outcomes/Objectives

Terminal Student Learning Outcomes/Objectives must be demonstrated with ninety (90) percent or higher accuracy prior to graduation. Terminal Student Learning Outcomes/Objectives are to be completed by the student during the latter third of the 5th semester and must be completed and turned in at least one (1) week prior to graduation.

Upon successful completion of the program, the student will be able to:

**A. Apply radiation protection methods and procedures for the safety of patients, self, and others**
1. Evaluate the need for and use of protective shielding
2. Take the appropriate precautions to minimize exposure to patients
3. Set kV, mA and time or AEC to achieve optimum image quality, safe operating conditions, and minimum radiation dose
4. Prevent persons not involved in clinical activities from remaining in area during x-ray exposure
5. Take appropriate precautions to minimize occupational radiation exposure
6. Wear a personnel monitoring device while on duty
7. Review and evaluate individual occupational exposure records

**B. Evaluate radiation primary and secondary (accessory) equipment to ensure the proper application of radiation and image processing to limit exposure to patients**
1. Warm-up x-ray tube according to manufacturer’s recommendations
2. Prepare and operate radiographic unit and accessories
3. Prepare and operate fluoroscopic unit and accessories
4. Recognize and report malfunctions in the primary imaging (radiographic or fluoroscopic) unit and secondary accessories
5. Perform basic evaluations of imaging (radiographic and fluoroscopic) equipment and accessories (e.g., lead aprons, collimator accuracy)
6. Inspect and properly clean image receptors
7. Perform start-up and shut down procedures in the automatic processor, if applicable
8. Recognize and report malfunctions in the automatic processor, if applicable
9. Process exposed film, if applicable
10. Reload cassettes and magazines by selecting film of proper size and type, if applicable
11. Store and handle image receptors to reduce the possibility of artifact and production

**C. Exercise independent judgment and discretion in the technical performance of radiographic positions and procedures**
1. Confirm patient’s identity
2. Select appropriate image receptor
3. Determine appropriate exposure factors using calipers and technique charts
4. Modify exposure factors for circumstances such as involuntary motion, casts, and splints, pathological conditions, or patient’s inability to cooperate
5. Use radiopaque markers to indicate anatomical side, position or other relevant information (e.g., time, upright, decubitus, post-void)
6. Evaluate patient for appropriateness of examination
7. Evaluate images for diagnostic quality
8. Determine corrective measures if image is not of diagnostic quality and take appropriate action
9. Select equipment and accessories (e.g., grid, compensating filters, shielding) for the examination requested
10. Remove all radiopaque materials from patient or table that could interfere with the radiographic image
11. Explain breathing instructions prior to making the exposure
12. Position patient to demonstrate the desired anatomy using body (topographical) landmarks
13. Explain and confirm patient preparation (e.g., diet restrictions, preparatory medications) prior to radiographic/fluoroscopic examinations
14. Properly sequence radiographic procedures to avoid residual contrast material affecting future exams
15. Examine request/documentation to verify accuracy and completeness of information (e.g., patient history, clinical diagnosis)
16. Practice standard (universal) precautions
17. P

D. Adhere to ethical and legal standards of radiography practice
1. Perform radiographic procedures and positions following guidelines outlined by the Radiographer Code Ethics and the Radiographer Scope of Practice
2. Examine radiographs to verify accuracy and completeness of information (e.g., patient history, clinical diagnosis)
3. Practice standard (universal) precautions.
4. Confirm patient’s identity
5. Question female patients of child-bearing age about possible pregnancy and document response
6. Verify/obtain consent form

E. Apply patient care and management techniques to ensure confidentiality, safety, comfort, modesty, health, and well-being of the patient
1. Explain procedure and post-procedural instructions to patient or patient’s family member
2. Evaluate patient’s ability to understand and comply with requirements for the requested examination
3. Obtain, observe, monitor, and document vital signs
4. Use proper body mechanics and/or mechanical transfer devices when assisting patients
5. Provide for patient safety, comfort, and modesty
6. Select immobilization devices, when indicated, to prevent patient movement and/or ensure patient safety
7. Verify accuracy of patient identification on image
8. Maintain confidentiality of patient information
9. Use sterile or aseptic technique when indicated
10. Confirm type of contrast media and prepare for administration
11. Prior to administration of contrast agent, gather information to determine appropriate dosage
12. Prior to administration of contrast agent determine if the patient is at an increased risk of adverse reaction
13. Administer IV contrast media
14. Observe patient after administration of contrast media to detect adverse reactions
15. Recognize need for prompt medical attention and administer emergency care
16. Document required information on patient’s medical record
17. Clean, disinfect or sterilize facilities and equipment and dispose of contaminated items in preparation for next examination
18. Follow appropriate procedures when in contact with a patient in isolation
19. Monitor medical equipment attached to the patient (e.g., IVs, oxygen) during the radiographic procedure
ATTENDANCE

Class attendance requirements, set by Cleveland Community College and the program faculty, are published in the Cleveland Community College Radiography Student Handbook and the Academic Bulletin and Student Handbook. Contact requirements are set by the North Carolina Community College System, students must meet required contact hours for all RAD prefix courses. Class and clinical hours shall not exceed more than 40 hours in one week. Required contact hours are set by the North Carolina Community College System. To ensure that each student has been afforded the opportunity to gain the knowledge, skills, and professional behaviors necessary for successful articulation into the field of Radiologic Technology, each student must meet didactic and clinical hourly requirements set by the North Carolina Community College System.

Instructors require written validation of the reason for an absence or tardy: A doctors’ excuse, an excuse from a judge, or proof of death of immediate family member. In the event of a personal crisis, the nature of what constitutes a crisis must be validated by program faculty. **No unexcused absences or tardies are allowed.** If an excused absence or tardy occurs on an assignment due date, the assignment must be turned in the first day the student returns to the course. There are no exceptions. If an assignment is not turned in the first day the student returns, a permanent “0” will be recorded for the assignment. Students will not be reminded of due assignments. It is the responsibility of the student to ensure that all required assignments are submitted on time. For didactic absences or tardies, an outside assignment or project in a pertinent area of study may be assigned to the student to meet hourly requirements for the didactic course. If an unexcused absence or tardy occurs on an assignment due date, the assignment will not be accepted and a permanent “0” will be recorded for the assignment. For
clinical absences or tardies, time must be made up in the area and rotation missed. Class plans and topic calendars will be set by the instructor and adhered to as much as possible, students will notified of any additions, changes, editions, or deletions as they occur.

Make up tests will be allowed only in rare situations or circumstances. If an excused absence or tardy occurs on a test date, the student must present documentable proof that the absence or tardy was unavoidable. If the instructor accepts the reason for the absence or tardy, the student must complete the test on the first day he or she returns or a permanent “0” will be recorded for the test. The student will not be reminded of test dates. It is the responsibility of the student to request a make-up test.

Students are required to have and to maintain reliable transportation during their tenure in the program. Absences and tardies because of unreliable transportation are always unexcused.

Routine Doctor, dental, and legal appointments must not be made during didactic, clinical, or other related activities except in emergencies. Emergencies are evaluated by Program Faculty on an individual basis.

Student class and clinical schedules cannot and will not be adjusted to meet the work or personal schedule of the student. If outside work and/or other activities interferes with clinical and/or academic progress, the student will be advised in writing to make changes to rectify the situation, in order to successfully meet the requirements of the program.

Didactic and clinical class schedules may, on occasion, require adjusting to meet special program or student educational needs. The program will endeavor to keep these occurrences to a minimum, but students (and employers) must be aware that if special needs arise, students must adjust schedules, without exception.
Students are expected to be in class or clinical **on time as scheduled**. If an emergency occurs, students must follow proper protocol for notifying program and/or site officials.

No absences or tardies should occur unless an unavoidable emergency or illness occurs. Attendance is monitored and all missed didactic assignments, hours, and clinical time must be made up as prescribed, in the appropriate academic area that the absence or tardy occurred.

Radiography courses are fast paced. Much information is delivered each session. Chronic tardiness and absenteeism are not tolerated. Students will not be allowed to enter didactic classes or clinic after the start of the session, unless an emergency situation arises and proper protocol was followed. Students are allowed fifteen (15) minutes for occasional emergency situations, but this privilege will not be given, unless proper procedure has been followed and voice mail notification was initiated prior to the start of the class session or clinical rotation. Abuse of this privilege will not be allowed. Students must also activate the voice mail system for unavoidable emergencies as soon as possible. Voice mail may be activated 24 hours a day, 7 days a week by dialing 704-669-4091 or 704-669-4121.

Students **may** be allowed two (2) **excused absences dependant upon the nature of the reason for the absence in any one semester**. Students must have written documentation; as stated previously. Two tardies equals one (1) absence for scheduled didactic and clinical courses each semester; after the two (2) absences or (4) tardies, the disciplinary process will begin. All missed didactic and clinical time must be made up to receive credit for the course in which the absences or tardies occurred. Students may be given appropriate, comparable didactic assignments to cover missed information for absences or tardies in didactic courses. For clinical absences or tardies, students will be required to make up hours missed in the area and rotation the absence occurred. All clinical makeup time will be scheduled by the Clinical Coordinator.
prior to the end of each semester. In the event that the Clinical Coordinator is unable to place the student for makeup time prior to the end of the semester, this policy may be extended, but student must make up all time prior to the start of the next semester or student will not be allowed to move forward. Placement of students will depend on the availability of the clinical site. **No unexcused absences or tardies will be allowed.** Should the student’s absences exceed the **20 percent absentee policy** set by the College, even with valid excuses, the student will be immediately dropped from the course and dismissed from the program. Infractions of the attendance policy will carry from semester to semester while in the program. If a written warning was received for absenteeism or tardiness during a previous semester, continued absenteeism or tardiness in subsequent semesters will result in suspension, if student continues to exhibit the inability to rectify this negative and unprofessional behavior, further disciplinary action in the form of dismissal will be instituted. Each students’ situation and the nature of the occurrences are evaluated by program faculty on an individual basis.

The process for excused and unexcused absences is the same. The difference is the initiation of the disciplinary procedure. For excused absences the process begins after the second excused absence. For unexcused absences the process begins with the first unexcused absence. The first offense will result in an oral and written warning. The second offense will result in a two (2) week suspension and the third (3) offense will result in dismissal from the program. Excessive absences or tardies, **even with valid excuses, are unprofessional and unacceptable.** Although makeup assignments are required, chronic absenteeism or tardiness demonstrates a lack of commitment and professionalism and is an undesirable trait. **Reasons for absences and completed makeup time will be considered when reviewing student attendance.** Make up time is not a substitute for being in class and/or clinical as required. After review, makeup time
may be deducted from total time missed, all aspects of student performance will be evaluated by program faculty. Program faculty will determine what constitutes a valid reason for absentees and/or tardies. All time missed will be evaluated in determining if the 20 percent absentee policy has been exceeded, even with valid reasons. After review of missed time the student may be dropped from the course and dismissed from the program. Personal crises are evaluated on an individual basis by program faculty.

BEREAVEMENT POLICY

Students are granted three (3) days leave for the death and funeral of the following family members: father; father-in-law; mother; mother-in-law; husband; wife; son; daughter; brother; sister; grandparent. Program officials may extend this policy on an individual basis.

PROFESSIONAL GROWTH AND DEVELOPMENT

Students are required to maintain membership in radiological professional organizations such as local and/or state and/or regional and/or national professional organizations. Students are encouraged to attend local, state and/or regional educational events, seminars, workshops and/or conferences, but are not required to do so. Should a student wish to attend, that student may make the request in writing to the Program Director. The educational validity of attendance will be determined by the Program Director, Clinical Coordinator, Dean of Business Technologies and Allied Health and the Vice President of Academic Programs. Policies and procedures for student conduct at College approved events is contained within the Cleveland Community College Academic Bulletin and Student Handbook, and must be adhered to while in attendance. Cost of attendance is the responsibility of the student.

INCLEMENT WEATHER INFORMATION
Inclement weather information and policies for making up missed class time are contained in the Cleveland Community College Academic Bulletin and Student Handbook. It is the responsibility of the student to review this information and request clarification as needed.

**EMERGENCY PROCEDURES**

Emergency procedure information and policies are contained in the Cleveland Community College Academic Bulletin and Student Handbook. It is the responsibility of the student to review this information and request clarification as needed.

**cccAlert**

cccAlert is available free to all students. With cccAlert, you will receive notice in the event of an emergency or inclement weather and reminders on important dates critical to the operation of Cleveland Community College. You are automatically enrolled with cccAlert through your official student email address. You can sign up for free to receive updates on other personal email accounts as well as your cell phone. You can even connect through Facebook. Directions for how to sign up may be found by going to cccConnect and clicking on cccAlert.
ADMISSIONS POLICIES AND PROCEDURES

Admission policies and procedures are outlined in the Cleveland Community College Academic Bulletin and Student Handbook and apply to all applicants.

RE-ADMISSIONS/RE-ENTRY TO THE RADIOGRAPHY PROGRAM FOLLOWING VOLUNTARY OR INVOLUNTARY WITHDRAWAL

As stated in the Cleveland Community College Academic Bulletin and Student Handbook, re-admission will depend upon the individual circumstances, should a student be eligible to return the student is generally allowed to return at such time as an appropriate course schedule can be worked out. Returning students must fulfill contract requirements.

Reinstatement for suspended students is handled on an individual basis. Students who have been suspended are generally allowed to return at the end of the stated suspension period. All missed didactic and clinical assignments must be made up, which may result in a later program completion date than for initial admission.

Students requesting re-admission should first notify Radiography Program Coordinator requesting re-admission into the Radiography Program. A letter requesting re-admission should be submitted to the Program Coordinator. It should contain

1. Reason for leaving program
2. Reason for re-admission or re-entry and why the student feels that re-admission or re-entry should be allowed.
3. Semester of program when student wishes to begin or (such as third semester, Fall 200_ ).

Students requesting re-entry after suspension should contact the Radiography Program Coordinator to discuss terms of re-entry, if any.
The student applying for re-admission into the Radiologic Technology program must do the following:

1. Update application and college information as needed
2. Have an interview with the departmental officials for the Radiologic Technology Program and appropriate Clinical Officials, if needed, to discuss and compose learning contract that clearly states program expectations and student responsibilities.

The student applying for re-admission or re-entry into the Radiologic Technology program is not required to re-take the placement examinations.

The student is not guaranteed re-admission or re-entry, but if the student is accepted for re-admission or re-entry into the Radiography program, he or she will be required to repeat any radiography courses previously taken in which he/she received a grade of “D” or “F” or RAD courses that are more than two (2) calendar years old or any technology courses that are more than five (5) years old. A student will be awarded tentative re-admission or re-entry status until such time as the student demonstrates continued proficiency in both the didactic and clinical components of the program to the satisfaction of program faculty.

Student must audit or successfully complete a didactic challenge test, for previously taken RAD didactic courses, unless course was failed or older than two (2) calendar years, with a score of “C” or better, in addition to auditing or repeating the clinical education course prior to withdrawal.

A student may be permitted to enroll in the Radiologic Technology program twice (initial and re-admission and/or re-entry).
1. A student who is withdrawn or is dropped by the instructor from a given RAD course or clinical rotation, if allowed, can re-enroll only once.

2. A student who is unable to maintain a grade of “C” or better in a given RAD prefix didactic or clinical education course, if allowed, can re-enroll only once.

   Student must audit all RAD courses prior to the semester in which the student failed to maintain a “C” or better unless failure occurred during first semester.

   Depending upon the overall performance of the student, the student may be required to restart the program if failure occurred in later semesters.

3. A student who is re-instated or allowed to re-enter after short term suspension must complete a contract with program officials. The contract must state clearly program expectations and student responsibilities, and consequences for failure to fulfill the requirements of the contract. The student must successfully fulfill all requirements of the re-instatement, re-admission or re-enrollment contract-agreement to the satisfaction of program faculty, whether given tentative or full acceptance status. The student will be placed on probation the remaining tenure in the program. Any infraction will result in immediate dismissal from the program. Contract requirements will be determined by program officials and if needed appropriate College officials, or other appropriate College personnel, and/or appropriate affiliate officials. All requirements must be met as prescribed.

4. A student admitted to the Radiologic Technology program who has made unsatisfactory progress in another radiography program, if accepted, will be allowed to enroll once in the College’s program. The student must complete a
contract with program officials. The contract must state clearly program expectations and student responsibilities. The student must successfully fulfill all requirements of the contract-agreement to the satisfaction of program faculty, whether given tentative or full acceptance status. The procedure stated previously, for re-entry, re-admission will be followed. The student will be placed on probationary status during their tenure in the program. Any infraction of program policy will result in immediate dismissal.

5. Radiography credits (with an “RAD” or equivalent prefix) may transfer to Cleveland Community College’s program with a “C” or higher if the credit is not more than two (2) calendar years old. Students should be prepared to present

**ACADEMIC PROGRESS**

The following cumulative grade point averages are the minimum which must be attained for a student to make reasonable progress toward graduation. An overall 2.0 grade point average (on a 4.0 scale) is required for graduation.

<table>
<thead>
<tr>
<th>Cumulative Semester Hours</th>
<th>Minimum Grade Point Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>1.40</td>
</tr>
<tr>
<td>19 – 36</td>
<td>1.60</td>
</tr>
<tr>
<td>37 – 45</td>
<td>1.80</td>
</tr>
<tr>
<td>Over 45</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>(2.00 for A.A., A.S., or A.G.E. Degree)</td>
</tr>
</tbody>
</table>

In addition to the overall cumulative grade point average, the Radiologic Technology student must maintain a grade of “C” or above in all radiography courses (i.e., courses which have a RAD prefix in the Academic Bulletin). A student who falls below the specified minimum
GPA on radiography courses at the end of any semester will be placed on academic probation for the following semester. If the minimum GPA on radiography courses is attained by the end of the probation semester, the student will be removed from probation. If the student does not reach the minimum GPA during the probation semester, he or she will be dismissed from the program. Any student who fails to obtain a “C” or higher in all RAD prefix courses will be dropped from the courses and dismissed from the program.

**END OF PROGRAM TESTING**

Radiography students must also obtain a “C” average or better on **End of Program Testing**. End-of-Program Testing assesses the prospective graduate’s comprehensive knowledge and skills. Student workbooks related to the End-of-Program testing are ordered for students at the beginning of the program. Students may choose to obtain the workbooks prior to the beginning of the third semester, but no later and the program does not advise this. The workbooks assist the students in preparing for End-of-Program Testing. **End of Program Tests** will be given during the RAD 271 course and will consist of an initial group of tests and two (2) remedial test groups, if needed, should an average score of 77 not be achieved on initial testing. A total of four (4) tests will be administered during the initial testing period at designated intervals after the start of the fifth semester. After each test, areas of weakness will be reviewed in class and individual student needs will be discussed. If, after the initial process, the student does not obtain a minimum average score of 77 or better, an incomplete (I) will be recorded as the EOP test grade and the student will begin guided independent re-mediation and a new series of registry-simulated testing will begin. There will be four (4) new tests administered. Times will be set by the program, every attempt will be made to accommodate the needs of the student(s). After each test, content will be reviewed as part of guided, one-on-one re-mediation.
Areas of weakness will be discussed. If the student fails to obtain a minimum average score of 77 or better during this stage, a third and final group of re-mediation tests will be administered. Prior to the start of the third and final remedial testing phase, the student will be required to complete a program approved external re-mediation / review with 85% accuracy. Proof of completion is required. A minimum of two (2) and a maximum of four (4) tests will be administered at time intervals set by the program, during the final re-mediation. Should a student fail to obtain a minimum average grade of 77 or better, no further re-mediation or testing will be allowed. A “0” will averaged in for EOP testing. Should the student fail the course as a result, the student will be dismissed from the program for failure to meet program requirements and will not be allowed to graduate. (See grading procedures)

Students may be given preparation workbooks, and/or handouts, and/or assignments for each set of tests after administration of the initial tests.

Students must retain a large amount of information. Total commitment for the duration of the program is the key to success. Students must be willing to commit to the amount of time and study that this program requires to have a successful outcome. Less than total commitment will result in less than favorable outcomes. Out of class work and/or recommendations to enhance didactic and/or clinical performance may be assigned during semester breaks and at other times outside of class, laboratory, or clinical and/or on the student’s own time. The program recommends that all major elective plans be delayed until after completion of the program, since the program does not strictly follow the schedule of the College. Students must be aware that changes in schedules may occur.

**Pinning Ceremony/Commencement**
The pinning ceremony is a symbolic celebration of the students’ accomplishments.

Neither participation in the pinning ceremony nor commencement exercises assures graduation from the program if a student fails to complete all College and program requirements as prescribed by College and program policies and procedures. Students may only use a percentage of CCC SGA monies for the pinning ceremony reception.

**American Registry of Radiologic Technology Certification Examination Eligibility**

Graduates who fail to take the registry within six (6) months post graduation, will need to provide documentation of program approved formal external re-mediation/review with completion at eighty (80) per cent accuracy. Following successful completion of re-medial/review process, program will re-sign for the graduate to take the certification examination.

**Student Participation in School Approved Events/Functions**

All students must participate in required school approved events/functions, this includes the pinning ceremony, and graduation, exceptions may be made in the event of emergencies or due to clinical requirements.

**Didactic Grading Procedures**

Grades for didactic courses other than RAD 110, RAD 245* and RAD 271 will be determined as follows:

- Homework/Assignments: 20% of final grade (25%, if no ppt or paper)
- Quizzes: 15% of final grade
- Power Point or Paper: 10% of final grade (variable)
- Tests: 25% of final grade (30% if no ppt or paper)
Final Exam 30% of final grade

RAD 110 (includes medical terminology component)
Homework/Assignments 20%
Quizzes 15%
Power Point 10%
Tests 30%
Final Exam 25%
Medical Terminology 10%

(Test 30%, Final 30%, Assignments 25%, Quizzes 15%)

RAD 245*
Two (2) components, fifty percent (50%) of grade obtained from each component

Quality Management Component
Homework/Assignments 5%
Quizzes 10%
Tests 20%
Final 15%

Radiographic Analysis Component
Homework/Assignments 5%
Quizzes 5%
Case Study (Power Point) 10%
Tests 20%
Final 10%

RAD 271
Assignments/Homework 15%*
Quizzes/Standardized Test 15%
Tests 70%**

*If no class presentations, then course assignments will account for 25% of grade

**Average score of 77 must be obtained on tests designated as EOPs or zero “0” will be recorded as grade. Students who fail to obtain an average score of 77, after the initial set of tests will receive an incomplete (I), which will be adjusted after completion of the re-medial process.

If registry prep program tests or mock registries are taken and averaged in as part of the course grade, will account for 5% of 60%. (See additional EOP information pg 23-24)

If standardized finals given in addition to instructor generated final exams, each will carry equal weight.

End-of-Program Testing is a program requirement that must be successfully met during the fifth semester of study for the student to be allowed to graduate from the program. Students who fail to successfully meet these requirements will not be allowed to graduate.

*see clinical section for Clinical Grading Procedures

GENERAL CLASSROOM REGULATIONS

The student must meet the curriculum requirements in the Cleveland Community College Academic Bulletin and Student Handbook at the time that the student is admitted. These are the requirements which the student must complete successfully for graduation. If a student leaves the program and is allowed to re-enter later, he or she must meet the current entrance requirements and curriculum requirements for graduation as stated in the current Cleveland Community College Academic Bulletin and Student Handbook. Program students must also meet current program requirements as listed in the Cleveland Community College Radiography Student Handbook which includes any changes in policies after entry. Students will be notified
of any policy changes prior to those changes taking effect. Students will only be held responsible for changes after the date of student notification. Where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Cleveland Community College Radiography Program

Required Medical Examination

A medical examination is required of all students and must be completed prior to entering the program. If a physical problem arises at any time, a student is required to obtain a doctor’s statement clarifying the medical problem and its relationship, if any, to the student’s ability to successfully meet program requirements. Annual rechecks such as TB and drug screening are also required. Flu shots are required annually, unless a documented medical exception.

Drug Testing / Background Checks

All students accepted into an Allied Health Program (Radiography) must acquire a criminal background check and drug testing with the designated third party vendor. Accepted students will be notified by their department heads for e-mail contact with the designated vendor. Clinical facilities will determine all clinical participation. Students denied access to any clinical affiliate will lose their slot in the program as one of the programs requirements is that all students rotate through all sites. Some sites require annual drug testing.

Disciplinary Action

Disciplinary actions will be initiated if a student fails to follow College and/or program policies, guidelines, rules, regulations or meet College and/or program requirements. Actions taken may include an oral and/or written warning; suspension; or dismissal. In-addition, the
following proven, documented infractions of policy may result in immediate dismissal from the program.

1. Documented unprofessional, unethical, or negligent conduct while with a patient or within the clinical setting.

2. Failure to meet program requirements contained within this handbook (pertaining to specific, general, didactic, and/or clinical requirements).

3. Repeated infractions of didactic and/or clinical policies, rules, and guidelines.

4. Falsifications of student records, including invalid exam competency evaluations, exam practice forms, etc.

5. Dishonesty, misrepresentation, and/or disruption of the learning process in conjunction with behavior deemed unethical and unprofessional by College and/or Program and/or Clinical Officials.

6. Cheating on didactic assignments or tests, clinical evaluations, exam comp, exam practice forms, etc. (includes homework assignments)

7. Causing dissension between or among other program students, program faculty, clinical officials, and/or clinical staff in the didactic or clinical setting by unprofessional and/or unethical verbal or behavioral actions

8. Failure to follow proper protocol and procedure as outlined in the College and Program Handbooks (ie: grievance)

9. Insubordination (in the classroom and/or clinical setting, including repeated negative attitudes; actions and/or responses to or with program and/or clinical officials; refusal or inability to perform radiographic exams at expected
competency levels; refusal or inability to complete didactic and/or clinical assignments as requested and/or as required.)

10. Refusal to perform post competency examinations with appropriate levels of supervision

11. Breach of patient confidentiality

12. Behaviors, attitudes and actions considered to show a lack of integrity, are unprofessional and/or negative and/or unbecoming to a professional and/or detrimental to the profession itself.

13. Inability or refusal to adapt to program requirements and expectations in regard to appropriate professional conduct.

14. Failure to fulfill requirements of the re-entry or the re-admission contract as agreed upon

15. Misuse or mishandling of radiant energy

16. Expulsion from a clinical affiliate site/conference/workshop/seminar

17. Failure to obtain an average of 77 or better on RAD courses and/or End of Program Testing

18. Failure to obtain clinical competency or to retain clinical competency or to demonstrate clinical proficiency (5 comps pulled)

19. Failure to practice radiation protection for patients, self and others

20. Failure to apply standard precautions as needed

21. Consumption, and/or purchase, and/or distribution of alcohol or drugs at school approved events

22. Abuse of or chronic absenteeism or tardiness policies or procedures
23. Failure to make up required didactic or clinical hours

24. Inappropriate or unprofessional conduct while in attendance at school approved events

25. Failure to adhere to clinical site dress codes regarding, the visibility of piercings, tattoos and other forms of body art

26. Performing repeat examinations without direct supervision from a qualified radiographer

Periodic evaluation of student will be carried out by the program faculty and will be used to inform the student of his or her progress. Students will be asked to sign a counseling report, if needed, that becomes part of his or her record. Informal counseling may or may not be documented. Students may request counseling or inquire about their grades at any time.

All radiographic equipment and teaching facilities must be regarded and handled with care. Damage to any equipment or malfunction of any equipment must be reported to the proper authorities immediately.

All experimental work must first be approved by the responsible instructor. Laboratory experiences at the College must be conducted only when an instructor is present.

Any documented negligent misuse or mishandling of radiation energy, radioactive materials, or radiation producing devices that may endanger the student or other personnel will result in immediate dismissal of the student.

Smoking, eating, or drinking beverages is limited to specific areas. Smoking is prohibited throughout the College and its property. Eating and drinking are prohibited in all classrooms and labs.
Tape recorders and other electronic devices may be used to record lectures (with the permission of the instructor.) Cell phones must be turned off during class (if student has situation in which immediate access is needed, the student should discuss this with the instructor) cell phones are not allowed in the clinical setting.

**RESOLUTION OF GREIVANCES AND PROGRAM COMPLAINTS**

Students may make an appointment with the program director/discipline coordinator or a program instructor regarding any problems. In the event of a problem, related to program policies, procedures, and/or compliance issues not directly related to didactic and/or clinical standing, the student will use the following procedures:

1. Review the standards at [www.jrcert.org](http://www.jrcert.org)
2. Follow steps as outlined in the JRCERT Process for Reporting Allegations
3. Confer with appropriate program official (program director/discipline coordinator) within one (1) week of the occurrence or incident.
4. If not resolved, confer with the department head within one (1) week of conferring with program official.
5. If not resolved with the department head, the procedure outlined in the [Cleveland Community College Academic Bulletin and Student Handbook](http://www.clevelandcc.edu/academic-handbook). (“Due Process for Grievances”) should be followed.
6. Documentation of the alleged non-compliance, steps taken to resolve, resolution and, other pertinent information will be kept on file in the appropriate program official’s office.

In the event of problems regarding didactic or clinical standing student should:
1. Confer with the course instructor within one (1) week of the occurrence or incident, if no resolution,

2. Confer with the appropriate program official (program director/discipline coordinator), within one (1) week of conferring with instructor, if the instructor is the program direction/coordinator, then go to step 3.

3. If still not resolved, confer with the department head within one (1) week of conferring with the program director/discipline coordinator.

4. If not resolved with the department head, the procedure outlined in the Cleveland Community College Academic Bulletin and Student Handbook. (“Due Process for Grievances”) should be followed.

5. All documentation will be maintained in the appropriate college officials records.

Failure to follow proper protocol will result in disciplinary action.

Any student who comes to class or clinical under the influence of drugs or alcohol will be suspended from the class. Action on the permanent status of the student will be taken as deemed necessary by College Officials. The complete Drug-Free Policy is in the current Cleveland Community College Academic Bulletin and Student Handbook.

**ACADEMIC ADVISING AND COUNSELING SERVICES**

Students are assigned to academic advisors who assist with planning academic programs and developing semester course schedules. Counselors are available in Student Services to assist students with vocational and educational problems. Students in need of personal counseling are referred to appropriate agencies by Student Services. Career testing is coordinated by Student Services. Placement testing is coordinated by the Academic Support Center. Financial counseling may be obtained through the Financial Aid Office. Radiography faculty will counsel
program students regarding academic and/or clinical performance. All confidential student records are kept in appropriately secure areas.

**STUDENT RECORDS**

Student records will be kept in appropriately secured areas and/or data bases.

**SMOKING POLICY**

Smoking, is **not allowed on campus or at the clinical affiliate sites.** Cleveland Community College and all clinical affiliate sites are smoke free. For students who continue to smoke (off site), there will not be extra breaks allotted or extra lunch time for smoking.

Smoking odors are offensive to many individuals, every student who smokes, must perform the following, prior to returning to the department; **must first thoroughly wash his or her hands with soap, gargle with a mouth wash, or brush their teeth.** Breath mints may be used. **Gum is not allowed in the clinical area. Students with excessive “smoky smell” will be required to address the issue.**

All smokers must abide by the College and clinical site smoking policies and procedures.

The **first violation** of this policy will result in an **oral and/or written reprimand.** The **second violation** will result in a **two (2) week suspension.**

If there is a **third violation,** the student will be **dismissed** from the program.

**CLINICAL AFFILIATIONS**

Students are required and will spend time at each designated JRCERT approved affiliate to gain the varied clinical experience required for accreditation. Students will always be under the direct or indirect supervision of a qualified, registered radiographer while at each clinical site.

In conjunction with and/or in addition to or in the absence of program faculty, one qualified, JRCERT approved, Clinical Affiliate Staff member is designated as Site Clinical
Instructor/Student Supervisor/Student Liaison who ensures that students are involved in viable learning experiences and are being properly supervised by qualified clinical staff radiographers who provide appropriate levels of instruction and supervision to students.

In the event that appropriate levels of supervision are not available during the performance of patient examinations, the student(s) must initiate one of two procedures:

Option One

1. Notify Program Clinical Faculty immediately (each faculty member has designated sites)
2. Program Clinical Faculty will then notify the appropriate site designated Clinical Official.
3. Site designated Clinical Official will address supervision issue.
4. Program Clinical Faculty will notify Program Clinical Coordinator and Program Director
5. Clinical Coordinator and/or Program Director will follow up with site designated official.
6. Documentation will be maintained regarding complaint and resolution in Program Clinical Coordinator’s office.

Option Two

1. Notify the site designated Student Liaison, Supervisor, Clinical Instructor directly.
2. Site designated Student Liaison, Supervisor, Clinical Instructor will address supervision issue as needed.
3. Notify Program Clinical Coordinator of incident.
4. Program Clinical Coordinator will notify Program Director
5. Clinical Coordinator and/or Program Director will follow up with site designated Official.

6. Documentation will be maintained regarding complaint and resolution in Program Clinical Coordinator’s office.

Students must perform patient examinations and procedures with appropriate levels of supervision. Failure to do so will result in student being subject to disciplinary measures.

Each student must obtain experience in each designated clinical affiliate. Evening shift clinical education will occur during these rotations. Examples of course schedules and hours on program web page at http://www.clevelandcc.edu. Click on programs of study then radiography.

Students will be graded in the clinical area by the College faculty and/or Clinical Affiliate Staff. Input and/or evaluation of clinical performance by qualified clinical staff radiographers is obtained and used to aid the students in enhancing and/or improving and/or maintaining overall clinical performance and clinical skills.

Each student should make a concerted effort to assist with and/or perform any and all radiographic examinations and procedures, as assigned, according to the student’s level of clinical competence. Students must perform under the direct supervision of a qualified radiographer prior to competency achievement in an examination or procedure and under indirect supervision post competency achievement—exceptions being portable, surgical, trauma, pediatrics and combative patients. Failure to perform patient examinations and procedures with appropriate levels of supervision will result in student being subject to disciplinary measures.

Student performance will be monitored and evaluated by program faculty and qualified clinical affiliate staff. If after evaluation a student’s behavior or performance is deemed unethical, unprofessional or poor, that student will be subject to disciplinary action. If
during the performance of required exams and/or clinical performance, a student is deemed below average or poor as a result of failure to obtain or increase clinical experience pre-competency or to increase clinical expertise post competency due to inability to obtain and/or maintain clinical competencies in required examinations and/or procedures due to lack of skills and/or knowledge and/or an apparent inability to retain information and/or as the result of unwillingness to perform examinations and/or procedures as requested, inappropriate attitudes and/or poor patient care skills, the student will be subject to the following disciplinary action: (1) student will be given a **written and oral warning, advisement** and/or **re-mediation** (if appropriate) in the area of deficiency. If the student’s performance is still below average or poor after the re-mediation period, he or she will be placed on probation and allowed a limited amount of time to demonstrate designated improved performance. If a student remains unable to perform at an acceptable level after the probation period, the student will be dismissed from the program. Should a student have five competencies pulled that student is subject to disciplinary action in the form of dismissal. **Insubordinate refusal** to perform a requested exam will result in immediate dismissal.

Cleveland Community College has a written agreement with clinical facilities in which students rotate as assigned. As part of this agreement, the clinical facility may recommend that a student be expelled from the site or other disciplinary action be initiated for failure to follow site policies and/or regulations; unprofessional and/or unethical behavior; refusal to perform requested duties; inability to perform routine patient exams or procedures as expected; failure to perform according to individual site protocol; failure to perform patient exams with appropriate levels of supervision; unsafe or negligent acts in regard to patient care; or the use or misuse of radiographic equipment and/or radiant energy. If a student is expelled from any clinical affiliate,
he or she will automatically be dismissed from the program since one requirement of the program is to achieve clinical objectives in all designated approved facilities. Both the academic and clinical status of students will be discussed with appropriate clinical education center officials as part of the affiliation agreement on an as-needed basis. Clinical affiliate officials are aware of the confidential nature of any information discussed.

Students must comply with the rules and regulations of each affiliate, and must know and follow the individual protocols of each facility. Failure to do so will result in disciplinary action.

All types of cellular telephones and electronic paging devices are prohibited in all clinical areas and classrooms.

**CLINICAL ATTENDANCE**

*Students are required to meet the hourly contact requirement set by the State of North Carolina for didactic and clinical courses.* Students must be signed in prior to the start of the clinical rotation and signed out after the completion of the rotation by the designated site official or their designee. Students must be in place, in their assigned area, prepared and ready to begin the rotation at the assigned time. All clinical days missed (absences) must be made up by the student and will be scheduled by the Clinical Coordinator. All tardies must be made up on the date that they occur (2 tardies=equal 1 absence). All make up time for tardies must be documented. All make-up time for absences must be scheduled through the Clinical Coordinator. Only when make-up dates are scheduled through program faculty will credit be given.

Radiography students not reporting to clinical duty without prior, appropriate notification to the program director, and/or clinical coordinator, and clinical supervisor will be subject to disciplinary action. If a student is ill or if he or she has an emergency and is unable to report for
clinical education as assigned, the student or designee must take the following actions as soon as possible:

1. Contact the clinical site chief radiographer, site designated clinical instructor, student liaison, or the supervising radiographer in the department.

2. Contact program faculty by calling 704-669-4091 or 704-669-4121. This number is always active with voice mail capabilities.

3. Notification should occur prior to the start of the scheduled shift or within thirty (30) minutes after the start of the scheduled shift in extreme situations. If student is unable to notify as required, student should have a designee perform this function.

Students who at any point exceed the 20 percent absenteeism policy set by the College will be dismissed from the program. Students who fail to meet contact requirement for each course set by the State of North Carolina will not receive credit for the course until the contact requirement is met. Chronic absenteeism and tardiness will not be tolerated, as this is not an indication of the professional ethics that the program seeks to instill in each student. See attendance policy at the beginning of this Handbook for a full explanation.

PROFESSIONAL LIABILITY

Students shall maintain coverage used to insure against claims arising from negligent acts, errors, or omissions in the rendering or failing to render specified professional services or advice.

BEREAVEMENT POLICY
Students are granted three (3) days leave for the death and funeral of the following family members: father; father-in-law; mother; mother-in-law; husband; wife; son; daughter; brother; sister; grandparent. Program officials may extend this policy on an individual basis.

**FALSIFICATION OF CLINICAL RECORDS/DOCUMENTATION AND REPORTS**

Deliberate falsification of case reports, clinical records/documentation, clinical competencies and/or any clinical grade including documentation of exam practices constitutes cheating in this program. Such unethical and unprofessional conduct may result in immediate dismissal. Program faculty will take appropriate disciplinary measures as needed. The student will be warned only once about cheating (this text constitutes a warning); a second occurrence will result in dismissal.

**CLINICAL COMPETENCY EXAMINATION/PROCEDURE EVALUATION FORMS**

The clinical competency examination evaluation form consists of several sections:

1. Evaluation of facilities readiness
2. Evaluation of student’s patient care skills
3. Evaluation of technical skills
4. Evaluation of positioning skills
5. Evaluation of radiograph and critical thinking skills
6. Evaluation of knowledge of radiographic anatomy, physiology and pathology

For an evaluation to be valid, the competency must be performed under the direct supervision of a qualified radiographer. The student should make the supervising radiographer aware of his or her wish to attempt a competency prior to the start of the examination. In cases where another qualified radiographer must take over an exam, the student must immediately
notify that radiographer that he or she is attempting a competency. The student should present the supervising radiographer with (1) documentation of completed practices (minimum five) and (2) the comp sheet itself. The student must present the practice and competency forms prior to obtaining the patient or in the event that another radiographer takes over during the performance of an examination for competency evaluation the student must notify that radiographer immediately that the exam is for competency evaluation. A qualified staff or faculty member must provide direct supervision from the beginning of the exam until the patient is released and the finished product has been evaluated by the radiographer and the student and the exam is routed to its proper destination. All competency evaluations must be filled out by the radiographer who provided the direct supervision at the time the exam was performed. If a student knowingly turns in a competency filled out by someone other than the supervising radiographer, he or she will be considered in violation of policy (falsification of records) and disciplinary action will be taken.

Any student found performing pre-comp examinations without direct supervision will be subject to disciplinary action. Any student found performing post competency examinations without appropriate direct or indirect supervision will be subject to disciplinary action.

It is the student’s responsibility to ensure that only valid evaluations are submitted.

Students must achieve competency at ninety (90) percent or higher. The ARRT requires 39 mandatory examinations and procedures and 23 elective examinations. Thirty (30) out of thirty-nine (39) mandatory examinations and procedures must be “comped” on patients and a minimum of 10 of the 23 elective examinations and procedures must be performed as patient comps or on phantoms or as simulations. The program requires that students achieve competency in a total of seventy-plus (70+) examinations and procedures. Seventy (70) percent
of those competencies must be performed on patients; thirty (30) percent may be performed as simulation or phantom competencies. By the end of the first semester of study two competencies and two (2) practices are required on all examinations/procedures covered in RAD Procedures I. Equipment competencies are also required for every assigned clinical affiliate that each student rotates through, equipment comps must be obtained at the start of each new rotation throughout tenure, exception being the fifth semester. In semesters two and four a total of 20-21 examination and/or procedure competencies are required at or near the end of each semester. In semesters three and five, 16-17 comps are required. Semester 5 comps are due by April 1 (extension to a maximum of one month prior to graduation may be given in the event of extenuating circumstances beyond the students control), to allow students ample opportunities to complete terminal competencies prior to graduation. In semesters 1-4, 25% of required comps are due by week 8, 50% by week 12 and 100% of comps due by week 16. If a student fails to meet competency requirements, the Clinical Coordinator or Program Director has the option of (1) placing the student on probation and giving the student an extension period to meet the requirement, (the extension period will be determined by the Clinical Coordinator and Program Director) or (2) dismissing the student from the program for failure to meet program requirements. Should a student be given an extension, failure to meet requirements prior to the stated deadline will result in dismissal from the program. After achieving competency, students must maintain competency and demonstrate continued proficiency and increased expertise by continued, satisfactory performance of the examinations or procedures as needed or requested. Rarity of examination or procedure is taken into consideration. If a student is unable to demonstrate continued proficiency, from lack of knowledge, inadequate skills and/or expertise in the performance of examinations and procedures post competency, the prior competency will be
pulled; prior to re-attempting competency in the pulled examination or procedure the student must first obtain an additional ten practices, the student will also be given an oral and written warning and re-mediated as needed for the first occurrence, second or third occurrence. For the fourth occurrence, the student will be suspended for two (2) weeks and intense, one-on-one instruction will be provided at the convenience of program faculty. The student upon returning will be required to obtain ten (10) more practices prior to re-attempting competency. All missed time must be made up prior to the start of the next semester.

If there is a fifth occurrence, the student will be dismissed from the program. This applies to the same examination or procedure being pulled five (5) times or five (5) different exam/procedures being pulled at various intervals.

Students are expected to perform at first, especially during their first semester or at the beginning of a rotation at a new facility, but students are expected to demonstrate increasing competency and expertise as they progress in the program and/or during the affiliate rotation. Students who are unable to demonstrate satisfactory progress will be subject to disciplinary procedures as outlined previously.

**GENERAL PATIENT CARE COMPETENCIES**

In addition to the radiological examination/procedure competencies, students must successfully demonstrate competency in the following general patient care areas as mandated by the ARRT. CPR—after acceptance, students are required to provide proof of CPR certification prior to entry into the program. Students must maintain CPR certification during their tenure in the program. Proof of certification or re-certification must be provided as needed or requested. It is the responsibility of the student to maintain current CPR certification.
Vital Signs (blood pressure, pulse, respiration, temperature)-students must demonstrate ability to correctly obtain required vital signs as requested or needed. Instruction, demonstration and practice will occur during the first semester of the first year in the Patient Care Course. Students must successfully obtain vital signs on five human subjects in order to be deemed competent.

Venipuncture-performing venipuncture to administer contrast media, radiopharmaceuticals and/or IV medications is within the scope of practice standards for radiologic technologists with appropriate clinical and didactic education where state statues and/or institutional policy permit. Students must perform venipuncture according to the protocol of each individual entity involved in the educational process.

Didactic instruction and practice will occur during the first semester of the second year. Infections disease training and instruction, standard precaution instruction, demonstration and practice, equipment and supply review will occur during the first semester of the first year and reviewed prior to the start of the practice phase during the first semester of the second year. Students must obtain 5 successful sticks on human subjects. Human subjects must be 18 years of age or older in good health and not pregnant. Venipuncture instruction and training will be performed by a qualified professional. Venipuncture practice will be performed under the direct supervision of a qualified professional. Standard precautions must be employed during the performance of venipuncture under the direct supervision of qualified professionals. (See additional information on venipuncture contained on pages 75-76 of this publication)

O₂ Administration-students must successfully demonstrate the ability to administer O₂ as instructed, directed, requested or needed. Instruction, demonstration and practice will occur during the first semester of the first year in the Patient Care Course. After instruction and practice student must demonstrate ability to set up and administer O₂.
END-OF-SEMESTER GRADES

Ninety (90) percent proficiency must be achieved on competency evaluations prior to the grade being averaged in as twenty-five (25) percent of the clinical grade in semesters one through four and fifty (50) percent of the twenty-five (25) percent of the clinical grade in semester five (5). In semester five (5) competency evaluation grades are averaged with clinical performance evaluations and terminal student outcomes/objectives. Failure to achieve ninety (90) percent will result in disciplinary action. Should a student complete all examination and terminal competency requirements prior to graduation, the student may request additional rotations through specialty areas such as Computed Tomography, Magnetic Resonance Imaging, Interventional, Mammography, Radiation Therapy, Medical Sonography and Nuclear Medicine, etc., The last two (2) weeks prior to graduation must be spent in diagnostic areas, the Program faculty must be notified and students must be scheduled in specialty areas as time and clinical affiliate policies allow. All program policies are still in effect during special modality rotations.

Terminal Student Learning Outcomes/Objectives/Competency

Each student’s Terminal Student Learning Outcomes/Objectives/Competencies must be demonstrated with ninety (90) percent or higher accuracy prior to being averaged in as a grade during the fifth semester or being allowed to graduate. Terminal Student Learning Outcomes/Objectives/Competencies are to be completed by the student during the latter third of the fifth semester and must be completed and turned in at least one (1) week prior to graduation.

Clinical Practices

The purpose of clinical practices is to prepare students to demonstrate competency on required examinations and procedures. Students must complete a minimum of five (5) practices each for program required examinations and procedures. Clinical practices may be completed
(a) by working with a patient or (b) by simulation, both of which must be performed under the direct supervision of a qualified radiographer.

During the performance of patient practice examinations, if a repeat is necessary, in the judgment of a qualified radiographer, the student will still receive credit for a practice. Simulations are performed only when patient examinations are not possible. The highest grade for any simulation is ninety (90) percent. It is the student’s responsibility to (1) obtain the clinical practice form; and (2) present the form to the evaluator in the prescribed manner. On some examinations, student will meet competency through procedural write-ups, the highest grade that may be achieved on procedural write-ups in ninety (90) percent.

For every practice evaluation, the student is responsible for notifying the supervising radiographer before the patient examination or the procedure is to occur to ensure that a qualified radiographer is available. Students must obtain practices at the time of the performance of the exam by the supervising radiographer. Practices obtained after the fact or by a radiographer other than the radiographer that observed the student performing the exam are considered a falsification of clinical records. All five practices must be completed prior to attempting exam competency evaluation and must be presented to the supervising radiographer prior to attempting the competency evaluation.

**CLINICAL PERFORMANCE EVALUATIONS**

Clinical performance evaluations are used to evaluate the student’s cognitive, psychomotor, and affective knowledge and skills. A major component of the evaluation is the student’s proficiency in solving problems which require the application of didactic (classroom) course content and its application to hypothetical and actual clinical situations.
Performance evaluations are conducted on a daily or weekly basis according to specified performance objectives. The student is responsible for providing the supervising radiographer with the appropriate, area specific evaluation and other required documents before the beginning of each clinical assignment. If a student needs assistance, it is his or her responsibility to ask for help from the appropriate supervising radiographer. Students must understand that constructive criticism, including recommendations and suggestions for improvement, are an important part of clinical evaluations.

Students will be evaluated according to their level of competence. For example, the expected level of competence for first semester students is different from the expected level of competence of students during the fifth semester. Program faculty and the appropriate clinical affiliate supervisors will counsel students, as appropriate, to maximize student learning.

Students must follow these procedures to ensure that clinical performance evaluations are acceptable:

1. Provide the assigned clinical supervisor with the appropriate evaluation form, comment sheet and time sheet at the beginning of each clinical day.

2. Request the appropriate clinical supervisor to fill out the evaluation form and comment sheet at the end of the clinical day. Students may not fill out the form, even if the forms are signed by the clinical supervisor. Also, students are advised that if they fill out an evaluation form, they have falsified records and will be subject to disciplinary action.

3. Submit the clinical performance evaluation packet at the designated time each week. The weekly clinical performance evaluation packet contains a clinical evaluation form and comment sheet, preceptor evaluation form completed and/or
initialed by the appropriate clinical supervisor, and a self-analysis sheet completed by the student.

Students must understand that critiques, suggestions, and recommendations for improvement are intended to help them to become proficient in their program of study. Program faculty will meet with appropriate clinical affiliate staff as needed to evaluate student performance. Failure to present a completed packet with signatures and other required materials in the prescribed manner will result in a grade of “0” for the weekly performance grade.

The averaged grade for clinical performance evaluations must be at the ninety (90) percent proficiency level. Performance less than ninety (90) percent will be recorded as a zero (0) and averaged in with the other clinical grades. Failure to turn in a complete packet will affect the Weekly Performance grade. At the end of the course, the average of all clinical performance grades will be counted as twenty-five (25) percent of the total clinical grade for students in the first, second, third, and fourth semesters. For students in the fifth semester, the average clinical performance grade will be counted as fifty (50) percent of the total clinical grade in conjunction with the competency evaluation grade and the student terminal learning competency grade.

Each item on the clinical performance evaluation is evaluated using the following legend, Yes, the student performed at the expected level, No, the student was unable to perform the exam, and needs improvement- the student performed the exam but not at expected level. The total score on the evaluation is determined by averaging the scores on each of the items on the evaluation.

The overall clinical performance grade for a semester must be at the ninety (90) percent proficiency level or higher.

**VOLUNTEERING FOR ADDITIONAL CLINICAL EXPERIENCE**
Students may choose to participate in additional clinical experience, on their own time, in an effort to improve or enhance skills and knowledge in radiologic patient examinations and procedures. However, if a student fails to report for the elected clinical experience, the student may lose or forfeit the privilege to participate in additional clinical experience.

**RECOMMENDED ADDITIONAL CLINICAL EXPERIENCE**

Program faculty may recommend additional clinical experience for students who can profit from that experience. Should a student choose to follow this recommendation, the student must prepare a proposal for improvement based on areas of deficiency and obtain approval by the program director and program faculty as appropriate. If the additional experience is approved, the student must sign the proposal. The program director and appropriate faculty must also sign and date the document. Program faculty will make arrangements for the additional experience at a clinical site to be selected by faculty and appropriate clinical personnel. However, if a student agrees to accept the opportunity but fails to report for the scheduled clinical re-mediation, further opportunities for remedial clinical experiences may not be offered for that student.

The student has the right to refuse recommended additional clinical experience.

**CLINICAL GRADING PROCEDURES**

Semester 1 through 4

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<tr>
<th>Instructional Components</th>
<th>Percent of Total Grade</th>
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<tbody>
<tr>
<td>Monthly Image Critique (consists of grades on four (4) exams randomly selected each month), with ninety (90) percent accuracy</td>
<td>20 %</td>
</tr>
<tr>
<td>Monthly Image Repeat/Reject Analysis (should be less than ten (10) percent)</td>
<td>15 %</td>
</tr>
<tr>
<td>*Clinical Performance Evaluations, ninety (90)</td>
<td>**25 %</td>
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percent proficiency must be achieved (Performance evaluation turned in as part of weekly clinical packet: evaluation, tech comment, self analysis. Failure to turn in clinical packet as prescribed will result in a permanent “0” being recorded and averaged in as part of grade.)

*Clinical Competency Evaluations, ninety (90) percent proficiency must be achieved

**25%

Documentation/Records
The following records are graded monthly:

- Daily Patient Log Sheets
- Daily Repeat/Reject Log
- Monthly Patient Exam Count (the number of patient examinations and procedures)
- Reference Notebooks: examination and “technique” (has positioning material for patient examinations and procedures)**

(All items listed under “Records” must be complete whenever graded, or a zero (0) will be averaged as part of the “Records” grade. These items are graded monthly.)

*Averaged in as fifty (50) percent of clinical grade semester 5.

***Must be up to date, if not, student will given one (1) to update, failure to meet deadline will result in suspension from clinical education until updated, all missed time must be made up.

**Failure to achieve the ninety (90) percent proficiency program requirement will result in disciplinary action. Ninety (90) percent proficiency must be achieved prior to grade being averaged in as part of the end of semester clinical education grade or a zero “0” is recorded.

***Must be up to date, if not, student will given one (1) to update, failure to meet deadline will result in suspension from clinical education until updated, all missed time must be made up.

**CLINICAL GRADING PROCEDURES**

**Semester 5**

<table>
<thead>
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<td>15%</td>
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</tbody>
</table>
Clinical Performance Evaluation; Clinical Competencies; and Terminal Student Learning with ninety (90) percent competencies are averaged together for 50 percent of the component. The Clinical Performance Evaluation is turned in as part of weekly clinical packet which must have Clinical Performance Evaluations; Comment Sheets; Self-Analysis. Students who do not turn in all completed parts of the clinical packet will receive a permanent “0” and averaged as part of this evaluation component.

**50%**

33.3% - 28.3% Faculty Performance Evals
5% Clinical Staff Performance Evals
33.3% - Clinical Competencies
33.3% Terminal Student Learning

**Records**

The following records are graded monthly:

- Daily Patient Log Sheets
- Daily Repeat/Reject Log
- Monthly Patient Exam Count (the number of patient examinations and procedures)
- Reference Notebooks: examination and “technique” (has positioning material for patient examinations and procedures)

(All items listed here under “Records” must be complete whenever graded, or a zero (“0”) will be averaged as part of the “Records” grade.)

**15%**

**Failure to achieve the ninety (90) percent proficiency program requirement will result in disciplinary action. Ninety (90) percent proficiency must be achieved prior to grade being averaged in as part of the end of semester clinical education grade or a zero “0” is recorded.***

**Must be up to date, if not, student will given one (1) to update, failure to meet deadline will result in suspension from clinical education until updated, all missed time must be made up.**

**DOCUMENTATION/RECORDS MAINTAINED BY STUDENTS**

Students must maintain accurate records of their clinical exposure throughout the Radiologic Technology program and must assume total responsibility for the content of the documentation/records, always making sure that records are current, accurate and in keeping with the prescribed format for that documentation/record. Any incomplete documentation, errors, and failure to maintain current documentation/records will result in a grade of zero (0) being recorded for the monthly grade on program required documentation/records.
**Daily Patient Log**

Students must maintain a Daily Patient Log on all patient examinations and/or procedures (aided and unaided). The patient’s name, patient number, patient measurements, and technical factors must be accompanied by the date and the time of the patient examination. It is the student’s responsibility to ensure (1) that all aspects of the documentation are correct; (b) that the records are presented to the supervising radiographer; and (c) that the documents are initialed by the supervising, qualified radiographer. Incomplete or inaccurate documentation will result in a grade of zero (“0”) for the monthly grade.

**Daily Repeat/Reject Log**

The Repeat/Reject Log, which is part of the Daily Patient Log, must be initialed for each entry by the supervising radiographer. Every repeat must be performed under the direct supervision of a qualified radiographer. All repeats must be conducted according to the College’s Radiographic Technology “Repeat Policy.” Repeat/Reject Log items and the Monthly Repeat/Reject Analysis must match. If they do not match, a grade of zero (“0”) will be recorded for both the Repeat/Reject Log and the Monthly Repeat/Reject Analysis. Repeat/Reject Logs are graded monthly by program faculty.

**Weekly Clinical Packets**

Weekly Clinical Packets must be submitted at the beginning of class on the first day of didactic class the following week after each clinical assignment. Each weekly Clinical Packet must include the following:

- **Performance Evaluations** which must be filled out by the supervising radiographer on either a daily or weekly basis and must have the supervisor’s initial/signature
- **Comment Sheets** which must be filled out or initialed by the supervising radiographer.

- **Preceptorship Forms** which must be filled out as prescribed

Individual grades on Weekly Clinical Packets will be averaged as part of the overall Clinical Performance Evaluation. An average grade of ninety (90) percent must be earned on the Clinical Performance Evaluation which is 25 percent of the total semester grade for semesters one (1) through four (4) and fifty (50) percent of the total semester grade for semester five (5) in conjunction with competency evaluation and terminal learning outcomes/objectives/competency.

(Students must understand that Weekly Clinical Packet items – whether filled out daily or weekly – will result in a permanent grade of zero (“0”) for the week if not submitted as prescribed.)

**Clinical Instructional Components**

The monthly Clinical Instruction Components must be completed and/or submitted on the specified date, due at the beginning of class on the first day of didactic class following the specified end of the month. (A “month” may be defined from the twelfth of one month to the twelfth of the next month, or the first day of the month through the last of day of that month (or the last day of the month as specified.) If assignments are not turned in on the specified date, a zero (“0”) will be recorded for that month.

The Monthly Patient Examination Count is determined each month, and the total Patient Examination Count is totaled at the end of the semester.

The Reject Analysis/Repeat rate, evaluated for a grade each month, must be less than ten (10) percent. If the rate is more than ten (10) percent, students will receive remedial instruction by program faculty. All record of all repeats due to student error must be kept. Students must
meet with program faculty or qualified designee to evaluate repeats. These meetings are designed to improve the student’s problem solving skills and to reinforce the affective, psychomotor, and cognitive learning domains.

The Patient Daily Log and Repeat Analysis must match or a “0” will be recorded for both grades for the month.

**Image/Film Critique**

Students must meet each month with program faculty to critique student images/films. These sessions are designed to enhance critical thinking and problem solving skills. Monthly image/film critique grades must average to ninety (90) percent proficiency or above to be counted as twenty (20) percent of the total semester grade. If the overall, monthly image/film critique grade is less than ninety (90) percent proficiency, the student will not be allowed to continue to the next semester or graduate.

**CLINICAL REPORTS/RECORDS/DOCUMENTATION**

To receive credit for all month-end documentation, records and/or reports, which include daily sheets, repeat/reject analysis, and all other designated reports/records/documentation, students must submit their work on specified dates identified by the clinical faculty. The student is responsible for submitting required clinical reports/documentation/records routinely. If faculty, does not ask for the required reports/documentation/records, or does not remind students to submit the required reports/documentation/records, it is the student’s responsibility to submit the required reports/documentation/records or the assignment on the specified date. Typically,
students have time at the end of each clinical day to complete required clinical documentation and/or records.

**Daily Patient Log Sheets**

Daily Patient Log Sheets must be completely and accurately filled out by student at the end of each clinical day. The day, month, and date must be entered on the sheet by the student. In addition to patient and technical information, a new sheet must be completed for each clinical day. It is the student’s responsibility to ensure that the supervising radiographer initials all patient examination/procedures sheet. All repeats must be recorded by the student and each repeat must be initialed by the supervising radiographer. If the repeat is not valid because of equipment failure, processor error, or radiographer error, the student does not have to count the repeat, but the student must submit it for review. All patient examinations and procedures are to be recorded as prescribed and must include all patient information like “patient measurement”; “technical factors”; “instructed”; “observed”; “assisted”; “performed aided”; “performed unaided.” The patient’s case number must be recorded. Every examination/procedure during the clinical rotation must be recorded by the student and initialed by the supervising radiographer.

If the student is in a specialty area (for example, ultrasound), a Daily Patient Log Sheet must be filled out by the student and must include (1) the specialty area; (2) the total number of patient procedures; (3) the total number of hours spent in special modality; and (4) the type of examination. The Daily Patient Log sheets are due on the first day of didactic class after the end of the week. If the sheets are not turned in or submitted, a grade of zero (“0”) will be recorded. Occasionally, time management studies are performed and students must document the time each patient examination/procedure was performed. It is the student’s responsibility to obtain the supervising radiographers signature on each examination/procedure on daily sheets. The time of
the procedure must be recorded to the left of the patient’s name. Students will be notified when
time studies are being formed. A hard copy of the original sheets must be maintained and should
be turned in as specified.

**Monthly Sheets**

Students must complete all monthly sheets accurately, and all sheets must be turned in or
submitted by the morning of the first didactic class following the specified end of each month. If
the month-end sheets are not submitted, a permanent zero (“0”) will be recorded. The total
number of repeats must be recorded under the percent of repeats on the “Monthly Total” form.
(Any repeats that were not the student’s errors must not be listed but must be included in the
student’s repeat folder.) Repeat folders are reviewed by the program faculty with the student
once a month.

**Pediatric Patient Examination**

Separate records must be kept for all pediatric examinations, defined as examinations
performed on patients sixteen (16) years of age and under. Pediatric examinations are performed
only under the direct supervision of a qualified radiographer, both “pre” and “post” competency.

**CLINICAL NOTEBOOKS**

Clinical, examination and technique notebooks must be taken by the student from facility
to facility. If a student reports to an assigned clinical rotation without appropriate notebooks, the
student will be dismissed to obtain notebooks and will be required to make up time missed at the
end of the shift or at the beginning of the next shift, if on nights.

The first offense will result in oral/written warning; a second offense will result in a two-
week suspension (with time to be made up); and a third offense will result in dismissal from the
program. Students may or may not be allowed to bring other study materials to the clinic depending upon the policy of the clinical affiliate.

Students must have eight (8) clinical notebooks. One (1) large notebook must contain all clinical forms. One (1) small notebook must contain all required examination views and procedures and eight (8) small notebooks must contain site protocol, technical and exposure factors for each clinical site. These notebooks are referred to as “technique books.”

**CLINICAL DRESS CODE**

Additional requirements apply for clinical rotations, all students must wear the designated program uniform (or department uniform for specific rotations such as the operating room) in all clinical areas. The complete uniform consists of the following:

1. Clean, pressed uniform (with ceil blue cover or shirt) for each day or shift of clinical assignment.

2. Clean, pressed lab coats, top and pants (or dress, if so desired by female students) for each day or shift. Students who appear unkempt, in wrinkled clothing, or soiled clothing will be dismissed from the clinical site to make attire/appearance changes prior to returning. (Only one infraction is allowed, with time to be made up.)

3. Embroidered College insignia or College patches must be securely attached to all uniform tops, shirts and lab coats.

4. Solid white, clean, nursing shoes with white socks for males and white hose or white socks for females will be worn for all clinical assignments. Attire must be in good repair. Shoes must be clean and polished when reporting to each shift assignment. If working conditions or other related incidents soil the shoes, shoes
must be cleaned and polished as soon as possible during the clinical period.

Students with soiled shoes may be dismissed from clinical to rectify this problem.

The student must make up time at the end of the day of the next day prior to the
start of the shift if on nights. Clogs are not recommended. Athletic shoes must be
all white, with no color on them.

5. Sweaters or coats (except white laboratory coats) cannot be worn in clinical areas.

6. Students must always wear their student uniforms for clinical education. If a
student is assigned to portables and surgery, he or she must change to “scrubs” at
the beginning of the student’s rotation. After completion of the clinical
assignment or end of shift, the student must change back to the student uniform
before leaving the clinic. Students are not allowed to wear street clothes to the
clinical site. Students on special assignments or rotations should always wear
school uniforms.

7. If a student is assigned to specials, he/she should remain in his/her student
uniform if there are no specials scheduled. After the last special has been
completed, the student must change back into his/her student uniform.

8. Student name badges and other required badges must be worn and visible on all
uniforms and scrubs.

9. Students are required to adhere to the dress code of each facility, failure to do so
will result in disciplinary action.

**PERSONAL APPEARANCE**

All students must be professionally committed to maintaining strict, personal hygiene
and appearance in accordance with the clinical dress code and personal hygiene standards
established by the program and its clinical affiliates. If a student’s appearance warrants
dismissal from a clinical site, only one occurrence of this infraction will be allowed. A second
occurrence will result in immediate suspension and/or dismissal. Program faculty will determine
appropriateness of student appearance.

1. Students are required to adhere to the dress code of each facility, failure to do so
will result in disciplinary action, in addition the following requirements must be met.

2. Long hair (i.e., hair below one’s collar) must be pulled back away from the face.
Under no circumstances should hair be able to swing into or onto a patient. Long
hair must be braided or plated or in a bun. Brightly colored bows or hairpins are
not allowed. **Fad hair styles and fad hair coloring are not allowed and must be avoided.** Hair styles and coloring must be deemed professionally appropriate
by program faculty and/or college and/or clinical officials and/or staff. Program
faculty and/or other appropriate officials in conjunction with program faculty will
determine what appropriate personal appearance entails.

3. For females, excessive eye or facial make-up is unacceptable. Make-up should
appear natural. Males are not allowed to wear make-up.

4. For males, facial hair should be kept to a minimum and must be neat and trimmed
at all times. If clean-shaven, no stubble should be seen. (applies to females if
necessary)

5. Personal and oral hygiene must be the concern of each student. Individual
counseling will occur if necessary.
6. Students must refrain from wearing perfume or cologne, this includes hair, bath and body products with strong scents as these may be offensive to medicated patients.

7. Students must refrain from wearing excessive jewelry and should be limited to a wedding band and a wrist watch. (Appropriateness of jewelry will be determined by program faculty.) At no point should jewelry be allowed to infringe on optimal patient care.

8. False eyelashes cannot be worn in clinical areas.

9. Earrings are limited to the small stud or button type. Only one (1) set of earrings are allowed at one time. Hoop earrings are not allowed. **No other visible body piercings or tattoos are allowed.** Males are not allowed to wear an earring or earrings or other visible piercings or tattoos. Should a clinical site make a complaint regarding the visibility of piercings and/or tattoos and/or body art, disciplinary measures will be initiated. The first offence will result in an oral/written warning, second offense suspension and a third offence will result in immediate dismissal from the program.

10. If one must wear nail polish, only **clear** non-metallic polish is acceptable.

11. Name badges, student ID badges, and radiation monitoring devices must be worn at all times in clinical areas.

12. For patient and student safety, fingernails must be kept at an appropriate length. Fingernails must not extend beyond the tips of the fingers. Program faculty will determine appropriate length. Nails must be natural (no acrylics or gel nails).
GENERAL CLINICAL REGULATIONS

Personal telephone calls will not be forwarded to the students. Emergency calls / messages will be received by Student Services, program didactic or clinical faculty, site designated clinical instructors or supervising radiographers and the message, not the phone call will be forwarded to the student. For emergencies, student will be allowed to return calls. Calls concerning part-time employment will not be forwarded, messages will be taken and delivered. Instructors and/or appropriate site officials must be notified if a student is expecting an important, appropriate call. Family members must be informed of proper procedure for contacting the student.

The student is assigned to the clinical area for clinical experience. Reading material other than that pertaining to Radiography is not allowed. Clinical Affiliate/Faculty may elect to disallow any reading material. Depending upon individual sites, students may not be allowed to bring any reading material including didactic course materials.

A student is responsible for his or her patient until the patient examination is completed, processed and routed to the proper destination. During lengthy procedures, students must remain with the patient unless a special circumstance occurs and the student is given directions to the contrary by an appropriate qualified program or clinical education center official. Generally, other students are not allowed to come in and relieve their classmates, except as directed by appropriate program or clinical education center officials.

Smoking if allowed, and eating, and drinking are limited to specific areas. Chewing gum is not allowed in the clinical area.

The student must leave all equipment and his or her section of the department in a clean, orderly condition.
Every student is responsible for his or her assigned room or the area in which the student performs a radiographic procedure. Areas should be kept clean, neat and well stocked. Students should evaluate each area periodically and clean if necessary. Students should perform a quick evaluation of an area prior to obtaining a patient. Students must clean the area and all equipment after each patient, observing cleaning protocols. Students are assigned to an area in which (1) a qualified radiographer provides supervision or (2) to a qualified staff radiographer. Supervising staff should be notified of the student’s location at all times. The student must report to the staff radiographer at the start of each rotation.

In dual assignments, the area listed first on the student’s schedule (i.e., surgery and portables) has priority. When assigned to surgery, it is the student’s responsibility to consult with the assigned radiographer, regarding the surgical schedule and be ready for the patient examination, procedure or other activity as needed.

Any student documented as coming to the clinical site under the influence of drugs or alcohol will be dismissed from the site and further action will be taken as deemed appropriate. The student will abide by program and site policy concerning illegal drugs and alcohol.

Student class and clinical schedules cannot and will not be adjusted to meet the student’s work/activity schedule. If outside work/activities interferes with clinical performance and academic progress, the student will be notified in writing and informed as appropriate and expected to rectify the situation. Students need to be aware that adjustments may be made to the schedule to meet program needs.

**REPEAT/REJECT POLICY**

The repeat/reject policy for students is as follows:
1. Students who must perform a repeat examination must have a qualified radiographer in the diagnostic room with them during the repeat. The Joint Review Commission Standards require documentation to support compliance with this policy.

2. Every unacceptable radiographic image must have documented and the initials of the qualified radiographer who supervised the repeat documented on the student daily patient log. For hard copies, the radiograph itself (with CR and DR students may need to request that a hard copy be printed) is to be filed in the student’s repeat folder. To enhance critical thinking skills repeats will be reviewed with students by program faculty or a designee. It is the responsibility of the student to see that all repeats are properly supervised and documented. Students that perform repeats without appropriate supervision will be subject to disciplinary action.

3. All portable, pediatric, surgical, and trauma examinations or examination on combative patients performed by a student must be performed under direct supervision, pre and post competency. Student performing these exams without appropriate supervision will be subject to disciplinary action.

Failure to follow these policies will result in an oral/written warning for the first offense. The second offense will result in probation and suspension for two (2) weeks. The third offense will result in dismissal from the program. All missed time must be made up.

Student repeat folders are evaluated on a monthly basis with program faculty.
SUPERVISION IN CLINICAL AREAS

Student Policy

The Joint Review Committee on Education in Radiography Standards clearly states that all students must perform patient examinations in any given procedure, prior to competency, under the direct supervision of a qualified radiographer and post competency under the indirect supervision of a qualified radiographer. The JRCERT does not recognize non-registered individuals as qualified to supervise students during the performance of patient examinations/procedures.

Direct supervision includes the following:

1. A qualified radiographer reviews the request for examination in relation to the student’s achievement.

2. A qualified radiographer evaluates the condition of the patient in relation to the student’s knowledge.

3. **A qualified radiographer is present during the examination.**

4. A qualified radiographer reviews and approves the radiographs prior to the release of the patient.

This policy is important for the student’s educational experience and especially the enhancement of patient care.

Failure to follow this policy will result in an oral/written warning for the first offense. The second offense will result in suspension for two (2) weeks. The third offense will result in dismissal from the program.

After a student has achieved documented clinical competency on a patient examination, the student may perform that exam under the indirect supervision of a qualified radiographer.
Exceptions are pediatric, portable, surgical, and trauma radiography, all of which require the presence of a qualified radiographer.

Indirect supervision has the following parameters:

1. A qualified radiographer reviews the request in relation to the student’s competency level.
2. A qualified radiographer evaluates the patient’s condition in relation to the student’s competency level.
3. A qualified radiographer is immediately available if the student needs assistance (adjacent to the area in which ionizing radiation is being delivered.)
4. A qualified radiographer reviews and approves the radiographs prior to release of patient.

PEDIATRIC, PORTABLE, SURGICAL, AND TRAUMA POLICY

The pediatric, portable, surgical, trauma and combative patient policy, to be followed by staff and student technologists, is as follows:

1. No students are to do unsupervised pediatric, portable, surgical, and trauma patient examinations. A qualified radiographer must be present at all times pre and post competency.
2. No student is to examine combative or uncooperative patients (such as highly inebriated patients) without direct supervision of a qualified radiographer.
3. All student radiographic examinations must be checked by a qualified radiographer. First- and second-year students are not allowed to check and pass their examinations.
4. All students must inform a supervising staff radiographer of the patient flow coordinator before a patient examination is performed.

Failure to follow this policy will result in an oral and written warning for the first offense; suspension for two (2) weeks for the second offense; and dismissal from the program for the third offense.

**BASIC GUIDELINES FOR STRETCHER PATIENTS**

1. Stretchers must be positioned to avoid unexpected movements.

2. Someone must attend the patient while he/she is in position for decubitus film exposure.

3. A patient must never be left alone in the decubitus position, as for example, when students attend to film processing details.

4. Side rails must always be up whenever radiographic procedures are not being performed.

Students will be suspended from the program for two (2) weeks if the following statements are not closely adhered to or observed.

5. Students must hold on to all patients as they are getting on/off the x-ray table, in/out of a wheel chair, and on/off a stretcher.

6. Both wheels on a wheel chair must be locked when a patient is getting in/out of the chair.

7. All wheels on a stretcher must be locked and you must hold (stand by) the side of the stretcher that is not against a stationary object (wall, cabinet, x-ray table).

8. Patients must never be left unattended while on the x-ray table or in a diagnostic room unless a supervising radiographer takes total responsibility for the patient.
9. Safety restraints must be replaced.

10. Side rails on a stretcher must be locked in the upright position.

11. Except in surgery (where other protocols are in effect), portable cassettes must be placed in proper plastic covers to prevent cross-contamination.

FOR YOUR OWN PROTECTION, ALWAYS USE STANDARD PRECAUTIONS.

DUE PROCESS PROCEDURES FOR CLINICAL EVALUATION GRIEVANCES

1. Follow the procedure(s) as listed on pages 29-31 of this handbook.

INJURY POLICY

Students injured during clinical affiliation in a hospital must:

1. Report the injury to appropriate official

2. Seek medical attention as instructed per the affiliation agreement (ie: be sent to the emergency department at the hospital.)

3. If sent to Emergency Department, tell the emergency department clerk that he or she is a Cleveland Community College student on affiliation.

4. If necessary, contact program officials

All medical charges incurred will be the responsibility of the student.

RADIATION PROTECTION RULES

If a student is careless with radiation, he or she will be suspended from training for two (2) weeks to be made up prior to being allowed to graduate. Carelessness with radiation must be avoided. It is extremely hazardous and may be detrimental to one’s future health when used improperly. Specific rules are as follows:

1. Aprons must be worn for all portable work, fluoro examinations, and surgery cases.
2. Students are not allowed to hold patients during routine radiographic exams.

3. Doors to the diagnostic rooms, if applicable, must be closed during all exposures.

4. The student must stand behind the control area when an exposure is being made or when viewing the patient through the lead glass control window during routine radiographic examinations.

5. Personnel Monitoring Devices must be worn at all times at collar level when the student is in the department. Students must not leave devices in inappropriate places or at home. Devices must be worn to each clinical rotation.

6. Thyroid shields (if available) must be worn whenever an apron is worn.

All radiological equipment must be regarded and handled with care. Damage to any equipment or malfunction of any equipment must be reported to the proper authorities immediately so that measures can be taken to prevent similar incidents in the future.

Any documented, negligent misuse or mishandling of radiation energy, radioactive materials, or radiation producing devices that may endanger the radiation level of the students or other personnel will result in immediate dismissal of the offending student.

**HEPATITIS “B” VACCINE AND RELATED ISSUES**

Hepatitis B is a viral infection of the liver transmitted through infected blood or body fluids introduced by contaminated needles, sexual contact, close personal contact, or (rarely) blood transfusions since there is routine screening of blood by HbsAG.

Hepatitis B vaccine provides active immunity against Hepatitis B viral infection. (It does not protect against other illnesses such as AIDS.) The vaccine is given in a series of three injections with the second and third doses given one and six months after the first injection. The typical cost for the vaccine is @ $240.00 (may vary) per series of three injections. Health care
workers have varied risks of exposure to Hepatitis B virus depending on their job. High risk areas include surgery, intensive care units, emergency departments, and areas where intravenous fluids are administered.

It is suggested by the North Carolina Community College System that all Allied Health students have the Hepatitis B vaccine at the students’ cost.

Neither Cleveland Community College nor any clinical affiliate is legally responsible for medical costs for Hepatitis B or other infectious diseases contracted by students while in clinical practice.

Radiography students are taught “Standard Precautions” as recommended by the Centers of Disease Control (CDC) to minimize potential for contracting an infectious disease from an infected patient. The CDC recommends that “standard precautions” be used by health care workers when caring for all patients. Student should employ “standard precautions” with all patients.
Informed Consent for Administration of Hepatitis “B” Vaccine

I understand that due to my clinical practice, I will be exposed to blood and other infectious materials that would put me at risk for acquiring Hepatitis B virus infection, a serious disease.

I have received appropriate training. I have heard explanations and my questions have been answered to my satisfaction.

I understand that Hepatitis B vaccine will immunize me against Hepatitis B virus infection only. It will not prevent Hepatitis from other agents (Hepatitis A, C, D, Non A, Non B), nor will it prevent other infections such as AIDS.

I consent to the administration of the recommended three doses of Hepatitis B at 0, 1 and 6 months.

_____________________________________
Student Signature

_____________________________________
Student ID Number

_____________________________________
Date

__________Student provided proof of Hepatitis B vaccination prior to entering program

__________Dose 1          _________Dose 2          _________Dose3

__________(int.)          _________(int.)          _________(int.)

*Program official must initial.
CLEVELAND COMMUNITY COLLEGE

RADIOGRAPHY PROGRAM

Hepatitis “B” Vaccination Waiver Form

___________________________________ should not receive the Hepatitis B vaccine due to the fact that:

__________ Tests indicate that this person has protective antibody titers.

__________ Existing medical conditions prevent this person from receiving the vaccine.

___________________________________________

Physician’s Signature

___________________________________________

Student ID Number

___________________________________________

Student’s Signature

___________________________________________

Date
STANDARD PRECAUTIONS

With the increased awareness of contamination from blood-borne pathogens – for example, the Hepatitis B virus (HBV) and the human immunodeficiency (HIV) that causes acquired immunodeficiency syndrome (AIDS) – came the realization that definite precautions need to be taken to prevent infection. The Centers for Disease Control is conducting studies on health care workers with documented skin or mucous-membrane exposures to blood or body fluids of infected patients. The results have not been documented, but preliminary statistics show positive cases of infection when health care workers did not use protective measures.

It is difficult to identify patients infected with blood-borne pathogens. The CDC recommends that “standard precautions” be used by health care workers when caring for all patients. These recommendations include the following precautions:

1. Gloves must be worn during any procedure that could result in contact with blood or body fluid, open skin lesions, or mucous membranes. Goggles, masks, or face shields must be worn if there is risk of droplets spraying. Aprons or gowns must be worn to protect uniforms.

2. Handwashing procedures must be performed immediately after removal of gloves.

3. The health care workers must prevent injury from needles, scalpels, and other sharp instruments. Needles should never be recapped and all disposable, sharp instruments must be placed immediately in a puncture-resistant container for designed for that purpose.

4. Protective devices must be available for use during resuscitation as needed.

5. Health care workers with draining lesions must not have patient contact or contact with patient equipment.
POLICY AND PROCEDURES
BLOODBORNE PATHOGEN ANNUAL TRAINING AND EXPOSURE PROCEDURES

To comply with OSHA standards, all students must receive annual training. Training will be performed by qualified instructor/practioner.

To comply with OSHA standards, the following procedures will be used to obtain information, test students, and follow the source/patient protocol following bloodborne pathogen exposure.

All students must know the following:

1. All bloodborne pathogen exposure (i.e., needle stick, splash, direct contact, etc.) must be immediately reported to the Employee Health Nurse at the clinical site. If the office is closed, the student is to report to the Emergency Department of the clinical site.

2. Upon exposure the source/patient will be tested for the Hepatitis B and HIV viruses. The physician will give consent for HIV testing.

   The student will be tested for the Hepatitis B antibody or antigen depending on his or her immunization status. At the time of testing, blood will also be drawn for HIV testing and held up to 90 days. Upon consent of the student, testing will proceed. If the source/patient is HIV positive, subsequent testing will be made available to the student. Pre- and post-counseling for HIV testing will be given by the Employee Health Nurse of the Emergency Department CEP. The student is responsible for all medical expenses.

3. In addition to the Employee Occurrence Report, during counseling, the student and Employee Health Nurse will complete an exposure report which includes exposure assessment and student risk factors.

4. Written test results of the source and student will be given to the student within fifteen (15) days of exposure. The student must, by law, hold all results confidential.

The hospital will provide:

1. First aid to the student after exposure (inclusive of evaluating incident to determine if actual BBP exposure has occurred and cleansing and dressing the site of exposure if required).

2. Testing and cost of testing (i.e., HIV, HBV) for the patient.

3. Coordinated effort with institution to ensure student understanding of hospital’s BBP Exposure Control Plan.
4. Laboratory test results to student/school.

The College will provide:

1. Annual bloodborne pathogen training with qualified practioner
2. Pre- and Post-test counseling to student.
3. Counseling with student during medical treatment that may be necessary following a positive exposure.
4. Initial and continuing education of UP/BBP standards.
5. Coordinated effort with hospital to ensure student understanding of hospital’s BBP Exposure Control Plan.

The student:

Incurs cost for lab tests such as HIV, HBV and/or other medical treatment after first aid.
POST-EXPOSURE EVALUATION AND FOLLOW-UP PROCEDURES

Students will follow the established hospital policy for injury reporting.

A confidential post-exposure medical evaluation and follow-up is required immediately following an exposure incident. It includes HIV, HBV testing of blood from the employee and the source patient, if known, and counseling, illness reporting, and post-exposure prophylaxis.

Information on the results of the source individuals blood testing is provided to the student.

Baseline blood samples from exposed students who initially decline HIV testing will be held for ninety (90) days. Students may request testing during this time by contacting the lab and/or Environmental Health Services.

Written documentation which includes the results of tests, etc., is provided to the student.

All exposure to bloodborne pathogens must be recorded on the OSHA 200 Log if the incident results in medical treatment or diagnosis of seroconversion. In the case of of seroconversion only, the injury, such as needle stick, shall be recorded and not the serologic status of the student. When a log or supplemental record contains information related to bloodborne pathogens, the employer must ensure that personal identifiers are removed prior to granting access to the record.

**Students are responsible for all medical expenses.**
CLINICAL EDUCATION SITES
ENVIRONMENTAL HEALTH SERVICES

Testing Procedure for Student Exposure to Blood and Body Fluids

1. Student reports to Environmental Health Office or Emergency Department if office is closed.

2. The Environmental Health Office or Emergency Department:
   a. Confirms exposure to blood or body fluids
   b. Determines student’s need for tetanus immunizations (indicated of 10 years or longer since last dose)
   c. Inquires about history of Hepatitis B vaccination series
   d. Confers with attending physician of source who obtains consent for HIV testing unless source is known to be HIV positive
   e. Collects the following blood samples and types on comment line of requisition:

   **Exposure Protocol – Draw 2 tubes**

<table>
<thead>
<tr>
<th>STUDENT – VACCINATED FOR HEPATITIS B</th>
<th>STUDENT – NOT VACCINATED FOR HEPATITIS B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-HBs</td>
<td>HBs-Ag</td>
</tr>
<tr>
<td>HIV Antibody</td>
<td>HIV Antibody</td>
</tr>
</tbody>
</table>

   | SOURCE/PATIENT                   |
   | HBs-Ag & HIV (unless known to be positive) |
   | To be positive                   |

   (Refer to Hepatitis B vaccine prophylaxis for further management.)

3. If seen in the Emergency Department, staff will:
   a. Instruct student to contact the Environmental Health Nurse, or Employee Health Nurse within 24 hours for Hepatitis B prophylaxis protocol follow-up
   b. **SEND A PRINTED COMPUTER MESSAGE TO ENVIRONMENTAL HEALTH** that the student has been seen for blood/body fluid exposure

   | Anti-HBs   | = | Hepatitis B Antibody |
   | HBs-Ag     | = | Hepatitis B Surface Antigen |
   | HIV        | = | Human Immunodeficiency Virus |
I have been provided with bloodborne pathogen training and I have read and understand the policies and procedures for bloodborne pathogen exposure.

_____________________________________
Student Signature

_____________________________________
Student ID Number

_____________________________________
Date

CLEVELAND COMMUNITY COLLEGE

RADIOGRAPHY PROGRAM

Verification of Infectious Disease Training for HIV and Hepatitis B

I have received infectious disease training for the prevention of HIV exposure and Hepatitis B exposure. I have had the opportunity to ask questions about both of these diseases, and my questions have been answered to my satisfaction.

_____________________________________
Student Signature

_____________________________________
Student ID Number
In accordance with OSHA regulations, CDC recommendations, ASRT Curriculum Guide and the ARRT requirement that Radiography Students be deemed competent to perform venipuncture prior to graduation, the following requirements have been set in place by the program.

1. Students will receive infectious disease training during the first semester as a first year student
2. Standard Precautions will be covered in the Patient Care course
3. Students will attend venipuncture class sessions during the first semester as second year students with a trained and certified professional
4. Students will only perform venipuncture procedures under the direct supervision of a qualified professional.
5. Students will employ standard precautions at all times during the performance of venipuncture procedures under the direct supervision of a qualified professional.
6. Prior to being deemed competent, students must obtain five (5) successful sticks on human subjects or ten (10) sticks when an alternative is utilized (five (5) successful sticks using alternative, prior to obtaining five (5) successful sticks on human subjects). During the course of the training sessions, a maximum of two (2) sticks is allowed (one practice stick using an alternative and an initial stick on a human subject unless student(s) choose not to participate in second stick). All sticks must be performed under the direct supervision of a qualified professional. Standard precautions must be employed at all times.
7. Students will obtain additional venipuncture experience in approved JRCERT Clinical Education Sites according to the protocol of each site and only under the direct supervision of a qualified professional.

In all learning situations the college and its affiliates seek to provide students with the utmost in learning opportunities. Venipuncture is a part of the scope of practice of radiographers within the profession, and is deemed to be a valid and viable learning opportunity for students by the ARRT.

Students must employ standard precautions in all learning opportunities in which there exist a possibility of exposure to bloodborne pathogens.

I_______________________________________, have received infectious disease training and have been instructed on how to properly employ Standard Precautions in all learning opportunities in which there exist a possibility of exposure to bloodborne pathogens.

I further understand that risk of exposure will be minimized through the use of OSHA regulations, CDC recommendations and direct supervision of venipuncture procedures by qualified professionals.
I further understand that the College and its affiliates will provide appropriate levels of training and supervision for students in order to minimize risk of exposure to bloodborne pathogens and neither entity shall be held liable during the performance of properly supervised learning opportunities. Performance of procedures without appropriate supervision will result in disciplinary action.

__________________________
Student Signature

__________________________
Student ID Number

__________________________
Date
**ANNUAL TB CHECK**

I understand that I must present proof of annual TB results to program officials, who will in turn notify clinical affiliate officials of results as requested by those officials.

_____________________________________
Student Signature

_____________________________________
Date

_____________________________________
Program Official

**ANNUAL FLU SHOT**

I understand that I must present proof of annual flu shot to program officials, who will in turn notify clinical affiliate officials of results as requested by those officials. Only students with documented medical conditions prohibiting the shot are exempted.

_____________________________________
Student Signature

_____________________________________
Date

_____________________________________
Program Official

______________________________ should not receive the Flu Shot due to the fact that:

__________ that existing medical conditions prevent this person from receiving the vaccine.

___________________________________________
Physician’s Signature/Date

_____________________________________
Student ID Number

___________________________________________
Student’s Signature/Date
RADIATION PROTECTION FOR PREGNANT STUDENTS

A student may voluntarily choose to declare, not declare, or un-declare a pregnancy, as is her right.

If a student chooses voluntarily to declare or un-declare her pregnancy, it must be in writing to the Program Director.

If a student becomes pregnant during her tenure in the program, it is the sole responsibility of the student as to the action the student voluntarily chooses to take. It is the belief of this program that in the event that a student becomes pregnant while involved in competency based radiography education, it is in the best interest of all parties that the pregnancy be declared in writing to the Program Director.

If a student voluntarily chooses to declare her pregnancy, she will be advised of the possible risks to herself and her unborn fetus, radiation protection methods, and clinical affiliate policies. After being advised, the student may wish to exercise one of the several options open to her, including withdrawing in writing a previously declared pregnancy:

After becoming aware of the possible risks to myself and my unborn child and of the importance of proper radiation protection practices and proper body mechanics, I have elected to exercise the option of:

1. _____ remaining in the program for the duration of my pregnancy as a full time Student, without modification with an expected graduation date of ____________________ *

I understand that my decision encompasses performing and meeting both clinical and didactic requirements.

I understand that I will be issued a fetal monitor to be worn at waist level during routine studies and under the apron at waist level during fluoroscopic studies and that should I exceed the monthly gestational dose limit, I will be removed from participation in radiation producing areas until such time as I am allowed to return to normal rotations by program faculty.

*I also understand that affiliate policies may not allow student performance in certain areas; if a student is unable to complete required program competencies due to affiliate policies, graduation will be delayed until such time as all program requirements are met.

2. _____ dependent upon my expected delivery date - completing any semesters prior to my delivery date and attending the didactic portion of the program post delivery date and completing the clinical portion of the program at a later date with expected graduation date of ____________________

3. _____ dependent upon my expected delivery date - completing any semesters prior to my delivery date, requesting temporary withdrawal and
returning to the program at the point at which temporary withdrawal began

4. _____Withdrawing in writing a previously declared pregnancy

**Student must leave program in good standing.**

I understand that the program and the clinical affiliates seek to provide the utmost in radiation protection for every student. Neither the program nor the clinical affiliates will be held legally responsible for the health, safety or welfare of myself or my unborn child.

I have been advised to employ proper radiation protection methods, proper body mechanics when moving and/or lifting patients and/or equipment, and to use prudent judgment in the performance of radiographic examinations and procedures.

As is my right I elect option number: ________________

Program and Clinical Affiliate Officials will be notified of student status after voluntary disclosure of pregnancy. The program and the clinical affiliates seek to provide the utmost in radiation protection for every student. If a student chooses to remain in the program on a full time or limited basis after being advised of the possible risks, the student will be reminded to use proper body mechanics, employ the use of radiation protective apparel, to observe all rules and regulations regarding radiation safety, and to use prudent judgment in the performance of radiographic examinations and procedures. A fetal radiation monitor will be ordered and issued to the student. All pertinent information will be documented and signed by the pregnant student and appropriate College faculty and/or staff. It is both policy and procedure to provide information in radiation protection to the pregnant student. However, neither the program nor its Clinical Affiliates will assume liability or be held legally responsible for the health, safety, or welfare of the student or the unborn child, should a student exceed the allowable monthly fetal dose limit, the student will be removed from site rotations until calculation of remaining levels are determined and student can safely be returned to regular site rotations. Information about a student’s leaving due to pregnancy will be held in the strictest confidence.
The College attendance policy does not allow student absences to exceed the twenty (20) percent of the maximum set by the College. All students, including pregnant students, are subject to this policy.

Students must read, understand, and ask questions (if appropriate) to clarify the College attendance policy found in the Cleveland Community College Academic Bulletin and Student Handbook. Students should also be aware that they may withdraw, in writing, a previously declared pregnancy.
VOLUNTARY DECLARATION OF PREGNANCY

Date ______________________

I, _________________________________, hereby notify the Radiography Program Director of my pregnancy as of the above date.

My expected due date is __________________________.

I understand, from reading the College’s attendance policy, as stated in the Cleveland Community College Academic Bulletin and Student Handbook, that if I elect to remain in the program on a full or part-time basis that the College attendance policy does not allow student absences to exceed the 20 percent maximum set by the College and that I will abide by this policy. I further, understand that I have the option to withdraw, in writing a previously declared pregnancy.

After becoming aware of the possible risks to myself and my unborn child and of the importance of proper radiation protection practices and proper body mechanics, I have elected to exercise the one of 3 options of:

1. _____remaining in the program for the duration of my pregnancy as a full time Student, without modification with an expected graduation date of ________________ *

I understand that my decision encompasses performing and meeting both clinical and didactic requirements.

I understand that I will be issued a fetal monitor to be worn at waist level during routine studies and under the apron at waist level during fluoroscopic studies and that should I exceed the monthly gestational dose limit, I will be removed from participation in radiation producing areas until such time as I am allowed to return to normal rotations by program faculty.

*I also understand that affiliate policies may not allow student performance in certain areas; if a student is unable to complete required program competencies due to affiliate policies, graduation will be delayed until such time as all program requirements are met.

2. _____ dependent upon my expected delivery date - completing any semesters prior to my delivery date and attending the didactic portion of the program post delivery date and completing the clinical portion of the program at a later date with expected graduation date of ________________

3. _____ dependent upon my expected delivery date - completing any semesters prior to my delivery date, requesting temporary withdrawal and returning to the program at the point at which temporary withdrawal began

4. _____ withdrawing, in writing a previously declared pregnancy
Student must leave program in good standing.

I understand that the program and the clinical affiliates seek to provide the utmost in radiation protection for every student. neither the program nor the clinical affiliates will be held legally responsible for the health, safety or welfare of myself or my unborn child.

I have been advised to employ proper radiation protection methods, proper body mechanics when moving and/or lifting patients and/or equipment, and to use prudent judgment in the performance of radiographic examinations and procedures.

As is my right I elect option number: ________________

_________________________________________
Student Signature

_________________________________________
Today’s Date

_________________________________________
Program Director Signature

_________________________________________
Today’s Date
Voluntary un-declaration of Pregnancy

I voluntarily choose, in writing, to un-declare a previously declared pregnancy to proper program officials.

_________________________________________
Date

_________________________________________
Student Signature

_________________________________________
Program Director Signature
RADIATION PROTECTION AND PREGNANCY POLICY SIGNATURE FORM

I have read the pregnancy policy and I understand its content. I further understand that I have the right to voluntary declare, not declare or un-declare a pregnancy. In addition I also understand that in the case of a declared pregnancy the program allows students to continue in the program with or without modification as it pertains to the didactic and clinical requirements, unless the clinical site requires a modification of the clinical components.

________________________________________________________________________
Student Signature

________________________________________________________________________
Student ID Number

________________________________________________________________________
Date
I have received and read the Cleveland Community College Radiography Student Handbook. I agree to abide by the regulations and policies therein. I understand that if a policy change occurs, I will be notified by program officials in a timely and appropriate manner. Failure to follow prescribed policies will result in disciplinary action of the student. I also understand that the Radiography Technology program seeks to instill in students discipline, integrity, and professionalism along with knowledge and skills. I further understand, where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Cleveland Community College Radiography Program Student Handbook.

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date

I give permission for Cleveland Community College personnel to discuss my didactic and clinical progress and grades with radiography administrators and/or clinical staff as appropriate. I understand that all parties will be made aware of the confidential nature of these discussions.

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date

I give permission for Cleveland Community College personnel to release any information (when requested for references), written or oral, concerning my progress and grades while in the Radiologic Technology program at Cleveland Community College.

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date
PINNING CEREMONY / COMMENCEMENT EXERCISES

I understand that participation in the pinning ceremony and/or commencement exercises does not guarantee graduation from the program. I understand that failure to meet program requirements in the prescribed manner would result in my not being allowed to remain in the program and/or to graduate.

_________________________________________
Student Signature

_________________________________________
Student ID Number

_________________________________________
Date
NOTIFICATION OF CCC RADIOGRAPHY POLICY CHANGES

I understand that I will be notified by program officials in a timely and appropriate manner of changes to the current Cleveland Community College Radiography Student Handbook. Further, I understand that it is my responsibility to request clarification of any policies and policy changes. I understand that a revised copy of the Handbook will be made available to me via the program website and any and all changes will be discussed with me and all questions answered prior to a new policy taking effect. I further understand that all previous Handbook copies should be discarded. I further understand, where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Cleveland Community College Radiography Program Student Handbook.

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date
I. Operating and Safety Procedures

OPERATING AND SAFETY PROCEDURES FOR CLEVELAND COMMUNITY COLLEGE
(Alease Rousseau, MA, R.T.R)

These instructions are provided to you so that we can comply with the State rules for radiation control. The North Carolina Division of Radiation Protection enforces the radiation rules in North Carolina. These rules require that our radiation machines meet specific requirements. The rules also require that certain procedures be followed and that certain records be kept. A copy of these rules is always available for you to read and review. It is titled the North Carolina Regulations for Protection Against Radiation (NCRFPAR) and is located in the Radiography Program Directors office at Cleveland Community College.

The intent of this manual is to establish procedures to minimize radiation exposure of x-ray students and personnel. You are required to know the procedures and requirements in this manual and be able to demonstrate that you can use them properly. After reading this manual and demonstrating that you can use the machines safely and correctly, you must sign and date the “Record of Instruction of Individuals in Operating and Safety Procedures” provided in this manual.

The rules also require that each x-ray facility be registered with the State. The Notification of Registration is located in the office of Alease Rousseau.

♥ Rule .1002 ♠

All operators of x-ray machines are responsible for following the radiation safety procedures. Alease Rousseau is the Radiation Safety Officer (RSO) and has the responsibility and authority for overseeing matters relating to radiation protection. The RSO also confirms all training and serves as the contact person with the State. Employees should submit all radiation questions or concerns about radiation safety to the RSO.

A. Personnel Monitoring

♥ Regulatory Guide, appropriate Personnel Monitoring is helpful in interpreting and applying the personnel monitoring requirements in the workplace. ♠
1. Always wear the personnel monitoring badge when you are working, and make sure it is the badge assigned to you.

Wear the badge on your collar. When you wear a lead apron, the badge shall be outside the apron. ♥ Rule .0603 (a) (1) (J) ♠

When not in use, you must store badges in a low radiation area. The control badge shall be stored in a radiation free area.

Alease Rousseau or designee (Clinical Instructor) is responsible for the exposure records and exchanging the badges on the 15th of each month.

2. If you suspect that there has been an excessive exposure or a radiation incident, immediately notify Alease Rousseau, the RSO. The RSO will then notify the Division of Radiation Protection. The address is as follows: Division of Radiation Protection, 1645 Mail Service Center Raleigh, North Carolina, 27699-1645. The telephone number during working hours is 919-571-4141. Internet Access: http://www.ncradiation.net

3. Student exposure should remain below .1 Rem (100 mRems) annually. Should a student exceed .1 Rem annually or in any quarter, prior to their annual date, the student will be removed from participating in radiation producing procedures and the North Carolina Division of Radiation Protection will be notified. Steps taken to ensure safety of students will include, but may not be limited to being counseled by the RSO regarding radiation safety procedures and methods of protection from unnecessary exposure. Students will be allowed to return to regular rotations after the annual date has passed. Documentation of the occurrence will be placed in the students’ record. Should the occurrence be a result of student negligence, student will be subject to disciplinary measures. Excessive exposures due to student negligence will result in the following: 1st occurrence counseling and written warning, a second occurrence, suspension and a third occurrence, dismissal. In the event that the excessive exposure due to poor facility practices, the RSO of the facility will contacted by the RSO of the program to discuss methods of improvement for all.

4. Keep your personal radiation exposure as low as you can. Be aware of where you are standing and how long you stay in the radiation area. Do not enter or remain in a radiation area unless it is necessary.

B. The general requirements for radiation safety and your right and obligations as a radiation worker are found in NCRFPAR, Section .1600. The specific sections of NCRFPAR that most impact our facility are Rules .0603, .0604, .0605, .0606, .0608, and .0609. You must read these and other parts of the manual.
C. The x-ray equipment in this facility was installed following the manufacturer’s specifications. Do not alter, tamper with, or remove any of the filters or collimators, or in any way cause needless radiation exposure.

D. Operation of X-Ray Equipment

1. We have established a restricted area (s) in the room in which the x-ray equipment is located when the machine is in operation. The restricted area (s) is the control booths.

2. Stay in the control booth (station, behind the barrier, etc.) during each exposure. ♥ Rule .0606 (b) (2) (I) ♠

3. Restrict the x-ray beam to the area of clinical interest. The beam size must not be larger than the image receptor. The method you use for restricting the beam is a light-localized variable-aperture rectangular collimator. ♥ Rule .0606 (a) ♠

4. Align the x-ray beam with the image receptor by using the light localizer and the centering device. ♥ Rule .0606 (a) (1)(B) ♠

E. Exposure Procedures and Protective Equipment

1. The machine is not to be turned on unless a qualified radiographer/instructor is in the department.

2. Remove any unnecessary staff or other persons from the room during x-ray exposures. ♥ Rule .0603 (a) (1) (E) ♠

3. Use mechanical holding devices for holding the film. ♥ Rule .0603 (a) (1) (H) (I) ♠

4. Only one (1) person shall be in the room during an exposure.

5. Never open the door to the radiographic room when the “X-Rays in Use” sign is lighted.

6. Only phantoms are to be radiographed. **NO HUMANS ARE EVER TO BE IRRADIATED.**

II. Certifying Statement

These procedures have been developed to ensure safe radiological working conditions. Everyone must adhere to these procedures. Prior approval must be obtained for any deviation from these procedures.
In accordance with rule .1603 (c), the registrant shall annually review the radiation protection program content and implementation.

_______________________________________  ___________________
Alease Rousseau, MA, R.T.-R                      Date
PROJECTED OUT OF POCKET COSTS FOR RADIOGRAPHY STUDENTS

**Uniforms** – Students must have one uniform for each scheduled day of clinical and a “backup” uniform. **Ceil blue uniforms or tops are required** and must be kept **clean and in good repair**. (Students who show up for clinical assignments in stained, wrinkled, or dirty uniforms will be dismissed from the clinical education center and will not be allowed to return until the problem is rectified – **Only one occurrence will be allowed**.) Uniforms must be inspected, repaired or replaced as needed prior to the start of each new semester or as needed should something happen to them during a semester. If student has two (2) days of clinical then three (3) uniforms are required and so on. Students will incur the cost of purchase, maintenance, repair or replacement.

**Shoes** – Two pairs of good sturdy, all white shoes are required. **White shoes** must be kept clean and in good repair. Students will incur the cost for supplies to keep shoes clean and in good repair. If a student shows up for clinical assignments in dirty shoes or shoes in ill repair, the student will be dismissed from the clinical education center and will not be allowed to return until the problem is rectified. Only one occurrence is allowed. Shoes should be inspected and repaired or replaced prior to the start of each semester or as needed during the semester. Clogs are not recommended.

**Hose or socks** – **students must have clean white** hose or socks on each day of their clinical assignment.

**Student Tops or Shirts** – or for females, **Dresses, Lab Jackets, School Patches or Embroidered Insignias** Students must purchase required items (ceil blue tops, shirts, pants or dresses and short and long length white lab coats, and school patches or school insignia embroidered on each top, shirt, dress and lab coat). Students must wear a clean, pressed uniform with required student patches or embroidered insignia each scheduled day of the clinical assignment. When lab coats are worn, they must be clean, pressed, and white or ceil blue with required student patch or embroidered insignia.

Required: one (1) set of pants and tops or shirt or one (1) dress for each day of scheduled clinical and a backup; a short and long length lab jacket and school patches or embroidered insignia on all tops, shirts, dresses, and lab coats.

**Name Tags** – Required, two t)

**Film Markers** – 25.00/annually Required: wafer thin, recommend purchase two sets (backup replace first if lost)

**Radiation Dosimeters** – $75.00 /annually

**Malpractice Insurance** - $16.00/annually
Professional Growth and Development

As part of the JRCERT Standards that an accredited program provide a curriculum that promotes professional values and lifelong learning, **students are required** to become members of radiological professional organizations.

**North Carolina Society of Radiologic Technologist.** The current fee is a $5.00 one-time application fee and $18.00 annual fee. The fee is set by NCSRT and subject to change. Students may also be required to obtain memberships in local and/or national professional organizations.

Students are encouraged but are **not** required by the College or program to attend professional seminars, conferences or workshops. Should a student wish to attend such an event, a request must be made in writing to the Program Director. The educational validity of attendance will be determined by the Program Director, Clinical Coordinator, Dean of Business Technologies and Allied Health and the Vice President of Academic Programs. Policies and procedures for student conduct at College approved events is contained within the Cleveland Community College Academic Bulletin and Student Handbook and must be adhered to while in attendance. Cost of attendance is the responsibility of the student. The college will provide no funds.

**ARRT** – The American Registry of Radiologic Technology – post graduation students **must** sit for and successfully pass a national examination to become Registered Technologists. The cost of the exam for first time examinees is currently $200. The fee is set by the ARRT and subject to change.

**Textbooks/workbooks** – students are required to purchase various textbooks and workbooks. Costs vary each semester.

**Calculators** – students are required to purchase a non-programmable calculator.
Program Student Agreement

I have read the Cleveland Community College Academic Bulletin and Student Handbook and the Cleveland Community Radiography Student Handbook. As a program student, I agree to abide by the regulations and policies therein. I understand that should a policy change occur, I will be notified by program officials in a timely and appropriate manner. I also understand that if a policy change occurs, I will receive a revised copy of the Cleveland Community College Radiography Student Handbook with all previous Handbook copies to be discarded. I further understand that all program requirements must be met as prescribed for me to continue to the next semester or to graduate, if in the last semester. Failure to meet program requirements as prescribed will result in disciplinary action. I further understand that if I do not sit for the ARRT certification test within six months post-graduation, I must provide proof of external remediation prior to being signed off to sit by the Program Director/Coordinator. I also understand that the Radiography Program seeks to instill in students discipline, integrity, and professionalism along with knowledge. I further understand, where there are inconsistencies in policy or procedure, the current edition of the Cleveland Community College Academic Bulletin and Student Handbook supersedes the Cleveland Community College Radiography Program Student Handbook.

________________________________________
Student Signature

________________________________________
Student ID Number

________________________________________
Date
Confidentiality of Medical Information

Students enrolled in the Radiography Program are exposed to and/or have access to both sensitive and confidential patient information. Program students have both a legal and ethical obligation to maintain all patient information, written and/or oral, in the strictest confidence.

I, ______________________________, understand that I have both a legal and ethical obligation to maintain all patient information, written and/or oral, in the strictest confidence. No discussion of patient information will occur other than that allowed and needed for approved educational purposes and only with appropriate persons who have direct interest in the educational process and who are also aware of the confidentiality of the information.

______________________________
Student Signature

______________________________
Student ID Number

______________________________
Date

While in the Radiologic Technology Program at Cleveland Community College, I give permission for Cleveland Community College personnel to release any information (when requested by appropriate Clinical Education Center Officials), written or oral, concerning any matter that has a direct effect on my ability to remain in the program or to rotate through approved clinical education sites, this may include medical information and proof of CPR certification as required by the clinical facility.

______________________________
Student Signature

______________________________
Student ID Number

______________________________
Date