



WASHINGTON HEALTH SYSTEM
School of Radiologic Technology

Use of This Handbook

This Handbook is intended as a guide to the School's policies pertaining to all aspects of your education that are in existence at the time of its writing. It is also intended as a guide to provide information regarding common areas of concern; however it cannot anticipate and answer every question or problem that might arise. As a result, amendments or supplements to the Handbook can be made by the School as it deems necessary with or without direct notice to students. If you are unclear about any of your obligations or rights as a student in a clinical activity, you should discuss your questions with the faculty member leading the activity or the Program Director of your school. We believe that these rules will promote a fair and effective learning environment for all of our students. The faculty and staff of the clinical programs wish you every success in your activities.

The Washington Health System Radiologic Technology Program student handbook is available through the schools public website <http://www.washingtonhospital.org/schools/radiology/>. Students are responsible for reading and abiding by the policies and procedures. Failure to adhere to any/all of the policies and procedures may lead to immediate dismissal from the program.

Confidentiality Statement

As a student enrolled the WHSSRT, it is your obligation to preserve the patient's fundamental right to privacy and confidentiality in accordance with the HIPAA Privacy Rule.

Any violation of hospital policies concerning confidentiality, privacy, or computer usage can result in immediate dismissal action.

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The Washington Health System (WHS)

First interest in a hospital for Washington began in the early 1880s, and a house on North College Street became the first hospital. This first venture, however, was short-lived, and it was not until 1897 that Washington Health System was successfully launched. The A. W. Acheson Homestead on Acheson Avenue was secured and altered to care for 20 patients and opened to the public in May 1898. In 1906 a new hospital movement was started, and the City Hospital Association was chartered. A new building was erected and opened in April 1907. The Washington and the City Hospitals were consolidated in 1921 when the two merged to become Washington Health System. The need for a larger, more modern hospital was felt as the years passed, and the Wilson Development Company donated seven acres of land on the north edge of the city for a new building, which was erected and opened to the public in March 1927. In 1984, the Board of Trustees approved development of Neighbor Health Center, housing a day surgery facility, outpatient radiology, laboratory, and EKG services, as well as the Family Practice Center and the Women's Imaging Center, located at 95 Leonard Avenue. In 1985-86, a master facility plan was developed to take the hospital into the 21st century. Construction of our Cancer Treatment Center, along with a new parking lot, new surgical suites and critical care units, and renovation or relocation of many hospital departments, began in 1987. One of the latest services instituted by Washington Health System has been open-heart surgery. The hospital is the only hospital in Pennsylvania south of Pittsburgh offering this service. A patient tower was part of the hospital's construction project. The tower consists of patient floors and includes a medical/surgical, oncology nursing unit; a unit for expanded cardiac services; and a special women's services unit with emphasis on maternity care. A helipad is on the top of the tower. Recent developments include the Wilfred R. Cameron Wellness Center of Washington Health System, Strabane Woods of Washington Assisted Living, and Donnell House, a residential hospice. Expansion of the facility to include a new emergency department, surgical suites, and critical care unit was completed in 2009. In Greene became part of the WHS System and Meadowslanding was built. The WHS System continues to grow and to enrich its services to the community by meeting the community's needs and offering quality care.

The Washington Health System's School of Radiologic Technology

The School of Radiologic Technology has been accredited since March 1957 by the Committee on Allied Health Education and Accreditation (CAHEA) in cooperation with the Joint Review Committee on Education in Radiologic Technology (JRCERT). In 1994, the Joint Review Committee was recognized by the U.S. Department of Education as the accrediting body for radiography programs.

In 2012, the program articulated with California University to offer an Associate Degree in Radiologic Sciences. Through a collaborative relationship between Washington Health System and Cal U, students attend classes both on the Cal U campus and at the hospital.

In addition to classroom involvement, the co-educational program utilizes the facilities in a clinical radiology department and off site facilities, which performs over 180,000 examinations per year. The clinical component of the program includes some evening and weekend rotations. Washington Health System off-site facilities are within a 60 mile radius of the hospital.

The educational program begins in August and runs for 24 months with seven weeks' vacation during the course. Total enrollment is limited to a maximum of 30 students. Qualified applicants will be admitted to the School of Radiologic Technology without regard to race, color, religion, age, gender, national origin, sexual preference, disability, or any other protected class. Notwithstanding this statement, a disability (with or without a reasonable accommodation) cannot interfere with the normal duties of a radiographer, including:

- ◆ Assisting a patient from stretcher/wheelchair to the x-ray table
- ◆ Moving the x-ray tube assembly in all directions
- ◆ Placing an image receptor in the IR tray and removing it from the tray
- ◆ Lifting a 50-pound object
- ◆ Reading requisitions/orders with extreme accuracy
- ◆ Observing a patient's respiration at a distance of 10 feet
- ◆ Hearing a patient's request within a radiographic room

Administrative Officers

President and CEO

Gary B. Weinstein
Office: 724-223-3007

Executive Vice President and COO

Brook Ward
Office: 724-223-3010

Vice President, Patient Care Services

Karen A. Bray, RN, MSN
Office: 724-223-3245

Director, Education Institute

Lynn Vescio, RN, BSN, MS
Office: 724-223-3117
Email: lvescio@whs.org

Department of Radiology and Nuclear Medicine

Medical Director of Diagnostic Radiology

Dr. Wilson Pyle, M.D.
Office: 724-229-1728

Medical Director of Interventional Radiology and
Vascular Imaging

Dr. Philip Wildenhain, M.D.
Office: 724- 229-2014

Director, Radiology/Nuclear Medicine

John Ireland, M.B.A., R.T.(R)(CT)(ARRT)
Office: 724-223-3319

Manager, Radiology

Paul Rimel, B.A.,
R.T.(R)(CT)(MRI)(ARRT)
Office: 724-223-3318

Manager, Women's Imaging Center

Michelle McIlvaine, R.T.(R)(M)(ARRT)
Office: 724-229-2260

Radiographer Program Officials

Director, School of Radiologic Technology

Lisa Finnegan, M.S., R.T.(R)(CT)(BD)(ARRT)
Office: 724-229-2084
Fax: 724-250-4417
Email: lfinnegan@whs.org

Clinical Coordinator, School of Radiologic Technology

Kelli L. Alexander, M.S. R.T.(R) (ARRT)
Office: 724-229-3645
Fax: 724-250-4417
Email: kalexander@whs.org

General Telephone Directory

Ms. Zink (Financial Aid)

Office: 724-223-3167

Classroom

Office: 724-223-3733

Central Desk (Main) X-ray Department

Office: 724-223-3317

X-ray Department (Secretaries)

Office: 724-223-3300

Mission Statement

The mission of the Radiologic Technology program, in conjunction with Washington Health System, is to provide an academic and clinical education program in radiologic technology. This will enable students to become entry level radiologic technologists who will apply their knowledge and skills in a team approach to the delivery of great patient care.

Program Goals

The goals of the Washington Health System School of Radiologic Technology Program are to develop competent entry-level radiographers able to function within the healthcare community.

The goals of the Radiographer program are:

1. Students will be clinically competent.

Student Learning Outcomes:

Students will demonstrate clinical proficiency.

Student will select appropriate technical factors.

2. Students will communicate effectively.

Student Learning Outcomes:

Students will use effective oral communication skills.

Students will use effective written communication skills.

3. Students will use critical thinking and problem solving skills.

Student Learning Outcomes:

Students will assess methods of radiation protection.

Students will perform image analysis.

4. Students will evaluate the importance of professionalism.

Student Learning Outcomes:

Students will determine the importance of continued professional development.

5. The program will graduate entry-level technologists.

Student Learning Outcomes:

Students will pass the ARRT national certification on the 1st attempt within 6 months post-graduation. Of those pursuing employment, students will be gainfully employed within 12 months post- graduation. Students will complete the program within 24 months. Students will be satisfied with their education. Employers will be satisfied with the graduate's performance.

The Washington Health System's School of Radiologic Technology is accredited by:
Joint Review Committee in the Radiologic Technology (JRCERT)

JRCERT Standards:

Standard One:

The program demonstrates integrity in the following:

Representations to communities of interest and the public, pursuit of fair and equitable academic practices, and treatment of, and respect for, students, faculty, and staff.

Standard Two:

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

Standard Three:

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

Standard Four:

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

Standard Five:

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

Standard Six:

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

An overview of the JRCERT Standards is available at www.jrcert.org.

The student may also submit any violation of standards grievances regarding the Radiographer Program to:

Joint Review Committee in the Radiologic Technology (JRCERT)

20 North Wacker Drive

Suite 2850

Chicago, Illinois 60606-3182

(312) 704-5300

mail@jrcert.org

General Administrative Policies

The School of Radiologic Technology reserves the right to make such changes in its educational, administrative, and financial policies as are deemed advisable by the administration and the faculty for the progressive development of the program.

All policies and procedures are available for review upon request by contacting the program office.

Phone # (724) 229-2084 or (724) 223-3645

Student Privacy

The school fully complies with all requirements of the Family Educational Right to Privacy Act (FERPA). FERPA generally provides for the right of students to have access to their student files for purposes of review and prohibits the school from releasing identifiable information about the student to third parties without the student's permission.

Student Records

The academic records currently enrolled in the program may contain the following information:

- Activities and service record
- Admission test scores
- Application for admission
- Attendance record
- Clinical documents
- Financial aid information
- Health records
- High school and/or college transcripts
- Outside testing scores
- Probationary notices
- Progress reports
- Radiation monitoring records
- Record of disclosures
- Transcripts of program grades

Student files are retained five years post-graduation. Final transcript records are retained ad infinitum.

Student Rights

- Students have the right to expect quality education, including appropriate facilities and resources, qualified instructors, and courses relevant to the study of radiography.
- Students have the right to have direct representation on the Program's Advisory Committee.
- Students have the right to expect equal treatment without regard to race, color, creed, gender, age, national origin, marital status, or handicap(s).
- Students have the right to be fully informed as to what information is contained in their permanent educational records and of the policies pertaining to the conditions of disclosure.
- Students have the right to protection against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
- Students have the right to orderly procedures that ensure fair treatment in the resolution of issues.
- Students have the right for the following to be made available: hospital, department, and program policies and procedures.

Student Conduct

The faculty, administration and student body of The Washington Health System School of Radiologic Technology expects students to maintain standards of conduct that ensure an environment where there is freedom to learn.

- Students will assume, at all times, a professional manner and demonstrate these attitudes to all persons with whom they come in contact during the performance of their duties.
- The student shall observe all the safety, accident, and fire procedures established by Washington Health System, federal and state laws, and standards by those organizations that accredit the program.
- Students failing to meet academic or clinical requirements will be placed on probation.
- Responsible, mature conduct that evidences respect and consideration for the rights of others as well as self.
- Honesty in all situations.
- Authorized use of and respect for school/hospital property.
- Adherence to rules and regulations enacted by the school, department, and hospital.
- Use of appropriate channels for resolving problems and initiating change.
- Refraining from smoking on hospital property
- Refraining from illegal use, possession or distribution of hallucinogens, narcotics, alcohol or other drugs, which tend to impair judgment or coordination.
- Use of responsible judgment to determine whether health status and/or taking prescription drugs permits attendance in the clinical area.

Non-Discrimination Policy

It is the policy of the School of Radiologic Technology to admit qualified applicants without regard to disability, race, color, national origin, ancestry, sexual orientation, religion, age, sex, citizenship status, marital status, veteran's status, gender identity, or sexual preference to all the rights, privileges, programs and activities generally accorded or made available to students at the School. It does not discriminate on the basis of disability, race, color, national origin, ancestry, sexual orientation, race, color, religion, age, sex, national origin, citizenship status, marital status, veteran's status, gender identity, or sexual preference in administration of its educational policies, admission policies, scholarships and loan programs, and other school administered programs.

Students with Disabilities

Student with disabilities who have been identified by their physician as having a disability that requires special accommodations must submit their request in writing to the Program Director requesting special accommodations for testing. The request must be at least five business days prior to the test date and must be accompanied by proof of the learning disability verifying their eligibility for academic accommodations (IEP).

It is the student's responsibility for providing the school with the following:

- A statement from their physician identifying the diagnosed disability and specific information about what type of accommodations will be required.
- A completed request for accommodations form which can be obtained from the Director, School of Radiologic Technology
- Students who have been granted accommodations are required to submit documentation from their attending clinician prior to each semester that accommodations are still necessary. Submitting a request for accommodations does not necessarily mean that the request will be granted since the school may not be able to provide the necessary accommodations. The Director of the School of Radiologic Technology will evaluate the request. The student will be notified of the final decision. If a student wishes to modify or rescind his/her original request for accommodations prior to the time the accommodation is approved, written notification must be provided to the Director of the School of Radiologic Technology. If the student wishes to modify, or rescind part or all of an already approved accommodation, written notification must be provided to the Director of the School of Radiologic Technology.

Admissions Criteria

The School of Radiologic Technology will consider only completed files.

Applications may be obtained by going to: <http://www.washingtonhospital.org/schools/radiology/>

1. Completed application confirmation pages accompanied by a \$25.00 non-refundable application fee. Make checks/money orders payable to Washington Health System.
2. Minimum age of eighteen (18) on/or before start of the program in the year the application is made.
3. High school graduate or equivalent.
4. Academic performance-Official academic transcripts from high school and post-secondary schools attended.
5. Pre-admission exam selected by the school. The pre-admission exam may be taken no more than two times in an academic year.
6. Individuals without a minimum of an associates degree must meet the admission criteria for WHSSRT and California University.
7. Pre-requisite college credits to be completed prior to the start of the WHSSRT program:
 - Anatomy and Physiology 100 level or higher (minimum of 8 college credits, minimum of “C” or better).
8. Applicants **who are offered enrollment** must have the following:
 - Health history
 - Physical (indicating that they are in good health with no physical or mental limitations which would endanger patients and other hospital personnel or interfere with the performance of a radiographer's duties)
 - Negative drug screen
 - Act 33 (Child Abuse Clearance) <http://www.dhs.pa.gov/provider/childwelfareservices/childabusehistoryclearanceforms/>
 - Act 34 (Criminal Background Check) <https://epatch.state.pa.us/Home.jsp>
 - Act 73 (FBI Fingerprint Clearance) Pennsylvania Department of Human Service FBI Fingerprint-Based Background Check https://www.pa.cogentid.com/index_dpw.htm

Agencies and institutions that accept our students for externship, clinical education, and potential employers may require a criminal and/or personal background check. Students with criminal records may include felonies or misdemeanors. Some agencies may require candidates to submit a drug test. In these cases, employment and internship decisions are outside the control of WHSSRT. Students will be required to complete a criminal background and child abuse check prior to participation in clinical externships, which begins in the first semester. Students may not be allowed to participate in clinical experiences if they have a pending or prior conviction. Please see ARRT ethics review for further information at www.ARRT.org

The program reserves the right to require additional information, examinations, or measures of determined eligibility as may be prescribed by the Admissions Committee.

Those that have previously received an Associate’s degree or higher will not be required to enroll at California University of Pennsylvania but are still required to have the pre-requisite requirements.

Admission Testing

California University of Pennsylvania: Please refer to California University of Pennsylvania policies for their admission requirements.

WHSSRT: All applicants must take a pre-admission exam selected by the school. The pre-admission exam may be taken no more than two times in an academic year.

Student with learning disabilities must submit their request in writing to the Program Director requesting special accommodations for testing. The request must be at least five business days prior to the test date and must be accompanied by proof of the learning disability verifying their eligibility for academic accommodations (IEP).

Selection Procedure

- All admission documents must be completed prior to final acceptance into the program.
- Point values will be assigned to academic performance, work and/or volunteer experience and standardized test performance, and consultation (rubric available upon request).
- Applicants passing the exam and meeting other requirements, as listed in the handbook, will then be scheduled for a consultation wherein they will be notified of their acceptance.
- The program’s Admission Committee, including but not limited to the program officials and additional members from Washington Health System, make the class selection from the qualified applicants.

Facilities

The School of Radiologic Technology is located at Washington Health System. It includes classroom and office facilities with the clinical phase of training conducted in the Radiology Department and off-site facilities. Off-site facilities are within a 60 mile radius of the hospital.

The program office maintains a small reference library for use by the students. The students also have access to the hospital’s Library which includes The Ruth York Morgan Health Education Learning Place. The California University library and Citizens Library of Washington can also be utilized.

Financial Aid and Fee Schedules

Financial aid officers are available at both WHSSRT and California University to assist the student who applies for federal and state aid.

WHSRT Tuition and Fees*:

First Year	Fall	Spring	Summer	Total
Tuition	\$4,400	\$4,400	\$2,200	\$11,000
Achievement Fee	\$ 200	\$ 200	\$ 200	\$ 600
Book/Activity Fee	\$1,250			\$ 1,250
Matriculation	\$ 100			\$ 100
	\$5,950	\$4,600	\$2,400	\$12, 950
Second Year	Fall	Spring	Summer	Total
Tuition	\$4,400	\$4,400	\$2,200	\$11,000
Achievement Fee	\$ 200	\$ 200	\$ 200	\$ 600
	\$4,600	\$4,600	\$2,400	\$11,600

*Subject to change without notice

*All WHSSRT tuition must be paid in full by the beginning of the semester in which it is due

California University charges are separate and in accordance to their fee schedule

Book/Activity Fee: The one time Book/Activity Fee for the program is approximately \$1250.00 for the 24-month period.

Parking: The on-site parking fee is approximately \$400.00 per year.

Uniforms: The Radiologic Technology Program requires standardized uniforms to be supplied at the student's expense.

1. Students entering the program and taking courses with CAL U will apply for financial aid through the California University of Pennsylvania.

2. Students entering the program only and not taking courses with CAL U will apply for financial aid through the SRT. Washington Health System School of Radiologic Technology participates in the following Title IV, HEA Programs:
 - a. Pell Grant Program
 - b. FFLP Loan Program
3. Students who require financial aid to meet the cost of education should make a request for information at the time of the personal interview.
4. Veterans should contact the local Veterans' Administration Office to determine eligibility for benefits.

Tuition Refund Policy

Students who withdraw from the School of Radiologic Technology may be eligible for a refund of charges. A student who wishes to withdraw must notify the Program Director of the School of Radiologic Technology, of this intention in writing. The written notification should include the date and reason for withdrawal. The student's date of withdrawal will be considered to be the last known date of class attendance, the date of the exit interview, or the date the letter of withdrawal was received, whichever comes first. Refunds will be based on the official date of withdrawal. The number of calendar days from the first day of classes to the withdrawal date is the number of days completed by the student (excluding breaks of five days or longer).

To calculate a refund the School shall first determine how much of the period in question has been completed by the student. This percentage is calculated by dividing the number of days in the semester (excluding breaks of five days or longer) into the number of days completed prior to the withdrawal (excluding breaks of five days or longer). If the student has completed more than 60% of the period in question, then no refund will be given. If the student has completed 60% or less of the period in question, then the amount of the refund shall be equal to the amount remaining in the period. The percentage of completion shall be rounded to the nearest whole percent.

Students who do not follow the official withdrawal procedure but who stop attending classes for all of their courses will be considered to have withdrawn at the 50% point of the semester unless attendance is documented after that time.

Financial aid received by students who withdraw will also be adjusted using the above calculation.

Once the amount of the federal funds to be returned has been calculated, the funds will be returned in the following order:

- Federal Unsubsidized Direct Loans
- Federal Subsidized Direct Loans
- Federal PELL Grant
- State Grants
- Private Aid
- The Student

Please note that students who receive a refund of financial aid prior to withdrawing from the School of Radiologic Technology may owe a repayment of federal financial aid funds received. Students will be contacted by the Financial Aid Office and will be given 30 days to repay the funds to the School of Radiologic Technology.

If students would like to see an actual Return of Federal Funds Worksheet, they may request one from the Financial Aid Office.

A partial refund of tuition for the fall/spring semester will be granted to students who have officially withdrawn from the radiography program. The refund will be based upon a percentage of tuition charged according to the following schedules:

Example:

$$\frac{\# \text{ of days completed}}{\# \text{ of days in the Term}} = \text{ \% of Aid Earned}$$

$$100\% - \% \text{ of Aid Earned} = \text{ \% of Funds to be Returned}$$

Student withdraws on the 30th day of the Fall Term. There are 110 calendar days in the term.

$\frac{30}{110} = 28\% \text{ of Aid Earned}$

110

$100\% - 28\% = 72\% \text{ of Funds to be Returned}$

1. The student must adhere to the school's withdrawal policy in order to be eligible for a refund. The student's financial aid record will be reviewed to determine eligibility for a refund before this policy will be applied.
2. Financial aid recipients who intend to withdraw must have their records cleared by the Financial Aid Office as part of the process.

Attendance Policy

Attendance is an expectation of the program due to the amount of information presented. Students must maintain a minimum of 93% attendance for all didactic courses and 100% of all clinical hours. All tardies and/or absences must be called/emailed in prior to the event or they will be subject to progressive discipline. Please see below for the Disciplinary Policy: progressive discipline.

A student arriving late to class or laboratory will be admitted only at the discretion of the instructor. If a student is repeatedly tardy they may be withdrawn from a course. A student who is absent on the day of an exam must report to the program office to make up the exam on the first day of return (excluding Saturdays and Sundays) or the exam will be graded as a "zero." The instructor reserves the right to administer an individualized make-up test. When a student has been absent from class, it is his/her responsibility to contact the instructors to determine the assignment(s) covered during the time missed.

Tardiness is defined as not present in the assigned clinical area or prepared to begin their shift at the designated start time (includes returning from meal periods), therefore, a student will be considered tardy beginning at six (6) minutes following the designated start time. Each tardy clock in will be considered as a violation and will affect your clinical evaluation grading. Computers are available at all satellites and various locations in the hospital. Students are to perform punches at the computer designated for their department use. Any time a student punches at a computer not designated for their department use it will be considered as a disciplinary violation and be part of progressive discipline. Students may not participate in clinical until they punch in. If a student arrives 30 minutes or more past their start time of their clinical shift it is to be considered a call off and the student may be sent home.

Late Out - a student who punches out late following the designated end of their shift without validating the need for the late punch with their supervising technologist may have a negative impact on their clinical evaluation/grade.

Early In / Early Out - a student who punches in early prior to the start of their shift without authorization to begin early may have a negative impact on their clinical evaluation/grade. The same principle applies to the student who leaves early prior to the end of their shift without authorization to do so.

Missed Punches - students who are required to punch to record their time are expected to complete all punches at their designated computers/station. Any missed punch may have a negative impact on their clinical evaluation/grade. A student, who experiences a computer malfunction, must immediately notify a supervising technologist and the faculty at SRT. It **will** reflect in a student evaluation if there is repeated difficulty with punches, to include punching in at the wrong site/location.

Students who miss 7% or more clinical hours per semester in any given semester will be given progressive discipline as defined in "attendance policy." Excessive or patterned absenteeism will result in disciplinary action taken by the program. Students are required to report in and out for clinical assignments. Students' failure to report in or out of their clinical area will result in progressive discipline as defined in "Disciplinary Policy."

Steps for Progressive Absence Discipline: If a student exceeds 7% total clinical semester hours but not exceeding 10% of clinical semester hours in that term it will be documented as progressive absence discipline. **Please note once a student exceeds 10% of clinical semester hours missed in that term, they will be given a failing grade and must repeat the course.** Students only have two attempts to repeat a course.

- Verbal warning on the 1st occurrence
- Written on the 2nd occurrence
- Suspension on the 3rd occurrence
- Dismissal on the 4th occurrence

Example: Spring (second) semester student misses 8% of their clinical hours (360 hours*.08=28.8 hours), as their 1st occurrence the student will receive a verbal warning. Summer (third) semester student misses 7% of their clinical hours (364 hours*.07=25 hours), the student will receive a written warning as their 2nd occurrence.

Note: Attendance is not appealable.

Clinical: Clinical days run from Monday to Sunday

Clinical Trades: Clinical trades may not be completed.

Reporting Off: Requests for time off must be submitted prior to the date requested and a notification email must be submitted to the Program Director and Clinical Coordinator a minimum of two business days prior to the date requested.

- To report off, call *before your start time* to both the area in which you are calling off as well as the faculty at the WHSSRT a (724) 229-2084 or email the Program Director and Clinical Coordinator. Leave your name and where you were to report on clinical.
- If requesting off prior to the more than 48 hours in advance the time will need to be approved at a minimum of two business days prior to the requested time off by a faculty member. Send an email request sent to the Program Director/Clinical Coordinator.
- If the student reports off with an infectious communicable disease, it is the student's responsibility to see the family physician for treatment. Upon returning to school, the student will report to the program office with a signed release form from the attending physician. The student will also be required by the program office to be examined by the Hospital's Employee Health before being permitted to return to class of their clinical assignment.

Make-Up Time: All make up time is to be complete during term week and/or break week at faculty discretion.

Outside Functions: Attendance at an outside educational function is voluntary. The student is not representing Washington Health System or Washington Health System Radiologic Technology Program. Students attending a student seminar are to hold Washington Health System and/or Washington Health System Radiologic Technology Program exempt from any financial and/or legal claim due to the misconduct, personal damage, or liability incurred by the student. Students registered for a registry review seminar will be released from scheduled clinical/class assignments. Time will be deducted for any session not attended. Students electing not to attend the review seminar will maintain their scheduled clinical assignments.

Holidays/Breaks:

- Students will be scheduled off on all observed holidays/Breaks.
- Students may not make up time during Holidays, but may make it up at faculty discretion during break weeks
- Students are granted approximately six to seven (6-7) weeks' during the twenty-four (24) month program as follows:
1-2 weeks– scheduled for Christmas and New Year's weeks

1 week – scheduled between the spring and summer

1 week – scheduled between the summer and fall

Bereavement: A student will be granted a maximum of three (3) days off due to a death in the immediate family. One (1) of these days must be the day of the funeral. The other two (2) days may be taken no earlier than two (2) days prior to the funeral day, but no later than two (2) days after the funeral. If the day of the funeral is a regularly scheduled day off, the student may elect to take the funeral day within the time frame specified above. Regularly scheduled days off during the bereavement period are not included. Members of the immediate family are: (mother, father, foster parent or legal guardian, parents-in-law, brother, sister, step-parents, husband, wife, children, step-children, grandparents and grandchildren).

A student will be granted one (1) day off to attend the funeral of the following: Son-in-law, daughters-in-law, aunts, uncles, nieces, and nephew. The student must notify the Radiologic Technology Program office of the death and the date of the funeral (if available). If the Radiologic Technology Program office is closed, i.e. weekend, holiday, etc.; leave a message on the answering machine in the program office or email.

Leave of Absence

A leave of absence may be granted in cases of extenuating circumstance as determined by the Program Director. The re-entry date will be determined in accordance with the current schedule availability and requirements for the program, and must not exceed 80 hours total in any given semester. Students may not take more than two leave of absences (2*80 hour sessions) throughout the program. (All clinical time must be completed by the end of the semester).

Procedure:

- Prepare a written request for the Leave of Absence stating:
 - Name and address
 - Current year and semester in program
 - Reason for request
 - Beginning date for Leave of Absence
 - Attach documentation for Leave
- Present request to Program Director for approval.
- Receive verification of approval by email/mail.
- Once the leave has begun, student shall be notified by email/mail of the re-entry date. Upon receiving the re-entry date, the student must follow one of the two options listed below. Student's reply must be received at the school office within two weeks.
 - Acknowledge receipt of the re-entry date and confirm intention to re-enter the program at that time.
 - Prepare resignation letter and email/mail to the Program Director so that records show voluntary resignation.
- A leave of absence of any length that prohibits the student from completing the term in which the leave of absence is started may be extended until the beginning of the next term. After that time, the student will be considered withdrawn from the school and must apply for readmission.
- If no reply is received by the Program Director within the two week period, the student's termination will become effective immediately. Records shall then be listed with "Student Enrollment Terminated".

Re-entry

An individual seeking re-entry to the program must re-apply and meet all current entrance requirements. A student who re-enters the program and fail to meet academic/clinical requirements in any semester will be dismissed with no right to appeal.

Transfer and/or Advanced Placement

The program does not accept transfer students/credits or offer advanced placement for any student with the exception of a previous graduate.

Academic Policy

The twenty-four month program consists of 6 semesters with clinical and academic progress reports evaluated at the end of each semester. All students entering Washington Health System School of Radiologic Technology are considered adult learners, accepting responsibility for active participation in their learning experiences. The instructors will evaluate the student according to established testing methods for their knowledge of theory and practice, room evaluations, including but not limited to manual dexterity, accuracy, ability to follow directions, ability to organize work, and the application of acquired knowledge. Students not meeting a cumulative 2.75 GPA per semester will be placed on probation. After any two complete semesters below the required 2.75 GPA will result in academic dismissal. Probation shall be a minimum of one semester and concludes when academic and/or clinical standings improve to the required minimum average. In addition, academic dismissal may occur if they are not in good academic standing at their degree seeking institution (wherein they are required to obtain an associate's degree).

The first semester of enrollment in the program is a required probationary period for all students. If, during that time, a student exhibits fluctuating academic and/or clinical performances the Review Committee may place the student on extended general probation for the second semester. At the conclusion of the second semester, the Review Committee shall evaluate all academic and clinical performance records. The decision of the Review Committee shall be to either terminate probation or initiate dismissal proceedings. A second year student on probation is not eligible to participate in voluntary Radiology Department employment during his/her free time. This ineligibility remains in effect until probation ends. The Review Committee shall consist of the Director of the School of Nursing, Radiographer Program Director, and the Clinical Coordinator of the Radiologic Technology Program. Alternates will be selected for each committee member not available by the Program Director.

Grading System:

Course grades are reported using a letter grade system as follows:

<u>Percent</u>	<u>Letter Grade</u>	<u>Quality Points</u>
90 - 100	A	4
80 - 89	B	3
70 - 79	C	2
0 - 69	F	0
Incomplete	I	
Withdraw	W	
Program Dismissal	PD	

- All incomplete grades must be rectified by the student within 10 business days from the end of the grading period or the incomplete will convert to an "F."
- All appealed grades must be in writing within 10 business days from the end of the grading period. Faculty has 5 business days to respond to an appeal with a decision. If the student is not satisfied they may appeal to the Program Director within 5 days of that decision, and the Program Director has 5 days to respond. The decision is considered final.
- All assignments, exams, or other requirements for each course must be completed as assigned by the instructor.
- All students are required to pass the final course RAD 205.
- Academic dismissal is not appealable.
- Students only have two attempts to repeat a course.

Academic Honors:

Graduates are awarded certificates based on their academic and clinical grade point average in accordance with the following guidelines:

- Honors: will be presented to students who maintained a 3.75 - 3.89 cumulative GPA
- High Honors: will be presented to students who maintained a 3.90 - 4.00 cumulative GPA

*The student must not have been dismissed at any time during their enrollment to be eligible.

Strategies for Success

The following policy outlines the criteria to recognize students who may require assistance with exam preparation or strategies to improve success throughout the program. Early intervention is essential in promoting successful outcomes. The program will be introduced and open to any student with a personal desire to attend or with academic advisement. Focus will be directed to determining the cause of any impediments which may inhibit success in the program such as: test anxiety, test taking skills, and/or study skills/knowledge.

Students will be academically assessed by faculty at mid-term of each didactic course. If it is determined a student has a cumulative score of:

- 85% or less at this time, the student will be issued an advising form which recommends attendance in the program.
- 75% or less at this time, the student will be issued an advising form which *requires* attendance in the program.

If a student receives a final grade of 80% or lower in any sequential course they will be automatically enrolled in the program at the onset of the following course, i.e. RAD 103 to RAD 105.

Students enrolled in the program may be required to attend a mandatory exam review and perform a self-assessment of their individual performance (a document will be provided). Students will be required to bring this document to the meetings scheduled with the academic advisor. Mandatory group meetings may also be held to discuss and learn strategies for success as well as individual meetings to review the exams (required) with the assigned academic advisor.

Students who are required to be automatically enrolled in the program due to academic status are *required* to attend all workshops and actively engage in the activities posted. Students will utilize learned strategies, and may be required to participate in assignments geared toward preparing them to be successful. Progressive discipline will be issued for violations to this policy.

Test Anxiety: An initial test anxiety questionnaire will be completed by each student. Students will be recommended, but not required to attend group sessions which address the needs of those whose success is affected by test anxiety. These sessions are open to all who score above the cut off for the anxiety questionnaire and any others who wish to attend.

Clinical Documentation Review: In an effort to assist students having difficulty with clinical documentation required in the clinical portion of the program, specific sessions for review of those clinical documents are offered. One on one, or small group reviews of clinical paperwork – whichever is requested by the student(s) – is available with faculty during weekly ‘open review sessions’. A set day and time for open review sessions are announced at the start of the semester. Faculty is available during this time to assist any student to develop critical thinking and improved documentation to better his/her clinical documentation. Students are not required to attend these sessions, although a referral from clinical faculty may be made.

Academic Violations and Procedure:

Washington Health System Radiologic Technology Program expects the students to maintain professional standards demonstrating honesty and integrity both in the classroom and the clinical area.

Any item that may be construed as academic dishonesty including but not limited to:

- Deliberate falsification or misinterpretation
- Not performing delegated responsibilities or failing to submit clinical document
- Student not using APA format (reference <http://www.apastyle.org/>)
- Student caught cheating/copying or falsifying assignments or exams

Disciplinary action if a student is suspected of violating the above standards will include one or more of the following actions:

- The incident of academic violation will be recorded in the student's folder
- A student who has violated the policy is ineligible to receive any honor certificate and may be subject for dismissal
- The student and the incident will be reported to the Director, School of Radiologic Technology for appropriate action
- The student will receive a grade of zero (0) on the test or work involved for first offense
- The student will receive an "F" (failure) for the course and be suspended for 3 days for second offense
- The student may be dismissed
- Misuse of communication technology; written, or verbal communication (including, but not limited to, video, texting, electronic devices, and internet use).
- The student misses three mandatory sessions for Strategy for Success i.e. scheduled appointments, group meetings, strategic reviews within a semester will result in program dismissal.

*All are subject to progressive discipline

School administration will consider extenuating circumstances on an individual basis. The Director will review the mitigating circumstances and make a final decision. Students who wish to dispute the findings may use the Progressive Discipline Grievance Procedure.

Transcripts

Official outside transcripts must be submitted to the WHSSRT for admittance into the program. In addition, if you are attending California University of Pennsylvania (Cal U) they must also be submitted there as well. If a student has a degree but still needs the pre-requisites, the official transcript with the required course must be submitted to WHSSRT prior to the semester in which it is a required pre-requisite.

All WHSSRT Transcript requests will need to be submitted with a form found on the schools website and \$5 fee.

Disciplinary Policy

Disciplinary action will be taken when there are violations of student conduct, policies of the program handbook, department and/or hospital policies occur. Documentation will be continual throughout the students' time in the Program. If a violation of policy occurs the faculty will determine severity and the progressive disciplinary action if required. Multiple violations occurring at the same time will be construed as separate and distinct offenses.

The School of Radiologic Technology reserves the right to terminate the enrollment of any student who, in its judgment, does not satisfy the requirements of scholarship, health, or personal suitability for a profession in radiography.

Examples of offenses (but not limited to):

- Any violation of student conduct
- Academic violation
- Insubordination, refusal or intentional failure to perform assignments

- Failure to report immediately any accident on the premises that has resulted in personal injury or property damage
- Violation of the hospital's solicitation and distribution policy
- Violating a safety rule or safety practice or creating or contributing to an unsafe environment
- Smoking on hospital property
- Failure to maintain appropriate personal appearance, uniforms, dress or personal hygiene
- Failure to report to or leaving the clinical area
- Use of cell phones while in class, clinical, or hallways
- Violation of dress code or not having/using ID markers, radiation badge, or ID in clinical or lab
- Extending break/lunch time past the set 15 minutes "break" and 30 minute "lunch" per day
- Failure to call off prior to class or clinical before the start time

Instant Dismissal Examples (but not limited to):

- Any false statements or omissions
- Negligence or abuse of any patient
- Unauthorized use or unauthorized possession of narcotics or other drugs on school/hospital property
- Theft /Destruction of any property of the hospital, another student, employee, patient, visitor or doctor
- Fighting or attempting bodily injury or the use of abusive or threatening language to any other person
- Unauthorized possession of weapons or explosives on hospital premises
- Falsifying hospital records and unauthorized altering or removing of any record
- Mishandling or unauthorized disclosure of confidential hospital, patient, or student information
- Sexual harassment (immediate referral to Human Resources)
- Disciplinary dismissal will occur when a student violates program, department or hospital policies according to the Disciplinary Policy/Procedure
- A student dismissed for disciplinary reasons is ineligible to re-enter the program
- The student is responsible for any outstanding balances owed to the hospital/program with no records released until all financial obligations are met

Please note: Attendance/tardies and academic dismissal are not appealable.

The steps for *progressive discipline* are:

1. First Offense: Informal Warning: a faculty member, calling attention to the infraction, will give a verbal or written warning. A written record will be made that a warning was given.
2. Second Offense: Suspension: the time period during which the student will not be permitted to attend academic/clinical sessions. Suspension will be between 1-3 days, the number determined by the faculty according to the seriousness of the infraction. A student placed on suspension will have dismissal action initiated for the next instance of any policy violation.
3. Third and Final Offense: Dismissal. Offenses will result in the initiation of dismissal proceedings, or in the case of mitigating circumstances.

The program director will discuss the specific details that preceded the decision to initiate dismissal or suspension.

Grievance Procedure:

A grievance is a felt injustice which, in the mind of the student, is an infringement of his/her rights as stated in the Student Rights; concerning clinical experience, didactic evaluation, disciplinary action, treatment, clinical conditions, or violation of hospital, department, or school policy and procedure.

The Appeals Committee is available to ensure fair treatment. The purpose is to hear appeals, interpret and clarify student rights as stated in the Student Rights, and to advise on issues which cannot be resolved through usual channels.

Appeal Procedure:

If a student feels their rights have been violated then the following is the procedure for students to follow:

Step 1

- The student must notify the individual(s) involved in writing within two (2) school days of the occurrence. Included must be the staff member's name, the date and time the incident occurred, and a short but accurate account of the grievance.
- The individual must establish a meeting in order to attempt resolution within two (2) school days.
- If the Radiographer Program Director is the individual involved, the process starts at Step 2.
- If the meeting does not produce a resolution, the student must go to Step 2.

Step 2

- The student must notify individual(s) involved and the Radiographer Program Director, in writing within five (5) school days of the meeting in Step 1. This written statement needs to include a summary of the issue to be resolved and the result(s) of the meeting in Step 1. The Radiographer Program Director will meet with the student and involved parties within five (5) school days and will notify the student(s) in writing of the resulting plan for resolution.
- If the plan for resolution is unacceptable and the issue remains unresolved, the student must notify, in writing, the Radiographer Program Director who will then compile the Appeals Committee within five (5) school days after receiving the written plan for resolution and go to Step 3.

Step 3

- The student must notify the Radiographer Program Director in writing within five (5) school days of receiving the written plan in Step 2. This written statement must include the specific right(s) involved, information supporting violation of these rights, and a summary of the actions in Step 1 and 2. At this point, the Appeals Committee is assembled. The student may have a supporting person present at this time.
- The Appeals committee shall be comprised of no less than three (3) people and no more than four (4).
 - There will be at least one (1) student representative. The student representative shall be the President of the class opposite of with whom the grievance has been filed, example if it is a senior student grievance, the class president of the junior class will be part of the committee. If for any reason class president is not available the vice president will participate instead.
 - Minimum of two (2) of the three (3) representatives from the School of Nursing, the School of Radiologic Technology, and the Education Institute, to include a maximum of three (3), one (1) from each area. These selections shall not include the Directors but shall be selected by the Directors of each area.
- The decision of the Appeals Committee is final and will be submitted to the Director of the School of Radiologic Technology for review with the student with who filed the grievance.

CONFIDENTIALITY: It is mandatory that all written records, forms, discussions, and informal discussions of any issues or business of this committee be kept in absolute confidence within the committee. Violation of confidentiality will result in removal from the committee and dismissal from the program.

Please note: A copy of the grievance will be placed in the students file are confidential and will not be discussed with uninvolved persons.

Graduation Requirements and Placement

- The diploma and pin of Washington Health System Radiologic Technology Program are awarded to a student upon satisfactory completion of the school program.
- Mandatory Attendance:
 - Seniorization
 - Graduation
- The student must maintain a minimum cumulative GPA of 2.75 throughout the program.
- The student must complete all Program and ARRT didactic and clinical competency/proficiency requirements.
- All financial obligations must be met before a student can graduate.
- The student must have completed an associate's degree or higher and all pre-requisites as required prior to graduation from WHSSRT
- While Washington Health System School of Radiologic Technology does not maintain a formal employment service, the graduates will be assisted in locating positions.

Student Employment

Paid employment of a student in a clinical department will not be used in lieu of the time assigned to the structured clinical experience. Employment, volunteer services or any other activities cannot interfere with clinical rotations or used in lieu of clinical rotations. Students will not be allowed to use employment, volunteer services or any other activities as clinical experience. Students may not substitute or replace paid staff members. A student who is employed should use judgment in determining his/her choice of employment and how many hours he/she can devote to working. The program will not change the student's academic/clinical schedule to accommodate an employment schedule. The program expects students who work to maintain optimum school standards. Hospital employment for senior students is in accordance with the following policies:

- Senior students in good academic and clinical standing may work as a student radiographer or clerk receptionist.
- If students are employed during their free time, it is expected that this should be on a voluntary basis and not a requirement of the hospital, department or school.

Student Services

Academic Advising: is made available to all students by the faculty and may be initiated by either student or the faculty including but not limited to:

- a. tutoring
- b. performance review
- c. performance critique
- d. discipline
- e. contact meetings
- f. due process

Documentation of advising will be recorded in the student folder. A brief description of any disciplinary action or due process must be included in the individual student's file.

Employee Assistance Program (EAP): Counseling requirements, which are beyond the scope of faculty qualifications, will be referred to the hospital's Employee Assistance Program. This program offers short-term professional counseling where the service is free and confidential. If extended counseling is necessary referral to outside agencies will be made. The student will assume the cost of this counseling. Washington Health System Employee Assistance Program (EAP) is available to all Radiologic Technology Program employees and students. **1-800-EAP-LINK (after hours) 724-223-3430 Business hours**

Students enrolled in the Radiologic Technology Program will have use of the EAP, with the following modifications:

- Washington Health System EAP is available to students only. No family members of students are covered under the program.
- Referrals to the EAP may come via the following:
 - Self-Referral: Students themselves making direct contact with the EAP. In this case, no feedback is necessary to Radiologic Technology Program management personnel.
 - Faculty - Assisted Referral: Students who have been identified by Radiologic Technology Program management as having need for EAP services. Faculty-assisted referrals may necessitate that Radiologic Technology Program management be made aware of student's initial contact with EAP and continued participation in EAP recommend treatment.
 - Students in the Radiologic Technology Program will be made aware of the EAP through dissemination of EAP brochures, posters located in the Radiologic Technology Program and orientation provided by the EAP coordinator.

Health and Medical Insurance: All students must be covered by medical insurance. Students assume financial responsibility for any illness or injury.

Employee Health Purpose: The Employee Health is provided to evaluate the health of the students. This service includes a registered nurse, available between the hours of 7:30 a.m. and 3:30 p.m. This service functions to evaluate and counsel students for minor illnesses or injuries sustained during the school week and is available to the student at no cost.

1. If a student becomes sick or injured in either class or clinical assignments, he/she will contact the program office. In the absence of school personnel, the student will report to the supervisor on duty. The student will be sent to the Employee Health's office for evaluation and counseling. Students requiring treatment will be referred to their family physician.
2. A student reporting for assignment must contact the program office if he/she has an infectious illness. The student will then be required to report to the Employee Health office.
3. Students who are ill for three (3) or more days are to report to the program office prior to going to the assigned class or clinical area. The program office will contact the Employee Health office in order to determine if a student should be screened before reporting to the assigned area
4. Students suffering major illness or injury will be sent to the Emergency Department for treatment. Students will assume the financial responsibility for any illness or injury.

The Employee Health Program Policy is located on the intranet under "PolicyStat". PolicyStat will have the most up-to-date version of any policy from the Hospital Policy Manual or Infection Control Policies. Access a link to PolicyStat by visiting the home page on the Intranet.

First, "click" on Hospital Documentation, and then once you're on the Hospital Documentation page you will see PolicyStat.

By "clicking" the PolicyStat link you will be directed to the PolicyStat sign in page where you will log in with the same user access you use when logging into the network. .

Please make note under Part VII, Page 4.32, and the policy for Blood/Body Fluid Exposure. This policy's purpose is:

- To determine if an employee/student sustained an exposure to an infectious disease transmitted by blood or body fluids
- The degree of exposure for the involved employee/student
- To provide education and counseling regarding the significance of the exposure and recommended post exposure follow-up and treatment

- To provide the most current information regarding post-exposure prophylaxis for exposure to an HIV positive patient
- To comply with the “Confidentiality of HIV Related information Act”, Pennsylvania Law, Act 148/59 and the OSHA Blood borne Pathogen Standard.

Medications: All students are required to inform the Employee Health of any prescribed medication so that the medication may be recorded on the student's health record. Students may purchase his/her prescribed medication at The Washington Health System Pharmacy at reduced prices.

Physical Examinations: Physical examinations of students are required before admission to the program. Students will be required for the first year to have the following immunizations: MMR, Varicella, and two step PPD or titers proving your immunity. Hepatitis B, Tdap, optional but preferred. The flu vaccination is required for the first and second year.

Consent to Treatment: Effective April 14, 1970, Act Number 10 of Pennsylvania Legislature provides that any minor who is eighteen (18) years of age or older, or has graduated from high school or who has married, or has been pregnant may give effective consent to medical, dental, and Employee Health’s for himself/herself. It also provides that a minor who has been married or has borne a child may give consent to determine and treat pregnancy, venereal disease and the other reportable diseases; and consent is unnecessary when, in the physician's judgment, an attempt to secure consent would increase the risk to the minor's life or health.

Drug Prevention Program Overview

The use of illicit drugs and the unlawful possession and use of alcohol is wrong and harmful. Standards of conduct state that any student possessing, using or distributing illicit drugs or alcohol on hospital premises or as part of any school activity will undergo disciplinary sanctions up to and including expulsion from the school and referral for prosecution. The disciplinary sanction may include a referral to the EAP and completion of an appropriate rehabilitation program. The EAP provides information about any alcohol and drug counseling and rehabilitation programs available.

A student who appears to be impaired will be escorted to Employee Health for a random drug screen. Refusal of the drug screen will result in dismissal. Medications taken by the student must be validated by prescription. See Drug Prevention – Alcohol Effects: for specific legal consequences of possession, use or distribution of illicit drugs.

Safety and Security Problems

- The student shall observe all safety, accident, and fire procedures established by The Washington Health System; also State and Federal Laws and Standards by those who approve the program.
- The Washington Health System is not responsible for lost or stolen personal properties.
- If an item is missing, check with the Security office located on the main floor.
- If a safety or security problem arises, report it immediately to:
 - a. Director of the Education Institute
 - b. Clinical Instructor
 - c. Department - Supervisor in the area

Sexual Assault Policy and Procedures

According to The Higher Education Amendments of 1992, a sex offense is defined as “either a forcible or non-forcible sexual act directed against another person, against that person’s will, or where the survivor is incapable of giving consent, and may include rape or acquaintance rape.”

The Washington Health System School of Radiologic Technology will not tolerate sexual assault or abuse, such as rape (including acquaintance rape) or other forms of non-consensual sexual activity. These acts degrade the victims, our campus community, and society in general. While the School cannot control all the factors in society that lead to sexual assault and abuse, the School strives to create an environment that is free of acts of violence. Violations of the policy are subject to disciplinary actions through the Review Committee. Discipline can be up to and including permanent dismissal from the School of Radiologic Technology. The accused and the accuser are equally entitled to have others present for support and advice. Both are informed of the outcomes and sanctions.

Sexual Assault Procedures - The following steps should be taken:

1. Get to a safe place as soon as possible.
2. Try to preserve all physical evidence. The survivor may or may not choose to press charges in the future, but preserving physical evidence will give him/her the option to do so later.
3. Contact a close friend who can provide support. The friend can accompany the victim to the medical exam and/or police department.
4. Get medical attention as soon as possible. An exam will determine the presence of physical injury, sexually transmissible diseases, or pregnancy; it is important for the victim's well-being. The exam, if done within 72 hours following the rape, can obtain evidence to assist in criminal prosecution.
5. Contact the police. Rape is a crime; it is important to report it.
6. Consider talking to a counselor. Seeing a counselor may be important in helping the victim understand his/her feelings and begin the process of recovery.

A survivor who has been assaulted and wishes to change their academic schedule should discuss this with the Director, School of Radiologic Technology.

The Student Right to Know & Campus Security Act of 1990 and its amendments require an annual Campus Security Report. The Act requires that it be distributed to students and employees.

The Security Department and the School of Radiologic Technology have compiled this report. Any questions regarding this report should be directed to the Financial Aid & Admissions Officer at 724-223-3167.

Inclement Weather Policy

Cancellation notices will be announced on WTAE (Channel 4) television and WJPA (95.3 FM/1450 AM) radio. Extreme variations of weather conditions can occur at different locations. If weather conditions in your area are poor, school has not been cancelled, and you are unable to attend, you must notify the program office. Your absence will be marked as an excused absence and you may choose to either forfeit benefit time or make up the day. If school is cancelled and you choose to report, a comparable benefit time will be earned. Time must be made up for clinical time.

Radiographer Program Resources

Listed below are resources that you will find helpful in the Radiographer Program field as a student and graduate. These organizations provide information about the Radiographer Program field and opportunities to network with other Radiographer Program at conferences and seminars. Continuing education opportunities are important for Radiographer Programs and information about them can be found through the organizations listed below. Some organizations have fees that apply to membership and their services and this information can be found on their individual websites. Please review their websites for specific details about the mission of each organization and what they provide to the Radiographer Program field. This list is just small sample of the different professional organizations and informational websites that are available to the Radiographer Program field.

If you have questions about any of this organizations please speak with your Radiographer Program Director or faculty members.

American Registry of Radiologic Technologists (ARRT): rules, regulations, qualifications for certification, and other important information about radiologic technologists can be located at: <https://www.ARRT.org>
Certain criminal convictions may prevent the health science graduate from taking national certification or licensure exams.

Please refer to the “Ethics Review” at www.ARRT.org. The student must contact the ARRT directly with questions and concerns.

The American Society of Radiologic Technologist (ASRT): is the national organization of the profession. Please visit www.ASRT.org for more information about ASRT.

- Student member benefits page: <https://www.asrt.org/content/membership/studentmemberservices.aspx> (you must be a member to access the Community of R.T. Professionals, which features practicing R.T.s who can help with questions about entering the field, current trends and professional issues.)
- Student resources page: <https://www.asrt.org/Content/Students/StudentResources/studentresources.aspx> (tutorials, articles, FAQs, etc.; free for non-members)

The Pennsylvania Society of Radiologic Technologist (PSRT): is the state organization of the profession. Please visit www.psrtonline.com for more information about PSRT.

Radiology Technologist Student Association (RTSA): There is also opportunity to become members of the campus-based organization that promotes scholarly endeavors, encourages leadership, and cultivates fellowship. Membership in the RTSA presents opportunity for students to enhance in-school training and promote the professional ethics and integrity that portray radiographers as integral members of the medical community. Please see Program Director for more information.

Class Representatives:

- Two class representatives and a secretary/treasurer will be elected in the first semester of the junior year.
- Duties and responsibilities include:

Senior Class Representatives:

- Communicate with the faculty any problems, suggestions or concerns on behalf of the class.
- Act as the liaison for any information communication between the faculty to students and students to faculty.
- Develop a plan and coordinate class activities to include: class meetings, social activities, fundraisers, review seminars, etc.
- Assist junior class representatives with their duties until they become familiar with these duties.

Senior Treasurer/Secretary:

- Assist the class representatives with accounting and record keeping for:
- Notes and records of class meetings
- Financial records of class fundraising
- Minutes of faculty/student meetings

Junior Class Representatives:

- Act as the spokesperson to the faculty.
- Provide input to class/faculty about class interests, likes and dislikes.
- Hold class meetings to discuss class fundraisers and social outings.
- Work with senior class representatives to learn how to best represent the school and class.

Junior Treasurer/Secretary:

- Assist the class representatives with record keeping and accounting of class funds.
- Keep records of class meeting and minutes of student/faculty meetings.

Libraries:

The hospital libraries which may be used by the student are:

- Medical Library - Main Hospital, third floor

- The program has reference books available for students. These books are located in the classroom, Computer Lab, and the program offices.

Borrowing Materials: Students of The Washington Health System may borrow material from the library pending they sign the borrower's card and have identification available.

Returning Materials: All materials may be returned to the library circulation desk during library hours, and a book return slot is available for hours that the library is closed. Library property must be returned and fines paid prior to progression to the next semester or graduation.

Hours: Health Sciences Library M – F 7:30 a.m. – 4:00p.m.

Fines: A fine of 25 cents per day per item is required for every day the item is overdue. This fine must be paid upon returning the items. Obligations to any outstanding fines must be met prior to progression to the next semester or graduation. When a borrowed item is one week overdue a reminder notice will be sent to the patron. If reminders continue to be ignored and borrowed items are not returned, administrative disciplinary action may be taken.

Class Fundraising:

- Fund raising activities are sponsored by each class for attendance at seminars, registry, and donations as selected by the class.
- The fund raising activity, with the tentative date and format, must be submitted to the school office for approval.
- School office approval is required to approve any expenditure out of the class fund.
- Each class will elect a treasurer. It is the responsibility of the treasurer to keep an account of all credits and debits. Class accounts will be kept separate.
- Similar fund raising activities cannot run simultaneously. Both classes are expected to support all fund raising efforts.
- Types of fund raising activities that are available include candy sales; hoagie sales, car washes, stationary sales.
- Individual class fundraising must not exceed 10% of what is needed for each cohort, anything over will be donated to an approved "cause."

Photo Identification Badges

A photo identification badge will be issued to you. This badge must be worn at collar level on your uniform. The hospital issues these badges for security purposes and requires that you wear it for all scheduled assignments. If the ID badge is lost, the student must report this immediately to the program office.

Dress Code

Uniforms: The daily uniform will consist of:

- Standardized charcoal uniform tops, pants, and warm-up jacket (optional).
- Black or white tees (long or short sleeve) may be worn under the standard uniform top. The bottom of a tee shirt may not be visible. A black or white camisole or tee must be worn if cleavage is visible.
- Shoes: Primarily black or white, soft-soled hospital shoes or leather tennis shoes required: Open toe, mesh, and/or clog type shoes are not permitted. Shoes, including laces, are to be kept clean.
- Hosiery: White or black socks.
- Hair: Hair shall be conservatively styled: All hair shall be kept away from the face. Medium length hair (collar) or long hair shall be worn pulled back or pinned up with a conservative hair accessory. Extreme styling, shading or coloring of hair is not permitted
- Make-up: No excessive make-up will be worn while attending any clinical assignment.
- Nails: Fingernails shall not be excessively long. Nail polish, if worn, shall be clear, light pink, or neutral beige. No dark or bold colors are permitted. Artificial nails are not permitted.

- Jewelry: Jewelry worn in the department shall be limited to: watches, engagement rings, wedding rings, class rings, and birthstone rings. A single gold or silver chain, with or without a charm, may be worn. The chain is not to exceed 1/4" in width and must be worn inside the uniform if the chain length exceeds 20 inches. Small earrings are permitted. Jewelry is not permitted in other visible body piercing areas (nose, tongue, eyebrow, lips etc.).
- Perfume: No excessively scented perfume or lotions. Minimal use of scented products while attending any clinical assignment.
- Tattoos: Tattoos are to be covered all times.
- Cell phones are not permitted during school hours.
- Photo Identification Badge and OSL Badge are to be worn for all assignments.

Revisions and provisions for interpretation of this Dress Code will be made at the discretion of the instructor. Failure to adhere to this Dress Code will result in following disciplinary action.

Infection Control Policy - Policy and Procedure

To prevent the spread of diseases within hospitals, special procedures should be followed for patients with these diseases. Isolation procedures are designed to prevent the spread of microorganisms among patient, hospital personnel, and visitors. The appropriate isolation precaution to be used is determined by the route of transmission of the specific infection

If the student must radiograph a patient who has been placed in isolation, the student shall observe all infection control policies and standards established by Washington Health System

The student will refer to the hospital's Disease - Specific Isolation Policy and Procedure Manual for:

- isolation precautions
- technique and recommendations
- isolation procedures

Venipuncture & Injections Policy

Students may practice venipuncture and inject radiology contrast media in an upper extremity during clinical education under the direct supervision of a qualified radiographer, physician or nurse. It is at the discretion of the clinical affiliate if and when students are allowed to begin performing venipuncture at that particular facility. Some only allow students to perform venipuncture in their CT rotations (much greater chance of observation and practice).

During the first fall semester of the program, students receive didactic education and practicum training in RAD 100 Introduction to Radiography and Patient Care and during their RAD 204 Radiographic Procedures V courses. Students in these course practice venipuncture utilizing intravenous catheters. Upon successful completion of laboratory practice, a second year student (Level II), under direct supervision of a qualified radiographer, physician, or nurse, may perform venipuncture on an upper extremity for the sole purpose of radiology contrast media injections. In addition, while under direct supervision, students may prepare syringes with contrast media, complete contrast injections and remove catheters used for contrast injection. Please note students are **NOT** permitted to access, flush, or remove access to ports, picc lines, or any central access lines.

Protocol: Students must introduce themselves to the patient as a radiology student prior to venipuncture. Students must follow appropriate venipuncture techniques and policies of the clinical affiliate. It is recommended students start with an observation of venipuncture and then begin initial practice on patients with large, distended, highly visible veins. Students will document venipuncture attempts and outcomes of those events. Students may **NOT** try to obtain venous access more than once on the same patient. In certain circumstances, the supervising technologist may determine that it is not appropriate to allow any attempt. Students should attempt to document a minimum of ten successful venipunctures on patients before the completion of clinical education. Students must keep documentation of venipuncture attempts as evidence of

the general patient care competency and submit through their daily logs.

Radiation Protection Policy and Procedure

The Washington Health System (WHS) Patient Pregnancy Policy and Procedure is part of the Radiology Department protocol. The manner in which this policy is stated is very important so the patient does not take offense or feel her privacy is being violated. The following is suggested, the WHS the policy is to ask all females between the ages of 12 - 50, prior to taking X-rays, if there is any possibility of being pregnant. Radiation protection for the individual and patients is introduced during orientation and throughout your education in Introduction to Radiology and Patient Care, Radiation Protection and Biology, Radiographic Procedures I, II, III, IV, V, and Clinical I, II, III, IV, V, and VI.

A radiation-monitoring device is issued to each student. The Radiation Safety Officer, faculty, and student will have the availability to review the monthly report of exposure. Radiation exposure policies and procedures are designed to keep exposure to a minimum by proper shielding and monitoring.

- Students entering the program will have a Radiation Protection Orientation to include:
 - Basic Radiation Protection
 - Radiation Safety Policies
 - Pregnancy Policy for Female Students
- OSL badges will be issued to each student. These badges are to be worn at collar level.
- The OSL will be worn for all clinical assignments and placed on the badge board at the end of the clinical day.
- The Radiation Dosimetry Report is posted monthly in the department. The classroom copy is to be initialed by each student. Cumulative radiation history is reviewed yearly with the individual student.
- Students will abide by the department's Radiation Safety Policies. (See Department Policy and Procedure, Section L, in regards to self and patient). Carelessness or disregard for the department's Radiation Safety Policies could result in student dismissal.
- Students will adhere to the basic radiation principles of time, distance, and shielding to reduce occupational exposure.

ALARA: (As Low As Reasonably Achievable) concept will be applied to all measurable radiation exposure. The reports will be available in the Program office. A student's monthly radiation dosage report should not exceed:

42 mrem/month – deep, whole-body radiation – film badge

It must not exceed the recommended whole body dose equivalent for occupationally exposed persons as established by the State and Federal Agencies for radiological health. Values are:

5 rem/year or 1250-mrem/calendar quarter – whole body (deep)

Each student should check and initial his/her radiation dosage report. The National Council on Radiation Safety and Protection created the ALARA Concept. The ALARA concept was created for the occupational worker, establishing guidelines for radiation exposure. All occupational workers following safe radiation practices should not receive more than one-tenth of the maximum permissible dose in an exposure period (125mrem per quarter) or 0.5 rem per year. Therefore, students who receive a personnel dosimetry report that exceeds one-tenth of the maximum permissible dose in any exposure period will be required to fill out an exposure notification form and be interviewed by a program official. Students who exhibit intentional disregard for radiation safety procedures with regard to themselves, patients, co-workers, or the general public will be dismissed from the program.

Landauer, Inc. (2007). Radiation dosimetry report. Glenwood, IL: Landauer, Inc.

For a complete copy of the Pennsylvania State Laws concerning Radiation Protection (including Pregnancy) please refer to U.S. Nuclear Regulatory Commission Regulatory Guide, Office of Nuclear Regulatory Research (Regulatory Guide 8.13). Please refer to PA code Title 25 Chapter 219. Standards For Protection Against Radiation and PA code Title 25 Chapter 221. X-Rays In The Healing Arts . Below is a summary of the pregnancy policy.

Acknowledgment of Radiation Protection Practices Violation

Per the Radiographer Handbook:

- The following radiation safety rules have been established for the protection of patients and personnel from ionizing radiation during radiology clinical education. These rules are a combination of State and Federal regulations and/or laws and additional guidelines in the use of ionizing radiation. These rules are mandatory, and any exception must be reported to the clinical instructor and program official immediately. All students shall practice appropriate radiation safety procedures in protecting themselves, their patients and other personnel from unnecessary exposure.
- Radiation protection practices are reviewed at the beginning of the students' training in Introduction to Radiography, Radiographic Procedures I - V, Radiation Protection and Biology, and Clinical I-VI
- Understand and apply the cardinal principles of radiation safety (time, distance and shielding). Do not allow unfamiliarity with these principles to result in poor radiation procedures. Never stand in the primary beam. Always wear protective apparel or stand behind a protective barrier.
- Always wear the month Film Badge device (supplied by WHSSRT) positioned outside the lead apron on the collar.
- No individual should hold patients during an exposure on a regular basis.
- If personnel and/or family hold a patient, they must wear lead protective devices.
- Use gonadal shielding on all persons of childbearing age, and breast shielding when it will not interfere with the area of interest.
- Avoid radiographic examination of the pelvis, abdomen and lumbar spine of a pregnant woman, especially during the first trimester.
- Always collimate to the smallest field size appropriate for the examination.

The ALARA (As Low As Reasonably Achievable) concept will be applied to all measurable radiation exposure.

The reports will be available in the Program office. A student's monthly radiation dosage report should not exceed:

42 mrem/month – deep, whole-body radiation – film badge

It must not exceed the recommended dosages level for occupationally exposed persons as established by the State and Federal Agencies for radiological health. Values are:

5 rem/year or 1250-mrem/calendar quarter – whole body (deep)

Each student should check and initial his/her radiation dosage report each quarter.

- Policy—The National Council on Radiation Safety and Protection created the ALARA Concept. The ALARA concept was created for the occupational worker, establishing guidelines for radiation exposure. All occupational workers following safe radiation practices should not receive more than one-tenth of the maximum permissible dose in an exposure period (125mrem per quarter) or .5 rem per year. Therefore, students who receive a personnel dosimetry report that exceeds one-tenth of the maximum permissible dose in any exposure period will be required to fill out an exposure notification form and be interviewed by a Program Official.
- Purpose—To provide students working in radiation areas with notification procedures that track exposure doses beyond the level that the ALARA Concept recommends.
- Procedures—All personnel dosimetry reports will be reviewed by the Radiographer Program Official at WHS/WHSSRT. Personnel dosimetry reports over 125 mrem per quarter or .5 rems per year will

require the exposure notification report. Upon completion of the notification report, the student and Program Official will schedule an interview with the Program Director, if necessary, to discuss ways to protect the safety of any students working in radiation areas and receiving measurable levels of radiation. Students who exhibit intentional disregard for radiation safety procedures with regard to themselves, patients, co-workers, or the general public will be dismissed from the program.

Landauer, Inc. (2007). *Radiation dosimetry report*. Glenwood, IL: Landauer, Inc.

I acknowledge that I have received, read and understand the requirement for Radiation Safety, due to the fact that my quarterly badge readings are over the allotted amount permitted pursuant to the above-referenced Policy. I agree to conduct myself in accordance with the policy of the WHS/WHSSRT Radiation Safety going forward.

Print Name: _____ **Date** _____

Sign Name: _____ **Date:** _____

Witnessed By (Print Name):

Sign Name: _____ **Date:** _____

This Acknowledgment form will be placed in your clinical/ academic file.

Pregnancy Policy

For a complete copy of the Pennsylvania State Laws concerning Radiation Protection (including Pregnancy) please refer to U.S. Nuclear Regulatory Commission Regulatory Guide, Office of Nuclear Regulatory Research (Regulatory Guide 8.13). Below is a summary of the pregnancy policy.

A student who becomes pregnant has the right to declare or not declare her pregnancy. Declaration must be in writing and include the current date, and estimated month of conception.

Upon declaration, the Director of the School of Radiography and the Radiation Safety Officer will review the student's radiation exposure history with the student, emphasizing the maximum permissible dose during pregnancy is 500 mrem for the entire gestation, or 0.056 rem during each month. Work in the healthcare setting can involve exposure to chemicals, radiation levels, infectious diseases or tasks that present risks to the fetus or to the student's ability to carry the fetus to term. Pregnant students are therefore encouraged to discuss the risks, if any, presented by their particular program, the steps that might be available to minimize or eliminate the risk, and the advisability of continuing or suspending participation in the program with their instructor(s) and with their own health care providers. Students who are, or become pregnant, may not be able to continue with the program while pregnant. Those who are and elect to continue in the program will be required to sign a document verifying that these discussions have occurred and that the student is aware of and assumes the risks of continuing with the program while pregnant.

Also to be reviewed is the student's clinical rotation. If a student request any clinical rotation changes, all competency requirements in those areas must be met prior to program completion.

The lower dose limit for a declared pregnancy will remain in effect until one of the following occurs:

- The student gives birth
- The student provides written notification informing school officials she is no longer pregnant
- The student may un-declare her pregnancy at any time in writing
- The pregnant student may choose to continue without modification by notifying the Program in writing

If the student applies for a leave of absence, she will make her application for leave and re-admittance to the program according to the Leave of Absence Policy.

Choosing to not declare pregnancy assumes the student is of regular status, and therefore, no extra measures of protection for the fetus will be taken.

Radiobiologic Considerations:

The severity of the potential response to radiation exposure in utero is both time-related and intensity related. The fetus is more sensitive early in pregnancy than late in pregnancy. As a general rule, the higher the radiation dose, the more severe will be the radiation risks.

The time from approximately the second week to the eighth week of pregnancy is called the period of major organogenesis. During this time the major organ systems of the body are developing. If the radiation dose is sufficient, congenital abnormalities are associated with skeletal deformities. Later in this period neurologic deficiencies are more likely to occur.

During the second and third trimesters of pregnancy, the responses previously noted are unlikely. Results of numerous investigations strongly suggest that if a response occurs following irradiation during the latter two trimesters, the only one possible would be the appearance during childhood of malignant disease: leukemia or cancer. Malignant disease induction in childhood is also a possible response to irradiation during the first trimester.

The maximum permissible dose for the fetus is 0.5 rem (5mSv) for the period of pregnancy, a dose level that most technologists will not reach. This review of radiation exposure is the appropriate time to emphasize that the MPD during pregnancy is 0.5 rem (5 mSv). Furthermore, it should be shown that this MPD refers to the fetus and not to the student herself. This level of 0.5 rem (5mSv) to the fetus during gestation is considered the radiation exposure level of negligible risk. The student should be aware that an alteration of her work schedule is not essential.

It is appropriate to provide the pregnant student with an additional monitor. This requires precise instructions that the monitor be worn at waist level under protective apparel, that the monitor be cycled in a timely fashion, and that it not be mixed up with the collar monitor. This monitor will be labeled “baby badge” or “fetal dose,” or something similar.

When pregnancy is reported, regardless of the nature of the x-ray facilities the program faculty should review acceptable practices of radiation protection: minimize time, maximize distance, and use available shielding. When the student discloses her state of pregnancy, the program faculty should advise the student, including a review of her radiation exposure history and any future restrictions to her schedule that are appropriate.

Pregnancy Declaration Form

I declare my pregnancy on this date, _____, to the Program Director
_____ and to the Clinical Coordinator
_____:

I have been issued a copy of Nuclear Regulatory Guide #8.13, NCRP Report #116 (Radiation Dose Limit for Embryo and Fetus in Occupationally Exposed Women), and NCRP Report #105 (Medical Radiation Exposure of Pregnant and Potentially Pregnant Women).

I have been issued a whole body dosimeter film monitor and a fetal dosimeter monitor and have been instructed in the proper wear and use of these dosimeters.

I understand the dose equivalent to an unborn as a result of occupational exposure to a woman who has declared that she is pregnant should be maintained as low as reasonably achievable, and in any case should not exceed .05 rem (0.005 sievert) during the entire gestation period.

The program director and clinical coordinator will provide special advising regarding personal and program responsibilities and additional protective measures that would affect the monitoring of the pregnancy. Use the space below to provide any additional comments pertinent to your pregnancy.

Student Signature

Date

Clinical Coordinator Signature

Date

Program Director Signature

Date

JRCERT Definition of Direct Supervision

Student supervision under the following parameters:

- An ARRT Registered Technologist in good standing with the ARRT reviews the procedure in relation to the student's achievement;
- An ARRT Registered Technologist in good standing with the ARRT evaluates the condition of the patient in relation to the student's knowledge;
- An ARRT Registered Technologist in good standing with the ARRT is present during the conduct of the procedure;
- An ARRT Registered Technologist in good standing with the ARRT reviews and approves the procedure;
- An ARRT Registered Technologist in good standing with the ARRT is present during student performance of any repeat of any unsatisfactory radiograph;
- An ARRT Registered Technologist in good standing with the ARRT must present for all portable radiographic studies including c-arm and surgery procedures;
- An ARRT Registered Technologist in good standing with the ARRT must be present while performing all repeated examinations.

JRCERT Definition of Indirect Supervision

For radiography, supervision must be provided by an ARRT Registered Technologist in good standing with the ARRT and must be immediately available to assist students regardless of level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where radiation equipment is in use.

Program Policy:

The student is to be directly supervised for all examination until competencies have been successfully completed. Indirect supervision allows the student to perform radiographic procedures, after competency has been documented, without the technologist being in the room or directly available. A qualified technologist must be immediately available (outside room). This does not imply that a portable radiographic procedure can be done without the technologist immediately available. Two students do not equal one technologist.

Mandatory Supervision for Repeat Radiographs and Portable Radiography

At any point within their clinical education training, no student should be performing a repeat radiograph without the direct supervision of a registered technologist.

It is the policy of the Radiographer program and its clinical education sites to provide shadowing and direct supervision, in the areas of surgery, mobile/bedside and portable radiography.

Students should also be under direct supervision when performing examinations in special/high risk areas within the hospital/clinic, such as ER, ICU, PACU, CCU, NICU, etc.

In the instance of a repeat radiograph by a student, the student **MUST** designate on his/her daily report of clinical experience that a repeat radiograph was performed. Writing the word "Repeat" in the examination/procedure section of the daily report sheet can do this. Also, the student must enter an "A" in the column where the initials O/A/I (observe, assist, or independent) are found. Repeat radiographs require an additional entry on the daily report of clinical experience.

Clinical Instruction

Clinical education is designed to accomplish the objectives set forth in the Academic Program. It is arranged to complement the organization of the Radiographic Procedures Course. The Competency Evaluation Program is also carried throughout the student's clinical experience.

Clinical Instruction in Radiographic Areas

Clinical assignments are made in radiographic areas sharing a commonality in procedures performed. Attention is given to the student's clinical experience as it is occurring or about to occur. This provides for an exchange of

information and feedback from the student. This instructional method is in addition to the clinical instruction which accompanies the academic course.

The clinical instructors will review examinations performed in each radiographic area. Basic positioning, along with preparation of contrast media, review of procedures, and protective measures will be discussed/demonstrated. A review of radiographs performed in each clinical area, along with a correlation of anatomy and positioning to radiographic quality, will also be presented.

Clinical Competency Evaluation System Purpose

- To standardize the format for evaluation of clinical performance and competency.
- To standardize the objectivity and consistency of the evaluator in determining competency and grade.
- To provide the student with documentation of his/her competency and progress.

Objectives:

- Given a request for a radiographic examination, the student should be able to identify the procedure to be performed and prepare the radiographic room for that procedure.
- Given a request for any radiographic examination, the student should be able to obtain diagnostic radiographs using proper positioning, protection and technique.
- Given a radiograph of any projection, the student should be able to evaluate the film to determine the need for a repeat examination as judged by the positioning accuracy, motion, quality of technique and presence of artifacts.

Definitions:

- Competency: Having requisite or adequate ability or qualities. The ability to function within the realm of limited supervision and assume those duties and responsibilities as set forth in academic course and clinical objectives. (completed in Clinical)
- Proficiency: Advancement in knowledge or skill to the level of consistent accomplishment. (completed in Lab)
- Simulation: The process of imitating an actual procedure or examination. (completed in Lab and/or Clinical)

Demand Purpose

In order to ensure proficiency of clinical skills, each student will be required to "demand."

Strategy:

- The clinical instructor or radiographer will randomly select the more challenging exams
- The student is unaware of the exams he/she will be asked to complete
- When the exam comes in, the clinical instructor or radiographer will present it to the student.
- The exam will proceed as usual.
- These are not to be graded exams

Please note the student must have reviewed the information in class prior to them being asked to perform a demand. If the student refuses the demand, it may reflect in the student's clinical instructor evaluation.

Competency Procedure: The student must receive a minimum of 52 competency exams prior to graduation.

- It is the student's responsibility to initiate a competency test.
 - Request to test on a specific exam.
 - If request granted, secure a test sheet and prepare radiographic room.
- Inform R.T. you are ready to begin so starting time may be documented.
 - Only the patient, student and evaluator are permitted in the room during a test unless the student has agreed to other personnel.

- To receive credit the patient's clinical history and stating of pregnancy policy must be obtained by the student in the radiographic room and witnessed by the evaluator.
- If on any test the student receives a score of below “average” in any given area, the evaluator must give written evidence as to why that score was given.
- To complete the test the evaluator will discuss in confidence the results with the student in terms of the student's area(s) of weakness and strength.
- The evaluator will offer the student constructive criticism on methods to improve his/her performance.
- The evaluator will sign the test sheet. The student will also sign the test sheet if in agreement with the test procedure and result.
- The student is responsible for returning the competency sheet to the Clinical Instructor. Failure to do so will result in progressive discipline as outlined in the Disciplinary Policy.
- Terminal/Final testing may begin during the 5th semester. The following criteria must be met:
 - Competencies must be complete on those exams selected as a final test.
 - One exam from each, the upper extremity, lower extremity, spine/thorax, and contrast must be obtained. (A minimum of three projections for the UGI and five projections for the BE must be obtained.)
- Simulations of exams may be performed with the following stipulations:
 - No Final exams may be simulated
 - Simulation exams will not be part of your clinical grade, but will be counted toward your ARRT clinical requirements
- Student Initial Markers
 - Markers are a permanent method of identifying, on the radiograph, the patient's right and left side. This is not only justified medically but also legally. Department protocol requires all images be marked.
 - Upon entering the program, the student will be issued one set of initial markers. If a student loses his/her markers and they are not found within the two week time frame, they must re-order a set at their own expense. Generic markers may be used for two (2) weeks but may not be used for competencies.
 - The following protocol will apply to student markers:
 1. A student will mark all his/her images.
 2. A student will only use his/her own initial markers.
 3. If a student does not have his/her markers, they are to report to the program office at the beginning of their shift, for issuance of generic markers.

Grading Criteria for Clinical Testing

- For all proficiencies, competency and terminal/finals, the student must obtain a minimum final score of **90%** per final exam and 75% on all other competencies and proficiencies.
- If the student does not meet the minimum requirements for testing, he/she must repeat the exam.
- Remedial instruction will be conducted by the clinical instructor prior to the retest of a failed exam.
- The grade of the initial exam that is failed will be recorded during the semester that the testing occurred. After the student retests on the exam and passes, the grade which the student obtains will be recorded during the semester that the testing occurred.
- A two week time span is recommended between the failure of an exam and a retest. This time period will allow the clinical instructor to schedule a remedial session.
- In order to fulfill graduation requirements, the student must pass all clinical exams performed. As a final option, infrequent exam may be simulated by the clinical instructor or other faculty member. Each extenuating circumstance will be evaluated by the clinical instructor on an individual basis.

Clinical Daily Log Summary

Clinical documentation of the student's progress regarding:

- type of exams being performed
- number of exams being performed and/or practiced
- amount of R.T. assistance
- number or repeats/supervision of repeats

These are used for follow-up progress, counseling and film critique. These should be recorded by the student on a weekly basis of Monday through Sunday basis and must be recorded in the clinical tracking system.

Evaluations

At the end of each rotation (one per semester per area-please see clinical syllabus), the clinical instructor will complete a Clinical Semester Evaluation for each student. By observing and working with the student in his/her weekly clinical assignment, the instructor will be able to evaluate the student's professional adjustment, effective behavior and clinical skills. Staff radiographers may also evaluate the student assigned to his/her clinical area. This evaluation, based on the clinical week, will assess the student's effective behavior and clinical skills.

These evaluations will be shared with the student and used as constructive reinforcement and critique of the student's progress and performance. The student is responsible for obtaining a designated number of staff evaluations per semester. Each semester the student is required to obtain one each from the following departments, to total five at the end of the semester: NHC/WD, Main/Mon Gen/Greene, OR/Portable, ER, Dwing/Specials.

Clinical Coordinator Evaluations will consist of professionalism; completing all requirements, following hospital policies/procedures, adhering to state/federal regulations, being punctual and reliable, and acting in a professional, legal and ethical manner at all times.

Transportation to the Clinical Site

Transportation to and from the clinical experiences and sites is the responsibility of the student. Clinical sites may exceed 60 miles from the school's location.

Academic Graduation Requirements for the Radiographer Program

Each academic year consists of three semesters. Academic credit at Washington Health System School of Radiology will be measured in Semester Credits. One semester credit is the equivalent of 15 lecture hours; 30 laboratory hours; or 45 clinical hours, with one hour of instructional time defined as a fifty-minute period.

Program length is twenty-four months with students being jointly enrolled at both the Radiography program and California University of Pennsylvania. Those that have previously received an Associate's degree or higher will not be required to enroll at California University of Pennsylvania. Non-degreed applicants offered a position may choose to frontload college courses or take the college courses concurrently. California University of Pennsylvania will process all financial aid for students working towards a degree. Incomplete course work or course work in progress will not be considered.

Graduating Class of 2015-2018 Course List

Lecture 15 hours=1.0 credit		Laboratory 30 hours=1.0 credit			Clinical 45 hours=1.0 credit		
	Course #	Course Name	Prerequisites	Semester Credit	Total Lecture Hours/Term	Total Lab Hours/Term	Total Clinical Hours/Term
Semester Fall I (15 weeks didactic/17 weeks clinical)	RAD 100	Intro to Radiography and Patient Care	None	2	30	0	0
	RAD 101	Medical Terminology	None	1	15	0	0
	RAD 110	Clinical I	None	6.5	0	0	294
	RAD 103	Radiographic Procedures I	None	2.5	30	15	0
Semester Spring I (15 weeks didactic/19 weeks clinical)	RAD 104	Radiation Protection and Biology	RAD 100	2	30	0	0
	RAD 105	Radiographic Procedures II	RAD 103, Anatomy and physiology (minimum of 3 credits)	2.5	30	15	0
	RAD 120	Clinical II	RAD 110	9	0	0	406
Semester Summer I (10 weeks didactic/11 weeks clinical)	RAD 106	Image Production I	Physics 100 level or higher	2.0	30	0	0
	RAD 107	Radiographic Procedures III	RAD 105	1.0	20	10	0
	RAD 130	Clinical III	RAD 120	8	0	0	364
Semester Fall II (15 weeks didactic/17 weeks clinical)	RAD 200	Image Production II	RAD 106	3	45	0	0
	RAD 201	Radiographic Procedures IV	RAD 107	2.5	30	15	0
	RAD 240	Clinical IV	RAD 130	6.5	0	0	294
Semester Spring II (15 weeks didactic/19 weeks clinical)	RAD 203	Image Production III	RAD 200	3	45	0	0
	RAD 204	Radiographic Procedures V	RAD 201, Anatomy and physiology (minimum of 6 credits)	2.5	30	15	0
	RAD 250	Clinical V	RAD 240	9	0	0	406
Semester Summer II (10 weeks didactic/11 weeks clinical)	RAD 205	Registry Prep and Cross Sectional Review	RAD 204	2	30	0	0
	RAD 260	Clinical VI	RAD 250	8	0	0	364

Graduating Class of 2019 Course List

Lecture 15 hours=1.0 credit		Laboratory 30 hours=1.0 credit			Clinical 45 hours=1.0 credit		
	Course #	Course Name	Prerequisites	Semester Credit	Total Lecture Hours/Term	Total Lab Hours/Term	Total Clinical Hours/Term
Semester Fall I (15 weeks didactic/17 weeks clinical)	RAD 100	Introduction to Radiography and Patient Care	None	2	30	0	0
	RAD 106	Image Production I	None	2	30	0	0
	RAD 103	Radiographic Procedures I	Anatomy and Physiology (minimum 8 credits)	3	30	30	0
	RAD 110	Clinical I	None	5.5	0	0	264
Semester Spring I (15 weeks didactic/19 weeks clinical)	RAD 200	Image Production II	RAD 106	3	45	0	0
	RAD 105	Radiographic Procedures II	RAD 103	3.5	30	45	0
	RAD 120	Clinical II	RAD 110	8	0	0	360
Semester Summer I (10 weeks didactic/11 weeks clinical)	RAD 203	Image Production III	RAD 200	2	30	0	0
	RAD 107	Radiographic Procedures III	RAD 105	1	20	10	0
	RAD 130	Clinical III	RAD 120	8	0	0	364
Semester Fall II (15 weeks didactic/17 weeks clinical)	RAD 104	Radiation Protection and Biology	RAD 203	3	45	0	0
	RAD 201	Radiographic Procedures IV	RAD 107	2.5	30	15	0
	RAD 240	Clinical IV	RAD 130	6.5	0	0	294
Semester Spring II (15 weeks didactic/19 weeks clinical)	RAD 204	Radiographic Procedures V	RAD 201	2.5	30	15	0
	RAD 250	Clinical V	RAD 240	10	0	0	450
Semester Summer II (10 weeks didactic/11 weeks clinical)	RAD 205	Registry Prep and Cross Sectional Review	RAD 204	2	30	0	0
	RAD 260	Clinical VI	RAD 250	8	0	0	364

Course Descriptions

These course descriptions are also located in the syllabi. The syllabi will be customized by your instructor for each course and will reflect the expectations that are required. Please note that the course syllabi are subject to change and that if you have questions, please reach out to your instructor and/or program director.

RAD 100 Introduction to Radiography and Patient Care (Washington Health System School of Radiology)

This course introduces the student to the Radiography profession with specific emphasis on the Radiographer discipline. It includes related terminology, ethics, basic radiation protection, accreditation, credentialing, professional organizations, health care team, radiology organization/operation and other related topic. It also includes all aspects of patient care including but not limited patient safety and medical emergencies.

RAD 101 Medical Terminology (Washington Health System School of Radiology)

This course introduces the major body structures and functions through the study of medical terminology. Terminology related to diagnosis and treatment is also presented.

RAD 103 Radiographic Procedures I (Washington Health System School of Radiology)

This course presents the radiographic procedures and principles necessary to perform diagnostic studies of the structures of the upper extremities of the body, chest, abdomen and pediatric chest, abdomen, and upper extremity. This course also provides the student with the knowledge necessary to interact with all members of the allied health team as well as the patient.

RAD 104 Radiation Protection and Biology (Washington Health System School of Radiology)

This course presents theories of the biological effects of ionizing radiation on the biological systems, both genetic and somatic, quantities and units of measurement, proper protective measures for patient and personnel, effective dose equivalents radiation absorption processes and shielding, and exposure monitoring devices. It includes terminology, control, standards, monitoring, and principles of protective shielding in radiographic and radiotherapeutic installations.

RAD 105 Radiographic Procedures II (Washington Health System School of Radiology)

This course presents the radiographic procedures and principles necessary to perform diagnostic studies of the structures of the humerus, shoulder girdle, lower limb, pelvic girdle, and pediatric lower extremity. This course also provides the student with the knowledge necessary to interact with all members of the allied health team as well as the patient.

RAD 106 Image Production I (Washington Health System School of Radiology)

This course presents the principles of radiation physics. Content establishes a basic knowledge of atomic structure, the nature and characteristics of radiation, concepts of image production, the x-ray circuit, technical factors, and the x-ray tube.

RAD 107 Radiographic Procedures III (Washington Health System School of Radiology)

This course presents the radiographic procedures and principles necessary to perform diagnostic studies of the structures of the cervical spine, dorsal spine, lumbar spine, sacrum/coccyx and bony thorax. This course also provides the student with the knowledge necessary to interact with all members of the allied health team as well as the patient.

RAD 110 Clinical I (Washington Health System School of Radiology)

This course introduces the clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality which includes positioning, technique, anatomy, etc.

RAD 120 Clinical II (Washington Health System School of Radiology)

This course is a continuation of RAD 110 Clinical I. It is designed to further enhance clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality, which includes positioning, technique, anatomy, etc.

RAD 130 Clinical III (Washington Health System School of Radiology)

This course is a continuation of RAD 120 Clinical II. It is designed to further enhance clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be

sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality which includes positioning, technique, anatomy, etc.

RAD 200 Image Production II (Washington Health System School of Radiology)

This course presents the principles of radiographic imaging. Content establishes a knowledge base in factors that govern the image production process.

RAD 201 Radiographic Procedures IV (Washington Health System School of Radiology)

This course presents the radiographic procedures and principles necessary to perform diagnostic studies of the structures of the cranium, facial bones, sinuses, upper and lower gastrointestinal, urinary system, venipuncture, pediatric, trauma, mobile, and surgical. This course also provides the student with the knowledge necessary to interact with all members of the allied health team as well as the patient.

RAD 203 Image Production III (Washington Health System School of Radiology)

This course presents radiographic, fluoroscopic, mobile, and additional equipment standards and testing procedures for consistency in the production of radiographic images. Management concepts for an imaging department are presented with a focus on quality control testing.

RAD 204 Radiographic Procedures V (Washington Health System School of Radiology)

This course presents the radiographic procedures and principles necessary to perform diagnostic studies of the structures of the angiography, interventional, computed tomography, special radiographic procedures, and therapeutic modalities. This course also explores computed tomography (CT) history, physical principles, instrumentation, image creation, and post processing. It will provide the student with the knowledge necessary to interact with all members of the allied health team as well as the patient.

RAD 205 Registry Prep and Cross Sectional Review (Washington Health System School of Radiology)

This course provides a review of radiographer program content in preparation for professional employment opportunities and explores Computed Tomography (CT) content provides entry-level radiography students with principles related to computed tomography.

Please note: ARRT approval of RAD 205 and RAD 204 combined, to meet the ARRT CT requirements for 16 hours of education. <https://www.arrt.org/pdfs/Structured-Education-Requirements/CT-Structured-Education-Requirements.pdf>. Eligibility is only for two years from the date of your graduation and then will become void. ARRT Require you to uploaded transcript, select school, and select courses “RAD 205 Registry Prep and Cross Sectional Anatomy” and “RAD 204 Rad Procedures V”

RAD 240 Clinical IV (Washington Health System School of Radiology)

This course is a continuation of RAD 130 Clinical III. It is designed to further enhance clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality which includes positioning, technique, anatomy, etc.

RAD 250 Clinical V (Washington Health System School of Radiology)

This course is a continuation of RAD 240 Clinical IV. It is designed to further enhance clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be

sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality which includes positioning, technique, anatomy, etc.

RAD 260 Clinical VI (Washington Health System School of Radiology)

This course is a continuation of RAD 250 Clinical V. It is designed to further enhance clinical education practical experience in a clinical healthcare setting, including office procedure, processing of radiographs, practice in ethical and situations during patient contact, patient care, and patient positioning for diagnostic radiographic studies. The student will also apply the principles of radiographic exposure. There will be sessions of film critique and radiation protection measures will be emphasized and observed. Film critique covers the evaluation of radiographs for their diagnostic quality which includes positioning, technique, anatomy, etc.

Clinical Graduation Requirements for the Radiographer Program

Students must demonstrate competence on all 37 mandatory exams and 15 elective exams performed on patients only. Simulations may be completed with prior permission from the Program Director or Clinical Coordinator. Please refer to the current ARRT Radiographer Handbook certification requirements for more information.

Master Clinical Education Schedule of Competencies, Objectives

The following is the required competency schedule:

RAD 110 Clinical Education I

- Clinical Objectives/Checklists: Transport, US
- Competencies: Mandatory, Electives, All Patient Care

RAD 120 Clinical Education II

- Clinical Objectives/Checklists: Nuclear Medicine
- Competencies: Mandatory, Electives

RAD 130 Clinical Education III

- Clinical Objectives/Checklists: RIS/PACS
- Competencies: Mandatory, Electives

RAD 240 Clinical Education IV

- Clinical Objectives/Checklists: C-Arm, CT, Radiologist Assistant
- Competencies: Mandatory, Electives

RAD 250 Clinical Education V

- Clinical Objectives/Checklists: MRI, Cardiac Cath Lab
- Competencies: 37 Mandatory, 15 Electives

RAD 260 Clinical Education VI

- Clinical Objectives/Checklists: Elective
- Competencies: Mandatory, Electives
- Final Mandatory Terminal/Final Competencies (1 each): Fluoroscopic procedure, Upper Extremity, Lower Extremity, Spine Selection

All terminal/final comps must be performed on real patients. Simulations will not be accepted.

Requirement: Candidates must demonstrate competence in all 37 procedures identified as mandatory (M). Procedures should be performed on patients; however, up to eight mandatory procedures may be simulated if demonstration on patients is not feasible. Candidates must demonstrate competence in 15 of the 34 elective (E) procedures. Candidates must select one elective procedure from the head section. Candidates must select an upper GI or contrast enema plus one other elective from the fluoroscopy section. Elective procedures should be performed on patients; however, electives may be simulated if demonstration on patients is not feasible. Institutional protocol will determine the positions or projections used for each procedure. Demonstration of competence includes patient identity verification, exam order verification, patient assessment, room preparation, patient management, equipment operation, technique selection, positioning skills, radiation safety, image processing, and image evaluation.

Clinical Competency Guidelines

Students may not complete a competency until they have passed their proficiency in lab.

Content Reviewed>Positioning Reviewed/Demonstrated>Proficiency

- Students should **observe/assist** in every exam, even if they have not become proficient
- Students should **perform** all exams, once they are proficient
 1. Observe: Student did not actively participate in the performance of the procedure.
 2. Assist: Student is actively participating with image sequence, positioning, and/or selection of technique.
 3. Perform: Student performs the exam under direct supervision with a registered technologist.

Direct Supervision: When performing examinations in special/high risk areas:

- ER, ICU, PACU, CCU, NICU
- Areas of surgery
- Mobile/bedside/portable radiograph
- Repeat radiograph by a student (notify the technologist ***BEFORE*** the repeat is completed)

<p><u>Fall Semester I</u> Chest, routine Chest WC/Cart Chest Decubitus Mobile Chest Geriatric Chest Routine Peds Chest Routine Soft-Tissue Neck KUB AB Upright AB Decubitus Mobile Abdomen Peds Abdomen Thumb/Finger Hand Wrist Forearm Elbow Peds Mobile Study</p>	<p><u>Spring Semester II</u> Humerus Shoulder Trauma Shoulder or Humerus Clavicle Scapula AC Joints Trauma: Upper Ext. Geriatric Upper Extremity Peds Upper Extremity Foot Ankle Knee Tibia-Fibula Femur Trauma: Lower Ext. Patella Os Calcis (Heel) Toes Pelvis Hip Trauma: Hip Geriatric Lower Extremity Peds Lower Extremity Mobile Orthopedic</p>	<p><u>Summer Semester III</u> Sternum SC Joints Ribs Cervical Spine Trauma: Spine Thoracic Spine Lumbosacral Spine Sacrum/Coccyx Scoliosis Series</p>
<p><u>Fall Semester IV</u> Skull Paranasal Sinuses Facial Bones Orbits Zygomatic Arches Nasal Bones Mandible TMJ UGI Contrast Enema Small Bowel Esophagus Study Cystogram IVP ERCP C-Arm Procedure-One plus projections C-Arm Procedure-Sterile Field</p>	<p><u>Spring Semester V</u> Myelogram Arthrogram Hysterosalpingogram</p>	<p><u>Summer Semester VI</u> Final Mandatory Terminal: Fluoroscopic Procedure Upper Extremity Lower Extremity Spine</p>

Radiography Program ARRT Competency Requirements

Student Name: _____

Class: _____

Imaging Procedures Chest and Thorax	Mandatory Elective	Date Completed	Patient Simulated	Verified By
Chest, routine	M			
Chest (AP) Wheelchair or Stretcher	M			
Ribs	M			
Chest Lateral decubitus	E			
Sternum	E			
Upper Airway (Soft-Tissue Neck)	E			
Upper Extremity				
Thumb or Finger	M			
Hand	M			
Wrist	M			
Forearm	M			
Elbow	M			
Humerus	M			
Shoulder	M			
Trauma Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	M			
Clavicle	M			
Scapula	E			
Acromioclavicular Joints	E			
Trauma: Upper Extremity (Non-shoulder)*	M			
Lower Extremity				
Foot	M			
Ankle	M			
Knee	M			
Tibia - Fibula	M			
Femur	M			
Trauma: Lower Extremity*	M			
Patella	E			
Calcaneus (Os Calcis)	E			
Toes	E			
Head-one must be selected				
Skull	E			
Paranasal Sinuses	E			
Facial Bones	E			
Orbits	E			
Zygomatic Arches	E			
Nasal Bones	E			
Mandible	E			

Temporomandibular Joints	E			
Spine and Pelvis	Mandatory Elective	Date Completed	Patient Simulated	Verified By
Trauma: Cross-Table Lateral Spine (Horizontal Beam)	M			
Cervical Spine	M			
Thoracic Spine	M			
Lumbosacral Spine	M			
Pelvis	M			
Hip	M			
Cross Table Lateral Hip (Horizontal Beam)	M			
Sacrum and/or Coccyx	E			
Scoliosis Series	E			
Sacroiliac Joints	E			
Abdomen				
Abdomen Supine (KUB)	M			
Abdomen Upright	M			
Abdomen Decubitus	E			
Intravenous Urography	E			
Fluoroscopic Studies-Either UGI or contrast enema plus another elective from this section				
Upper G.I. Series (Single or Double Contrast)	E			
Contrast Enema (Single or Double Contrast)	E			
Small Bowel Series	E			
Esophagus Study	E			
Cystography/Cystourethrography	E			
ERCP	E			
Myelography	E			
Arthrography	E			
Hysterosalpingography	E			
Surgical Studies				
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	M			
C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	M			
Mobile Studies				
Chest	M			
Abdomen	M			
Orthopedic	M			
Pediatrics (age 6 or younger)				
Chest Routine	M			
Upper Extremity	E			
Lower Extremity	E			
Abdomen	E			

Mobile Study	E			
Geriatric Patient (Physically or Cognitively Impaired as a Result of Aging)	Mandatory Elective	Date Completed	Patient Simulated	Verified By
Chest Routine	M			
Upper Extremity	M			
Lower Extremity	M			
General Patient Care	Date Completed	Competence Verified By		
CPR Certified				
Vital Signs -Blood pressure				
Vital Signs -Temperature				
Vital Signs -Pulse				
Vital Signs -Respiration				
Vital Signs -Pulse Oximetry				
Sterile and Medical Aseptic Technique				
Venipuncture				
Transfer of patient				
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)				

*Trauma is considered a serious injury or shock to the body and requires modifications in positioning and monitoring of the patient's condition.

10 General Patient Care Activities

37 Mandatory Radiographic Procedures Competences (all need completed for ARRT)

34 Elective Radiographic Procedures Competencies (15 need completed for ARRT)

71 Total Radiographic Procedures Competencies

Radiographer Program Clinical Site Education Checklist **To be completed first week**

Student's Name	Date:	Signature of Technologist:
Received Copy of Department Protocol		
Fire and Safety Orientation		
Department Tour		
Department Chain of Command		
Computer Orientation/Password Assignment		
Locker Room Location/Locker Assignment		
Patient Confidentiality Policy		
Lunch Break Rules/Assignments		
Smoking Policy		
Review of Disaster Codes		
Policy for Answering Phones		
Incident/Accident Reporting & Documenting		
Parking Information/Designated Parking Area		
Necessary Department Phone Numbers		
Infection Control Policy		
Who to call for call-offs/phone numbers		
Review of Dept. Policy/Procedure Manual & Location		
Workplace Hazards Information		

TRANSPORT/PATIENT CARE OBJECTIVES & CHECKLIST

Purpose: To ensure the student becomes familiar with the hospital setting, practices safe patient care and personal safety skills.

- The student will be able to demonstrate proper communication skills when addressing a patient
- The student will be able to properly identify a patient and confirm the physicians orders
- The student will be able to identify parts of a wheelchair and stretcher
- The student will learn proper hand hygiene in handling/transporting of patients
- The student will learn proper transferring of patients

Please initial and date Yes or No to the following questions:

I. Communication	Yes	No
<ul style="list-style-type: none"> • Can the student address and identify a patient properly? • Does the student properly confirm physician's orders? 		
II. Policies and Personal Safety		
<ul style="list-style-type: none"> • Does the student practice proper hand hygiene when handling patients? • Can the student notify proper personnel when an IV is empty? • Can the student complete a two person transfer? • Can the student complete a sheet transfer or board transfer? 		
III. Can the Student Identify Parts, Manipulate Wheelchair Properly, and Position the Patient Properly?		
Explain the transfer technique to the patient then do the following: <ul style="list-style-type: none"> • Wheelchair to radiology table transfer • Radiology table to wheelchair transfer 		
IV. Can the Student Identify Parts, Manipulate Stretcher Properly, and Position the Patient Properly?		
Explain the transfer technique to the patient then do the following: <ul style="list-style-type: none"> • Stretcher to radiography table • Radiography table to stretcher 		
VI. Equipment		
<ul style="list-style-type: none"> • Can the student check the oxygen tank/mask and tubing? • Can the student locate the suction machine? • Can the student locate fire extinguishers, exit locations, evacuation routes, and be able to identify departmental fire alarm signal? 		

Comments:

Student's Signature: _____ Date: ____ Evaluator's Signature: _____ Date: _____

Vital Signs, Venipuncture, Medical Equipment, and & Sterile and Aseptic Technique Objectives

Purpose: To familiarize student with the general knowledge on how to do venipuncture, take vital signs, prepare and use medical equipment and use PPE. Upon completion, the student will:

- Demonstrate vital signs
- Demonstrate venipuncture
- Be able to manipulate medical equipment
- Demonstrate sterile and aseptic technique
- Demonstrate the correct method of putting on sterile gloves.

Procedure Steps please initial and date Yes or No to the following questions:

Vitals	Yes	No
Temperature: Student demonstrates proper technique for taking Tympanic (Aural) temperatures.		
Respiration: Student demonstrates correct technique for taking and recording respiration		
Pulse: Student demonstrates ability to find and record Radial pulse		
Blood Pressure: Student demonstrates correct technique for taking and recording BP		
Pulse Oximetry: Student demonstrates correct technique for taking and recording pulse oximetry		
Venipuncture/Aseptic Technique: Student performed Venipuncture procedure using correct aseptic techniques		
<ul style="list-style-type: none"> • Wash Hands • Gloves • Disinfected Site • Tourniquet • Site: Student evaluated and located venous site correctly • Insertion of Needle: Student used correct techniques for placing needle in vein • Release of tourniquet: Student demonstrated correct method for releasing of • Tourniquet • Withdrawal of needle: Student used correct technique for completion of venipuncture 		
Patient Equipment		
Verify type of tank, or type of wall gauge (green for Oxygen) <ul style="list-style-type: none"> • Connect tubing • Turn on Oxygen Supply • Check for Oxygen flow by placing hand over outlet • Regulate gauge per order Mask: 6-8 liters • Cannula 2-6 liters • Check patient for ease of Respiration Evaluate IV <ul style="list-style-type: none"> • Drip regular • No pain at site • No blood backup • No dark clotted blood in line • No air in line • Ensure if in transfer of patient, line is stable • If problem contact RN • Document any change in status of IV • Assure Tubing not in Radiograph 		
Sterile and Aseptic Technique Competency		
<ul style="list-style-type: none"> • Clean and de-clutter area • Open sterile gloves properly • Proper placement on clean surface(cuff to you) • Grasp cuff with 2nd finger and thumb of non-dominate hand • Insert dominate hand; and pull glove without contamination • Smooth gloves over wrist; check finger placement • Inspect gloves for tears or holes • Keep hands above waist level to protect the sterile gloves 		

Student's Signature: _____ Date _____ Evaluator's Signature: _____

Competency Evaluation Form Anything that is scored an <u>Average</u> or below must have a comment					
Name: _____		Date: _____		Exam: _____ Site: _____	
Student prepared for the exam: <ul style="list-style-type: none"> Room set up Student introduction Patient identifiers Reviewed patient prescription 				O No	O Yes
Student started the exam: <ul style="list-style-type: none"> Reviewed patient history Verified patient pregnancy status (LMP noted) Provided clear/complete explanation of procedure Changed patient attire as appropriate 				O No	O Yes
Student equipment performance: <ul style="list-style-type: none"> Select proper image receptor Proper manipulation of the tube Select correct exposure/technical factors 	O N/A	O Poor	O Below Average	O Average	O Above Average
Student performed the exam: <ul style="list-style-type: none"> Proper positioning Utilized their ID markers Apply critical thinking Observed patient during exposure 	O N/A	O Poor	O Below Average	O Average	O Above Average
Student shielded patient as necessary/possible.				O No	O Yes
Student completed exam: <ul style="list-style-type: none"> Radiographs critiqued by a technologist Patient released with proper instructions Radiographic anatomy reviewed with student Discuss pathology as needed “Below Average or Poor” anatomy review is an automatic competency failure	O N/A	O Poor	O Below Average	O Average	O Above Average
Competency failure will result when: <ul style="list-style-type: none"> No patient identification No verification of physician order No shielding of the patient Not asking for possibility of pregnancy No student ID markers Repeating any part of the exam Not knowing the department protocol Not obtaining and documenting patient history Not being proficient of the entire exam Getting “Below Average or Poor” on anatomy review Violating any of the ASRT Code of Ethics or Radiography Program policies 	O N/A				O Yes
Technologist Name/Signature:	Date:				
Comments: (Please use back of form for more space)					
Student received a failure for this procedure for the reason marked above and is required to perform this competency again. The grade will stand and the exam must be repeated at a later point after a student remediation.	Student’s Signature/Date: Evaluator’s Signature/Date:				

Competency Evaluation Form C-Arm									
Anything that is scored an <u>Average</u> or below must have a comment									
Name: _____		Date: _____		Exam: _____ Site: _____					
Student prepared for the exam:									
<ul style="list-style-type: none"> Obtain necessary equipment for exam and transport Student introduction Supplied appropriate protection devices for OR staff Verified patient order 				O No	O Yes				
Student started the exam:									
<ul style="list-style-type: none"> Assisted and communicated with the OR staff Verified patient pregnancy status (LMP noted) Provided clear/complete explanation of procedure 				O No	O Yes				
Student equipment performance:									
<ul style="list-style-type: none"> Properly turned on and selected appropriate settings/functions Properly entered patient information. 				O N/A	O Poor	O Below Average	O Average	O Above Average	
Student performed the exam:									
<ul style="list-style-type: none"> Performed procedure in appropriate length of time Moved C-arm smoothly to all desired positions Followed appropriate sterile technique Located and used all locks appropriately Utilized their ID markers when applicable Applied critical thinking Placed image in proper anatomical position 				O N/A	O Poor	O Below Average	O Average	O Above Average	
Student shielded patient as necessary/possible.									
				O N/A			O No	O Yes	
Student completed exam:									
<ul style="list-style-type: none"> Properly saved and recalled images Note: Recorded Fluoroscopy time Properly shut off equipment and disconnected Removed equipment from room Radiographic anatomy reviewed with student “Below Average or Poor” anatomy review is an automatic competency failure				O N/A	O Poor	O Below Average	O Average	O Above Average	
Competency failure will result when:									
<ul style="list-style-type: none"> No patient identification No verification of physician order No shielding of the patient Not asking for possibility of pregnancy No student ID markers Repeating any part of the exam Not knowing the department protocol Not obtaining and documenting patient history Not being proficient of the entire exam Getting “Below Average or Poor” on anatomy review Violating any of the ASRT Code of Ethics or Radiography Program policies 				O N/A				O Yes	
Technologist Name/Signature:								Date:	

Radiography Program Student Clinical Evaluation

Student: _____ CI: _____ Date: _____

Punctuality and Appearance: The student is in the department dressed as appropriate, well groomed, and on time (i.e. OR scrubs as needed).	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Cooperation and Attitude: The student is enthusiastic, a good team member, and accepts constructive criticism while showing improvement.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Aptitude and Ability to Learn: The student thinks and acts constructively, learns with good comprehension and supervision as required.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Initiative and Dependability: The student has confidence and follows instructions, as well as handles situations and accepts responsibility.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Quality of Work and Performance: The student is consistently productive, capable of equipment manipulation, and competent.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Radiation Protection: The student uses radiation protection consistently for patients, team members, and self as appropriate.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Professionalism: The student uses good communication skills, is ethical and professional, and provides great patient care.	<input type="radio"/> – Not Applicable	<input type="radio"/> 1 - Infrequently	<input type="radio"/> 2 - Usually	<input type="radio"/> 3 - Always
Professionalism: The student uses hand hygiene both before and after each patient (in and out).	<input type="radio"/> – Not Applicable	<input type="radio"/> 0 - No	<input type="radio"/> 2 - Yes	
Demand: Student accepted and completed a demand as requested.	<input type="radio"/> – Not Applicable	<input type="radio"/> 0 - No	<input type="radio"/> 2 - Yes	

Evaluation Score (25 Points Possible): _____

Additional Comments:

Signature Of Clinical Instructor: _____

Student Signature: _____

(The Student’s Signature Does Not Imply Agreement With The Evaluation, Only That The Evaluation Has Been Discussed With The Student. The Student May Make Additional Comments Below.):

The Washington Health System School of Radiologic Technology FERPA

School Policy: In Accordance With The Directives Of Section 438 Of The General Education Provision Act, Title Iv Of The Public Law 90-247, As Amended, 88 Stat. 571-574 (20 U.S.C. 1232g)

The Family Education Rights and Privacy Act of 1974 requires The Washington Hospital Radiologic Technology Program establish a School Policy that would protect the rights of students of a post-secondary school in relation to the collection, maintenance, release, and disclosure of student's Education Records. The School Policy is available upon request at the School Office.

This recently enacted federal legislation provides that:

- Radiologic Technology students have the right to inspect and review their education records in the School Office.
- A reasonable time must be allowed following a written request to view the student's records.
- Radiologic Technology students may designate the third parties that may have access or disclosure of their education records.
- Students have the right to file complaints concerning alleged failure of the Radiologic Technology Program to comply with the requirements of the Act.
- Students have the right to a hearing to challenge the contents of his or her records and an opportunity for the correction or deletion of any inaccurate, misleading or otherwise inappropriate data contained therein.
- Students have the right to a response from the School to reasonable requests for explanation and interpretation of the records.
- Students have a right to obtain copies of their education records for a fee to cover the copying of the records.
- The School must have written consent from the student to release or disclose education records, personally identifiable information to third parties.
- The student has the right to rescind their FERPA, but must do so in writing.

I have been informed of The Washington Health System Radiologic Technology Program’s policy concerning the students’ rights to privacy and access to their “education records” as specified by the Buckley Amendment.

I wish to waive my rights to privacy of ‘education records’ and wish to extend access to third parties. If a waiver is indicated, the following are the name(s) and address (es) of those third parties to whom I wish to grant access to my education records:

1. _____ _____ _____	2. _____ _____ _____
----------------------------	----------------------------

Transcript to be mailed? Yes No

Transcript to be mailed? Yes No

I agree The Washington Health System Radiologic Technology Program cannot be held legally responsible for releasing my educational records to those third parties that I have indicated above.

Printed Name/Student Signature

Date

Program Official

Date

Drug Prevention–Alcohol Effects:

Alcohol consumption causes a number of marked changes in behavior. Even low doses significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts, including spouse and child abuse. Moderate to high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life-threatening. Long-term consumption of large quantities of alcohol, particularly when combined with poor nutrition, can also lead to permanent damage to vital organs such as the brain and the liver.

Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicates that children of alcoholic parents are at greater risk than other youngsters of becoming alcoholics.

Legal Sanctions Under Local, State, and Federal Law

The intent of the following information is to provide knowledge of possible sanctions to be known and available. It is not possible for this list to encompass all penalties available to federal and state authorities
ALCOHOL: Underage purchase of alcohol or misrepresentation of age is subject to a fine of up to \$50 and 3 days in jail or probation. Purchase of alcohol for those underage is subject to a fine up to \$100 and up to 10 days in jail. Public intoxication is subject to a fine up to \$100 and up to 60 days in jail or completion of an alcohol education program or counseling. Driving under the influence of alcohol or other drugs (including DWI), depending on circumstances, is subject to incarceration 24 hours to 10 years, a fine of \$100 to \$5,000 and license suspension 6 months to life.

CONTROLLED SUBSTANCES: Possession of a controlled substance is subject to probation for the first offense. Second or subsequent offense depending on substance classification is up to 20 years imprisonment and/or \$50,000 fine. Manufacture, possession or delivery with the intent to manufacture or deliver a controlled substance is subject to, depending on the substance classification, up to 15 years imprisonment and/or \$20,000 fine. Federal sanctions for illegal possession of a controlled substance vary with the conviction, substance possessed and the amount of the substance. First conviction is subject to up to 1 year imprisonment and fine at least \$1,000 but no more than \$10,000 or both. After one year prior drug conviction at least 15 days in prison, not to exceed 2 years and a fine of at least \$2,500 but no more than \$250,000 or both. Those convicted of illegal possession of a controlled substance are also subject to denial of federal benefits, such as student loans, grants, contracts and professional and commercial licenses, up to 1 year for first offense, up to 5 years for second and subsequent offenses.

Consent to Voluntary Drug or Alcohol Screen Test

Alcohol and Drug Abuse Policy

The Washington Health System School of Radiologic Technology is committed to maintaining a healthy and substance abuse-free environment that promotes the safety and welfare of students, faculty members, employees, and patients and families. The School of Radiologic Technology faculty and staff require that Radiologic Technology students provide safe, effective, and supportive client care. To fulfill this purpose, Radiologic Technology students must be free of chemical impairment during participation in any part of the School of Radiologic Technology program including classroom, clinical laboratory, clinical settings, and other school sponsored functions. The student has the responsibility to report medications taken or prescribed to Employee Health's and the Radiologic Technology instructor.

The abuse of alcohol and/or other chemical dependencies are known to cause physical and psychosocial effects which may render that individual incapable of performing the essential functions of a student in a safe, competent manner.

In accordance with the Federal Controlled Substance Act of 1970 and the Pennsylvania Controlled Substance, Drug, Device, & Cosmetic Act of 1972, the Washington Health System School of Radiologic Technology prohibits the possession, use and distribution of alcohol or illegal drugs on hospital and school property, as well as off-site clinical locations.

Drug diversion, manufacture, sale, distribution, and possession of illicit/illegal controlled substances, as well as any misdemeanor or felony charges related to these conditions are grounds for permanent dismissal from the program.

The Washington Health System School of Radiologic Technology defines the chemically impaired student as one who, while in the academic or clinical setting, is under the influence of, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal/illicit drugs, prescribed medications, inhalants, synthetic designer drugs, or other mood altering substances. Substance abuse is the regular use of drugs for other than the accepted medical purposes and to the extent that it results in physical or psychological harm to the user and/or is used in a way that is detrimental to society. Abuse of the substance includes episodic misuse or chronic use, either prior to or during the academic or clinical experience, which has produced psychological and/or physical symptoms which endanger the student and others. Health risks associated with substance abuse may lead to both psychological and physical dependence that can affect virtually any body system depending on the particular substance abused.

Substance abuse among Radiologic Technology students is a major issue since it can compromise the integrity of the learning environment, as well as place vulnerable patients at risk. Radiologic Technology education reflects the society in which schools of Radiologic Technology exist. Substance abuse is a universal health problem that affects all segments of society, including student, faculty, and staff in Radiologic Technology schools. The high demands of Radiologic Technology school, inordinate stress levels, and burn-out are contributing factors to Radiologic Technology students developing substance behaviors. This health problem must be proactively addressed when identified within the Radiologic Technology student population. Primary and secondary prevention strategies incorporating social support, availability of counseling, teaching stress management, promoting dialogue about student substance abuse, and providing a safe supportive environment for student “whistle-blowers” are vital in this process. The Radiologic Technology faculty will intervene with the chemically impaired student as outlined in the established procedure. Based on the assumption that addiction is an illness that can successfully be treated, the faculty is committed to promoting student recovery from substance abuse. This would include referrals to the Employee Assistance Program.

The need for drug testing policies is grounded in the prevalence of chemical abuse & dependence in health care providers. Prior to admission, student applicants are required to submit to a urine drug screen at a designated time at the Washington Health System Employee Health. The drug screen must be negative.

Upon admission the student must complete a “Consent to Voluntary Drug or Alcohol Screen Test” form. Random drug screens may be performed no more than two times a year in a rolling twelve (12) month period. The student will then complete/sign the required Employee Health forms if selected for random testing/screening.

“For cause” testing will occur if “Reasonable Suspicion” of impaired behaviors of the student are observed. If the student refuses, the student faces disciplinary action, including permanent dismissal from the school.

If a student who is employed by the Washington Health System shows “Reasonable Suspicion” of impaired behaviors, while in the hospital employee role, hospital policy would take precedence.

DEFINITION OF TERMS

For the purpose of this Policy, the below listed terms are defined as follows:

A. Legal Drug - A prescribed drug or over-the-counter drug which has been legally obtained and is being used for the purposes for which it was prescribed or manufactured.

B. Illegal Drug - Any drug which cannot be legally obtained (e.g. marijuana, narcotics, hallucinogens, etc.) or which, although legal, has been illegally obtained or prescribed, or drugs not being used for prescribed purposes or in larger doses than recommended.

C. Over the Counter Drugs – any drug that is obtained without prescription, that alone or in conjunction with, other prescription and non-prescription medications, results in impairment.

D. Reasonable Suspicion

1. The Radiologic Technology instructor observes that the Radiologic Technology student’s behaviors, speech, body odor, or appearance are indicative of the use of alcohol or drugs. Reasonable suspicious behaviors could include conduct that prevents the student from performing the essential functions of the student role or which poses a direct threat to themselves and/or to the safety of others

2. Aberrant or unusual on-the-job behavior of an individual student which:

a. is the type of behavior that is recognized as an accepted symptom or symptoms of intoxication or impairment caused by illegal drugs, legally prescribed drugs taken in unsafe quantities, or alcohol;

b. is not reasonably explained as resulting from causes other than the use of controlled substances.

3. Reports of illegal drug or alcohol usage or aberrant behavior by students, which are not confirmed by the firsthand observations of the Radiologic Technology instructor, shall not constitute reasonable suspicion

4. Other Behavioral Red Flags that can be identified are:

a. Frequently being late or absent from class and clinical experiences

b. Repeatedly leaving class early and/or taking excessive unscheduled breaks during class and clinical experiences

c. Late submission of assignments with peculiar or improbable excuses

d. Unsafe performance or use of poor judgment in the clinical area

e. Deteriorating class and clinical performance

f. Frequently leaving the clinical area

g. Avoiding peer, faculty, and group work

h. Smell of alcohol and marijuana, which may be masked by breath mints/ sprays, chewing gum, perfumes/colognes, Febreze, etc.

i. Slurred or rapid speech, sleepiness, nervousness, excessive giddiness or talkativeness

j. Pinpoint or dilated pupils, bloodshot or red eyes and inappropriate use of sunglasses

k. Erratic behaviors with verbal or physical outbursts or threats to harm self or others

l. Unsteady or staggering gait; fine motor tremors

Policy

A. Regulation of Alcohol and Illegal Drugs-The use or possession of alcohol or illegal drugs on any Washington Health System sites or any off-site clinical sites/agency is prohibited, as is being under the influence of alcohol or illegal drugs during class, clinical, and school activities.

B. Regulation of Legal Drugs – Students should be aware that the use of some prescriptions drugs, drugs not prescribed for them, and/or over-the-counter drugs may also affect their ability to properly perform their student roles and responsibilities. Therefore, the student has the responsibility to report medications prescribed or taken to the Radiologic Technology instructor and Employee Health.

C. A student may continue to attend class, clinical, and school activities while using a legal, prescribed medication, as long as this does not pose a threat to her/his own safety or the safety of patients, hospital employees, visitors, or other students and the student can perform the student roles, in the opinion of Employee Health.

Procedure for Faculty Intervention with the Chemically Impaired Radiologic Technology Student

A. Hospital Clinical Experiences

1. Because patient safety is paramount, the faculty member will remove the student from the clinical unit to a private area if signs of impaired behavior are observed. Inform the student of faculty responsibility to remove from clinical or classroom setting for “reasonable suspicion”.
2. Prompt reporting to the proper chain of command is vital. The Director, School of Radiologic Technology will be notified immediately. The student will be questioned by the Director, School of Radiologic Technology or a designated faculty member regarding the use of any substances, and if used, what, when, and how much was used and by what route it was taken. The sign(s) and/or behavior(s) observed will be discussed and the student will be given an opportunity to provide a verbal explanation.
3. If “Reasonable Suspicion” of substance abuse occurs, a search of the student’s personal belongings, such as book bags, purses, and locker, by Security officers, Director, School of Radiologic Technology, and/or the involved faculty member of Washington Health System is appropriate.

B. Other Experiences: Should an incident be reported to the Director, School of Radiologic Technology, by any individual, from class or any other clinical experience (i.e., community agencies, Information Systems practice/testing), the Director or an authorized designee will discuss the sign(s) and/or behavior(s) observed with the student and question the student regarding substance use. The Director, School of Radiologic Technology and hospital security will go together to the off-site location via hospital vehicle. The student will be given an opportunity to provide a verbal explanation. The student will be requested to sign the Employee Health’s’ Alcohol and Drug Policy Consent/Refusal form for drug testing.

C. If the student signs a consent form, the Director, School of Radiologic Technology or designated faculty member, and Security will escort the student directly, with no stops, to Employee Health for testing/assessment. If alcohol is the suspected substance used, Occupational Medicine must be notified so the student can be taken directly there for the assessment/testing screening to be performed. In circumstance, the Director, School of Radiologic Technology, or designated faculty member will remain with the student until the testing/assessment is completed.

D. If there is an incident of impaired behavior between the hours of 1600 to 0700 or on the weekend, the instructor will notify the Radiologic Technology Supervisor and then escort the student to the Emergency Department for assessment. There may be an additional stipulation that the student must report to Employee Health the next morning at 0700 for further testing.

E. The student will not be permitted to leave the Hospital site alone. A family member or friend must be called to escort and drive the student home. If the student refuses any of the previous options, and leaves the facility, Security will contact 911 and inform them that an impaired driver left the hospital. Student name and address, vehicle information, travel direction, and other information will be given. The call will be documented.

F. The involved faculty member will complete the form, Documentation of Impaired Behavior Form ((located in form section) II), which documents evidence of chemical impairment. Meticulous documentation of suspected behaviors is necessary. This form will then be submitted to the Director, School of Radiologic Technology, and Employee Health. All appropriate faculty members also involved with the student during that

semester on a “need to know” basis will be informed by the Director, School of Radiologic Technology. A copy of this report will be placed in the student’s file.

G. The student will be suspended from all class and clinical experiences until test results are received. A student with a negative result will be permitted to return to the school. A student with a positive result will remain on suspension pending the decision of the hearing.

H. The student will be informed by the Director, School of Radiologic Technology, of the results of the testing and the date of the panel hearing. The student does not attend the hearing.

Procedure for Hearing:

A. The hearing to determine if the student is chemically impaired will include an inquiry panel consisting of the Employee Assistance Program (EAP) Coordinator, the Employee Health Nurse, the Director of Human Resources, the Director, School of Radiologic Technology, and a faculty member not directly involved in the incident.

B. The student will be notified of the panel’s decision. Throughout this process, every effort will be made to protect the student’s privacy and confidentiality.

C. If the panel finds that the student is not chemically impaired, the student will be permitted to continue in the Radiologic Technology program and make-up assignments will be given. If it is determined that no violation has occurred, the documents will be removed from student’s file.

D. If the panel finds the student is chemically impaired, the student may either be designated as Program Dismissal Permanent (PDP) or required to take a voluntary leave of absence and enter a rehabilitation program monitored by EAP or PNAP. If it is determined there was policy violation and the student refuses interventions, the student will be permanently dismissed from program.

E. The EAP Coordinator will determine if a leave of absence and full-time rehabilitation program are necessary. The EAP Coordinator will also formulate a treatment plan. The academic consequences resulting from the chemical impairment identification will be explained to the student. If a full-time rehabilitation program is mandated, the student will not be permitted to attend clinical or classroom experiences in the Radiologic Technology course until the terms of the rehabilitation program are fulfilled. A semester grade of a W (withdrawal) will be assigned for these courses. Participation/return to school depends on completion of comprehensive chemical dependency evaluation, recommendation of evaluator, & agreement with treatment plan (if needed).

F. Upon completion of a full-time rehabilitation program as validated by the EAP or PNAP the student may submit a written request for reinstatement into the program. This request must be submitted to the Recruitment and Admissions Committee 12 weeks prior to the semester the student desires to return.

G. Students, who are mandated to attend an outpatient rehabilitation program, may be permitted to continue in the program if recommended by the EAP or PNAP Coordinator. The student must complete all required rehabilitation programs and EAP counseling, as well as providing monthly random drug screens. Additional monitoring through EAP or PNAP may be mandated. Failure to complete all the monitoring requirements may result in immediate program dismissal, permanent (PDP).

H. Should the student refuse to participate in a rehabilitation program, as determined by the EAP Counselor or PNAP, the student will be permanently dismissed (PDP) from the program. If additional chemical impairment occurs subsequent to implementation of these procedures, the student will be permanently dismissed (PDP) from the program.

I. Documentation of Impaired Behavior Form

This form is to be used to document the reasons for requesting that a student be asked to submit to an assessment and a drug or alcohol screening test. All questions that apply should be answered. Additional pages, if necessary, should be attached with any other relevant documents.

Student's Name: _____

Was there an incident? Yes No

Describe the event (include date and time, student's actions, and extent of any injury to any person(s) or property:

Is the student in a safety-sensitive position? Yes No

Observation of student Date: _____ Time: _____

Walking: *Falling *Holding On *Staggering *Stumbling *Swaying *Unsteady *Unable to Walk

Standing: *Feet Wide Apart *Rigid *Swaying *Sagging at Knees *Staggering *Unable to Stand

Speech: *Mute *Incoherent *Rambling *Shouting *Silent *Slobbering *Slow *Slurred *Whispering

Demeanor: *Calm *Cooperative *Crying *Fighting *Polite *Sarcastic *Silent *Sleepy *Talkative

*Excited

Actions: *Calm *Cooperative *Crying *Fighting *Hyperactive *Profane *Resisting Communications *Threatening

Eyes: *Bloodshot *Closed *Dilated *Droopy *Glassy *Watery

Face: *Flushed *Pale *Sweaty

Appearance/Clothing: *Bodily Excrement Stains on Clothing *Unruly *Having Odor *Messy *Neat *Dirty *Partially Dressed

Breath: *Alcohol Odor *Faint Alcohol Odor *No Alcohol Odor *Marijuana Odor *Faint Marijuana Odor *No Marijuana Odor

Movements: *Fumbling *Hyperactive *Jerky *Nervous *Normal *Slow

Eating/Chewing: *Candy *Gum *Mints *Nothing *Other: (list below)

History

To your knowledge, has the student signed an Alcohol and Drug Testing Agreement?

Yes No Don't Know

If Yes, when?

5. Performance Level

a. Has there been a recent change in the student's level of performance?

Yes No

b. If Yes, Describe

6. Other Observations:

7. Other Factors:

8. Student Signature: _____ Date:

9. Witnesses: _____ Date:
Instructor Name: _____ Date:

Signature

Witness: _____ Date:
Signature

Witness: _____ Date:
Signature

Washington Health System School of Radiologic Technology 2016-2018 Academic Calendar

****Subject to change****

Fall Semester 2016-15 Weeks (17 Clinical)

August 22	Classes Begin
September 5	Labor Day
November 23 – 28	Thanksgiving Break
November 30	Classes Resume
December 12 - 16	Term Week
December 19 - January 1	Break

Spring Semester 2017-15 Weeks (19 Clinical)

January 2	Clinicals Begins
January 23	Classes Begin
April 14	Good Friday - No Classes
May 8 - 12	Term Week
May 15 – 21	Break

Summer Semester 2017-10 Weeks (12 Clinical)

May 22	Clinicals Begin
May 22	Classes Begin
May 29	Memorial Day - No Classes
July 4	Independence Day Holiday- No Classes
August 13-20	Break

Fall Semester 2017-15 Weeks (17 Clinical)

August 21	Clinicals Begin
August 21	Classes Begin
September 4	Labor Day
November 22 – 27	Thanksgiving Break
November 29	Classes Resume
December 11 – 15	Term Week
December 18 - January 1	Break

Spring Semester 2018-15 Weeks (19 Clinical)

January 2	Clinical Begins
January 15	Classes Begin
March 30	Good Friday - No Classes
May 7-11	Term Week
May 14 – 20	Break

Summer Semester 2018-10 Weeks (11 Clinical)

May 21	Clinical Begins
May 21	Classes Begin
May 28	Memorial Day - No Classes
July 4	Independence Day Holiday- No Classes
August 1	Graduation/Commencement

****Please note the following are scheduled for 40 hour weeks****

8/22/2016, 1/2/2017, 1/9/2017, 1/16/2017, all summer session 2017, 1/2/2018, 1/8/2018, 1/15/2018, 4/30/2018, 8/20/2018, all summer session 2018

Washington Health System School of Radiologic Technology 2017-2019 Academic Calendar

****Subject to change****

Fall Semester 2017-15 Weeks (17 Clinical)

August 21	Clinicals Begin
August 21	Classes Begin
September 4	Labor Day
November 22 – 27	Thanksgiving Break
November 29	Classes Resume
December 11 – 15	Term Week
December 18 - January 1	Break

Spring Semester 2018-15 Weeks (19 Clinical)

January 2	Clinical Begins
January 15	Classes Begin
March 30	Good Friday - No Classes
May 7-11	Term Week
May 14 – 20	Break

Summer Semester 2018-10 Weeks (12 Clinical)

May 21	Clinical Begins
May 21	Classes Begin
May 28	Memorial Day - No Classes
July 4	Independence Day Holiday- No Classes
August 12-19	Break

Fall Semester 2018-15 Weeks (17 Clinical)

August 20	Clinicals Begin
August 20	Classes Begin
September 3	Labor Day
November 21 – 26	Thanksgiving Break
November 28	Classes Resume
December 10 – 14	Term Week
December 24 - January 1	Break

Spring Semester 2019-15 Weeks (19 Clinical)

January 2	Clinical Begins
January 14	Classes Begin
April 19	Good Friday - No Classes
May 6-10	Term Week
May 13-19	Break

Summer Semester 2019-10 Weeks (11 Clinical)

May 20	Clinical Begins
May 20	Classes Begin
May 27	Memorial Day - No Classes
July 4	Independence Day Holiday- No Classes
July 31	Graduation/Commencement

****Please note the following are scheduled for 40 hour weeks****

1/2/2018, 1/8/2018, 1/15/2018, 4/30/2018, 8/20/2018, all summer session 2018, 1/2/2019, 1/7/2019, 1/14/2019, 4/29/2019, all summer session 2019