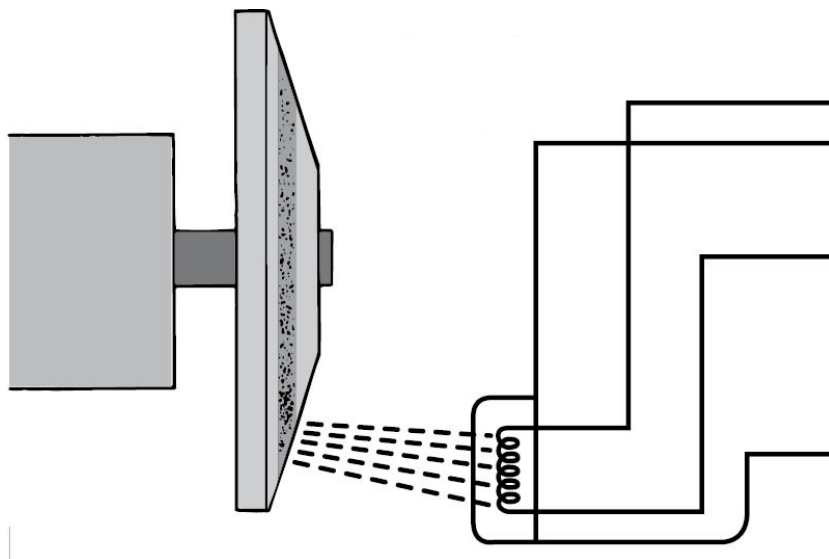




**RADIOLOGIC TECHNOLOGY PROGRAM**  
**STUDENT HANDBOOK**  
**2023-2025**



Associate of Applied Science Degree in Radiologic Technology

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## INTRODUCTION

We welcome you to the Radiologic Technology program! This is an exciting time in your life and your hard work will result in a very rewarding career. In order to ensure effective education in the Radiologic Technology program, each individual participating in the program must have a full understanding of the responsibilities and considerations involved. This handbook has been designed as a guide to provide the student with the necessary information regarding the policies, procedures, and expectations which govern the students enrolled in the program. This handbook should not be considered a complete official statement of all policies of Zane State College or the Division of Health, Liberal Arts, and Public Service. It is meant to be a guide and assist the student in reaching his or her goal as a radiographer. More information is provided in the Zane State College Catalog and Student Handbook.

Please read the following pages and ask for further explanation on points that you feel need clarification. The College, College administration, RADT program, and RADT faculty reserve the right to revise any portion of the program or contents of this handbook at any time. Any changes pertinent to the students enrolled in the RADT program will be communicated to them by the RADT faculty.

## MISSION OF ZANE STATE COLLEGE

Empowering People through Education.

## MISSION OF THE HEALTH & PUBLIC SERVICES

The mission of the division, as embodied in the College strategic plan, is to equip students with the ethical standards, knowledge, and practical experience necessary to provide quality service throughout their chosen careers, availing themselves of lifelong learning and serving the diverse needs of the community in the 21st century.

## MISSION OF RADT PROGRAM

The Radiologic Technology program offered by Zane State College is designed to prepare students for careers as imaging professionals. Through didactic and clinical learning experiences, the program provides opportunities for students to develop clinical competency while striving for professional excellence and future career development.

## STATEMENT OF PURPOSE

The 24-month Radiologic Technology Program offered by Zane State College is designed to prepare students for professional careers as radiographers in the medical field. By providing pertinent learning experiences, the program enables students to demonstrate competency in the didactic and clinical aspects of the field. In addition, the program attempts to develop student interests in the professional Societies and continuing education.

The curriculum involves 25 credit hours of didactic course work in Radiologic Technology, 12 credit hours of clinical course work, and 31 credit hours of general and basic education requirements. The curriculum (didactic and clinical) is designed in accordance with the guidelines set forth by the Joint Review Committee on Education in Radiologic Technology. The assessment procedures include written and oral exams and assignments, laboratory experiments and a competency-based clinical education plan.

\*Upon successful completion of the requirements of the program, the student is awarded an **Associate of Applied Science degree in Radiologic Technology** and is eligible to apply to take the national certifying examination of the American Registry of Radiologic Technologists (ARRT).

Zane State College is an accredited institution as granted by the Higher Learning Commission of North Central Association of Colleges and Schools. The Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology.

JRCERT  
20 N Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
[www.jrcert.org](http://www.jrcert.org)  
Email: [mail@jrcert.org](mailto:mail@jrcert.org)

\*If a student has been convicted of a felony or misdemeanor, the American Registry of Radiologic Technologists may or may not allow the student to take the national certifying examination.  
(ARRT Examinee Handbook).

ZANE STATE COLLEGE  
RADIOLOGIC TECHNOLOGY OUTCOME ASSESSMENT

The Radiologic Technology program offered by Zane State College is designed to prepare graduates for professional careers as radiographers in the medical field. By providing pertinent learning experiences, the program enables students to demonstrate competency in the didactic and clinical aspects of the field. In addition, the program attempts to develop student interests in the professional societies and continuing education.

An entry-level paraprofessional with an associate degree in Radiologic Technology from Zane State College will be able to:

- A. Demonstrate clinical competency.
  - 1. Students will display radiation protection.
  - 2. Students will exhibit patient care skills.
  - 3. Students will demonstrate radiographic skills.
- B. Demonstrate problem solving and critical thinking skills in radiography.
  - 1. Students will perform radiographic procedures on non-routine or trauma patients.
  - 2. Students will critique radiographic images.
  - 3. Students will provide corrective action for suboptimal diagnostic radiographic images.
- C. Exhibit professional interpersonal communication skills.
  - 1. Students will demonstrate effective written communication skills.
  - 2. Students will demonstrate effective oral communication skills.
  - 3. Students will demonstrate effective communication in the clinical setting.
- D. Demonstrate the value of professionalism by supporting the Code of Ethics and lifelong learning.
  - 1. The student will apply professional and ethical behavior.
  - 2. The student will demonstrate professionalism in the clinical setting.
- E. Program Effectiveness
  - 1. The graduate will pass the ARRT certification exam on the first attempt.
  - 2. The graduate will acknowledge satisfaction with the Radiologic Technology Program.
  - 3. The graduate will perform competently as an entry level radiographer.
  - 4. The graduate will be employed within six to twelve months following graduation.
  - 5. Students will successfully complete the Radiologic Technology Program.
  - 6. The graduate will achieve a score that meets or exceeds the national average.



## Statement of Program Effectiveness

RADT program effectiveness will be evidenced by the criteria which are listed below:

- Ninety percent (90%) of all RADT graduates will pass the ARRT national certification examination in radiography on the first attempt.
- The average scaled test score for the ARRT national certification examination in radiography will meet or exceed the state average for Ohio.
- Seventy-five percent (75%) of the students enrolled in the RADT program will complete the program.
- Seventy-five percent (75%) of the graduates will gain employment within six to twelve months after graduation.
- The RADT students will meet or exceed an average score of eighty-five percent (85%) for the Trauma Lab Practical in RADT 2990.
- The students will meet or exceed an average score of eighty five percent (85%) in the area of communication on the Clinical Affective Evaluation.
- One hundred percent (100%) of graduate respondents will rate the overall program satisfaction as 3.5 average or better (on 1-5 Likert Scale).
- One hundred percent (100%) of employer respondents will rate the graduates' professionalism as 3.5 average or better (on 1-5 Likert Scale).
- One hundred percent (100%) of employer respondents will rate the graduates' problem solving and critical thinking skills as 3.5 average or better (on 1-5 Likert Scale).

## RESPONSIBILITIES OF A RADIOGRAPHER

Today the art and science of medical radiography has grown to encompass a multitude of responsibilities. The enormity of these responsibilities is often underestimated not only by the layman but by radiographers themselves.

Responsibility involves a duty or a trust. The radiographer has a duty to perform tasks to the very best of their abilities and to improve these abilities whenever possible. The focus of attention in these objectives is the PATIENT, the quality of whose radiographs must be of a caliber that injuries and disease are unmistakably evident. The quality of the radiograph allows the radiologist to detect and diagnose different pathologies and the physician or surgeon to treat or repair. Therefore, the price placed on the radiographer's ability or lack of it is very high.

In the execution of their daily duties (as outlined in the sample job description), the radiographer must work in harmony with professional and non-professional personnel. They must be able to accept duties assigned to them by their superiors and delegate duties to their subordinates according to their status. In a department filled with students, every radiographer automatically becomes a teacher, supervisor, and a role model for the students.

The profession of Radiologic Technology is only one of the paramedical and medical professions whose effect is expended on behalf of the welfare of the patient. What is the impression that we, the radiographers, give to the patient as we perform the radiographic examinations? Be assured that the patient is aware of our every move, our every mood. The patient is going to be keenly aware of the sincerity of our efforts. Do we believe in what we are doing? Are we doing it with confidence? Does the patient sense our desire to help them as an individual?

Every patient is an individual human being, and regardless of their material wealth or lack of it, have an intense desire to be respected. In a society filled with religious, racial, and political problems, we as professionals must respect the right of everyone to adhere to their own beliefs. A sick or injured person who is placed in our care merits the utmost of our efforts as professionals.

## JOB DESCRIPTION: RADIOGRAPHER

Summary: Under the direction of a radiologist, the radiographer is concerned with the proper operation of x-ray equipment and preparation of patients for various types of diagnostic procedures. Upon request of a physician, the radiographer exposes an x-ray image receptor to produce radiographs of internal parts of the body. These radiographs may reveal evidence of disease, injury, or other significant medical information.

### Significant Duties

1. Performs diagnostic radiographic services.
  - A. Operates imaging equipment.
  - B. Operates other equipment/devices as appropriate.
  - C. Positions patients.
  - D. Immobilizes patients as necessary.
  - E. Calculates exposure factors.
  - F. Practices radiation protection.
  - G. Evaluates radiographs for technical quality.
  - H. Assumes care for physical and psychological needs of patient during examinations and procedures.
  - I. Practices aseptic technique as necessary.
  - J. Cleans and stocks exam rooms.
  - K. Assists with administration of contrast media.
  - L. Assists physician with imaging procedures.
  - M. Initiates life support measures for patients, if necessary.
2. May be required to work a variety of work shifts (i.e., 7 a.m.-3 p.m., 8 a.m., 3-11 p.m., or 11 p.m.-7 a.m.) during the week or weekend.
3. May be required to work weekend shifts and holidays.
4. Maintains patient records.
5. Assumes responsibility for assigned area.
6. Provides input for equipment and supply purchase decisions.
7. Instructs specific units of didactic and/or clinical education, in the radiography program, if applicable.
8. In the absence of a supervisor, assumes acting supervisory responsibility.
9. Assumes responsibility for portions of the quality assurance program.
10. Pursues ongoing continuing education.

11. May control inventory and purchase of supplies for assigned areas.
12. May be responsible for the supervision and evaluation of student technologists.

### Qualifications

1. Graduate of Joint Review Committee on Education in Radiologic Technology (JRCERT) accredited Radiography Program, or equivalent.
2. Certification by the American Registry of Radiologic Technologists or equivalent.
3. Competency in components of radiography practice as appropriate.
4. Valid state license, if applicable.

### **Technical Standards Requirements for Zane State College RADT Program**

If a student needs accommodations to perform these tasks, it is the responsibility of the student to provide formal documentation of the disability so an attempt can be made to meet his or her needs.

**Occasionally** Radiographers must be able to:

- **Crouch:** To position patients for exams and stocking supplies
- **Perform repetitive motions:** To enter computer data
- **Grasp:** To position patients for exams and procedures
- **Pull:** To move equipment or supplies that can weigh as much as 50 pounds

**Frequently** Radiographers must be able to:

- **Push:** To transport patients in wheelchairs or on carts using 25 pounds of force. Move portable and C-arm equipment with 20 pounds of force to a variety of areas in the hospital or medical centers
- **Pull:** To assist and move patients off and onto carts using eight to 24 pounds of force
- **Lift:** To move patients (who can weigh more than 50 pounds) from wheelchairs/carts off and onto exam tables
- **Use Fingers:** To enter computer data and setting techniques for exams
- **Carry:** To carry cassettes or supplies that can weigh as much as 25 pounds

**Constantly** Radiographers must be able to:

- **Stoop:** To position for exams and assist patients in and out of wheelchairs
- **Reach:** To position patients and manipulate standard or portable equipment
- **Stand:** All clinical assignments require standing for long periods of time
- **Walk:** To transport and assist patients into dressing/exam rooms. Walk to other areas of the department and hospital to do exams or have images interpreted
- **Feel:** To perceive attributes of patients and objects such as when positioning patients for procedures

**Communication Requirements - Radiographers must be able to:**

- **Talk:** To speak clearly and concisely with patients, co-workers, and physicians in English when applicable using standard medical terminology
- **Hear:** To perceive the nature of sounds at normal range; includes the ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when taking blood pressure. Should hear faint sounds at a distance of 15 feet.
- **Read:** To read and interpret directions from physicians or one's supervisor
- **Write:** To prepare written documentation in appropriate English formats using standard medical terminology

**Physical Demand Requirements – Radiographers must be able to:**

- **Heavy clinical assignments:** Radiographers may exert up to 100 pounds of force occasionally, and/or up to 40 pounds of force frequently, and/or up to 20 pounds of force while performing exams and pushing carts, wheelchairs, and portable equipment

**Visual Acuity Requirements**

- Radiographers are required to use computer terminals and set the proper exposure techniques on the X-ray equipment
- Clinical assignments require visual assessment of radiographs
- Clinical assignments require working with printed and/or written documentation
- Radiographers must assess patient's condition, i.e., color, respiration, motion, etc
- Far vision correctable to 20/20 in one eye and 20/40 in the other.

**Medical and Physical Requirements – Frequently Radiographers must be able to:**

- Stretching, twisting, kneeling and crouching may be required to operate equipment and to reach some patient's body positions.
- Good manual dexterity is required to operate equipment position patients
- Work with arms overhead for an extended amount of time.

ZANE STATE COLLEGE  
PURPOSE OF POLICIES AND PROCEDURES

The following policies and procedures have been developed by the Radiologic Technology Program at Zane State College. The purpose of these policies and procedures is:

1. To maintain an efficient operation which affords the highest quality medical care for the patient in the Medical Imaging/Radiology Department.
2. To provide the student with the best possible educational environment.
3. To provide a foundation for the student on which they may develop characteristics essential as a professional member of a health care team.

SOCIAL MEDIA POLICY

Popular social media such as Facebook, Twitter, and LinkedIn are useful tools for communication and education if used appropriately. Keep in mind that all posts are public and all posts can be seen by many others besides friends and networks. Even if the post is erased, there is record of the post. As a student in the RADT program, these policies will be followed accordingly or disciplinary action will be taken:

1. Keep posts respectful and professional; no derogatory comments toward the College, program, clinical sites, preceptors, clinical staff, or other students.
2. No threatening posts.
3. No posts regarding interactions of patients or clinical setting (\*this is a violation of HIPAA\*).

It is impossible to compile a complete list of misconduct that might require disciplinary action. The program faculty are responsible for interpreting the rules of conduct. Any questions should be directed to the Program Director.

Failure of the student to abide by general rules and regulations will result in disciplinary action. If disciplinary action is taken, the student will be advised of this action in a private discussion with the RADT program faculty. The action will be documented in the student's file and the student will be asked to sign the document to indicate their awareness of the action.

ZANE STATE COLLEGE  
Division of Health, Liberal Arts, and Public Service  
Radiologic Technology Program

**ACADEMIC POLICIES AND PROCEDURES**

The following academic policies and procedures for the Radiologic Technology Program have been developed to ensure that graduates of the program demonstrate competence in the psychomotor, cognitive, and affective skills necessary of individuals who perform quality diagnostic radiographic procedures.

A complete detailing of the academic policies and procedures for the entire college can be found in the Zane State College Catalog and Student Handbook. Students enrolled in the Radiologic Technology Program will also be required to abide by the additional policies and procedures as set forth by the Zane State College Board of Trustees.

**Minimum Grades for Health Students**

The Board of Trustees has adopted the following policy on minimum grades for selected Education, Health and Behavioral Sciences programs.

1. A student may not enroll in a technical course unless his or her overall grade point average is 2.0 or higher.
2. All course prerequisites must be met before admission to a course.
3. A grade of “C” or better is required in each technical course in order to continue in the course sequence.
4. A student receiving a grade of “D” or below in any technical or specified foundational course required by the Criminal Justice (Correctional Science, Police Science, Protective Services majors), Pre-K Associate, Education, Fire Service, Health Information Management, Social Work Assistant, Medical Assisting, Medical Laboratory, Occupational Therapy Assistant, Physical Therapist Assistant, Radiologic Technology, or Sport and Fitness Science programs has these options:
  - a. Assume a health/general studies core status;
  - b. Withdraw from the respective program; or
  - c. Remain in the technical program, taking the technical course (on advice of advisor) for which the student has achieved a grade of “C” in the prerequisite course. General and basic courses may be taken at this time, also. The student must then repeat any course in which he or she did not achieve at least a “C” grade. (Note that the College does not offer each course every semester). Students may repeat the course only once to raise the grade to the “C” level. Upon successful completion of the repeated course (grade of at least a “C”), the student must then be reevaluated for continuation in the program. Due to the arrangements of the curriculum sequence, this may require an extra year in the program.
  - d. A student who does not achieve a "C" or better in two technical courses may not be re-admitted to the Radiologic Technology program.
5. A student who earns an unsatisfactory grade in a course prior to the deadline to drop is ineligible to withdraw from that course.

## II. Program Evaluation and Grading Scale

The following policies and grading scale apply to all courses designated as a RADT course.

A	100-92	4.0
B	91-84	3.0
C	83-75	2.0
D	74-67	1.0
F	Below 67	0

Remediation will be required for students who do not earn a 75% or higher on written exams.

1. Write the question.
2. State the correct answer.
3. State where the correct answer can be found (textbook pg., powerpoint slide, etc).
4. State the rationale of why the incorrect answer was chosen.

Students must earn a 75% score on all RADT final exams. The student will repeat the final examination until a score of 75% is earned. Even with a passing score of 75%, all attempt scores will be averaged to attain the final exam grade. Students have only three (3) attempts to achieve a passing score of 75% or a course grade of "D" will be assigned.

## III. Re-Admission

Students who have been dismissed or who have elected to withdraw from the Radiologic Technology program may reapply for the succeeding school year. If a student elects to reapply, application for admission must be made into the immediate succeeding school year to avoid retaking the professional courses which were successfully completed. If the student delays readmission beyond the immediate succeeding school year, then they may be readmitted but may have to retake all technical courses previously completed. Applicants for readmission are reviewed equally with all other applicants and are therefore subject to competitive selection.

## IV. Cheating

Cheating of any form will not be tolerated in the classroom or clinical. Instances of academic dishonesty will be grounds for a failing grade in that course or courses and possible probation or dismissal from the program or College.

A more detailed listing of further academic policies and regulations is contained in the Zane State College Catalog and Student Handbook.

## V. Graduation

In order to graduate and receive the Associate of Applied Science Degree in Radiologic Technology that student must:

1. Successfully complete all coursework required for the degree.
2. Attain a "C" (GPA of 2.0) or higher in all courses as indicated on page 34.
3. Maintain a "C" (2.0) cumulative grade point average.



## FIELD TRIPS

Students are expected to participate in any field trip scheduled by the faculty. When field trips are taken during clinical time students who do not attend the field trip will be required to maintain clinical time attendance. Students not attending field trips may be required to submit a research paper pertaining to the fieldtrip material or other assigned topic per the Program Director.

## STUDENT PREGNANCY

The student has a right to privacy and confidentiality. By that right, a student is not required to inform RADT faculty of pregnancy or the intent to become pregnant. However, **exposure of a fetus to radiation has significant risks**. Such risks include skeletal deformities, mental retardation, spontaneous abortion, and childhood malignancy. All students receive basic radiation protection instruction during the first clinical semester of the program. As a means of protection, the pregnant student is expected to protect herself in the presence of ionizing radiation through the use of maximized distance, maximized shielding, and minimized time spent in the presence of ionizing radiation.

Written disclosure of pregnancy is voluntary; however, it is strongly encouraged that the pregnant student discusses her situation with the Program Director so that additional and maximum protection measures can be explained and implemented. These measures will include the ordering of a fetal dosimeter to be worn at the waist and possibly changing the clinical rotation schedule to minimize fetal dose of radiation. The student has the following options:

Option #1: Continue as a student without any interruption.

Option #2: Continue as a student with deferral of fluoroscopy, surgery, and portable rotations until as determined by student. Any missed rotations must be made up.

Option #3: Request a leave of absence not to exceed one year.

Option #4: Withdraw from the program and reenter at a later date upon completion of the pregnancy. All procedures for readmission will apply upon withdrawal from the program.

The pregnant student may choose to withdraw her voluntary disclosure of pregnancy at any time in writing. In the event that the student delivers during the academic semester, additional weeks of Directed Practice may be added to compensate for any time taken. As established by the N.C.R.P. report #116, the dose equivalent limit to the fetus is 0.5 rem/gestation.

It is the student's responsibility to maintain didactic assignments to the satisfaction of the preceptors involved. This may require that the student repeat courses missed during the maternity leave, which could lead to additional time for course completion. Any questions regarding the pregnant student's responsibilities should be directed to the Program Director.

## ACCESS TO RECORDS

In compliance with the Buckley Amendment to the Family Educational Rights and Privacy Act of 1974, the following policy is established to provide proper procedure for access to student RADT records:

Students have the right to inspect and review all RADT records directly related to the student. This includes any material incorporated into the student's record folder intended for school use or to be made available to outside parties.

Students must request inspection of their file by written request and will be granted access within 14 days of receipt of the written request to the RADT Program Director. The student's file must be inspected in the Program Director's office and in the presence of the Program Director, during normal business hours, or by special arrangement.

No records can be sent to any institution without the written consent of the student with the following exceptions:

- \* Transmittal of personal information to state and local government authorities as required by state statute.
- \* Release of directory information including the student's name, address, major field of study, place of birth, participation in official recognized activities, dates of attendance, degrees and awards received, and the most recent previous educational institution attended.

The written consent to release records must specify the exact records to be released and to whom the records shall be released. A copy of these records will be given to the student, if requested. This includes the following information:

- \*Course transcript
- \*Program evaluations
- \*Other specified information

Proper procedure for release of a student's record involves the following considerations:

- \* Upon student request, a transcript will be sent to the authorized agency.
- \* Information may be sent out in compliance with a judicial order.

Any student requesting a reference needs to complete the required authorization and must stipulate what areas the RADT faculty are to comment. This is in compliance with the Family Educational Rights and Privacy Act of 1974. A copy of the completed form will be forwarded to the authorized agency.

## ATTENDANCE POLICY

A significant portion of the educational process in radiography is the development of a strong sense of responsibility on the part of each student toward the patient, fellow radiographers, faculty members, the radiology department, and the hospital. One of the primary manifestations of this responsibility is regular, punctual attendance in the clinical and didactic areas. **This means that students are expected to be clocked in AND ready to work at the start of their shift.** Failure to abide by policy will result in disciplinary action. Since it is recognized that absence is occasionally unavoidable, the following policy has been established for clinical areas (classroom attendance will be outlined in course syllabi):

Absences or tardiness for clinical assignments must be **reported to the program office** at 740-588-4132 or 740-588-4147 **at least 15 minutes prior** to the beginning of the student's assigned clinical time. A message may be left on the faculty voice mail. The **clinical preceptor at the clinical site must also be notified** by telephone **at least 15 minutes prior** to the beginning of the student's assigned clinical time. **Failure to report absences as required will result in a 'double incident of absence' assigned to the student.** STUDENTS WHO FAIL TO CALL OR SHOW WITHIN THREE (3) HOURS FOR THEIR ASSIGNED CLINICAL TIME WILL BE DISMISSED FROM THE PROGRAM! Students are not to leave their clinical site for breaks.

Non-attendance will be monitored as 'incidents of absence'. An 'incident of absence' is any period of time when the student is absent from their assigned clinical schedule, this includes absences with a written excuse, tardiness and early departures. One day or consecutive days of absence, regardless of length, is considered one incident of absence. Illnesses of three days or longer will require documentation of a physician's visit. Tardiness is considered an incident of absence. For absences of more than one day in length, the student is required to report to the program office and, if applicable, to the clinical preceptor for each day absent, unless otherwise indicated by the program director. Chronic conditions with a doctor's note will be evaluated on an individual basis.

Bereavement (immediate family- this includes spouse, in-laws, parents, stepparents, siblings, children, grandchildren, grandparents), jury duty and military duty will be handled at the discretion of faculty. Documentation must be provided for verification.

Clinical hours missed due to maternity leave, bereavement, jury duty and military duty are required to be made up. It is the student's responsibility to work with faculty on a make-up schedule.

Progressive corrective action occurs as follows, when a student accumulates a number of incidents of absence that reflects an unacceptable pattern:

- 1 incident/semester = verbal warning
- 2 incidents/semester = written warning & reduction of overall course score by 5 points
- 3 incidents/semester = written warning & reduction of overall course grade by one letter grade
- 4 incidents/semester = written warning & reduction of overall course grade to a 'D'

The Program Director has the authority to move to the most severe consequence for absences if the pattern of non-attendance is consistent in nature from one semester to the next. This could include lowering the ceiling for number or incidence/semester.

Students are required to make up absences for 2<sup>nd</sup> and 3<sup>rd</sup> shifts. ET time will not be approved for 2<sup>nd</sup> and 3<sup>rd</sup> shift rotations.

If a student presents to the clinical setting with an illness, the clinical preceptor will adhere to the policy and procedures established for the site. The course of action will be at the discretion of the clinical preceptor and/or RADT faculty.

Inclement weather absence will be handled in accordance with the Zane State College inclement weather policy. Tardiness due to inclement weather will be handled on an individual basis and may result in an 'incident of absence' per the program director and/or clinical preceptor. The use of common sense is highly encouraged in relation to inclement weather. The student should not put themselves in danger in order to attend their clinical assignment.

Excessive absenteeism and/or tardiness may result in dismissal from the program.

#### EMERGENCY ET PASS

The students will be given one emergency pass to use in their first year and one pass to use during their second year. This pass is not transferable to another student. This pass may be used in place of an incident; however, the student **MUST** have the appropriate amount of educational time (ET) in their bank to cover the amount of time missed. ET will be withdrawn in hourly increments (i.e., if a student is tardy 10 minutes, then they could use his/her one pass for the year and one hour of ET would be withdrawn from their bank). If the student does not have enough time in his/her bank to cover the amount of ET needed to withdraw they would **NOT** be able to use their pass. All incoming freshman will begin the program with seven (7) hours ET in their banks.

#### CRIMINAL BACKGROUND CHECK

All students are conditionally accepted into the Radiologic Technology program pending a completed background check by the designated deadline. This background check is **REQUIRED** and may be completed through the Campus Bookstore. The student will be responsible for the non-refundable cost of the background check. This background check is for criminal convictions only; it does **NOT** look at credit rating or personal finances. A copy of the background check will be on file in the Program Director's office and will be kept strictly confidential. As radiography students are guests at their assigned clinical site, it is the right of the clinical site to request a copy of the student's background check. **In the event that this happens, the student will be given a copy and will be responsible for the delivery of the document to the clinical site. It is also the right of the clinical site to refuse an individual based on a positive background check.**

## ARRT ETHICS REVIEW PRE-APPLICATION

In the event of a positive background check the student will be required to complete a pre-application to the American Registry of Radiologic Technologists for an ethics review. The student will assume the cost for the pre-application fees. This MUST be completed prior to the designated deadline and presented to the Program Director BEFORE the student enrolls for RADT 1015. If the ARRT deems a student unable to take the ARRT examination, the student will NOT BE PERMITTED TO REMAIN IN THE RADT PROGRAM.

## HARASSMENT POLICY

The RADT program will vigorously enforce its prohibition against harassment based on sex, race, color, national origin, religion, disability, age, veteran status, or any other unlawful basis, and encourages those within the college community, as well as, third parties who feel aggrieved to seek assistance to rectify the problems. The RADT program will investigate all allegations of harassment and in those cases where harassment is substantiated. The RADT faculty will take prompt steps to end the harassment. Complaints of unlawful harassment will be dealt with on a case by case basis taking into consideration the totality of the circumstances. Individuals who are found to have engaged in unlawful harassment will be subject to appropriate disciplinary action. This also includes any retaliatory harassment.

## CLINICAL POLICIES AND PROCEDURES YOU AND THE PATIENT

The care for those who are ill or hospitalized is provided by people, like you, who exhibit kind interest in all persons. It is only through the efforts and cooperation of each member of the health care team that the goal of expert, scientific, and compassionate care of patients can be maintained.

Your courtesy, tact, empathy, cheerfulness, kindness, and consideration of patients, anxious relatives, and your co-workers will help immeasurably. It is our sincere desire to assist you in finding enjoyment and satisfaction as a radiography student. We are interested in your education, happiness, health, and success.

## THE MEDICAL IMAGING DEPARTMENT

Medical Imaging Departments operate as a distinct, integral part of the total function of the hospital. The department strives to achieve the goals listed below, which are consistent with the overall goals of each hospital. The Medical Imaging Department serves to:

1. Provide for quality patient care on a continuous basis through the use of an adequate staffing schedule of well-educated, registered radiographers and supporting personnel, utilizing well-maintained and technologically-sound radiologic equipment. This goal must be achieved to permit the radiologists to complete timely, accurate diagnostic interpretations, to complete medically-sound therapeutic treatments, and to provide accurate and timely reports to referring physicians and related hospital personnel.

2. Provide an atmosphere for professional growth and development through experience, in-service programs, and opportunity for inter-professional relations and conferences for department employees.
3. Provide an educational opportunity to radiography students and to other students and staff of the hospital.

### CONFIDENTIALITY

All information regarding patients, visitors, or staff of the clinical education centers is considered confidential, according to the Health Insurance Portability and Accountability Act (HIPAA). As such, this information is not to be discussed by the student to anyone. **Any such breach of confidentiality will result in disciplinary action including, but not limited to clinical suspension, removal from the clinical site, and/or program dismissal.**

However, it is the policy of the hospitals to cooperate with the news media for information in accordance with HIPAA. Students must refer all such requests for information from the news media to the Department of Public Relations, with the exception of inquiries regarding a patient's condition, which should be referred to the hospital patient information service. Any request to take photographs on hospital premises must also be referred to the Department of Public Relations.

### IONIZING RADIATION

All student radiographers are monitored on a continuous basis by a dosimeter type monitor. Records of student exposure to ionizing radiation are maintained by the Program Director and are maintained in the radiology laboratory. RADT students review the radiation reports with the RADT faculty during the mid-semester evaluations or upon receipt of report. All students are provided with introductory instruction in radiation protection measures **before** Directed Practice rotations begin. Students are to wear protective apparel during any portable or fluoroscopic procedure. **Students are NOT permitted to hold a patient or an image receptor during a radiologic examination! Violation of this policy may result in corrective action, even possible dismissal from the RADT program.**

### HOSPITAL ACCIDENTS

Patients and visitors are usually unfamiliar with hospital routines. Therefore, you must be constantly on guard to protect their safety. Many accidents are caused by unsafe acts or unsafe conditions. If you notice a potential accident hazard, report it to your clinical preceptor or supervisor immediately. If you are in an accident or happen to see an accident occur, an incident report must be completed and submitted to the clinical preceptor with a copy given to the Program Director. If you are injured, any treatment costs are your responsibility.

## MEDICAL INSURANCE

During the course of the program, students are responsible for their own health insurance. While it is not possible to require students to maintain some type of coverage, it is highly recommended. Due to the high cost of medical care, students should have medical coverage, either through parent, spouse, or individual policies.

## FIRE

Fire safety procedures should be followed in accordance with the protocol of the assigned clinical site.

## EMERGENCY PROCEDURES

Emergency procedures at the college are outlined in the quick reference handout. The Director of Campus Security will review these procedures at new RADT student orientation and they can be found on Z-online.

## TOBACCO USE

One of the major purposes of any hospital is to maintain, restore, and preserve the health and safety of its patients, personnel, and the public. The use of tobacco in any form is inconsistent with this purpose. It is the policy of each site that the combustible use of tobacco products (including e-cigarettes) is prohibited throughout the facility. This applies to all persons coming to or affiliated with the hospital. Smoking is prohibited in all patient areas and in all areas where readily ignitable material/combustion supporting materials are used and/or stored. The College is also a non-smoking facility. If a violation of this policy occurs, disciplinary action may result.

## BREAKS/LUNCH

Students will be allotted 1 total hour of break/lunch time per day (full shift). These breaks will be scheduled by the clinical preceptor and/or department supervisor. Students are not permitted to leave their clinical sites for breaks or lunch. (Exception: Genesis Cambridge can go to the adjacent Buffalo Wild Wings; Genesis Ortho can go to the adjacent McDonald's; Genesis Perry County can go to the adjacent Taco Bell or Subway). Students may not skip lunch to end their shift early.

## CPR POLICY

In order to provide life-saving techniques, the student MUST be certified in CPR Basic Life Support (BLS) including adult, child, and infant, from the American Heart Association (or equivalent) prior to attending the clinical affiliate site in the program. Zane State College offers CPR training.

## TRANSPORTATION

Students must provide their own transportation to and from the College and the clinical affiliates. It is encouraged that students carpool, however in the event of a tardy the policy would apply to all students involved.

## POLICY REGARDING STUDENTS WITH AIDS OR HIV

Detection and control of infectious disease is accomplished to assure a safe environment for students, employees, patients, faculty, staff, and hospital visitors. Students are encouraged to promptly visit their physician for evaluation when suffering from potential infection (ex. fever, diarrhea, skin lesions).

The student is encouraged to discuss their infectious disease status with program faculty. Zane State College and the RADT program faculty will protect the privacy of individuals who are self-disclosed. The RADT faculty will refer the student for specific education necessary to avoid transfer of disease in the clinical areas. Clinical placement will be made with the welfare and safety of the student and potential patients in mind. However, the clinical affiliate has the right to agree or disagree to take self-disclosed students who have AIDS-related diseases including seropositive individuals.

The College and RADT faculty do not discriminate against students with infectious diseases. Students with communicable diseases will not be excluded from the program in accordance with the American with Disabilities Act.

## STANDARD PRECAUTIONS

Guidelines have been adopted in accordance with the current consensus of the medical and scientific community that many diseases cannot be transmitted by casual body contact in the clinical setting. Students will be educated on standard precautions in the RADT introductory course and in orientations at clinical settings. However, because there is a risk of contracting an infectious disease, the student should adhere to the following guidelines:

1. Sharp items (needles, scalpel blades, etc.) should be considered infectious and be handled with extraordinary care to prevent accidental injuries.
2. Disposable syringes and needles, scalpel blades and other sharp items should be placed in puncture resistant containers located as practical as possible to the area in which they are used. To prevent needle stick injuries, needles should NOT be recapped, purposely broken, removed from disposable syringes, or otherwise manipulated by hand.
3. When the possibility of exposure to blood or other body fluids exists, appropriate attire should be worn. The anticipated exposure may require gloves alone, or may also require a gown, mask and/or goggles when performing procedures. Hands should be washed thoroughly and immediately if they accidentally become contaminated with blood.
4. To minimize the need for emergency mouth-to-mouth resuscitation, mouth-pieces, resuscitation bags, or other ventilation devices should be located and available for use in areas where the need for resuscitation is predictable.



5. Pregnant students engaged in health care are not known to be at greater risk than students who are not pregnant. However, if a student develops infection with the AIDS virus during pregnancy, an infant has an increased risk of infection by prenatal or perinatal transmission. Because of this risk, pregnant students should be especially familiar with precautions for preventing the transmission or acquisition of the AIDS virus.
6. Students are required to receive the Hepatitis B vaccine series in order to help minimize their risk of infection.

#### HEPATITIS B IMMUNIZATION POLICY

In order to protect the student from the Hepatitis B virus, they are required to receive the Hepatitis B immunization series of three injections over a period of six months. Incoming RADT students must provide the College with documentation of their Hepatitis B vaccination. Entering students who fail to provide the appropriate documentation by this date will be withdrawn from the program and replaced with an alternate student. Students failing to complete the series of three injections will be unable to register and/or complete their programs. All costs associated with the vaccine series is the responsibility of the student.

#### OUTSIDE EMPLOYMENT

Extra worked performed voluntarily or for compensation is to be arranged by the student and his/her employer. The College strongly encourages students to take advantage of the educational opportunities afforded by additional clinical work and responsibility, but such arrangements and agreements are voluntary on the part of the student and are organized and controlled by the professional staff of the facility.

Clinical times are set by the Director, clinical coordinator, and clinical preceptor at the clinical affiliates. Students who must work are required to set up a work schedule around the assigned clinical times. Due to the intensity of the RADT curriculum, it is not recommended that students pursue full-time employment.

#### NURSING MOTHERS

Any student who is nursing will need to follow the breast-feeding protocol of her assigned clinical site.

#### ELECTRONIC DEVICE USAGE

Cell phone use (talking and texting) is **only** permitted during scheduled break times. **Cell phone (talking, texting, browsing, etc.) use during clinical hours is strictly prohibited and subject to disciplinary action.**

### CLINICAL ATTIRE

The uniform for the student is a symbol of the profession. As such, it must always be **clean and pressed**. In the clinical areas, student attire must follow the policies and procedures of each clinical site with the exception of Cleveland Clinic Union Hospital:

Solid color scrubs that are Caribbean blue.

Solid color lab coats (or white embroidered lab coats from the bookstore) will match the worn color scheme (optional). Hoodies and sweatshirt are NOT permitted.

Cleveland Clinic Union Hospital: Solid white scrub tops, white lab coats and navy-blue scrub pants.

**Plain** white T-shirt (no thermal material) is permitted to be worn under scrub tops.

In order to maintain a neat and professional appearance, the uniform dress hemline must remain at or below the level of the knee. Due to stretching, bending, and lifting, a pants uniform may be desirable. Scrub pants are to be hemmed to an appropriate length, as not to drag on the floor (not rolled-up pant hems). Scrub tops should be an appropriate length as to cover the midriff area. Also, students are expected to wear appropriate undergarments. White leather shoes with **minimal** gray are to be worn. Solid black leather shoes can also be worn. Canvas shoes are not permissible. Students must wear white or black socks (footies are not permissible). Cleveland Clinic Union Hospital must wear white shoes and socks.

Costume jewelry is not to be worn with the uniform. A watch, wedding rings, and one additional ring, and small earrings are permissible. Hoop and dangle earrings are not permissible. Two earrings per ear are permissible. No body-pierced jewelry other than earrings is permissible. One short necklace is permissible, but bracelets are not permissible. No visible tattoos or body modifications are permissible. Earplugs are also not permissible unless clear.

Cosmetics should be worn with discretion. If fingernail polish is worn, it should be clear or light pink in color with fingernails short in length (1/4") for safety purposes and should not be cracked or peeling. Artificial nails are not permissible to maintain compliance with The Joint Commission standards and CDC recommendations. If perfume is worn, it should be lightly scented due to the fact that it can be objectionable to the patient.

Hair must be tied back at all times. Large hair bows/ribbons, and extreme hair styles and colors are considered unprofessional and are not permissible. Headbands must be an appropriate width in solid white, black, gray, navy, beige, or Caribbean blue. Cleveland Clinic Union Hospital will only be permitted to wear white or navy headbands. **Students are required to take necessary care of all personal hygiene.** Male students are to be clean-shaven or have a neatly-groomed beard or mustache of reasonable style.

Name badges and dosimeter are to be visibly worn AT ALL TIMES while at the clinical site, along with personal lead markers readily available. Failure to have these during clinical education will be a verbal warning for the first offense and an incident of absence for subsequent violations. It is at the discretion of the RADT clinical preceptor and/or RADT faculty to send the student home or modify the clinical rotation.

Gum-chewing is also considered unprofessional. Mints are permissible when not with a patient.

**Failure to follow the established dress code will result in an advisement for the first offense. On the second offense, the student will receive a verbal warning, be sent home, and receive an overall clinical grade reduction of two percentage points. On the third offense, the student will receive a written warning, be sent home, and receive an overall clinical grade reduction of five percentage points. An incident of absence will result from being sent home. A fourth offense will result in dismissal from the RADT program.**

### LIABILITY INSURANCE

It is necessary for each student to purchase liability insurance while in the RADT program. This is obtained through a group policy with Affinity Insurance Services. The premiums are paid each fall semester through course fees and cover the student for the next consecutive twelve months.

### RADIATION MONITORING & RADIATION PROTECTION

All students are required to wear their dosimeter whenever they are in the Radiology Department or RADT laboratory. Any student present without his or her dosimeter will be required to leave, get his/her dosimeter, and return to the clinical area. An attempt on the first occurrence will be made to place the student in a non-radiation area, however this is not a guarantee. An incident of absence will be assigned for any time away from the clinical affiliate.

Each student is responsible for his or her badge. If the dosimeter is lost or damaged, the student will not be allowed to continue your clinical experience until a new badge is issued. This could result in considerable loss of clinical time. A \$25.00 fee will also be assessed to the student for the replacement badge or an unreturned dosimeter.

Dosimeters should be worn at the level of the collar. When a lead apron is worn, the dosimeter should be worn at the level of the collar, outside of the lead apron.

During clinical time, students ARE NOT permitted to hold patients or image receptors during routine radiographic procedures. **The holding of patients or image receptors leads to excessive ionizing radiation exposure, and could lead to corrective action, even dismissal from the RADT program.**

### REPEAT RADIOGRAPH POLICY

Any radiograph that requires repeating must be done with **direct supervision** of the clinical preceptor or other registered radiographer. It is the student's responsibility to notify a technologist of the repeat and have the technologist assist with the repeat radiograph. If no technologist is available, the student **SHALL NOT** repeat the radiograph until a technologist becomes available to directly assist with the repeat radiograph. The purpose of this policy is to protect the patient from unnecessary radiation exposure that may occur if a student repeats the same mistake several times. **All images must be evaluated by a registered technologist prior**

**to dismissing the patient! Violation may lead to corrective action, even dismissal from the RADT program!**

**DIRECT SUPERVISION:** A registered radiographer is present with the student in an ionizing radiation room, or with an energized mobile unit. All portable, surgical, and repeat exams must be performed under direct supervision regardless of competency status.

**INDIRECT SUPERVISION:** A registered radiographer is immediately available for guidance, but not necessarily with the student in the ionizing radiation room. "Immediately available" is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed.

## **GENERAL POLICIES AND PROCEDURES**

### RADT CLUB

The purpose of the RADT Club is to support the profession of radiologic technology by increasing public knowledge of the RADT program. Another underlying purpose of the Club is to raise funds to help defray the cost of student attendance to educational conferences. A requirement of the RADT club is to complete an annual community service project. RADT club funds are to be used for community activities and conference and are not for personal student use, such as to pay for the certification exam. The Club is presided by the President of the sophomore class. The duties of the President including conducting the business of the meetings, scheduling meetings, attending Student Senate meetings, informing RADT students of the business of the Student Senate, informing the Student Senate of the business of the RADT Club, informing RADT faculty of the business of the RADT Club, and delegating responsibilities as appropriate to RADT Club members. During summer session, the members of the RADT Club must elect a Treasurer. The responsibility of the treasurer is to maintain accurate records of Club financial transactions and to make those appropriate transactions with the Zane State College Business Office under the direction of the Program Director.

### ATTENDANCE AT EDUCATIONAL MEETINGS

Continuing educational activities are an important component of any education. It provides a means to meet other students and technologists who share the same interest to our profession. It also helps to keep us up to date in new technologies and procedures and develop a sense of commitment to our profession. Students are encouraged to enjoy themselves and act in a responsible manner consistent with high ethical and moral standards. The following rules have been established to provide guidelines for student attendance at educational meetings held outside the College:

1. All educational time incurred during educational meetings will be credited as hours of educational experience time (ET).
2. The student is granted compensatory time off school (ET) at the rate of one hour of educational time equal to one hour of program experience. However, the educational time will only be granted if the educational meeting occurs outside of the student's

regularly scheduled didactic or clinical time. If the student attends an educational meeting during clinical hours, he/she will not receive ET.

3. To be granted educational time off, the student must request time off with reference to the amount of ET requested on the specific date and time to be used. Education Time can be earned through public service. Some examples are blood donation and volunteering for a charity. **All Education time requests must be approved by the program faculty 48 hours in advance, in writing.**
4. Educational meeting time must be verified by program faculty within 48 hours of meeting attendance to receive ET credit unless otherwise indicated. The Program Director maintains a record of each student's educational meeting attendance for the purpose of administering ET.
5. To receive credit for an educational meeting, the student will be required to submit a brief written synopsis of each session attended. The synopsis is to be delivered to the program faculty within two days of the educational session unless otherwise indicated.
6. All expenses are the sole responsibility of the student, to include meals, lodging, transportation, registration, and other travel costs. Students may work through the RADT Club to raise funds to off-set the cost of attendance.
7. All students are eligible to attend the educational meetings. However, prior approval for attendance must be secured from the Program Director.
8. Use of RADT Club funds to attend approved educational activities (i.e., OSRT, RSNA, ASRT) would require meeting the following guidelines:
  - a. If using club funds, attendance is required to 50% of the sessions during non-clinical time and 100% of the sessions during regularly scheduled clinical time.
  - b. Reservations for hotel rooms will be the responsibility of the student.
  - c. Violations of these guidelines for use of RADT Club funds may result in one or more of the following:
    1. Financial reimbursement to the RADT Club.
    2. Banning from future meetings.
  - d. Extenuating situations will be taken into consideration.

### RADT LABORATORY POLICY

The RADT Laboratory is located in A108, Advanced Science and Technology Center (ASTC).

The radiation source in this room consists of the radiographic tube. In addition, secondary radiation emitted from the phantom and x-ray table are potential sources of x-radiation exposure to the operator.

The potential biological effects of x-radiation exposure include genetic alteration (chromosome damage) and slight increased risk of cancers, particularly leukemia. X-radiation exposure to the embryo/fetus represents greater sensitivity to x-radiation exposure than the adult.

X-radiation exposure will be minimized in room A108 by adhering to the following:

1. The energized Radiologic Technology Laboratory will only be used under the supervision of a qualified RADT instructor. The room is to be secured and locked when not in use or when prior arrangements are made with RADT faculty.
2. All persons in room A108 during an x-ray exposure should be monitored with a dosimeter. These must be worn at the level of the collar and outside any protective apparel. A declared pregnant student or employee will be monitored at the collar and at the waist to measure radiation exposure to the fetus.

3. Dosimeter reports will be maintained in the RADT office. Students or employees who receive 125 mrem or more in a three month period of radiation monitoring will be required to document activities which may have resulted in this exposure. Incidents of overexposure (i.e., greater than 5,000 mrem/calendar yr.) will be reported to the Director of the Ohio State Bureau of Radiological Health by the RADT Program Director.
4. All persons in room A108 during an x-ray exposure will be positioned behind a protective barrier wall.
5. The door to room A108 will be closed and locked during any x-ray exposure.
6. X-ray exposures will be minimized by proper maintenance of the x-ray generating equipment and processing equipment. A technique chart for the phantom exposures will be available for consultation.
7. X-ray exposures will be made only for reasons consistent with a class assignment. Assignments will be limited to the number of radiographs necessary to fulfill the educational objectives.
8. **Under NO circumstances will human (or animal) tissue be radiographed using this radiographic equipment.**
9. Following any laboratory activity, the radiation emitting equipment will be turned off at the breaker and the processor shut down.
10. The safe operating procedures are posted on the A108 bulletin board.
11. The State of Ohio "Notice to Employees" is posted on the A108 bulletin board.

#### GENERAL BEHAVIOR - PROFESSIONAL ETHICS

The student is responsible for his/her behavior as both an individual and as a member of the group. Rules of behavior which are endorsed as appropriate according to high social, ethical, and moral standards are expected to be followed. As a consequence, the student is held responsible for any acts which may violate these standards. **The Zane State College student is a guest in the affiliating facility. Should the clinical or field site facility request or demand removal of a student due to the student's inappropriate or unprofessional behavior, the student will be removed immediately and will earn a grade of "F" in the course.** The following rules have been established to provide guidelines for proper, professional conduct:

The student is expected to conduct himself/herself in a professional manner at all times while in the College, hospital, or while participating in program functions.

The student is expected to be courteous to patients, staff, visitors, faculty, and other students. When speaking to or about a patient, the name of the patient should be used, unless circumstances dictate otherwise.

The student is expected to be cordial and congenial to all patients. Solicitation or acceptance of tips from patients or hospital visitors is prohibited.

Visiting with a patient during clinical hours is not permitted. Friends who are hospital patients should be visited according to hospital regulations.

The student is to consider the affairs of patients, the RADT program, the College, and the hospital, confidential. Such matters are not to be discussed with other students, staff, family, faculty, or friends.

Sleeping during clinical or didactic hours is unacceptable and subject to disciplinary action.

Students should act as responsible adults. Cheating may result in dismissal from the program.

Telephone calls to the hospital radiology department are to be answered promptly with identification of the department, area, and the individual answering the telephone. All messages should be taken in writing.

Personal telephone calls are not to be made or received while in the hospital, except in the case of an emergency. **Cell phone (talking, texting, browsing, ect.) use during clinical hours is strictly prohibited and subject to disciplinary action.**

All unusual incidents concerning hospital patients, visitors, staff, etc. must be reported to the Clinical Preceptor and supervisor and the proper incident form must be completed and a copy given to the Program Director.

The following are considered examples of severe, inexcusable behavior which may result in immediate dismissal from the program:

Deliberate damage to College, hospital or other's property

Stealing

Physical assault of another individual

Conviction of a felony

Indecent or lewd conduct

Carrying a weapon on College or hospital premises

Falsification of any information to the hospital or College

Smoking in hazardous areas

Consumption of intoxicants while on College or hospital property or attempting to perform duties while under the influence of alcohol or other drugs

Falsification or misuse of College or hospital records



Working beyond the appropriate scope of practice as a radiology student.  
Students with previous healthcare experience will be expected to work within the scope of practice of a radiography student and will not perform patient care procedures in the clinical setting until they are covered in the radiography curriculum.

Drug dealing or attempted drug dealing

Excessive absenteeism/tardiness

Not adhering to the ARRT® Standards of Ethics

It is impossible to compile a complete summary of misconduct that requires disciplinary action. The Program Director is responsible for interpreting the rules of conduct, and any questions in this area should be addressed to the Program Director.

Failure of the student to abide by general rules and regulations will result in disciplinary action. If disciplinary action is taken, the student will be advised of this action in private consultation with the RADT faculty. The action will be documented in the student's record file and the student will be asked to sign the document to indicate their awareness of the action.

### COMMUNICATION OF CONCERNS

The Zane State College RADT program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The Standards of JRCERT are utilized to ensure programmatic quality and are as follows:

Standard One: Accountability, Fair Practices, and Public Information

Standard Two: Institutional Commitment and Resources

Standard Three: Faculty and Staff

Standard Four: Curriculum and Academic Practices

Standard Five: Health and Safety

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

More information regarding the Standards of the JRCERT can be found on their website. Students will also learn more about JRCERT and the Standards in the RADT introductory course.

Should a student have concerns about the Zane State College RADT program's adherence to the Standards of the Joint Review Committee on Education in Radiologic Technology (JRCERT), a form may be obtained from the program faculty. The student may report those concerns to the JRCERT at:

JRCERT  
20 N. Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
Website: [www.jrcert.org](http://www.jrcert.org)  
Email: [mail@jrcert.org](mailto:mail@jrcert.org)

Zane State College  
RADT Program  
Grievance Policy

Any grievance or concern regarding the Zane State College Radiologic Technology program must be made in writing. Students must adhere to the following channels and timelines when addressing grievances or concerns involving the Radiologic Technology Program.

- Step 1: Discuss the complaint with RADT faculty and/or the clinical preceptor, as appropriate.
- Step 2: If dissatisfied with Step 1, file a written complaint or grievance with the RADT program director. This must be done within fifteen (15) business days after the date of the occurrence. If the incident or occurrence involves a clinical rotation site, the complaint must be made to the RADT clinical coordinator. The RADT Program Director or the RADT Clinical Coordinator must respond within fifteen (15) business days upon receipt of the written grievance.
- Step 3: If still not satisfied, a letter should be addressed to the Academic Dean of Health, Liberal Arts, and Public Services within fifteen (15) business days of the date after the RADT faculty reply. The letter should clearly detail the steps which have already been taken and contain the facts of the grievance. A request for a hearing before the Academic Dean of Health Public Service should be included. The Academic Dean will schedule a hearing with the student within fifteen (15) business days of the request.
- Step 4: Upon considering information provided at the student hearing, the Academic Dean of Health and Public Service shall make a decision regarding the formal grievance. This decision shall be made within fifteen (15) business days of the student's formal hearing with the Academic Dean.
- Step 5: If still dissatisfied with the decision, the student may address the grievance with the Chief Academic Officer. This should be done in accordance with the Zane State College Grade Appeals and Academic Complaints Policy outlined in the College catalog.

Should a student have concerns about the Zane State College RADT program's adherence to the Standards of the Joint Review Committee on Education in Radiology Technology, the student may report those concerns to the JRCERT at:

JRCERT  
20 N. Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
Email: [mail@jrcert.org](mailto:mail@jrcert.org)

## **DRUG PREVENTION POLICY**

### **1. PROFESSIONAL STANDARDS OF CONDUCT**

In order to prepare the student for his/her chosen career field, the Dean of Health and Public Service recognizes the need to adopt specific policies which reflect the standards of practice within the various professions. Many helping and service professions support the belief that the use and/or being under the influence of intoxicants is a barrier to effective professional performance. It is also a belief that use and/or being under the influence of intoxicants jeopardizes the safety and wellbeing of individuals served by health and public service professionals. Students are held responsible for knowing the standards of practice within their respective technologies.

### **2. LEGAL STANDARDS OF CONDUCT**

The unlawful manufacture, distribution, dispensing, possession, use of or being under the influence of illicit drugs and/or alcohol is prohibited on Zane State College property or as any part of College activities.

### **3. LEGAL SANCTIONS FOR THE UNLAWFUL POSSESSION OR DISTRIBUTION OF ILLICIT DRUGS AND ALCOHOL**

A number of state and local laws exist concerning the unlawful possession or distribution of illicit drugs and alcohol. The individual student is held responsible for knowing the laws and abiding by them.

### **4. DESCRIPTION OF HEALTH RISKS**

All students need to be aware of the risks inherent with alcohol and/or drug abuse. The College will have a number of health-related brochures distributed throughout the facilities.

### **5. DISCIPLINARY SANCTIONS**

All students within the Division of Dean of Health and Public Service must know and abide by the LEGAL AND PROFESSIONAL STANDARDS OF CONDUCT outlined above. If a student demonstrates evidence of use of a prohibited substance during classroom or laboratory instruction or during clinical practice that student will be subject to disciplinary actions. Those actions may include but not be limited to the following:

First incident during classroom laboratory.

- A. The student will be dismissed from the immediate class.
- B. The student will meet with program faculty and receive a verbal warning.
- C. Notation of the incident will be made in the student's technical program file.

Second incident during classroom laboratory.

- A. The student will be dismissed from the immediate class and the remainder of his/her technical lab classes for one (1) week.
- B. The student will meet with the program faculty and receive a written reprimand.
- C. Notation of the incident and reprimand will be made in the student's technical program file.

Third incident during classroom laboratory.

- A. The student will be dismissed from the immediate class and all technical courses for the remainder of the semester and consequently from the technical program.
- B. The student will be referred for evaluation and subsequent treatment of chemical dependency.
- C. The student may reenter the technical program only after providing evidence of evaluation, treatment as necessary and being "clean and sober".
- D. The student will be expected to sign a letter of agreement stipulating the conditions of readmission.
- E. Notation of the incident will be made in the student's technical program file.

Actions taken for those incidents occurring during clinical practice may include but not be limited to the following:

First incident during clinical practice.

- A. The student will be removed immediately from the clinical experience and suspended from clinical practice until he/she is exonerated by testing for the presence of chemicals and/or evaluation for chemical dependency according to the policies and procedures of the clinical site and/or Zane State College.
- B. If exonerated by testing, the student may return to clinical practice.
- C. If testing and/or evaluation reveal the presence of chemicals and/or chemical dependency, the student may not return to the clinic until treatment has been completed and appropriate documentation validates the student is "clean and sober".
- D. The student will be expected to sign a letter of agreement stipulating the conditions of return to the clinic.
- E. The student may be permitted to attend technical classes during the treatment period.
- F. Notation will be made in the student's technical program file.

A second incident during clinical practice will result in immediate dismissal from the clinic and all technical program courses. The student may petition for readmission to the program after a two (2) year waiting period and documentation that he/she is "clean and sober".

In extreme cases where the individual student's behavior has had direct or indirect negative impact on a client/patient, a clinical site employee, or another student, the faculty and administration of Zane State College reserve the right to move to immediate dismissal from the program, college, or take legal action against the offending student.

As a result of any criminal drug statute conviction, the student must notify the College of the violation. The College, within 30 days of such notification, is required by Federal law to:

- A. take appropriate action against such student, up to and including dismissal; and/or
- B. require such student to participate satisfactorily in a drug treatment or rehabilitation program approved for such purpose by a Federal, state or local health, law enforcement, or other appropriate agency.

### DISCIPLINARY PROCESS

Each student in the RADT Program is required to abide by the policies and procedures outlined in the following:

- 1. Zane State College Catalog and Student Handbook,
- 2. Radiologic Technology Student Handbook, and the
- 3. Clinical Education Center Policy and Procedures Manual(s)

Disciplinary action will be taken against a student in the Radiologic Technology program for the following reasons:

- 1. Failure to comply with the policies and procedures of the College, program and/or clinical education center.
- 2. Failure to abide by the American Registry of Radiologic Technologists (ARRT) Code of Ethics (to be distributed in RADT 1010).

The disciplinary procedure is as follows:

#### I. WARNINGS

- A. Minor Violation: Verbal Warning

A RADT program faculty member will talk to the student, remind them of correct behavior, and answer questions which the student may have about the incident. Documentation will be placed in the student's permanent file and a copy given to the student.

- B. Major Violation: Written Warning

Repetition of a minor violation is considered a major violation. Students violating RADT program policy may be required to meet with the Academic Dean of Dean of Health, Liberal Arts, and Public Service, to correct or improve undesired behavior.

If the violation is of the repeat policy, holding policy, imaging the incorrect patient, imaging of the incorrect part, or has endangered the safety and well-being of a patient, co-worker or employee or fellow student, more severe disciplinary action on the first occurrence may be incurred, such as corrective action or dismissal from the RADT program.

## II. CORRECTIVE ACTION

Repetition of a major violation or continued repetition of minor violations warrants corrective action. Corrective action will result in the loss of clinic and/or didactic time of 1-5 days and incident(s) of absence will be incurred. The student will be required to make up any didactic assignments to the satisfaction of the instructor.

A written report will be completed by the student and the program faculty member with review. This report will be signed by the student as recognition of discussion of the event, and the length of corrective action will be determined. The report will be maintained in the student's permanent file.

## III. DISMISSAL

Repeated failure to abide by the policies and procedures or an extreme violation of general, acceptable behavior as discussed earlier will result in dismissal from the program. The faculty reserves the right to request the withdrawal of any student whose integrity, health, or conduct is in conflict with the ethical standards of the profession of Radiologic Technology. A full report will be completed, signed by the student and the faculty and maintained in the student's permanent file and a copy given to the student. Students have the right of appeal as outlined in the RADT Student Handbook and Zane State College Catalog and Student Handbook.

## CURRICULUM FOR RADIOLOGIC TECHNOLOGY

<u>CRSE No.</u>	<u>Course Title</u>	<u>Credits</u>	<u>CRSE No.</u>	<u>Course Title</u>	<u>Credits</u>
<u>SUMMER SESSION I</u>			<u>SUMMER SESSION II</u>		
BIOL 2400	Anat. & Phys. I*	3	COMM	Comm. Elective	3
BIOL 2410	Anat. & Phys. I Lab*	1	RADT 2020	Rad Pathology*	2
ENGL 1500	Composition I	3	RADT 2400	Directed Practice III*	<u>2</u>
FYEX 1010	1 <sup>st</sup> Year Success Strat.	1			7
HLTH 1210	Medical Terminology*	2			
RADT 1010	Pt. Care Med Imag.*	<u>3</u>	<u>FALL SEMESTER II</u>		
		13	RADT 2030	Radiobio/Rad Prot*	2
<u>FALL SEMESTER I</u>			RADT 2040	Rad. Imaging & Processing*	3
BIOL 2420	Anat. & Phys. II*	3	RADT 2500	Directed Practice IV*	3
BIOL 2430	Anat. & Phys. II Lab*	1	RADT 2250	Sect Anat & Modal.*	<u>2</u>
MATH 1650	Statistics *	3			10
RADT 1015	Directed Practice I*	2	<u>SPRING SEMESTER II</u>		
RADT 1230	Rad. Procedures I*	<u>4</u>	RADT 2110	Medical Imaging Ethics & Law*	1
		13	RADT 2100	Image Analysis *	2
<u>SPRING SEMESTER I</u>			RADT 2600	Directed Practice V*	3
ENGL 2500	Composition II	3	RADT 2990	Preparation for Role Transition*	<u>2</u>
RADT 1050	Rad. Equip. & Prod.*	3			9
RADT 1250	Rad. Procedures II*	4			
RADT 1100	Directed Practice II*	2			
SOCI 2060	Race & Ethnicity	<u>3</u>			
		15			
			<b>TOTAL CREDIT HOURS</b>		<b>66</b>

Elective options can be found in the College catalogue or RADT Course of Study

**\* denotes those courses that the student must earn a grade of 'C' or better.**

Computer proficiency is a Zane State College requirement. This may be accomplished through successful completion of passing the proficiency exam or through successful completion of BMCA 1010, BMCA 1020, or BMCA 1050.

The Directed Practice courses do vary from the Department of Higher Education (Ohio Board of Regents) guidelines of 4500 minutes per credit hour. RADT 1050, RADT 1100, RADT 2400, RADT 2500, and RADT 2600 have a ratio of 6720 minutes per credit hour.

## ADVISORY COMMITTEE

The prime, overall direction and guidance for the RADT program is achieved through the Advisory Committee and its subcommittees. This committee essentially establishes all policies and procedures, modifies the curriculum, identifies program goals, strengths and weaknesses, and determines methods of program improvement. In general, the committee usually meets two times per year and includes the following members:

RADT Faculty Members  
RADT Clinical Preceptors  
Clinical Site Radiology Department Administrators  
Clinical Site Radiology Department Chief Technologists/Supervisors  
Radiology Administrators and/or Educators from the community  
RADT Club President or Sophomore RADT Student

## PROFESSIONAL ORGANIZATIONS

Students are encouraged to join professional organizations which promote continuing education and provide a diverse learning experience through meetings. Students are urged to become members of the following organizations:

### OHIO SOCIETY OF RADIOLOGIC TECHNOLOGISTS ([www.osrt.org](http://www.osrt.org))

The state professional organization presents an Annual Educational Meeting each spring, as well as various seminars throughout the year. Members of the OSRT receive a newsletter and students are eligible to run for the office of Student Director during their first year in the RADT program. Students must recognize this as a professional activity and abide by the Code of Conduct or disciplinary action may be taken.

### AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS ([www.asrt.org](http://www.asrt.org))

This is a national professional organization. A bimonthly professional journal is published by the ASRT which contains topics of interest for radiographers and students. Student study resources are available to student members. The ASRT holds an annual meeting at various locations throughout the United States and this society offers benefits such as insurance policies and monetary loans available to members at reasonable rates. Students may also apply for scholarship opportunities.



## THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS

The A.R.R.T. is a national certifying organization for the radiologic technology profession. Registration is not presently a mandatory prerequisite to practice as a radiographer, but it is a nationally recognized accomplishment required by most health care institutions. It is usually a condition for employment and generally required for any professional advancement. All graduates of the Zane State College Radiologic Technology program are eligible to apply to sit for the registry examination upon graduation and are employable as registry-eligible radiographers until registered.

Applications to the A.R.R.T. are made prior to graduation to sit for the examination. Graduates will apply for the administration of the examination during spring semester and take the exam following the graduation date. The application materials will be discussed and distributed as part of RADT 2990.

### **ZANE STATE COLLEGE Radiologic Technology Program**

#### **Concerns not addressed through College due process or other policies**

An occasion may arise in which a concern is made regarding an aspect of the Radiologic Technology Program that does not fall within the realm of the College's due process procedures or academic appeals process. Sources of such concerns may be clinical education sites, employers of graduates, or members of the public. When such a concern is brought to the attention of the program director, other program faculty, the division dean, or other institution administrators, the concern will be recorded by the program director on the program's Concern Form. Pertinent information and communications will be documented to include suggestions by parties involved for appropriate responses. A follow-up schedule to include the people who will receive further communication will be identified. Subsequent efforts and communication leading to a resolution will be attached to the form. All documentation will be kept on file in the RADT Program Director's office with copies provided to other administrators as deemed appropriate.

**ZANE STATE COLLEGE**  
**Radiologic Technology Program**  
**Concern Form**

Person initiating the concern \_\_\_\_\_

Date \_\_\_\_\_

Relationship with the college/program:

Description of the concern (include dates, description of incident/s):

Suggestions for response to concern:

Follow-up schedule and contacts:

Signatures (as appropriate):

Initiator: \_\_\_\_\_

Program Representative: \_\_\_\_\_

College Representative: \_\_\_\_\_

Other(s): \_\_\_\_\_

\_\_\_\_\_

(attach additional or subsequent documentation)

## CLINICAL COMPETENCY EDUCATION

### DEFINITION OF TERMS

1. OBSERVE  
The student can watch a radiographer perform a radiographic examination.
2. ASSIST  
The student can help the radiographer in performance of a radiographer examination in a manner determined by the radiographer, without actually performing the examination (i.e., bring patient into room, etc.)
3. PARTICIPATE  
The student will take part or have a part in the examination.
4. PERFORM  
The student conducts a radiographic examination under the direct supervision of the radiographer.
5. DIRECT SUPERVISION  
A registered radiographer is present with the student in an ionizing radiation room, or with an energized mobile unit.
6. INDIRECT  
A registered radiographer is immediately available for guidance, but not necessarily with the student in the ionizing radiation room. “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed.
7. RADIOGRAPHIC EXAMINATION  
This consists of a series of radiographs of an anatomical region, sufficient to permit diagnostic evaluation of that region.
8. CATEGORY  
A series of related radiographic examinations which demonstrates a specific area of the human body, (i.e., upper extremities), or group of studies.
9. COMPETENCY  
The student is able to perform radiographic examinations under indirect supervision and assume those duties and responsibilities as described by the clinical goals and objectives.
10. COMPETENCY EVALUATION  
Procedure by which the student's performance and the resulting radiographs for a specific examination are evaluated.
11. FINAL COMPETENCY EVALUATION  
Procedure by which the student's overall performance in all categories is evaluated. This consists of the performance of one examination from seven categories, chosen at random.
12. CLINICAL PRECEPTOR  
A registered staff radiographer that has been trained to evaluate the student within the boundaries of the Clinical Competency-based Plan.
13. SIMULATION  
The student performs the radiographic examination on a person other than a real patient for a competency evaluation. This will be done limitedly and at the discretion of the clinical preceptor or faculty member.

## CLINICAL COMPETENCY-BASED EDUCATION OVERVIEW

The implementation of a competency-based evaluation system conducted with a series of planned clinical rotations provides a standardized format for evaluation of the student in the clinical setting. In addition, the system is designed to allow each student to progress at an individual rate consistent with their abilities, knowledge, and motivation. However, minimum performance standards must be met to demonstrate satisfactory progress through the Directed Practice courses.

The didactic and laboratory aspects of the curriculum are well integrated with Directed Practice assignments to allow each student the opportunity to achieve program goals and objectives in the optimum manner. Concurrent didactic and Directed Practice experiences allow students to apply theoretical principles to the clinical situation in a systemic and organized manner. To achieve a meaningful and productive clinical experience, the student is provided with behavioral objectives which specify desired behaviors to be demonstrated in all areas of directed practice instruction. As the student masters the didactic and laboratory objectives, he/she applies these principles in the clinical setting, guided by the clinical objectives for each Directed Practice course.

### ATTAINMENT OF CLINICAL COMPETENCY

The student begins the clinical experience by observing and assisting the registered radiographer in the performance of radiographic examinations. This experience serves to familiarize the student with the care and radiography of patients for a given radiographic examination. Once the student masters the examination as taught in Radiographic Procedures I and II, he/she moves from a passive role to one of active participation, thus allowing "hands on" experience in the performance of procedures. These radiographic examinations are performed under the **direct supervision** of registered radiographers in each given category.

With the exception of portables and surgery, after passage of the laboratory practical on each examination, the student can be evaluated on the procedure by the clinical preceptor, faculty member, or clinical evaluators. For surgery, clinical competency cannot be obtained until four weeks after classroom instruction. For portables, clinical competency can be obtain immediately following classroom instruction on portable exams. The clinical preceptor and/or program faculty may be consulted and have the final determination of the competency grade. The evaluations are termed Competency Evaluations and the student must obtain the minimum number specified for each semester. No more than two passing Competency Evaluations may be carried over from semester to semester in order to fulfill the requirements of that semester. The student is required to pass 75 percent of competency evaluations on the FIRST ATTEMPT. Failure to comply will result in the student earning a letter grade of "D" and dismissal from the RADT program.

Should the student not pass a Competency Evaluation, he or she must successfully perform the failed procedure with a faculty member in the laboratory setting or perform the failed procedure under the direct supervision of the clinical preceptors. This is accomplished as circumstances allow, but must occur prior to the end of the semester.

Upon successful completion of the Competency Evaluation, the student can perform the exam/procedure **under indirect** supervision (portables and surgery must always be under direct supervision). The student demonstrates continued competency on these procedures through a Competency Maintenance Evaluation. Maintenances should be performed at least 6-8 weeks after competency and can either be requested by the student, program faculty, clinical preceptor, or technologist. The clinical preceptor and/or program faculty may be consulted and have the final determination of the competency maintenance grade. A specified number of Competency Maintenance Evaluations are required per semester and the student must meet these specifications in order to pass the Directed Practice course. No more than two passing competency maintenance evaluations may be carried over from semester to semester in order to fulfill the requirements of that semester. The student is required to pass 75 percent of competency maintenance evaluations on the FIRST ATTEMPT. Failure to comply will result in the student being assigned a letter grade of "D" and dismissed from the RADT program. No more than one competency maintenance examination may be done in regard to the Ancillary Duties Category. If the student does not complete the required number of Competency Evaluations or Competency Maintenance Evaluations for that semester, then a grade of zero will be earned for each not completed. For RADT 2600, competency maintenances will not be permitted for the following exams: KUB, chest, finger, hand, wrist, toe, foot, and ankle with the exception of geriatric and pediatric patients.

Students may simulate examinations in accordance to the ARRT. Simulations will not be permitted for surgery, fluoroscopy procedures, portables, trauma, or pediatrics. All simulation exams are at the discretion of the program faculty.

**A student may not perform repeat radiographs without the direct supervision of a registered radiographer, regardless of direct/indirect supervision status on a given examination / procedure. All images must be evaluated by a registered technologist prior to dismissing the patient!**

### THE FINAL COMPETENCY EVALUATION

The Final Competency Evaluation is designed to test the overall clinical performance of the student during their graduating semester. To accomplish this, the student must successfully complete one examination from a total of eight categories (six out of eight must be completed with a CI or a technologist designated by the CI). No more than one examination/procedure may be simulated on the Final Competency Evaluation for completion. Simulations will be done only at the discretion of the Clinical Preceptor and not before the last two weeks of the graduating semester. The student must successfully complete the Final Competency Evaluation to be eligible for graduation and to apply to sit for the national registry examination given by the American Registry of Radiologic Technologists (A.R.R.T.). Students must pass seven of the eight Final Competency Evaluations. Remediation will be required for the failed exam, however re-attempting the exam (or category) is not required. **Students who fail two Final Competency Evaluations will earn a "D" in RADT 2600. All repeat examinations must be taken under the direct supervision of a registered radiographer.**

The RADT program has a zero tolerance for alcohol or illicit drug use. Student and client safety

is a top priority. If there is evidence that a student may be under the influence of alcohol or illicit drugs, the student may be excluded from participation in any laboratory in which the faculty member foresees potential for harm to students or clients. In the clinical or practice settings, with suspicion or evidence of illicit drug and/or alcohol use, spontaneous drug testing may be required according to policies and procedures of the clinical practice site. Students will be suspended from clinical practice or fieldwork until test results exonerate the student or the student has provided evidence of evaluation for chemical dependency and completed any subsequent treatment and rehabilitation as indicated. Students should refer to the RADT Handbook for the complete drug prevention policy.

### **REMOVAL OF A COMPETENCY**

It is the responsibility of the student to stay knowledgeable and competent in an exam after earning a competency and a maintenance can be requested at any time. It is the right of the program faculty to remove a clinical competency if it determined that the student is no longer competent in the exam and threatens patient safety.

Once the clinical preceptor has been notified in writing of a concern or has observed the error(s), the student will be counseled regarding the behavior/errors. At this time the student will need to remediate with the Program Director or Clinical Coordinator at the college. If the behavior continues, the competency will be removed and a grade of “zero” will be recorded in the competency section of that clinical course.

If the behavior/error was so egregious, a competency can be immediately removed with the same grading consequences of above. If this would occur during a graded maintenance exam, the maintenance attempt would not count, however a grade of zero would be placed in the student’s competency category.

### **AFFECTIVE EVALUATION**

The purpose of the affective evaluation is to evaluate the behavioral traits and actions of the student in the clinical setting. Ten (10) Affective Evaluations will be required per directed practice course. Five (5) evaluations will be due by Friday of Week 7, with the exemption of RADT 2400 in which the five evaluations will be due by Friday of Week 6. Any evaluations not completed by that day will earn a zero. Any of the remainder evaluations not completed by the first day of the final week of the semester will result in a zero. Only one (1) affective evaluation will be accepted per day. If two (2) evaluations were handed in for the same day they would be averaged. It is suggested that students obtain one (1) evaluation per week.

The student must also earn a minimum final average of 75% in their affective evaluations. If the student does not earn a final average of 75% on their affective evaluations, then a grade of “D” will be earned for the clinical course grade. The student, program faculty, clinical preceptor, or technologist can request the completion of an affective evaluation.

## DIRECTED PRACTICE HOURS

For the majority of the RADT program, the student will be assigned Directed Practice rotations Monday through Friday during the hours of 6:00 a.m. to 7:00 p.m. During these hours, the student will be assigned to a specific room, radiographic specialty area, or shift. At other times during the two year period, the student will be scheduled for Directed Practice rotations during non-routine hours. Tentative Directed Practice assignments will be scheduled as follows:

<u>Rotation</u>	<u>Weeks</u>	<u>Rotation</u>	<u>Weeks</u>
<b><u>RADT 1015 - Fall I</u></b>		<b><u>RADT 2500 - Fall II (New Site)</u></b>	
Office	1	Ancillaries	1
Transport	1	General	4
General	9	Portable	2
Fluoro	2	Fluoro	3
Portable	1		
3-11pm	1		
Preceptor Choice	1 day	Surgery	2 (consec)
		3-11pm	1
		CT	1
		Modalities (US, Rad Onc, Card.	1
		Cath	
		Preceptor Choice	1 day
<b><u>RADT 1100 - Spring I</u></b>		<b><u>RADT 2600 - Spring II</u></b>	
General	5	General	5
Portable	3	Portable	2
Fluoro	3	Fluoro	3
Surgery	2 (consec)	Surgery	2 (consec)
3-11pm	2	3-11pm	2
		Modalities (NM, MRI, Choice)	1
		CT Elective (to replace general week)	1
<b><u>RADT 2400 - Summer II</u></b>			
General	2		
Portable	2		
Fluoro	2		
Surgery	2		
3-11pm	1		
Specials	1		
11pm-7am (Fri/Sat/Sun) *Off clinic Fri dayshift of 1 <sup>st</sup> night and M/W/F the following week)	1		

## PURPOSE OF NON-ROUTINE DIRECTED PRACTICE ROTATIONS

The general intent of scheduling a student for a non-routine rotation is to provide learning experiences and opportunities not readily available during regularly scheduled Directed Practice hours. For examples, the student is more likely to play an involved role in radiography of a traumatized patient during an evening rotation. Such experience serves to increase the student's sense of responsibility and self-confidence. The RADT program believes that such non-routine rotations greatly enhance and compliment the educational process. However, Directed Practice hours spent in evening and/or weekend assignments does not exceed 25% of the total clinical clock hours. These non-routine rotations serve to:

1. Acquaint the student in a more direct role with the care, handling, and radiography of traumatized and other non-routine patients.
2. Provide increased opportunity to gain proficiency in performing examinations of a critical/complex nature on an individualized basis.
3. Develop a degree of student independence of thought and action in the performance of duties.
4. Increase student confidence in their abilities through more independent actions.
5. Become familiar with medical imaging department protocol that differs from that practiced during routine hours.
6. Develop appreciation of the interdepartmental cooperation necessary for quality patient care.
7. Establish a work ethic and pattern that resembles that of an employable radiologic technologist.

## DIRECTED PRACTICE ADVISING

The Clinical Preceptor will counsel the student in regards to their progress and inform faculty of any problems that the student may be having. The student must attend two clinical conferences with the Clinical Preceptor to discuss progress and problems; one mid-term and one end-of-the semester.



## STUDENT EVALUATION OF CLINICAL INSTRUCTION

Student feedback about clinical instruction is considered vital to the viability of the evaluation process. At the end of spring semester, the student will complete an Evaluation of Clinical Instruction form for their clinical preceptor and other staff radiographers. This form is designed to assess the radiographer's performance from the student's perspective. These evaluations serve to:

1. Recognize the value of positive clinical instruction.
2. Focus on means of improving the student's clinical experience.
3. Identify any potential problems occurring with the clinical evaluation system.

In addition, the student should feel free to voice any comments or suggestions to the RADT program faculty. The program reserves the right to modify the clinical evaluation system at any time during the year, as the need arises. Student will always be informed in advance of any changes that are pertinent to them.

## DIRECTED PRACTICE GOALS AND OBJECTIVES

The goals of the clinical competency evaluation system are, that under indirect supervision, the student will be able to:

1. Perform any examination/procedure listed on the Radiological Procedures list.
2. Produce technically satisfactory radiographs with minimum radiation exposure and discomfort to the patient.

In order to successfully complete a competency evaluation, the student must meet the following objectives with a minimum composite score of 76%. In order to successfully complete the clinical education, the student must pass a minimum of 75% of attempted competencies and competency maintenances on the first attempt.

1. The student will review the patient requisition.
  - a. Assess the requisition for correct and necessary information.
  - b. Recognize conflicting clinical history and examination ordered.
  - c. Recall the patient's name and age.
  - d. Identify the mode of transportation to the radiology department.
  - e. Recall the date of the exam and the date that the requisition was completed.
2. The student will demonstrate proper room preparation.
  - a. Provide a clean table and/or upright grid device for the patient.
  - b. Maintain an orderly work area.
  - c. Maintain a proper inventory of supplies.
  - d. Ready the radiographic unit (tube, table, console)
  - e. Provide appropriate size and type of cassettes for the exam requested.
  - f. Set the average technique before patient arrival into the room.

3. The student will demonstrate proper patient preparation.
  - a. Introduce themselves to the patient in a courteous manner.
  - b. Select the correct patient for the examination.
  - c. Gown the patient in the manner indicated by the procedure.
  - d. Assist the patient to and from the radiographic room in a safe and courteous manner.
  - e. Maintain the patient's respect and dignity throughout the procedure.
  - f. Converse with the patient in an intelligent, professional manner.
  - g. Communicate procedure instructions to the patient with clarity.
  - h. Obtain and record a precise patient clinical history.
  - i. Question females of child-bearing age about the possibility of pregnancy.
  - j. Ensure patient safety.
  
4. The student will position the patient using the standard methods employed for each examination.
  - a. Position the patient in the manner described in the radiology department procedures manual.
  - b. Instruct the patient to assume a physical position with concise instructions.
  - c. Position the correct area of interest to be radiographed.
  - d. Maintain patient comfort.
  - e. Remove unwanted articles from the area to be radiographed.
  - f. Complete each examination in an appropriate time as determined by the patient's condition and the student's level of clinical education and experience.
  
5. The student will manipulate all radiographic equipment pertinent to each examination.
  - a. Center the central ray correctly to the part to be radiographed.
  - b. Center the part to the image receptor.
  - c. Correctly angle the central ray.
  - d. Maintain the proper source-to-image receptor distance for each projection.
  - e. Move the radiographic tube from horizontal to/from vertical and correctly move the tube in other directions as needed.
  - f. Utilize all equipment locks to avoid damage to equipment or injury to the patient or self.
  - g. Collimate to the area or part of interest.
  - h. Select the proper size and type of cassette for each projection.
  - I. Employ a grid when necessary.
  - j. Correctly place cassette in table.
  - k. Operate all controls on the mobile radiographic unit.
  - l. Operate all fluoroscopic controls in the proper manner.
  - m. Identify each radiograph with 'R' or 'L' or other appropriate marker(s) in the correct location.
  - n. Display patient information in the proper space.
  - o. Place any 'time' markers appropriately on the cassette/radiograph.
  - p. Appropriately utilize computers.
  
6. The student will demonstrate correct technical factor manipulation.
  - a. Interpret a technique chart to set the proper exposure factors.
  - b. Set the automatic exposure control device in the proper manner.
  - c. Measure the patient correctly to determine radiographic exposure factors, when applicable.
  - d. Select the correct combination of factors at the control console.
  - e. Adapt the exposure technique for changes in SID, cassette type, pathology, etc., when applicable.
  - f. Establish exposure factors to prevent patient motion.

7. The student will employ proper radiation protection measures for the patient and the operator.
  - a. Use gonadal shielding when appropriate.
  - b. Wear a lead apron and gloves in the presence of ionizing radiation.
  - c. Maximize the distance between the radiation source and self.
  - d. Minimize the time spent in an area of radiation, when appropriate.
  - e. Employ proper technical factors and proper positioning methods to avoid repeat radiographs.
  - f. Shield all patients where appropriate.
  
8. The student will demonstrate proper procedures for making the radiographic exposure.
  - a. Instruct the patient in proper breathing instructions for each projection.
  - b. Observe the patient and the control console during the exposure time.
  - c. Utilize a protective barrier while making the radiographic exposure.
  
9. The student will assess each finished radiograph for adequacy.
  - a. Identify all pertinent anatomical parts visible on the radiograph.
  - b. Determine if rotation of the body part(s) is present.
  - c. Determine if motion is present.
  - d. Describe the adequacy of the exposure factors chosen.
  - e. Describe the overall radiographic quality of the image.
  - f. State if the radiograph is correctly identified and marked.
  - g. Discuss means of improving the radiograph.
  
10. The student will demonstrate the proper elements of communication to dismiss the patient following the radiographic procedure.
  - a. Complete all necessary paperwork, as required.
  - b. Give proper post-procedure instructions, when applicable.
  - c. Dispatch the patient to the proper destination after the examination.
  - d. Transport the patient to the proper destination after the examination, when applicable.
  
11. The student will demonstrate proper procedure when utilizing contrast media.
  - a. Locate syringes, needles, and other supplies, as needed.
  - b. Prepare sterile trays and instruments to avoid contamination.
  - c. Understand contrast media dosage, use, and potential adverse reactions.
  - d. Monitor the patient's condition throughout the procedure.
  - e. State the proper location of emergency equipment pertinent to the examination.

## Radiography Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified and registered by the ARRT have demonstrated competency performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the radiography examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education.

As part of the educational program, candidates must demonstrate competence in the clinical activities identified below:

- Ten mandatory general patient care activities;
- 36 mandatory imaging procedures;
- 15 elective imaging procedures selected from a list of 34 procedures;
- One of the 15 elective imaging procedures must be selected from the head section; and
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.

One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur but not both).

### 1. General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

\*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

## **Radiography Clinical Competency Requirements (cont.)**

### **2. Radiologic Procedures**

**Requirements:** Candidates must demonstrate competence in all 36 procedures identified as mandatory (M). Candidates must demonstrate competence in 15 of the 34 elective (E) procedures. Elective procedures should be performed on patients; however, electives may be simulated if demonstration on patients is not feasible. Simulations must meet the following criteria: (a) the student is required to competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor, and affective skills required in the clinical setting; (b) the program director is confident that the skills required to competently perform the simulated task will generalize or transfer to the clinical setting.

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate: patient identity verification; examination order verification; patient assessment; room preparation; patient management; equipment operation; technique selection; patient positioning; radiation safety; image processing; and image evaluation.

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Chest and Thorax</b>					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
<b>Upper Extremity</b>					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
<b>Trauma:</b> Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
<b>Trauma:</b> Upper Extremity (Non-Shoulder)*	✓				
<b>Lower Extremity</b>					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		
Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
<b>Trauma:</b> Lower Extremity*	✓				

\* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Head</b> – Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
<b>Spine and Pelvis</b>					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
<b>Abdomen</b>					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		
Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Fluoroscopy Studies</b> – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus (NOT Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
<b>Mobile C-Arm Studies</b>					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
<b>Mobile Radiographic Studies</b>					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
<b>Pediatric Patient</b> (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity		✓	✓		
Abdomen		✓	✓		
Mobile Study		✓	✓		
<b>Geriatric Patient</b> (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine		✓			
<b>Subtotal</b>					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		



**ZANE STATE COLLEGE  
RADIOLOGIC TECHNOLOGY  
COMPETENCY EVALUATION**

Student: \_\_\_\_\_  
 Evaluator: \_\_\_\_\_  
 Examination: \_\_\_\_\_  
 Score: \_\_\_\_\_

Date: \_\_\_\_\_  
 Room: \_\_\_\_\_

Start Time: \_\_\_\_\_  
 Finish time: \_\_\_\_\_  
 Patient ID No. \_\_\_\_\_

ACTIVITY	TASKS – Includes but not limited to items listed	MINUS POINTS		COMMENTS
Multiple Attempts	Second attempt _____	.4	_____	
	Third attempt _____	.7	_____	
	Fourth or more attempts _____	1.0	_____	
Review Requisition/ Verify Order	Check: PT NAME _____	.6	_____	
	CORRECT EXAM _____	1.3	_____	
	Age, Ambulation _____	.2	_____	
	History _____	.2	_____	
Room Preparation	Date _____	.2	_____	
	Clean table/room _____	.3	_____	
	Tube warm up _____	.3	_____	
	IR/grid ready _____	.3	_____	
	Locate sponges, sandbags, tape _____	.3	_____	
Patient Preparation	Set average technique _____	.2	_____	
	Proper hand hygiene _____	.3	_____	
	Introduce self; ask name _____	.2	_____	
	POSITIVELY IDENTIFY PT _____	1.3	_____	
	Ensure proper gowning of pt _____	.6	_____	
	Assist pt to room and table _____	.6	_____	
	Maintain pt modesty _____	.3	_____	
	Establish rapport with pt _____	.2	_____	
	Explain exam to pt _____	.4	_____	
Obtain & record pt history _____	.3	_____		
Position Patient	DETERMINE POSSIBILITY OF PREG _____	1.3	_____	
	ENSURE PATIENT SAFETY AT ALL TIMES _____	1.3	_____	
	2 minutes per view _____	.6	_____	
	INSTRUCT PT TO ASSUME POSITION _____	1.3	_____	
	POSITION AREA OF INTEREST _____	1.3	_____	
	CENTER AREA OF INTEREST TO IR _____	1.3	_____	
	Minimize pressure to injury/pt movement _____	.6	_____	
	Explain movements to pt _____	.2	_____	
REMOVE RADIOPAQUE OBJECTS _____	1.3	_____		
Manipulate Equipment	PERFORM ALL REQUIRED VIEWS _____	1.3	_____	
	DIRECT CENTRAL RAY TO PART _____	1.3	_____	
	ANGLE CENTRAL RAY APPROPRIATELY _____	1.3	_____	
	USE CORRECT SID _____	1.3	_____	
	USE APPROPRIATE OID _____	1.3	_____	
	ALIGN CR AND IR _____	1.3	_____	
	Use all appropriate locks _____	.2	_____	
	Position IR under anatomy _____	.6	_____	
	Collimate to part _____	.4	_____	
	USE CORRECT IR _____	1.3	_____	
	USE CORRECT GRID (OR NONGRID) _____	1.3	_____	
	Immobilize area of interest _____	.6	_____	
	Correctly position all ID markers _____	.6	_____	
UTILIZE ALL COMPUTER SYSTEMS _____	1.3	_____		

ACTIVITY	TASKS – Includes but not limited to items listed	MINUS POINTS		COMMENTS
Technique Setting	Measure body part if appropriate _____ Refer to technique chart _____ SET APPROPRIATE TECHNIQUE _____ Adapt technique _____ (pathology, minimize motion)	.2 .3 1.3 .6	_____ _____ _____ _____	
Radiation Protection	Use gonadal shield as appropriate _____ Use lead aprons, gloves as needed _____ Wear dosimetry badge _____ ENSURE PROTECTION OF SELF & STAFF _____	.6 .6 .6 1.3	_____ _____ _____ _____	
Make Exposure	CORRECT BREATHING INSTRUCTION _____ Correct movement instruction _____ Observe pt and control panel _____ Make exposure from protected area _____	1.3 .4 .4 .6	_____ _____ _____ _____	
Evaluate Radiograph	Identify anatomy demonstrated _____ ALIGNMENT OF ANATOMY, TUBE, IR _____ Evaluate exposure factors _____ Minimal unsharpness _____ Correct ID marker visible _____	.6 1.3 .6 .4 .3	_____ _____ _____ _____ _____	
Dismiss Patient	Complete requisition _____ Document exam completion _____ Give post procedure instruction _____ Transport pt to appropriate loc. _____	.2 .2 .6 .2	_____ _____ _____ _____	
Contrast Media	Contrast media prepared _____ Explain contrast administration _____ Sterile tray prepared _____ Locate emergency equipment _____	1.3 .6 1.3 1.3	_____ _____ _____ _____	

DIFFICULTY LEVEL	SIGNATURES
<input type="checkbox"/> Average Difficult Level <input type="checkbox"/> Above Average Difficult <input type="checkbox"/> Pt unconscious <input type="checkbox"/> Pt unable to maintain position on own strength <input type="checkbox"/> Pt requires immobilization <input type="checkbox"/> Pt care equipment requires adaptation from routine <input type="checkbox"/> Pt requires constant observation due to illness or age <input type="checkbox"/> Pt in soft restraints <input type="checkbox"/> Trauma pt <input type="checkbox"/> Other _____	TOTAL POINTS: _____ (5.0 - _____) 3.8 minimum passing score  STUDENT: I feel confident in performing this procedure without direct supervision. <input type="checkbox"/> Agree <input type="checkbox"/> Disagree  EVALUATOR: This student is competent to perform this procedure without direct supervision. <input type="checkbox"/> Agree <input type="checkbox"/> Disagree
ADDITIONAL COMMENTS: _____ _____ _____	
_____ STUDENT'S SIGNATURE	_____ DATE
_____ EVALUATOR'S SIGNATURE	_____ DATE

**ZANE STATE COLLEGE  
RADIOLOGIC TECHNOLOGY  
COMPETENCY MAINTENANCE EVALUATION**

Student: \_\_\_\_\_ Date: \_\_\_\_\_ Start Time: \_\_\_\_\_  
 Evaluator: \_\_\_\_\_ Finish time: \_\_\_\_\_  
 Examination: \_\_\_\_\_ Room: \_\_\_\_\_ Patient ID No. \_\_\_\_\_  
 Score: \_\_\_\_\_

ACTIVITY	TASKS – Includes but not limited to items listed	MINUS POINTS		COMMENTS
Multiple Attempts	Second attempt _____	.4	_____	
	Third attempt _____	.7	_____	
	Fourth or more attempts _____	1.0	_____	
Review Requisition/ Verify Order	Check: PT NAME _____	.6	_____	
	CORRECT EXAM _____	1.3	_____	
	Age, Ambulation _____	.2	_____	
	History _____	.2	_____	
Room Preparation	Date _____	.2	_____	
	Clean table/room _____	.3	_____	
	Tube warm up _____	.3	_____	
	IR/grid ready _____	.3	_____	
	Locate sponges, sandbags, tape _____	.3	_____	
Patient Preparation	Set average technique _____	.2	_____	
	Proper hand hygiene _____	.3	_____	
	Introduce self; ask name _____	.2	_____	
	POSITIVELY IDENTIFY PT _____	1.3	_____	
	Ensure proper gowning of pt _____	.6	_____	
	Assist pt to room and table _____	.6	_____	
	Maintain pt modesty _____	.3	_____	
	Establish rapport with pt _____	.2	_____	
	Explain exam to pt _____	.4	_____	
Obtain & record pt history _____	.3	_____		
Position Patient	DETERMINE POSSIBILITY OF PREG _____	1.3	_____	
	ENSURE PATIENT SAFETY AT ALL TIMES _____	1.3	_____	
	2 minutes per view _____	.6	_____	
	INSTRUCT PT TO ASSUME POSITION _____	1.3	_____	
	POSITION AREA OF INTEREST _____	1.3	_____	
	CENTER AREA OF INTEREST TO IR _____	1.3	_____	
	Minimize pressure to injury/pt movement _____	.6	_____	
	Explain movements to pt _____	.2	_____	
Manipulate Equipment	REMOVE RADIOPAQUE OBJECTS _____	1.3	_____	
	PERFORM ALL REQUIRED VIEWS _____	1.3	_____	
	DIRECT CENTRAL RAY TO PART _____	1.3	_____	
	ANGLE CENTRAL RAY APPROPRIATELY _____	1.3	_____	
	USE CORRECT SID _____	1.3	_____	
	USE APPROPRIATE OID _____	1.3	_____	
	ALIGN CR AND IR _____	1.3	_____	
	Use all appropriate locks _____	.2	_____	
	Position IR under anatomy _____	.6	_____	
	Collimate to part _____	.4	_____	
	USE CORRECT IR _____	1.3	_____	
	USE CORRECT GRID (OR NONGRID) _____	1.3	_____	
Immobilize area of interest _____	.6	_____		
Correctly position all ID markers _____	.6	_____		
UTILIZE ALL COMPUTER SYSTEMS _____	1.3	_____		

ACTIVITY	TASKS – Includes but not limited to items listed	MINUS POINTS		COMMENTS
Technique Setting	Measure body part if appropriate _____ Refer to technique chart _____ SET APPROPRIATE TECHNIQUE _____ Adapt technique _____ (pathology, minimize motion)	.2 .3 1.3 .6	_____ _____ _____ _____	
Radiation Protection	Use gonadal shield as appropriate _____ Use lead aprons, gloves as needed _____ Wear dosimetry badge _____ ENSURE PROTECTION OF SELF & STAFF _____	.6 .6 .6 1.3	_____ _____ _____ _____	
Make Exposure	CORRECT BREATHING INSTRUCTION _____ Correct movement instruction _____ Observe pt and control panel _____ Make exposure from protected area _____	1.3 .4 .4 .6	_____ _____ _____ _____	
Evaluate Radiograph	Identify anatomy demonstrated _____ ALIGNMENT OF ANATOMY, TUBE, IR _____ Evaluate exposure factors _____ Minimal unsharpness _____ Correct ID marker visible _____	.6 1.3 .6 .4 .3	_____ _____ _____ _____ _____	
Dismiss Patient	Complete requisition _____ Document exam completion _____ Give post procedure instruction _____ Transport pt to appropriate loc. _____	.2 .2 .6 .2	_____ _____ _____ _____	
Contrast Media	Contrast media prepared _____ Explain contrast administration _____ Sterile tray prepared _____ Locate emergency equipment _____	1.3 .6 1.3 1.3	_____ _____ _____ _____	

DIFFICULTY LEVEL	SIGNATURES
<input type="checkbox"/> Average Difficult Level <input type="checkbox"/> Above Average Difficult <input type="checkbox"/> Pt unconscious <input type="checkbox"/> Pt unable to maintain position on own strength <input type="checkbox"/> Pt requires immobilization <input type="checkbox"/> Pt care equipment requires adaptation from routine <input type="checkbox"/> Pt requires constant observation due to illness or age <input type="checkbox"/> Pt in soft restraints <input type="checkbox"/> Trauma pt <input type="checkbox"/> Other _____	TOTAL POINTS: _____ (5.0 - _____) 3.8 minimum passing score  STUDENT: I feel confident in performing this procedure without direct supervision. <input type="checkbox"/> Agree <input type="checkbox"/> Disagree  EVALUATOR: This student is competent to perform this procedure without direct supervision. <input type="checkbox"/> Agree <input type="checkbox"/> Disagree
ADDITIONAL COMMENTS: _____ _____ _____	
_____ STUDENT'S SIGNATURE	_____ DATE
_____ EVALUATOR'S SIGNATURE	_____ DATE

## AFFECTIVE EVALUATION

1. ATTENDANCE/PUNCTUALITY: Consistently prompt and reliable in attendance; ready to start at beginning of shift.
2. APPEARANCE: Well groomed; follows appropriate dress code; neat and careful about appearance.
3. ADAPTABILITY: Adjusts readily to changes and accepts new situations without complaint; shows poise and control under pressure.
4. MOTIVATION/INITIATIVE: Does assigned work well and frequently seeks additional responsibilities; utilizes time effectively; starts assignments without prompting
5. PROFESSIONALISM/DISCRETION: Respects confidentiality; respects patients' rights, needs, and diversity; does not participate in gossip; behavior and language are appropriate for clinical setting.
6. RESPONSIBILITY/ACCOUNTABILITY: Accepts responsibility for performance; takes steps to correct errors; does not blame others or make excuses.
7. CONFIDENCE: Can perform most previously learned tasks without reassurance of abilities; not overly or inappropriately confident.
8. ATTITUDE: Accepts criticism without defensiveness; does not act resentful or argumentative
9. COOPERATIVE/TEAMWORK: Consistently cooperative; works well with other students; hospital staff and physicians; volunteers to help with other assignments when they are not busy.
10. JUDGEMENT: Makes sound, appropriate decisions in all situations using good critical thinking skills according to level of clinical experience.
11. COMMUNICATION AND INTERPERSONAL SKILLS: Explains procedures and situations to patients and others appropriately according to their ability to understand; demonstrates compassion for others and adjusts well to personality differences; always courteous and tactful.
12. DEPENDABILITY: Carries out all tasks in a timely and conscientious manner with appropriate supervision according to level of education.

**ZANE STATE COLLEGE  
RADIOLOGIC TECHNOLOGY PROGRAM  
AFFECTIVE EVALUATION**

Student _____ Date/Week _____ Area _____ Please consider student's level of clinical experience.	Excellent	Above Average	Average	Below Average	Unsatisfactory	Does not Apply or Did Not Observe	Comments
<u>ATTENDANCE/PUNCTUALITY</u> : Consistently prompt and reliable in attendance; ready to start at beginning of shift.							
<u>APPEARANCE</u> : Well groomed; follows appropriate dress code.							
<u>ADAPTABILITY</u> : Adjusts readily to changes and accepts new situations without complaint; shows poise and control under pressure.							
<u>MOTIVATION/INITIATIVE</u> : Does assigned work well and frequently seeks additional responsibility.							
<u>PROFESSIONALISM/DISCRETION</u> : respects confidentiality, respects patients' rights, needs, and diversity; behavior and language are appropriate for clinical setting.							
<u>RESPONSIBILITY/ACCOUNTABILITY</u> : Accepts responsibility for performance; takes steps to correct errors; does not blame others or make excuses.							
<u>CONFIDENCE</u> : Can perform most previously learned tasks without reassurance of abilities; not overly or inappropriately confident.							
<u>ATTITUDE</u> : Accepts criticism without defensiveness; does not act resentful or argumentative.							

	Excellent	Above Average	Average	Below Average	Unsatisfactory	Does not Apply or Did Not Observe	Comments
<u>COOPERATIVE/TEAMWORK</u> : Consistently cooperative; works well with other students; hospital staff and physicians; volunteers to help with other assignments when they are not busy.							
<u>JUDGEMENT</u> : Makes sound, appropriate decisions in all situations using good critical thinking skills according to level of clinical experience.							
<u>COMMUNICATION AND INTERPERSONAL SKILLS</u> : Explains procedures and situations to patients and others appropriately according to their ability to understand; demonstrates compassion for others and adjusts well to personality differences; always courteous and tactful.							
<u>DEPENDABILITY</u> : Carries out all tasks in a timely and conscientious manner with appropriate supervision according to level of education.							