Associate Degree of Applied Science Radiologic Technology

Student Handbook

Updated 07/2017
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Section VII: JRCERT Standards and Accreditation

Standard One: Integrity

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

Standard Two: Resources

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

Standard Three: Curriculum and Academic Practices

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

Standard Four: Health and Safety

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

Standard Five: Assessment

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

Standard Six: Institutional/Programmatic Data

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

Awarding, Maintaining, and Administering Accreditation
Section I: General Information

1.1 Welcome

Welcome to the Radiography Program at Randolph Community College. You are entering an exciting time in your life. This will be a time of learning, a time of personal growth and a time of perseverance. You won’t believe how fast the time will fly and soon, you will be ready to join the ranks as a Radiologic Technologist. Enjoy the journey!

Anna Phillips MS RT(R) (CT)…………………………..Radiography Department Head
Tami Goins BS RT(R) (CT)…………………………..Radiography Clinical Coordinator

This manual is intended to be a guide and reference for students throughout their educational experience in the RCC Radiography Program. Please utilize this handbook as well as the Randolph Community College Catalog, which can be found online at http://www.randolph.edu/curriculum-tools/catalog.html for more information and reinforcement of policies, regulations, and student services and information. Radiography students are expected to abide by all policies outlined in the above stated handbooks. Failure to do so may result in disciplinary action and/or dismissal from the Radiography Program.

Students should read the information contained here and review it often. Any questions you may have about the contents or other clinically related questions should be directed to your Clinical Instructor, the Clinical Coordinator or the Department Head. It should be noted, that all policies contained in this manual are at the discretion of program officials, and each issue will be handled on a case-by-case basis.

The impressions made on hospital and clinical staff members will follow the students after graduation as they seek employment. The students’ reputation will precede them and may be a help or hindrance in securing a job.

1.2 College and Program Officials

College President: ..............................................Dr. Robert S. Shackleford, Jr.
Vice President for Instructional Services: ......................Suzanne Rohrbaugh
Dean of Curriculum Programs: ................................Melinda Eudy
Health Sciences Division Chair: ................................Tina Dixon
Radiography Department Head: .................................Anna Phillips
Radiography Clinical Coordinator: ..............................Tami Goins

1.3 Adjunct Clinical/Didactic Instructors

Ashley Hayes, RT(R)
Charlotte Beck, RT (R)
Deborah Nitz, RT (R)
Jennifer Lowe RT (R)
Debbie Struz RT (R)
Tyler Ledbetter RT(R)
Celia King RT(R)(CT)
Candace Fox RT(R)(T)
1.4 Radiography Program Advisory Committee

The purpose of advisory committees is to assist RCC in establishing and maintaining up-to-date educational programs. Changes in technology, business, industry, and government have increased the need for effective communication between education and industry. An advisory committee of interested, competent, and concerned citizens is the most productive and effective method for involving the community in education. It is a vital link between the community, businesses, industry and the college. Specifically, the Radiography advisory committee is composed of distinguished members of our clinical affiliates. The Committee’s charge is to review the program and address any concerns and/or recommend changes. The Radiography Advisory Committee is consulted during any program change.

1.5 Faculty Responsibilities and Duties

The Radiography Department Head is a full-time faculty member who is responsible for the leadership and day-to-day operations of the Radiography Program to attain the goal of providing quality educational experiences for students. The Department Head for Radiography provides quality learning experiences, facilitates the learning process, advises and recruits students, seeks professional development opportunities, contributes to the development of curriculum courses/programs, interacts with community/industry members, and is responsible for equipment maintenance and inventory, facilities safety and security, textbook adoptions, new faculty selection and training, dosimetry tracking, program marketing, and analyzing the overall success of the Radiography Program. The Department Head reports to the Division Chair for Health Sciences and Cosmetic Arts, who reports to the Dean of Curriculum Programs, who reports to the Vice President for Instructional Services, who reports to the President of the College.

The Clinical Coordinator is a full-time faculty member who facilitates the scheduling of clinical sites and/or classes within the Radiography Program, maintains the relationship between the clinical sites and the College, recruits new clinical sites, provides quality learning experiences through classroom and clinical experiences, facilitates the learning process, advises students, seeks professional development opportunities, and contributes to the development of curriculum courses/programs. The Clinical Coordinator reports to the Department Head for Radiography.

The Radiography Adjunct Clinical/Didactic Instructors are part-time faculty members who serve to provide a quality clinical experience to the student. They assist the Clinical Coordinator in maintaining clinical relationships, in the recruitment of new clinical sites, and with coordinating the clinical education experience for the Radiography Program. Some of these faculty members may provide classroom instruction in addition to clinical education. They are responsible for instructing, evaluating, counseling, and documenting student performance. Adjunct Clinical faculty report to the Clinical Coordinator, then the Department Head, while Adjunct Didactic faculty report directly to the Department Head for Radiography.

In addition to program personnel, the clinical sites are equipped with clinical preceptors who are uncompensated and volunteer their expertise to enhance the clinical education experience for the student. The preceptors are employed by the clinical site and are the “go to” radiographer when a compensated clinical instructor is not onsite. This individual will ensure the student is in the correct location during clinical, provide site specific orientation, provide direct and indirect supervision, and provide clinical feedback through competency check off and daily verbal or written evaluation.

The Radiography Advisory Committee serves to ensure the program is accomplishing its goal of providing quality education and training in the Radiologic Sciences. This committee consists of members of our clinical
affiliates who have taken a special interest in the Radiography Program. The committee meets three times per year to discuss methods for program improvement.

1.6 Admissions

Admission to Randolph Community College is open door; however, admission to the Radiography program is a competitive process. For information on admissions, please contact the Department Head for Radiography or Rebekah Kingston at rbpkinston@randolph.edu or 336-633-0376. You may also visit the Radiography Web site at: http://www.randolph.edu/radiography-home.html, or refer to the current RCC catalog. Students wishing to transfer to the Radiography program from another institution should contact the Department Head for Radiography and see the transfer policy listed in this handbook.

1.7 Equal Opportunity

Randolph Community College offers equal employment and educational opportunities to all employees and students, without regard to race, color, religion, creed, national origin, political affiliation, gender, age, disability, medical condition, veteran status, and all other categories protected by federal, state, and local anti-discrimination laws. All inquiries and questions about Randolph Community College’s compliance with Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and/or the College’s Equal Opportunity Policy may be addressed to Equal Opportunity Officer and Title IX Coordinator, RCC, 629 Industrial Park Avenue, Asheboro, NC 27205.

1.8 Disabilities

Randolph Community College recognizes the barriers that confront disabled persons in access to education. RCC is an equal access institution that accommodates the needs of students with disabilities. Consistent with state and federal statutes which affirm and protect the equal opportunity rights of disabled persons, Randolph Community College will not tolerate conduct that displays hostility or aversion toward an individual because of that person’s race, color, religion, creed, national origin, political affiliation, gender, age, disability, medical condition, veteran status, and all other categories protected by federal, state, and local anti-discrimination laws.

Randolph Community College is committed to providing reasonable accommodations for all students with documented disabilities. Applicants with disabilities who wish to request accommodations in compliance with the Vocational Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 must identify themselves to the admissions counselor before placement testing. If you would like to receive a Request for Accommodation form, a copy of the College’s policy on accommodations for students with disabilities, or would like more information, the Disability Handbook is available online. New or currently enrolled students with disabilities who wish to request accommodations under ADA must contact the coordinator of students with disabilities at 336-633-0369 in sufficient time for the College to assist if necessary.

1.9 Technical Standards

Each student must exhibit the abilities and meet the expectations listed below. Please note this is not an exhaustive list.

Physical Requirements:
• Prior to acceptance into the Radiography program, students are required to submit a completed and signed NC Community College Medical Form documenting immunizations and medical history which show proof of physical and mental health to perform the duties of a radiologic technologist.

• Possess the visual acuity to effectively operate equipment and otherwise function in various degrees of ambient lighting and in various sizes of print.

• Possess adequate depth perception to transport/move patients.

• Must be able to stand, sit, or walk up to 10 hours per day with minimal break times.

• Must be physically able to lift, carry, push and manipulate heavy equipment, which is often above the radiographers head/shoulder level.

• Must be physically able to push, pull, or otherwise transfer patients weighing several hundred pounds.

• Must be physically able to transport patients via wheelchairs or stretchers.

• Possess gross and fine motor skills sufficient to provide safe patient care and operate equipment.

• Must be able to bend and squat.

• Must possess auditory ability sufficient to monitor and assess health needs without visual contact.

• Must be able to hear and visually monitor equipment to report any abnormal sounds or irregularities.

• Must possess sufficient visual ability for the observation, assessment, and implementation of patient care and imaging procedures.

• Must be able to monitor and evaluate patient vital signs including respiration rate, temperature, blood pressure, and pulse rate.

• Must be able to visually analyze images for brightness/contrast levels, distortion, and evidence of blurring.

• The radiography student may be exposed to radiation, communicable diseases and/or body fluids, toxic substances, medicinal preparations, and latex. Students shall use appropriate precautions at all times.

Analytical and Comprehension:

• Apply the principles of aseptic and sterile techniques, infection control, contrast administration, and proper body mechanics.

• Use critical thinking skills necessary to assess patients, appropriately respond to patient needs, adapt procedures to patient ability, and to solve problems.

• Quickly and accurately, comprehend and follow verbal instructions in English.

• Quickly and accurately, read, comprehend and follow written instructions in English.

• Evaluate and analyze image quality and exam completeness.

• Be able to use short and long-term memory.

• Perform mathematical calculations to accurately select technical factors, administer contrast media and other medications and assess patient data.

• Understand and correctly follow verbal instructions given face-to-face, over the phone, or from a distance, including those given in a setting where personnel are wearing surgical masks.

Emotional and Behavioral Skills:

• Expected to be honest and exhibit a high level of integrity in all situations.

• Expected to adhere to the ARRT/ASRT Code of Ethics and Rules of Ethics.

• Expected to be on time and dressed appropriately.

• Expected to work in groups and individually.

• Expected to conduct him/herself in an adult manner.

• Maintain mental alertness.
• Possess emotional stability sufficient to respond appropriately to constructive criticism, emergency and stressful situations.

Communication Skills:
• Must have adequate hearing and speech to communicate orally with patients and other members of the health care team in face-to-face and telephone situations.
• Must be able to write legibly and be able to type sufficiently in order to record patient history, lab values, reports and document in medical records.
• Must be able to read at a level sufficient to accurately read and understand medical records, physician orders, procedure manuals, technique charts, electronic data, and textbooks.

1.10 Program Costs

Tuition and Activity Fees
Students should refer to the college catalog for up to date tuition and fees information, or contact the RCC Business Office. Students are also required to attend, and pay for a registry review seminar in their final semester. Students are required to purchase textbooks and other course materials for the Radiography Program. The prices will vary by semester so you will need to check with the campus store for a complete listing. You may view their website: (http://www.randolph.edu/the-campus-store.html). Students are required to purchase uniforms for clinical as well as lead markers with their initials. It is recommended that students purchase a minimum of two sets of uniforms and two sets of lead markers. See the Clinical section for further details. Fees are associated with this process.

Students will be required to subscribe to the ASRT Radiologic Technology journal as part of clinical. For current cost of membership, please refer to the website listed below. Membership to the ASRT will include the journals. For more information, please visit the ASRT website: http://www.asrt.org/membership/join-asrt/membership-categories/student-membership

Physical Exam and Immunizations
Upon receiving official acceptance, students are required to complete immunizations, a physical exam, and background check and drug screen, at their expense. Students are required to have an up to date healthcare provider CPR certification through the American Heart Association. CPR certification and immunizations must be maintained at the expense of the student for the duration of the program, or students will not be permitted to attend clinical. Students will forfeit their seat in the program if these requirements are not met by the deadline specified.

Criminal Background Checks and Drug Screening
Randolph Community College does not administer drug screening or require criminal background checks. However, due to clinical facility requirements, all students will complete the CBC/DS during the PHASE II
admissions process. Results of the CBC/DS will be sent to the student’s clinical site. Some clinical sites may require the student to complete an additional background check and or drug screen.

Any student who is denied entry into a clinical site due to the background check or drug screen will be dismissed from the program. Students who are suspected of using any narcotic drug, alcoholic beverage or any other controlled substance (as controlled substance is defined by the N. C. General Statues) while in class or clinical will be required to complete an additional drug screen at their own expense. Any drug or alcohol use during class or clinical will result in immediate dismissal.

**Student Accident Insurance**

Students are covered by accidental insurance, which is paid as part of tuition.

**Professional Liability Insurance**

All students in the Allied Health programs are required to carry malpractice insurance through the group policy offered at the College. Fees are associated, and paid with the student’s tuition.

### 1.11 Student Organization

Potential and current radiography students have the opportunity to participate in the Rad Club. This is a student organization whose main purpose is to disperse information concerning career options with the radiography field, Standards of ARRT, and radiation protection.

**Objectives**

a) Provide academic support for radiography courses and common courses  
b) Educate the public about the importance of licensing and certification in the radiography field  
c) Participate in community activities to strengthen the club and the community

For more information about the Radiography Club, please contact the club advisor and refer to the RAD club bylaws.

**Club Advisor**

The Radiography Club shall be advised by the Department Head for Radiography: Anna Phillips, MSRS, RT (R) (CT)  
(336)-633-0209  
anphillips@randolph.edu

### 1.12 Work Study Student Opportunity

The Radiography Program has requested a work-study student position. The availability of this opportunity is based on funding, so if there is not appropriate funding for that term the position will not be available. The duties of this position include assisting the instructors with filing, typing, film sorting, and lab setup. It is desirable that the person filling this position must be a Radiography student. While in this position, you are to maintain complete confidentiality of all materials viewed. Any breach of confidentiality will result in your termination from the work-study position and dismissal from the radiography program. The work-
study must submit a signed copy of the confidentiality agreement prior to their first day of work. If you are interested in this position, please contact the Department Head.

1.13 Financial Aid/Refunds


1.14 Grade Scale

Letter symbols are used in the evaluation of achievement in all programs. Grade points are assigned to letter grades in computing grade point averages. Grade point averages are determined by dividing total quality points earned by total credit hours attempted. Cumulative grade point averages are determined by dividing total quality points by total credit hours attempted for a period of more than one semester.

The following grading system is used by Randolph Community College:

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<th>Grade Point Value</th>
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<tbody>
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<td>94 – 100</td>
</tr>
<tr>
<td>A-</td>
<td>90-93</td>
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<tr>
<td>B+</td>
<td>87 – 89</td>
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<tr>
<td>B</td>
<td>83-86</td>
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<tr>
<td>B-</td>
<td>80-82</td>
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<td>WF</td>
<td>Stopped Attending</td>
</tr>
</tbody>
</table>

Additional Letter Symbols (Not computed in GPA)

<table>
<thead>
<tr>
<th>Letter</th>
<th>Description</th>
<th>Grade Point Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Incomplete</td>
<td>0.0</td>
</tr>
<tr>
<td>AU</td>
<td>Audit</td>
<td>0.0</td>
</tr>
<tr>
<td>TR</td>
<td>Transfer Credit</td>
<td>0.0</td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal Without Penalty</td>
<td>0.0</td>
</tr>
<tr>
<td>NS</td>
<td>No Show</td>
<td>0.0</td>
</tr>
<tr>
<td>AW</td>
<td>Administrative Withdrawal</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Letter grades with an (*) are not counted in computing GPA or in the hours earned for completion of a program. **Students must obtain a grade of “C+” or better in all RAD courses, BIO 163, ENG 111, ENG 114, PHI 240, PHY 121, and PSY 150 in order to progress in the Radiography program.**

**Students who choose to take BIO 168 and BIO 169 instead of BIO 163 will receive credit for BIO 163 if they earn a “C+” or better in both classes.**
Grade Point Average

The college computes grade point average (GPA) by adding the quality points earned for each course in which an “A-,” “B+,” “B,” “B-,” “C+,” “C,” “C-,” “D+,” “D,” “D-,” “F” or “WF” are received, excluding developmental studies courses (courses numbered less than 100), and dividing by the total number of credit hours for those courses.

Grade Reports

Grade reports are issued to students each semester, provided their credentials and financial obligations to the College are in order. Official grade reports will be posted to each student account by the college. No grades may be given over the phone or by fax.

1.15 Graduation Requirements

1. Students must complete all required courses within their curriculum as published in the RCC Catalog at the time of their initial enrollment.
2. Radiography students must earn a "C+" or greater in all courses required for the program.
3. All curriculum classes must be completed by the semester specified in the College Catalog. Failure to do so will result in dismissal.
4. The Program Director will verify program completion to the ARRT to permit examination results to be released once the student graduates from the program.
5. Student must meet and follow graduation requirements as outlined in the RCC Catalog and on the college’s website: http://www.randolph.edu/curriculum-tools/academic-policies/graduation-requirements.html
6. Radiography students are expected to participate in the Pinning Ceremony.
7. Radiography students are expected to participate in the RCC Graduation Ceremony.

1.16 Class Pinning Ceremony

The purpose of the Class Pinning Ceremony is to express appreciation to the student’s family for their continued support during the student’s college career.

Graduating students are expected to be part of the program Pinning Ceremony held after the 5th semester of enrollment.

The class president will be responsible for ordering the pins for the Ceremony, and submitting decisions regarding the Pinning Ceremony to the Department Head of Radiography. All decisions concerning the Pinning Ceremony must be approved through the Department Head.

First level RAD students are required to attend the pinning ceremony. First level students are required to assist with set up prior to the ceremony and clean up following the ceremony. Students who do not attend the pinning ceremony will be assigned 6 violation points. The pinning ceremony is typically the second Monday night in May, although this date may be subject to change.

All students are required to dress professionally for the ceremony. Any apparel, which is deemed inappropriate by a College official, will result in the student forfeiting their opportunity to participate in pinning.
The Administrative Assistant for Health Sciences is responsible for inviting the Board of Trustees, RCC staff and faculty and affiliate agencies to the Pinning Ceremony.

1.17 Program Improvement

Exit Interview: Students successfully completing the five semesters of the Radiography Program will be asked to complete a questionnaire and return it to the Program Director. Questions will be related to your level of satisfaction with the program. Suggestions and comments will be used to further improve the program for future Radiography students.

Registry Scores: The information provided by the ARRT score analysis can be of assistance to the radiography curriculum and future students by providing insight on program strengths and weaknesses. Graduates will be asked to sign a release statement on the registry examination, which will provide section scores to their alma mater. Please consider granting this permission.

1.18 ARRT Certification Examination

Upon successful completion of the Radiography Program, the student will be eligible to apply to take the American Registry of Radiologic Technologists certification exam. The application will be submitted in the last semester of study. Graduation from the radiography program does not guarantee that a student will be permitted to sit for the exam. Students must pass an ethics review conducted by the ARRT. Information in regards to that process can be viewed via this link: https://www.arrt.org/pdfs/Ethics/Ethics-Review-Pre-Application.pdf. Please see the Department Head for Radiography if you have questions. Fees are associated with this process.

Students will be required to pass a mock registry exam during their final semester in the program before the Department Head will sign the ARRT application.

Program Director’s signature on the ARRT application expires 3 months from the signature date. Students who allow the application to expire will need to contact the Program Director. The student will need to pass a mock registry before the Program Director will sign the ARRT application. Testing will be at the expense of the student. Please see the Department Head for Radiography for additional details. This process is subject to fees.

The ARRT provides the student 3 years and 3 attempts to complete the certification exam. However, students waiting 6 months or longer to take them exam will be required to pass a mock registry exam and a simulated lab exam. Exam costs will be required of the student. Students who are not successful will be required to complete additional remediation on their own and at their expense.

In order to increase the likelihood of your success on the ARRT certification examination, the program requires students to attend a program approved registry review seminar in their final semester. Students are responsible for the cost of attending the seminar.

1.19 Points of Contact

Inquiries for specific information about the College should be addressed to the following people or departments at RCC. The mailing address is Randolph Community College, 629 Industrial Park Avenue, Asheboro NC 27205. The main phone number is 336-633-0200. Visit RCC’s Web site at the following address: www.randolph.edu.
Radiography Faculty

Anna Phillips, Department Head for Radiography; 336-633-0209; anphillips@randolph.edu

Tami Goins, Clinical Coordinator; 336-633-0128; tmgoins@randolph.edu

Division Chair for Health Sciences

Tina Dixon, 336-633-0270; tsdixon@randolph.edu

Student Services Counselor- Health Sciences Admissions Specialist

Rebekah Kingston; 336-633-0376; rbkingston@randolph.edu

Health Sciences and Cosmetic Arts Administrative Assistant

Angela Bare; 336-633-0264; arbare@randolph.edu

Records, Registration & Admissions

Brandi F. Hagerman - Director of Enrollment Management/Registrar – Registration and Graduation Information; 633-0213; bfhagerman@randolph.edu

Lynn P. Brady - Assistant to Director of Enrollment Management/Registrar – Requests for Transcripts, Grades; 633-0225; lpbrady@randolph.edu

Ann Smith or Deanna Schrader, Admissions Records Technicians – Requests for Records; 633-0239; masmith@randolph.edu or dlshrader@randolph.edu

Financial Aid & Veterans Affairs

Joel Trogdon- Assistant Director of Financial Aid & Veterans Affairs – Scholarships, Work-Study Jobs, Grants, Loans, VA Benefits, Child-Care Grant; 633-5614; jbtrogdon@randolph.edu

Cathy D. Aikens - Financial Aid Specialist/VA Certifying Official; 633-0308; cdaikens@randolph.edu

Student Success Center

G. Chad Williams –Vice President for Student Services; 633-0049; gcwilliams@randolph.edu

Rebekah Kingston- Student Services Counselor; 336-633-0376; rbkingston@randolph.edu

Susie Scott - Student Services Counselor and Coordinator of Students with Disabilities – Request for Accommodations/ Tutoring; 633-0369; sascott@randolph.edu

Tammy Cheek- Student Services Counselor and Title IX coordinator, Sexual discrimination- 336-633-0246; twcheek@randolph.edu
Instructional Programs

Suzanne Rohrbaugh - Vice President for Instructional Services – Information on Coordination of Educational Programs, Collaborative Agreements, Educational Partnerships; Information on Credit Courses of Study, Correspondence Regarding Curriculum; 633-0227; syrohrbaugh@randolph.edu

Melinda A. Eudy - Dean of Curriculum Programs; 633-0227; maeudy@randolph.edu

Library Services

Deborah S. Luck - Dean of Library Services – General Library Services, LRC Student Computer Lab; 633-0272; dsluck@randolph.edu

Business Matters

Susan I. Rice - Director of Financial Services/Controller – Information on Business Affairs, Fees, Financial Arrangements, Purchasing; 633-0282; sirice@randolph.edu

Distance Education

Devin Sova - Director Distance Education; 336-318-7820; dasova@randolph.edu
Section II: Assessment

2.1 Mission Statements

RCC Mission Statement:

To provide educational and training opportunities that make a positive change in the lives of students and the community.

RCC Vision Statement:

To be the premier educational resource for helping the people of Randolph County achieve their career goals and personal dreams.

RCC Radiography Program Mission Statement:

To provide quality education and training to students enrolled in the Radiography program at Randolph Community College, providing the skills necessary to be technically competent, ethical, and compassionate imaging professionals.

Updated: 6/28/16

2.2 Assessment Plan

Assessment is the systematic collection, review, and use of information to improve student learning and educational quality. An assessment plan helps assure continuous improvement and accountability.

Radiography Assessment Plan for Fall of 2016-Summer of 2017

GOAL 1: Students will demonstrate clinical competence.

<table>
<thead>
<tr>
<th>STUDENT LEARNING OUTCOMES</th>
<th>MEASUREMENT TOOL</th>
<th>BENCHMARK</th>
<th>TIMEFRAME/RESPONSIBLE PARTY</th>
</tr>
</thead>
</table>
| 1. Students will demonstrate the ability to position patients to produce diagnostic images | a. self-evaluation (Performs procedures accurately and thoroughly in accordance with department protocol) 
  b. student performance evaluation (late April-early May of 5th semester). Procedures Objectives section, question # 4 (Completes the needed projection and position of the patient with technical accuracy to best demonstrate the anatomy of interest (ie. angles tube correctly, detents, positions correctly, etc.).) | a. Students will score “satisfactory” or above 
  b. students will score “At the level of expectations or above” | a. 1st Year-spring semester Clinical Coordinator 
  b. 2nd Year-spring semester Clinical Coordinator and Clinical Instructor |
| 2. Students will provide appropriate | a. self-evaluation (Assures patient safety at all times) | a. Students will score “satisfactory” | a. 1st Year-spring semester Clinical Coordinator |
GOAL 2: Students will learn to think critically and how to apply problem solving strategies.

<table>
<thead>
<tr>
<th>STUDENT LEARNING OUTCOMES</th>
<th>MEASUREMENT TOOL</th>
<th>BENCHMARK</th>
<th>TIMEFRAME/RESPONSIBLE PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Students will demonstrate the ability to modify standard positioning techniques.</td>
<td>a. self-evaluation (Is able to use critical thinking skills in order to perform non-routine exams)</td>
<td>a. Students will score “satisfactory” or above</td>
<td>a. 1st Year-spring semester Clinical Coordinator</td>
</tr>
<tr>
<td></td>
<td>b. student performance evaluation, (late April-early May of 5th semester). Critical Thinking skills section, question # 1.</td>
<td>b. students will score “At the level of expectations or above”</td>
<td>b. 2nd Year-spring semester Clinical Coordinator and Clinical Instructor</td>
</tr>
<tr>
<td></td>
<td>(Promptly evaluates clinical situation and responds appropriately, such as assessing patient's physical limitations which impact how procedures are performed)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. student performance evaluation, (late April-early May of 5th semester). Critical Thinking skills section, question # 3 (Student is able to formulate equipment and positioning modifications which must be made during an unusual case)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Students will recognize imaging errors.</td>
<td>a. self-evaluation (Can accurately critique images for quality)</td>
<td>a. Students will score “satisfactory” or above</td>
<td>a. 1st Year-spring semester Clinical Coordinator</td>
</tr>
<tr>
<td></td>
<td>b. Student performance evaluation (late April-early May of 5th semester). Technical Skills section, question # 10 (Evaluate the completed image for acceptable quality to include: a. Anatomical demonstration b. Alignment c. Radiographic brightness and contrast d. Image identification e. Visibility and correct placement of lead markers f. Visibility of radiation protection such as collimation and shielding.)</td>
<td>b. students will score “At the level of expectations or above”</td>
<td>b. 2nd Year-spring semester Clinical Coordinator and Clinical Instructor</td>
</tr>
</tbody>
</table>

GOAL 3: Students will model professionalism.

<table>
<thead>
<tr>
<th>STUDENT LEARNING OUTCOMES</th>
<th>MEASUREMENT TOOL</th>
<th>BENCHMARK</th>
<th>TIMEFRAME/RESPONSIBLE PARTY</th>
</tr>
</thead>
</table>

17 Radiography
1. Students will demonstrate professional behaviors.
   a. self-evaluation (Displays initiative to do exams, assist techs, assist patients, etc.)
   b. Student performance evaluation (late April-early May of 2nd semester), professionalism section, question # 1 (Shows initiative by consistently volunteering to perform or assist to perform procedures without being asked)
   a. Students will score “satisfactory” or above
   b. students will score “At the level of expectations or above”
   a. 1st Year-spring semester
   Clinical Coordinator
   b. 2nd Year-spring semester
   Clinical Coordinator and Clinical Instructor

2. Students are able to receive constructive criticism and respond in a professional manner.
   a. self-evaluation (Consistently displays respectful and cooperative attitude toward patients, staff, instructors and fellow students)
   b. Student performance evaluation, (late April-early May of 2nd semester), professionalism section, question # 6 (Makes needed corrections in skill or behavior as a result of constructive criticism).
   a. Students will score “satisfactory” or above
   b. students will score “At the level of expectations or above”
   a. 1st Year-spring semester
   Clinical Coordinator
   b. 2nd Year-spring semester
   Clinical Coordinator and Clinical Instructor

GOAL 4: Students will communicate proficiently.

<table>
<thead>
<tr>
<th>STUDENT LEARNING OUTCOMES</th>
<th>MEASUREMENT TOOL</th>
<th>BENCHMARK</th>
<th>TIMEFRAME/RESPONSIBLE PARTY</th>
</tr>
</thead>
</table>
| 1. Students will use appropriate oral communication with patients. | a. self-evaluation (Communicates with patients, family, techs, physicians, staff, instructors and other students in appropriate and professional manner.) b. Student performance evaluation, (late April-early May of 2nd semester) communication skills section, question # 2. (Properly instructs and explains procedure to patient during exams, using clear, simple, age appropriate language that is understandable on the patient's level). | a. Students will score “satisfactory” or above b. students will score “At the level of expectations or above” | a. 1st Year-spring semester
Clinical Coordinator
b. 2nd Year-spring semester
Clinical Coordinator and Clinical Instructor |

| 2. Students will accurately collect and | a. self-evaluation (Obtains appropriate patient history) | a. Students will score | a. 1st Year-spring semester
Clinical Coordinator |
b. 2nd Year-spring semester  
Clinical Coordinator and Clinical Instructor

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>MEASUREMENT TOOL</th>
<th>BENCHMARK</th>
<th>TIMEFRAME/ RESPONSIBLE PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Students will achieve a passing score on the ARRT certification exam.</td>
<td>a. Scoring results from the ARRT</td>
<td>a. graduates will obtain a scaled score or 75 or higher on the ARRT certification examination.</td>
<td>a. within 6 months post-graduation Program Director</td>
</tr>
<tr>
<td>2. Enrolled students will complete the program within 150% of the stated program length. (Program length is 5 semesters).</td>
<td>a. Datatel student records</td>
<td>a. students will complete within 150% of stated program length. Program start date is November 1st of their first semester.</td>
<td>a.150% of the stated program length. (Program length is 5 semesters). Program Director</td>
</tr>
<tr>
<td>3. Students who are seeking employment will be employed within 12 months of graduation</td>
<td>a. Graduate survey</td>
<td>a. graduates will have at least PRN employment or will continue their education.</td>
<td>a. 12 months post-graduation Program Director</td>
</tr>
<tr>
<td>4. Graduates will be satisfied with the quality of their radiography education.</td>
<td>a. Graduate survey</td>
<td>a graduates will be satisfied with the quality of their education.</td>
<td>a. 6 months post-graduation Program Director</td>
</tr>
<tr>
<td>5. Employers will be satisfied with the performance of the program’s graduates.</td>
<td>a. employer survey</td>
<td>a. employers will be satisfied with the performance of the program’s graduates.</td>
<td>a. 12 months after graduation Program Director</td>
</tr>
</tbody>
</table>

*Updated: 6/23/2017*
Section III: General Policies

3.1 Student Dismissal from Radiography Program

Dismissal from the Radiography Program can occur for several reasons. A student who scores a final course grade below 77% in a Radiography course cannot remain in the program. A student who is not successful in a clinical course, scoring below 77% cannot continue in the Radiography Program. A student who violates the Student Code of Conduct, The ARRT Code of Ethics or Rules of Ethics, reaches 10 violation points by violating policies contained in the RAD Student Handbook, policies in the Radiation Safety Manual, or by violations obtained at clinical, or is dishonest academically in any way, can be dismissed from the Radiography Program. This is not an exhaustive list of dismissible violations. Each case will be handled on a case-by-case basis.

Students are expected to know and follow all guidelines outlined in the Radiography Student Handbook, as well as the regulations in the RCC Catalog. More specific information in regards to clinical policies are discussed in individual site orientations, and students are expected to know and follow the clinical sites rules and regulations. A student may also withdraw for personal or medical reasons. Students who wish to withdraw from the program must meet with the Department Head for Radiography to fill out the appropriate paperwork.

3.2 Readmission to the Radiography Program

Students who are unsuccessful due to academic reasons or who withdraw for personal reasons from the Radiography Program can apply for readmission for the following year. Students are granted one opportunity for readmission. Students who are dismissed from the program due to a behavioral issue will not be permitted to reapply. The student must follow the guidelines for admission and continue to maintain a 2.5 GPA. The student may be eligible for one of the admissions options listed below.

Option 1:
If the student is unsuccessful in their first fall, spring, or summer semesters, they must repeat the entire admissions process. They will be readmitted if they are one of the top candidates according to the admissions ranking sheet.

Option 2:
If the student is unsuccessful in their 2nd fall or 2nd spring semester:
- apply for readmission
- must have maintained a 2.5 GPA
- the student will be required to pass a written and laboratory skills test
- Testing must be completed within one year after dismissal
- If both exams are passed, the student will reenter the program as a second level student in the fall semester, if there is clinical space
- It is the student’s responsibility to initiate the re-admission process and to schedule testing with the Department Head for Radiography.
- The student will be required to re-complete the background check and drug screen
- All immunizations and CPR requirements must be up-to-date

Students eligible for option 2 will only be permitted one opportunity to pass the written and lab exams. If the student is unsuccessful on either exam, the student may be eligible for option 1, if they have met the admission requirements as outlined in the current college catalog.

Updated 5/22/14
3.3 Transfer Students

Students wishing to transfer into the radiography program must follow the processes outlined below according to status. Out of state transfers are not accepted.

In state status students:
- admission is based on clinical availability
- The student must initiate the admission process and schedule a meeting with the Radiography department head
- Meet all admissions requirements for the college and the Radiography program as posted in the college catalog
- Submit a letter from their current radiography program director stating they left their current program in good academic and behavioral standing
- Any student dismissed from their current program for behavioral issues will not be eligible for admission
- The student will be required to complete a background check and drug screen through the RCC provider at their expense
- All immunizations and CPR requirements must be up-to-date
- the student will be required to pass a written and laboratory skills test

Created: 5/22/14; updated 9/15/15

3.4 Academic Integrity

According to the Academic integrity policy as stated in the College Catalog, violations to the Academic Integrity Policy include, but are not limited to:

Cheating
- The taking or acquiring possession of any academic material from another without permission
- Receiving or giving help during tests, quizzes, or other assignments (in or out of class if prohibited by the instructor)
- Copying or attempting to copy another person’s test, quiz, or other assignment
- Allowing another to copy one’s test, quiz, or other assignment
- Unauthorized use of materials or electronic devices during a test
- The intentional communication with another student on specific questions of a quiz/test/exam prior to that student taking said quiz/test/exam
- Taking a quiz/test for another student
- Paying another person to write or edit a term paper
- Submission of a term paper or assignment in more than one class unless approved in advance by the instructor

Plagiarism – the use of another’s original words or ideas as though they were your own
- Turning in another’s work as one’s own
- Copying a phrase, sentence, or passage from another person or source (Internet, print media, etc.) without proper citation
- Failing to put a quotation in quotation marks
- Giving incorrect information about the source of a quotation
- Copying so many words or ideas from a source that it makes up the majority of one’s work, whether one gives credit or not
- Downloading or buying a term paper from the Internet and submitting it as one’s own work
Please note that the list of examples above is not exhaustive. There may be other instances of cheating and/or plagiarism that would violate this policy.

All assignments, tests, quizzes, reports, projects, etc., are to be done individually unless otherwise specified by the course instructor. Reports of suspected academic dishonesty and/or violations of the academic integrity policy will be investigated by the program. The student may be suspended or placed on probation during the investigation. If evidence supports the fact that a violation has occurred, that student will be subjected to a minimum of violation points, and possible immediate dismissal from the program without a verbal or written for a first offence. Students who come forward to disclose information in regards to academic dishonesty and/or violations of the academic integrity policy may not be subjected to the same disciplinary action as others involved. This will be at the discretion of the Department Head and/or Clinical Coordinator.

Students dismissed from the program due to such behavior are not eligible for readmission to the program.

3.5 Professional Conduct

The Radiography program at Randolph Community College is committed to producing radiographers who will provide the highest quality of care to their patients. While you are a student in this program, you will be expected to conduct yourself in a professional manner at all times. You represent the RCC Radiography Program on the school campus, in the Radiology Department on clinical site property, and in any other situation where you might be identified as an RCC student. You will be accountable for your own behavior no matter how others may behave. You will abide by the American Registry of Radiologic Technologist’s (ARRT’s) Code of Ethics and Rules of Ethics.

You are to treat all individuals with respect. You must understand that you are a student, and while you may be an adult, you must follow instructions without questioning the decision of the Technologist or Instructor. If you have any concerns, you are to follow the program’s grievance policy. This policy is not only for a grievance issue, but provides the student with an avenue to address any type of concern.

You will be an integral part of the healthcare community. The function of the Radiology Department is to provide the patient with diagnostic and/or interventional services and excellent care. To do this, everyone working in the department, including students, must keep in mind that everything that is said or done within the department can impact patient care.

In spite of these expectations, some students may not always act in a professional manner while in any situation where you might be identified as an RCC student. Unprofessional behavior will be addressed immediately. Infractions can range from minor to severe and carry appropriate disciplinary consequences. Major infractions may result in immediate dismissal from the Radiography Program.

3.6 Disciplinary Plan of Action

The course of disciplinary action usually follows as outlined, but depending on the gravity of the infraction, the student may be removed from the Program temporarily until a decision is made as to the outcome of the incident. The RAD student handbook, RCC college catalog, your course syllabi serve, clinical orientation packets, the program’s clinical orientation, and the program’s new student orientation serve as your official verbal warning.

1. WARNING
The student is given a formal warning regarding behavior as a first step and the action needed to correct behavior is explained to the student. The instructor documents the warning on the Student Coaching Report form. The instructor will notify and submit the Student Coaching Report to the Clinical Coordinator and/or Department Head immediately. Depending on the situation, violation points may or may not be charged. In some cases, adjunct instructors may not be aware of repeated offences, therefore the Clinical Coordinator or Department Head may elevate a warning to a written reprimand.

2. **WRITTEN REPRIMAND**

The student receives a written warning, given additional violation points and is placed on probation as a result of repeated violations of program and or RCC policies. The student will meet with the Department Head as specified in the probation letter to track the offense. If the offense is repeated, the result is dismissal from the Program.

   A. The instructor must document the incident and both the student and the instructor will sign. The signature of the student signifies that the student has seen the written document.
   
   B. The student must leave class, lab, or clinical setting and must report to the Department Head before returning to class, lab, or clinical. **If the student refuses, security will be called to remove the student. This will result in immediate dismissal.**
   
   C. The instructor will notify the Clinical Coordinator and/or Department Head immediately. A Student Coaching Report will be submitted.
   
   D. The Clinical Coordinator and/or Department Head will investigate the situation. During this time, the student will not be allowed to attend class, lab, or clinical.
   
   E. An appointment will be scheduled with the Clinical Coordinator and/or Department Head to occur within three business days of the incident. If the student fails to attend the meeting, the program will automatically dismiss the student.
   
   F. Within 7 calendar days of meeting with the Clinical Coordinator and/or Department Head, an action plan and timeline for corrective action and length of probation will be established and shared with the student. The student must not violate any policies, or dismissal may result
   
   G. In severe cases, the Division Chair of Health Sciences and Cosmetic Arts will be notified of incident and its outcome.
   
   H. The student may appeal this decision using the Student Grievance Policy as outlined below.

Other action may be taken, ad lib, as directed by any member of RCC’s Senior Leadership team.

3.7 **Student Grievance Policy**

Students will be supervised, observed, critiqued, and guided in the classroom by RCC Faculty or Adjunct Faculty each semester. A student who has a grievance of any kind should see the following individuals in the given order. The student must discuss his/her grievance with the individual beginning with Level 1. If the result of the discussion is not satisfactory, then the student can proceed to the next level. If the grievance occurs at the clinical site, and the grievance reaches Level 2, the student should contact the Clinical Coordinator. The student must initiate the grievance process within 3 days of the incident.

   Level 1: Instructor, supervisor, or preceptor
   
   Level 2: Department Head/Clinical Coordinator
   
   Level 3: Division Chair of Health Sciences and Cosmetic Arts

*Beyond Level 3, please refer to the Grievance Policy in the RCC Catalog.

Each conflict will be assessed on an individual basis and individual situation with each student and/or
appropriate staff or faculty member. It should be noted that Radiography faculty take a holistic approach to student learning and may enlist the assistance of other faculty when deemed appropriate.

If the grievance pertains to a charge of sexual harassment, then the student may go directly to the vice president for student services rather than to the offending person.

Documentation must occur at all levels, from student to level where resolution occurred. This is to be filed in the Program Director’s office. Please refer to the RCC Catalog and www.randolph.edu for additional information. The Program will make every effort to come to a resolution within 7 days of the student’s initiation of the grievance process. This period may be exceeded if more information is needed. If the grievance goes beyond Level 3 then the period will be as listed in the RCC catalog.

Updated 17/14/17

3.8 Disciplinary Infractions

The program has adopted the policy of assigning violation points to disciplinary infractions. Violation points are scaled from 1-10, 1 being assigned to very minor infractions and 10 the most severe. Violation points are cumulative throughout the program and can be assigned for violation of any RCC Program policy (class and clinical). All situations will be investigated, and violation points will be assigned based on information gathered from the investigation, the level of the student, and the severity of the violation.

Some behaviors/violations are considered severe and will result in the student being charged with 10 points on the first offense. Student’s reaching 10 points will be immediately dismissed from the RCC Radiography program.

**Students who receive 5 violation points will be placed on clinical probation.** Length of probation will be determined by the Clinical Coordinator and/or Program Director. Probation will be documented in writing and a copy will be given to the student.

The list of actions below outline behaviors which will begin the disciplinary process. *Note: that every situation cannot be anticipated or listed, therefore, other actions not listed here may also begin the disciplinary process.* Students should also refer to the Clinical section of this handbook, the RCC Catalog, and each respective class syllabus for specific policies.

Examples of severe violations that will warrant an automatic assignment of 10 violation points (resulting in immediate dismissal from the program) are as follows:

1. Any violation of the ARRT Standards of Ethics.
2. Violence or threat of violence to oneself or others
3. Violation of RCC weapon policy
4. Unsafe clinical practice
5. Deliberate damaging or mishandling of equipment in classroom, lab, or clinical setting
6. Use, purchase, distribution, or possession of alcohol and/or controlled substance prior to or during any function where you are identified as an RCC student.
7. Theft of any item or receipt of stolen items from the hospital, employees of the hospital, fellow students, visitors, or employees of Randolph Community College
8. Lying or falsifying documentation including times, patients, records, or any other written or oral information
9. Defiant or non-cooperative behavior with clinical or college affiliates. For example, refusing to follow instructions, refusing to do an examination, exhibiting behavior that obstructs the learning environment, and other behaviors as defined by the Clinical Coordinator or Department Head.
10. Sleeping at the clinical site.
11. Performing radiographs, or any use of ionizing radiation, without direct or indirect supervision.
12. Repeating radiographs without permission and direct supervision from a supervising technologist, preceptor, or clinical instructor
13. Use of the radiography lab to take radiographs of any kind without direct supervision of an RCC employed registered radiologic technologist.
15. Any violation of OSHA or HIPAA regulations
16. Conviction of criminal or civil law
17. Engaging in behavior which may result in the clinical site requesting removal of the student from the clinical rotation.
18. Any type of unprofessional behavior
19. Violation of RCCs sexual harassment policy
20. Violations of civility (e.g., rude, disrespectful, lewd, indecent, or offensive conduct or apparel)
21. Mental, physical, psychological, cyber or verbal abuse.
22. Any violations of RCC’s student conduct and zero tolerance policy.
23. Obtaining multiple violations of any RCC and/or Radiography program violation

Some violations are considered less severe, and may only warrant the student a warning. Students may receive 0-5 violation points for the first infraction. However, if that student continues to violate policies, regardless if the violations are different, they will be subject to additional violation points and dismissal. Examples of less severe violations are as follows:

1. Habitual tardiness
2. Habitual absences
3. No dosimeter in lab or at clinical
4. Violation of clinical dress policy
5. Smoking in non-designated areas at RCC or the clinical site
6. Chewing gum in front of a patient
7. Failure to notify RCC of absence or tardy in a timely manner
8. Failure to make proper notifications of clinical absence or tardy
9. Leaving clinical early without prior approval
10. Use of any personal electronic device in clinical
11. Violation of any policy and/or regulation outlined in the Randolph Community College Catalog
12. Failure to use radiation shielding devices for patient, self, or others when warranted by safe practices
13. Negligence of care including leaving patient unattended or unescorted to and from radiographic room
14. Not properly filling out, and/or not submitting repeat log on time

Definition of Safe Clinical Practice:

1. Practicing within the guidelines of the Radiography Program policies and objectives at Randolph Community College.
2. Practicing within the American Registry of Radiologic Technologist standards.
3. Practicing within the ethical standards of the American Society of Radiologic Technologists.
4. Practicing within the scope of practice under the auspices of the ARRT and ASRT.
5. Practicing within the standards of the Joint Review Committee on Education in Radiologic Technology.
6. Practicing within the direction and supervision of the Radiologist on site at clinical affiliates.
7. Practicing within the direction and supervision of the registered Radiologic Technologist assigned as clinical instructor or preceptor or staff technologist.
8. Using appropriate shielding, imaging technique or other means of radiation exposure reduction commonly named ALARA at all times.
9. Giving excellent care to every patient without regard to race, creed, sex, color, religion, and physical or mental limitations.
10. RCC Radiography students may not remove a patient from the following:
   a. Cervical collars
   b. Monitoring devices
   c. Traction
   d. Bandages or splints
11. RCC Radiography students may not give medication or treatment to patients with the exception of contrast agents and only with direct supervision and approval of a technologist or physician. Food and/or liquids may be given with consent of the attending physician.
12. RCC Radiography students may not inject IV contrast without direct supervision of an ARRT-R technologist that works for the clinical site.
13. RCC Radiography students are not permitted to use fluoroscopy to locate or position anatomy for any examination in any clinical setting
14. Critically ill patients should take priority and should never be left alone. Note any changes in patient and report it immediately.
15. RCC Radiography students should never keep valuables for a patient. Valuables should be given to a family member or given to nursing personnel to be locked up. Note the name of the person in possession of valuables in case it is needed later.
16. Dentures should be placed in the proper container, not wrapped in paper towels, tissues or washcloths. (Always check for dentures, glasses, clothing, and other personal belongings when escorting the patient from the exam room.)
17. Never be afraid to ask for help. (If you suspect something is wrong, it probably is, get help.)
18. Never be afraid to ask a radiologist to check a patient.
19. Never get between an upset or belligerent patient and the exit.
20. Excuse yourself from the room if you feel threatened or uneasy. Ask a technologist to come in the room with you.

3.9 American Registry of Radiologic Technologists Standards of Ethics

The Radiography Program of Randolph Community College also abides by the ARRT “Standards of Ethics” and provides these to program students in preparation for student certification with the ARRT upon graduation. Students are expected to adhere to these standards throughout the enrollment of the program and in professional practice after graduation. Any questions as to professional or personal behaviors required to be certified by the ARRT or to maintain certification should be directed to the ARRT at the address, telephone number, or Web site at the end of the ARRT document included here.


3.10 Dismissal from Clinical Rotation

Each affiliating hospital has the right to dismiss from that facility any student believed to be clinically unsafe, or for conduct failing to meet minimum standards established by the hospital or the College. The following policy has been adopted: Any student dismissed from or found clinically unsafe in any clinical course will have his or her case referred to the Department Head of Radiography for appropriate action. The student will not be assigned to another clinical site unless the Department Head and Clinical Coordinator deems it appropriate.

**In the event that a clinical site refuses to allow you to attend clinical either due to drug screen/back ground check results, behavior issues, or any other valid reason, you will receive a grade of ‘F’ for the clinical course and be dismissed from the Radiography Program. In these cases, the clinical coordinator and/or program director will investigate the problem and provide in writing to the student the final decision.

3.11 Dress Code for Classroom and Clinical

CLASSROOM:

Students are expected to dress appropriately for class. If you are dressed inappropriately, the faculty will let you know. **Students will receive only one warning. The next violation will result in dismissal from class with a deduction of 5 points on the final grade.**

LAB:

Students will wear uniforms to all lab simulation testing sessions. Uniforms are to be worn directly to class or clinical and then back home.

CLINICAL:
Uniforms:
The students will be required to wear the following uniform and are expected to be in full uniform, including markers, name badge etc. upon arrival. Students will not be allowed to return to their car.

- **Uniform tops** are either Cherokee brand RED or PEWTER color. Tops are to be monogrammed on the top left with *Randolph Community College Radiography Program*.
- It is often cool in some departments. For this reason you are allowed to wear a shirt under your scrub top; however, it must be a plain shirt, no designs or decals and must be either dark gray, black or white.
- **Uniform pants** are Cherokee brand RED or PEWTER color. Pants should not be tight and should be hemmed so as not to touch the floor. No underwear should be visible when bending, squatting or sitting.
- If you choose to wear a **dress**, it must be either Cherokee brand RED or PEWTER in color. It must be no shorter than knee length. You must wear a slip and white panty hose.
- **Lab coats** are to be Cherokee brand PEWTER in color and must also be monogrammed on the top left with *Randolph Community College Radiography Program*. You are not allowed to wear fleece or sweat shirt material lab coats. No other jackets are acceptable while ‘on the clock’ at clinical.
- **Shoes** are to be black, white or gray with minimal insignia and other colors. Shoes should be kept in good condition and must be clean. Shoes must cover the entire foot.
- **Socks/hose:** Socks or hose are required. Socks should be either black or white without design. Panty hose should be a natural unnoticeable color under pants or white if wearing a dress uniform, seamless and free of runs or tears. Support hose are recommended.
- **Undergarments:** Students must wear appropriate undergarments which should not be seen.
- **Photo ID Badge/Radiation Dose Monitor/anatomical lead markers:** All students are required to wear both the RCC photo ID badge and the radiation dose monitor at all times while in the clinical setting. Radiation dose monitors should be worn at the collar level. Photo ID badges must be worn so they are easily visible and turned so that the student name and photo are seen. Anatomical lead markers are considered to be part of the clinical uniform. **Practical and competency exams can only be earned if the student has their personal markers.** Radiation dose monitors are also required in the energized lab at RCC when radiation is present. Failure to have one or both will result in the student being sent home and charged with violation points.
- **Cosmetics:** Use cosmetics sparingly. **DO NOT** wear perfume, body sprays, aftershave, or extreme makeup. Any lotions you use must be scent free. Many clinical sites have lotion that is approved for that site and should be used if needed while you are there.
- **Nails:** Nails must be natural and cut to just cover the fingertips and must be kept clean. **NO** artificial nails or gel or nail polish for infection control reasons.
- **Jewelry:** A watch, wedding band, engagement ring, and medical alert bracelet are permitted. One pair of pierced earrings may be worn if they are small and confined to the earlobe. Gauges may be subject to clinical site approval. **NO** visible body piercing (other than ear) may be worn. Neckwear is to be inconspicuous and should be kept under the uniform. RCC and the clinical sites are not responsible for jewelry that is lost, broken or damaged during lab or clinical sessions.
- **Eyewear:** Contact lenses are to be of an appropriate style and color. Eyeglasses are to be a simple style and are not to be shaded.
• **Body tattoos/Markings:** All body tattoos/markings must be covered with clothing, appropriate make-up and/or a skin tone band aid.

• **Hair:** Hair must be clean, neatly groomed, appropriately styled and colored (no extreme hair colors). Long hair must be neatly pinned above the collar. Hair should not fall forward in your face when positioning a patient or providing patient care. Mustaches and beards must be clean, neatly trimmed.

• **Hygiene:** Daily bathing, use of deodorants and mouth care are a MUST. You should always be clean, neat and free of odor.

• **Gum Chewing:** Chewing gum is discouraged. Mints are a better option. Whatever you have in your mouth to reduce offensive breath should be kept inside your mouth and not noticeable.

• **Tobacco:** Tobacco of any kind is prohibited at all clinical sites. E-cigarettes are also not allowed. Do not carry cigarettes, lighters or other tobacco products in uniform pockets. If you smoke before arriving at your clinical site, be aware of the smell. The smell of cigarettes should not be noticeable on you.

• **Electronic devices:** Cameras and tape recorders are prohibited. No electronic devices (lap tops, radios, pagers, iPods, etc.) are allowed in the clinical setting. They cannot be carried in your pockets.

• **Cell Phones:** Students are not allowed to carry cell phones in the clinical setting. Cell phones should be turned off and put away (not in your pocket). You may check your cell phone at lunch in the appropriate area. **Violation of this policy will lead to clinical probation followed by withdrawal from the program.**

*Students who fail to follow the dress code and other policies will be charged with the appropriate violation points.*

*Unless the problem can be corrected on site, students who do not comply with the dress code will be sent home from clinical and this will count as a clinical absence.*

Students are expected to have all materials needed for the clinical day upon arrival. Students are not allowed to return to their car during clinical. Students are responsible for having and maintaining forms and competency information and having that information readily available at the clinical site.

### 3.12 Electronic Device Usage Policy

As published in the RCC Catalog, students are requested not to use phones in faculty or administrative offices. The RCC Catalog also states that **incoming calls for students will not be honored except in the case of an emergency.** This policy applies to both campus and clinical agencies used for student learning experiences. Electronic devices such as pagers and cell phones are disruptive to class. Students who text or use such devices in class will be asked to leave. Prior to lecture, lab, and testing, all cell phones must be turned off and put away in the designated container in the classroom. Calculators on cell phones are not permitted during testing.

Radiography students are generally off campus in an area healthcare agency one to three days per week depending upon the semester. At the beginning of each semester, students should give family members, significant others, schools, daycare centers, etc. their schedule (dates, days, and hours), including the phone number of the healthcare agency. Students should inform these persons of any schedule modifications for the semester. Students should also clearly communicate to these persons the policy that incoming calls for students will not be honored except in the case of an emergency. Most hospitals prohibit the use of cellular telephones except in designated areas of the agency. The student may use the cell phone on breaks or lunchtime in these areas.
No photographs should be taken at the clinical facility unless permission has been granted by the Radiology Manager and either the Clinical Coordinator and/or Department Head. Photographs may not include any patient information of any form, and should not have information that would identify the clinical site. Students taking photographs without granted permission will be subject to the disciplinary process. Photographs taken by RCC employees or submitted to the Clinical Coordinator and/or Department Head may be posted for marketing purposes.

Computers at the clinical sites are for official use only. Students are allowed to use them to access Trajecsys and for completing patient documentation when allowed by the clinical site. Clinical site computers and printers are not to be used for printing copies of clinical paperwork. That should be done either at RCC or at home prior to arrival at the clinical setting.

Additionally, students are not permitted to use any personal electronic device in the clinical setting.

### 3.13 Social Networking/Electronic Communications Policy

All students and faculty are to practice professional behaviors of confidentiality as well as to follow legal and ethical standards of conduct as stated in the RCC Radiography Student Handbook, ARRT Code of Ethics, and the RCC College Catalog. No reference is to be made about clinical sites, patients, clinical staff or Randolph Community College employees or students at any time on any social networking site. Failure to abide by this policy will result in disciplinary action, which may include dismissal from the Radiography program. Any student not wishing to have their photograph used by RCC for marketing or on the program’s Facebook page must notify the Clinical Coordinator and/or Department Head.

### 3.14 Class Attendance

Students are required to attend all class, lab, and clinical meeting times. Absences, or incidents of tardiness and/or leaving early which exceed the student’s allotment for the semester, may result in a grade reduction, violation points, probation, and possible dismissal from the Radiography Program. Students who are habitually absent, tardy, or leave class and/or clinical early will be subject to the disciplinary process. For additional information see the class syllabus, the clinical attendance policy, and the attendance policy explained in the RCC Catalog. The following guideline is in force for all RAD courses:

Students not attending class or clinical should notify instructors at least 30 minutes before the starting time of the class or clinical starting time. Students who are going to be tardy for class must inform the instructor. Students who need to leave class early must receive permission from the instructor.

You are expected to attend each class session and each lab session. More than 1 absence will result in a point deduction for each occurrence. Three absences will be considered excessive and may result in a failing grade for the course. You are expected to contact the instructor via phone or email prior to class time if you are going to be absent or tardy. Failure to notify the instructor will result in a grade reduction regardless if this is your first absence or tardy.

More than one incidence of tardiness or leaving class early will result in a result in a grade reduction for each occurrence from your final grade. Any appointments must be made outside of class time. It is not acceptable to miss class for any reason other than emergencies. Students are not permitted to leave class early. This is to the discretion of the instructor.
It is the students’ responsibility when they miss class or lab to obtain any class notes, worksheets, etc. from a fellow student. The instructor is not responsible for getting any missed work to you or for rescheduling a missed exam.

3.15 Late Assignment/Make-Up Exams

Students are expected to submit all assignments on time and take all exams on the day they are scheduled. If a student is absent on the due date of an assignment or scheduled exam, he/she is expected to submit the completed assignment or take a make-up exam on the first day he/she returns to class, lab, or clinical unless other arrangements are approved by the instructor. It is the students’ responsibility to contact the instructor to reschedule the exam. However, a make-up examination is a privilege and some instructors do not allow make-up testing or late work submission. Check the class syllabus. Clinical assignments/paperwork must be submitted on the due date. See the Clinical section of this handbook. The faculty member teaching the class may set their own policy regarding make-up exams.

3.16 Test Review Policy

Tests may be returned to the students for review after all tests have been administered and all tests have been graded. The instructor has two weeks to grade and return tests. If the student is absent, it is the student’s responsibility to contact the instructor to obtain the test for review. The student should not remove the test from the classroom or lab, but may review the test until the end of the class period. An instructor may allow the student to return the test at a later date but this will be announced. The student should discuss questions privately with the instructor. If a disagreement exists between the student and the instructor, the student should bring to the instructor a textbook supporting the student’s answer. The instructor has the final decision as to the correct or best answer to the question.

The faculty member teaching the class may set their own test review policy. See the class syllabus.

3.17 Use of Paper Copier

The students are not allowed to use the copier machine in the Health Occupations office. Do Not Ask. Students are expected to print their class materials before the start of class. You need to plan on supplying your own paper. Current Radiography students may use the HSC computer lab and printer for this use, and another copier is available in the library.

3.18 Policy for Student/Clinical Staff/ Faculty Relationships

While it is beyond the authority of the College to regulate “off-duty” relationships between students, staff and/or faculty, it is nevertheless the responsibility of students to use the greatest discretion when these relationships occur.

Student and faculty relationships must be strictly professionally in nature for the duration of the program. Students and faculty are not to engage in social activities/networking until the student is no longer enrolled in the program. The relationship between students and staff/faculty members should be maintained as strictly professional in nature. Students who are involved in a relationship with a staff member other than on a professional basis should be fully aware of the impact of these relations on self and others. Should any conflict of interest occur between the personal relationship of a student and a staff member such that the student performance and evaluation is jeopardized, the Radiography Director and Clinical Coordinator should be notified to determine the course of action necessary. Staff members are also responsible for respecting these same professional standards.
3.19 Policy for Student/Patient Relationships

To maintain patient confidentiality, and to avoid potential conflicts of interest of a personal or professional nature, the following policy has been adopted.

Students are required to notify their clinical supervisor if they are acquainted in any way with a patient or client in the clinical affiliation. The clinical supervisor will determine if it is appropriate for the student to provide care or to interview the patient/client. The student must maintain HIPAA at all times.

Personal relationships that are initiated or that develop from professional contact with patients/clients who may be compromised by a physical or psychiatric disability are unprofessional and prohibited.

Failure to maintain a professional attitude with respect to personal involvement with patients will result in dismissal from the Radiography Program.

3.20 Appointment Policy

All appointments (doctor or personal) should be made on scheduled days off or after school hours. Appointments should not interfere with didactic or clinical instruction. If the appointment is unavoidable from interfering with class, lab, and/or clinical instruction, the student must contact the department head or clinical coordinator. The department head or clinical coordinator will decide if the absence is excusable. Students will held to the college and program attendance policies.

3.21 Bereavement Leave

A student may utilize up to three days (maximum) leave of absence without prejudice or loss of clinic time for the death of a member of that student's family. For the purposes of administering this policy, the family shall be defined as:

- Wife, husband, partner, significant other, children, mother-in-law, father-in-law, mother, father, grandmother, grandfather, grandchildren, brothers, sisters, and legal guardian.

To utilize this allowance the student must notify the Department Head. Forms are submitted upon return. Permission may be given for other family members but time must be made up.

Bereavement forms are available in the “FORMS” section and on Trajecsys.

3.22 Jury Duty

Students who are called for Jury Duty will be excused from class or clinical to fulfill their civic duty. The Clinical Coordinator and Department Head should be notified as soon as possible and the student must provide the appropriate documentation.

3.23 Inclement and Severe Weather

In the event of unscheduled closings or delays, the College will adhere to the following policies:
Day and Evening Classes

Classes will be canceled by the president in collaboration with the director of safety and emergency preparedness. Students are asked to check the following avenues to find out about closings or changes in schedules:

1. Call 336-633-0200 (RCC’s Main Campus), 336-862-7980 (Archdale), or 336-633-4165 (ESTC) for voicemail message.
2. Visit the RCC Web site for message (www.randolph.edu).
3. Sign up for an automatic text or e-mail alerts at www.randolph.edu click on the My RCC tab and then click on RCC Alert.
4. View one of the following TV stations:
   - WFMY-TV (CBS), Greensboro, NC, or visit Web site (www.digtriad.com)
   - WXII-TV (NBC), Winston-Salem, NC, or visit Web site (www.wxii12.com)
   - WGHP-TV (FOX 8), High Point, NC, or visit Web site (www.myfoxwghp.com)

Announcements will be made by 6 a.m. and 4 p.m. for the day and evening classes respectively. (Note: The information will be available for day closings on voicemail at 336-633-0200 and the RCC Web site www.randolph.edu by 6:30 a.m. if possible. Announcements may be made in one of the following ways:

1. **Randolph Community College is closed.**
2. **Randolph Community College is closed for day and/or evening classes.**
3. **Randolph Community College: will open at ___ OR is operating on a ___ hour delay.**

Note: This option allows for a delayed opening. In the case of a delayed opening, normal class schedules are not altered. Students should report to the class that would normally be in session at the time of opening. (Example: If you have an 8–11 a.m. class and the College opens at 10 a.m., your class will meet from 10–11 a.m.). Individuals, especially those commuting from other counties or remote locations, should exercise personal judgment concerning road conditions regardless of College announcement. If a closing decision is made while students, faculty, and staff ARE ON CAMPUS, information will be shared through “urgent” e-mail and direct contact, and, if appropriate, made available on voicemail, the RCC Web site and on designated TV stations.

**Extracurricular Activities/Events**

All extracurricular activities or other scheduled events normally will be canceled when it is necessary to cancel classes due to unscheduled College closings. The person who is in charge of the activity/event will be responsible for rescheduling the activity/event, if necessary.

**Missed or Canceled Classes**

Scheduled classes, which are missed or not held for any reason, including inclement weather, will be rescheduled, or the instruction will be made up by some other alternative. Alternatives may include extra class sessions, extended class sessions, individual conferences, or other options approved by the appropriate dean.

If the student is assigned to clinical on the day of inclement or severe weather and the school is closed, the student will not go to the clinical site. If the school closes during the time of travel to the site, the student should leave upon arrival. If the school is on a delayed opening schedule (i.e. 2 hours), the student will report
to clinical 2 hours later than normal. The same rule applies to classroom times.

Due to the various locations of clinical sites and student residences, weather can vary greatly. The student should use their personal judgment regarding traveling to clinical. If the weather (and roads) clears, the student may report to clinical late unless RCC is closed.

**Closing During School Hours**

The instructors will be advised by College administration when the school closes during the day. At that time, students will be dismissed. Clinical sites will be notified by the Program Director, Clinical Coordinator, or other College official to release students to go home.

Students should not leave clinical until the school notifies the clinical site. If the department manager feels the roads are becoming too dangerous for travel and that the students should be dismissed, they should contact RCC.

**Clinical and Inclement Weather**

In the event the college cancels classes due to inclement weather, **students are not to report to clinical sites.** If the college closes while students are at the clinical sites, the students must leave the site at the closing time designated by the college.

In the event the college opens on a delayed schedule due to inclement weather, report to clinical sites at the time of the announced opening of RCC. (For example, if the college delays opening two hours you would report to your site at 10 am.)

As we cover a wide area and not all areas are affected by the weather in the same way, please note the following:

- Using reports available to you, you are responsible for determining whether or not traveling to your assigned site is safe. If you decide not to go due to bad weather and RCC is open, you must follow the clinical absence policy.
- Your clinical site/instructor may send you home, even if RCC is open, if they feel the conditions are becoming dangerous. If they tell you to go home, do not argue or hesitate.

Do not take it upon yourself to make up any time lost due to inclement weather. The clinical coordinator will schedule make up assignments for everyone in this case.

**3.24 Additional Policies/Regulations**

Students should also review the Randolph Community College Catalog for additional policies and procedures. These guidelines will be strictly adhered to in addition to the policies and guidelines covered in the Student and Clinical Handbooks. Students are expected to follow all procedures, guidelines, and regulations or they will face disciplinary action. Students will receive a copy of the Clinical handbook before their first clinical rotation.

Please refer to the RCC Catalog and/or [www.randolph.edu](http://www.randolph.edu) for information regarding the following policies/regulations and College information.

- Up-to-date College calendars
- Privacy of student educational records
- Release of directory information
- Students’ right to know
Traffic and parking regulations
Campus security
Emergency phone system
Reporting criminal actions
Security alerts
Access to campus facilities
Campus Security Act
Sexual Assault Policy
Sales personnel and visitors on campus
Loitering on campus
News media on campus
Children on campus
Animals on campus
Weapons and Dangerous Instruments Policy
Tobacco Free Policy
Drugs and alcohol use
Challenged Courses Policy
Electronic Access and Acceptable Use Policy
Guidelines for Network/Internet Access Policy
Intellectual Property Policy
Section IV: Clinical Guidelines and Regulations

Please note that additional clinical regulations are contained in all sections of this manual.

4.1 Statement of Expectations and Standards

Each student must realize that he or she is required to adhere to all of the rules and regulations of the facility to which he or she is assigned. Each clinical facility will have policies and procedures which will be different from other facilities. The student is not qualified to make a determination of correctness and should never question or express their personal opinion.

Professional success depends upon more than academic achievement. Becoming a professional includes proper attitude, integrity, manners, speech, cooperation, dependability, confidentiality, accountability and demeanor, as well as appearance. You are a representative of Randolph Community College and the Radiography Program. Unprofessional behavior on any level will not be tolerated and may serve as grounds for dismissal from the program. You will treat all fellow students, faculty, hospital affiliates, and patients with respect. Self-confidence comes with practice and perseverance. Observe the technologists, especially someone you admire. The student is expected, to adhere to high standards of personal and professional conduct.

Students must always appear professional, neat, and clean. Students must demonstrate a professional appearance and attitude since they are a reflection of the Randolph Community College Radiography Program, the clinical site, fellow students and themselves. Consider clinical experiences as a job interview each and every time you are at the site.

If, under any circumstances, a patient refuses the student’s presence prior to or during an exam, the student will be asked to step out of the diagnostic room.

4.2 Patient Identification

Do not do procedures on patients without proper identification (armband) until you check with your supervising technologist. (Small clinics may use other methods of patient identification.)

  - Confirm the identification of the patient by at least two identifiers such as:
    - check the wrist band
    - verify name and date of birth by asking patient
    - verify patient’s order with the information given by the patient
    - verify patient’s medical record number
  - Remember to abide by HIPAA regulations when asking for this information.

4.3 Labeling of Radiographs

Patient identifiers must be placed appropriately on all images according to facility policy. All images will be marked with appropriate lead markers. Students will place the marker on the lateral border of the part. If a structure is in a lateral position, the marker will be placed anterior of that structure. Students should realize that clinical site regulations must be followed but when not specified the student should apply the standard taught by the program in class or lab.
4.4 Routine Views of an Examination

- Each radiology department should have a manual listing routine views for each examination.
- All radiographic examinations must be ordered by a physician or appropriate delegate.
- All radiographic examinations must have a written diagnosis or pertinent information related to the examination ordered.
- Any modification of routine views must be approved by the student’s supervising technologist. A list of routine views recommended by the ARRT for competency is included in the clinical manual.

4.5 Treatment of Patients

All patients will be treated with respect and dignity. Some casual conversation with the patient along with a brief description of the examination will help relieve much apprehension that the patient might have. The student must also maintain awareness of the patient’s safety and comfort. All information concerning patients is to be kept confidential. Any violation of the confidentiality agreement, and ANY violation of a patient’s dignity, is grounds for immediate dismissal from the Radiography Program.

4.6 Reporting Abuse in the Clinical Setting

A. If a student witnesses any abuse of patients in the clinical setting, he/she should report it immediately to the clinical instructor.
B. The student will document the incident in writing, and immediately contact the Clinical Coordinator or Department Head.
C. The clinical instructor, student, and Clinical Coordinator and/or Department Head, with the written documentation from the student will meet with the Director of the Radiology Department, from which the incident occurred.
D. The Director of Radiography will take appropriate action. A copy of the written documentation should be forwarded to the Department Head.
E. Please note, each situation will be addressed on a case by case basis and steps will be taken ad lib as deemed necessary.

4.7 RCC Health Sciences Interpretation Policy

Often patients are seen in the clinical settings who are unable to hear or understand English. In this case, the clinical site is responsible for providing a qualified interpreter. RCC students, even if qualified, are not to serve as interpreters for patients during procedures at the clinical site.

4.8 Radiography Program Class, Lab, and Clinical Professional Expectations

As was stated earlier, you are expected to conduct yourself as a professional at all times, and in any situation where you may be identified as a radiography student. Outlined below, in addition to other stated policies, are the program’s expectations for students and program faculty.

Professional Relationships with Patients and Patient Care:
The student/faculty will:
1. Identify oneself as to name (1st name only is okay), that you are the radiography student who will be performing the exam. (Patients have the right to refuse students to perform or observe the exam.)
2. Attempt to make the patient comfortable.
3. Provide a safe and clean environment.
4. Include the patient in conversations which occur in the patient’s presence.
5. Treat the patient as a person, not an object or exam. Call them by their proper name. (Mr., Miss, or Mrs.)

6. Conduct self in a professional manner. Be polite, dignified, and considerate. Misbehavior by students includes loud talking, laughing, joking, crude remarks of derogatory, teasing or sexual nature, noisy or boisterous behavior is NOT allowed. Any conversation can be overheard or misinterpreted by patients, staff or family in the clinical area. Such conduct is subject to disciplinary action.

7. Maintain patient confidentiality at all times. (Be mindful of your surroundings and who may be able to overhear your conversation about the patient.) HIPAA violations will result in dismissal from the Radiography Program.

8. Wear proper clean, pressed uniforms, including dosimetry badge and identification, while at clinical site.

9. Protect the patient’s personal property.

10. Accompany patients in and out of the rooms at all times. Don’t just direct a patient or visitor to another area but if possible, escort them there.

Professional Relationships with the Health Care Team:
The student/ faculty will:
1. Recognize and follow the chain of command.
2. Adhere to established policies of the school, department, and hospital or clinic.
3. Be willing to work with others.
4. Be respectful and cooperate with others.
5. Accept constructive criticism and suggestions in a proper, professional manner. Use the information to grow and better your skills. Even if you do not agree, there is something to be learned from all feedback. (Perception of others is more important than your personal perception of your skills and/or conduct.)
6. Perform assignments as requested by staff radiographers even if competency has been completed. When not busy, assist other co-workers or fellow students. Volunteer for examinations that need to be performed. Offer to process images, escort patients, prepare the exam room, and any other need that you can meet. Most departments will not ask you to do something but you must step up and ask to do the procedure.
7. Follow site policies and procedures regarding all aspects of performing examinations. This includes but is not limited to: placement and use of lead markers, exam routines, obtaining pertinent patient history, obtaining pregnancy status, and completing paperwork.
8. The hospital phone is not to be used for personal calls. Personal and/or business calls (either incoming or outgoing) on any phone during clinic hours are not allowed. A student is allowed to use his/her personal cell phone ONLY during “break, lunch, dinner” times. This will require that the student finds a designated and private location and does not conduct personal calls in front of patients or hospital staff. See Cell Phone policy in this handbook.
9. Students are to follow correct radiation shielding consistent with training.
10. Will not argue with any person during clinical. Disagreements should be handled in private and in a professional manner. See grievance policy in this handbook.
11. Will not refuse to do what a technologist asks you to do. (As long as it does not violate policy or endanger someone.) (Students are to refuse perform exams if they violate the supervision policies outlined in this handbook. Failure to follow supervision policies will result in immediate dismissal from the radiography program.)

Dependability:
The student/faculty will:
1. Be punctual when arriving for clinical rotation. Take only the allotted amount of time for breaks (optional) and lunch times (required minimum of 30 minutes each day). Be on time for any meeting.
2. Will remain in assigned area for entire rotation.
3. Have few and explained absences and make proper notifications as outlined in the absence policy.
4. Accurately record his/her attendance time in Trajecsys and promptly obtain signatures on repeat logs. Check out with your supervising technologist when leaving. Report off any information about your patient and make sure your work area is clean. **Falsification of attendance will result in dismissal from the program.**
5. Be prepared to perform procedures alone or with minimum supervision (if patient condition permits) after completing competency evaluations on procedures.
6. Take an active role in clinical.

**Initiative:**
The student/faculty will:
1. Actively and voluntarily seek further information in an effort to improve his/her knowledge and skills.
2. Demonstrate an active role in departmental procedures rather than a passive role.
3. Use any downtime in a constructive manner such as practice positioning, practice equipment manipulation, cleaning, stocking, or studying. (No electronics, laptops, tablets, magazines, or recreational reading is allowed.)
4. Will seek out instruction and information.
5. Maintain cleanliness. Pick up clutter and clean up spills. Clean tables and instruments after use. Use clean linens. Wash your hands and wear gloves when appropriate.
6. Voluntarily assist patients, visitors and others whenever possible. (Hold the door, help put clothing or jewelry back on.)

**Judgment:**
The student/faculty will:
1. Recognize problems and emergency situations and take immediate steps to resolve them.
2. Use forethought and intelligence in arriving at decisions.
3. Act calmly and rapidly under stressful situations.
4. Seek assistance from supervising technologists when needed.
5. Present a proper pleasant and professional attitude. Smile warmly, do not criticize, maintain eye contact, don’t blame others or make excuses, and show a genuine desire to learn.
6. Maintain patient privacy and confidentiality at all times. Keep patient covered, close doors, discuss confidential information in private areas.

**Responsibility:**
The student/faculty will:
1. Perform or assist with radiographic procedures scheduled for the assigned area.
2. Report to the supervisor of the assigned area promptly.
3. Return and replenish supplies as necessary.
4. Be familiar with the location and proper utilization of all emergency equipment and procedures.
5. Adhere to program policies at all times, and particularly when a paid RCC employee is not present.
6. Refuse compensation for services from patients.
7. Accurately complete all clinical paperwork and submit or turn it in on time.
8. Remain in assigned area.
9. Be prepared for the clinical day by having all necessary supplies. (Markers, pen, name badge, dosimeter badge, etc.)
11. Admit to mistakes and seek ways to avoid making the same mistakes in the future.
12. Listen to customer concerns, apologize, take action to resolve the problem and follow up if possible. (You may need to direct the customer to the proper person for resolution.)
Efficiency:
The student/faculty will:
1. Establish performance priorities in a logical sequence.
2. Maintain a clean, orderly, and safe clinical area.
3. Be effective in performing under pressure.
4. Practice good organization skills.
5. Complete procedures in a timely fashion.
6. Stop conversations, studying or other activities to perform patient exams immediately. Do not delay patient exams.

Communication:
The student/faculty will:
1. Tell your clinical instructor, preceptor or supervising technologist if you don’t know something and ask for help.
2. Answer the telephone before the third ring. (If allowed)
3. Keep patient and family informed of wait times when applicable. (Do not violate HIPAA rules).
4. Keep conversations professional around patients.
5. Keep patient information confidential.

Personal Traits:
The student/faculty will:
1. Be neat, clean, free of odor (good or bad), wear photo ID badge, wear radiation dose monitor, and wear the proper uniform for clinical in the proper size. (See dress code for more information.)
2. Practice good personal hygiene.
3. Demonstrate tactfulness in caring for patients and assisting the health care team.
4. Be friendly and pleasant at all times.
5. Practice politeness and respectfulness. Say please and thank you. Yes or no ma’am/sir.
7. Demonstrate leadership.
8. Admit to mistakes.
9. Adhere to the Code of Ethics.
10. Refrain from lying and spreading gossip. Do not participate and actively discourage it. If it is information that you feel is necessary for you to know, get the information from the source (program faculty or preceptor).
11. Discussing instructors, students, or technologists is to be avoided. Gossiping or tale-bearing among students about courses, fellow students or instructors is inappropriate. Comparing grades, assignments and complaining should be avoided. Develop a habit of keeping anything you hear to yourself and do not share with others. That will help to limit confusion and hard feelings. **Be mindful of what you post or respond to on social networking sites as posts and comments may be seen by unintended viewers no matter what your privacy settings are. Depending on the content, you can be dismissed from the radiography program for posts on these sites.**

4.9 Clinical Affiliations

The clinical component of the Radiography Program was developed to provide the student with a supervised and structured educational experience. Each student must realize that clinical training is a privilege provided by the clinical agency. Clinical assignments will be provided to the student prior to the beginning of each semester. Students are assigned to their clinical sites via a random lottery. Each student is assigned to a particular hospital or imaging facility on a rotational basis. The Clinical Coordinator makes the clinical assignments and rotates the students to various sites based upon the availability of space at the clinical affiliates of the program to ensure all students have equal opportunity to learn different equipment and
Radiography procedures. The student must complete the assignment as defined by the Clinical Coordinator. The student’s home/work address or personal schedule cannot be taken into consideration when scheduling clinical rotations. Do not request a change of assignment.

Students are expected to be respectful to the radiologists, physicians, staff, and support personnel at the clinical site. Each site has their own way of doing exams and you are to respect that. Do not express your opinion about clinical matters. You are a student and you are to do as directed by the technologist or physician as long as the request is ethical.

**Clinical Affiliate Location**
This list is subject to change at the discretion of the RCC and affiliate faculty. Mileage is an approximation from RCC’s main campus in Asheboro.

<table>
<thead>
<tr>
<th>Clinical Affiliate</th>
<th>Address</th>
<th>Approximate Distance from RCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asheboro Urology</td>
<td>283 White Oak St. Asheboro, NC 27203</td>
<td>3.5 miles</td>
</tr>
<tr>
<td>Bethany Medical Center (Lindsay Street)</td>
<td>507 Lindsay Street High Point, NC 27261</td>
<td>26 miles</td>
</tr>
<tr>
<td>Bethany Medical Center (Skeet)</td>
<td>3604 Peters Ct. High Point, NC 27265</td>
<td>32 miles</td>
</tr>
<tr>
<td>High Point Regional</td>
<td>601 North Elm Street High Point, NC 27261</td>
<td>26 miles</td>
</tr>
<tr>
<td>Kernersville Medical Center</td>
<td>1750 Kernersville Medical Pkwy, Kernersville NC</td>
<td>38.5 miles</td>
</tr>
<tr>
<td>Kernodle Clinic (The Private Diagnostic Clinic, LLC)</td>
<td>1234 Huffman Mill Rd, Burlington NC</td>
<td>45 miles</td>
</tr>
<tr>
<td>Randolph Health</td>
<td>364 White Oak Street Asheboro, NC 27203</td>
<td>3.5 miles</td>
</tr>
<tr>
<td>Randolph Orthopedic &amp; Sports Medicine</td>
<td>138-A Dublin Square Rd. Asheboro, NC 27203</td>
<td>5 miles</td>
</tr>
<tr>
<td>Sandhills Regional Medical Center</td>
<td>1000 West Hamlet Ave. Hamlet, NC 28345</td>
<td>61 miles</td>
</tr>
<tr>
<td>Surgical Center of Greensboro</td>
<td>705 Green Valley Road Greensboro, N.C. 27408</td>
<td>31 miles</td>
</tr>
<tr>
<td>Sports Medicine and Joint Replacement Center - Greensboro</td>
<td>200 W. Wendover Ave, Greensboro, NC</td>
<td>33.5 miles</td>
</tr>
<tr>
<td>Sports Medicine and Joint Replacement Center - Randleman</td>
<td>148 Pointe South Dr., Randleman, NC</td>
<td>10.5 miles</td>
</tr>
<tr>
<td>Thomasville Medical Center</td>
<td>207 Old Lexington Rd. Thomasville, NC 27360</td>
<td>30 miles</td>
</tr>
<tr>
<td>UNC-Chatham Hospital</td>
<td>475 Progress Blvd. Siler City, NC 27344</td>
<td>26 miles</td>
</tr>
<tr>
<td>WFBH-Lexington Medical Center</td>
<td>250 Hospital Drive Lexington, NC 27293</td>
<td>35 miles</td>
</tr>
<tr>
<td>Wake Forest Baptist Health</td>
<td>1 Medical Center Blvd, Winston-Salem, NC</td>
<td>48 miles</td>
</tr>
</tbody>
</table>
4.10 Transportation Policy

It is the student’s responsibility to report to clinical on time. Excuses of not having transportation will not be accepted. Each student is responsible for his/her own transportation to and from the clinical site.

4.11 Clinical Site Orientations

Several clinical sites provide orientation power point presentations, written tests, and forms that must be completed prior to the student’s arrival at the clinical site. The clinical coordinator will give you instructions when you should complete these.

During the first semester, students will be required to attend a mandatory clinical meeting. During this meeting faculty will review the clinical manual, distribute dosimeter badges and the RAD 151 syllabus. Faculty will be available to answer questions regarding clinical.

The first day of each clinical orientation should be utilized by the student and the clinical instructor to become acquainted with staff, supervisors and radiologists. An orientation and department tour should be conducted.

The student must complete a RCC Student Clinical Orientation Checklist for each clinical site within 2 weeks of arriving at the site even if you have already been to that site before. This is not the same as the site’s orientation forms. It may be found under the evaluations section on the Trajecsys system. Failure to complete this form within the first two weeks of each rotation will result in a loss of three (3) points from your final clinical grade for the semester and violation points.

1. On the first day of clinical, the clinical instructor or preceptor should introduce you to the key department personnel, show you key areas of the facility and department, and cover emergency policies and equipment among other things.
2. Log into the Trajecsys system and choose Evaluations from the menu.
3. Choose Student Clinical Orientation Checklist
4. The system will default to yes, however, if a criteria is not applicable, chose N/A. If you chose N/A or no, please comment as to why in the comment box to the right. For example: some sites do not have modalities. You choose N/A and in the comment box you can type ‘no modalities’.
5. Click on the submit button at the bottom.

4.12 Clinical Differences

While it is the intent and objective of the Radiography Program to be as uniform as possible with all students, the student must realize that we cannot change or circumvent hospital policies. For this reason, there will be differences at each clinical facility; and the student shall be concerned with, and adhere to the policies of the clinical facility to which he or she is assigned.

Students will be supervised, observed, critiqued and guided in the clinical site by RCC Faculty or site preceptors each semester. Any clinical concerns such as questions concerning positioning, exposure and/or clinical procedures will be directed to the RCC Faculty or site preceptor. Any conflicts between peers, staff radiographers, and/or supervisors will immediately be directed to the RCC faculty and/or preceptor following the procedure outlined in the conflict resolution policy.
4.13 Incident Reports

Whenever a student becomes injured while attending classes and clinics as part of the program, the Clinical Instructor, Clinical Coordinator, and Department Head for Radiography must be informed. The student is responsible for any expense related to personal accidents, injuries, or exposure to disease that occur in the clinical setting. **Failure to report any incident to the Clinical Instructor will result in immediate dismissal from the Radiography Program.**

If a student is injured while at the clinical affiliate as part of the Radiography Program, he/she must file an Incident Report at both the clinical affiliate and with the College. **Students may be required to provide written documentation from a physician that he/she is able to return to clinical depending on the nature/severity of the injury.**

While at the clinical affiliate as part of the Radiography Program, if a patient under your care becomes injured in any way as a result of your actions or the equipment, it must be reported to your Clinical Supervisor/Instructor immediately and an Incident Report filed at the clinical affiliate and the College (see the Medical Incident Report in the Forms section and in the documents section on Trajecsys).

1. A physician **must** examine the patient immediately. The Technologist and the Clinical Supervisor/Instructor must be notified.
2. The Clinical Coordinator and the Department Head must be notified immediately.
3. An Incident Report must be completed and reported to the Clinical Supervisor. A copy will be sent to the Radiography Department Head.

4.14 OSHA (Occupational Safety and Health Administration)

Each semester the Radiography student will be instructed and held accountable for observing OSHA standards at the clinical facility. Each clinical facility conducts an orientation for that site.

4.15 HIPAA (Health Insurance Portability and Accountability Act)

During clinical site orientation, the student will receive information regarding HIPAA standards. The student is expected to observe these standards at all times. The student will recognize that all health information from any healthcare facility is private and must not be shared either through verbal, written, and/or electronic use. Students in violation of this policy will be immediately dismissed from the Radiography Program. Any clinically related discussions must not violate the patient’s right to privacy.

Additionally, prior to making duplicates of any radiograph for instructional purposes, the student will obtain permission from the Manager or Lead Technologist of the Radiology Department. Patient privacy as to any studies copied will be observed at all times. All patient information will be removed from an image brought to the College for educational use. Students in violation will receive a zero for that project and may face further disciplinary action.

4.16 MRI Safety

As part of your clinical education, you will have the opportunity to observe imaging procedures in Magnetic Resonance Imaging (MRI). You may also be asked to assist in moving/transfer of a patient in the MRI...
department. The student will always check with the MRI technologist prior to entering the MRI department with a patient to ensure it is safe to do so.

Equipment used in this modality generates a very strong magnetic field within and surrounding the MR scanner. This magnetic field is always on. Any unsecured magnetically susceptible (ferromagnetic) material, even at a distance, may accelerate into the bore of the magnet with enough force to damage equipment, patient, and any personnel in its path. Students are required to adhere to the MRI policies of the clinical affiliate and must disclose personal information which may be viewed as a health risk. The student will always be in direct supervision of an MRI technologist.

Students are required to complete the MRI safety screening form prior to entering the MRI department. Students are not permitted to assist the MRI department in any way until the form is completed. Additionally, students who indicate “yes” to any items in the MRI safety screening form must be cleared by an MRI technologist at the clinical site. Students who are not cleared by the MRI technologist may not enter the MRI department. Students who may require additional screening may do so at their own expense. Students choosing not to complete additional screening or who do not pass additional screening will not have the opportunity to observe MRI procedures at the clinical sites and may not enter the MRI department for any reason. These students will still complete didactic education about the modality.

Students are required to remove metallic objects prior to entering the MRI area. Items include but are not limited to: watches, jewelry, and items of clothing that have metallic threads or fasteners. Students are required to follow the instructions given by the MRI technologist.

Failure to follow the policies of the clinical affiliate or the Radiography Program will be deemed unsafe clinical practice and the student will be automatically assigned 10 violation points and dismissed from the radiography program. Failure to disclose any medical history which may cause harm to an individual will also be deemed as unsafe clinical practice and the above disciplinary action will be followed.

Students will complete an MRI safety module in RAD 110 prior to attending clinical.

4.17 Attending Class/Clinic with Injuries or Illness

Any student who has a medical condition that may interfere with your ability to participate in class, clinical, or lab, must obtain a note from his/her physician stating whether or not the student may return to clinic and restrictions stated. If the student is allowed to return to clinic, any limitations or restrictions will be accommodated as long as the limitations or restrictions do not create any inability to effectively participate in class, clinical, or lab.

The student cannot return to clinical without a doctor’s certificate that they are physically/mentally able to return. If a student is ill, the student should not attend class or the clinical session. If the student is ill with “flu-like” symptoms, fever, rash, uncontrolled coughing, constant pain or sore throat, they should not attend class or clinical until these symptoms clear. Most of our clinical affiliates will not allow you to remain on site if you exhibit certain symptoms, for example: flu-like symptoms, running a fever or have conjunctivitis. Any illness for 2 or more days should be evaluated by the student’s physician. The student cannot return clinical without a doctor’s certificate that they are physically/mentally able to return. Out of courtesy to your fellow students, instructors, clinical staff and patients please avoid spreading colds and viruses by covering your mouth when sneezing or coughing and washing hand frequently. The program reserves the right to require physician clearance anytime we feel the student may not be physically/mentally able to attend class, lab, or clinical.
4.18 Student Work Policy and Role of the Student During Clinical Hours

In accordance with the STANDARDS of an accredited program, students will not be utilized by a clinical affiliate in lieu of paid staff. All students will be supervised 100 percent of the time by a certified Radiographer (that person being the Clinical Supervisor or his/her designee, or a faculty member from the RCC Radiography Program) until competency is achieved. This requirement will be strictly enforced.

Students will not exceed a 40-hour-per-week class, lab, and clinical schedule. Any make-up time should not exceed a combined scheduled and make-up time maximum of 40 hours.

While the program cannot regulate student hours outside scheduled class and clinical courses, students will not be allowed to work at a clinical site while concurrently enrolled for clinical hours. Students working at an RCC clinical affiliate site as an employee should not use the RCC radiation monitoring badge while working (outside of scheduled clinical time). Furthermore, RCC takes no responsibility for competency attainment, supervision, or evaluation of a student while they are working as an employee. Students should realize that it is their responsibility to keep their employer aware as to their competency level and scope of practice as a student but RCC cannot take responsibility for student actions outside of the scheduled clinical courses for a particular semester of enrollment.

4.19 Clinical Objectives and Evaluation Process

**Purpose Statement:**
This section defines the clinical competency program for the Radiography Program of Randolph Community College. The clinical competency program assures that the program graduates have demonstrated to the program faculty that they have the minimal entry level skills to perform the radiographic procedures defined by the American Registry of Radiologic Technologists (ARRT) as listed in the “Radiography Didactic and Clinical Competency Requirements” (Effective January 2017).

By documentation of these competencies, the program attests to the graduate’s eligibility to apply for the ARRT primary examination in Radiography. Passage of this exam will provide the graduate with certification as a certified radiographer with the ARRT and the right to use the professional certification title: ARRT-Radiography or ARRT-R in their professional setting.

**Please note:** Students do not begin clinical rotations until the second 8 weeks of class. During this time, the student is learning basic patient care skills, basic medical terminology, anatomy, and beginning to learn positioning and imaging skills. Prior to being allowed to begin clinical, each student must pass basic Pre-clinical skills assessment.

**Clinical Requirements:**
Students enrolled in the Radiography clinical courses: RAD 151, RAD 161, RAD 171, RAD 251, and RAD 261 (RAD Clinical Education I, II, III, IV, and V) are required to complete practical and competency evaluations in order to achieve the required competencies for program graduation and eligibility for application to the ARRT for examination in Radiography. Evaluation of clinical competencies is divided into three main areas. These include:

- Ten (10) mandatory general patient care activities.
- Thirty seven (37) mandatory imaging procedures.
- Fifteen (15) elective imaging procedures to be selected from a list of 34 procedures.
One (1) of the 15 elective imaging procedures must be selected from the head section.
Two (2) of the 15 elective imaging procedures must be selected from the fluoroscopy studies section, one of which must be either an Upper GI or a Contrast Enema.

The student must pass all 62 of these competency evaluations in order to meet graduation and ARRT eligibility requirements. Each competency evaluation has set criteria for passage and will be evaluated by either the:

- RCC Radiography full-time or part-time faculty members
- Radiography staff hired by clinical education sites serving as preceptors for RCC
- ARRT-R registered technologists on staff at the clinical sites

These individuals have attained certification of ARRT-R and have been educated in the clinical competency program, and they are qualified to evaluate student performance. RCC Adjunct Clinical Instructors have at least two (2) years of experience as a radiographer.

4.20 Grading of Practical and Competency Evaluations

Students are required to assist with procedures, and strongly encouraged to practice procedures several times before attempting a practical or competency evaluation.

Practical Evaluation:
The RCC Radiography Program requires students to first pass a practical evaluation before they are eligible to attempt a competency evaluation. A practical evaluation should be attempted once the student feels they are able to do the exam without assistance. During a practical evaluation, the student may receive a minimum amount of help, but should do at least 95% of the exam without assistance. All criteria must be checked off as correctly completed in order to pass the practical evaluation. The student must be evaluated by a qualified technologist.

Students may attempt a practical evaluation only after:
1. The content has been covered in the radiography classroom and laboratory setting.
2. The student has completed the written and laboratory exams.

If any projection or view that is part of the practical examination requires repeating due to lack of student skill or failure to meet the necessary standard for an acceptable image, the practical is failed.

Competency Evaluation:
Only after a student has successfully passed the practical evaluation, they are eligible to attempt a competency evaluation. A competency evaluation must be evaluated by a qualified technologist. The student must do 100% of the exam without assistance and all criteria must be checked off as correctly completed in order to pass a competency evaluation. (Assistance with moving the patient to the exam table or the like is acceptable).

If any projection or view that is part of the competency examination requires repeating due to lack of student skill or failure to meet the necessary standard for an acceptable image, the competency is failed.
Any student failing either a practical or a clinical competency evaluation should review any weaknesses, practice in the practice lab on campus, and/or work with a RCC Radiography program faculty member to ready themselves for their next attempt.

**Practical/Competency Documentation:**
When a student completes a practical or competency exam, the evaluation is documented in Trajecsys by either a site preceptor or clinical instructor and a paper copy should be completed and turned into the clinical coordinator. The student should have the technologist who evaluated them during the procedure sign their Master Practical and Competency Evaluation List as a backup and reference. In the case that no one at the site can access Trajecsys, the student should bring the completed paper copy and the signed master list to the clinical coordinator, who will document the exam in Trajecsys. Practical and competency evaluations do not count until they are documented in Trajecsys and a paper copy has been turned into the clinical coordinator.

**In order for a practical or comp evaluation to be successfully completed, the student must:**
1. Clearly inform the supervising technologist of the intent to perform a practical or competency evaluation prior to the start of the exam.
2. Make sure the supervising technologist has been trained (via reading of the student handbook and completing the quiz) on RCC’s comp evaluations.
3. Students complete the top portion of the comp form, including the technical factors section.
4. Successfully complete the exam, meeting all criteria listed on the competency form.
5. Make sure you identify anatomy. If the tech is uncomfortable with that portion, you can do this with a clinical instructor or the clinical coordinator at a later time using similar images.
6. Make sure the tech signs the paper evaluation and the master comp list. If you can’t read the name, please print it under their signature.
7. Turn in paper forms to the clinical coordinator on the next day you are at RCC.

The practical/competency evaluation form is posted on Trajecsys. Students are responsible for keeping copies of the form with them at clinical. Do not ask to make copies at the clinical sites. **Reoccurring comps are documented in Trajecsys by the instructor. No paper version is necessary.**

**Required Competency Evaluation Test Schedule:**
As outlined previously, a total of 62 clinical competencies are required, these are divided into 37 mandatory competency evaluations and 15 elective evaluations. The ten general patient care competencies, the 37 listed procedural mandatory competencies, one elective from the head section, and two electives from the fluoro section must be completed without exception. These are most often performed on clinical patients; however a few can be simulated. Simulations (with the exception of some patient care competencies) will only occur in the following circumstances:
- During the final semester (RAD 261)
- If the opportunity for these to be completed on an actual patient in the clinical setting is deemed unlikely
- With the approval of the program director

A simulated competency evaluation is not performed on an actual clinical patient. It is simulated in the clinical setting or radiography program practice lab by allowing a simulated patient to serve as the subject of the exam. All criteria will be evaluated as if the patient is to be radiographed except that the actual exposure and image production will not occur. The instructor will complete the comp without seeing the image produced, but will use a teaching file image to complete the portion of the evaluation which requires the student to evaluate the image.
Each clinical education course (RAD 151, 161, 171, 251 and 261) will have its own grading criteria as to how the final course grade will be obtained. The following is the semester by semester schedule for competency evaluation attainment. Students must complete the scheduled number of competencies in each semester to pass the clinical education course. Failure to do so will result in a final grade of F for the course and will result in dismissal from the RCC Radiography Program.

<table>
<thead>
<tr>
<th>Semester Course</th>
<th>Total Number of Comps completed (*excluding 10 patient care comps)</th>
<th>Total per semester (*excluding 10 patient care comps)</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAD 151 Fall semester (1st year)</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>RAD 161 Spring semester (1st year)</td>
<td>12</td>
<td>14</td>
</tr>
<tr>
<td>RAD 171 Summer semester (1st year)</td>
<td>12</td>
<td>26</td>
</tr>
<tr>
<td>RAD 251 Fall semester (2nd year)</td>
<td>13</td>
<td>39</td>
</tr>
<tr>
<td>RAD 261 Spring semester (2nd year)</td>
<td>13</td>
<td>52</td>
</tr>
</tbody>
</table>

*Note: Patient care comps are not included in the semester count above. CPR is required prior to acceptance into the program and venipuncture comps will be done during RAD 110. These will be signed off on during the first fall semester. The other 8 patient care comps will be done at clinical as the student can perform them.

While the student is required to complete only the 62 listed mandatory and elective competency evaluations, students are encouraged to complete as many elective comps as possible to demonstrate skills above those required by the program. This practice of additional comps can be taken into consideration when providing student references for a job or additional degree attainment.

**Reoccurring Competency Evaluations:**
During designated semesters, each student will complete reoccurring competencies as described in RAD Clinical Course syllabi. The Clinical Coordinator or Clinical Instructor will choose a patient exam for the student to complete a reoccurring competency on from exams the student has previously achieved a successful competency evaluation on. The reoccurring competency is like the original competency the student accomplished during previous clinical rotations. All criteria must be checked as correctly completed for reoccurring competency attainment. If the instructor deems the student is not competent performing the procedure, the reoccurring competency is failed and the original competency for that exam is lost and must be repeated. (Please keep in mind you must maintain the required number of comps for the semester to pass clinical.) If the instructor believes the student to be competent in performing the exam, but for some reason, the exam must be repeated, the reoccurring competency is failed, but the original competency is not lost. **Remember, reoccurring competencies are not exams of the student’s choosing, but rather exams that the Clinical Coordinator or Clinical Instructor chooses and will include identifying anatomy, so be prepared. Failure to properly identify anatomy will result in a failed reoccurring competency attempt.**

Students who lose their original competency will be required to maintain the required number of comps turned in to the clinical coordinator to earn a passing grade for the clinical course.

*For example:*
A student fails a reoccurring comp on a foot x-ray. The student is in their 4th semester and is required to have 42 of the 62 comps successfully completed and turned into the clinical coordinator by the end of the semester. The student has turned in 42 comps, but since the original foot comp was taken away, the student now must turn in 1 more comp for the semester to pass the clinical course. (This would preferably be the foot, however, if the opportunity to repeat the foot does not arise, any other needed competency will be accepted).

Reoccurring competency evaluations are documented in Trajecsys by the instructor. No paper version is necessary.

**Loss of Competency Evaluation:**
If the student is observed at any time during the clinical practicum improperly completing an examination for which he/she has already received a passed competency evaluation, the comp awarded can be lost, in which case it would need to be repeated.

**“Carry Over” Competency Evaluations:**
Students are cautioned to attempt competency evaluations only when adequately prepared by their classroom, lab, and clinical experiences. Yet, after classroom and lab experiences are complete, students may attempt the required practical and then any competency they feel prepared to attempt in testing. If a student completes competency evaluations successfully and exceeds the required number for a passing grade for that semester, they can ‘bank’ these “Carry Over” comps for a later semester. **The student is always encouraged to achieve at his/her own level of ability, but minimum competency attainment is required for each semester the student is enrolled. Failure to meet the semester comp requirements will result in a failing course grade for the semester and withdrawal from the Radiography program.**

Students are reminded that a minimum grade of C+ is required in all RAD courses to remain in the program for the next semester.

While this competency plan is developed to give you guidance throughout your enrollment at RCC, the program reserves the right to make changes in the competency program as needed to comply with ARRT requirements, accreditation requirements or adjust to changes in clinical practice that may occur. The student will be informed of any changes as soon as possible and adequate notice for adjustment will also be considered in any decision.

ARRT Competency requirements, effective January 2017, can be found at:


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### 4.21 Clinical Attendance Policy

**Clinical Attendance:**
Applicable to all clinical courses: RAD 151, RAD 161, RAD 171, RAD 251 and RAD 261

Clinical attendance is as important as classroom attendance. The student is expected to meet the required clinical objective for the course by meeting all clinical contact hours. All clinical requirements must be completed before the Associate Degree and the ARRT verification is awarded. **Students are expected to be present for all scheduled clinical course meeting times.**
We understand that due to illness or other unexpected reasons students may sometimes have to miss clinical days, therefore, students are allowed personal days each semester as follows:

- Semester 1 (fall, first year) students are allowed one (1) personal day.
- Semester 2 (spring, first year) students are allowed two (2) personal days. One for the first eight-week rotation and one for the second eight-week rotation.
- Semester 3 (summer, first year) students are allowed one (1) personal day.
- Semester 4 (fall, second year) students are allowed two (2) personal days. One for the first eight-week rotation and one for the second eight-week rotation.
- Semester 5 (spring, second year) students are allowed two (2) personal days. One for the first eight-week rotation and one for the second eight-week rotation.

Absence process:

In the event a student must be absent, he/she must:

1. Call or text your clinical instructor and let them know you will be absent. If you text your instructor make sure you get a reply and save the text.

2. Call your clinical site and let them know you will be absent. Do not leave a message on voice mail. Keep calling until you reach an actual person. You should keep a record of who you speak with and the time.

3. Text Tami Goins @ 336.247.1855 to let me know you will be absent from clinical. You may call if you do not text and leave a voice mail message on my cell phone.

4. Send an email to tmgoins@randolph.edu letting me know you will be absent. You must send an email to me even if you spoke to me on the phone or in person so I will have a printable record of your notice.

- You should make these notifications at least 30 minutes prior to the start time of your clinical day. If an emergency has occurred and the notification is later than the start time, all calls and email should still be made as soon as possible.

- In the event you know ahead of time when you are going to use your personal day, you are allowed to make these notifications in advance. Make sure your instructor and clinical site know at least a day before your absence. Email Tami at least a day prior to your absence, then the morning of your absence, you do not have to make the notifications.

- Failure to abide by this policy will result in clinical probation, a minimum reduction of three (3) points off the final clinical grade for the semester for each occurrence and the student will be charged with 3 violation points.

- The final clinical grade for the semester will be reduced by one (1) letter grade for each absence after the use of the personal day(s) unless the student chooses to make up the missed time. (This includes partial time missed). See make-up time procedure in this handbook for more information.

Tardiness/Leaving Early:
All students are to clock in and out using the Trajecsys system upon arrival and departure. As with any employment situation, routine tardiness and leaving early must be avoided. Students are expected to be punctual for all clinical education experiences. A clinical tardy is regarded as one minute to no more than 30
minutes past the scheduled clinical start time. This includes tardiness when returning from lunch or breaks. **Being late or leaving early more than 30 minutes is considered an absence**, unless due to extenuating circumstances, and you will be required to take a personal day. Validity of extenuating circumstances will be determined by the clinical coordinator or program head. If you are going to be more than 30 minutes late, you must speak with Tami Goins or Anna Phillips **prior** to going to clinical. We will determine if you will be allowed to attend clinical or if you will be taking your personal day. If you are going to be allowed to attend clinical, we will contact your clinical instructor to verify you will be allowed in. Students must be in the designated department, clocked-in using the designated computer, ready to work at their specified clinical time. Attempting to use another method to clock in for clinical, other than the program approved device/method, will be considered falsifying time records and the student is subject to dismissal. **Only one tardy or early departure (not both) per semester will be accepted**. Students who continue to have excessive tardiness or early departures will be subject to the disciplinary process. **Time missed due to tardiness must be made up that same day with approval from the clinical instructor and clinical site. Time missed due to early departure must be made up on the next clinical day with approval from the clinical instructor and clinical site.**

- If a student is going to be tardy, he/she must follow the absence call in procedures listed above. **Failure to abide by this policy will result in clinical probation, a minimum reduction of three (3) points off your final clinical grade for the semester for each occurrence and the student will be charged with 3 violation points.**

**Makeup Time Procedure:**
Makeup time for clinical absences is voluntary, not mandatory. However, excessive absences may mandate that the student withdraw from the program. All absences beyond the allotted number of personal days for the semester are considered excessive. Each case will be evaluated on an individual basis. The student may follow the grievance policy if they do not agree with withdrawal. Every absence decreases the opportunity to meet clinical competencies required for that semester. In cases of excess absences, the program may exercise the right to require student justification/documentation as to the reason for absence. This can include physician note to document illness and a medical visit, proof of court appearances, obituaries for death of a relative or any other means deemed necessary by the program faculty. Unsatisfactory justification may result in a grade of “incomplete” or ‘F’ for the clinical class.

1. All makeup time must be approved by the clinical site and clinical instructor **prior** to making up time. Work with your clinical instructor or preceptor to make a plan on how you will make up your time. A copy of this plan should be sent to tmgoins@randolph.edu for my records.

2. All makeup time is to be completed within two (2) weeks of the absence unless arrangements have been made with the clinical coordinator.

3. All makeup time will be performed at the site where the time was missed or scheduled at another site only by permission of the RCC program clinical coordinator.

4. Class, clinical, and lab hours may not exceed 40 hours per week, including make-up time. In certain circumstances, students may voluntarily exceed 40 hours per week to make up missed clinical time, but first must notify the Clinical Coordinator.
5. No makeup time will be scheduled on school holidays when the college is not open for students or faculty. Make up time on Saturdays will only be on a case by case basis and only used in unusual circumstances. Special permission from the clinical coordinator and the clinical site will be required. Scheduled class times or lab time already scheduled for the student cannot be used for makeup time. Students are not allowed to miss RAD class or lab time to perform makeup time.

6. Make up time is documented in Trajecsys by your clock in/out times. If you are staying late, simply clock out when you leave.

In special circumstances, the student may provide a request in writing to the clinical coordinator and program director for special consideration when excessive absences occur. This request should provide justification by the student as to the reason for the excess absences and why he/she should be permitted to remain in the program. The program will hold a faculty conference to determine if the student will be permitted to remain in the clinical course and if and/or how much makeup time will be required. Additional information such as physician notes or other materials may be requested of the student before a decision can be made. It is the student’s responsibility to initiate this process.

**Lunch and Breaks**

Students must take a 30 minute lunch break during the clinical day during reasonable lunch hours. (Meaning, you cannot wait until the end of the day and leave early.) Students are not guaranteed any other break time. Depending on the site and how busy it is, students may be allowed to have a break time other than lunch. This is up to the discretion of your clinical instructor or site preceptor. You must get the approval of your clinical instructor or preceptor before going to lunch. Your lunch time is not always going to be at 12 noon and it may not be possible for everyone to go at the same time. Go when you are told to go.

Students at most of our clinical sites are not allowed to leave the site for lunch or breaks. Most of our sites have facilities to purchase food, drinks, and snacks, a few do not. Students that are assigned clinical rotations at the sites listed below will be allowed to leave the site at lunch to get food, but then must return to finish the day. Students must check out with their preceptor and check back in with the preceptor upon their return. Students must be back at the clinical site and ready to do patients within their allotted lunch time. For example: If the student signs out at 12:00, the student must be signed in and ready to do patients at 12:30. Lunch times will not be extended.

Any student who is found to be taking more than the allotted 30 minute lunch break will no longer be allowed to leave the site for lunch breaks and may be subject to further disciplinary action. If this privilege becomes a problem at all, it will be revoked. With this in mind, it is strongly suggested that you take your lunch with you and remain at the clinical site.

**Only** students at the following sites will be allowed to leave and return for lunch:

- Asheboro Urology
- Bethany-Lindsay
- Bethany-Skeet
Attending Clinic with Injuries or Illness

Any student who is injured in any way must obtain a note from his/her physician stating whether or not the student may return to clinic. If the student is allowed to return to clinic, any limitations or restrictions will be accommodated as long as the limitations or restrictions do not create any difficulty in clinical and are also approved by the clinical site.

Evening Shift Rotation

Students may be required to perform evening shift and/or Saturday shift rotations as part of their clinical training depending on clinical availability. At the beginning of each rotation, students will be given notice as to their planned schedule. As always, it is the student’s responsibility to work out his/her personal schedule to meet clinical scheduling requirements. Students may utilize evening shifts in order to make-up missed clinical time, but only with prior approval from the clinical coordinator and the clinical site involved. Clinical education will not be held on Sunday or holidays.

Modality Observations

Each student will be scheduled in each of the following modalities as part of their clinical rotation: CT, Bone Density, Nuclear Medicine, MRI, Ultrasound, Cardiac Cath Lab, Interventional Lab and Radiation Therapy. If the student is interested in spending more time in a modality, he/she may request an additional rotation in the modality during the final semester.

Students may request a rotation in Mammography during the final semester. The program will make every effort to place a male student in a mammography clinical rotation if requested; however, the program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to female students. Male students are advised that placement in a mammography rotation is not guaranteed and is subject to the availability of a clinical setting that allows males to participate in mammographic imaging procedures. The program will not deny female students the opportunity to participate in mammography rotations if clinical settings are not available to provide the same opportunity to male students.

4.22 RCC Clinical Supervision Policy

Each student must realize that he or she is required to adhere to all the rules and regulations of the facility to which he or she is assigned. Each clinical facility will have policies and procedures which will be different from other facilities. The student is not qualified to make a determination of correctness and should not question directions or express their personal opinion. In order for students to obtain the clinical experience necessary to master radiographic procedures, they will perform exams under direct and indirect supervision according to the standards set forth by JRCERT as outlined below.

The Joint Review Committee on Education in Radiologic Technology’s Standards for an Accredited Educational Program in Radiologic Sciences, in Standard Four, Objective 4.4, requires that all radiographs be performed by students under the direct supervision of a qualified radiographer until the student achieves competency in that exam.
Further, in Standard Four, Objective 4.5 all procedures performed by students after demonstrating competency, must be under the indirect supervision of a qualified radiographer.

Each student is under **DIRECT** supervision of the staff technologist to whom he/she is assigned during all clinical rotations. Direct supervision occurs until the student is successful in completing a competency evaluation for a specific examination. After a student demonstrates competency, the technologist will provide **INDIRECT** supervision of the student. **Students are required to refuse to do exams where the supervision policies are not followed.**

**DIRECT SUPERVISION** assures patient safety and proper educational practices. The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

1) Reviews the procedures in relation to the student’s achievement
2) Evaluates the condition of the patient in relation to the student’s knowledge.
3) Is physically present during the conduct of the procedure, and
4) Reviews and approves the procedure and/or image.

**INDIRECT SUPERVISION**, after a competency has been demonstrated, is defined as “supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.”

**Qualified Radiographer** – is a radiographer possessing American Registry of Radiologic Technologists certification or equivalent and active registration in the pertinent discipline and practicing in the profession.

**STUDENT SUPERVISION DURING MOBILE RADIOGRAPHY**

All mobile exams performed by students regardless of their level of competency, **must be** performed under **direct supervision** of a registered technologist (RT (R)). Students **must** wear lead aprons during mobile radiography.

**4.23 Repeat Exposures Policy**

The Joint Review Committee on Education in Radiologic Technology’s Standards for an Accredited Educational Program in Radiologic Sciences, in Standard Four, Objective 4.6, require that unsatisfactory radiographs be repeated by students only under the direct supervision of a qualified practitioner.

A student must have **direct supervision** from the clinical instructor, the clinical preceptor, or an ARRT registered radiographer whenever a radiograph needs to be repeated. This means a registered radiographer must be in the room. **Students are required to refuse to repeat an image if no registered radiographer is present. The student is responsible for recording the repeat on the repeat analysis sheet. The technologist supervising the repeat must sign the analysis sheet.**

**Repeat Logs:**
Repeat logs are in paper format as the supervising technologist must sign the form and students are responsible to have them properly completed and turned in at the end of each month to the clinical coordinator. Repeat logs should be kept close by at all times and should be completed and signed immediately.
You will be provided with a copy of the paper form, it will be posted on Trajecsys. Students are responsible for keeping copies of the form with them at clinical. Do not ask to make copies at the clinical sites as this will cost the site.

The logs will be reviewed for excessive repeats in a specific clinical area. Students will be coached by a faculty member to assist the student in improving skills in that area. The clinical instructor should document an action plan with the student if needed.

**RCC (students and instructors combined) should not perform a projection more than three (3) times. After that, a tech from the site should take over.**

For example: Student attempts first image, it needs to be repeated. With instruction and direct observation from an instructor or RT, the student attempts a second image. IF that needs to be repeated the instructor should take over and attempt one more time. If that still needs to be repeated, a tech from the site should take over.

### 4.24  Clinical Documentation and Trajecsys

Documentation of the student’s clinical performance and activities are necessary. RCC Radiography program uses the Trajecsys System for most documentation. Instructions on how to register and use the system are outlined below. Clinical sites make access to a computer and the internet available to access Trajecsys. Students and RCC faculty will use these resources for official use only and keep the amount of time to a minimum so as not to disrupt the workload of the department. Trajecsys may be accessed from home or anywhere there is internet access.

**Trajecsys Registration:**

Please do not register more than once. You can only have one active profile. If you have forgotten your user ID or password, please contact Tami Goins. Once you complete the registration form, Tami Goins must approve and add you to the system. This may take a couple of days, depending on the current schedule. To register:

- Go to [http://www.trajecsys.com/](http://www.trajecsys.com/)
- Click on the registration link at the top right corner of the page
- Complete the form
  - Institution = Randolph Community College
  - Program = Radiography
  - Are you a current or new student? Choose yes if you are a student, choose no if you are an instructor or technologist at a clinical site.
  - Your password must contain letters and at least one number
  - The phone number and email you enter will be kept private. They are not used or sold for any purpose other than for RCC Radiography program use. Students and faculty will be able to email you; however, they will only see your name, not your email address. Please use an email address you use often so that you will see the information that is sent. The phone number should be your work phone number/extension.
  - You will receive a confirmation email once you complete registration. Please follow the directions in the email.

**Clocking in/out:**

Each day students arrive at their assigned clinical site, they must log into Trajecsys and clock in using only the designated computer(s) at the clinical site. At the end of each day, they must log into Trajecsys and
clock out, again, using only the designated computer(s) at the clinical site. The use of unapproved devices or
computers to clock in or out will be considered falsifying attendance time and will result in immediate
dismissal from the program. Students should only clock in/out at the beginning and ending of their assigned
shift. Clocking in/out procedure:

- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose clock in/out
- Choose the correct clinical site from the drop down box
- Click submit

*Please note: if you do not clock in at the proper clinical site, your instructor or preceptor will not be
able to access your files to enter practical and competency evaluations.*

If for any reason, the student forgets to clock in or out, a **time exception** must be completed.

- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose time exception
- Complete the information (make sure to choose the correct clinical site and date.)
- You must put in a comment describing why you did not clock as you should have.
- Note: If a computer is not available or you arrive before the tech, do a time exception and in the
  comment box simply put no computer available. This should not happen daily with the exception of
  the Bethany Clinics.

If the student is **absent** for any reason, a time exception must be completed.

- Follow the instructions above, but chose absent from the choices listed.
- In the comment box, please type personal day or the reason for absence if the personal day for that
  rotation has already been used.

**Student Clinical Orientation Evaluation:**

At the beginning of every rotation, students must complete the Student Clinical Orientation Checklist found
in the evaluation section on Trajecsys. This orientation is not the same as individual hospital or clinic
orientations. This checklist must be complete within the first two weeks of each rotation, even if the student
has been to the site before. Failure to complete this form within the first two weeks of each rotation will
result in a loss of three (3) points from your final clinical grade for the semester and violation points. To
complete the checklist:

- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose evaluations
- Choose your clinical site from the drop down box and complete the form
- You may comment in any of the white boxes to the right of each criteria
- Submit your checklist

**Procedure Log sheets:**

Each day students must keep a log of exams they observe, assist with, or perform. Since students will not
have access to a computer after every exam, it is recommended that students get a notebook that will fit in
their scrub pockets to keep up with exams until the end of the day. Patient names are not included and only
4-5 digits of their identification number should be used for confidentiality purposes. The clinical coordinator
will be checking frequently to see if students are keeping their logs up to date. Failure to keep the log up to
date will result in a warning, and then a written reprimand, a loss of three (3) points from your final clinical
grade for the semester and violation points. To enter exams into your log:

- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose log sheet
Complete the information asked for by choosing the correct exam from the drop down boxes.
Make sure you have chosen the correct date for each exam (You should have exams for every day you were at clinical.
If you have a repeat, you may put it in here; however, the actual paper form will still be required at the end of each month.
Indicate your performance level and indicate if you completed a practical or competency on the exam.

End of Rotation Evaluations:
At the end of each rotation there are many evaluations. Students are asked to complete an evaluation on their clinical instructor(s) and clinical site(s) for that rotation. Technologists are asked to evaluate the performances of the student(s) they have supervised during the rotation. Clinical Instructors complete a performance evaluation on each student they have supervised during the rotation. All of these evaluations are completed on Trajecsys. Evaluator’s names are not shared on evaluations completed by students and technologists.
To complete evaluations:
- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose evaluations
- Select the evaluation you would like to complete
- Choose the name of the person you are evaluating from the drop box
- Complete the evaluation (You can make comments in any of the white boxes to the right of each criteria.)
- Click submit at the bottom.

To view evaluations completed regarding you:
- Go to http://www.trajecsys.com/
- Log in using your user name and password
- From the menu on the left side of the screen choose reports
- Select the report you would like to view

*NOTE: Performance evaluations are considered a critical requirement for clinical courses. Students are required to pass with an average grade of 77% or more on the Clinical Performance Evaluations completed by RCC Faculty for each semester. Failure to pass these evaluations will result in a grade of F for the clinical course and the student will be not be allowed to move forward in the Radiography Program.

Practical and Competency Evaluations:
When a student completes a practical or competency exam, the evaluation is completed in Trajecsys by either a site preceptor or clinical instructor and a paper copy should be completed and turned into the clinical coordinator. The student should have the technologist who evaluated them during the procedure sign their Master Practical and Competency Evaluation List as a backup and reference. In the case that no one is present at the site that can access Trajecsys, the student should bring the completed paper copy and the signed master list to the clinical coordinator, who will document the exam in Trajecsys. Practical and competency evaluations do not count until they are documented in Trajecsys and a paper copy has been turned into the clinical coordinator.

In order for a practical or comp evaluation to be successfully completed, the student must:
1. Clearly inform the supervising technologist of the intent to perform a practical or competency evaluation prior to the start of the exam.
2. Make sure the supervising technologist has been trained (via reading of the student handbook and completing the quiz) on RCC’s comp evaluations.
3. Students complete the top portion of the comp form, including the technical factors section.
4. Successfully complete the exam, meeting all criteria listed on the competency form.
5. Make sure you identify anatomy. If the tech is uncomfortable with that portion, you can do this with a clinical instructor or the clinical coordinator at a later time using similar images.
6. Make sure the tech signs the paper evaluation and the master comp list. If you can’t read the name, please print it under their signature.
7. Turn in paper forms to the clinical coordinator on the next day you are at RCC.

The practical/competency evaluation form is posted on Trajecsys. Students are responsible for keeping copies of the form with them at clinical. Do not ask to make copies at the clinical sites. **Reoccurring comps are documented in Trajecsys by the instructor. No paper version is necessary.**
Section V: Radiation Protection

Randolph Community College
Associate Degree Radiologic Technology Program
Radiation Safety Program

5.1 Radiation Safety Manual

I. Radiation Safety Officer

A. Radiation Safety Officer Contact:

Anna N Phillips MS RT(R) (CT)
336-633-0209
anphillips@randolph.edu

Physician Resource for Radiation Safety Officer:

William W. Woodruff, III is a radiologist with Greensboro Radiology.
Contact numbers:
Greensboro Radiology (336) 274-4285
High Point Regional Health System (336) 878-6037

B. Must be a certified Radiologic Technologist or a physician with prior experience in Radiation Protection. If the RSO is a R.T., a physician must be available as advisor and resource to the RSO.

C. RSO duties include but are not limited to:

1. Procurement of student and faculty radiation badges as required. Quarterly collection and submission for exposure measurement and reporting is normal process.
2. Review of radiation exposure reports with documentation of date and signature
3. Issues reports to faculty and students following review of reports via email.
4. Investigating excessive radiation exposure according to Rule .0104.
5. Maintains radiation exposure reports indefinitely.
6. Issues reports to graduates and/or employers of former students upon request and signed release.
7. Oversees maintenance and repair of the radiographic equipment.
8. Maintains all files pertaining to radiographic equipment including but not limited to repair, licenses, and surveys as required by the North Carolina RPS Safety Program.
9. Updates Notice of Registration when required.
10. Maintains Radiation Safety Manual and updates information as required.

D. Location of Radiation Safety Documents

1. Notice to Employee may be found in
   i. Control area of Radiographic Room on bulletin board.
   ii. On the door of the x-ray lab
iii. In the Radiation Safety Manual
iv. On the bulletin board outside of the HSC Administrative Assistant’s office

2. Radiation Safety Manual is located on the counter in the control room of the Radiographic Unit. The Radiation Safety Manual contains the following documents:
   i. Plan review
   ii. Acknowledgement letters
   iii. Report of Assembly
   iv. Post-Installation Survey
   v. Notice of Registration
   vi. Written Safety Program
   vii. Review of Written Safety program, updated annually and or when changes are made to the program
   viii. copy of Notice to Employee
   ix. NRC Regulations
   x. updates to any of the above (from internet resource)

II. Authorized Personnel

A. Only RCC Radiography Program Faculty and current RCC students are authorized personnel.
B. All faculty members of the Radiography Program are certified through the American Registry of Radiologic Technologists.
C. All students are supervised by a faculty member, on site and in the building.
D. All students and radiography faculty will be issued a dosimetry badge upon entry into the radiography program, prior to the first clinical rotation, or upon employment. This badge will be worn at collar level outside of any protective apron.
E. Radiation records for new faculty members will be obtained from previous employers or instructional facilities and will be retained in the employee’s folder. Radiation records will be requested if the faculty member has other employment, and records will be reviewed to ensure dose limits are not exceeded. Upon termination of employment, a copy of the employee’s dosimetry record will be maintained. A copy of the report will be given to the employee upon request.
F. Badge controls will be stored in a non-radiation environment in the Clinical Coordinator’s office. The Clinical Coordinator will exchange dosimetry badges for students and faculty quarterly.

III. Safe operation of imaging equipment

A. RCC’s X-Ray facility is for instructional use only and is not to be used for a medical examination on human or animal.
B. Access to the radiography lab is restricted to authorized personnel only. Signage is posted stating authorized personnel only.
C. No one, faculty or student, will be allowed in the x-ray room at the college during an exposure using the stationary x-ray unit.
D. No student is permitted to use the mobile x-ray unit or C-Arm without a program approved ARRT registered technologist present.
E. Students must stay in the control room if an exposure is made with the portable unit.
F. C-arm exposures may be made during lab activities, but will be kept to a minimum. Students and technologists engaged in these activities must practice ALARA to include: time, distance, and shielding.

G. During mobile exams, surgery, or fluoroscopic exams, lead shielding, thyroid shield, and dosimetry badge must be worn at all times. The dosimetry badge must be located outside the lead apron at the collar level.

H. The C-Arm may be energized in the x-ray lab or HSC 102 when HSC 102A, and HSC 103 are unoccupied. If the C-Arm is used in HSC 102, a radiation warning sign must be hung on the door of the room.

I. All operators are to remain in the control booth, behind the protective barrier during each exposure. Exception: Assisting in fluoroscopy requires that the student stand as far away from the source of exposure as possible or behind the Radiologist.

J. Students are not allowed, under any circumstance, to hold or support a patient or image receptor during an exposure.

K. All students must have their dosimetry badge worn at collar level at all times, when in the x-ray lab or at clinical. Those who do not have their dosimetry badge will not be allowed to participate in lab and will be sent home from clinical.

L. Students are never permitted to use fluoroscopy to locate or position anatomy for any examination in any clinical setting.

M. Students electing to work as an independent agent contracting with a hospital or clinic outside the requirements of the Program will not use the badge issued by Randolph Community College to measure exposure to ionizing radiation during that employment.

N. Shielding will be provided to all patients.

O. Restrict the beam size to the area of interest unless instructed to do otherwise for a specific activity.

P. Align the x-ray beam with the image receptor by using the light localizer and the centering marks.

Q. Only authorized faculty and personnel are allowed in the lab area. Students must check in with a faculty member prior to using the lab.

R. Exposures are made only upon the direction of RCC, ARRT faculty, with an ARRT certified faculty member present. Students and faculty must be wearing their dosimetry badge to participate in energized lab activities.

S. No food or drink is permitted in the lab.

T. Do not tamper with any equipment.

IV. ALARA Principles or “as low as reasonably achievable”

A. The student will utilize ALARA (as low as reasonable achievable) principles for radiation reduction including time, distance, and shielding.

B. Students receive instruction in proper radiation protection for themselves and their patients.

C. Students receive instruction regarding use of supplemental devices to prevent the need to hold patients. This includes but is not limited to cassette holders, sandbags, tape, and sponges.

D. Students receive instruction in proper shielding during radiographic procedures. Shields are available for practice sessions to replicate actual exposures.

E. Only authorized personnel are allowed access to the Radiography lab.

V. RCC Energized lab safety features
A. The door to the darkroom, office and hallway are equipped with a safety device to prevent exposure unless all of the doors are closed.
B. A pre-programmed technique chart is available to the student to use during lab activities. A technique chart is also available and is located in the radiation safety manual.
C. Entry to the lab is controlled via a code which allows the door to be opened.
D. Visual and audible indicators are located on the x-ray control unit and are functional.
E. A switch to disable the ability to make x-ray exposures is located in the room adjacent to the x-ray lab which remains locked.
F. The x-ray portable machine and C-arm require a key in order to make an exposure. The key to the RCC mobile x-ray unit and C-arm is located in the room adjacent to the x-ray lab which remains locked.

VI. Radiation Exposure limits

Rule .0104 (65) “Limits” or “dose limits”
The permissible upper bounds of radiation dose are termed limits or dose limits. Dose limits represent an acceptable level of potential risk and do not represent a level that will necessarily be unsafe if exceeded.
Rule .1604 (a) Occupational Dose Limits for Adults
5 rem (5000 mrem) (0.05Sv) = Total effective dose equivalent (TEDE)
50 rem (50,000 mrem) (.5 Sv) = Total Organ does equivalent (TODE)
15 rem (15,000 mrem) (.15 Sv) = Eye dose equivalent
50 rem (50,000 mrem) (.5 Sv) = Shallow dose equivalent (SDE)

VII. Radiation Exposure Action Limits

<table>
<thead>
<tr>
<th>Dose Equivalent</th>
<th>Annual Limit (mrem)</th>
<th>ALARA 1 Level (mrem) Quarterly</th>
<th>ALARA 2 Level (mrem) Quarterly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whole Body (TEDE)</td>
<td>5,000</td>
<td>125</td>
<td>250</td>
</tr>
<tr>
<td>Lens</td>
<td>15,000</td>
<td>375</td>
<td>750</td>
</tr>
<tr>
<td>Shallow (SDE)</td>
<td>50,000</td>
<td>1,250</td>
<td>2,500</td>
</tr>
</tbody>
</table>

A. The RSO will routinely review and permanently store all dosimeter reports.
B. Students and faculty will receive a dosimeter reports no later than 30 days after the report is received by the RSO. These reports will include DDE (whole body), LDE (lens of eye) and SDE (shallow) doses for the student for the quarter and length of the enrollment. Records will never be destroyed.
C. Higher exposures are usually due to sources of radiation greater than x-ray.
   Therefore, an unusual amount of exposure dose would require immediate investigation
D. Any student or faculty member who suspects a badge reading may show high exposures due to routine clinical use or accidental exposure should report the RSO immediately. A signed note describing the incident may be requested of the student.
E. Students or faculty whose dose level exceeds ALARA Level 1 but is under ALARA level 2 will require a meeting between the student and the Radiation Safety Officer, who is the Department Head
for Radiography. This meeting will be documented and the student will be counseled on radiation safety practices.

F. Students and/or faculty whose dose levels exceed the ALARA 2 Level will be required to meet with the RSO, and document the reason for this level, on the “Exceeding Threshold Dose Report Form.” Their dose levels will be closely monitored for the remainder of the year, and the individual will be counseled on radiation safety practices. Doses which exceed ALARA level 2 will be sent to the Physician Resource for Radiation Safety Officer for review.

William W. Woodruff, III is a radiologist with Greensboro Radiology.
Contact numbers:
  Greensboro Radiology (336) 274-4285
  High Point Regional Health System (336) 878-6037

G. Individuals whose occupational exposure exceeds 100 mrem (1mSv) TEDE or 100 mrem (1mSv) to any individual organ or tissue will be contacted by the RSO. The individual will then need to meet with the RSO to complete the “Exceeding Threshold Dose Report Form.”

H. No nuclear sources are available at this site.

I. If you suspect there has been an excessive exposure or a radiation incident, immediately notify the Radiation Safety Officer.

VIII. Quality Assurance Activities

As a learning institution, quality assurance activities are incorporated into different activities designed to teach the principles of quality assurance. Therefore, the following activities will be performed in the teaching process.

A. Digital image acquisition quality control as recommended by the manufacturer and under the direction of an ARRT registered radiographer.
B. Radiographic equipment
   - x-ray tube warm up
   - processor sensitometry
   - repeat analysis
   - film and chemical storage
   - developer and fixer characteristics and actions
   - darkroom fog tests
   - lead apron testing
   - screen film contact tests
   - cleaning image receptor screens
   - film-screen compatibility
   - speed systems of film-screen combinations
   - film illuminators
   - safe light testing
VIII. Darkroom procedures

A. Unexposed film is stored in the film and on the upper shelves of the darkroom.
B. Films are processed according to manufacturer’s specifications.
C. Always check expiration dates on film and chemicals. Do not use if date has expired.
D. Processor is cleaned and serviced on a per semester basis.
E. Processor temperature should be at 35.3 C degrees.
F. Run 3 cleanup films before using the processor.

5.2 Radiation Monitoring Policy

In accordance with the State of North Carolina and Federal regulations, all students in the Radiography Program will be required to wear personnel radiation monitoring devices in all areas where ionizing radiation is generated. All students are to read and be familiar with the NCRP Regulatory Guide 8:13: Instruction Concerning Prenatal Radiation Exposure and the NCRP Regulatory Guide 8:29: Instruction Concerning Risks from Occupational Radiation Exposure as released by the U.S. Nuclear Regulatory Commission. Additionally, the student is to review the North Carolina Regulations for Protection against Radiation. A copy of the above stated regulations is available to the student, and is located in the energized lab office area.

The student will be responsible for proper care of the dosimeter badge and for having it attached to his/her clothing during all laboratory and clinical assignments as follows:

1. Dosimetry Badge Wear

   While in the clinical arena the student is required to wear his/her Radiation Monitor in order to record the exposure obtained. The radiation monitor will be worn at the collar level with the name facing outward. When in fluoroscopy, the radiation monitor must be worn outside the lead apron. The student should not attach the radiation monitor directly to the lead apron. This could result in a lost radiation monitor if it is unintentionally left on the lead apron.

2. Dosimetry Badge Return

   At the end of the monitoring period, the student will turn in the current radiation monitor and replace it with the new one for the next monitoring period. There will be an announcement made either verbally in class or via email when new monitors are available. The student should bring the dosimeter badge to the class when changing is due. The badges are changed every three months. Students not turning in the old monitor and receiving the new monitor within one calendar week of this announcement will be charged with 2 violation points.

   Additionally, if the student fails to exchange the badge, the student will not be allowed to attend clinical or lab. The student must return the dosimeter badge in the event of dismissal from the Program, or they will be billed the cost the college incurs from the radiation monitoring company.

3. Lost Dosimetry Badge

   If a student loses his/her dosimetry badge, it must be reported immediately to the Clinical Coordinator. The student must complete the “Lost Dosimetry Badge Report” contained in the forms section of this manual. The student may be charged $10.00, plus the cost of expedited shipping, for a new badge and will not be allowed in the clinical area or RCC x-ray lab until they receive the new dosimetry badge. All clinical time missed
until a new dosimeter is purchased must be made up before the completion of the semester involved. The student may also receive violation points. The fees associated are nonrefundable.

5.3 Pregnancy Policy

1. A student has the option of whether or not to inform Program officials of her pregnancy. If she chooses not to voluntarily give written disclosure, she cannot be considered pregnant. Should she choose not to voluntarily give written disclosure, neither she nor the fetus is due any special legal or educational status, nor should any modification of the course of study be expected.

2. A declaration of pregnancy is defined as revealing the pregnancy to the Program Director, Clinical Coordinator or a clinical instructor. A declaration of pregnancy must include the individuals name, estimated date of conception/or due date, and date the individual signed the declaration of pregnancy. Following voluntary declaration the student may choose one of the following options:

   A. Continue in the program with no modifications
   B. Continue in the program with modifications
      Modifications are as follows:
      • The student will be supplied with a fetal monitoring badge
      • The student will be allowed to limit exposure during fluoroscopy and mobile procedures in their first trimester, with the understanding that they still must meet ALL competency requirements in order to graduate.

3. The student will be expected to meet all clinical and academic program objectives during her pregnancy.

4. Upon declaration of pregnancy, the student will meet with the Program Director and Clinical Coordinator to review radiation protection guidelines. A copy of “Regulatory Guide 8.13: Instruction Concerning Prenatal Radiation Exposure” and “Regulatory Guide 8.29: Instruction Concerning Risk from Occupational Radiation Exposure,,” as released by the United States Nuclear Regulatory Commission, June, 1999 & Feb. 1996, will be provided to the student. The student will be required to read both guidelines and sign a verification form. A copy of each regulatory guide is posted in the Energized Lab Control Area for public view. The student will be instructed to adhere to safe radiation practices in laboratory and clinical settings. These include:

   a. Wearing a lead apron for all situations where radiation exposure is received such as fluoroscopy, portable and surgical examinations.
   b. Double-apron or wear a wrap apron in fluoroscopy.
   c. Wear a dosimetry badge during all clinical and lab times, at the collar, and outside of a lead apron and wear a second dosimetry badge at waist level.
   d. Stand behind the radiologist or at right angles to the fluoroscopic equipment during examination.
   e. Remain as far away from the source as possible.
   f. Limit time in the room to a minimum during fluoroscopy.
   g. Utilize shielding and barriers whenever possible.
   h. Avoid nuclear medicine patients who are actively emitting ionizing radiation for the duration of the pregnancy.

5. As soon as possible following the conference, the student will be provided with a fetal radiation monitoring device to be worn at the waist. The monitoring device is to be worn whenever the student is in the energized lab or at the clinical site, worn at the waist level, and if a lead apron is worn the
badge should be under the apron. For radiation of low penetrating power (e. g. diagnostic) the fetus is shielded by the mother and may further be shielded by the mother wearing a lead apron. For diagnostic procedures, the fetus would receive only about one third of the dose to the mother. A 0.25mm lead apron decreases the fetal dose to one fifth of maternal dose and a 0.5mm apron will decrease the fetal dose one twentieth of the maternal dose. If the student is unwilling to accept the increased risk to the fetus, the student may request withdrawal from the Program and request readmission at a later date.

6. The reading of the fetal radiation monitoring device must not exceed 0.5 rem (5mSv) during the entire pregnancy. The recommended monthly limit is 0.05 rem (0.5 mSv). If the monthly reading is exceeded, the student will be required to submit in writing an explanation for the excess dose. Additional action may be required.

7. If declaration is made and modifications requested, the student must update her clinical instructor regarding her pregnancy on the first day of clinical rotation.

8. The student must submit documentation from her physician that she is able to perform the normal duties required of a radiography student. This documentation must be submitted within 2 weeks of the declaration of the pregnancy.

9. A student must meet the same attendance requirements throughout the pregnancy. If the student cannot meet attendance requirements, she should meet with the Program Director and Clinical Coordinator to discuss withdrawal from the program and possible readmission in the following year. The student must follow the readmission process as outlined in the student manual. In certain circumstances the student may request a waiver of clinical/class time but this is only if the student is in good standing academically and has met the required clinical competencies for that semester. This decision will be a case by case judgment by the Department Head for Radiography and the Clinical Coordinator.

10. The student has the option to withdraw her declaration of pregnancy by submitting a “Withdrawal of Declaration of Pregnancy” form as provided in the Radiography Student Handbook. Following completion of this form the student will no longer be considered pregnant and no additional radiation provisions will be made. The radiation dose limits will then be applied only to the time between the declaration date and the date of withdrawal of declaration of pregnancy.

11. The student must submit a medical release form from her physician stating that she may return to class and clinical with no restrictions after she is no longer pregnant or has completed the “Withdrawal of Declaration of Pregnancy” form.

12. Upon request, a copy of the final cumulative report of the fetal radiation dosage will be given to the mother for her file.

Revised: C. Howard-09/23/09
Revised: A. Phillips 7/24/13; 9/12/13; 5/24/14; 5/22/15; 6/30/16; 1/26/2017
Section VI: FORMS
MEDICAL INCIDENT REPORT

Date of Incident or Illness:
Time of Incident or Illness: a.m. or p.m.

Name of Sick or Injured Person:

Location Incident Occurred:

Description of Accident:

Witnesses:

Name of physician notified:

Description of first aid or other assistance provided:

Approximate time of physician arrival:

Randolph Community College Sick or Injured

Representative Completing Form
Student/Employee/Visitor
TO RANDOLPH COMMUNITY COLLEGE RADIOGRAPHY PROGRAM DIRECTOR

In accordance with the NRC’s regulation at 10CFR 20.1208, “Dose to an Embryo/Fetus,” I am declaring that I am pregnant. I believe that I became pregnant in the month of ____________________, 20___. (Only the month and year need to be provided) or my due date is ____________________________.

I understand that the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem (5mSv). I also understand that I am responsible for practicing safe radiation practices at all times. By signing this form I am also confirming that I have read the programs pregnancy policy and agree to abide by the established policy.

I choose to:
( ) Continue in the program without modification
( ) Continue in the program with modification

Date___________________________

Student Signature_____________________________________

Print your name_______________________________________

Program Director
Signature_____________________________________________ Date________________

Clinical Coordinator
Signature_____________________________________________ Date________________

Updated 5/23/14
Withdrawal of Declaration of Pregnancy

In accordance to my right to do so, I do hereby withdraw my declaration of pregnancy. I realize that the radiation dose limits will then be applied only to the time between the declaration date and the date of withdrawal of declaration.

Date________________________

Student Signature____________________________________

Print your name_______________________________________

Date of Declaration of Pregnancy________________________

Program Director
Signature____________________________________ Date________________________

Clinical Coordinator
Signature____________________________________ Date________________________
Lost, Damaged or Misplaced Dosimetry Badge Form

Date________________________________

Student Name________________________________

Identification Number_________________________________

( ) Lost/Misplaced on (date)

( ) Damaged

( ) Left in x-ray room _______________days or ____________hours

Clinical Site:

Clinical Personnel notified_______ Date of notification___________

Student must provide an explanation below.

“Spare” badge issued on_____________ and returned on__________________

“Spare” badge was not available and student could not attend clinical on the following dates:_________

______________________________

______________________________

Signed by CC/PD__________________________

__________________________________________________________________________

Form must be submitted to the Clinical Coordinator or the Program Director within 24 hours of loss. (E-mail is acceptable). The student is not permitted to attend clinical until the lost badge is replaced. The student must cover the cost of the lost badge plus expedited shipping.

TO: RANDOLPH COMMUNITY COLLEGE
RADIOGRAPHY PROGRAM DIRECTOR

Updated 9/12/13
Student Request for Bereavement Days

Date of Request: ____________________________ Return Date: ____________________________

Student Name: _________________________________________________________________

Due to death of: ________________________________________________________________

Relationship to Student: __________________________________________________________

Policy states: A student may utilize up to three days (maximum) leave of absence with prejudice or loss of clinic time for the death of a family member of that student’s family. See policy for definition of family member. Student must file a written and signed application with the Director of the Radiography Program. Verbal notification may be accepted in the interim time frame.

In accordance to Radiography Program policy, the request is:

( ) approved by: _________________________________________________________________

Title: _______________________________________________ Date: _____________________

( ) not approved

Reason request not approved:
________________________________________
________________________________________
________________________________________

Discussed with student on this date: _______________________________________________

Student signature: ____________________________
(Signature does not indicate agreement, only that notification of decision has been made.)

Signed: _______________________________________________________________________

Title: _______________________________________________ Date: _____________________
Exceeding Threshold Dose Report Form

This form is to document the reason the programs ALARA Level 2 threshold dose was exceeded. Please indicate why you think this threshold was exceeded.

Name:______________________ DOB:________________________ Last 4 of SSN:__________

Plan of Corrective Action:

Student/faculty signature: ____________________________ Date: ______________

RSO signature: ____________________________ Date: ______________

Estimated Dose:__________
Radiography Program Information Update Form

Please complete this form any time your information has changed and turn it into the Department Head.

Name: _________________________________ DOB: ____/____/____

Street Address:
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

City: ___________________________ State: __________ Zip: _________

Telephone Numbers:
Home: _______________________ Cell: __________________________

Email addresses:
RCC issued: __________________________________________________
Other: _______________________________________________________

Emergency Contact:
Name: _________________________________ Relationship: _________________

Contact phone numbers:
______________________________        _______________________________

List any medical conditions or history that may be relevant to your treatment if you experience an emergency.

I, ________________________________ give permission for RCC Faculty members or medical personnel to use the above information in case of emergency.

Signature: _________________________________ Date: _____/____/_____  

Created: 05/23/14
Standards for an Accredited Educational Program in Radiography

EFFECTIVE JANUARY 1, 2014

Adopted by:
The Joint Review Committee on Education in Radiologic Technology - October 2013

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is dedicated to excellence in education and to the quality and safety of patient care through the accreditation of educational programs in the radiologic sciences.

The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council on Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. The JRCERT awards accreditation to programs demonstrating substantial compliance with these STANDARDS.

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Introductory Statement

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

The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process helps to maintain program quality and stimulates program improvement through program assessment.

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

- **Explanation** - provides clarification on the intent and key details of the objective.
- **Required Program Response** - requires the program to provide a brief narrative and/or documentation that demonstrates compliance with the objective.
- **Possible Site Visitor Evaluation Methods** - identifies additional materials that may be examined and personnel who may be interviewed by the site visitors at the time of the on-site evaluation to help determine if the program has met the particular objective. Review of additional materials and/or interviews with listed personnel is at the discretion of the site visit team.

Following each standard, the program must provide a **Summary** that includes the following:

- Major strengths related to the standard
- Major concerns related to the standard
- The program’s plan for addressing each concern identified
- Describe any progress already achieved in addressing each concern
- Describe any constraints in implementing improvements

The submitted narrative response and/or documentation, together with the results of the on-site evaluation conducted by the site visit team, will be used by the JRCERT Board of Directors in determining the program’s compliance with the STANDARDS.
Standards for an Accredited Educational Program in Radiography

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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.

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

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

Standard Four: Health and Safety ..................................................................................123

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

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

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

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Standard One

*Integrity*

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.

Objectives:

In support of **Standard One**, the program:

1.1 Adheres to high ethical standards in relation to students, faculty, and staff.

1.2 Provides equitable learning opportunities for all students.

1.3 Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.

1.4 Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

1.5 Assures the security and confidentiality of student records, instructional materials, and other appropriate program materials.

1.6 Has a grievance procedure that is readily accessible, fair, and equitably applied.

1.7 Assures that students are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of non-compliance with the STANDARDS.

1.8 Has publications that accurately reflect the program’s policies, procedures, and offerings.

1.9 Makes available to students, faculty, and the general public accurate information about admission policies, tuition and fees, refund policies, academic calendars, clinical obligations, grading system, graduation requirements, and the criteria for transfer credit.

1.10 Makes the program’s mission statement, goals, and student learning outcomes readily available to students, faculty, administrators, and the general public.

1.11 Documents that the program engages the communities of interest for the purpose of continuous program improvement.

1.12 Has student recruitment and admission practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.

1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.
1.14 Has program faculty recruitment and employment practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.

1.15 Has procedures for maintaining the integrity of distance education courses.
1.1 Adheres to high ethical standards in relation to students, faculty, and staff.

*Explanation:*
High ethical standards help assure that the rights of students, faculty, and staff are protected. Policies and procedures must be fair, equitably applied, and promote professionalism.

*Required Program Response:*
- Describe the procedure for making related policies and procedures known.
- Provide copies of policies and procedures that assure equitable treatment of students, faculty, and staff.

*Possible Site Visitor Evaluation Methods:*
- Review of student handbook
- Review of employee/faculty handbook
- Review of course catalog
- Review of student records
- Interviews with faculty
- Interviews with students
- Interviews with staff
1.2 Provides equitable learning opportunities for all students.

Explanation:
The provision of equitable learning activities promotes a fair and impartial education and reduces institutional and/or program liability. The program must provide equitable learning opportunities for all students regarding learning activities and clinical assignments. For example, if an opportunity exists for students to observe or perform breast imaging, then all students must be provided the same opportunity. If evening and/or weekend rotations are utilized, this opportunity must be equitably provided for all students.

Required Program Response:
Describe how the program assures equitable learning opportunities for all students.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of master plan of education
- Review of course objectives
- Review of student clinical assignment schedules
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with clinical staff
- Interviews with students
1.3 Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.

Explanation:
Programs must have a process in place to provide timely, appropriate, and educationally valid clinical experiences to all students admitted to the program. Students must have sufficient access to clinical settings that provide a wide range of procedures for competency achievement including mobile, surgical, and trauma examinations. Clinical settings may include hospitals, clinics, specialty/imaging centers, orthopedic centers, and other facilities. With the exception of observation site assignments, students must be provided the opportunity to complete required program competencies during clinical assignments. Clinical placement must be non-discriminatory in nature and solely determined by the program.

A meaningful clinical education plan assures that activities are educationally valid and prevents the use of students as replacements for employees. The maximum number of students assigned to a clinical setting must be supported by sufficient human and physical resources. The number of students assigned to the clinical setting must not exceed the number of clinical staff assigned to the radiography department. The student to radiography clinical staff ratio must be 1:1. However, it is acceptable that more than one student may be temporarily assigned to one technologist during uncommonly performed procedures.

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

The utilization of clinical assignments such as file room, reception area, and patient transportation should be limited.

Additionally, traditional programs that require students to participate in clinical education during evenings and/or weekends must assure that:
- Students’ clinical clock hours spent in evening and/or weekend assignments must not exceed 25% of the total clinical clock hours.
- Program total capacity is not increased through the use of evening and/or weekend assignments.

The JRCERT defines the operational hours of traditional programs as Monday - Friday, 5:00 a.m. - 7:00 p.m.

Programs may permit students to make up clinical time during term or scheduled breaks; however, they may not be assigned to clinical settings on holidays that are observed by the sponsoring institution. Program faculty need not be physically present; however, students must be able to contact program faculty during makeup assignments. Also, the program must assure that its liability insurance covers students during these makeup assignments.

Required Program Response:
- Describe the process for student clinical placement.
- Provide current student assignment schedules in relation to student enrollment.
- Describe how the program assures a 1:1 student to radiography clinical staff ratio at all clinical settings.
- Describe how the program assures that all students have access to a sufficient variety and volume of procedures to achieve program competencies.
Submit evening and/or weekend rotation(s) calculations, if applicable.

**Possible Site Visitor Evaluation Methods:**
- Review of published program materials
- Review listing of enrolled students in relation to clinical assignments, including evening and/or weekend, if applicable
- Review of clinical placement process
- Review of student clinical records
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with students
1.4 Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

Explanation:
This limitation helps assure that students are treated ethically. For the safety of students and patients, not more than ten (10) clinical hours shall be scheduled in any one day. Scheduled didactic and clinical hours combined cannot exceed forty (40) hours per week. Hours exceeding these limitations must be voluntary on the student’s part.

Required Program Response:
- Describe the process for assuring that time limitations are not exceeded.
- Provide documentation that required student clinical assignments do not exceed ten (10) hours in any one day and the total didactic and clinical involvement does not exceed forty (40) hours per week.

Possible Site Visitor Evaluation Methods:
- Review of master plan of education
- Review of published program materials
- Review of student schedules
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students
1.5 Assures the security and confidentiality of student records, instructional materials, and other appropriate program materials.

Explanation:
 Appropriately maintaining the security and confidentiality of student records and other program materials protects the student’s right to privacy. Student records must be maintained in accordance with the Family Education Rights and Privacy Act (Buckley Amendment). If radiation monitoring reports contain students’ dates of birth and/or social security numbers, this information must be maintained in a secure and confidential manner.

Required Program Response:
Describe how the program maintains the security and confidentiality of student records and other program materials.

Possible Site Visitor Evaluation Methods:
• Review of institution’s/program’s published policies/procedures
• Review of student academic and clinical records
• Tour of program offices
• Tour of clinical setting(s)
• Interviews with administrative personnel
• Interviews with faculty
• Interviews with clinical instructor(s)
• Interviews with clinical staff
• Interviews with students
1.6 Has a grievance procedure that is readily accessible, fair, and equitably applied.

Explanation:
A grievance is defined as a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. The program must have procedures to provide students an avenue to pursue grievances. The procedure must outline the steps for formal resolution of any grievance. The final step in the process must not include any individual(s) directly associated with the program (e.g., program director, clinical coordinator, clinical instructors, and diagnostic imaging department director). The procedure must assure timely resolution. The program must maintain a record of all formal grievances and their resolution. Records must be retained in accordance with the institution’s/program’s retention policies/procedures. The records must include information on how the grievance was resolved and assurance that there are no trends that could negatively affect the quality of the educational program.

Additionally, the program must have a procedure to address any complaints apart from those that require invoking the grievance procedure. The program must determine if a pattern of complaint exists that could negatively affect the quality of the educational program (e.g., cleanliness of the classroom).

Required Program Response:
Describe the nature of any formal grievance(s) that would jeopardize the program’s ability to meet its mission. Describe the nature of any complaint(s) that would jeopardize the program’s ability to meet its mission. Provide a copy of the grievance procedure. Provide a copy of any formal grievance(s) resolution.

Possible Site Visitor Evaluation Methods:
- Review of institutional catalog
- Review of student handbook
- Review of formal grievance(s) record(s), if applicable
- Review of complaint(s) record(s), if applicable
- Interviews with faculty
- Interviews with students
1.7 Assures that students are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of non-compliance with the STANDARDS.

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

Students have the right to submit allegations against a JRCERT-accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

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

**Required Program Response:**
- Describe the procedure for making students aware of the STANDARDS.
- Describe how students are provided contact information for the JRCERT.

**Possible Site Visitor Evaluation Methods:**
- Review of program publications
- Interviews with faculty
- Interviews with students
1.8 Has publications that accurately reflect the program’s policies, procedures, and offerings.

Explanation:
Maintaining published information regarding the program’s current policies, procedures, and offerings provides interested parties with an accurate overview of program requirements and expectations.

Required Program Response:
Provide program publications that reflect program policies, procedures and offerings.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student handbook
- Interviews with faculty
- Interviews with students
1.9  **Makes available to students, faculty, and the general public accurate information about admission policies, tuition and fees, refund policies, academic calendars, clinical obligations, grading system, graduation requirements, and the criteria for transfer credit.**

**Explanation:**
The institutional and/or program policies must be published and made readily available to students, faculty, and the general public on the institution’s/program’s Web site to assure transparency and accountability of the educational program. For example, requiring the general public to contact the institution/program to request program information is not adequate. Policy changes must be made known to students, faculty, and the general public in timely fashion. It is recommended that revision dates be identified on program publications.

The institution and/or program must establish and publicly disclose the criteria used when determining the transfer of credit earned from other institutions and/or programs. Also, programs must publicly disclose a list of institutions with which the program has established an articulation agreement.

The program’s academic calendar must be published and, at a minimum, identify specific start and end dates for each term, holidays recognized by the sponsoring institution, and breaks.

Student clinical obligations (e.g., drug screening, background checks, and associated fees) must be clearly identified in appropriate program publications. Additionally, if evening and/or weekend clinical assignments are required or if students must travel to geographically-dispersed clinical settings, this information must also be included.

**Required Program Response:**
- Describe how institutional and/or program policies are made known to students, faculty, and the general public.
- Provide publications that include these policies.

**Possible Site Visitor Evaluation Methods:**
- Review of institutional materials
- Review of published program materials
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with Registrar
- Interviews with students
1.10 Makes the program’s mission statement, goals, and student learning outcomes readily available to students, faculty, administrators, and the general public.

**Explanation:**
Program accountability is enhanced by making its mission statement, goals, and student learning outcomes available to the program’s communities of interest on the institution’s/program’s Web site to assure transparency and of the educational program. Requiring the general public to contact the institution/program to request program information is not adequate.

**Example:**

**Mission:**
The mission of the radiography program is to prepare competent, entry-level radiographers able to function within the healthcare community.

**Goal: Students will be clinically competent.**
Student Learning Outcomes: Students will apply positioning skills. 
Students will select technical factors. 
Students will utilize radiation protection.

**Goal: Students will demonstrate communication skills.**
Student Learning Outcomes: Students will demonstrate written communication skills. 
Students will demonstrate oral communication skills.

**Goal: Students will develop critical thinking skills.**
Student Learning Outcomes: Students will adapt standard procedures for non-routine patients. 
Students will critique images to determine diagnostic quality.

**Goal: Students will model professionalism.**
Student Learning Outcomes: Students will demonstrate work ethics. 
Students will summarize the value of life-long learning.

**Required Program Response:**
- Describe how the program makes its mission statement, goals, and student learning outcomes available to students, faculty, administrators, and the general public.
- Provide copies of publications that contain the program’s mission statement, goals, and student learning outcomes.

**Possible Site Visitor Evaluation Methods:**
- Review of published program materials 
- Review of institutional and/or program Web site 
- Interviews with administrative personnel 
- Interviews with faculty 
- Interviews with students
1.11 Documents that the program engages the communities of interest for the purpose of continuous program improvement.

Explanation:
Communities of interest are defined as institutions, organizations, groups, and/or individuals interested in educational activities in radiography. Obtaining formal feedback on program operations, student progress, employer needs, etc. from communities of interest allows the program to determine if it is meeting expectations and assures continuous program improvement. The program can use a variety of tools to obtain this feedback.

Required Program Response:
- Describe the process of obtaining feedback.
- Provide representative samples of appropriate meeting minutes, evaluations (e.g., course and faculty), and surveys (e.g., graduate and employer).

Possible Site Visitor Evaluation Methods:
- Review of meeting minutes
- Review of evaluations
- Review of surveys
- Interviews with members of various communities of interest
1.12 Has student recruitment and admission practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.

Explanation:
Non-discriminatory practices assure applicants have equal opportunity for admission. Statistical information such as race, color, religion, gender, age, disability, national origin, and any other protected class may be collected; however, this information must be voluntarily provided by the student. Use of this information in the student selection process is discriminatory.

Required Program Response:
- Describe how admission practices are non-discriminatory.
- Provide institutional and/or program admission policies.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with students
1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.

Explanation:
Defined admission practices facilitate objective student selection. In considering applicants for admission, the program must follow published policies and procedures.

Required Program Response:
• Describe the implementation of institutional and program admission policies.
• Provide institutional and program admission policies.

Possible Site Visitor Evaluation Methods:
• Review of published program materials
• Interviews with faculty
• Interviews with Admissions personnel
• Interviews with students
1.14 Has program faculty recruitment and employment practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.

Explanation:
Recruitment and employment practices that are non-discriminatory assure fairness and integrity. Equal opportunity for employment must be offered to each applicant. Employment practices must be applied equitably to all faculty.

Required Program Response:
- Describe how non-discriminatory employment practices are assured.
- Provide copies of employment policies and procedures that assure non-discriminatory practices.

Possible Site Visitor Evaluation Methods:
- Review of employee/faculty handbook
- Review of employee/faculty application form
- Review of institutional catalog
- Interviews with faculty
1.15 Has procedures for maintaining the integrity of distance education courses.

Explanation:
Programs that offer distance education must have processes in place that assure that the students who register in the distance education courses are the same students that participate in, complete, and receive the credit. Programs must verify the identity of students by using methods such as, but not limited to: secure log-ins, pass codes, and/or proctored exams. These processes must protect the student’s privacy. Student costs associated with distance education must be disclosed.

Required Program Response:
- Describe the process for assuring the integrity of distance education courses.
- Provide published program materials that outline procedures for maintaining integrity of distance education courses.
- Provide published program materials that identify associated fees for students enrolled in distance education courses.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review the process of student identification
- Review of student records
- Interviews with faculty
- Interviews with students
Summary for Standard One

1. List the major strengths of **Standard One**, in order of importance.

2. List the major concerns of **Standard One**, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
Standard Two:  
*Resources*

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

Objectives:  
In support of **Standard Two**, the program:

**Administrative Structure**

2.1 Has an appropriate organizational structure and sufficient administrative support to Achieve the program’s mission.

2.2 Provides an adequate number of faculty to meet all educational, program, administrative, and accreditation requirements.

2.3 Provides faculty with opportunities for continued professional development.

2.4 Provides clerical support services, as needed, to meet all educational, program, and administrative requirements.

**Learning Resources/Services**

2.5 Assures JRCERT recognition of all clinical settings.

2.6 Provides classrooms, laboratories, and administrative and faculty offices to facilitate The achievement of the program’s mission.

2.7 Reviews and maintains program learning resources to assure the achievement of student learning.

2.8 Provides access to student services in support of student learning.

**Fiscal Support**

2.9 Has sufficient ongoing financial resources to support the program’s mission.

2.10 For those institutions and programs for which the JRCERT serves as a gatekeeper for Title IV financial aid, maintains compliance with United States Department of Education (USDE) policies and procedures.
2.1 Has an appropriate organizational structure and sufficient administrative support to achieve the program’s mission.

Explanation:
The program’s relative position in the organizational structure helps facilitate appropriate resources and assures focus on the program. To operate effectively, the program must have sufficient institutional administrative support. Both organizational structure and administrative support enable the program to meet its mission and promote student learning.

Required Program Response:
- Describe the program’s relationship to the organizational and administrative structures of the sponsoring institution and how this supports the program’s mission.
- Provide institutional and program organizational charts.

Possible Site Visitor Evaluation Methods:
- Review of organizational charts of institution and program
- Review of meeting minutes
- Review of published program materials
- Review of master plan of education
- Interviews with faculty and institutional officials
- Interviews with clinical instructor(s)
2.2 Provides an adequate number of faculty to meet all educational, program, administrative, and accreditation requirements.

**Explanation:**
An adequate number of faculty promotes sound educational practices. A full-time program director is required. Faculty teaching loads and release time must be consistent with those of comparable faculty in other health science (allied health) programs in the same institution.

Additionally, a full-time equivalent clinical coordinator is required if the program has more than five (5) active clinical settings or more than thirty (30) students enrolled in the clinical component. The clinical coordinator position may be shared by no more than four (4) appointees. If a clinical coordinator is required, the program director may not be identified as the clinical coordinator. The clinical coordinator may not be identified as the program director.

The program director and clinical coordinator may perform clinical instruction; however, they may not be identified as clinical instructors.

A minimum of one clinical instructor must be designated at each recognized clinical setting. The same clinical instructor may be identified at more than one site as long as a ratio of one full-time equivalent clinical instructor for every ten (10) students is maintained.

**Required Program Response:**
- Provide, if available, institutional policies in relation to teaching loads and release time.
- Describe faculty teaching loads and release time in relation to a comparable health science (allied health) program within the institution.
- Describe the adequacy of the number of faculty and clinical staff to meet identified accreditation requirements and program needs.

**Possible Site Visitor Evaluation Methods:**
- Review institutional policies in relation to teaching loads and release time
- Review of master plan of education
- Review of position descriptions
- Review of clinical settings
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students
2.3 **Provides faculty with opportunities for continued professional development.**

**Explanation:**
Continued professional development results in more knowledgeable, competent, and proficient faculty. Opportunities that enhance and advance educational, technical, and professional knowledge must be available to program faculty.

**Required Program Response:**
Describe how continued professional development opportunities are made available to faculty.

**Possible Site Visitor Evaluation Methods:**
- Review of institutional and program policies
- Review of program budget or other fiscal appropriations
- Review of evidence of faculty participation in professional development activities
- Interviews with administrative personnel
- Interviews with faculty
2.4 **Provides clerical support services, as needed, to meet all educational, program, and administrative requirements.**

**Explanation:**
Clerical support services necessary to assist in meeting educational, program, and administrative requirements of the program must be provided as appropriate.

**Required Program Response:**
Describe the availability and use of clerical support services.

**Possible Site Visitor Evaluation Methods:**
- Review of program’s staffing plan
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students
2.5 Assures JRCERT recognition of all clinical settings.

Explanation:
JRCERT recognition helps assure an appropriate learning environment for student clinical education. All clinical settings must be recognized by the JRCERT. Recognition of a clinical setting must be obtained prior to student placement. A minimum of one (1) clinical instructor must be identified for each recognized clinical setting.

An observation site is used for student observation of the operation of equipment and/or procedures. If the program uses observation sites, these sites do not require recognition by the JRCERT. These sites provide opportunities for observation of clinical procedures that may not be available at recognized clinical settings. Students may not assist in, or perform, any aspects of patient care during observational assignments.

Facilities where students are participating in service learning projects or community-based learning opportunities do not require recognition.

Required Program Response:
• Assure all clinical settings are recognized by the JRCERT.
• Describe how observation sites, if used, enhance student clinical education.

Possible Site Visitor Evaluation Methods:
• Review of JRCERT database
• Review of clinical records
• Interviews with faculty
• Interviews with clinical instructors
• Interviews with clinical staff
• Interviews with students
2.6 Provides classrooms, laboratories, and administrative and faculty offices to facilitate the achievement of the program’s mission.

_Explanation:_
Learning environments are defined as places, surroundings, or circumstances where knowledge, understanding, or skills are studied or observed such as classrooms and laboratories. Learning environments must be consistent with those of comparable health science programs in the same institution. Provision of appropriate learning environments facilitates achievement of the program’s mission. Although a dedicated classroom and/or laboratory are not required, scheduled accessibility to facilities conducive to student learning must be assured. Faculty office space should be conducive to planning and scholarly activities. Space should be made available for private student advisement.

_Required Program Response:_
Describe how classrooms, laboratories, and administrative and faculty offices facilitate the achievement of the program’s mission.

_Possible Site Visitor Evaluation Methods:_
- Tour of the classroom, laboratories, and administrative and faculty offices
- Interviews with faculty
- Interviews with students
2.7 Reviews and maintains program learning resources to assure the achievement of student learning.

Explanation:
The review and maintenance of learning resources promotes student knowledge of current and developing imaging technologies. The program must provide learning resources to support and enhance the educational program. These resources must include:

- a print or electronic library with a variety of materials published within the last five years,
- computer access, and
- additional learning aids (e.g., educational software, classroom/laboratory accessory devices, etc.).

The JRCERT does not endorse any specific learning resources.

Required Program Response:
- Describe the available learning resources.
- Describe the procedure for review and maintenance of learning resources.

Possible Site Visitor Evaluation Methods:
- Tour of learning facilities
- Review of learning resources
- Review of surveys
- Review of meeting minutes
- Interviews with faculty
- Interviews with students
2.8 Provides access to student services in support of student learning.

Explanation:
The provision of appropriate student services promotes student achievement. At a minimum, the program must provide access to information for:

- personal counseling,
- requesting accommodations for disabilities as defined by applicable federal (Americans with Disabilities Act) and state laws, and
- financial aid.

Additional student services may be provided at the discretion of the program. These services should be sufficient to assure student learning.

All services provided must be made known to students and the general public.

Required Program Response:
- Describe the students’ access to student services.
- Provide published program materials that outline accessibility to student services.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Interviews with faculty
- Interviews with students
2.9 Has sufficient ongoing financial resources to support the program’s mission.

Explanation:
Adequate, ongoing funding is necessary to accomplish the program’s mission and to support student learning. The sponsoring institution must demonstrate ongoing financial commitment to the program and its students by providing adequate human and physical resources.

Required Program Response:
- Describe the adequacy of financial resources.
- Provide copies of the program’s budget and/or expenditure records.

Possible Site Visitor Evaluation Methods:
- Review of program budget and/or other fiscal appropriations
- Interviews with administrative personnel
- Interviews with faculty
2.10 For those institutions and programs for which the JRCERT serves as gatekeeper for Title IV financial aid, maintains compliance with United States Department of Education (USDE) policies and procedures.

**Explanation:**
A gatekeeper is defined as an agency holding responsibility for oversight of the distribution, record keeping, and repayment of Title IV financial aid. The program must comply with USDE requirements to participate in Title IV financial aid.

If the program has elected to participate in Title IV financial aid and the JRCERT is identified as the gatekeeper, the program must: maintain financial documents including audit and budget processes confirming appropriate allocation and use of financial resources, have a monitoring process for student loan default rates, have an appropriate accounting system providing documentation for management of Title IV financial aid and expenditures, and inform students of responsibility for timely repayment of Title IV financial aid.

**Required Program Response:**
- Provide evidence that Title IV financial aid is managed and distributed according to the USDE regulations to include:
  - recent student loan default data and
  - results of financial or compliance audits.
- Describe how the program informs students of their responsibility for timely repayment of financial aid.

**Possible Site Visitor Evaluation Methods:**
- Review of records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students
Summary for Standard Two

1. List the major strengths of Standard Two, in order of importance.

2. List the major concerns of Standard Two, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
Standard Three
Curriculum and Academic Practices

Standard Three: The program’s curriculum and academic practices prepare students for professional practice.

Objectives:
In support of Standard Three, the program:

3.1 Has a program mission statement that defines its purpose and scope and is periodically reevaluated.

3.2 Provides a well-structured, competency-based curriculum that prepares students to practice in the professional discipline.

3.3 Provides learning opportunities in current and developing imaging and/or therapeutic technologies.

3.4 Assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

3.5 Measures the length of all didactic and clinical courses in clock hours or credit hours.

3.6 Maintains a master plan of education.

3.7 Provides timely and supportive academic, behavioral, and clinical advisement to students enrolled in the program.

3.8 Documents that the responsibilities of faculty and clinical staff are delineated and performed.

3.9 Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.
3.1 Has a program mission statement that defines its purpose and scope and is periodically reevaluated.

Explanation:
The program’s mission statement should be consistent with that of its sponsoring institution. The program’s mission statement should clearly define the purpose or intent toward which the program’s efforts are directed. Periodic evaluation assures that the program’s mission statement is effective.

Required Program Response:
- Provide a copy of the program’s mission statement.
- Provide meeting minutes that document periodic reevaluation of the mission statement.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of meeting minutes
- Review of master plan of education
- Interviews with faculty
3.2 Provides a well-structured, competency-based curriculum that prepares students to practice in the professional discipline.

Explanation:
The well-structured curriculum must be comprehensive, appropriately sequenced, include current information, and provide for evaluation of student achievement. A competency-based curriculum allows for effective student learning by providing a knowledge foundation prior to performance of procedures. Continual refinement of the competencies achieved is necessary so that students can demonstrate enhanced performance in a variety of situations and patient conditions. In essence, competency-based education is an ongoing process, not an end product.

Programs must follow a JRCERT-adopted curriculum. An adopted curriculum is defined as:
- the latest American Society of Radiologic Technologists professional curriculum and/or
- another professional curriculum adopted by the JRCERT Board of Directors following review and recommendation by the JRCERT Standards Committee.

Use of a standard curriculum promotes consistency in radiography education and prepares the student to practice in the professional discipline. At a minimum, the curriculum should promote qualities that are necessary for students/graduates to practice competently, make good decisions, assess situations, provide appropriate patient care, communicate effectively, and keep abreast of current advancements within the profession. Expansion of the curricular content beyond the minimum is at the discretion of the program.

The program must submit the latest curriculum analysis grid (available at www.jrcert.org).

Required Program Response:
- Describe how the program’s curriculum is structured.
- Describe the program’s competency-based system.
- Submit current curriculum analysis grid.
- Describe how the program's curriculum is delivered, including the method of delivery for distance education courses.
- Identify which courses, if any, are offered via distance education.
- Describe alternative learning options, if applicable (e.g., part-time, evening and/or weekend curricular track).

Possible Site Visitor Evaluation Methods:
- Review of master plan of education
- Review of didactic and clinical curriculum sequence
- Review of analysis of graduate and employer surveys
- Interviews with faculty
- Interviews with students
- Observation of a portion of any course offered via distance delivery
- Review of part-time, evening and/or weekend curricular track, if applicable
3.3 Provides learning opportunities in current and developing imaging and/or therapeutic technologies.

Explanation:
The program must provide learning opportunities in current and developing imaging and/or therapeutic technologies. It is the program’s prerogative to decide which technologies should be included in the didactic and/or clinical curriculum. Programs are not required to offer clinical rotations in developing imaging and/or therapeutic technologies; however, these clinical rotations are strongly encouraged to enhance student learning.

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

Possible Site Visitor Evaluation Methods:
- Review of master plan of education
- Interviews with faculty
- Interviews with students
3.4 Assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

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

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

Possible Site Visitor Evaluation Methods:
- Review of course catalog
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students
3.5 Measures the length of all didactic and clinical courses in clock hours or credit hours.

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

Required Program Response:
- Describe the method used to award credit hours for lecture, laboratory and clinical courses.
- Provide a copy of the program’s policies and procedures for determining credit hours and an example of how such policy has been applied to the program’s coursework.
- Provide a list of all didactic and clinical courses with corresponding clock or credit hours.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students
3.6 Maintains a master plan of education.

Explanation:
A master plan provides an overview of the program and allows for continuity among, and documentation of, all aspects of the program. In the event of new faculty and/or leadership to the program, the master plan provides the information needed to understand the program and its operations.

The plan should be evaluated annually, updated, and must include the following:
- course syllabi (didactic and clinical courses) and
- program policies and procedures.

While there is no prescribed format for the master plan, the component parts should be identified and readily available. If the components are not housed together, the program must list the location of each component. If the program chooses to use an electronic format, the components must be accessible by all program faculty.

Required Program Response:
- Identify the location of the component parts of the master plan of education.
- Provide a Table of Contents for the program’s master plan.

Possible Site Visitor Evaluation Methods:
- Review of master plan of education
- Interview with program director
- Interviews with faculty
3.7 Provides timely and supportive academic, behavioral, and clinical advisement to students enrolled in the program.

*Explanation:* Appropriate advisement promotes student achievement. Student advisement should be formative, summative, and must be shared with students in a timely manner. Programs are encouraged to develop written advisement procedures.

*Required Program Response:*
- Describe procedures for advisement.
- Provide sample records of student advisement.

*Possible Site Visitor Evaluation Methods:*
- Review of students’ records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students
3.8 Documents that the responsibilities of faculty and clinical staff are delineated and performed.

- Full-time Program Director:
  
  Assures effective program operations,
  
  Oversees ongoing program assessment,
  
  Participates in budget planning,
  
  Maintains current knowledge of the professional discipline and educational methodologies through continuing professional development, and
  
  Assumes the leadership role in the continued development of the program.

- Full-time Clinical Coordinator:
  
  Correlates clinical education with didactic education,
  
  Evaluates students,
  
  Participates in didactic and/or clinical instruction,
  
  Supports the program director to help assure effective program operation,
  
  Coordinates clinical education and evaluates its effectiveness,
  
  Participates in the assessment process,
  
  Cooperates with the program director in periodic review and revision of clinical course materials,
  
  Maintains current knowledge of the discipline and educational methodologies through continuing professional development, and
  
  Maintains current knowledge of program policies, procedures, and student progress.

- Full-time Didactic Program Faculty:
  
  Prepares and maintains course outlines and objectives, instructs and evaluates students, and reports progress,
  
  Participates in the assessment process,
  
  Supports the program director to help assure effective program operation,
Cooperates with the program director in periodic review and revision of course materials, and
Maintains appropriate expertise and competence through continuing professional
development.

- Part-time Didactic Program Faculty:

  Prepares and maintains course outlines and objectives, instructs and evaluates students, and
  reports progress,

  Participates in the assessment process, when appropriate,

  Cooperates with the program director in periodic review and revision of course materials, and

  Maintains appropriate expertise and competence through continuing professional
development.

- Clinical Instructor(s):

  Is knowledgeable of program goals,

  Understands the clinical objectives and clinical evaluation system,

  Understands the sequencing of didactic instruction and clinical education,

  Provides students with clinical instruction and supervision,

  Evaluates students’ clinical competence,

  Maintains competency in the professional discipline and instructional and evaluative
techniques through continuing professional development, and

  Maintains current knowledge of program policies, procedures, and student progress.

- Clinical Staff:

  Understand the clinical competency system,

  Understand requirements for student supervision,

  Support the educational process, and

  Maintain current knowledge of program policies, procedures, and student progress.

**Explanation:**
The clear delineation of responsibilities facilitates accountability. Faculty and clinical staff responsibilities
must be clearly delineated and must support the program’s mission.
Full- and part-time status is determined by, and consistent with, the sponsoring institution’s definition. At all times when students are enrolled in didactic and/or clinical components, the program director and/or clinical coordinator must assure that their program responsibilities are fulfilled.

**Required Program Response:**
Provide documentation that faculty and clinical staff positions are clearly delineated.

**Possible Site Visitor Evaluation Methods:**
- Review of position descriptions
- Review of handbooks
- Interviews with faculty and clinical staff to assure responsibilities are being performed
- Interviews with students
3.9 Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.

Explanation:
The performance of program faculty and clinical instructor(s) must be evaluated minimally once per year. Evaluation assures that instructional responsibilities are performed and provides administration and faculty with information to evaluate performance. Evaluation promotes proper educational methodology and increases program effectiveness. Evaluation results must be shared minimally once per year with the respective program faculty and clinical instructor(s) being evaluated to assure continued professional development. Any evaluation results that identify concerns must be discussed with the respective individual(s) as soon as possible.

Required Program Response:
- Describe the evaluation process.
- Describe how evaluation results are shared with program faculty and clinical instructor(s).
- Provide samples of evaluations of program faculty.
- Provide samples of evaluations of clinical instructor(s).

Possible Site Visitor Evaluation Methods:
- Review of program evaluation materials
- Review of clinical instructor evaluation
- Interviews with administrative personnel
- Interviews with program faculty
- Interviews with clinical instructor(s)
- Interviews with students
Summary for Standard Three

1. List the major strengths of **Standard Three**, in order of importance.

2. List the major concerns of **Standard Three**, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
Standard Four
Health and Safety

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

Objectives:
In support of Standard Four, the program:

4.1 Assures the radiation safety of students through the implementation of published policies and procedures that are in compliance with Nuclear Regulatory Commission regulations and state laws as applicable.

4.2 Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:
- Written notice of voluntary declaration,
- Option for student continuance in the program without modification, and
- Option for written withdrawal of declaration.

4.3 Assures that students employ proper radiation safety practices.

4.4 Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.

4.5 Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.

4.6 Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.

4.7 Assures sponsoring institution’s policies safeguard the health and safety of students.

4.8 Assures that students are oriented to clinical setting policies and procedures in regard to health and safety.
4.1 Assures the radiation safety of students through the implementation of published policies and procedures that are in compliance with Nuclear Regulatory Commission regulations and state laws as applicable.

**Explanation:**
Appropriate policies and procedures help assure that student radiation exposure is kept as low as reasonably achievable (ALARA). The program must maintain and monitor student radiation exposure data. This information must be made available to students within thirty (30) school days following receipt of data. The program must have a published protocol that identifies a threshold dose for incidents in which dose limits are exceeded. Programs are encouraged to identify a threshold dose below those identified in NRC regulations.

**Required Program Response:**
- Describe how the policies are made known to enrolled students.
- Describe how radiation exposure data is made available to students.
- Provide copies of appropriate policies.

**Possible Site Visitor Evaluation Methods:**
- Review of published program materials
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with students
4.2 Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:

- Written notice of voluntary declaration,
- Option for student continuance in the program without modification, and
- Option for written withdrawal of declaration.

Explanation:
Appropriate radiation safety practices help assure that radiation exposure to the student and fetus are kept as low as reasonably achievable (ALARA). The policy must include appropriate information regarding radiation safety for the student and fetus. The program must allow for student continuance in the clinical component of the program without modification. The program may offer clinical component options such as: (1) clinical reassignments and/or (2) leave of absence.

Required Program Response:
- Describe how the pregnancy policy is made known to accepted and enrolled female students.
- Provide a copy of the program’s pregnancy policy.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students
4.3 Assures that students employ proper radiation safety practices.

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

Students must understand basic radiation safety practices prior to assignment to clinical settings. Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care. As students progress in the program, they must become increasingly proficient in the application of radiation safety practices.

The program must also assure radiation safety in energized laboratories. Students’ utilization of energized laboratories must be under the supervision of a qualified radiographer who is readily available. If a qualified radiographer is not readily available to provide supervision, the radiation exposure mechanism must be disabled. Programs are encouraged to develop policies regarding safe and appropriate use of energized laboratories by students.

Required Program Response:
- Describe how the curriculum sequence and content prepares students for safe radiation practices.
- Provide the curriculum sequence.
- Provide policies/procedures regarding radiation safety.

Possible Site Visitor Evaluation Methods:
- Review of program curriculum
- Review of radiation safety policies/procedures
- Review of student handbook
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students
4.4 Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.

Explanation:
Direct supervision assures patient safety and proper educational practices. The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

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

Students must be directly supervised until competency is achieved.

Required Program Response:
- Describe how the direct supervision requirement is enforced and monitored in the clinical setting.
- Provide documentation that the program’s direct supervision requirement is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students
4.5 Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.

Explanation:
Indirect supervision promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Required Program Response:
- Describe how the indirect supervision requirement is enforced and monitored in the clinical setting.
- Provide documentation that the program’s indirect supervision requirement is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students
4.6 Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.

Explanation:
The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must be physically present during the conduct of a repeat image and must approve the student’s procedure prior to re-exposure.

Required Program Response:
- Describe how the direct supervision requirement for repeat images is enforced and monitored in the clinical setting.
- Provide documentation that the program’s direct supervision requirement for repeat images is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students
4.7 Assures sponsoring institution’s policies safeguard the health and safety of students.

Explanation:
Appropriate sponsoring institutional policies and procedures assure that students are protected. These policies must, at a minimum, address emergency preparedness, harassment, communicable diseases, and substance abuse. Policies and procedures must meet federal and/or state requirements as applicable. Enrolled students must be informed of policies and procedures.

Required Program Response:
Provide program policies that safeguard the health and safety of students.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students
4.8 Assures that students are oriented to clinical setting policies and procedures in regard to health and safety.

Explanation:
Appropriate orientation assures that students are cognizant of clinical policies and procedures. The policies and procedures must, at a minimum, address the following: hazards (fire, electrical, chemical), emergency preparedness, medical emergencies, HIPAA, and Standard Precautions.

Required Program Response:
- Describe the process for orienting students to clinical settings.
- Provide documentation that students are apprised of policies and procedures specific to each clinical setting.

Possible Site Visitor Evaluation Methods:
- Review of orientation process
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students
Summary for Standard Four

1. List the major strengths of **Standard Four**, in order of importance.

2. List the major concerns of **Standard Four**, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
Standard Five

Assessment

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.

Objectives:

In support of Standard Five, the program:

Student Learning

5.1 Develops an assessment plan that, at a minimum, measures the program’s student learning outcomes in relation to the following goals: clinical competence, critical thinking, professionalism, and communication skills.

Program Effectiveness

5.2 Documents the following program effectiveness data:

- Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
- Five-year average job placement rate of not less than 75 percent within twelve months of graduation,
- Program completion rate,
- Graduate satisfaction, and
- Employer satisfaction.

5.3 Makes available to the general public program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

Analysis and Actions

5.4 Analyzes and shares student learning outcome data and program effectiveness data to foster continuous program improvement.

5.5 Periodically evaluates its assessment plan to assure continuous program improvement.
5.1 Develops an assessment plan that, at a minimum, measures the program’s student learning outcomes in relation to the following goals: clinical competence, critical thinking, professionalism, and communication skills.

Explanation:
Assessment is the systematic collection, review, and use of information to improve student learning and educational quality. An assessment plan helps assure continuous improvement and accountability. Minimally, the plan must include a separate goal in relation to each of the following: clinical competence, critical thinking, professionalism, and communication skills. The plan must include student learning outcomes, measurement tools, benchmarks, and identify timeframes and parties responsible for data collection.

For additional information regarding assessment, please refer to www.jrcert.org.

Required Program Response:
Provide a copy of the program’s current assessment plan.

Possible Site Visitor Evaluation Methods:
- Review of assessment plan
- Review of assessment tools
- Interviews with faculty
5.2 Documents the following program effectiveness data:
- Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
- Five-year average job placement rate of not less than 75 percent within twelve months of graduation,
- Program completion rate,
- Graduate satisfaction, and
- Employer satisfaction.

Explanation:
Credentialing examination, job placement, and program completion data must be reported annually to the JRCERT. Graduate and employer satisfaction data must be collected as part of the program’s assessment process.

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

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

Program completion rate is defined as the number of students who complete the program within 150% of the stated program length. The program must establish a benchmark for its program completion rate. The program specifies the entry point (e.g., required orientation date, final drop/add date, final date to drop with 100% tuition refund, official class roster date, etc.) used in calculating program’s completion rate.

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

Required Program Response:
Provide actual outcome data in relation to program effectiveness.

Possible Site Visitor Evaluation Methods:
- Review of program effectiveness data
- Interviews with faculty
5.3 Makes available to the general public program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

**Explanation:**
Program accountability is enhanced by making its effectiveness data available to the program’s communities of interest and the general public. In efforts to increase accountability and transparency, the program must publish, at a minimum, its five-year average credentialing examination pass rate, five-year average job placement rate, and program completion rate data on its Web site to allow the public access to this data. The program effectiveness data should clearly identify the sample size associated with each associated measure (i.e., number of first time test takers, number of graduates actively seeking employment, number of graduates).

Additionally, the JRCERT will post five-year average credentialing examination pass rate, five-year average job placement rate, and program completion rate data at [www.jrcert.org](http://www.jrcert.org). The program must publish the JRCERT URL ([www.jrcert.org](http://www.jrcert.org)) to allow the public access to this data.

**Required Program Response:**
- Provide copies of publications that contain the program’s program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate).
- Provide samples of publications that document the availability of program effectiveness data via the JRCERT URL address from the institution’s/program’s Web site.

**Possible Site Visitor Evaluation Methods:**
- Review of program publications
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with students
5.4 **Analyzes and shares student learning outcome data and program effectiveness data to foster continuous program improvement.**

*Explanation:*
Analysis of student learning outcome data and program effectiveness data allows the program to identify strengths and areas for improvement to bring about systematic program improvement. This analysis also provides a means of accountability to communities of interest. It is the program’s prerogative to determine its communities of interest.

The analysis must be reviewed with the program’s communities of interest. One method to accomplish this would be the development of an assessment committee. The composition of the assessment committee may be the program’s advisory committee or a separate committee that focuses on the assessment process. The committee should be used to provide feedback on student achievement and assist the program with strategies for improving its effectiveness. This review should occur at least annually and must be formally documented.

For additional information regarding assessment, please refer to [www.jrcert.org](http://www.jrcert.org).

*Required Program Response:*
- Describe how the program analyzes student learning outcome data and program effectiveness data to identify areas for program improvement.
- Describe how the program shares its student learning outcome data and program effectiveness data with its communities of interest.
- Describe examples of changes that have resulted from the analysis of student learning outcome data and program effectiveness data and discuss how these changes have led to program improvement.
- Provide a copy of the program’s actual student learning outcome data since the last accreditation award. This data may be documented on previous assessment plans or on a separate document.
- Provide documentation that student learning outcome data and program effectiveness data has been shared with communities of interest.

*Possible Site Visitor Evaluation Methods:*
- Review of student learning outcome data and program effectiveness data to support the assessment plan
- Review of representative samples of measurement tools used for data collection
- Review of aggregate data
- Review of meeting minutes related to the assessment process
- Interviews with faculty
5.5 Periodically evaluates its assessment plan to assure continuous program improvement.

Explanation:
Identifying and implementing needed improvements in the assessment plan leads to programmatic improvement and renewal. As part of the assessment cycle, the program should review its assessment plan to assure that assessment measures are adequate and that the assessment process is effective in measuring student learning outcomes. At a minimum, this evaluation must occur at least every two years and be documented in meeting minutes.

For additional information regarding assessment, please refer to www.jrcert.org.

Required Program Response:
- Describe how this evaluation has occurred.
- Provide documentation that the plan is evaluated at least once every two years.

Possible Site Visitor Evaluation Methods:
- Review of meeting minutes related to the assessment process
- Review of assessment committee meeting minutes, if applicable
- Interviews with faculty
Summary for Standard Five

1. List the major strengths of Standard Five, in order of importance.

2. List the major concerns of Standard Five, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
Standard Six

**Institutional/Programmatic Data**

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

Objectives:
In support of Standard Six, the program:

**Sponsoring Institution**

6.1 Documents the continuing institutional accreditation of the sponsoring institution.

6.2 Documents that the program’s energized laboratories are in compliance with applicable state and/or federal radiation safety laws.

**Personnel**

6.3 Documents that all faculty and staff possess academic and professional qualifications appropriate for their assignments.

**Clinical Settings**

6.4 Establishes and maintains affiliation agreements with clinical settings.

6.5 Documents that clinical settings are in compliance with applicable state and/or federal radiation safety laws.

**Program Sponsorship, Substantive Changes, and Notification of Program Officials**

6.6 Complies with requirements to achieve and maintain JRCERT accreditation.
6.1 Documents the continuing institutional accreditation of the sponsoring institution.

Explanation:
The goal of accreditation is to ensure that the education provided by institutions meets acceptable levels of quality. The sponsoring institution must be accredited by:

- an agency recognized by the United States Department of Education (USDE) and/or Council for Higher Education Accreditation (CHEA),
- The Joint Commission (TJC), or
- equivalent standards.

Required Program Response:
Provide documentation of current institutional accreditation for the sponsoring institution. This may be a copy of the award letter, certificate, or printout of the institutional accreditor’s Web page.
6.2 Documents that the program’s energized laboratories are in compliance with applicable state and/or federal radiation safety laws.

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

Required Program Response:
Provide certificates and/or letters for each energized laboratory documenting compliance with state and/or federal radiation safety laws.
6.3 **Documents that all faculty and staff possess academic and professional qualifications appropriate for their assignments.**

- **Full-time Program Director:**
  
  Holds, at a minimum, a master’s degree,

  Is proficient in curriculum design, program administration, evaluation, instruction, and academic advising,

  Documents three years clinical experience in the professional discipline,

  Documents two years of experience as an instructor in a JRCERT-accredited program, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).

- **Full-time Clinical Coordinator:**
  
  Holds, at a minimum, a baccalaureate degree,

  Is proficient in curriculum development, supervision, instruction, evaluation, and academic advising,

  Documents two years clinical experience in the professional discipline,

  Documents a minimum of one year of experience as an instructor in a JRCERT-accredited program, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).

- **Full-time Didactic Program Faculty:**
  
  Holds, at a minimum, a baccalaureate degree,

  Is qualified to teach the subject,

  Is knowledgeable of course development, instruction, evaluation, and academic advising,

  Documents two years clinical experience in the professional discipline, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).
Part-time Didactic Program Faculty

Holds academic and/or professional credentials appropriate to the subject content area taught and

Is knowledgeable of course development, instruction, evaluation, and academic advising.

- Clinical Instructor(s):

  Is proficient in supervision, instruction, and evaluation,

  Documents two years clinical experience in the professional discipline, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the clinical setting is located).

- Clinical Staff:

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the clinical setting is located).

**Explanation:**
Appropriate knowledge, proficiency, and certification (if appropriate) provide a foundation that promotes a sound educational environment.

Faculty and staff must possess academic and professional qualification(s) appropriate for their assignment. Clinical instructors and clinical staff supervising students’ performance in the clinical component of the program must document ARRT registration (or equivalent) or other appropriate credentials. Appropriate credentials, other than ARRT registration (or equivalent), may be used for qualified health care practitioners supervising students in specialty areas (e.g., registered nurse supervising students performing patient care skills, phlebotomist supervising students performing venipuncture, etc.).

**Required Program Response:**

- For all program officials not previously identified on the program’s database, submit a request for recognition of program officials including a current curriculum vitae and documentation of current registration by the American Registry of Radiologic Technologists* or equivalent.

- For all currently recognized program officials [program director, educational coordinator (if applicable), full-time didactic faculty, and all clinical preceptors], submit a current registration by the American Registry of Radiologic Technologists* or equivalent.

*These may be copies of current registration cards or “ARRT Identification” page available at [www.arrt.org](http://www.arrt.org).
6.4 Establishes and maintains affiliation agreements with clinical settings.

Explanation:
Formalizing relations between the program and the clinical setting helps assure the quality of clinical education by delineating appropriate responsibilities of the program and the clinical setting. An appropriate termination clause assures that students will have an opportunity to complete the clinical education component. The JRCERT defines an affiliation agreement as a formal written understanding between an institution sponsoring the program and an independent clinical setting.

An affiliation agreement must identify the responsibilities of all parties and, specifically, must address student supervision, student liability, and provide adequate notice of termination of the agreement. An affiliation agreement is not needed for clinical settings owned by the sponsoring institution; however, a memorandum of understanding between the clinical setting and the sponsoring institution is recommended. At a minimum, the memorandum should address responsibilities of both parties and student supervision.

Required Program Response:
Provide copies of current, signed affiliation agreements with each clinical setting.
6.5 **Documents that clinical settings are in compliance with applicable state and/or federal radiation safety laws.**

*Explanation:*
Compliance with applicable laws promotes a safe environment for students and others. Records of compliance must be maintained for each clinical setting. Clinical settings may be recognized by The Joint Commission (TJC), DNV Healthcare, Inc., Healthcare Facilities Accreditation Program (HFAP), or an equivalent agency, or may hold a state-issued license.

*Required Program Response:*
Provide letters, certificates, or printouts of Web pages demonstrating the current recognition status of each clinical setting.
6.6 Complies with requirements to achieve and maintain JRCERT accreditation.

Explanation:
Programs must comply with JRCERT policies and procedures to maintain accreditation. JRCERT accreditation requires that the sponsoring institution has primary responsibility for the educational program and grants the terminal award.

Sponsoring institutions may include educational programs established in vocational/technical schools, colleges, universities, hospitals, or military facilities. The JRCERT also recognizes a consortium as an appropriate sponsor of an educational program. A consortium is two or more academic or clinical institutions that have formally agreed to sponsor the development and continuation of an educational program. The consortium must be structured to recognize and perform the responsibilities and functions of a sponsoring institution.

The JRCERT does not recognize branch campuses. The JRCERT requires that each program location have a separate accreditation award.

Additionally, the JRCERT will not recognize a healthcare system as the program sponsor. A healthcare system consists of multiple institutions operating under a common governing body or parent corporation. A specific facility within the healthcare system must be identified as the sponsor.

The JRCERT requires programs to maintain a current and accurate database. Updates should be reflected within thirty (30) days of effective change date. Additionally, the JRCERT requires notification of substantive changes within thirty (30) days of implementation.

Required Program Response:
- Report any database changes.
- Report any substantive change not previously submitted.
Summary for Standard Six

1. List the major strengths of Standard Six, in order of importance.

2. List the major concerns of Standard Six, in order of importance.

3. Provide the program’s plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.
A. Program/Sponsoring Institution Responsibilities

1. Applying for Accreditation

   The accreditation review process conducted by the Joint Review Committee on Education in Radiologic Technology (JRCERT) can be initiated only at the written request of the chief executive officer or an officially designated representative of the sponsoring institution.

   This process is initiated by submitting an application and self-study report, prepared according to JRCERT guidelines, to:

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

2. Administrative Requirements for Maintaining Accreditation

   a. Submitting the self-study report or a required progress report within a reasonable period of time, as determined by the JRCERT.

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

   c. Informing the JRCERT, within a reasonable period of time, of changes in the institutional or program officials, program director, clinical coordinator, full-time didactic faculty, and clinical instructor(s).

   d. Paying JRCERT fees within a reasonable period of time.

   e. Returning, by the established deadline, a completed Annual Report.

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

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

Program failure to meet administrative requirements for maintaining accreditation will lead to being placed on Administrative Probationary Accreditation and result in Withdrawal of Accreditation.
B. JRCERT Responsibilities

1. Administering the Accreditation Review Process

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

The accreditation process includes a site visit.

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

The JRCERT is responsible for recognition of clinical settings.

2. Accreditation Actions

JRCERT accreditation actions for Probation may be reconsidered following the established procedure.

JRCERT accreditation actions for Accreditation Withheld or Accreditation Withdrawn may be appealed following the established procedure. Procedures for appeal are available at www.jrcert.org.

All other JRCERT accreditation actions are final.

A program or sponsoring institution may, at any time prior to the final accreditation action, withdraw its request for initial or continuing accreditation.

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

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

curriculum: American Society of Radiologic Technologists
15000 Central Avenue, S.E.
Albuquerque, NM 87123-3909
(505) 298-4500
www.asrt.org

certification: American Registry of Radiologic Technologists
1255 Northland Drive
St. Paul, MN  55120-1155
(651) 687-0048
www.arrt.org