

STUDENT HANDBOOK

PROGRAM POLICIES and PROCEDURES

Effective August 2018

for the Graduating Class of 2020

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A. WELCOME

We welcome you to the Radiologic Technology program. You are entering a paramedical career program that is interesting, diversified, and demanding. The program is designed to help you develop the knowledge and skills required to perform in a specialized area. Many affective domain qualities, besides knowledge and technical skills, are necessary to complete the program successfully. An important personal quality that will be closely evaluated throughout your training is your ability to relate with the patient and to provide both physical and emotional support to the patient. Another quality or trait is your ability to work as part of a team and to interact successfully with department and hospital personnel. We will help you identify solutions to problems in both didactic and clinical performance. In addition, psychological counseling services are available to assist you in all matters that might relate to your learning throughout your training at Santa Rosa Junior College.

The RT faculty wishes you success in the program. We are here to assist you in achieving your newly chosen career goal.

B. PURPOSE OF HANDBOOK

This handbook is designed to serve as an informational guide to assist in the orientation of all new students and to clarify policies and procedures governing your actions and practices while being a student in Radiologic Technology. This handbook should be used as a supplement to the Santa Rosa Junior College catalog and the clinical competency handbook. We expect that the Radiologic Technology students will be familiar with the following information and policies. Take time to read this handbook, ask for clarifications, and sign its agreement pages in the presence of the program director.

Your knowledge about the college and program policies, as well as your consideration and cooperation are essential. To this end we herein provide pertinent information that we trust you will read carefully, follow closely, and keep ready for future reference.

Since this handbook is designed to give information to students, we would appreciate ideas you have any suggestions about materials that should be included. Please do not hesitate to communicate your feedback to us.

C. SANTA ROSA JUNIOR COLLEGE PHILOSOPHY

The primary purpose of Santa Rosa Junior College is to provide educational opportunities for diverse students in many different areas. Of principal educational importance is the development of intellectual curiosity, integrity, and accomplishment in an atmosphere of academic freedom.

D. SANTA ROSA JUNIOR COLLEGE MISSION

Sonoma County Junior College District's Mission is to promote student learning throughout our diverse communities by increasing the knowledge, improving the skills and enhancing the lives of those who participate in our programs and enroll in our courses.

This Mission affirms the District's responsibility to provide the following:

- lower division academic education, to support transfer to four-year institutions;
- career and technical education, to support economic development and job growth;
- basic skills, to include English language skills acquisition;
- student and academic support services, to improve student success and student retention.

In fulfilling our mission we are committed to the following:

- Serving the educational needs of our students and our community through programs and courses that maintain high academic standards and develop a respect for learning in all of our students.
- Developing intellectual curiosity and integrity, and recognizing accomplishment in an atmosphere of academic freedom.
- Offering courses and programs which reflect academic excellence and integrity and which serve the variety of needs, career pathways, and abilities of our students.
- Identifying student learning outcomes for courses, programs, certificates, and degrees; assessing student achievement of those outcomes; and using those assessment results to improve effectiveness.
- Responding to economic, demographic, and technological changes through educational program development and staff development.
- Helping students succeed in meeting their educational goals by providing comprehensive instructional and student support services.
- Challenging students to participate fully in the learning process by teaching students to be responsible for their academic success.
- Preparing our students for participation as citizens at the local, national and global levels.
- Promoting awareness of and maintaining sensitivity to ethnic, cultural and gender diversity within our student body, faculty, staff, administration and course offerings.

- Promoting open access through actively eliminating barriers to a college education and services.
- Contributing to the cultural life of our community by presenting enrichment opportunities to our students and community members.
- Attracting and retaining faculty and staff who are highly qualified, knowledgeable and current in their fields.
- Practicing responsible participatory governance within the institution through processes that are inclusive and respectful of all participants and in which information and decision-making are shared.
- Maintaining the stability of our institution by exercising our public responsibility for sound resource development and use in order to meet our commitments to the citizens of the District.
- Promoting and maintaining a safe learning and working environment.
- Reviewing our mission statement periodically with participation by students, faculty, staff, and administration.

E. PROGRAM PHILOSOPHY

The faculty of the Radiologic Technology program at Santa Rosa Junior College prepares a graduate to serve in the community, the State of California or the rest of the United States and our English speaking allies.

All people have the right to safe and competent care and that we, as faculty, have a responsibility to mentor students who meet the criteria identified as a necessary basis for a health care worker.

Radiologic technology includes those skills necessary for maintaining and restoring good health through diagnostic radiologic examinations.

Radiologic technology education is based on scientific principles and that provision should be made for advances in medical technology, changing social needs and changes in radiologic technology education.

Concurrent classroom theory and clinical practicum provide effective education.

Learning is facilitated when the student is ready to learn and is self-motivated.

Evaluation is an essential part of the learning process and it is the responsibility of the faculty to employ comprehensive evaluations, both at the college and in the clinical areas.

The radiologic technology curriculum fosters in the student a personal commitment toward continued pursuit of knowledge through a lifelong learning process and improvement of his/her radiologic technology and related skills.

Compassionate patient care with the patient's dignity and individuality always in mind, respecting the patients' diverse cultural, ethnic, and religious backgrounds.

All students should be properly counseled and advised in preparation for their career choice and attainment. The program faculty subscribes to the open-door policy to all students who might need advisement and/or counseling.

Graduates of this program will be prepared for the ARRT National Board Certifying Exam and the California Department of Public Health – Radiologic Health Branch exam in Radiography and Fluoroscopy.

F. PROGRAM MISSION STATEMENT

Based on the major missions of the college, the faculty of the Radiologic Technology Program at Santa Rosa Junior College is dedicated to facilitating the growth and development of enrolled students in becoming competent entry-level radiologic technologists to function within the healthcare community they serve.

G. PROGRAM GOALS

The major goals of the Santa Rosa Junior College Radiologic Technology program are to assist enrolled students:

- in performing positioning skills with accuracy, utilizing skills in radiation protection, and demonstrating proper equipment handling;
- in utilizing critical thinking to recognize image quality and adapting to non-routine patients and procedures;
- in demonstrating good communication in clinical environment, as well as demonstrating good oral and written communication;
- in demonstrating professionalism and understanding of ethical decision making.

Upon completion of this program, students should be able to gain growth and development in becoming radiologic technologists with high ethics, professionalism, effective communication skills, critical thinking skills, clinical competency, and the highest patient care quality in mind.

H. STATEMENT OF READINESS

The Radiologic Technology Program prepares the student for entry into the practice of professional registered radiologic technologist. Following successful completion of the program prerequisites with a grade of "C" or higher and acceptance into the Radiologic Technology Program, the student is eligible to enter into the two-year program. Upon program completion, the student earns a certificate of completion and if all other requirements are met, an Associate of Science degree.

The program is both academically and clinically rigorous and demanding. To ensure greater success, we suggest the following:

- 1. Ability to speak, read, and write the English language fluently and proficiently at a college level. English 1A is required.
- 2. Taking guidance classes on note taking, study skills and test taking skills prior to entry into the program.
- 3. Forming and working in study groups for all problem solving and critical thinking. Be prepared to spend approximately 2 hours of reading and study weekly for each 1 unit of class.
- 4. Good organization and priority setting skills.
- 5. If it applies, having dependable childcare and backup arranged for class and clinical days.
- 6. Reliable transportation to enable the student to/from school and the clinical sites. Students should expect to travel up to 100 miles one-way on any given day.
- 7. Applying for available financial aid including: The Doyle Scholarship program, grants and loans posted in the Financial Aid Office, SRJC Scholarship website, and the R.T. student bulletin board. There are many types of aid available for qualified students, but the student needs to seek them out.
- 8. Exploring and utilizing campus support services available including: Health Learning Resource Center, Career Center, Re-Entry, Basic Skills, Tutorial Center, Library, Health Services, Student Psychological Services, Occupational Education, EOPS, and Financial Aid.
- 9. Students are strongly discouraged from working during the program due to the timeintensive nature of the curriculum, both physically (clinical experience) and mentally (highly technical field of study). If a student must work during the program, it is recommended that it be limited to the first year of training and then, only on a part- time basis. **Past experiences have shown that the rigors of the curriculum, combined**

with working at outside gainful employment, may result in the student's inability to perform at the expected level. (The entering student is reminded that the lowest grade allowable is 75% in any subject.)

10. Good self-care, stress management and relaxation skills.

EQUAL OPPORTUNITY STATEMENT

The Sonoma County Junior College District is committed to an environment in which all employees and students are treated with respect and dignity. Each employee and student has the right to work/learn in a professional atmosphere that promotes equal opportunity and is free from unlawful discriminatory practices. For guidance on specific policies and procedures related to non-discrimination (Policy 8.2.1) and access for students with disabilities (Policy 8.1.1) please refer to the Santa Rosa Junior College <u>Board Policy Manual</u>.

TECHNICAL STANDARDS

The Radiologic Technology curriculum requires students to engage in diverse, complex, and specific experiences essential to the acquisition and practice of essential healthcare skills and functions. Unique combinations of cognitive, affective, psychomotor, physical, and social abilities are required to satisfactorily perform these functions. In addition to being essential to the successful completion of the requirements of the Radiologic Technology program, these technical standards are necessary to ensure the health and safety of patients, fellow candidates, faculty and other healthcare providers.

Below is a list of some of the technical standards required in the Radiologic Technology Program. These are examples of learning activities that students will be required to participate in during the program and not meant to be an exhaustive list of all technical standards.

Students in the Radiologic Technology program must be able to:

- Participate in classroom, clinical, and laboratory discussions and learning activities.
- Participate in intellectual activities requiring critical thinking, judgment, and analysis.
- Solve problems and plan care within reasonable time frames in complex environments.
- Move safely around the skills lab, patient rooms and in a variety of clinical settings.
- Assemble and transport a wide range of equipment and supplies to and from patient rooms and other clinical care areas.
- Assist patients with mobility, which may include moving patients in and out of beds, gurneys, chairs and x-ray examination tables.
- Move radiographic equipment and manipulate patient body parts to maximize efficiency and visibility of radiographic examinations.
- Work in tight spaces already crowded with other patient care apparatus.
- Manipulate radiographic and medical equipment and accessories by reaching, pulling, extending, flipping switches, rotating knobs and activating buttons.
- Wear a N-95 respirator when interacting with a patient in respiratory precautions.

- Communicate effectively with the patient or health care team including the ability to communicate with a patient from outside the room or with the patient facing away from you during radiographic examinations.
- Communicate with patients, caregivers, family members, and other healthcare personnel in a manner that is clear, articulate, accurate, and ensures that the plan of care is understood.
- Safely work in all levels of hospital or radiology department lighting that varies from low levels of illumination to bright light levels.
- Perform emergency care in a safe and timely manner including the initiation of life saving interventions such as CPR when indicated.
- Accurately document patient care on paper and/or in the electronic health record in a timely manner.
- Establish and maintain professional relationships with faculty, other students, staff of affiliating agencies, and members of the community.
- Express feelings and ideas in a professional manner.
- Provide and accept feedback respectfully.
- Adapt to unexpected changes and stressful situations.
- Maintain self-control during difficult situations.
- Exercise good judgment.
- Empathize with the feelings and situations of others.

Non-Physical Demands

- Respond quickly and appropriately to emergency situation using the English language.
- Communicate with patients and staff at all times using the English language.
- Tolerate strong, unpleasant odors.
- Handle stressful situations related to technical and procedural standards and patient care situations.
- Provide physical and emotional support to the patients during radiographic procedures.

Process of Reasonable Accommodation

The Radiologic Technology Program is committed to ensuring that otherwise qualified students with disabilities are given reasonable accommodations. <u>Students with disabilities who wish to</u> request these accommodations are encouraged to contact the Disability Resources Department (DRD) to determine eligibility for services prior to the start of the program. While the process can be initiated at any time, reasonable accommodations cannot be implemented until eligibility has been formally established with DRD. The Disability Resources Department can be reached at 707-527-4278. Information about the department can be found on their web page at: <u>https://drd.santarosa.edu/</u>.

Since degrees of ability vary widely among individuals, the Radiologic Technology Program is committed to creating access to qualified individuals with a disability using a case-by-case analysis. The program remains flexible with regard to the types of reasonable accommodations that can be made in the college's classroom and clinical settings. Students with disabilities are invited to offer suggestions for accommodations that have worked in the past. Accommodations made will specifically address the limitations of the disability. Our belief is that accommodation should be tailored to individual situations. The process for determining the type of reasonable accommodation in the clinical setting shall be determined by the Disability Resources Department and Radiologic Technology program director.

J. LEARNING OUTCOMES

The Radiologic Technology program faculty believes that the philosophy of the program can be fulfilled through program objectives. Since radiologic technology is a practice discipline, the objectives reflect what the graduate radiographer will be able to do. The objectives reflect the radiographer's qualifications as stated by the American Society of Radiologic Technologist (ASRT), the American Registry of Radiologic Technologists (ARRT), and the Radiologic Technology Minimum Standards mandated by the State of California.

Before a student is allowed to graduate from the program, he/she is expected to satisfy a set of minimum criteria, which include the minimum competencies for clinical education as defined by the ARRT, and didactic education as defined by the ASRT.

The minimum parameters that insure competency in the didactic instruction of the program are established by the requirement that each student passes all of the "core" courses within the program curriculum with a minimum grade of 75% "C".

To insure that clinical competencies are met, the student is expected to satisfy the following criteria as terminal objectives before completion of the program. These terminal objectives are incorporated throughout the program by means of quizzes, midterm and final examinations, practical finals, skill audit sheets, competency check-off, oral reports, and research papers.

Upon successful completion of the program, program graduates should be able to perform the following tasks of an entry-level technologist:

1. Apply radiation protection methods and procedures for the safety of patients, self, and others

- a. Evaluate the need for and proper use of protective shielding
- b. Take the appropriate precautions to minimize exposure to patients
- c. Set kVp, mA and time, or AEC to achieve optimum image quality, safe operating conditions, and minimum radiation dose
- d. Prevent persons not involved in clinical activities from remaining in area during x-ray exposure
- e. Take appropriate precautions to minimize occupational radiation exposure
- f. Wear a personnel monitoring device while on duty
- g. Review and evaluate individual occupational exposure records
- 2. **Evaluate radiographic equipment and accessories to ensure proper application of radiation and image processing to limit exposure to patients** a. Warm-up x-ray tube according to manufacturer's recommendations
 - b. Prepare and operate radiographic equipment and accessories
 - c. Prepare and operate fluoroscopic equipment and

accessories

- d. Recognize and report malfunctions in the radiographic or fluoroscopic equipment and accessories
- e. Recognize and report malfunctions in the automatic processors or digital readers
- f. Perform basic evaluations of radiographic equipment and accessories (e.g., lead aprons, collimator accuracy)
- g. Inspect and clean grids, image receptors and other ancillary equipment.
- h. Perform start-up and shut down procedures in the automatic processor or digital readers
- i. Process digital/electronic images
- j. Store and handle image receptors to reduce the possibility of artifact production

3. Exercise independent judgment and discretion in the technical performance of radiographic positions and procedures

- a. Select appropriate image receptor types
- b. Determine appropriate exposure factors using calipers and technique charts
- c. Modify exposure factors and circumstances such as involuntary motion, casts, and splints, pathological conditions, or patients' inability to cooperate
- d. Use radiopaque markers to indicate anatomical sides, positions or other relevant information (e.g., time, upright, decubitus, post-void and so forth)
- e. Evaluate patients for appropriateness of examination
- f. Evaluate images for diagnostic quality
- g. Determine corrective measures if images are not of diagnostic quality and take appropriate action
- h. Select equipment and accessories (e.g., grid, compensating filters, shielding) for the requested procedures
- i. Remove all radiopaque materials from patients or table that could interfere with the radiographic images
- j. Explain and give proper breathing instructions prior to making the exposure
- k. Use body landmarks to position patients to demonstrate the desired anatomy
- 1. Explain and confirm patient preparation (e.g., diet restrictions, preparatory medications) prior to radiographic/fluoroscopic examinations
- m. Properly sequence radiographic procedures to avoid residual contrast material affecting future procedures
- n. Examine images to verify accuracy and completeness of information (annotate only if necessary)
- o. Practice standard (universal) precautions

4. Adhere to ethical and legal standards of radiography practice

- a. Perform radiographic procedures and positions following guidelines outlined by the ARRT Radiographer Scope of Practice and the ASRT curricular guidelines.
- b. Examine images to verify accuracy and completeness of information (e.g., patient history, clinical diagnosis)

- c. Practice standard (universal) precautions.
- d. Perform radiologic procedures following the principles of the ARRT Standards of Ethics and the ASRT Code of Ethics.
- e. Confirm patients' identity using 2 identifiers.
- f. Question female patients of child-bearing age about possible pregnancy and document responses while being cognizant of adhering to the practices of the clinical education center where the student is assigned.
- g. Verify/obtain consent forms
- 5. Apply patient care and management techniques to ensure confidentiality, safety, comfort, modesty, health, and well-being of the patient
 - a. Follow the guidelines of the AIDET model.
 - b. Explain procedures and post-procedural instructions to patients or patients' family
 - c. Evaluate patients' ability to understand and comply with requirements for the requested procedures
 - d. Observe, monitor, and document vital signs
 - e. Use proper body mechanics and/or mechanical transfer devices when assisting patients and their transfers
 - f. Provide for patient safety, comfort, and modesty
 - g. Select immobilization devices, when indicated, to prevent patient movement and/or ensure patient safety
 - h. Verify accuracy of patient identification on images
 - i. Maintain confidentiality of patient information
 - j. Use sterile or aseptic technique when indicated
 - k. Confirm type and prepare contrast media for administration
 - 1. Prior to radiographic procedures using contrast media, gather information to determine if patient is at increased risk of adverse reactions
 - m. Observe patients after administration of contrast media to detect adverse reactions
 - n. Recognize need for prompt medical attention and administer emergency c are
 - o. Document required information on patients' medical records
 - p. Clean and disinfect facilities and equipment and dispose of contaminated items in preparation for all procedures
 - q. Follow appropriate procedures when in contact with a patient in isolation
 - r. Monitor medical equipment attached to the patient (e.g., IVs, oxygen) during radiographic procedures

The terminal competencies, hereby provided, were developed by the program director. The initial document will undergo continuous revision if deemed necessary by the program faculty. With continuous use and revision, this system of evaluating competencies has proven to be an effective measure in producing graduates with a high quality of expertise in the field of radiologic technology.

K. PROGRAM DESCRIPTION

The Radiologic Technology program is comprised of 24 calendar months. After the completion, in sequence, of the program core courses, the student will be awarded a Certificate of Completion from the Santa Rosa Junior College Radiologic Technology program. Students may also follow the degree track, with an A.S. Degree granted after the successful completion of the general education requirements of SRJC. In order for a candidate to be eligible for the State Certification Examination, he/she must have: documented completion of the competencies defined by the ARRT as minimum eligibility requirements for the radiography primary certification exam; documented a passing grade of 75% "C" or higher in all didactic courses.

Upon successful passing of the ARRT national board certifying and/or State examinations, the candidate becomes certified as a radiologic technologist.

Please note that graduates on or after January 1, 2015 MUST have achieved an associate level degree or higher from an accredited institution as a minimum requirement to achieve certification as a radiographer in accordance with the ARRT.

The integration of the clinical and didactic education takes place in a sequential manner throughout the entire program.

During the first semester the student will begin to receive didactic instruction that includes all necessary knowledge in patient care skills, introduction to the Radiology field, basic patient positioning, and fundamentals of radiographic equipment and radiation protection, as well as the practical clinical experience at the rate of 18 hours a week.

In the second semester the student will be assigned to clinical affiliates where he/she participates 18 hours a week of clinical experience in accordance to the didactic instruction. As the program progresses, the clinical education load increases with the average of 27 clinical hours per week.

L. POLICIES PERTAINING TO TITLE V NOTIFICATION

Within 30 days, the program director or designee will report of any change in facility locations or telephone number, course offering, program official, clinical affiliation agreement, names and addresses of those discontinued students, as well as those who have graduated.

CERTIFICATES OF COMPLETION

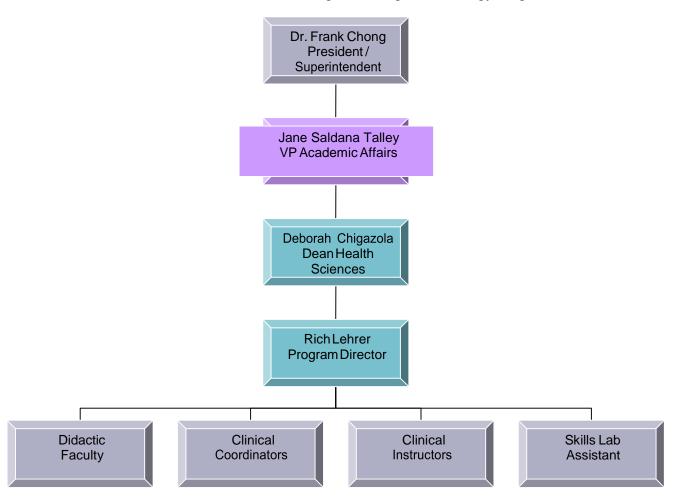
Program completion certificates will be issued by the college Admission and Records upon completion of the program didactic and clinical requirements.

Fluoroscopy certificate of completions will be issued upon completion of the following courses: RADT 61 B, 63B, and 66, where the fluoroscopy curriculum is taught.

Venipuncture certificate of completion will be issued upon completion of the following courses: RADT 66, where the venipuncture curriculum is taught.

All didactic and clinical course grades and academic records will be kept indefinitely, while clinical education documentation will be kept for a period of five years.

After 2003, the program will only maintain records of its past graduates pass/fail rate on the California state examination, if they are provided by the Radiologic Health Branch.



Organizational Structure of the Santa Rosa Junior College Radiologic Technology Program

Program Instructional Staff

Tammy Alander, Instructor/Clinical Coordinator 707-527-4920 Keith Diehl, Instructor - 707-527-4920 Diane Garcia, Instructor/Clinical Coordinator 707-527-4945 Rich Lehrer, Instructor/Program Director 707-527-4946 Janet McCann, Instructor/ Clinical Coordinator 707-527-4920 Bonnie Patterson, Instructor/Clinical Coordinator - 707-527-4945 Joanne Robertson, Instructor/ Clinical Coordinator 707-527-4920

Medical Advisor

Dr. Gary Shaw - 121 Sotoyome - Suite Z - Santa Rosa, CA 95402

Students will rotate through several clinical education settings in order to gain a large spectrum of clinical practices. A clinical coordinator will create clinical assignment rotations. They are directly connected and related to the didactic instruction that includes the positioning skills, radiographic principles, radiation physics, and special modalities. Published objectives, activities, evaluation criteria, and handbooks will be available to each student, clinical instructor, and staff members. Clinical coordinators will supervise students' activities in the hospital with the assistance of the clinical instructors.

In general, all activities related to the program will be conducted during the daytime -Monday through Friday. **Exceptions do apply.** All semester breaks and holidays will be observed as appears on the college calendar with the exception of spring break which is authorized as optional clinical time..

The radiologic technology courses are:

RADT 60 Introduction to Radiologic Technology. Equipment, digital technologies, health care practices and regulatory requirements.

RADT 61 series, consisting of RT 61A, B, and C. These courses are consecutive. The series covers all routine radiographic positioning and procedures, medical terminology, radiation protection, image analysis, anatomy, and related pathology. These courses include lecture and lab.

During the on-campus laboratory/demonstration sessions, students perform mock positioning, phantom projections, and radiographic exposure experiments. This activity must be supervised by a certified radiologic technologist faculty member. Students must observe strict radiation protection measures of the energized laboratory use policy of the related courses.

Labs are integrated as closely as possible with the lecture information. They are structured with specific activities and objectives for each three-hour period. The emphasis here is on

application of knowledge (e.g., doing hands-on experience). Skill testing is our major evaluative tool.

The RADT 63 series, consisting of 63A, and 63B, is consecutive over two semesters. This series covers all curricular material related to radiation physics, radiobiology, radiation protection, digital imaging, principles of radiographic exposure and processing, and quality assurance.

RADT 64 Patient Care provides students with fundamentals of patient care including the physical and psychological needs of the patient and their family, routing and emergent care, infection control and the role technologists take in outpatient education. This course includes lecture and lab.

RADT 65 Radiographic Pathology at the end of the second spring semester. All students are expected to complete a significant research project in written form, as a thesis format.

RADT 66 Special Modalities is also scheduled in the second spring semester. Topics include special procedures, CT, cross-sectional anatomy and requisite knowledge to achieve CA State Certification in fluoroscopy and venipuncture.

RADT 68 Preparation for Professional Practice in the second summer. Students will be assisted in the review for the state and national board registry examinations. Portfolio, résumé and employment skills are also presented. Approximate date of graduation is mid-July of the graduation year, 23 months after the admission date.

Closely related to the didactic coursework above are the clinical courses RADT 71 A-B-C-D-E and F. These clinical courses are designed to rotate students through clinical experiences in accordance with the didactic instruction. The intent is rotation through different clinical facilities over the different semesters. Students typically participate at their assigned clinical site for 9 hours per day.

Students may choose to participate in elective courses studying MRI and/or Mammography. These courses are elective in nature and only offered to our enrolled students during the fall and spring of their second year. Please contact the program director for these opportunities.

Cognitive, psychomotor, and affective skill developments are built on as the student progresses through the first year. Students are closely evaluated by on-going observations and skills testing. Those students who are not making satisfactory progress are counseled. The student's interaction with the patient and hospital staff is closely observed. By the second fall semester, the clinical education phase of the program becomes more critical. Students are required to be able to perform all aspects of routine radiography with supervision. Some on-campus laboratory activity will take place to reinforce any positioning covered thus far in the program. All positioning knowledge and skills thus far covered are put into practice.

I. ACCREDITATION

A. SANTA ROSA JUNIOR COLLEGE

Santa Rosa Junior College is approved by the Chancellor of the California Community Colleges and accredited by Accrediting Commission for Community and Junior Colleges, and Western Association of Schools and Colleges.

B. RADIOLOGIC TECHNOLOGY PROGRAM

The Radiologic Technology program, which leads to eligibility to take the certification examination by the American Registry of Radiologic Technologists (ARRT), is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 North Wacker Drive, Suite 2850, Chicago, Illinois 60606-2901 (312) 704-5300. Students are encouraged to review these JRCERT Standards and contact this agency for any concern pertaining to the Standards and their applicability/non-compliance. http://www.jrcert.org

Standards for an Accredited Educational Program in Radiography

Standard One: Integrity

The program demonstrates integrity in the following: representations to communities of interest and the public, pursuit of fair and equitable academic practices, and treatment of, and respect for, students, faculty, and staff.

Standard Two: Resources

The program has sufficient resources to support the quality and effectiveness of the educational process.

Standard Three: Curriculum and Academic Practices

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

Standard Four: Health and Safety

The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

Standard Five: Assessment The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.

Standard Six: Institutional/Programmatic Data

The program complies with JRCERT policies, procedures, and **STANDARDS** to achieve and maintain specialized accreditation.

All of our affiliated clinical education centers are recognized and approved by the JRCERT and by the Department of Public Health, Radiologic Health Branch of the State of California.

The college maintains a written formal agreement with all of our clinical affiliates.

Completion of the program entitles the graduates eligibility to take the ARRT National Board Certifying exam which is then applied as eligibility for the CDPH-RHB certification as a Certified Radiologic Technologist (CRT). The certificate is issued under the authority of the State of California Department of Public Health pursuant to the Radiologic Technology Act.

II. ATTENDANCE, VACATION, SCHOLARSHIP, PROMOTION, AND GRADUATION

A. ATTENDANCE

In addition to promoting the perception of professionalism, regular attendance and consistent progress are the two factors that contribute most to success in college. The program will adhere to the policy on attendance as written in the District policy manual at: http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A83PZ466E31A

Absence in no way relieves the student's responsibility for work missed. Arrangements must be made with the instructor for any lecture/lab classes missed or the clinical instructor for any clinical competencies missed. Students must notify the instructor of any absence, prior to the scheduled class time. Students must notify the clinical coordinator and the health care agency's clinical instructor and/or lead technologist of any absence, prior to the scheduled clinical experience.

Prolonged illness or injury requiring absence from clinic and/or class will require a physician's documentation citing the nature of the necessity for medical care, and a physician's release to return to clinical and/or class education. In the event that the number of hours missed will prevent a student from completing the minimum number of required hours for the semester course, that student is encouraged to pro-actively file for a withdrawal "W" grade and cite the medical necessity. This will allow the student to re-enroll in a course in a subsequent semester to continue their class or clinical time. See full policy on grading:

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A9CN465E0FB4

Habitual tardiness will not be tolerated and could be cause for dismissal. Attendance will be expected for special field trips, observations, or seminars.

Students are advised to schedule medical, dental, and other appointments outside of class, lab and clinical hours to avoid hour deficiency.

Students with children are advised to have contingency arrangements made for child-care in case of illness or other unforeseen circumstances.

It shall be the policy of the Sonoma County Junior College District to maintain an attendance policy and procedures consistent with State and local requirementAttendance

1.1 Students are expected to attend all sessions of the course in which they are enrolled.

- 1.2 Any student with excessive absences may be dropped from the class.
- 2.0 Excessive Absence Defined
 - 2.1 A student may be dropped from any class when the student's absences exceed ten percent (10%) of the total hours of class time. This includes clinical experience.

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A83PZ466E31A

- 2.2 If a student cannot complete a clinical course for medically justifiable reasons, then that student is advised to consult the program director for options regarding a grade of W (withdrawal) to continue in the program.
- 2.3 Instructors shall state in each course syllabus what constitutes excessive absence for that course.
- 3.1 Excused vs. unexcused absences
 - 3.2 Unless state or federal law requires that the absence be deemed excused, no instructor shall be required to make a distinction between excused and unexcused absences.
 - 3.3 If individual instructors wish to distinguish between excused and unexcused absences the instructor shall state in each course syllabus all criteria for any excused absences in additional to those required by state or federal law.
- 4.1 Nonattendance
 - 4.2 Students who fail to attend the first two class meetings of a full semester course, or the first session of an 8 week course may be dropped by the instructor.
 - 4.3 Students who fail to check into an on-line course within the first week may be dropped by the instructor.

B. HOLIDAYS/VACATION

Students are to follow the college holidays/vacation schedules as published in the current academic calendar. The dates published in the college catalog for the current year are used as the officially scheduled academic year.

C. GRADE COMPUTATION

The percentage value of the alphabetical grading in all radiologic technology courses may be assigned as follows:

Utilizing the course outlines of record, each instructor will advise the students to how she/he evaluates or weighs the graded components of a particular course.

Students must maintain a "C" or higher grade in each radiologic technology course at end of semester in order to continue in the program. For a student to remain in good academic standing in the radiologic technology program, a student must receive a minimum score of 75% on each test, exam, midterm, graded assignment, or final exam of every program core course. The same minimum final score of 75% must also be achieved in every clinical course. The consequence of not meeting this minimum standard is being placed on remediation status. Students who do not achieve a score of 75% or higher on a final exam may result in a final grade GPA of <75% in the course which will result in termination.

D. UNSATISFACTORY PROGRESS

Radiologic Technology Program Academic Remediation Plan

Faculty is committed to assisting students to be successful in the program. Therefore, radiologic technology students who do not meet the course objectives in the didactic, laboratory, or clinical environment will be apprised of their performance status using the progressive advisement process. This process also applies to students who do not meet the minimum score of 75% on each test, midterm, graded assignment or final exam.

Lecture, laboratory or clinical course

If a student earns a score of **less than 75% on any test, quiz, midterm, laboratory skill or clinical bi-weekly evaluation within the R.T. curriculum,** the student will be counseled which will result in being placed on remediation. A remediation plan will be initiated that will include identification of areas of weakness, goals for improvement and how those goals will be evaluated.

In case of plagiarism, the instructor could elect to implement any of the college regulations and penalties pertaining to this serious violation of college rules.

The instructor provides students with a <u>verbal warning or written feedback</u> as to their status. The instructor counsels students regarding criteria for successful completion of the course and makes recommendations for improvement. Recommendations may include, but are not limited to remediation with faculty assistance, utilization of peer study groups, tutors, self-study instruction,

and seeking assistance from counselors and instructors. Remediation plans will include a schedule for completion of recommendations. The student is expected to comply with the recommendations listed and be able to document that those recommendations have been completed on schedule. Remediation is considered a pro-active mechanism that identifies an area of deficiency, and suggests behavior that will mitigate that behavior.

Clinical course - If a student receives a failing score in ANY of the ten grading sections of the **biweekly progress report**, the student will be placed on remediation status, affording him or her opportunity to improve. A plan for improvement will be initiated with specific due dates.

Determination of unsatisfactory demonstration of skills in the clinical area will be based on clinical performance criteria and observations, students' performance, and the ability to follow the college and hospital policies, based on safe and competent practice. If improvement is not made within the remediation period, the student will be placed on probationary status.

Students who receive an overall final grade that is lower than 75% on the final clinical evaluation form, or a failure in any one or more of the 10 areas on the final clinical evaluation will fail the course and subsequently be dropped from the program.

At the discretion of the instructor and depending on the situation, a conference and/or placement on probationary status might be warranted. If the student does not comply with all terms outlined in the academic remediation plan, the student may be placed on probationary status or dropped from the program, as applicable.

E. UNSATISFACTORY PROGRESS

Radiologic Technology Program Academic Probation Plan

Probationary status is a period during which the student must improve or be dropped from the program. The student meets with the instructor and department chair. The faculty will complete a written probationary plan explicitly stating expectations that must be followed during the probationary period. Students will be placed on probationary status for the following:

Lecture Course & Laboratory Course - If a student has already been placed on remediation, and does not meet the terms of the remediation plan by failing to achieve a score of 75% or higher on any test, quiz, midterm or final exam, or if the student does not meet the terms of the remediation plan on the schedule set forth, the student will be counseled and placed on probation. The faculty will complete a written probationary plan explicitly stating expectations that must be followed during the probationary period. In the case of a lecture course, students on probation MUST achieve a score of 75% or higher on ALL subsequent exams, quizzes and scored material for the balance of that course. If a student is unable to comply with the terms of the probation plan, the student will receive a failing grade and will not be allowed to continue the program. Such performance failure will negate any successful completion of the didactic portion of the course.

Clinical course - If a student receives a failing score in ANY of the ten grading sections of the **biweekly progress report**, the student will be placed on remediation status, affording him

or her opportunity to improve. A plan for improvement will be initiated with specific due dates. Determination of unsatisfactory demonstration of skills in the clinical area will be based on

clinical performance criteria and observations, students' performance, and the ability to follow the college and hospital policies, based on safe, competent and ethical practice. If improvement is not made within the remediation period, the student will be placed on probationary status.

Students who receive an overall final grade that is lower than 75% on the final clinical evaluation form will fail the course and subsequently be dropped from the program. Students failing any one or more of the ten areas evaluated on the semester final clinical evaluation will automatically fail the clinical course and be dropped from the program.

Students may not return to probationary status a second time for the same cause. A student who repeats the conditions that originally placed him/her on probation will be dropped from the program. A second probationary period <u>may be allowed</u> if the **problem is of a different nature.** If further problems develop, the student may be terminated from the program without another probationary period.

If a student deviates from college, program or established hospital policy, or if the student demonstrated disregard for college, program or established hospital policy, the student may be placed on probation for the balance of time they remain in the program.

If a student is placed on probationary status due to poor performance in a course, that student must achieve a 75% or higher in all subsequent exams and quizzes for that course. Students who fail to achieve a 75% or higher on any final exam are at risk of failing the course.

If a student is placed on probationary status due to poor performance in a course and is subsequently dropped from the program, he/she will receive an "F" in that course. Students dropped in any program core course will not be allowed to continue the program.

If a student fails to show safe practice in a clinical or patient care skills course, the student will not be allowed to repeat the course. Students who demonstrate unsafe or unprofessional conduct will be dropped from the program for safety or professional conduct violations at any time during the program. If dismissed under this condition, students will be permanently disqualified from program re-admission.

F. SCHOLARSHIP AND PROMOTION

Students must maintain a "C" or above grade in each radiologic technology course in order to continue in the training. For a student to remain in good academic standing in the program, a student must continue to receive a minimum score of 75% on each test, exam, midterm, graded assignment, or final exam of every Rad Tech course. The same minimum score of 75% must also be achieved in every clinical course. The consequence of not meeting this minimum standard is being placed on remediation which may result in probationary status.

To remain enrolled and advance in the radiologic technology program, the student must achieve a grade of 75% "C" or higher in all radiologic technology courses.

G. SUSPENSION

Certain situations may require that a student to be immediately placed on probation, suspension, or recommended for withdrawal from the program. Actions that may lead to immediate probation, suspension, or possible dismissal include:

- Academic dishonesty
- Violation of patient confidentiality
- Inappropriate use of social media
- Falsification of documentation
- Unprofessional behavior that seriously jeopardizes the safety of patients, faculty, college and clinical staff, or other students, based on the ARRT Code of Ethics
- Failed remediation for academic performance
- Unsatisfactory clinical performance
- Unethical, unprofessional behavior, unsafe clinical or laboratory practice
- Under the influence of alcohol or illegal substances while in clinical or on campus
- Refusal to participate with a procedure
- Behavior deemed unprofessional based on the ARRT Code of Ethics
- Any other illegal activity as described by law

Any documented violation to the rules that involves the safety of patients or others will warrant an immediate suspension from both didactic and clinical environment.

H. INCOMPLETE GRADES ("T")

A grade of Incomplete may be granted only for **unforeseeable emergencies and justifiable reasons** close to the end of the term, and only when the student has maintained a satisfactory performance prior to the request for the "I." The Incomplete grade is not used as a mechanism to complete coursework that could have ordinarily been accomplished in the semester that it was assigned.

Regarding Independent Study courses, students will not be allowed to enroll in another RADT 98 or 102 course until they have completed any pending 98 or 102 courses in which they have registered.

I. CLASS DROPS

Classes dropped in a regular semester within the first three weeks will not be shown on the student's permanent record. For classes dropped beginning with the fourth week and prior to the end of the 14th week of a regular semester, a "W" grade will be recorded on the student's permanent record. Fee refund will be in accordance with the college practice. The student is advised to consult the college catalog and/or the office of Admissions and Records for all details of fee refunds. See full policy on grading:

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A9CN465E0FB4

Students dropping or being dropped from a R.T. course will automatically withdraw from the program. If a student fails to show safe practice in a clinical or patient care

skills course, the student will not be allowed to repeat the course.

J. LAPSE OF PRACTICE

If there is a lapse of 6 months between the time the skills learned in the didactic environment and the practice in clinical environment, students will have to be re-evaluated, to prove competence on all positioning skills that relate to the course that corresponds to the students' training stage. The program director, clinical instructor and clinical coordinator will oversee this process.

K. PROGRAM TERMINATION

Please review the policy on remediation and Probation.

L. NON-ACADEMIC COUNSELING

For non-academic and/or personal problems the student will be referred to the appropriate services on or off campus for assistance. Student Health Services 707 527 4445 in Race Health Science building and Student Psychological Services 707 524 1595 in Plover Hall are available for all students. Drop in's are welcome M-F. At Petaluma campus, 778 3919 for SPS and SHS

M. RE-ADMISSION

Students who wish to apply for re-admission will follow the established admission protocol. Students who have been dropped from the radiologic technology program for any reason other than grades are not eligible for re-admission.

N. COLLEGE GRADUATION AND PROGRAM CERTIFICATION

An Associate in Science degree with a major in Radiologic Technology shall be conferred by the Board of Trustees of the Santa Rosa Junior College District once a student has satisfactorily completed the General Education requirements including the specific core Radiologic Technology curriculum and are consistent with those prescribed by the Board of Governors of the California Community College and the Board of Trustees of the Santa Rosa Junior College District.

A Certificate of Completion will be awarded at the traditional Radiologic Technology Certification ceremony to all students who have successfully completed the entire program curriculum. The class representatives will plan for this ceremony. A faculty member may assist with the preparations. The faculty will attend the ceremony as guests of the graduates. In no way the program or the District is responsible for such an off-district event.

O. ARRT AND STATE LICENSING APPLICATIONS

Students will be responsible for applying for the ARRT National Certification RT examinations and the CDPH-RHB State of CA CRT by their deadlines. Students should apply for and schedule the ARRT National Board Certifying Examination, and then after receiving verification of passing that exam, apply for the CDPH-RHB State of CA CRT

certification. Students may also schedule the fluoroscopy permit examination after receiving the CRT.

In order to be eligible to take the licensing examinations, students must have completed all program core and graduation requirements. The licensing applications should be distributed in the following sequence:

ARRT Licensing: in April/May in the RADT 66 class, during the second Spring semester; State Licensing and Fluoroscopy Permit after receiving the ARRT National Board Certification

Students desiring certification in Mammography must register for RADT 102 and 102L course in Mammography and participate in 40 hours observational time while still a student in our program. However, those 40 hours are not counted as a part of the students overall clinical total. Students must find a clinical site affiliated with our program that is willing to take them for this additional 40 hour commitment.

III. DUE PROCESS /FAIRNESS AND GRIEVANCE PROCEDURES

The purpose of student complaint procedure is to ensure students due process in the resolution of a complaint. Student complaints may include (but are not limited to) issues regarding classroom instruction or other college services and offices as well as discrimination based on race, color, gender, religion, age, national origin, disability or sexual orientation. This procedure does not apply to student disputes about course grades which are resolved under the supervision of the appropriate instructors and instructional administrators. The program will not retaliate against the student as a result of filing a complaint.

Although all staff members representing the College are concerned with the welfare and discipline of students, it is the responsibility of the Vice-President of Student Services in concert with the other campus offices to see that rules and regulations are maintained. Answers to questions regarding Student Conduct Standards and Due Process Procedures are available at: http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A84P3W62AE40

Students are required to follow the format of SRJC due process for any conflict resolution. Students who feel that their needs have not been met even after the college's formal review on the matter are encouraged to review the JRCERT Standards that can be found at: <u>http://www.jrcert.org/students/process-for-reporting-allegations/report-an-allegation/</u> and contact this agency for any concern pertaining to the Standards and their applicability/non-compliance. The contact information of the Joint Review Committee of Education in Radiologic Technology is as follows: JRCERT- 20 North Wacker Drive, Suite 2850 - Chicago, Illinois 60606-2901 - (312) 704-5300.

STUDENT GRIEVANCE PROCEDURE

Grievance Policies and Procedures http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A84NYA622 89B http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A84P3W62 AE40

IV. RECORDS

A. STUDENT RECORDS

A master file will be started when the student is accepted and will contain the application, transcripts, and other documents required for training purposes.

At completion of the program all official information (copy of transcripts, record of clinical performance, and record of program completion), will remain on file for five years. The Office of Admissions will maintain SRJC permanent transcripts. All other information will be destroyed after five years of program completion, with the exception of the dosimetry records.

If a student withdraws prior to graduation, a summary statement of the student's progress and reason for withdrawal will be placed in the folder. This folder will be treated as described above.

Students may inspect their master file at any time under the direct supervision of the program director or an authorized faculty member.

All student records are confidential and information from them will only be given to authorized persons. Data such as grades, registry examination scores, health records, and performance evaluations may not be revealed without student's consent. Only personnel authorized by the program director will have access to in-progress student evaluations and files.

There is a signature page in this handbook that outlines students' rights and expectations regarding FERPA.

B. RIGHT OF PRIVACY (HIPAA)

CONFIDENTIALITY

Any information about a patient and/or event that occurs in a clinical setting is to be held confidential and may only be discussed in a patient care conference or with the student's instructor, technologists, and physicians. In the event that a student observes an event or behavior that he/she thinks might be unethical or illegal, the student is to discuss his/her observations with the clinical instructor who will provide the student with guidance in dealing with the situation appropriately.

Students will sign a form agreeing to hold confidential all information that comes to them as a result of the student's presence in the clinical setting in accordance with HIPAA. This form, among others, is at the back of this Student Handbook. Failure to maintain patient/facility confidentiality is considered unprofessional behavior and may result in a conference session. If the unprofessional behavior is repeated, the student may not be allowed to continue in the clinical setting.

Under no circumstances are students to copy any part of a client's/patient's record.

Students can access the charts of patients who have been assigned to the student for

diagnostic imaging purposes. Students and their clinical coordinators may access PACS to access radiographic images that a student has obtained as a part of the educational process. Under no circumstances are students authorized to access other patient's charts. This is a Health Insurance Portability and Accountability Act (HIPAA) violation of patients' rights. The student could be sued and it can be grounds for dismissal from the program. Students can only visit clinical units where they are assigned. No student is allowed in any clinical setting except when assigned by faculty.

Be aware of your responsibility, as well as the legal implications, by respecting the rights of others, especially the right of privacy. Do not discuss about any patient, any member of the health team, or any disease or symptoms in a place where you might be overheard and possibly infringe on someone's right to privacy. This includes elevators, cafeteria, parking lots, social media or other public areas. You are not to review any patient information, unless necessary to carry out your duties of a student in involved cases. We expect you to participate in the HIPAA trainings as required at your assigned clinical sites. Submit these verifications to your clinical instructors.

Patient records may be used only for the purpose of providing patient care. They may not be removed from the radiology departments without appropriate authorization. Information acquired from patient records is confidential. For classroom purposes, radiographic or other imaging must have all patient identification removed. HIPAA Law allows health care workers to disclose or have access to patient information only when directly involved in patient care.

Students are to strictly follow HIPAA requirements and practice as prescribed by individual clinical education centers. Violation of this requirement will be subject to immediate suspension and/or dismissal.

C. DOSIMETRY RECORDS

Each student's radiation exposure will be monitored on a monthly basis throughout the length of the program; records will be maintained by the college as part of a student's permanent file. The current dosimetry report will be circulated through the class, initialed indicating that you have reviewed and noted your current exposure level, and then permanently filed. Any excess in exposure will be followed-up in order to determine safe practice of ALARA. The program director Rich Lehrer acts as the primary RSO. The physics instructor Keith Diehl is the alternate RSO.

Any student who wishes to have his/her dosimeter records remain confidential from the other students in class, please notify the PD.

V. FINANCIAL EXPENDITURES - Fees (estimate)

<u>Approximate</u> costs associated with this program include:

1)	2 uniforms and shoes:	\$150
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2) books: 1st year: \$900

	2nd year:	\$100
3)	Immunization Vaccine Series, CPR certification	varies
4)	Registration fees check with college catalog	Varies ~\$45.00/unit
5)	Misc Supplies (2 years)	\$500
6)	Gasoline and other transportation needs	varies
7)	ARRT and Fluoroscopy Exam fees	\$400
8)	Misc Graduation and other non-specific	\$ 50

VI. GENERAL POLICIES

This handbook is not meant to replace the SRJC District Policy Manual or the individual course syllabus, but rather to serve as a supplemental source of information. You will find that it contains a general overview of the procedures and policies of the Radiologic Technology Program. It is your responsibility to become familiar with and abide by the policies and regulations as stated within this handbook. The District Policy Manual

http://www.boarddocs.com/ca/santarosa/Board.nsf/Public?open=&%252525253Bid= policies/8stuserv/8.1.5P.pdf# is the official document which defines SRJC policies and procedures and will rule in the event of contradictions between the two documents. The District may revise the policies and procedures at any time without prior notice.

A. ACADEMIC DISHONESTY

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A63TMC78051C

If the instructor has documented evidence that a student has committed an act of lying, cheating or plagiarism, the student could be recommended for expulsion from the college. If the incident involves cheating on an examination or paper, no credit will be given, or the assignment may be repeated under a different format at the discretion of the instructor. Students who repeat this type of dishonesty will receive an "F" grade for the course.

SRJC ACADEMIC INTEGRITY STATEMENT

Academic dishonesty is regarded as any act of deception, benign or malicious in nature, in the completion of any academic exercise. Examples of academic dishonesty include cheating, plagiarism, impersonation, misrepresentation of idea or fact for the purpose of defrauding, use of unauthorized aids or devices, falsifying attendance records, violation of testing protocol, inappropriate course assignment collaboration and any other acts that are prohibited by the instructor of record.

ATTENDANCE

Attendance Policy http://www.boarddocs.com/ca/santarosa/Board .nsf/goto?open&id=A83PZ466E31A

A. CHANGES IN PERSONAL DATA

It is vital to notify the Health Sciences staff, program director, and the Admission and Records office if there is a change of your name, address, telephone number or change of person(s) to notify in case of emergency.

B. CONDUCT

Students shall conduct themselves in a professional and ethical manner at all times. No profanity in the patient care areas is tolerated. Insubordination to faculty and clinical instructors, or dishonesty, could be a reason for immediate suspension from the program.

Student Conduct Standards & Due process

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A8QUHT7C30C3

C. CPR REQUIREMENT

Current CPR certification at the BLS Healthcare Provider Level / AED including adults, children and infants is required by the program and by the clinical sites. This includes cognitive AND skills evaluation. Check with the local chapters of American Heart Association or American Red Cross for CPR courses. Maintaining currency with this requirement is the student's responsibility. A two-year certification is recommended.

D. EMPLOYMENT DURING TRAINING

Due to the concentrated and intensified nature of the R.T. program, full-time employment is discouraged. If a student must accept employment, this implies that the student will:

1. never carry out functions of a radiologic technologist without proper license.

2. not accept employment hours which conflict with class/clinical time. No work

hour can be counted as clinical experience. Students are advised not to work if grades warrant concern.

F. HEALTH AND HEALTH SERVICES

ONCE ACCEPTED, student are expected to complete the following:

Complete physical examination form. Must use and submit SRJC form. Physical must be completed within the year prior to entering the program and signed off by a MD or NP only. This document includes general health questions as well as the medical clearance to wear an N-95 healthcare respirator.

https://radtech.santarosa.edu/sites/radtech.santarosa.edu/files/Rad%20Tech%20Health%20E val%20Form%202017.pdf

-Positive rubella and rubeola titer or positive antibody screen or MMR vaccine. -Second measles vaccine or MMR (minimum 4-6 weeks after initial MMR) for students born after 1957, or proof of immunity.

-Proof of negative PPD (TB test) within the last year. The two-step TB test will be required. After first PPD is read, you must make an appointment for a second PPD one to three weeks from the first one. NOTE: If positive PPD,

documentation of a baseline chest x-ray (radiology report) taken within the last year must be produced. A symptom-free form completed by an MD or FNP will need to be filled out one year after the chest x-ray.

-Hepatitis B vaccine series in progress - must have second vaccine by first day of school.

-Tetanus documented within the last 10 years.

-Evidence of immunity to varicella.

-Yearly influenza vaccination (this can wait until October each year)

-Current in-force CPR certification, healthcare provider with AED - adult, child,

& infant with cognitive and skills assessment.

All registered students may use the Health Services Department 527 4445 available on campus for any health related matters. During its closure hours, students may get emergency assistance at a contracted medical service or any Emergency Room.

G. LIBRARY REFERENCES

Students are encouraged to utilize the books, professional journals, research databases and pamphlets located in the college library. The SRJC Library homepage has a search tool to access research databases of scholarly journals. Students are encouraged to approach the library staff for aid in locating information and materials. New books are constantly added to the R.T. section. The Interlibrary Loan service is available through the Reference Librarian.

H. REQUEST FOR TIME-OFF

Students requesting three or more days off must present this request to the program director at least two weeks in advance. The program director or clinical coordinator will

communicate with the instructor(s) involved and to the student with a final decision.

If granted, students must discuss "make up" needs with affected instructor(s) prior to the leave.

TRANSPORTATION

Students are responsible for transportation to and from school and the clinical facilities. Students may park only in designated areas, both at the college and clinical settings. Refer to the campus parking regulations outlined in the college catalog. The travel time will not count as clinical or classroom time.

USE OF DRUGS/ALCOHOL/SMOKING

Students must abide by the following policies and guidelines:

- 1. Any personal medication used should be with physician guidance.
- 2. Drugs may not be taken from the clinical areas.
- 3. Proof of misuse of drugs or alcohol consumption while on duty or on district campus is grounds for immediate suspension or definitive dismissal from the program.
- 4. No narcotics will be allowed on campus or in clinical setting.
- 5. Repeated behavior under influence of alcohol is reason for immediate and definitive dismissal from the program.
- Smoking and/or tobacco use is prohibited on campus at all times and under all circumstances. This INCLUDES E-cigarettes. <u>http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A7QSY</u> <u>W6E03DC</u>

J. SEXUAL HARASSMENT POLICY

<u>Sexual Harassment</u> – <u>http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A5YP7B59CF46</u>

<u>Harassment & Discrimination Policy</u>– <u>http://www.santarosa.edu/polman/2govern/2.7.pdf</u> <u>http://www.santarosa.edu/polman/2govern/2.7P.pdf</u>

Sexual Harassment is Forbidden by Law

The Sonoma County Junior College District (Santa Rosa Junior College (SRJC), as your employer, must take all reasonable steps to prevent unlawful discrimination and harassment from occurring. Sexual harassment in employment violates Santa Rosa Junior College's policy and is prohibited under Title VII of the Civil Rights Act, California Education Code, Title IXof the Education Amendments, and the California Fair Employment and Housing Act.

Access for students with disabilities

These students are identified and honored by SRJC. These requests are facilitated through the Disability Resource Center, <u>https://drd.santarosa.edu/</u>

http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A83PHG64AA00

UNLAWFUL DISCRIMINATION POLICY

Harassment & Discrimination Policy <u>http://www.boarddocs.com/ca/santarosa/Board.nsf/goto?open&id=A5YM8</u> <u>K59F303</u>

VII. INSURANCE, ACCIDENTS, AND INCIDENTS

A. PROFESSIOLAL LIABILITY INSURANCE

Students are required to carry professional liability insurance. You will be automatically enrolled in liability insurance each year as part of class fees assigned to certain clinical courses. Students without current insurance coverage (not registered in the course) will not be permitted in the clinical area. For liability concerns, students are required to register BEFORE putting in hours for a clinical experience course.

B. WORKERS' COMPENSATION INSURANCE

Student insurance coverage is provided for all students for accidents that occur on campus or at college related activities, including clinical education. All injuries sustained by students in the clinical areas or on campus must be reported to the clinical instructor, coordinator, program director, and the Health Sciences staff (707-527-4271). <u>It</u> is the responsibility of the student to file the injury report and the SRJC incident reports within 24 hours in order to be covered by workers compensation through the college. FAX to 527 4967. Forms are available on the program website at the bottom of the "On-demand resources for students" or the "On-demand resources for CI's" page. https://radtech.santarosa.edu/demand-resources-students

Failure to report accidents and complete the required paperwork within 48 hours from the time of the injury may result in rejection of the claim by the workers' compensation insurance.

C. REPORTS of INCIDENT/SIGNIFICANT EVENT

If the incident involves injury directly to the student, the student must report to the SRJC Student Health Services or the local medical facility for medical treatment and formal release by medical personnel. A copy of the release must be placed in the student's file in the program office. All accidents or injuries involving a student in a clinical setting must be reported as soon as possible, within 24 hours, to the clinical coordinator. The supervising clinical staff in the clinical area should complete an incident report and state that the student was sent to Student Health Services for

evaluation.

If the incident involves the student and a patient, a formal incident report from the clinical site must be completed by the supervising clinical staff and a copy must be submitted to the Clinical Site Department Director. This reporting procedure will be followed to report and record any significant event that might occur during clinical rotation.

A significant event is any unexpected clinical and nonclinical occurrence that results in loss of life or bodily harms, disrupts operations, or threatens any institution's assets and reputation. Significant event is any event or circumstance, which is noteworthy and relates to both good and adverse events/incident.

Adverse reactions to contrast media Any invasive procedure - wrong patient, wrong side, organ, or part Significant deviation from the usual process of care Reportable incident to the State of California Internal or external disaster Regulatory sanctions Unusual occurrences Sentinel Events

VIII. CLINICAL EDUCATION

A. POLICY

By application and acceptance into this program the student has agreed to accept clinical assignments in whatever hospital/clinical she/he is assigned, regardless of geographical distance.

Students Will:

- 1. Have reliable transportation for class and clinical assignments, a reliable car or car pool with a backup plan.
- 2. Plan to attend clinical hours as assigned in the program.
- 3. Be clean and sober of all drugs and alcohol, having good physical and mental health, and the physical ability to work and do physical hands-on lifting and care for patients in the hospital setting.

B. PROCEDURE

The program director is responsible for arranging the clinical education rotations.

Criteria that are utilized to provide a student the necessary opportunity for achieving acceptable clinical competency objectives include the following:

- a) Exposure to a wide spectrum of radiologic procedures
- b) Experience in trauma, portable, surgical examinations and outpatient settings
- c) Re-assignment in accordance with a remediation plan

Several assessment reports are considered when selecting clinical assignments in an effort to insure a balanced clinical educational experience in terms of quantity and variety of radiographic examinations and clinical hours. These are:

- a) Monthly Record of Clinical Hours and total hours to date
- b) Clinical Evaluation Form
- c) Completion of Competencies

There are rare occasions when it may be in the students' best interest to reassign them to another clinical setting out of cycle. Those occasions are well documented and the student understands clearly why it is necessary. The program director will facilitate that process and it is limited to only one instance during the students' entire two-year educational program.

C. SPECIAL ROTATION OR ASSIGNMENT

Students who have successfully completed the required competencies may request for special rotations or assignments in any modality related to Radiology. These requests must be arranged by the student with the clinical instructors and approved by the clinical coordinator and program director. This effort is intended to assist the advanced students to have opportunity to explore other fields of expertise. **Note**: These hours may or may not be accepted and authorized as clinical hours.

D. MAMMOGRAPHY TRAINING

Students interested in Mammography certification are encouraged to participate in a RADT 102 and 102L elective in mammography and participate in the clinical hands on positioning portion while still in a student status. The clinical hours accrued in Mammography (40 hours) are NOT COUNTED as a part of the overall clinical total hours for Radiologic Technology program accrual. Students interested in this particular training will need to seek out their own clinical site at one of the sites already identified as one of our clinical affiliates. The reason for this is because enrollment in a 98 course as a student of the college protects all involved with professional liability insurance while training in this modality.

IX. CLINICAL EXPERIENCE OBJECTIVES

- 1. Exercise the priorities required in daily clinical practice.
- 2. Execute medical imaging procedures under the appropriate level of supervision.
- 3. Adhere to team practice concepts that focus on organizational theories, roles of team members and conflict resolution.
- 4. Adapt to changes and varying clinical situations.

- 5. Describe the role of health care team members in responding/reacting to a local disaster/emergency.
- 6. Support patient-centered clinically effective service for all patients regardless of age, gender, disability, special needs, ethnicity or culture.
- 7. Integrate the use of appropriate and effective written, oral and nonverbal communication with patients, the public and members of the health care team (peers, physicians, nurses, administration, etc.) in the clinical setting.
- 8. Discuss the development of personal and professional values.
- 9. Describe how professional values influence patient care.
- 10. Explain how a person's cultural beliefs toward illness and health affect his or her health status.
- 11. Choose patient and family education strategies appropriate to the comprehension level of the patient/family.
- 12. Manage interactions with the patient and family in a manner that provides the desired psychosocial support.
- 13. Evaluate the patient's status and condition before, during and following the radiologic procedure to demonstrate competence in assessment skills.
- 14. Demonstrate skills in assessing and evaluating psychological and physical changes in the patient's condition and carrying out appropriate actions.
- 15. Examine gender, cultural, age and socioeconomic factors that influence patient compliance with procedures, diagnosis, treatment and follow-up.
- 16. Adapt procedures to meet age-specific, disease-specific and cultural needs of patients.
- 17. Assess the patient and record patient histories.
- 18. Assess patient using the ABCDs of CPR and demonstrate basic life support procedures.
- 19. Respond appropriately to patient emergencies.
- 20. Interpret patient side effects and/or complications of radiologic procedures and contrast medium administration, and take appropriate actions.
- 21. Document care in the patient's record.
- 22. Apply standard and transmission-based precautions.
- 23. Apply the appropriate medical asepsis and sterile technique.
- 24. Prepare the technologies and methodologies to perform radiologic procedures.
- 25. Demonstrate competency in the principles of radiation protection standards to include time, distance, shielding and radiation monitoring.
- 26. Apply the principles of total quality management.
- 27. Report equipment malfunctions to assist with appropriate corrective actions.
- 28. Examine procedure orders for accuracy, and follow-up with corrective changes when applicable.
- 29. Support safe, ethical and legal practices.
- 30. Integrate the radiographer's practice standards into clinical practice setting.
- 31. Act consistently to maintain patient confidentiality standards and meet HIPAA requirements.
- 32. Carry out principles of transferring, positioning, immobilizing and restraining patient.
- 33. Comply with departmental and institutional response procedures to emergencies, disasters and accidents.
- 34. Differentiate between emergency and non-emergency procedures.
- 35. Adhere to national, institutional and/or departmental standards, policies

and procedures regarding caring for patients, providing radiologic procedures and reducing medical errors.

- 36. Ensure that performance reflects professional competence in selecting technical factors to produce quality diagnostic images with the lowest radiation exposure possible.
- 37. Critique images for appropriate clinical information, image quality and patient documentation.
- 38. Ensure that performance reflects professional competency in determining corrective measures to improve inadequate images.

CLINICAL PERFORMANCE EVALUATION

Clinical Evaluation Criteria

A) PATIENT CARE

- Maintains patient modesty, comfort, confidentiality.
- Behaves in a nonjudgmental, mature and compassionate manner to patients and their families.
- Properly handles patients and patient devices.
- Correctly identifies patient per department protocol.
- Uses a safe approach in transferring patients (must be fully supervised during first semester of training).

B) COMMUNICATION SKILLS

- Practices proper "hand-off" procedures.
- Shows understanding of instruction and direction
- Reads and understands requisitions.
- Demonstrates clear and complete understanding of all interactions essential to clinical performance.

• Consistently utilizes AIDET practices when communicating with patients, their families, and caregivers.

C) PROFESSIONALISM & ETHICS:

- Upholds the principles of the ARRT Code of Ethics.
- Projects professionalism under stress environment.
- Cooperates with technologists and demonstrates a team approach.
- Takes initiative and interest in their clinical education.
- Demonstrates judicious use of post-processing tools.

D) EQUIPMENT HANDLING

- Practice safe and respectful manipulation of all equipment.
- Demonstrates accurate use of digital equipment.
- Consistently aligns the X-ray tube and the IR.

E) POSITIONING SKILLS

- Identifies anatomy seen on the images at appropriate level of training.
- Marks images correctly according to department standards.
- Produces images of consistent high quality.
- Shows competency and proficiency with positioning at appropriate level of training.

F) CRITICAL THINKING & ADAPTABILITY

• Identifies and corrects positioning & technique errors at appropriate level of training.

- Recognizes causes of artifacts and their prevention at appropriate level of training.
- Adapts to new and changing situations or patient needs and makes reasonable decisions.
- Adapts and improvises to non-routine situations; ER, OR, Trauma.

G) ACCOUNTABILITY

- Adheres to the college and the department dress code.
- Demonstrates consistent reliability and punctuality with attendance.
- Shows consistent compliance to program's and the department's policies.
- Shows consistent compliance to the instructors' suggestions or recommendations.
- Remains alert and interested in the procedures asks pertinent questions.

H) RADIATION PROTECTION

- Collimates to the area of interest, and in accordance with the department protocols.
- Uses shielding on patients when possible.
- Selects technical factors according to ALARA.
- Maintains compliance of department protocol with women of childbearing age.
- Strives to keep repeated images to a minimum.
- Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery to the patient, and alters technical factors on subsequent images as necessary to minimize radiation exposure whenever possible.

I) ORGANIZATION

- Plans and organizes work efficiently anticipation of needs, room and equipment readiness.
- Demonstrates an organized and efficient work pattern during exams.
- Work at a pace appropriate for level of training.
- Demonstrates increased confidence and independence in executing tasks.

J) STUDENT CHALLENGE

• The student seeks input for this goal.

B. RECOMMENDED RESPONSIBILITIES OF THE CLINICAL INSTRUCTOR

Orientation:

- 1. Have written departmental policies available for students.
- 2. Conduct orientation sessions with incoming students to include HIPAA and the departmental radiation protection plan.
- 3. Have up-to-date routines as guidelines for all radiographic procedures, including projections for each procedure.
- 4. Have a system of technique guides for students orient students to type of processing, screens, tubes, bucky grid ratios, speeds, calibrations of machines, and safety procedures (radiation and electrical).
- 5. Encourage an environment of acceptance so that students feel like part of the department/team.
- 6. Assign lockers and parking stickers, if available.
- 7. Demonstrate equipment unfamiliar to students.
- 8. Insure that student gets an overall experience in the department during the initial part of the rotation.

9. Communicate to staff at what level students can perform, and the objectives for rotation--those skills that they need to learn; that they have not had any clinical experience to date.

Instruction:

- 1. Evaluate clinical performance of each student, in consultation with other staff. Make certain that all radiographic images taken by students are approved by a registered radiographer.
- 2. Assign students to their daily area of activity.
- 3. Identify weaknesses of students in terms of skill and personal interactions, counsel student accordingly, and tailor his assignments to help overcome skill deficiencies.
- 4. Conduct periodic image critiques.
- 5. Reinforce routines and policies throughout the rotation.
- 6. Motivate students' learning.
- 7. Share new ideas, procedures, and articles with students.

Record Keeping:

- 1. Maintain record of student assignments.
- 2. Maintain record of student's evaluation of clinical performance according to the prescribed schedule.
- 3. Generate and maintain record of any unusual events, such as lateness, disagreeable behavior, or negligent performance.
- 4. Maintain record of image critiques.

Student Counseling:

- 1. Recommend students for a three-way conference.
- 2. Evaluate, in consultation with the department manager, if a student dismissal is warranted.
- 3. Be aware of student problems--act as liaison between students and hospital staff.
- 4. Relate issues to college instructors in a timely manner.
- 5. Direct and assist students in case of accident or injury.
- 6. Insure that students are relieved for lunches, breaks, and on-campus work.

Accreditation/State Inspection:

- 1. Help college faculty complete appropriate forms.
- 2. Act as a representative during accreditation visits.
- 3. Become familiar with the JRCERT Standards, the Title 17, and RHB Regulations, and insure their implementation at the institution.

General Responsibilities:

1. Attend annual clinical instructor meetings.

2. Aid and encourage in student recruitment.

X. SECONDARY OBJECTIVES

In addition, the following set of minimum standards will be met as secondary objectives:

- 1. A minimum of three weeks of radiologic experience in a surgical suite.
- 2. A minimum of three weeks observational experience in CT.
- 3. Other observational experience as warranted.
- 4.

XI. ADDITIONAL OPPORTUNITIES FOR CLINICAL EXPERIENCE

The radiologic technology program does not authorize students to participate in clinical hours during semester breaks and legal holidays when the district campus is closed. The only exception to this is spring break. For further clarification on this, contact the program director.

Occasionally, students request the opportunity to spend additional hours in their assigned clinical settings to observe procedures that may not be readily available during regular hours. This process is designed to permit students to benefit from such clinical experience. JRCERT defines normal operating hours between 0500 & 1900 hours Monday – Friday.

However, clinical assignments occurring outside of regular daytime hours (e.g., evenings, weekends) will augment the students' clinical expertise by providing exposure to experiences that are less common to the regularly scheduled daytime hours. These assignments should be initiated by the student, pre-arranged, approved, and coordinated by the college clinical coordinator, the program director and the clinical instructors and be kept at a minimum level will always total <25% of total clinical hours while enrolled in the program. It should be noted that <u>night shift (gravevard) is never authorized for student participation to accrue clinical time</u>. During these evening and weekend assignments, the student shall always receive immediate supervision of a certified and registered radiologic technologist. These will be the objectives:

- 1. Learn, develop and apply time management skills to become more productive and to better utilize time.
- 2. Demonstrate independence and self-motivation in the clinical setting.
- 3. Practice good judgment and problem-solving strategies in obtaining radiographs in unusual circumstances while under the indirect supervision of a technologist.
- 4. Adapt and apply learned skills to the situations presented on the PM or weekend shifts. Obtain experience in trauma situations.
- 5. Recognize the differences between the PM/weekend and the day shift in regard to:
 - Types of exam performed
 - Types of patients encountered
 - Supervisory support availability

- 6. Demonstrate increased understanding of the "overall picture" in the radiology department and especially the need for teamwork, flexibility, and "cross-over" of duties under limited staffing conditions.
- 7. Develop and practice communication skills to better communicate with the medical staff, supervisors, co-workers, and patients enhancing the ability to work as a team member.
- 8. Develop and practice communication skills to better enable the student to deal with stressful and demanding situations.
- 9. Display and practice proper radiation protection techniques for the safety of patients, personnel, and self.
- 10. Record two special competencies in handbook that must be verified by the clinical instructor.
 - NOTE: **Immediate supervision** is interpreted as the presence of a qualified radiologic technologist adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

XII. STUDENT DRESS CODE FOR CLINICAL EDUCATION

A. POLICY

The following dress and personal grooming standards will be expected of all students in the R.T. program:

DRESS CODE AND APPEARANCE

It is essential that a high level of personal hygiene and appearance reflect a commitment to professional medical imaging. The clinical education centers require that students meet the agencies' dress code and standards, be appropriately attired, identifiable and maintain a high level of personal hygiene and grooming. Therefore, guidelines regarding the type of attire to be worn in the clinical area during patient care have been established by the program in consultation and agreement with the clinical agencies rules and regulations regarding dress code. In establishing these guidelines, infection control, safety and professionalism have been the primary concern.

In the clinical area while performing patient care:

1. **Uniforms:** must be clean and well pressed. Male and female students will wear matching "scrub type" pants and tops in the approved medium gray color (pewter or granite). These scrubs are available in local uniform shops. A white lab coat that is free from decoration or a "warm-up" jacket in the same gray color may be worn over the uniform.

At all times the uniform or lab coat must have the SRJC RT student patch visible on the <u>left sleeve</u>. The patch must be sewn to the left sleeve. The approved SRJC RT patchis available for purchase in the campus bookstore. Light colored apparel may be worn beneath the uniform.

2. **Photo I.D. Name Tag:** All RT student radiographers are required to wear the official SRJC RT photo ID name tag which designates their name and status while

in the clinical area. Pay fee to SRJC Accounting Department. Bring receipt to Health Sciences office where photo I.D. will be made at scheduled times. If you misplace badges, you must pay for a replacement (see Health Sciences staff for the purchase of new badges).

- 3 **Arm patches:** In the clinical and laboratory settings, program patches are to be attached to the left upper sleeve of the lab coat, warm-up jacket or scrub top. Students will pay for patches and they are available in the college bookstore.
- 4. **Personnel monitoring devices:** Dosimeters are supplied by Instadose and will be assigned to students prior to starting their clinical rotation. These are to be appropriately worn at all times while in the clinical affiliate. Students are responsible for reading them by the last day of every month. The cost of these devices is built in the annual lab fees. Lost dosimeters are replaced by the student with a fee that is to be paid to the dosimeter company. Broken dosimeters are replaced at no charge.
 - 5. **Shoes:** Shoes must be comfortable, clean, and in good repair. Leather shoes or athletic shoes are allowed if they are conservative in style and free of any decoration. No garish colors and/or contrasting laces please. No boots are allowed. No open-toe or open-heel, heels or sandal-type shoes are allowed because of Worker's Compensation regulations.
- 6. Hosiery and Socks: White or beige-type hosiery or white socks must be worn. There can be no decorations or designs on the stockings. It is expected that the socks and hosiery will be an appropriate length.
- 7. **Jewelry**: No jewelry except a small ring may be worn on the finger and a wristwatch with a second hand. One small pair of plain earrings in the ear lobe, but no "dangling" earrings. If visible, body jewelry should be covered or removed.
- 8. **Hats and Hair**: Hair must be clean and all long hair must be pulled back. Hair should not be an un-natural color. Hats may not be worn in class nor in clinical. If the student's assigned clinical site has a more stringent dress-code, the student is expected to comply.
- Nails and Makeup: Nails must be short, clean, and unpolished. No acrylic nails allowed. Natural nails should be less than ¹/₄ inch in length
- 10. **Tattoo's:** If visible, tattoos should be covered.
- 11. **Odors**: Both on campus and in the clinical setting, students must be free of odors which may be offensive or could cause allergic reactions. These include, but are not limited to: body odors, tobacco, perfume, perfumed powers and lotions, cologne and after- shave.

Students who are inappropriately dressed will be counseled and directed to return to clinical in proper attire. Such leave because of violation will not be counted as clinical hours nor emergency leave. Any non-compliance of the above policy could be ground for suspension from clinical education and eventual dismissal from the program. When in the clinical environment, students must wear the approved uniform and dress professionally with the SRJC RT photo I.D. name tag and SRJC RT patch visible and adhere to the above requirements. Students will have the following items in their possession at all times when in the clinical setting:

- A set of personalized positioning markers. The program director will direct you to a source to obtain these.
- A personnel monitoring device (radiation dosimeter)
- SRJC Photo ID nametag.
- Approved SRJC Radiologic Technology scrubs uniform

All students are required to wear the SRJC RT official uniform as described with the RT patch and photo I.D. name tag while in the campus X-ray lab or the campus Nursing Skills lab. The SRJC RT patch and photo I.D. name tag **should not** be worn by any student outside of the clinical experience or approved RT program functions. During clinical orientation, each instructor will inform students of the requirements for the clinical areas where uniforms are <u>not</u> required or when the uniform or attire is <u>unique</u> to that clinical area.

Santa Rosa Junior College and its clinical affiliates are not responsible for loss of valuables.

XIII. STUDENT ORIENTATION TO CLINICAL FACILITIES

A. POLICY

All students must be oriented to the affiliate where clinical experience is provided and to specialized areas such as Computerized Tomography, Operating Room, Emergency Room, Nursery, ICU, CCU and so forth. It is the responsibility of the clinical instructor to provide this orientation either personally or by arrangement with other staff members. Students MUST schedule for an orientation session PRIOR to the clinical assignment, and submit a completed Pre-Orientation form to the clinical instructor at this orientation session. First year – first semester students are exempted from the pre-orientation form.

The orientation session is tracked with the documentation available in the On-demand resources or in the clinical competency handbook. Please make a copy and then submit the signed original to your assigned clinical coordinator or to the program director.

PROCEDURE

Orientation will, at least, include the following, as applicable:

- Parking Regulations: location, permits, day/evening
- Break/Lunch Procedures: time and duration of meal and breaks and provisions for students bringing lunch
- Restroom Facilities: locations
- Personal Storage Areas: locker facilities and/or proper location for books, coats, bags, dosimeters, and valuables
- Safety Procedures: site's radiation protection plan, fire regulations, codes, security,

disaster plan, infection control guidelines, and standard precautions

- Notification Procedure: in case of absence or tardiness, reporting incidents.
- Mobile Units: C-arm and portable machines
- Ancillary Equipment and Supplies: location of grids, contrast media, immobilization devices, protective aprons/devices, lead markers, emergency cart, and linens
- Accessory Items: needles, syringes, tourniquets, I.V. tubing, emesis basins, bandaging material, gloves, etc...
- Special Equipment: operation of monitors, oxygen, I.V.s, etc.
- Introduction to Key Personnel: radiologist(s), administrative personnel, staff technologists, and ancillary staff
- Conference Facilities: location for rooms, regulations, staff meetings
- Student Assignments and Information: postings, posted student schedule, reject images for analysis, weekend /evening policy, assignments and expectations
- Resource Materials: radiographic positioning texts, teaching library
- Orientation to Department: routines, patient transportation, procedure manual, equipment operation, exam requisitions
- Radiographic and Digital Imaging Equipment: all rooms, phototiming devices, and technique charts.
- Department Radiation Protection Plan: reports, violation, reporting hierarchy.
- Communications During Clinical Assignment: emergency contact, outside phone calls, use of cell phone, visiting patients, contacting other students
- Hospital Information: history, bed capacity, HIPAA program
- Hospital Tour: OR, ICU, CCU, orthopedic clinic, women's center, and other ancillary departments, etc...
- Image Archiving System/RIS: student access code and privileges
- Non-Routine Positions: shoulders, knees, spine, etc.

XIV. CLINICAL EXPERIENCE GUIDELINES

A. DUTIES OF A STUDENT RADIOLOGIC TECHNOLOGIST

During the time the student is assigned to clinical training she/he may be expected to participate in radiographic procedures and possibly image library, patient transport, and other office procedures as long as their clinical education is not being compromised.

B. CLINICAL ROTATIONS

The program director is responsible for arranging the diagnostic clinical education rotations.

Personal vacations are to be scheduled only during times when classes are not in session.

C. CLINICAL SCHEDULING

1. **Clinical scheduling** - Clinical scheduling of the student is up to the discretion of either the clinical instructor and/or lead technologist of respective assigned department.

All students may be assigned to day, evening, or weekend shifts as long as proper supervision is maintained; equitable rotation schedules, in cases of multiple students, is provided and appropriate variety of radiographic examinations are observed. <u>Students are never allowed to participate between</u> <u>the hours of 10:00PM and 6:00</u> AM.

All weekend clinical hours must be arranged with the program director. Students requesting occasional weekend schedule will record the completion of at least one trauma case or other portable procedure in the competency handbook.

2. **Classroom attendance** - unless otherwise notified, students shall attend class at the college as designated in your specific class schedule.

3. **Special Rotation** - Students will be rotated into CT in the second year. The CT rotation will be 60 hours of observational clinical experience. If CT is not available for students to observe at a clinical site, the PD will make alternate arrangements. Observational rotations in other imaging modalities may be available at the student's assigned clinical site. The clinical instructor will be responsible for arranging these special rotations.

CLINICAL HOURS

Clinical hours are a State requirement of the training. Any falsification of submitted hours will be considered a breech of academic integrity and a violation of ARRT/ASRT ethics. Clinical hours shall not be compensated. Students will not be in clinical assignment when the college campus is closed due to holidays. The missing hours are expected to be made up before the semester ends.

When not busy, there will be no loitering. Use idle time for studying. Now is the time to ask those questions or explore issues that remain unclear to you.

A certain number of clinical hours are required for each semester beginning with the first semester of the first year. The total clinical time plus didactic time shall never exceed 40 hours per week nor 10 hours per day.

Students are required to keep a record of clinical hours that are accrued on a daily basis. The clinical instructor or his/her designee must validate this time sheet daily.

The original time sheets must be turned in to the program director at the first class meeting beginning of every month to document the accrued hours for the previous month. Only the original attendance records are considered valid. Scanned or FAXed versions are not acceptable meeting the guidelines above. Late timesheets will warrant a loss of credit. Students are encouraged to make a copy or take a picture for themselves prior to submitting their timecard. Students can expect to be notified of their total hours by e-mail periodically during the rotation or more often if warranted.

D. STUDENT EVALUATION OF CLINICAL EXPERIENCE

At the end of each clinical course the student is required to complete an evaluation of their respective clinical experiences. The evaluation is anonymous and is an opportunity for the student to make an assessment on her/his clinical experiences. Through candid evaluations, the faculty can identify the strengths and weaknesses of a particular clinical education setting and utilize this information for continuing program evaluation and improvement. Another area where this information is useful is in matching student's clinical experience weaknesses with those clinical education settings that can better remediate by providing clinical experiences that address a student's weaknesses.

E. STRIKE and MANDATORY CLINICAL TIME OFF

In the event of work stoppage or a mandatory clinical time off at an assigned clinical education center, students may request to be assigned to a temporary site. The program director will coordinate these occasions. Students will be assisted in scheduling the lost clinical hours to insure that they have the minimum number as mandated by the program.

F. BREAKS AND LUNCH PERIODS

Generally, there will be morning, lunch, and afternoon breaks. You must take these breaks, but do observe the departmental policy regarding breaks and lunch periods, and do not take excess advantage of break. Lunch breaks are 30 minutes are not to be counted toward the clinical experience hours and should not be included in the daily total clinical hours. If you are at a clinical site for 6 hours or more on any given day, you must take a lunch break. You may not 'work through' lunch in order to leave 30 minutes early.

G. PERSONAL PHONE CALLS

No personal phone calls should be received while in the clinical area except for emergencies. Departmental telephones may not be used for personal calls. You are required to observe the policy of cell phone use at all assigned clinical sites. Texting and Internet use on your cell phone is prohibited during clinical hours. You may use your cell phone during your breaks and lunch.

I. GUIDELINES FOR IMAGE ANALYSIS

In order to promote critical thinking and problem solving skills, the following outline exercise is to be used by students and instructors when preparing an image analysis activity.

Each student will be responsible for completing image analysis on assigned topics in the radiographic positioning courses (RT 61A, 61B, 61C). Knowledge in image analysis is expected of students in both didactic and clinical areas.

Criteria for conducting an image analysis session:

- Facility's identification requirements (facility name, patient name, age or birth date, ID numbers, procedure date and time) are visualized on the image.
- Correct marker is visualized on image and demonstrates accurate placement.
- Required anatomy is present on the radiograph/image.
- Proper location of the central ray.

- The relationships between the anatomical structures are accurate for the position/projection demonstrated
- Evidence of maximum collimation on the image.
- Evidence of radiation protection measure (gonadal shielding) on images when indicated, and good radiation protection practices are followed during the procedure. Bony cortical outlines and/or soft tissue structures are sharply defined (focal spot). Radiographic image is demonstrated without undesired distortion.
- Correct image receptor size has been used.
- Image and anatomical structures have been accurately aligned.
- Proper source to image receptor distance was used.
- Density is adequate to visualize the required body and soft tissue structures.
- Radiographic contrast adequately visualizes the bony and soft tissue structures of interest (radiographic technique).
- Exposure Index within tolerance
- No preventable artifacts are present on the image.
- The requested procedure and indications for the procedure have been fulfilled.

XV. RADIATION PROTECTION REGULATIONS

A. Radiation Protection Policy

General Principles

Except as required for medical reasons, no student or faculty shall receive radiation exposures in excess of the limits prescribed by the National Council on Radiation Protection in NCRP Report 116 Recommendations on Limits for Exposure to Ionizing Radiation. All applicable regulations of the State of California Department of Health Services and the Nuclear Regulatory Commission will be observed.

These rules are a combination of State and Federal regulations and/or laws and additional guidelines in the use of ionizing radiation. Further details on the Federal and State radiation protection regulations can be obtained at these websites:

- o <u>https://www.epa.gov/radiation</u>
- o <u>https://www.cdph.ca.gov/Programs/CEH/DRSEM/Pages/RHB.aspx</u>
- o https://www.nrc.gov/reading-rm/doc-collections/cfr/part020/

Make it your personal responsibility to practice all appropriate radiation protection procedures for yourself, for other members of the health care team and for the patient. This includes utilizing personnel radiation monitoring devices, observing rules such as closing doors during radiographic examinations, specific procedures of collimation, utilization of equipment safety devices, protective shielding and clothing, safety precautions with respect to radioactive materials, portable radiography, measures for protection of nonmedical assisting personnel and all other specific radiation protection measures indicated for procedures in the various specialties.

In addition to radiation protection procedures, observation of all appropriate general

safety, fire regulations and institutional regulations in effect for medical asepsis should be considered part of your personal responsibility in delivering safe, competent patient care. Make it your responsibility to know and understand these regulations.

ALARA

Consistent with the principles of ALARA, every effort will be made to keep radiation exposure as low as reasonably achievable by avoiding exposure to the public and to minimizing exposure of the patient consistent with good radiologic practice. The best practices of ALARA, as identified in the physics and positioning courses, should be followed conscientiously.

Personnel Safety Dosimetry Program

All Radiography students will be issued 1 personnel monitoring device (dosimeter) by the program director. This collar monitor is designed to approximate maximum exposure to the head and thyroid and must be worn at collar level outside of any protective apron and/or thyroid shield being worn. This radiation badge is to be worn at all times during clinical hours and must be read on a monthly basis. The radiation dosimetry reports are reviewed monthly with each student and initialed acknowledging your awareness of the most current reading.

Students who declare pregnancy will be issued a second dosimeter to be worn at waist level.

Never wear someone else's monitoring device, or allow someone else to wear your monitoring device.

Protective Clothing

All personnel who are in the procedure room during radiological procedures shall wear appropriate protective apparel.

Holding Patients

Student technologists are not permitted to hold patients during exposure. This violation can be deemed as a misdemeanor.

Pregnancy

Pregnant students are encouraged to follow the program policy for declared pregnant students.

Shielding

Students are required to appropriately shield all patients, regardless of age, unless shielding the patient for a particular would obscure the parts that are to be examined.

Collimation

All radiographic images must show evidence of proper collimation to the area of interest for the requested exam.

Female Patients of Childbearing Age

Student technologists must ask all women of childbearing age whether there is a possibility of pregnancy before performing any radiographic examination. If the patient is pregnant, or if there is any doubt regarding a patient's pregnancy status, the student must inform the qualified radiographer supervising them. That individual will consult a radiologist before any radiographic examination is performed, following the departmental policy.

The possibility of pregnancy in pediatric patients of childbearing age should be ascertained without the parent in the room since the patient may be reluctant to divulge possible pregnancy in the presence of a parent. The possibility that a pediatric patient is pregnant may not be divulged to the parent.

Do not irradiate a woman who may be pregnant unless this has been considered in the referral. If a radiographic examination must be performed on a woman who maybe pregnant, it must be performed under the direct supervision of a qualified radiographer

RADIATION PROTECTION PROCEDURE

The following safety rules have been established for the protection of the patient, other personnel, and you from ionizing radiation during your radiology observation and clinical education. These rules are a combination of State and Federal regulations and/or laws and additional guidelines in the use of ionizing radiation. These rules are mandatory, and any exception must be reported to the lead technologist and program director immediately.

All students are given access and orientation to the clinical sites' radiation protection plan/program during their orientation days.

- 1. Area postings
 - a. All students/staff utilizing the energized lab will adhere to the postings on the doors and walls of the area of the lab.
 - b. The Notice to Employees is to be prominently displayed
- 2. Regarding monitoring devices:
 - a. A monitoring device, properly placed, must be worn at ALL times during both the observation and clinical education phases.
 - b. When protective aprons are used, the monitoring device must be placed outside the apron, at the collar level.
 - c. Monitoring devices shall be read monthly. NO EXCEPTION. The dosimetry readings distributed, initialed, and archived. They are always available on the Internet.
 - d. Students will read their dosimeters during the last week of the

month and a report will be distributed to all students at the beginning of the month after the dosimeters were read. The student is expected to review and initial on the Dosimetry report that they have reviewed and acknowledged any exposure that they recorded. The program RSO or alternate RSO will counsel any student who exhibits monthly readings in excess of the following based on the accepted occupational and nonoccupational dose limits:

Organ, tissue	Yearly Occupational Dose Limits		Monthly SRJC Dose Limits	
	mrem/year	mSv/year //mSv/month	Mrem/year // mSv year mSv/month	
Whole Body	5,000	50 // 4.16/month	$100 \text{ yr } // \qquad 8.33/\text{month} \begin{array}{c} 1 \sim \\ 0.083/\text{month} \end{array}$	
Lens of the eye	15,000	150		
Shallow dose (skin and extremities)	50,000	500		

The whole-body dose limit is assumed to be at the **deep-dose equivalent** (a tissue depth of 1 cm). The **lens dose equivalent** is the dose equivalent to the lens of the eye from an external source of ionizing radiation at a tissue depth of 0.3 cm.

The **shallow-dose equivalent** is the external dose to the skin of the whole-body or extremities from an external source of ionizing radiation at a tissue depth of 0.007 cm averaged over and area of 10 cm².

e. Internal reviews of all monthly dosimetry readings are made on an on- going basis to make certain that students/staff are not operating faulty dosimeters.

3. Dosimetry services

- a. Provider: Quantum Products <u>http://www.instadose.com</u>
- b. Reporting Period: Monthly
- c. Reviewers of dosimetry records: Rich Lehrer, program director and Keith Diehl, adjunct faculty and every user. d.

4. When an X-ray exposure is about to be made, you MUST:

- a. leave the room, or
- b. get behind the lead shield, or
- c. be otherwise suitably protected for surgery, portable, or fluoroscopic work.
- 5. Specifically, you MUST NOT hold or support a patient during exposure.
- 6. During an exposure or procedure do not place yourself in direct line with the central ray, even though you are wearing a lead apron.
- 7. Under no circumstances will you permit yourself or any other human being to serve as "patients" for test exposures or experimentation.
- 8. While in training, students are allowed to assist in the performance of

fluoroscopic procedures (supervised by a Radiology Operator and Supervisor, and/or a certified radiologic technologist who has a Fluoroscopy Permit). During fluoroscopic procedures, you remain in the fluoroscopic room the following will prevail:

- a. A lead apron must be worn at all times or you must remain behind an adequate lead protective screen and not in direct path with either tube or patient.
- b. The monitoring device must be worn outside the lead apron at the collar level.
- c. You must stand as far from the patient and tube as possible, consistent with the conduct of the examination.
- d. You should continue to face the source of the radiation or the scatter rather than turning away from it.
- e. When practical, stand behind the secondary barrier.
- f. You should wear lead gloves and thyroid shield if you are in proximity to the patient (less than six feet).
- 9. With permission of the clinical instructor, you may make test exposures on inanimate objects. In so doing, all radiation safety rules must be followed, as well as tube safety factors, etc.
- 10. When observing radiographic procedures in surgery and bedside portables:
 - a. A lead apron must be worn
 - b. A monitoring device must be worn outside of the lead apron.
 - c. Stand as far from the patient and tube as practical while observing the patient
 - d. Stand so that the central ray is pointing away from your body.
 - e. Observe all regulations which apply to work in surgery, such as preserving sterile fields, wearing surgical garments, etc.. The staff technologist will provide details.
 - f. In addition, when observing, you must step outside the room if you cannot stand at least 6 feet from the patient or stand behind the staff technologist during the exposure.
- 11. Permission to make actual exposures on patients shall be determined by all of the following:
 - a. The opinion of the radiologist/lead technologist/clinical instructor.
 - b. The opinion of the program director/clinical coordinator/clinical supervisor. 55

- c. Your own feeling of security and proven competence.
- d. Successfully passed written exams in the didactic course for the specific procedure in the clinical environment.
- e. Successfully achieved competency check-off in the school laboratory setting for the specific procedure in the clinical environment.
- 12. If you are in doubt about practical procedures or practices regarding radiation protection, please contact the program director or clinical coordinator for clarification or instructions.

Overexposure Reporting Criteria and Procedure

All students, staff, and faculty are expected to be familiar with the Notice to Employees – Standards for Protection Against Radiation, as posted in the energized laboratory. All facilities where radiation is present are subject to the California Radiation Control Regulations

(California Code of Regulations, Title 17, Section 30255).

Any excess of radiation received by humans, other than for medical purposes must be reported in the prescribed notofication period, as applicable, to the Radiologic Health Branch

- Department of Public Health. The following conditions are considered excess exposure that can be indicated by an overexposure of a dosimeter.

- 1. Immediate notification if an individual has received:
 - a. A total dose equivalent of 25 rems (0.25 Sv) or more, or
 - b. An eye dose equivalent of 75 rems (0.75 Sv) or more, or

c. A shadow-dose equivalent to the skin or extremities of 250 rads (2.5 Gy)

2. Twenty-24 hour notification if an individual has received within 24 hours:

a. A total effective dose equivalent exceeding 5 rems (0.05 Sv), or

b. An eye lens dose equivalent exceeding 15 rems (0.15 Sv), or

c. A shadow-dose of equivalent to the skin or extremities exceeding 50 rems (0.5 Sv).

Note:

Twenty-four hour notification can be made to the telephone # 916-445-0931.

However, a confirmation form the RHB is to be expected within 24 hours.

Utilizing the Overexposure Report Form, anyone can and must report any overexposure that might occur during the course of study and work at Santa Rosa Junior College.

On campus:

Any concern, violation, or accidental exposure should be reported to the supervising faculty, program director, supervising dean, and the program director who serves as the district radiation officer.

At clinical site:

Any concern, violation, or accidental exposure should be reported to the supervising clinical instructor, clinical coordinator, department manager, program director, and the district radiation officers of the district and agency.

Santa Rosa Junior College Radiologic Technology Program Overexposure Report Form

In case of accident, incident, and/or errors related to radiation safety, all students, staff, and faculty will immediately (within 24 hours) of all events. Please be specific.

In the clinical environment, immediately following the incident, provide this completed form to a clinical instructor and coordinator.

All completed forms will be forwarded to the program director within 24 hours, in order to comply with the State reporting requirements.

Date	Location	What happened	Who is involved

Name

Contact Information (phone and email)

B. PREGNANCY POLICY

The sponsorship of the program adheres to the stated regulation Title 17 of the State of California and Title 22 of the U.S. Nuclear Regulatory Commission. A copy of this policy is provided to all female applicants prior to their admittance to the program.

Declared Pregnancy Policy

It is the philosophy of the School of Radiologic Technology to provide all students a safe environment for clinical experience and training. Furthermore, students in the procreative age and/or diagnosed pregnant are assigned and monitored in an environment that should be within the regulations on the Prenatal Radiation Exposure that are set out by the U.S. Nuclear Regulatory Commission.

In compliance with Nuclear Regulatory Commission Regulations regarding the declared pregnant student, female students have the option of whether or not to inform program officials of pregnancy.

A student who has chosen to declare her pregnancy will be allowed to choose one of the following options for completing the training at Santa Rosa Junior College. With notification of the program director, the student may change from one option to another at any time during the pregnancy as long as all program objectives, courses, and competencies are completed.

OPTIONS:

1. Continuing the training without modification or interruption. This option means that the student would agree to attend and complete all classes, clinical assignments, and competencies in a manner consistent with her peers within the guidelines set forth by the instructors and Santa Rosa Junior College.

2. Continuing the training with modification of clinical assignments. This option means the student would have the choice to delay clinical assignments and/or competencies in areas, such as fluoroscopy, portables, and surgery. Even though every effort would be made for the student to accomplish the aforementioned clinical assignments and/or competencies during the 23 months of the program, in order to accomplish this successfully the training may need to be extended.

3. The student may take a three-month leave of absence from the clinical setting. The student would be expected to continue attending didactic courses. The clinical assignment would be extended to comply with completion of 1785 clinical hours, as required by the State of California Radiologic Health Branch and the program.

4. If there is space in the next class, the student may withdraw from the program for a one year leave of absence from class and the clinical setting and then come back into the program at the beginning of the same semester, same place where she stopped out. She would become a member of the subsequent class.

Stipulations/Mutual Understanding:

- Student will sign and date the declared pregnant student statement.
- Student will present a letter from the attending physician releasing the student to continue in the training.
- Student will meet with the hospital/clinic Radiation Safety Officer, program director, and clinical instructor to discuss options and radiation protection measures.
- Student will not be present inside a radiographic room when radiation exposure is made.
- Student will not hold or restrain a patient receiving ionizing radiation.
- Student will wear a minimum of two radiation monitoring devices, one at abdomen level and the other at the collar/outside of the wraparound apron. The abdomen monitoring device will indicate the abdomen dose and will be monitored monthly for the entire gestation. It is the student's responsibility to submit her monthly dosimeters in a timely fashion.
- If monitoring records demonstrate the unborn child has received 500 millirems, the student will be immediately removed from the clinical setting and reassigned to an area or duty in which radiation hazards or exposure does not present any risk.

Un-Declared Pregnancy Policy

If a student decides to reverse her pregnancy status and un-declare pregnancy, she can provide a written statement to the program director. When tendered, the student's undeclaration of pregnancy reverts her status to the same rights and expectations as existed prior to when she declared pregnancy.

STUDENT SUPERVISION

Students must have adequate and proper supervision during all clinical assignments. Students must perform all medical imaging procedures under the direct supervision of a qualified radiologic technologist until students achieve competency. The following conditions constitute **direct supervision**:

A registered radiologic technologist reviews the procedure in relation to the student's knowledge and evaluates the condition of the patient in relation to the student's potential achievement.

A registered radiologic technologist is present during the performance of the procedure.

A registered radiologic technologist reviews and approves the completed procedure and its radiographs/images before their submission for interpretation.

A registered radiologic technologist is present during student performance of any repeat of unsatisfactory radiograph.

Students shall not take the responsibility or the place of qualified staff. However, after demonstrating competency, students may be permitted to perform procedures under indirect supervision.

Students may perform procedures under **indirect supervision**, which is defined as the supervision provided by a registered radiologic technologist immediately available to assist students regardless of the level of student achievement. **Immediately available** is interpreted as the presence of registered radiologic technologist adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

Students are not allowed to perform independently those exams in which they have not gained competency. They must be directly supervised until they gain competency in exams to be checked off.

The student will always be under direct supervision when working in the Operating Room, Angiographic/IR facilities, intensive care units, mobile (portable) radiography, CT, when working with pediatric patients under 18 years of age, or with traumatic spine patients in the Emergency Room, at all times during their clinical training regardless of having achieved a clinical competency previously.

Fluoroscopy by Student Radiographers

According to the California Health and Safety Code, section 106975, student radiographers are allowed to assist and perform fluoroscopic procedures under these conditions:

Students must adhere to the regulations established by the Department of Health Services (sec. 30423 and 30450, Title 17, Chpt. 5, Subchpt. 4.5) concerning the use of fluoroscopic equipment by radiologic technologists.

Students may not expose a patient to X-rays in the fluoroscopic mode for any reason or circumstance without direct supervision.

At all times, students will be directly supervised by Radiology and Fluoroscopy Operators and Supervisors, and certified radiologic technologists who possess fluoroscopy permits.

The approved clinical site would have in place a policy, procedure, and orientation for students' training in the category of fluoroscopy. Documentation as required by the program, student logs, and students' competency should be documented for each student's training.

Students must be under direct supervision of certified technologists, who possess fluoroscopy permits, when assisting with those fluoroscopic procedures in ER, OR, Intensive Care, pediatric cases, and other emergent situations.

XVII. SPECIAL POLICIES

A. INJURY and INCIDENT REPORTS

TRAINING RELATED INJURY/EXPOSURE TO HAZARDOUS SUBSTANCES

Students injured on campus will report to the Health Services office in the Race Building. When an injury or the condition of the student does not allow this, call Health Services (527-4445) and/or 911 if appropriate.

All clinical injuries must be handled through Kaiser Occupational Health or Emergency room. First aid may be administered by student and instructor at the clinical site before accessing the Kaiser Occupational Health Center.

During hours other than weekdays between 8:00 am and 5:00 pm, injuries and exposures

will be treated at the Kaiser Medical Center Emergency Room. In the event of a life threatening emergency or blood and/or body fluid exposure, the student will be seen on site in the clinical agency's emergency room.

In all instances of injury or exposure, the instructor is to be notified immediately even if not on site.

Reporting of Incident(s) in Clinical or Classroom Settings

Step 1: Inform your clinical instructor, clinical coordinator or program director and Health Sciences Office (707-527-4271) IMMEDIATELY after First Aid is given.

When in doubt or in an emergency condition, follow the clinical site's protocol for the treatment of their own employees, as directed by the clinical instructors.

If the incident occurs after hours or on a weekend, the student should report as described above in early AM of the morning of the next business day.

- Step 2: Within 24 hours of the incident, report to Health Sciences Office. Complete the "SRJC Health Services Incident Report" which is available on the Radiologic Technology program website under "On-Demand resources for students". Give this report to Health Sciences staff member. Further instructions may be given to you.
- Step 3: Within 24 hours of the incident, report to SRJC Health Services for treatment of the injury. A referral to an outside health care agency may be determined by the SRJC Health Services personnel.
- Step 4: Follow-up with program faculty.
 - B. Standard Precautions Policy/Protocol

Diseases Transmissible by Blood and Body Fluids e.g., AIDS and Hepatitis B

To prevent exposure to diagnosed infectious disease or unknown infectious bodily fluids, the following procedures and guidelines are to be practiced for ALL **PATIENTS/PERSONS:**

- 1. Hands washed before and after contact with every patient or specimen contact. Running water, soap, and about 10 seconds of friction is usually sufficient.
- 2. Gloves should be worn under the following circumstances:
- Liquid or semi-solid body substances
- Blood
- Urine or stool
- Standard (universal) precautions
- Follow this rule of thumb. If it's wet and it's not yours, you should be wearing gloves.
- 3. Cover gowns should be worn when soiling of the uniform is anticipated by the above substances. (Scrub clothing is available if the uniform inadvertently becomes soiled with these substances.)
- 4. If splattering or spraying of above substances is anticipated into the eyes or mouth of the health care worker, gloves and/or goggles shall be worn. (If inadvertent splattering or spraying occurs, the areas involved shall be flooded with saline solution or water until clear.
- 5. Disposable syringes, needles, scalpel blades, and other "sharps" should be placed into puncture resistant sharps containers located as close as practical to the area in which they were used. To prevent needle stick injuries, needles <u>should not be</u> recapped, purposefully bent, broken, removed from disposable syringes, or otherwise manipulated by hand.
- 6. Students who have a needle stick injury must report to Student Health Services where ongoing records will be maintained and monitored.
- 7. Handle all linen soiled with blood and/or body secretions as INFECTIOUS.
- 8. Wear an approved N-95 compliant mask for TB and other respiratory organisms (HIV is **NOT** airborne).
- 9. Place resuscitation equipment where respiratory arrest is predictable.

ADOPTED IN ACCORDANCE WITH POLICIES AND GUIDELINES OF THE C.D.C. (Center of Disease Control), AFFILIATE HOSPITALS AND CALIFORNIA NURSES ASSOCIATION.

C. Communicable Disease Policy Reporting Illness

The student must report illness, communicable diseases, and any condition that might affect the health of the student, patients, and hospital staff. This should be

reported to a program official or clinical instructor. Failure to report this will result in probation and possible dismissal from the program.

To protect those around you and as a safeguard to patients, all students are required to meet safe health standards. Any student with an elevated temperature (100° F or more orally), symptoms of urinary infection (dysuria, urgency, or frequency), symptoms of respiratory infection, symptoms of gastrointestinal infection, or symptoms of conjunctivitis must report the condition to a program official or clinical instructor, even though the student may be under the care of a private physician. The program official or clinical instructor is responsible for reporting the condition to the Infection Control Department at the clinical site.

HEALTH STATUS REPORT

Before the student returns to the program, the student's physician must verify a clean bill of health status. The student is responsible for making up lost clinical time and missed class work during his/her absence.

D. Standards of Ethics

Candidates must comply with the "Rules of Ethics" contained in the ARRT "Standards of Ethics." This includes, but is not limited to, compliance with state and federal laws. A conviction of, or a plea of guilty to, or a plea of nolo contendere to a crime, which is either a felony or is a crime of moral turpitude must be investigated by the ARRT in order to determine eligibility. Those who do not comply with the "Rules of Ethics" must supply a written explanation, including court documentation of the charges, with the application for examination. Additional information may be found in the ARRT "Rules and Regulations" and in the ARRT "Standards of Ethics" by contacting:

American Registry of Radiologic Technologists 1255 Northland Drive St. Paul, Minnesota 55120-1155 Phone: 651-678-0048

Individuals who have been convicted of, or plead guilty to, or plead nolo contendere to a crime may file a pre-application with the ARRT in order to obtain a ruling on the impact of their eligibility for examination. The individual may submit the preapplication any time after their first day of attendance in the professional phase of an accredited educational program. This process may enable the individual to avoid the delays in processing the application for examination, which is made at the time of graduation. The pre-application must be requested directly from the ARRT. Submission of a pre- application does not waive the registry's application fee, the application deadline, or any of the other application procedures.

The ARRT Standards of Ethics

The radiologic technologist/student conducts herself or himself in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

The radiologic technologist/student acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

The radiologic technologist/student delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socio-economic status.

The radiologic technologist/student practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

The radiologic technologist/student assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

The radiologic technologist/student acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

The radiologic technologist/student uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.

The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

The radiologic technologist/student respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

The radiologic technologist/student continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

Agreement Forms start on the next page.

<u>Confidentiality of Medical Information</u> <u>HIPAA Signature Form</u>

Inherent in patient care is both a legal and ethical responsibility to protect the privacy of patients. Consequently, the indiscriminate or unauthorized review, use or disclosure of personal information, medical or otherwise, from any source regarding any patient is expressly prohibited. Except when required in the regular course of business, the discussion, use, transmission or narration, in any form, of any patient information which is obtained in the regular course of study is strictly forbidden. Under no circumstances may any part of a patient's record be duplicated. Any violation of this policy shall constitute grounds for corrective conferencing.

Program students in the Radiologic Technology Program are exposed to and/or have access to both sensitive and confidential patient information. Under the Health Insurance Portability and Accountability Act, all program students have legal, ethical and moral obligation to maintain all patient information, written and oral, in complete confidence during their care only.

I,______, understand that I have 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. In no time, I will disclose the identity of any patients who will be entrusted under my care, by strictly adhering to the HIPAA regulations.

I further understand that violation of the patients' right to privacy will result in disciplinary action and subject to federal and state prosecution.

I have read the statement above, understand the significance of this policy and agree to abide with it.

Student's Name:

(print name legibly)

Student ID Number

Student Signature

<u>Confidentiality of Medical Information</u> <u>HIPAA Signature Form</u>

Inherent in patient care is both a legal and ethical responsibility to protect the privacy of patients. Consequently, the indiscriminate or unauthorized review, use or disclosure of personal information, medical or otherwise, from any source regarding any patient is expressly prohibited. Except when required in the regular course of business, the discussion, use, transmission or narration, in any form, of any patient information which is obtained in the regular course of study is strictly forbidden. Under no circumstances may any part of a patient's record be duplicated. Any violation of this policy shall constitute grounds for corrective conferencing.

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I further understand that violation of the patients' right to privacy will result in disciplinary action and subject to federal and state prosecution.

I have read the statement above, understand the significance of this policy and agree to abide with it.

Student's Name:

(print name legibly)

Student ID Number

Student Signature

Family Educational Rights and Privacy Act FERPA

Signature Form

I understand that while in this Radiologic Technology Program, my telephone number and e-mail address will be given to the appropriate personnel at the clinical agency to which I am assigned for the purpose of contacting me regarding any questions. I also understand that the clinical education center will keep my information confidential and not give my access information to anyone without my permission.

- 1. To the Health Sciences Department of Santa Rosa Junior College to release information verifying my class records, attendance, progress, financial aid and current status to the Department of Health Services, Radiologic Health Branch, JRCERT, ARRT, and other appropriate agencies (e.g., clinical education centers).
- 2. To Santa Rosa Junior College faculty and staff to release information verifying my class records, attendance, progress, and current status to the Health Sciences Department of Santa Rosa Junior College.
- 3. To other appropriate agencies, such as, California Department of Public Health Services, Radiologic Health Branch, JRCERT, ARRT, and other appropriate agencies (e.g. clinical education settings and other affiliates), to release information related to my progress, grades, status, performance, services received, and assistance needed to the Radiologic Technology Program at Santa Rosa Junior College.

I have read the statement above and understand the significance of this policy and agree to abide by it.

Student's Name:

(print name legibly)

Student Signature

Family Educational Rights and Privacy Act FERPA

Signature Form

I understand that while in this Radiologic Technology Program, my telephone number and e-mail address will be given to the appropriate personnel at the clinical agency to which I am assigned for the purpose of contacting me regarding any questions. I also understand that the clinical education center will keep my information confidential and not give my access information to anyone without my permission.

- 1. To the Health Sciences Department of Santa Rosa Junior College to release information verifying my class records, attendance, progress, financial aid and current status to the Department of Health Services, Radiologic Health Branch, JRCERT, ARRT, and other appropriate agencies (e.g., clinical education centers).
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- 3. To other appropriate agencies, such as, California Department of Public Health Services, Radiologic Health Branch, JRCERT, ARRT, and other appropriate agencies (e.g. clinical education settings and other affiliates), to release information related to my progress, grades, status, performance, services received, and assistance needed to the Radiologic Technology Program at Santa Rosa Junior College.

I have read the statement above and understand the significance of this policy and agree to abide by it.

Student's Name:

(print name legibly)

Student Signature

Child Abuse and Neglect Reporting Law Signature Form

Penal Code 11166 -- Reporter Responsibility

Definitions: The following situations are reportable conditions: physical abuse, sexual abuse, child exploitation, child pornography, child prostitution, neglect, extreme corporal punishment resulting in injury, and willful cruelty or unjustifiable punishment.

Who Reports: The following individuals are legally mandated reporters: child care custodians, health practitioners, commercial film or photographic print processors in specified instances, and child protective agencies.

When to Report: A telephone report must be made immediately when the reporter observes a child in his/her professional capacity or within the scope of his/her employment and has knowledge of, or has reasonable suspicion that the child has been abused. A written report, on a standard form, must be sent within 36 hours after the telephone report has been made.

To Whom Do You Report: You have a choice of reporting to the Police or Sheriff's Department or the Probation Department or Child Welfare Agency. Each County has preferred reporting procedure. Commercial film of photographic processors report only to law enforcement.

Individual Responsibility: Any individual who is named in the reporting law must report abuse. If the individual confers with a superior and a decision is made that the superior file the report, one report is sufficient. However if the superior disagrees, the individual with the original suspicion must report.

Anonymous Reporting: Mandated reporters are required to give their names. Non-mandated reporters may report anonymously. Child protective agencies are required to keep the mandated reporter's name confidential, unless a court orders the information disclosed.

Immunity: Any legally mandated reporter has immunity when making a report. In the event a civil suit is filed against the reporter, reimbursement for fees incurred in the suit will occur up to \$50,000. No individual can be dismissed, disciplined or harassed for making a report of suspected child abuse.

Liability: Legally mandated reporters can be criminally liable for failing to report suspected abuse. The penalty for this misdemeanor is up to six months in county jail, a fine of not more than \$1,000 or both. Mandated reporters can also be civilly liable for failure to report.

Notification Regarding Abuse: You are not legally required to notify the parents that you are making a report; however, it is often beneficial to let the parents know you are reporting for benefit of a future relationship.

I understand that I am a legally mandated reporter. I have clarified any information listed above which I did not understand, and am now aware of my reporting responsibilities, and am willing to comply. I have also been advised of reporting policies within this agency and understand them as well.

Student's Name:

(print name legibly)

Student Signature

Child Abuse and Neglect Reporting Law Signature Form

Penal Code 11166 -- Reporter Responsibility

Definitions: The following situations are reportable conditions: physical abuse, sexual abuse, child exploitation, child pornography, child prostitution, neglect, extreme corporal punishment resulting in injury, and willful cruelty or unjustifiable punishment.

Who Reports: The following individuals are legally mandated reporters: child care custodians, health practitioners, commercial film or photographic print processors in specified instances, and child protective agencies.

When to Report: A telephone report must be made immediately when the reporter observes a child in his/her professional capacity or within the scope of his/her employment and has knowledge of, or has reasonable suspicion that the child has been abused. A written report, on a standard form, must be sent within 36 hours after the telephone report has been made.

To Whom Do You Report: You have a choice of reporting to the Police or Sheriff's Department or the Probation Department or Child Welfare Agency. Each County has preferred reporting procedure. Commercial film of photographic processors report only to law enforcement.

Individual Responsibility: Any individual who is named in the reporting law must report abuse. If the individual confers with a superior and a decision is made that the superior file the report, one report is sufficient. However if the superior disagrees, the individual with the original suspicion must report.

Anonymous Reporting: Mandated reporters are required to give their names. Non-mandated reporters may report anonymously. Child protective agencies are required to keep the mandated reporter's name confidential, unless a court orders the information disclosed.

Immunity: Any legally mandated reporter has immunity when making a report. In the event a civil suit is filed against the reporter, reimbursement for fees incurred in the suit will occur up to \$50,000. No individual can be dismissed, disciplined or harassed for making a report of suspected child abuse.

Liability: Legally mandated reporters can be criminally liable for failing to report suspected abuse. The penalty for this misdemeanor is up to six months in county jail, a fine of not more than \$1,000 or both. Mandated reporters can also be civilly liable for failure to report.

Notification Regarding Abuse: You are not legally required to notify the parents that you are making a report; however, it is often beneficial to let the parents know you are reporting for benefit of a future relationship.

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Student's Name:

(print name legibly)

Student Signature

Spousal and/or Elder Abuse Reporting Signature Form

As of January 1, 1994, "Any health practitioner employed in a health facility, clinic or physician's office is required to make a report if he or she has knowledge of or observes a patient whom he or she knows or reasonably suspects is:

- a. Suffering from any wound or other injury inflicted by his or her own act or inflicted by another where the injury is by means of a knife, firearm or other deadly weapon, and/or
- b. Suffering from any wound or other physical injury that is the result of assaultive or abusive conduct."

Assaultive or abusive conduct includes many behaviors including murder, manslaughter, torture, battery, sexual battery, incest, and assault with a deadly weapon, rape, spousal rape, abuse of spouse or co-habitant.

I understand that I am a legally mandated reporter. I have clarified any information listed above which I did not understand, and am now aware of my reporting responsibilities, and am willing to comply.

My signature below indicates that I have received a copy of this document.

Student's Name:

(print name legibly)

Student Signature

SANTA ROSA JUNIOR COLLEGE Department of Health Sciences Radiologic Technology Program

Spousal and/or Elder Abuse Reporting Signature Form

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Student's Name:

(print name legibly)

Student Signature

Standard and Universal Precautions Signature Form

These guidelines apply to all students in any health care environment. All agencies mandate the use of Standard (Universal) precautions for all patients as recommended by Federal OSHA, American Hospital Association and the Centers for Disease Control and Prevention.

Standard precautions must be strictly followed whenever there is the possibility of contact with blood or other body fluids/substances from any patient regardless of diagnosis. Other potentially infectious materials (OPIM) are defined as the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluid.

Students are expected to know, understand, and follow these stated guidelines. Failure to comply will result in disciplinary action.

Standard Precautions

- 1. Blood, body fluid/substance must be handled with personal protective equipment (PPE) to reduce the risk of occupational exposure or transmission. Students are to avoid unnecessary contact with surfaces in close contact with patient.
- 2. Hand hygiene is required as soon as possible after removing gloves or other personal protective equipment and before and after contact with patients and specimens. All personal protective equipment shall be removed prior to leaving the work area.
- 3. Gloves are required when anticipated hand exposure to blood or other potentially infectious materials, mucous membranes, non-intact skin, potentially contaminated intact skin and touching contaminated surfaces or items may occur.
- 4. Personal protective equipment (PPE) such as gowns and disposable plastic aprons are required during procedures when splashing with blood, body fluid, and other potentially infectious materials is anticipated.
- 5. Personal protective equipment (PPE) such as masks, face shields, ventilation devices, protective eyewear are required during procedures when splashing, spraying, splatter or droplets of blood and other potentially infectious materials to the eyes, nose or mouth is anticipated.
- 6. Face shields, masks with attached shield or a mask and goggles are required during aerosol generating procedures.
- 7. Used syringes and disposable sharps are required to be disposed of immediately at point of use in puncture resistant containers.
- 8. Laboratory specimens or other potentially infectious materials (OPIM) are required to be processed and handled in a safe manner using biohazard symbols, secondary container or clear bags.
- 9. Emergency resuscitation equipment such as ambubags, mouthpieces, pocket masks, and ventilation devices are required in resuscitation situations.
- 10. Unprotected contact with blood or other OPIMs requires immediate and thorough washing of the affected area. Needle sticks or other contamination of mucous membranes from blood or OPIMs requires notification of clinical instructor.

Your signature indicates that you have read, understood, and agree to abide by the information provided in this form.

Student's Name:

(print name legibly)

Student Signature

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Student's Name:

(print name legibly)

Student Signature

Acknowledgement and Signature Form Positioning and Patient Care Skills Practice Laboratory

As a student in the Radiologic Technology program, I understand and agree that certain skills learned as part of the curriculum may be practiced in the laboratory student-to-student. I agree to participate in these practice activities as both the patient and the student radiographer.

I further understand and agree that no invasive skill (i.e., injection, venipuncture....etc.) will be performed without the direct supervision of the instructor, nor will it be performed outside of specific lab practice time. Venipuncture skills will be taught in the RADT 66 class.

By my signature below, I hereby release SRJC and the Radiologic Technology Program from any liability due to any potential damage or injury which may occur as a result of my participation in these classes.

Student's Name: _____

(print name legibly)

Student Signature

Date

(Signature)

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Student's Name: _____

(print name legibly)

(Signature)

Student Signature

MRI Student Screening

Student Name: _____Date: _____ Please Print

Please check all that apply to you.

Do you have or are you	Yes	No	Do you have or are you	Yes	No
wearing the following:			wearing the following:		
Defibrillator, Pacemaker, or			Metallic foreign Body (Gun shot		
Pacemaker wires			wounds and/or metal shavings in eyes)		
Aneurysm Clips			Non Removable hearing Aids		
Heart Stents			Pregnant		
Artificial Heart Valves			Prior Ear or Brain Surgery		
History of Cancer			Claustrophobic		
Metallic			Dental braces or retainers		
Implants/Prosthesis					
Orthopedic Devices			Removable Dental Work		
Surgical Clips			Ever worked with sheet metals		
Glitter Eye Make Up			Irregular Heartbeat		
Tattoos			Medication Patches		

The student must be aware that the MRI scanner is a very powerful magnet; as such you are not allowed to bring any ferromagnetic objects into the MRI suite.

- Do Not wear any jewelry or watches within MRI Zone 4.
- Do Not have anything in your pockets. Be sure your pockets are empty of any objects that can be attracted to the magnet.
- Do Not bring your purses and wallets with you into MRI Zone 4. The magnet will erase • all credit cards, driver's license, ATM cards, etc. The magnetic strip will be erased and render them useless.

I understand all instructions and have answered all questions truthfully. I also understand that if I answer yes to any of the above questions, I may not be allowed in the MRI suite. I fully release the clinical facility and SRJC from all responsibility if I do not truthfully answer the above questions.

Student Signature:

MRI Student Screening

Student Name: _____Date: _____ Please Print

Please check all that apply to you.

Do you have or are you	Yes	No	Do you have or are you	Yes	No
wearing the following:			wearing the following:		
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Pacemaker wires			wounds and/or metal shavings in eyes)		
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Student Signature:

SRJC Radiologic Technology Program Grievance Resolution

My signature below indicates that:

- 1. I have knowledge about the process of grievance resolution here at Santa Rosa Junior College.
- 2. I understand that there is a process which needs to be followed in the resolution of any grievance. I agree to comply with this process.
- 3. I understand and agree that I have the right to due process as a part of grievance resolution, and will follow the established guidelines outlined on <u>https://rightsresponsibilities.santarosa.edu/complaints-grievances</u>
- 4. Students who feel that their needs have not been met even after the college's formal review on the matter are encouraged to review the JRCERT Standards that can be found at <u>http://www.jrcert.org/students/process-for-reporting-allegations/report-an-allegation</u> and contact the JRCERT for any concern pertaining to the Standards and their applicability/non-compliance. The contact information of the Joint Review Committee of Education in Radiologic Technology is as follows: JRCERT- 20 North Wacker Drive, Suite 2850 Chicago, Illinois 60606-2901 (312) 704- 5300.

Student's Name: _____

(print name legibly)

Student Signature

SRJC Radiologic Technology Program Grievance Resolution

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Student's Name:

(print name legibly)

Student Signature

Photo Release Form

I, the undersigned, hereby irrevocably consent to the unrestricted use by Santa Rosa Junior College (SRJC), of my name and any and all photographs or video footage that SRJC has taken of me during my training at SRJC for all purposes, including without limitation, college art, graphics, editorial, publications, media, advertising, or trade without compensation to me.

I hereby waive any right to inspect or approve the finished photograph, advertising copy, or printed products that may be used in conjunction therewith, or to the eventual use that it may be applied. In connection to the foregoing, I release and hold harmless Santa Rosa Junior College from all liability. All photos will remain the property of SRJC and will not be sold or used by another agency or organization for commercial purposes.

I warrant that I am providing modeling services as an independent contractor, freelance, or professional without pay. This agreement constitutes the sole, complete, and exclusive agreement between Santa Rosa Junior College and me. I am not relying on any other representation whether oral or written.

Student's Name:

(print name legibly)

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Student's Name:

(print name legibly)

Student Signature

STUDENT AGREEMENT

I have read the **Santa Rosa Junior College Radiography Student Handbook** and do not require any further clarification.

I, undersigned, understand and agree to abide to the policies and procedures as written in the student handbook, during my entire educational program of Radiologic Technology at Santa Rosa Junior College. I further understand that violation committed by me could lead to consequences as listed in the college catalog, as written in the handbook, and as stipulated in the Standards of the American Registry of Radiologic Technologists and the State of California Radiologic Health Branch.

In addition, I hereby agree to comply with all clinical assignments that will be given to me during my entire training at Santa Rosa Junior College.

Print Name:_____

Student ID #: _____

Signature

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Print Name:_____

Student ID #: _____

Signature

SRJC Radiologic Technology Program Acknowledgment & Signature Form

My signature below indicates that:

- 1. I have knowledge about universal body precautions/body substance isolation per CDC and OSHA guidelines and I know that I must comply with these guidelines to protect myself and patients for whom I am caring.
- 2. I have knowledge of the laws that require the reporting of child, spousal and elder abuse. I agree to comply with these laws.
- 3. I have knowledge of the importance of maintaining confidentiality. I agree to hold confidential all information that comes to me as a result of my presence in a clinical setting. I agree to discuss such information only in a clinical conference, with my clinical instructor or appropriate agency staff.
- 4. I have read the current Student Handbook and have been given an opportunity to clarify its content. I agree to abide by the guidelines and procedures as stated in this Student Handbook and in each course syllabus.
- 5. I have been informed that clinical experience is a State-required component of the curriculum. I will be available for clinical assignment to any assigned shift and for any of the seven days of the week between the hours of 0700 and 2000 for the entire training. I understand that my placements at clinical assignments are solely at the discretion of the program.
- 6. I have been informed that my contact information will be given to clinical education centers. I agree that my telephone number may be given to the clinical education centers and I also agree to keep the Health Sciences office and my clinical and college instructors informed regarding my current address, telephone number and e-mail address.

Student's Name:

(print name legibly)

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Student's Name: _

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