



**RADIOLOGIC TECHNOLOGY  
STUDENT HANDBOOK  
2020-2021**

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## **OVERVIEW OF THE RADIOLOGIC TECHNOLOGY EDUCATION PROGRAM**

The Associate of Applied Science (AAS) degree in Radiologic Technology prepares students for a career in x-ray imaging as a Radiologic Technologist. The program is full-time, spanning 21 month/5 semesters, and is held at the Arvada campus, with clinical internships at area hospitals and clinics. The program is integrated with classroom and clinical internship instruction occurring simultaneously. Basic clinical training is completed on-campus before students enter clinical rotation. A capstone registry review course is required during the final semester prior to graduation. Due to the fast-paced and rigorous nature of the program, students are encouraged to have little to no outside employment responsibilities while enrolled. Graduates will be eligible to sit for the ARRT certification exam to become a Registered Technologist in Radiography, RT(R).

### **PROGRAM POLICIES**

This handbook is as a guide for radiologic technology (RTE) students accepted to Red Rocks Community College (RRCC). Students should familiarize themselves with the information contained in this book, and sign the student acknowledgement form. Students will assume the responsibility for observing the policies as stated in the current college handbook, Radiologic Technology Student Handbook, and syllabi. These policies may be altered or revised at any time as needed.

## FACULTY CONTACT INFO

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## **GENERAL INFORMATION**

### **RRCC VISION STATEMENT**

We envision Red Rocks as a national and international leader in community college education that is recognized for accomplishments of our students' goals, engagement with our community, empowerment in our workplace, and commitment to our values.

### **RRCC MISSION STATEMENT**

Our mission is to provide students with opportunities for growth and development that set the foundation for self-directed learning, academic achievement, and career accomplishment. We do this through high quality innovative educational programs that convey our passion for learning, our commitment to excellence, our dedication to our students, and the communities we serve.

### **RRCC VALUE STATEMENT**

We value integrity, collaboration, learning, inclusiveness, and communication.

### **RTE MISSION STATEMENT**

Our Radiologic Technology Program is committed to excellence in education demonstrated by providing effective, hands-on classroom and clinical instruction. Graduates of the program provide safe, person-centered care and quality diagnostic services to the community as entry-level radiologic technologists.

### **RTE PROGRAM GOALS & STUDENT LEARNING OUTCOMES**

- Goal #1: Students will be clinically competent
  - Students will demonstrate competency in patient positioning
  - Students will demonstrate competency in technical skills
  - Students will demonstrate competency in patient care and patient safety skills
- Goal #2: Students will communicate effectively
  - Students will demonstrate competency in verbal communication skills
  - Students will demonstrate competency in written communication skills
- Goal #3: Students will use critical thinking and problem solving skills
  - Students will adapt exam methods to accommodate challenging scenarios
  - Students will evaluate images for diagnostic quality
- Goal #4: Students will demonstrate professionalism
  - Students will evaluate the concepts of ethics and professionalism in a medical setting
  - Students will exhibit professional behavior in the clinical setting
- Goal #5: Students will serve their communities as radiologic technologists upon graduation\*
  - Students will complete the program
  - Students will pass the national registry exam
  - Students will be employed

\* To view current statistical data for these outcomes, please visit <https://www.rrcc.edu/radiologic-technology>

## ACCREDITATION

RRCC is accredited by The Higher Learning Commission (Commission on Institutions of Higher Education of the North Central Association of Colleges and Schools), and its programs are approved by the State Board for Community Colleges and Occupational Education and Colorado Community College System.

The RTE program is also accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT).

The Joint Review Committee on Education in Radiologic Technology  
20 North Wacker Drive, Suite 2850  
Chicago, Illinois 60606-3182  
312-704-5300  
Email: mail.jrcert.org  
For more information, or go to [www.jrcert.org](http://www.jrcert.org)

## APPLICATION AND SELECTION PROCEDURE

Students wishing to learn more about the application and candidate selection process may visit the following web pages:

RTE admissions requirements: <http://www.rccc.edu/radiologic-technology/admissions-requirements>  
Applying to the RTE program: <http://www.rccc.edu/radiologic-technology/apply>

Applicants who are prohibited by any RRCC clinical affiliate to attend their facilities will not be eligible to participate in the program. Entry into the program is contingent upon completing all prerequisites and undergoing a screening process which includes a background check/drug screen. A failed background check/drug screen may disqualify applicants from participation in the program. Completion of the program does not guarantee eligibility for licensing certifications or employment upon graduation. It is the applicant's responsibility to find out if I meet the specific eligibility requirements of licensing bodies and/or potential employers.

## COURSE POLICIES

### COURSE DESCRIPTIONS

Students wishing to view current course descriptions may visit the following web page:  
<http://www.rccc.edu/schedule-catalog>

### CLASSROOM & LAB ATTENDANCE POLICY

The information presented in class/lab will directly affect the medical diagnosis, treatment and safety of patients. Therefore, students are expected to attend all classes and assigned labs. Students who are frequently absent, tardy, or leaving early may have their course grade reduced. Attendance incidents are defined as follows:

- **Tardy (T):** arriving after class/lab begins
- **Leave Early (LE):** leaving prior to class/lab dismissal
- **Absence (A):** missing entire class/lab



## ATTENDANCE INCIDENT GRADE DEDUCTIONS

- The first incident carries no grade deduction
- The second incident results in a 1% grade deduction
- The third incident results in a 3% grade deduction
- The fourth incident results in a 5% grade deduction
- The fifth incident results in a 10% grade deduction
- The sixth incident results in a 15% grade deduction
- Seven or more incidents result in a failing course grade and the student may not be eligible to continue in the program

Students should note that each attendance incident is considered a single incident. For example, a student who is late twice and absent twice will have their course grade deducted 5%. **Grade deductions apply only to the course, not the whole program.** After the course is over, the student's attendance record is re-set.

## UNEXCUSED VS. EXCUSED ATTENDANCE INCIDENTS

All attendance incidents are initially considered unexcused and may result in a course grade deduction. A student may request to have an incident excused due to extenuating circumstances in order to have a course grade deduction waived. The student must submit a request in writing to the instructor, along with adequate documentation, such as a physician's note, vehicle repair receipt, etc. All determinations regarding attendance incidents will be made on a case by case basis, at the discretion of the instructor. The following are some common examples of extenuating vs. non-extenuating circumstance:

Extenuating	Non-Extenuating
Bereavement/Funeral	Childcare
Illness or Injury	Work
Wedding	Vacation
Jury Duty	Traffic/Road Conditions
Family Emergency	Inclement weather (Campus open)
Sudden vehicle break-down	Over-slept
Adoption/Birth of Child	Routine Appointments

Once a student reaches 4 excused or unexcused attendance incidents in a particular course, they will receive a written advising. Further attendance incidents may affect the course grade and/or eligibility to remain in the program.

## GRADING SCALE

Students in the medical imaging programs are subject to the below grade scale.

Grade	%
A	94-100
B	85-93
C	75-84
F	0-74

## ACADEMIC STANDARDS AND PROGRAM PROGRESSION

**Students must maintain a "C" grade or better to continue in the program.** This grade will be composed of the specific criteria as outlined in the course syllabus and student handbook. RTE students who receive a failing grade in any course may no longer be eligible to continue on in the program.

## STUDENT CONDUCT

Students must adhere to the standards of conduct as set forth by RRCC. To view current standards in the RRCC Student Handbook, visit <http://www.rccc.edu/student-life/handbook>. Students found in violation of the student code of conduct may be subject to disciplinary action or dismissed from the program.

## PROFESSIONALISM

At all times, students are expected to conduct themselves in a professional manner. Professionalism includes establishing positive relationships and interactions with peers, colleagues, and faculty; attending respectfully to others who are sharing information with the class; being flexible to unforeseen changes in schedules and assignments. All communications in this course, be it written, verbal, or online will be carried out in a professional and courteous manner.

## HIPAA

Students will receive instruction regarding HIPAA compliance in RTE 101 and just prior to clinical internship. Students are expected to comply with HIPAA regulations at all times. Patient information is not to be shared with others in verbal, written or online contexts. For example, students are strictly forbidden to share patient information via social media.

## ACADEMIC DISHONESTY

Academic dishonesty will not be tolerated and may result in dismissal from the program. Academic dishonesty includes, but is not limited to (1) Falsification of paperwork such as comps, timesheets, etc.; (2) use of any unauthorized assistance in taking quizzes, tests, or examinations; (3) dependence upon the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or completing other assignments; (4) the acquisition of tests or other academic materials belonging to the college faculty or staff without permission, or (5) plagiarism or the use of, by paraphrase or direct quotation without correct recognition, the published or unpublished works of another person. The use of materials generated by agencies engaged in "selling" term papers is also plagiarism. Writing assignments must be 70-80% original. This means that the majority of the work is done in the student's own words, without relying heavily on the works of others.

RTE students are subject to the all policies and procedures of the RTE Student Handbook, RRCC Handbook and course syllabi. The RRCC Student Handbook is your most current source of dates, resources, contacts, and policies: <http://www.rccc.edu/student-life/handbook>.

## **MOBILE DEVICE USE**

Excessive mobile device use is considered disruptive, disrespectful and unprofessional. Students who exhibit this behavior in the classroom, lab or clinical environment may be asked to leave and the missed time will be subject to the attendance policy.

## **DISCIPLINARY & GRIEVANCE PROCEDURE**

Students found in violation of any of the policies found in the Radiologic Technology Student Handbook, RRCC Student Handbook, or course syllabi will be subject to disciplinary action. The student will be notified of the violation and be given an opportunity to discuss the issue with the supervising faculty member. One or more of the following sanctions may be imposed: a warning (via a verbal or written advising), probation, academic consequences, suspension, or program dismissal. Multiple written advisings may result in program dismissal. Should the student disagree with the disciplinary sanction, they may follow the appeal and/or grievance procedure found in the RRCC Student Handbook. Students who are dismissed from the program may not be eligible for re-entry.

## **ACCESSIBILITY**

### **ACCESSIBILITY STATEMENT**

RRCC complies with the Americans with Disabilities Act, wherein qualified students with disabilities are provided accommodations upon request, to assist in their academic success. If you have questions about accessibility or accommodations, please contact Accessibility Services [www.rrcc.edu/accessibility-services/](http://www.rrcc.edu/accessibility-services/).

### **NON-DISCRIMINATION STATEMENT**

Red Rocks Community College is committed to diversity in its people and programs. The College prohibits all forms of discrimination and harassment including those that violate federal and state law or the State Board for Community Colleges and Occupational Education Board Policies 3-120 and/or 4-120. The College does not discriminate on the basis of sex/gender, race, color, age, creed, national or ethnic origin, physical or mental disability, veteran status, pregnancy status, religion, genetic information, gender identity, or sexual orientation in its employment practices or educational programs and activities. Red Rocks Community College will take appropriate steps to ensure that the lack of English language skills will not be a barrier to admission and/or participation in vocational education programs.

RRCC has designated Arnie Oudenhoven as its Affirmative Action Officer/Equal Opportunity Administrator/Title IX Administrator with the responsibility to coordinate its civil rights compliance activities and grievance procedures. Report all concerns or complaints relating to discrimination or harassment to the Title IX/EO Coordinator(s). For information, contact Arnie Oudenhoven Executive Director, HR, Title IX Coordinator, Title VII/Equal Opportunity Coordinator, ADA/Sec 504 Coordinator, via mail at 13300 West Sixth Avenue, Lakewood, CO 80228. Phone 303.914.6298, or email [arnie.oudenhoven@rrcc.edu](mailto:arnie.oudenhoven@rrcc.edu).

Deborah Houser, Assistant Director of Human Resources/Deputy Title IX Coordinator, 303.914.6224 [deborah.houser@rrcc.edu](mailto:deborah.houser@rrcc.edu). 13300 West Sixth Avenue, Lakewood, CO 80228.

You may also contact the Office for Civil Rights, U.S. Department of Education, Region VIII, Federal Office Building, 1244 North Speer Boulevard, Suite 310, Denver, CO 80204, telephone (303) 844-3417.

## **HEALTH AND SAFETY POLICIES**

### **PHYSICAL & HEALTH REQUIREMENTS**

In keeping with the accreditation standard of a curriculum that reflects assessment of affective, cognitive, and psychomotor domains, the Medical Imaging Program has adopted technical standards which outline the health and physical requirements for students enrolled in the program. These standards apply to all candidates for admission and to all students at all times during training. Students who experience a health status change in which they no longer meet the program's physical and health requirements must notify the program director or clinical coordinator immediately. For detailed information, please see Physical Requirements (Appendix B).

A physical examination is required for entry to the program. Practitioners who are authorized to complete the physical exam form include any licensed physician, a physician assistant with a licensed physician or an advanced practice nurse whose training is in adult or family medicine. The student must also submit a current immunization record that documents compliance with program vaccination requirements. Students are required to undergo vaccination and/or testing for certain conditions in order to decrease the risk of disease transmission to my patients during clinical internship.

Students are responsible for their own health prior to admission and during the entire educational experience. Students must provide proof of active medical insurance coverage while in the program and are responsible for maintaining coverage. During the student's clinical experience, they may be exposed to a variety of illnesses and diseases and should take the necessary precautions to remain in good health. The Programs are required by the accreditation standards for health career programs to document that students do not have any health condition which could endanger the health or well-being of patients, faculty or to the students themselves. If a student is told or believes they may have a condition which could endanger the health or well-being of others or themselves, they must immediately contact the Program Director at 303.914.6032.

### **BACKGROUND CHECK & DRUG SCREENS**

Applicants are required to complete a background/drug screen within 90 days after they are offered a spot in the program and may be subject to additional screenings while in the program. Students with a failed background check/drug screen are ineligible for participation in the program. To see what criminal offenses disqualify students from participating in the program, please visit the webpage: <http://dev.rccc.edu/sites/default/files/u837/Disqualifying%20criminal%20offenses%20CCCS.pdf>. Entry into the program does not guarantee eligibility for licensing certifications or employment upon graduation. Students with criminal backgrounds should find out if they meet the specific eligibility requirements of licensing bodies and/or potential employers prior to pursuing a healthcare career.

### **COMMUNICABLE DISEASE POLICY**

As healthcare providers, being exposed to contagious disease is an inherent risk. During their training, students may be exposed to a variety of illnesses and must take precautions to limit exposure to themselves and their patients. Students who know or have reason to believe that they have a communicable disease are expected to seek professional medical advice and determine measures which can be taken to safeguard their own health and prevent the spread of the disease to others. RRCC

and/or the clinical internship affiliate reserve the right to exclude a student with a communicable disease from participating in the program if it is found that, based on a medical determination, such restriction is necessary to protect the person with the illness and/or other students, staff and patients.

Communicable diseases include, but are not limited to: Chickenpox, Conjunctivitis (pink eye), Hepatitis A, B, C and D, HIV/AIDS, Influenza, Measles, Meningitis, MRSA, Tuberculosis, Whooping cough, gastrointestinal infections, respiratory infections, leprosy, and tuberculosis. For a current list of communicable diseases, please visit [www.cdc.gov](http://www.cdc.gov). Individuals with a fever of 100 degrees or higher should stay home during and for at least 24 hours after they no longer have a fever.

Students who have contracted a communicable illness must report the condition to the program director or clinical coordinator, and clinical internship affiliate (if applicable). Failure to report may result in probation and possible dismissal from the program. RRCC, under the advisement of the clinical internship affiliate, will make a determination as to whether the student can attend clinical during the course of a communicable illness. If the student is not able to attend, missed time must be made-up in accordance with the clinical syllabus attendance policy. The clinical internship affiliate may require a physician's note confirming that the student is no longer contagious before allowing the student to attend clinical again.

Students must follow OSHA guidelines regarding universal precautions at clinical. For more information, please visit [www.osha.gov](http://www.osha.gov). Clinical facilities who authorize student participation in exams with patients under airborne precautions must undergo an OSHA-approved airborne N-95 respirator mask fitting and training carried out by the clinical site. If the student is not fitted for this specialized mask, they are not allowed to enter airborne precaution rooms.

In the event of an epidemic or pandemic, RRCC will follow Colorado Department of Public Health & Environment (CDHPE) and Colorado Department of Education (CDE) recommendations and restrictions on-campus. On-campus classes may be moved to online format if appropriate. Students participating in clinical internship will not be expected to provide direct care to patients diagnosed with the illness and contact with patients suspected of having the illness will be limited. Students may be given the opportunity to opt-out of in-person educational activities if they wish to limit their exposure. However, opting-out may result in delays, including a postponed graduation.

## **NEEDLE STICKS**

Students who experience a needle stick must report it immediately to their supervising technologist and the Clinical Coordinator. Students should take every precaution to prevent injuries caused by accidental needle sticks. Accidental needle sticks may cause the student or patient to be placed in potential danger of contracting infectious diseases, such as hepatitis or AIDS.

To prevent needle stick injuries, students should practice techniques learned in their didactic courses; including not recapping needles and placing needles or scalpels immediately into a Sharps container.

## **EMERGENCY PREPAREDNESS**

RRCC's current emergency operations plan can be found at:

<https://www.rrcc.edu/sites/default/files/campus-police-EmergencyPlan.pdf>

This plan outlines organizational administration, coordination, communications, logistics, and procedures involved in emergencies such as bomb threat, active shooter, hazardous materials, severe weather, fire, etc.

## **INJURY DURING CLINICAL INTERNSHIP**

If a student has an exposure to a contaminated or potentially contaminated instrument or is otherwise injured during clinical, a workman's comp procedure must be initiated. **Students are urged to complete this procedure for any injury, no matter the severity.**

1. If the injury is a threat to life or limb, notify your clinical site instructor or lead technologist and proceed to the nearest ED.
2. If the injury is not life or limb threatening, the student should proceed to a Concentra Medical Center immediately.
3. Contact RRCC Human Resources at 303-914-6297 to file an incident report. This should be done ASAP but no later than 4 days post-injury.
4. Call or email the clinical coordinator ASAP to report the injury.

**Students are not cleared to attend classes/clinical until injuries are assessed and the student is cleared by a physician.**

## **STUDENT PREGNANCY**

Declaration of pregnancy is voluntary and can be withdrawn at any time. Written declaration or withdrawal of declaration is required. Students are given the option for continuance in the program without modification. Students can submit a written withdrawal of their declaration at any time. If no declaration is made, the student will continue in the program without modification.

After declaration is made, the student will receive:

- An advising session to discuss radiation safety during pregnancy.
- A fetal radiation badge to monitor exposure to the fetus. The student may choose to stay out of radiation areas until the fetal badge is received. The student's fetal radiation dose will be monitored by the RSO and the student will be advised should they receive a dose over the NRC monthly dose limit of 5 mrem.

\*If the student ever feels that they are working in an unsafe area or under conditions that they feel are detrimental to themselves or their fetus, they should stop immediately and report to the Program Director.

\*Students placed under any physician restrictions must immediately notify the Program Director and provide documentation of the restrictions.

### **TO DECLARE PREGNANCY, STUDENTS MAY CHOOSE ONE OF THE FOLLOWING OPTIONS:**

- Student declares pregnancy and continues in the program without modification
- Student declares pregnancy and chooses to take leave from the program for a specified period of time. The student may be eligible to re-enter the program at a later date. The terms of re-entry will be documented and agreed upon by the student and Program Director. The student must complete, upon return, **ALL** requirements for graduation, including length of time in the program, required courses and clinical competencies and rotations. No degree will be issued until all requirements have been successfully met.

### **TO WITHDRAW PREVIOUS PREGNANCY DECLARATION, STUDENTS MAY CHOOSE THE FOLLOWING OPTION:**

- Student wishes to withdraw pregnancy declaration and continue in the program without modification.

## **MRI SAFETY**

RTE students must complete an MRI safety screening form prior to attending clinical. Students may enter their clinic site's MRI suite. It is important for the student to practice MRI safety precautions prior to entering the static magnetic field.

In MRI, the magnet is always on; therefore, entering the magnetic field or MRI suite with an implanted device, ferromagnetic object, or any other non-MRI safe item is strictly prohibited. For additional information, review the American College of Radiology's guidelines for MRI Safety, <http://onlinelibrary.wiley.com/doi/10.1002/jmri.24011/pdf>.

## **RADIATION SAFETY**

Students will learn safe radiation protection practices within their didactic courses. Each student is expected to follow these learned procedures throughout the course of their clinical experience.

The RTE program practices the ALARA principle for radiation protection. Students of the program shall practice radiation safety principles on all patients, healthcare providers and themselves, regardless of age. All RTE students and faculty are subject to the occupational exposure limits as stated by the *Summary of Recommendations No. 116* in the National Council on Radiation Protection Measurements (NCRP). <http://ncrponline.org/wp-content/themes/ncrp/PDFs/Summary-NCRP-Report-No-148.pdf>

### **GUIDELINES FOR PERSONAL DOSIMETERS**

Students and faculty who work with x-ray equipment will be supplied with a personal radiation dosimeter. This dosimeter must be worn at all times when in the clinical/lab setting. Students without a dosimeter are not permitted in the lab or at clinical. Students who miss lab/clinical due to a missing dosimeter will be subject to the attendance policy. **Clinical students who are not wearing their provided dosimeter will be asked to leave the clinic site and will not be allowed to return until they have it.**

### **EXCHANGING DOSIMETERS**

Students will be responsible for exchanging their dosimeters bi-monthly and must do so in-person, on-campus. Students who fail to exchange their dosimeter by the Radiation Safety Officer's (RSO) deadline will not be able to attend clinic until they do so. The RSO will conduct an investigation if the badge is not turned in on time or is lost.. Students who declare pregnancy will exchange the fetal dosimeter monthly. See pregnancy policy for more information.

### **LOST OR DAMAGED DOSIMETERS**

If a student loses their dosimeter, the RSO must be notified IMMEDIATELY so that a replacement may be requested from the service provider. The student is responsible for any cost associated with the replacement.

### **USE OF DOSIMETERS**

Dosimeters should be worn at the collar level, outside of the lead apron. Wear it so that the name tag faces toward the source of radiation.

### **STORAGE OF DOSIMETERS**

Always store your dosimeters in a safe place. Dosimeters should be protected from excessive heat,

moisture, and excessive light exposure. If the dosimeter is accidentally washed and/or dried the badge is ruined and will need to be replaced. The student must notify the RSO if improper storage has taken place.

### ADDITIONAL GUIDELINES FOR DOSIMETER USE

- Never share your badges or wear another person's badges. Each badge is intended to be worn by only the designated person.
- Do not intentionally expose badges to radiation. Intentional tampering with badges is a very serious matter.
- If you discover that your badges are contaminated, notify the RSO
- Do not wear your dosimeter when you receive a medical x-ray or other medical radiation treatment. Your dosimeters are intended to document occupational dose, not medical dose.
- Contact the RSO if you change your name, if your name is misspelled, or if any other information on the dosimeter is incorrect.
- Students who suspect they are pregnant should stay out of the exam rooms until they confirm the pregnancy. **Students are encouraged to disclose the pregnancy to the RSO so that they can acquire a fetal badge.** The fetal badge is worn at the waist level beneath the lead apron. For more information, see pregnancy policy.
- If you perform radiation work at another institution, it is the responsibility of that institution to provide you with a separate dosimeter.

### RADIATION DOSE REPORTS & DOSE LIMITS

The Luxel body badge contains a sheet of radiation-sensitive aluminum oxide sealed in a light and moisture proof packet. When atoms in the aluminum oxide sheet are exposed to radiation, electrons are trapped in an excited state until irradiated with a specific wavelength of laser light. The released energy of excitation, which is given off as visible light, is measured to determine radiation dose. The packet contains a series of filters designed so that the energy and type of radiation can be determined. In order for the radiation type and energy to be determined, the dosimeter must be worn so that the front of the dosimeter faces towards the source of radiation. Luxel body dosimeters are among the most sensitive dosimeters available. The minimum detectable dose is 1 millirem for x-rays.

Student radiation exposure data is maintained and monitored by the RSO and is available to students upon request. Students will be advised if they have received a dose beyond the acceptable threshold.

### DOSE REPORTS

Once dose reports are received the RSO will review to ensure appropriate dose limits. The report consists of the following measurements:

- Deep Dose Equivalent (DDE)
  - Records penetrating radiations such as x-ray or gamma radiation. DDE are applied against the whole body dose limit.
- Lens Dose Equivalent (LDE)
  - Records dose to the lens of the eyes is due to an intermediate range of radiations and energies. LDE are applied against the lens of the eye dose limit.
- Shallow Dose Equivalent (SDE)
  - Records less penetrating radiations such as beta radiation and low energy x-rays. SDE are applied against the skin dose limit.



The minimum reportable dose for dosimeters is 1 mrem for x-rays and gamma rays or 10 mrem for energetic beta radiation. If a dose of "M" is reported, the total dose received was minimal, i.e., less than the minimum reportable dose. The RSO has established investigational levels at doses that are  $\geq 12\%$  of the federal and state dose limits. **If a dose is reported that exceeds the investigational level, the RSO will contact the student and conduct an investigation and provide counseling to minimize dose in the future.**

## EXPOSURE HISTORY

For a copy of your radiation exposure history, contact the RSO. The RSO maintains radiation exposure records indefinitely. Current and former students may request their radiation exposure history. A signed release statement must accompany any request from the graduate's new employer.

	RRCC Investigational Dose Limits (mrem)			NRC Dose Limits (mrem)		
	Bi-Monthly	Annual	Lifetime	Bi-Monthly	Annual	Lifetime
<b>DDE (Whole Body)</b>	<b>100</b>	1200	2160	833	5000	18000
<b>LDE</b>	<b>300</b>	3600		2500	15000	
<b>SDE (Extremity/Skin)</b>	<b>1000</b>	12000		8333	50000	
<b>Fetal</b>	<b>10</b>	120		83	500	
<b>General Public</b>	2	24		17	100	

*LIFETIME DOSE IS AGE X 1,000 MREMS. 18 YEARS WAS USED FOR THIS CHART.*

## PATIENT HOLDING PROCEDURES

Students must understand basic radiation safety practices prior to attending the clinical settings. Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic exposure when an immobilization method is the appropriate standard of care. **It would only be appropriate for a student to hold a patient as a last resort when no other method is available (immobilization device, a tech, parent/guardian, etc.). Students should carefully evaluate the proper course of action and be prepared to justify their decision if they hold a patient.**

## CLINICAL EDUCATION POLICIES AND PROCEDURES

### INTRODUCTION TO CLINICAL INTERNSHIPS

Internship is one of the most important aspects of the RTE program. Throughout the clinical internship, students apply what they have learned throughout the didactic portion of their medical imaging curriculum.

### CLINICAL SITE INSTRUCTORS

The Clinical Site Instructor is a staff technologist employed by the clinical facility who acts as a preceptor for RRCC. The instructor works under the direct supervision of the Director of Imaging Services, Department Supervisor, or imaging Lead. In addition to the job requirements and responsibilities of a staff medical imager, the clinical site instructor is responsible for the technical education of medical imaging students in accordance with the guidelines established by RRCC. These guidelines will follow the appropriate written standards for each program.

## CLINICAL SITE INSTRUCTOR RESPONSIBILITIES

In addition to the chain of command of the imaging facility, the Clinical Site Instructor may also be expected to fulfill the following duties:

- Coordinate student's clinical assignments with the appropriate scheduling personnel.
- Evaluate student exams for quality and quantity of work being performed.
- Evaluate student's clinical experience for both performance and professionalism.
- Complete appropriate forms supplied by the RRCC medical imaging student.
- Assign the medical imaging student within the scheduled department area to ensure full exposure to procedures performed at your facility.
- Counsel and guide students to help them develop the necessary skills and attitudes
- Report on a regular basis to the program representative of RRCC as to the status of each student in the internship program
- Give regular feedback on the student's progress to both the student and RRCC
- Perform other duties both educational and technical as they apply.
- Maintain competency in the professional discipline through continuing professional development.

## MINIMUM QUALIFICATIONS

- Member in good standing with a registry appropriate for the imaging modality in which the student is assigned.
- Two years' professional experience post registry.
- Skilled in oral and written communication.
- Skilled in interpersonal communication.
- Ability to work efficiently under pressure.
- Ability to willingly accept responsibility.

## CLINICAL SITE VISITORS

The Clinical Site Visitor is employed by RRCC and works under the direct supervision of the Clinical Coordinator and/or Program Director. The visitor's primary responsibilities are to observe and educate students in the clinical setting. The visitor's secondary responsibility is to check-in with the clinical site instructor and department leadership regarding student performance, etc. Visitors are to report back to the Clinical Coordinator or Program Director with any pertinent information. **Due to liability and contractual agreement, visitors are not to participate directly in any exams or services provided by the facility.** Should direct intervention be required during an exam, the visitor should seek assistance from a staff technologist.

## CLINICAL SITE VISITOR RESPONSIBILITIES

- Create a monthly visiting schedule and share with the Clinical Coordinator and Program Director
- Enforce all clinical policies and procedures
- Evaluate and document student's clinical performance and competence; including but not limited to Trajecsys evaluations, student observations, and endorsements
- Advise and mentor students to help them develop the necessary skills and attitudes needed to perform as medical imagers
- Maintain communication with the Clinical Site Instructor during site visits
- Complete a Trajecsys Comment Card if any student is found in violation of clinical policies
- Report on a regular basis to the Clinical Coordinator or Program Director with any concerns/issues

- Ensure the requirement of a 1:1 ratio of student and tech is being observed
- Ensure that students always have proper supervision from staff technologists.

### **MINIMUM QUALIFICATIONS**

- Member in good standing with a registry appropriate for the imaging modality in which the student is assigned.
- Two years' professional experience post registry.
- Skilled in oral and written communication.
- Skilled in interpersonal communication.
- Ability to work efficiently under pressure.
- Ability to willingly accept responsibility.

### **CLINICAL AFFILIATES**

Students admitted into the RTE program will have the opportunity to be assigned to any of the following clinical facilities (subject to change):

- Lutheran Medical Center
- Good Samaritan Medical Center
- Touchstone Imaging
- Kaiser Franklin
- St. Joseph's Hospital
- St. Anthony's Hospital
- 84<sup>th</sup> Neighborhood Clinic
- St. Anthony's North Medical Center
- Invision Sally Jobe Imaging Center

### **CLINICAL SELECTION PROCESS**

Students will be assigned to various clinic sites throughout the course of the program, at the discretion of the Clinical Coordinator or Program Director. Student preference may be taken into consideration; however, it is not guaranteed. Clinical assignments are based upon site availability and providing the student with an optimal experience.

### **TRANSPORTATION**

Students are responsible for providing their own transportation to clinical facilities. Most clinical sites are located within a 20-mile radius of Denver, but the program may send students to sites within a 100-mile radius. Students must be prepared to travel to any site that is assigned to them during their clinical education.

### **CLINICAL ELIGIBILITY**

Each clinic affiliate requires students to complete an orientation process which includes submitting required documentation and/or attending mandatory orientation meetings. These requirements must be completed by the deadline determined by the Clinical Coordinator and clinic site. If a student fails to complete their requirements by the prearranged deadline, they may not be eligible to attend clinical and the attendance policy will be applied to missed time. Students who are prohibited by any RRCC clinical affiliate to attend their facilities will not be eligible to participate in the program.

## TRAJECSYS REPORTING SYSTEM

Students are required to use the fee-based Trajecsyst Reporting system for various functions throughout the program. Students will be provided instruction on how and when to register and orient themselves to the system. Students who register for additional internship courses outside of the 21-month program may be responsible for additional costs to maintain their Trajecsyst accounts.

## TIME RECORDS & CLOCK-IN

Students are required to use the Trajecsyst Reporting System to clock in and out of clinic.

## DAILY LOG SHEETS

Students are required to use the Trajecsyst system to complete daily exam log records to document their clinical experience.

## DOCUMENTS AND PROTOCOLS

Students should check Trajecsyst for hospital protocols and additional documentation.

## UNIFORMS

Students are expected to follow the program dress code at all times. Student not wearing the appropriate uniform may be requested to leave the clinical facility until they can return in proper uniform. Any clinic time missed for this purpose will be subject to the attendance policy.

- Students are responsible for purchasing and maintaining their own clinic uniforms.
- A white scrub shirt worn with navy scrub pants must be worn by all students during clinical education. The uniform shirt will display the program patch on the left upper chest. Removable patches are not allowed.
- A long sleeved, short-white lab coat may be worn over the scrub top. The RRCC program patch must be sewn onto the left sleeve of the lab coat, one inch below the seam of the sleeve. Removable patches are not allowed.
- Uniforms must be neat, clean and pressed at all times in the clinical setting. The uniform must also fit correctly.
- Shoes must be of neutral color (e.g., brown, navy, black, white, grey) with very limited embellishment and OSHA compliant. No high-tops. Canvas or fabric shoes are not advised due to the possibility of allowing fluids to seep through. Open toe or open heel shoes are not permissible. Shoes must be clean and serviceable at all times in the clinical setting. Shoes are subject to approval by program faculty at all times. To avoid disease transmission, students are encouraged to have a dedicated pair of clinical shoes that they do not use outside the clinic setting.
- Appropriate undergarments must be worn at all times in the clinical setting and should not be visible through the scrub uniforms.
- A short or long sleeved undershirt may be worn underneath the scrub top. The undershirt cannot have any writing or design visible and short sleeves cannot hang below the sleeves of the scrub top. The undershirt should coordinate with the colors of the uniform and therefore should maintain a **neutral color** (brown, navy, black, white, grey).
- Students may be required to adhere to additional uniform policies that are site or department specific. For example, when rotating through the surgical department (or other sterile environments) students must adhere to the clinic site's uniform policy (no long sleeves, no nail

polish, etc.). Students not assigned to these unique areas must always wear their RRCC student uniform.

- The clinical facility name tag and RRCC Student ID must always be worn in the hospital or clinic at all times. Markers are considered part of the RTE student uniform, and should therefore remain with the student.

## MARKERS

Radiographic right and left markers are considered part of the RTE student uniform. They must be with the student at all times while at clinic and in the lab.

### PURCHASING MARKERS

Each student must purchase **two** sets of markers for use in the lab and clinical setting. This is at the student's expense and should be done prior to the start of the program. It is the student's responsibility to maintain **two or more** complete sets of markers at all times.

Markers will be verified and approved via Castlebranch.

### LOST MARKERS

If either the 'R' or 'L' marker are lost, the set is no longer complete. Students must have a replacement within **two weeks**. Replacement markers are purchased at the student's expense.

**Students may not attend clinic without markers.** If the student lost their primary set and their backup set, they may request temporary markers from the Clinical Coordinator.

Students who do not replace their markers and do not return the borrowed set to the Clinical Coordinator **after two weeks, will not be allowed to returned to clinic until their replacement markers are received.** The attendance policy will apply to missed time.

## PROFESSIONAL APPEARANCE & CONDUCT

Students will be expected to maintain the highest level of clinical professionalism at all times. Students who fail to adhere to the professional appearance and conduct requirements are subject to disciplinary action and/or grade deductions per the syllabus.

### INITIATIVE

Judgments about student initiative are constantly being made by staff, including hiring managers. Negative perceptions of student initiative can be formed within seconds and have long-term damaging effects. Such perceptions not only affect the student's ability to find employment, but also reflect poorly on the college. Therefore, staff and instructors will report students who fail to meet the following expectations:

- Students should be **standing up**, alert, attentive and ready to work at all times.
- **Sitting is not permitted** during down-time. If a student is given permission to sit, the student should politely state that they prefer to stand. Constructive activities such as cleaning, stocking, practicing, etc. should be done during down-time.
- Students should **never demonstrate reluctance or disinterest** in doing exams or other work duties.
- If assigned to an area where procedures are occurring, students must stay in that area and participate in all procedures

## PERSONAL HYGIENE

Students are expected to maintain appropriate personal hygiene. Bodily odors or strong fragrances can be unpleasant to patients who are ill or may trigger severe allergic reactions. Use of strongly-scented hygiene products are not allowed. Hand washing/sanitizing must be done prior to and after patient contact.

## MAKEUP

Makeup should be professional and not distracting or excessive.

## FINGERNAILS

Fingernails should be short and clean. The nail should not be visible when viewing the hand from the palm side. Nail polish may be worn if it is neutral in color and in good repair. **Nail polish is not acceptable in the operating room.** Artificial nails are not permitted at clinic.

## JEWELRY

Jewelry collects bacteria, and therefore should be kept to a minimum. Long necklaces, large hoop earrings, an excessive amount of earrings or rings are not permitted. Students should limit piercings to two studs per ear. No other visible piercings are allowed in the clinical setting.

## TATTOOS

Visible tattoos are discouraged. Students wishing to leave tattoos uncovered must get permission from **both** their Clinical Coordinator and clinical site prior to doing so.

## GUM CHEWING

Gum chewing is not allowed in the clinical setting.

## HAIR

Hair must be neat, clean and cannot hang in the students face. Hair that surpasses the shoulders must be put up. Long hair that is not tied back or worn up can be grabbed by patients or may drag through body fluids. Hair accessories are acceptable as long as they are functional - not decorative. Beards and mustaches must be clean and neatly trimmed. Facial hair that is partially grown-in, or otherwise unkempt is not permissible. Head coverings worn for fashionable purposes such as caps, hats, headbands, are not permitted.

## PHONE/COMPUTER USE

Usage of any phone or computer (belonging to a student or the department) for personal purposes is strictly prohibited during scheduled clinical hours. Students may use their personal phones during breaks, outside of the department and patient care areas. Students needing a mode of emergency communication with others should distribute the department phone # to friends/family/childcare providers, etc. In the rare circumstance that a student must use any phone or computer for personal purposes, they need to receive approval from the supervising technologist.

## OTHER PROFESSIONAL GUIDELINES

- Many of our clinic sites are located on 'smoke-free' campuses, students must adhere to those policies. Smoking must be conducted in designated smoking areas. Students should remain aware that many of the patients are sensitive to the smell associated with smoking.
- Eating food/drinking should be done in designated areas during scheduled breaks

- Working on homework should not be done during scheduled clinical hours, this includes Trajecsys Daily Logs

## CLINICAL ATTENDANCE POLICY

The experience students gain in clinical will directly affect the medical diagnosis, treatment and safety of patients. Therefore, students are expected to attend all clinical shifts as scheduled. The student will be assigned various shifts and rotations throughout their clinical experience. Students may be required to attend clinic during evening, overnight, or weekend hours. Student assigned shifts are to be worked as scheduled and cannot be modified. Students cannot swap shifts or alter the begin/end times of their scheduled shifts. Disciplinary action will be taken if students are at clinic during unapproved times. Only the Clinical Coordinator or Program Director may modify a student's clinical rotation or assignment.

Students who experience multiple attendance incidents may have their course grade reduced. Clinical attendance incidents are defined as follows:

- **Tardy (T):** A clock-in 7-minutes or more past the scheduled arrival time
- **Leave Early (LE):** A clock-out 7-minutes or more prior to the scheduled leave time
- **Absence (A):** A missed clinical shift
- **Missed Time Punches (MTP):** When a student fails to clock in or out of Trajecsys for their shift, clocks into the wrong clinic site, creates a time exception without permission, and/or clocks in/out while outside of the department or clinic site (i.e. parking lot, drive home, etc.).
  - **Every MTP over 3 occurrences will result in 1 attendance incident**
- **No Call/No Show (NCNS):** Failure to follow the call-in procedure

## ATTENDANCE INCIDENT GRADE DEDUCTIONS

- The first incident carries no grade deduction
- The second incident results in a 1% grade deduction
- The third incident results in a 3% grade deduction
- The fourth incident results in a 5% grade deduction
- The fifth incident results in a 10% grade deduction
- The sixth incident results in a 15% grade deduction
- Seven or more incidents result in a failing course grade and the student may not be eligible to continue in the program

Students should note that each attendance incident is considered a single incident. For example, a student who is late twice and absent twice will have their course grade deducted 5%. **Grade deductions apply only to the course, not the whole program.** After the course is over, the student's attendance record is re-set.

## UNEXCUSED VS. EXCUSED ATTENDANCE INCIDENTS

All attendance incidents are initially considered unexcused and may result in a course grade deduction. A student may request to have an incident excused due to extenuating circumstances in order to have a course grade deduction waived. The student must submit a request in writing to the instructor, along with adequate documentation, such as a physician's note, vehicle repair receipt, etc. All determinations

regarding attendance incidents will be made on a case by case basis, at the discretion of the instructor. The following are some common examples of extenuating vs. non-extenuating circumstance:

<b>Extenuating</b>	<b>Non-Extenuating</b>
Bereavement/Funeral	Childcare
Illness or Injury	Work
Wedding	Vacation
Jury Duty	Traffic/Road Conditions
Family Emergency	Inclement weather (Campus open)
Sudden vehicle break-down	Over-slept
Adoption/Birth of Child	Routine Appointments

Once a student reaches 4 excused or unexcused attendance incidents in a particular course, they will receive a written advising. Further attendance incidents may affect the course grade and/or eligibility to remain in the program.

### **TIME RECORDS**

- Students should be ready to work, with their belongings put away, prior to clocking in.
  - Hospital computers are the best method of clocking in/out of clinic. **The Clinical Coordinator may request that students use a computer to clock in/out at any time.**
- Mobile phones may be used if a computer is not available. GPS tracking must be turned on.
- Students should not clock in more than 10 minutes prior to the start of their shift.
- If anyone other than the individual student completes a time punch, it is considered a falsification of records and will result in disciplinary action.
- Students should maintain professional conduct and complete any exam they have started, even if this means clocking out late.
- Students may occasionally stay late for rare exams or required competencies. If a student stays over 15 minutes late, they must e-mail the Clinical Coordinator that same day and provide a reason.

### **MISSED TIME PUNCH PROCEDURES**

- **Missed Clock-IN**
  - Students are to clock-in as soon as they realize and notify the Clinical Coordinator
  - Do not make a time exception
- **Missed Clock-OUT**
  - If the student is offsite (no longer on the hospital’s campus) they should **not** clock-out
  - Notify the Clinical Coordinator
  - Do not make a time exception

### **MANDATORY MAKEUP DAY ACCRUAL:**

- 16.25-24 hrs missed = 1 day required
- 24.25-32 hrs missed = 2 days required
- 32.25-40 hrs missed = 3 days required
- 40.25+ hrs missed = Excessive absenteeism resulting in written advising and further make-up time

\*Makeup days will be scheduled at the Clinical Coordinator’s discretion, preferably before the semester ends.



## SCHEDULING MAKEUP DAYS

- Students are required to complete a *Makeup Day Schedule Request*; this must be submitted to the Clinical Coordinator by a predetermined date. *See course syllabus.*
- Makeup day schedules must be approved by both the clinic site instructor and Clinical Coordinator prior to the student conducting makeup time.
- Makeup days must match the missed shift and rotation.
- Students may not schedule clinic for more than 40 hours/week and shifts may not exceed 10 hours a day.
- Makeup days should be conducted prior to the start of the next semester or graduation, whichever comes first.
- If a student fails to attend or complete their required makeup days, they may not be able to graduate on time.
- The attendance policy will apply to makeup days and deductions will be applied to the current clinical course or will be carried over into the next clinical course.
- Any graded exam performed during a makeup day, must be endorsed by the end of the makeup schedule or clinical course deadline.
- All competencies and evaluations will be applied to the current clinical course or carried over into the next clinical course.

## CALL-IN PROCEDURE

- Notification of any tardy, leave early, or absence must be reported.
  - Absence and tardy notifications must be made within **30 minutes of the start of the shift**. Failure to do so will result in a no call/no show (NCNS).
  - Leave early notification must be made **prior to the student leaving clinic**. Failure to do so will result in a NCNS.
- Students must notify both the **clinic staff & clinical coordinator** for each occurrence; tardy, leave early or absence
  - The **clinic site** must be contacted by **phone**. *Voicemail is not acceptable.*
  - The **clinical coordinator** may be notified by voicemail or e-mail. *The student must include who they spoke to when they called their clinic site.*
- If the student is absent for consecutive days, they must follow the call-in procedure each day.

## INCLEMENT WEATHER

RRCC may close its campuses in the event of inclement weather. The decision to close the campus is typically made and reported to local news stations by 6am. If the college is closed due to inclement weather the student will not be required to attend clinic.

Makeup days or clinical assignments may be required and are contingent upon individual student hours and will be determined by the Clinical Coordinator.

If the campus is opening late or closing early due to weather, the student will follow their scheduled clinic shift according to the closure time. *Example: If a student's shift is 7am to 4pm and the college has a late start of 10am. The student's shift is now 10am-4pm.*

If a student chooses to attend clinic during college closures, including late starts and early dismissals, that additional time will be considered volunteer hours or can be applied to any already accrued makeup time. It is the student's choice to attend clinic when the college is closed. Students must notify the Clinical Coordinator of their decision to attend clinic *prior* to going in.

If the campus is open and the student chooses not to travel to clinic due to weather, they must follow the attendance policy and notify both the clinic site and clinical coordinator.

### **DAILY BREAK PERIODS**

- Students are allowed one 30-minute lunch break for any shift greater than 5 hours.
- Students are allowed two 10-minute rest breaks per shift; 1 for the first half and 1 for the second half. Students may not combine their 10-minute breaks or add additional time to their provided lunch break.
- Students should *not* clock out for these designated breaks.
- Excessive breaks may result in disciplinary action.
- Students are *not* to leave the clinical campus during their scheduled shift. If the student does leave their clinic site they must clock out and the attendance policy applies.

### **VOLUNTEER DAYS**

Students may attend clinic outside a scheduled semester or clinical course. The following will apply:

- Students must submit a completed *Volunteer Request* by a predetermined date. *See course syllabus.*
- Volunteer days may be scheduled at a previously assigned facility; however, it is at the site's discretion.
- Students may not schedule clinic for more than 40 hours/week and shifts may not exceed 10 hours a day.
- Volunteer time will not be used as makeup days or accrual days.
- All clinical policies (attendance, grading, daily logs, uniform, etc.) are to be followed during this time.
- All competencies must be endorsed by the end of the volunteer period
- Competencies and grades will be applied to the current or succeeding clinical course; including attendance deductions.
- Students must be registered and have already paid for the next clinical course before they are allowed to complete volunteer days scheduled between semesters.

### **CLINICAL COMPETENCY**

Students must demonstrate competency for various radiographic procedures on patients and will be graded by staff technologists and faculty to ensure all objectives are met. As part of this assessment students will be graded on image evaluation and structure recognition. Students are required to complete a minimum of **56 competencies**, including 40 mandatory exams and 16 elective exams.

### **FAILED COMPETENCY REMEDIATION**

If there is documentation that the student is frequently failing their competency attempts or there is indication of multiple repeats, the student may be required to meet with the Clinical Coordinator or Clinical Instructor to discuss their performance.

### **CLINICAL EVALUATIONS**

Students will be evaluated throughout their clinical experience. Staff technologists and RTE Faculty can evaluate students based on their clinical experience. It is the student's responsibility to ask clinic staff technologists to complete evaluations on them. Students will be evaluated based on their performance in the following categories:

- Patient Care
- Professionalism and appearance
- Organization and dependability
- Image quality and radiographic skills
- Interpersonal and communication skills
- Radiation protection practices
- Initiative and attitude
- Critical thinking ability

### **EVALUATION REMEDIATION**

If a student receives an evaluation grade below an 80%, they will be required to meet with the Clinical Coordinator to discuss the evaluation.

### **DIRECT AND INDIRECT CLINICAL SUPERVISION**

Students are required to always work under the supervision of a registered technologist. There are two types of supervision:

#### **DIRECT SUPERVISION**

Direct supervision is required for exams that have not been comped and for repeat exams. A staff technologist must be physically present and observing.

The following are the parameters of **DIRECT SUPERVISION**

- A qualified medical imager reviews the request for examination in relation to the student's achievement.
- A qualified medical imager evaluates the patient's condition in relation to the student's achievement.
- A qualified medical imager **MUST** be in visual contact with the student during the entire procedure.
- A qualified medical imager reviews and approves the imaging exam.
- A qualified medical imager determines when and if the imaging examination must be repeated. If so, the student will be under the **DIRECT SUPERVISION** of the qualified medical imager. After the student has demonstrated competency in performing a specific medical imaging procedure, he/she may be permitted to perform that procedure with indirect supervision.

#### **INDIRECT SUPERVISION**

Indirect supervision is acceptable for exams that have been comped. A staff technologist is physically adjacent to the student's location, within hearing range. Phone contact does not qualify as indirect supervision.

#### **1:1 RATIO**

All students and technologists must practice a 1:1 ratio. The number of students assigned to a clinic site shall not exceed the number of staff technologists assigned to the department. When working together there should be no more than one student working with a technologist. It may be temporarily acceptable that more than one student is assigned to a staff technologist during uncommonly seen procedures.

### **RADIOGRAPHIC CONTRAST SAFETY**

Students may participate in exams (such as Intravenous Pyelograms) in which the patient receives an intravenous contrast injection. Students do not undergo formal training in venipuncture and IV contrast administration as part of their training at RRCC. Therefore, students are not to perform venipuncture or to push contrast intravenously. If called upon to do so at clinical, the student must inform the tech that this is out of their scope of practice.

## **ADVANCED MODALITY OBSERVATION**

Students who wish to participate in advanced modality shadowing must complete all competency and clinical requirements prior to attending the shadow rotation. See course syllabus for more information.

## **ARRANGING ADVANCED MODALITY SHADOWING**

Students are responsible for arranging their own advanced modality experience. This may be done in RTE 282. Students will complete an *Advanced Modality Shadow Request* for each department they choose to shadow with. Students will return the completed request form to the RTE Clinical Coordinator. *See RTE 282 clinic course syllabus for more information.*

## **SHADOWING EXPECTATIONS**

Students must adhere to any additional requirements as deemed necessary by the department and facility in which they are shadowing. The patient care and procedural responsibilities of the student are left to the discretion of the supervising department.

Students must always operate under direct supervision when shadowing modalities. This means a registered technologist is present and observing the student throughout the procedure. *Technologists and students must operate at a 1:1 ratio.* Students shadowing in MRI will complete a safety questionnaire prior to their rotation.

## **CLINICAL SITE DISMISSAL**

The clinical facility may dismiss a student from internship at any time. Reasons for dismissal include, but are not limited to, behavioral issues, policy violations or safety issues. There are 3 types of dismissal: temporary, permanent, or preventive. Temporary dismissal allows the student to return at a later date while permanent dismissal does not allow the student to return at all. Preventive dismissal occurs when a facility proactively declines to host a student due to prior issues with the student.

Students who are dismissed from clinical are subject to disciplinary action. Clinical site dismissal may result in a failing grade for the internship course and the student may no longer be eligible to continue in the program. **RRCC is under no obligation to transfer a dismissed student to another site.** If a student is struggling at clinical, the student is strongly encouraged to discuss any issues with RRCC staff before they escalate into clinical site dismissal.

The student will be notified of the nature of the dismissal and given an opportunity to meet with the clinical coordinator or designee to respond to the dismissal. Then the clinical coordinator or designee will make a recommendation to the program director as to what the appropriate disciplinary sanction will be. One or more of the following sanctions may be imposed: a warning (via a verbal or written advising), probation, academic consequences, suspension, or program dismissal. The program director will make the final determination regarding the appropriate disciplinary action. Multiple written advisements may also result in program dismissal. Should the student wish to appeal the imposed disciplinary sanction, they may follow the appeal and/or grievance procedure found in the RRCC Student Handbook.



## APPENDIX A: STUDENT ACKNOWLEDGEMENT



### RTE STUDENT ACKNOWLEDGEMENT

I, \_\_\_\_\_ have read the Radiologic Technology Student Handbook and understand the policies and procedures contained therein. I understand that I will be subject to all policies found in this handbook, the RRCC Handbook, and specific course syllabi.

---

Student Printed Name

Student Signature

Date

**\*UPLOAD THIS FORM TO CASTLEBRANCH BY AUGUST 15TH**

## APPENDIX B: PHYSICAL REQUIREMENTS

Never (N)	Occasionally(O)				Frequently(F)				Constantly(C)						
0%	1 - 33%				34 - 66%				67 - 100%						
To be moved: Include weight of object and distance carried					Description of movement: lift/lower, push/pull, carry, reach above					N	O	F	C		
Patients: (1-300 #/1-200 ft.					All with assistance if > 50#							X			
Supplies: Boxes, linen bags, supply carts- 1-200 ft.					All with assistance if > 50#							X			
Equipment: Carts/O2 tanks, portable monitors - 1-200 ft.					All with assistance if > 50#							X			
Physical				N	O	F	C	Physical				N	O	F	C
Standing:							X	Fingering:							X
Walking:							X	Handling:							X
Sitting:					X			Feeling:						X	
Stooping:					X			Visual acuity: near							X
Kneeling:					X			Visual acuity: far							X
Squatting:					X			Depth perception:							X
Climbing:					X			Color discrimination:						X	
Balancing:					X			Peripheral vision:						X	
Other:								Talking:							X
Reaching-above shoulder:						X		Hearing:							X
Reaching-at or below shoulder:						X		Running:					X		
Grasping:							X	Other: writing						X	
Physical surroundings:				N	O	F	C	Environmental conditions:				N	O	F	C
Cold (50f or less):					X			Chemicals:					X		
Heat (90f or more):					X			Gases/Fumes:					X		
Dampness:					X			Dust:					X		
Inside work:							X	Radiation:					X		
Outside work:					X			Other:							
Walking surface: Tile/Carpet, cement/asphalt						X		Vibration:					X		
Heights: 5 feet					X			Noise: Low-Moderate						X	

