Southern West Virginia Community and Technical College

Division of Health Care and Business

Radiologic Technology Program

Student Handbook

2016 – 2018

Any part or whole of this handbook may be revised or updated at any time, at the discretion of the Coordinator.

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Welcome!

You are entering the exciting and dynamic field of Radiologic Technology!
There will be challenges and milestones for you personally and professionally. Changes will always be a part of your future.
New technologies and advances make this career rewarding.
You will never grow tired of it.
Best Wishes!

The Radiologic Technology Faculty

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Handbook reviewed and revised annually

Mission Statements

The Radiologic Technology program will meet community and cmployer needs for medical imaging professionals with high quality, student-friendly and accessible educational opportunities and services. The program strives to instill professionalism and transferable behaviors into the work place.

Reviewed and revised April 2015; reviewed 2010, 2011, 2012, 2013, 2014

Mission Statement of the College

Southern West Virginia Community and Technical College provides accessible, affordable, quality education and training that promote success for those we serve.

Approved June 18, 2013
Southern WV Community and Technical College
Board of Governors

Institutional Commitments

As a comprehensive community and technical college, Southern is committed to providing:

1. Developmental and pre-college level education for those who lack the necessary academic background for direct entry into college-level courses.
2. Programs of study leading to the associate in arts and the associate in science degrees which can be effectively transferred and applied toward the baccalaureate degree.
3. Programs of study in career and technical fields leading to a skill-set certification, certificate degree and/or the associate in applied science degree for entry into the workforce.
4. Workforce development, continuing education and training programs that support the needs of employees and employers and serve as a mechanism for economic development.
5. Support services that assist students in achieving their education and training goals.
6. Community interest programs and activities that promote personal growth and cultural enrichment.

Approved June 18, 2013
Southern WV Community and Technical College
Board of Governors

Vision Statement

Southern aspires to establish itself as a model of leadership, academic excellence, collaboration, and occupational training, equipping its students with the tools necessary to compete and prosper in the regional and global economies of the twenty-first century.

Reviewed and revised 2015, effective July 1, 2015
Board of Governors

Our Core Values

We will accomplish our mission by:

- Achieving excellence in education and service.
- Exhibiting integrity in all that we do.
- Collaborating and communicating actively with others.
- Being committed in word and deed.
- Imparting passion and compassion to our every task.
- Leading by encouragement and support of lifelong learning.
- Embracing change through bold actions.
- Being creative and innovative at all levels.
- Initiating opportunities for the community.
- Celebrating success.

Reviewed and revised 2015, effective July 1, 2015
Board of Governors

Goals and Student Learning Outcomes Revised May 2011

1. Prepare students to become safe and competent radiographers.

a. SLO - The student will evaluate radiographic images for appropriate positioning and image quality.
b. SLO - The student will produce diagnostic quality images.
c. SLO -The student will demonstrate patient care knowledge.

2. Provide educational opportunities for students to possess critical thinking skills.

a. SLO – The student will recognize and solve problems.
b. SLO – The student will make appropriate decisions regarding clinical procedures and patients abilities.

3. Demonstrate responsible professional attitudes and behaviors.

a. SLO - The student will acknowledge state and national professional organizations by name and purpose.
b. SLO – The student will participate in the annual state conference as a second year.
c. SLO - The student will complete a goal or career plan.
d. SLO - The student will investigate a professional issue of concern.

4. Use effective communication.

a. SLO – The student will understand and demonstrate effective communication.
b. SLO – The student will demonstrate awareness of communication aspects in different age groups.
c. SLO - The student will work well in a team atmosphere.

January 2014 revised on webpage and handbook

Program Effectiveness (Benchmarks)

- Graduate satisfaction average for expectations met, will be "yes"
- Employer satisfaction average for graduates, will be "usually or always"
- 75% of graduates will pass credentialing exam on first attempt, past 5 yrs.
- 75% of graduates will be employed within 12 months, five year average.
- 50% of students will complete the program within three years.

*full outcomes and tools can be found in the annual assessment plan available upon request.

Program Effectiveness Data

The Radiologic Technology Program is accredited by the Joint Review Committee on Education in Radiologic Technology. The following program effectiveness data is made available to the general public and perspective students, for compliance to the JRCERT Standards. This data is also accessible using the following link: https://portal.jrcertaccreditation.org/summary/programannualreportlist.aspx For more information regarding program effectiveness data visit the JRCERT website at https://jrcert.org
This data is also accessible using the following link:
http://www.southernwv.edu/files/program_effectiveness_data_2015.pdf

ARRT Pass Rate

The five year average for the credentialing exam pass rate is 75% on the first attempt within 6 months of graduation.

Year:	Number Passing	Number of Examinees	Percent passage on the first attempt
2011^	8	8	100%
2012	6	6	100%
2013	3	6	50%
2014	No graduates, N/A	No examinees, 0	0%
2015	6	6	100%
5 year average	23 total passing	26 total examinees	**23/26 = 88.4% 2011-2015**

^ two graduates took the exam after the 6 month period, changing the 5 year average.

Job Placement Rate

The five year average for job placement rate will not be less than 75% within 12 months of graduation. Not actively seeking employment is defined as the graduate: fails to communicate with program officials regarding employment status after multiple attempts; unwilling to seek employment that requires relocation; unwilling to accept employment due to salary or hours; on active military duty; or continuing education.

Year:	Number Employed	Number Actively Seeking Employment	Job Placement Rate
2011	6	6	100
2012	5	5	100
2013	4	5	80
2014	No cohort	No graduates	0
2015	5	5	100
5 yr avg.	20	21	**20/21 = 95.2% 2011-2015**

#0415

Annual Completion Rate

The annual Program completion rate will be 50% or higher.

Enrollment in the program is defined as those in the program at the end of the first week of radiologic technology specific courses.

Year:	Number Completing the Program	Number Initially Enrolled	Completion Rate	Justification for non-completion
2011	10	22	45	Failed courses, voluntarily withdrew
2012	6	16	38	Failed courses, voluntarily withdrew, financial reasons or wanted to travel
2013	6	13	46	Failed courses; voluntarily withdrew
2014	No cohort	No cohort	0	No class taken 2014
2015	6	10	60	Failed courses, voluntarily withdrew, financial and personal reasons.

For more information regarding program effectiveness data visit the JRCERT website at https://jrcert.org

Reviewed and revised 4/20/2016
Revised 9/22/2015
Reviewed and revised 4/29/2015
Reviewed & revised 3/24/15
Revised 6/16/14
Reviewed and revised April 16, 2014

Reviewed and revised April 16, 2014
Revised 6/16/14 emh
Reviewed & revised 3/24/15 emh
Reviewed and revised 4/29/2015 emh

Program Completion Timeline

In the interest of retention, and student success in completing the program, the program must be completed in three years of enrollment into the Radiologic Technology program. Actual enrollment is defined as once accepted into the program by meeting criteria for the Allied Health and Nursing (Health Care and Business Division) application, and College entrance requirements, at the time RA courses begin. This means that you may re-enter only once.

If a student must drop due to a D or F grade in any required course, DURING the first semester of the program, the student must resubmit an application for Allied Health Programs. This does not guarantee placement in the program. The student will be under the handbook of the class they enter.

If a student earns a D or F in any required course, after the first semester of the program, the student must write a written statement to the Program Director, asking to return. If approved, the student will return in the semester the failed course was taught. If more than one semester of clinic has passed, the student will be required to take a Special Topics course the semester before re-entering. Return is not guaranteed. The student will be under the handbook of the class entered.

If the student takes a required non RA course prior to the semester scheduled, and fails, (s)he will be able to continue with the Program Director's permission and the course is not a pre-requisite for a course in the next semester.

ARRT Continued Qualification

The American Registry of Radiologic Technologists, ARRT, has implemented Continued Qualification requirements for those individuals awarded ARRT Certifications after January 1, 2011 and thereafter time limited to 10 years. Before the end of the 10 year period, the individual will be required to demonstrate continued qualifications in order to hold certification. Specifics details can be found at ARRT.org

Communication

Students are expected to set up email and computer account through the College. There is no additional cost for this set up and use while the student is enrolled. Please log on and become familiar with the online registration, grade reporting and emailing. The official communication is the Southern email. Per SCP policy.

The student is responsible to notify the College and Radiologic Technology faculty of email, phone, or address changes.

Radiologic Technology faculty will use email & WEB/Blackboard to send information to individuals or classes. The Class of 2015 Blackboard shell will be accessible during the entire program.

All College campus faculty and staff have voice messaging available. Students may access faculty by phone using the directory on the website under Quick Links, provided in syllabi or on office doors.

Students will be given contact information for each clinical site and clinical instructor at clinical education setting orientation.
It is the student's responsibility to check campus bulletin boards, notices posted and mailed.

During the summer, the program director will be available by email. Check online course logons before the course begins. Syllabi may be distributed or at the Class of 2016-18 Blackboard shell.

Shadowing

Prior to final acceptance into the program, interested students will complete job shadowing following the guidelines. This limited but useful observation time may assist the student in making his or her final decision regarding pursuing a career in radiologic technology. The guidelines and form will be available from the Coordinator/Program Director. Perspective students will complete shadowing at preapproved sites.

Prior to shadowing, students may be required to complete online or on site education which may include HIPAA/confidentiality or other policies.

Tardiness Policy

Tardiness for Radiologic Technology didactic and clinical courses is defined as 7 (seven) minutes following the scheduled start time. Each didactic course syllabi will address tardiness and its effect on the grade.

After 3 tardies, without proper notification to the instructor, a session will be scheduled.

Excessive tardiness will affect the course grade and progression to the next course, and may be grounds for dismissal from the program. Documentation of the student-instructor or Coordinator session will be scheduled to discuss the problem and will be placed in the students file. See specific tardiness policy for Clinic.

Excused/Unexcused Absences

Excused absences are in these categories:

1- Institutional: snow days,…

>Those days the College calls off classes, or places them on late schedule.

>The college may delay or cancel only specific campus locations. Or AM or afternoon or evening classes may be cancelled or delayed. If part of a clinical shift is delayed or cancelled, the student must complete the remaining shift or use available SATO. The student must call the appropriate CI if not attending clinic.

These days do not have to be made up and do not count as an absence. All work missed may be made up at the instructor's discretion. The course schedule may be adjusted to reflect covering more or less of the material.

2- Unavoidable: death in immediate family, illness with Physician's note, or illness of spouse or children, with Physician's note.

>Documentation must be presented to the instructor.

>These days do not have to be made up and do not count as an absence. All work missed may be made up at the instructor's discretion. The course schedule may be adjusted to reflect covering more or less of the material. It is the responsibility of the student to obtain assignments.

3- Unexcused absences are those that do not meet the above categories.

>An unexcused absence is one that the student does not inform the instructor at all, or days later. A deduction in course grade may be applied. See course syllabi.
Excessive unexcused absences may require a meeting with the instructor or Coordinator. Documentation will be placed in the students file. Excessive unexcused absences may be grounds for dismissal.

Division of Healthcare and Business Programs Programs of Allied Health and Nursing
Background Check and Drug Screen
2016

All students have been contingently admitted to an allied health or nursing program until all information/documentation is received on or before a date designated by the program**.** Failure to provide all requested information; to disclose prior felony, misdemeanor, and/or pending criminal charges will result in immediate dismissal from a program.

BACKGROUND CHECK

Students must satisfactorily complete a background check and drug screen prior to entry into an allied health or nursing program and any other time as requested by the faculty, coordinators or division head. If a student has been convicted of a ***FELONY***, ***MISDEMEANOR*** or has ***PENDING*** criminal charges, a student may be excluded from admission to a program, may not be allowed to attend clinical rotations held at affiliating health care agencies, and/or may be prevented from taking the required Certification/Licensure Examination. Entry into a health care agency is the sole determination of the clinical facility. Certification/Licensing Boards may prohibit students from taking national examinations based on students physical status, emotional condition, results of a background check and/or drug screen.

It is the student's responsibility to inform the Program Coordinator prior to entering the program or ***IMMEDIATELY*** after an incidence occurs, of any felony, misdemeanor, or pending criminal charges/conviction. Any falsification or omission of information may result in disciplinary action; including, but not limited to, dismissal from a program. Pending felony and/or misdemeanor charges or convictions that occur while in a program must be reported immediately to the Program Coordinator.

DRUG TESTING/SCREEN

Drug Screening Upon Admission

Southern West Virginia Community and Technical College, Division of Healthcare and Business, Programs of Allied Health and Nursing are committed to safeguarding the health and safety of students, faculty, staff, administration, community members, and patients/clients while maintaining a drug-free educational/workplace environment. In order to uphold the highest standard of care, the Programs of Allied Health and Nursing will conduct a drug screen test for all students tentatively admitted to any allied health or nursing program.

The alcohol and drug test must occur at the date and time specified by the Program Coordinator or division head and at a location determined by Quality Drug Testing. The type of specimen is at the discretion of the program. Students contingently admitted are **REQUIIRED** to consult with their attending physician/healthcare provider, in order to determine whether any/all prescribed

medication(s) may affect program performance. The student who is contingently admitted to a program **MUST** disclose a list of medications prior to testing. Validation of prescriptions must be supplied promptly upon request to the appropriate individuals.
The cost of any and all expenses associated with the drug testing and/or evaluation is the responsibility of the student. It is the student's responsibility to determine from the physician whether prescribed medications may affect program performance and to disclose a list of medications prior to drug screening. Many prescription drugs alter mental status and may impair the student's ability to perform in the classroom or clinical setting. Impairment in the classroom or clinical setting is not permissible regardless of the source. Any attempt to alter the drug test, attempt to prevent collection (example but not limited to: shaving hair), any positive or diluted test results or failure to follow the proper procedure, failure to have the test performed on the date by the approved company, or refusal of a drug screen will result in withdrawing the selection of the student to the Allied Health or Nursing programs by the respective department. Any future reapplication to an Allied Health or Nursing program may not be considered, due to the facility requirements. A student that is unable to enter a facility for clinicals, will not be able to complete the program. Appropriate accreditation/program approval agencies may be notified of the results.
Policy distributed at May orientation with student signature acknowledging receipt of it.

Reviewed and revised May 2015

Electronic Device Usage in the Clinical and Didactic Education Settings
Electronic devices

1. must be turned off once entering the clinical/didactic education center
2. will not be used during clinical time or during class or lab
3. are restricted to breaks & lunch time
4. may not be used in restricted areas

If you must make an emergency cell phone call in an unrestricted area, please notify your clinical instructor, technologist, or supervisor before leaving the Imaging department to do so.

Excessive cell phone/text messaging usage will not be tolerated.

Social Media Policy Allied Health and Nursing, Division of Health Care and Business

Social Media are powerful communication tools that have a significant impact on organizational and professional reputations. Because the lines are blurred between personal voice and institutional voice, Southern West Virginia Community and Technical College's Division of Health Care and Business Programs has created a policy to help clarify how to enhance and protect personal and professional reputations when participating in social media.

Social media are defined as media designed to be disseminated through social interaction, created highly accessible and scalable publishing techniques. Examples include but are not limited to LinkedIn, Twitter, Facebook, YouTube, and My Space,

Both in professional and institutional roles, employees, staff and students need to follow the same behavioral standards online as they would in real life. The same laws, professional expectations, and guidelines for interacting apply online as in the real world. Employees, staff, and students are liable for anything they post to social media sites and may be subject to litigation.

Policies For All Social Media Sites, Including Personal Sites Protect confidential and proprietary information:

- Do not post ANY confidential, disrespectful, or unprofessional information about Southern, clinical affiliates, clients/patients, faculty, staff, or students. You must still follow the applicable federal requirements such as FERPA, HIPAA, NCAA, etc. Adhere to all applicable privacy and confidentiality policies. Any confidentiality violation is at the risk of disciplinary action or dismissal from your respective program. Also subject to discipline from respective licensure Boards. You **can** be held liable for any postings and may be subject to litigation.

- Do not post any content that might put Southern, the program or clinical agencies in a bad light or incite litigation.

- Respect copyright and fair use.

- Do Not use Southern logos for endorsement.

- Respect College property.

- Do not utilize or access social media platforms during clinical hours. Do not utilize cell phones during clinical hours.

Best Practices

- Think twice before posting.

- Once you post, you relinquish control of its proliferation forever.

- Be respectful.

- Remember who the audience is.

Approved 8/11/2011

Didactic/Lab Attendance

Radiologic Technology students are expected to attend every class and lab. Each instructor may enforce an attendance policy for the course, as stated in the syllabus.

If the student must be absent from class or lab, they must notify the instructor before class or lab start time or as soon as possible. Students are responsible for obtaining missed assignments.

Recommended notification can be made by phone or email to the instructor or administrative assistant.

Unless otherwise stated in the course syllabus, missed work, tests, quizzes, etc. must be made up before the next scheduled class/lab, or with prior arrangement from the instructor.

Excessive absences may be grounds for course grade reduction, and/or dismissal from the program.
If the student needs additional assistance and time in the lab to view radiographs, arrangements must be made with the instructor.

Dress Code for on campus radiologic technology labs

Students attending radiologic technology labs in room 112 or 113C will wear the approved monogrammed polo shirt. Long pants or slacks must be worn and khaki or tan in color, in good condition. Close toes shoes are to be worn with socks. Shirts and pants/slacks should be wrinkle free, and not drag the ground. A professional appearance is to be reflected.

Added May 2016

Academic Standing & Curriculum Sequencing

Radiologic Technology students must follow a specific succession of courses as determined by the Coordinator and Division. RA courses must be completed in the semester assigned. Support courses (non RA) may be taken before the scheduled semester, as long as there is no conflict with RA courses, including clinic; Or support courses may be taken the scheduled semester. Prerequisites apply in many cases. Some courses may not transfer for a specific area of a degree. Check with the registrar or the transferring college. MT 128 usually does not transfer, so a higher or different math may be required. An official, original transcript must be on file with the registrar.

It is the responsibility of the student to review their transcripts and assure substitutions from other institutions are completed for graduation completion. The student must complete a graduation application several months prior to the anticipated graduation date.

If a student must withdraw due to any reason and applies to return the following year, he will be under the new Handbook and curriculum.

RA Courses with labs may have separate requirements. In order to progress to the next sequenced course, you must pass both didactic and lab portions. Unless stated in the syllabus, the lab portion is part of the didactic course grade.

Advancement opportunities:

A Baccalaureate degree may be earned by completing additional coursework at a college which accepts Southern's AAS degree in radiologic technology. Some courses may be completed at Southern and apply towards the BS/BA degree. If interested, contact the coordinator or college seeking the degree. Bluefield State College has an agreement with Southern's RT program which allows students to pursue a 2 + 2 degree.
More information can be found at http://bluefieldstate.edu/b-s-imaging-science.

Five Semester Curricula Plan for 2016 **Radiologic Technology Program**
Effective Fall 2016

Recommended Sequence

Course Number	**Course Name**	**Credit Hours**
First Year - First Semester		
BS 124	Human Anatomy and Physiology I	4
MT 128	Algebra for Allied Health (or higher)	3
RA 100	Introduction to Radiologic Technology	3
RA 101	Imaging Procedures I and Image Analysis	3
RA 104	Principles of Radiographic Exposure	2
RA 110	Clinical Practice I*	1
	Total Semester Hours: 16	
First Year - Second Semester		
EN 101	English Composition I	3
BS 125	Human Anatomy and Physiology II	4
RA 103	Imaging Procedures II and Image Analysis	3
RA 125	Clinical Practice II*	2
RA 107	Digital Imaging Acquisition and Display	1
	Total Semester Hours: 13	
Summer		
RA 150	Clinical Practice III (40 hours/week)	4
	Total Semester Hours: 4	
Second Year - First Semester		
PH 200	Introduction to Physics	4
RA 200	Clinical Practice IV **	3
RA 201	Radiation Biology & Advanced Radiation Protection	2
RA 202	Pathology	2
RA 203	Imaging Procedures III and Modalities	3
	Total Semester Hours: 14	
Second Year - Second Semester		
AH 200	Health Care Ethics and Law	1
CS 103	Introduction to Applications	1
RA 204	Imaging Equipment	2
RA 206	Pharmacology in Radiology	1
RA 210	Quality Management in Imaging Systems	2
RA 225	Seminar in Radiologic Technology	3
RA 250	Clinical Practice V **	3
	Total Semester Hours: 13	
	Total Program Hours: 60	

Note: *Clinicals are on Tuesday and Thursdays scheduled both day and evening hours, therefore no additional courses may be taken on those days unless online. **Clinicals are on M, W and F, both day and evening hours so no additional courses may be taken on those days unless online.

Food & Drink Policy in RT Classrooms
Food and drink are permitted in the RT classrooms. Everyone is expected to keep the room clean and use the trash receptacles.

When the CT and/or X-ray rooms are in use as labs, no food or drink are permitted in the area of the control booths, XR table or tube, darkroom. No food or drink in the CT room when a lab is scheduled. When laptops are in use, no food or drink are permitted in the area.

If food containers and drink cans are not disposed of properly or the room is unkept, faculty may not allow food or drink at any time in either room.

Joint Commission, Clinical, Health and Orientation Requirements
The Joint Commission (JC), mandates that clinical sites require formal and informal education of employees, staff and students. Before entering clinics, students must complete training in a variety of areas. These include: fire and electrical safety, hazardous wastes, radiation safety, HIPAA, body mechanics, etc.

Each hospital has a different format for this annual training. You may be required to repeat some of the training aspects at different hospitals, but realize it is for the safety of you, staff and patients.

Your signature means you have completed the training or review of policies. This will be shared with the respective hospital. The initial training will be completed at the college during the orientation module and online. Please take it serious. You may see information on RA quizzes or tests regarding this information. This content must be reviewed each year.

An onsite orientation to each clinical site will be conducted by the Clinical Instructor.

Applicants considering a career in any allied health program should be aware that during their course of study and in subsequent employment, they are likely to work in situations where exposure to infectious diseases will occur. This is an occupational risk for all health care workers. Persons should not become health care workers unless they recognize and accept this risk. Proper education and strict adherence to well established infection control guidelines can reduce the risk.

CPR: All clinical sites require that you maintain current CPR. Whether you take the course at Southern or through an outside agency, you must have proof. A copy will be kept on file. Any hospital may ask to see your current card. Hospital's accept the AHA BLS Healthcare Provider course which includes adult, pediatric and infant CPR, choking, & AED.
If your card expires before you complete the program, you are required to renew it by taking an accepted course. You will not be permitted to attend clinic with an expired card.

Health Requirements:
After passing the initial physical for allied health program entry, you will be required to:

1- complete the Hepatitis B series and provide documentation
2- obtain TB test annually
3- obtain influenza vaccination annually when it becomes available (usually early fall).
    a. For those allergic to eggs or other ingredients of the vaccine that year, who chose to not receive the vaccine, you will be required to wear a mask when in contact with patients as per hospital policy. Revised 8/2016
4- titres (labs) showing immunity for HepB, etc.

Technical Standards **Radiologic Technology Program**

TECHNICAL STANDARD REQUIREMENTS

All students enrolled in the program shall be able to perform the following tasks concerning motor coordination, quantitative abilities, physical capabilities and emotional strength:

- Reach and adjust the x-ray tube that is at a height of 76”-80” above the floor
- Lift and carry up to 20-25 lbs. (e.g. 5 radiographic imaging plates which each may weigh from 2-6 lbs.) while walking
- Stand for long periods of time while wearing a 5 lb. lead apron
- Move patients to standard wheelchairs and onto stretchers from various areas in the facility to the radiographic room and assist physically cooperative patients from the wheelchair and/or stretcher to the radiographic table without causing undue pain or discomfort to the patient or oneself
- Safely move immobile patients from the stretcher to the radiographic table with assistance from department personnel. This requires the use of back muscles to support and move patients and involves lifting a minimum of 30 lbs. and possesses the ability to support up to 175 lbs.
- Position patients for various radiographic exams without injury to patient or oneself
- Manipulate and operate radiographic tables, stands, tubes, and accessory equipment into proper positions including fixed and mobile units
- Transport mobile equipment to various areas of the hospital in a timely and cautious manner
- Provide oral and legible written information, read written information and receive oral and written information in English from patients and medical staff relevant to patient care
- Evaluate (read & interpret) the written order and requisition for radiographic procedures requested
- Explain the procedure and give clear effective instruction to the patient who is positioned for the radiograph at a distance of 6-10 ft. from the technologist’s control area
-Have eyesight corrected to read the printed words in a radiographic textbook, read, and adjust the control panel, radiographic technique charts, evaluate a radiographic image for quality and proper positioning for anatomical parts, observe patients, manipulate equipment and accessories and visually monitor patients in dimmed lighting
- Hear instructions from members of the health care team, respond to verbal requests by patients at a distance of 6-10 ft. and hear background sounds during equipment operations
- Assess the condition of all patients assigned for a radiographic exam
- React immediately and appropriately to unusual patient and ER situations that may otherwise jeopardize a patient’s physical state, if expedient care is not administered. Handle stressful situations related to technical and procedural standards and patient care situations
- Provide physical and emotional support to the patient during radiologic procedures
- Must not be highly allergic to developer or fixer chemicals or latex
- Must be physically free of non-prescription drugs, illegal drugs, and/or alcohol

These standards are in addition to the health physical.

Professional Organizations

First year students may join the West Virginia Society of Radiologic Technologists, WVSRT, during the first year and attend the conference. While attending any function as a Southern student, college policies, like conduct, must be adhered to.

Second Year students are required to join the WVSRT. Participation at the annual conference is mandatory. This can be accomplished by at least one of the following:

1- submission of research paper
2- submission of exhibit
3- attending as a student bowl team member
4- attending student educational sessions and mock registry (second years)
5- serve on the WVSRT Board of Directors
6- assist at the conference; introduce speaker, etc.

Students that attend on site will not be required to make up clinic time. The students may receive extra time for attending the conference on a non clinic day or weekend. Students are responsible for letting instructors know ahead of time about conference attendance. Work must be made up at the instructor's discretion. Travel, lodging and registration fees are the responsibility of the student.

Students are encouraged to join the American Society of Radiologic Technologists, ASRT.

Other Policies:

For policies the program does not have specific ones, the college catalog will take precedence. The student is responsible for these which are warranted. See online catalog for these and other policies.

Due Process	Sexual harassment
Drug-Free Work Place and Schools	Affirmative Action
Individuals with Disabilities	Family Education Rights to Privacy Act
Student Right-to-Know Act	Inclement weather and emergency situation policy
Refund policy and schedule	Counseling
Special services, programs and facilities	
Academic Dishonesty	Computer use
Tobacco use	Student Grievance Procedure

Cleary Act:
Institutions must publish campus security policies and crime statistics in a timely manner for student/public/community review. To learn more about the Jeanne Cleary Act, go to www.securityoncampus.com and click "public policy."

Grounds for Dismissal

Grounds for dismissal from the program include, but are not limited to:

1- D or F in same program course twice
2- Cheating
3- Timecard fraud (clocking someone else in/out; misrepresenting time card….)
4- Unethical behavior
5- Clinical setting dismisses student
6- Insubordination
7- Three documentations of the same event/action/behavior
8- Positive drug screen or failure to complete drug screen in timely manner
9- Abuse college policy
10- Dosimeter conduct: repeated late submission; non payment, late payments after the beginning of clinical courses.

Grading Policy

The Radiologic technology program uses the following scale for all RA courses, including clinic:

93-100	A
86-92	B
78-85	C
Below 77.5	Failure in a Radiology assigned course

Note: Rounding occurs at the final course grade.
Student earns 93.2%, will be recorded as 93%, or A.
Student earns 85.7%, will be recorded as 86%, or B.

For weighted categories within a course, you can average your grade throughout the course. For example: exams, 50%, quizzes 25%, final 25%. You average the scores for each category and multiple that by the weight.

Your exam scores are 95 & 75. 95 + 75 = 170/2 = 85 x weight of 0.5 (or 50%) **42.5**
Your quizzes……. 80, 70, 60, 90, 90, 80. 470/6 = 78.3 x weight of 0.25 (or 25%) **19.25**
Your final exam score was: 77 x weight of 0.25 (or 25%) **19.25**

Add the bolded numbers = 81% is your final grade

Allied Health and other courses may use a different scale.

Grades may be viewed on MySouthern at mid and endterm. Midterm progress may be distributed by the instructor.

Accrediting Agencies and Standards

The Joint Review Committee on Education in Radiologic Technology, JRCERT, monitors Radiography programs. Reports are submitted and visits are made according to the schedule set by the JRCERT.

The document that states what each program follows is called Standards for Accredited Educational Programs in Radiologic Science. A copy may be viewed on the JRCERT.org website. The address and phone number are listed in the back of this handbook.

The state of WV also must review the program. Their visits are usually in conjunction with the JRC's.

Students are a part of the accrediting process. JRC and WV state officials may ask to speak with you.

To assure academic and program effectiveness, the college and program are reviewed through an accreditation process. Documentation of student work and data may be requested.

Samples of student work may be provided to an accrediting body throughout my time in the program or after. (Sign statement at orientation)

The college also completes a self study for regional accreditation. Samples of student work may be submitted.

The program and college will send you a graduate survey six months to five years after graduation. The program will ask your employer to complete a survey asking about you. By signing below, you are giving the program and college permission to send the survey to your employer and allowing them to respond to questions on the survey or via other communications.

Accrediting Agencies and JRCERT

I understand that samples of my work (class or clinical) or other documentation may be requested by accrediting agencies for the college or program, during my time in the program or after.

_____	_____	_____
Printed Name	Signature	Date

Class Representation

Each Radiology class has the opportunity to function as a team at the WVSRT or other conferences, promote the career, and educate the public about health issues. Usually at the end of the first September, the class will elect officers. These officers will serve the entire two years. Candidates should display honesty, integrity, leadership and great communication skills. Officers may attend Student Government Association meetings.

The offices are:

- President
- Vice President
- Secretary/Treasurer

Class officers may be asked to serve as ushers at graduation or pinning of their upperclassmen.
Only Southern approved t-shirt designs may be used.
No signage may be posted without approval and then only in designated areas.
A class photographer may be designated to record class labs, clinic and outside events like the WVSRT conference. No patients may be in photos. These photos may be used for the pinning ceremony.
All students are encouraged to participate in SGA, Student Government Association, events and/or a college sponsored group.

Reviewed 2013, 2014; and revised 2015

Fund raising participation

Fundraising events can be non Southern related; No faculty may be involved. Events must be preapproved on a solicitation form three weeks in advance whether held on campus or not.

Monies may not be collected or maintained by any Southern faculty or employee. If fundraising events bring in money, it must be given to the Foundation to be held until needed.

Joint Advisory Committee for Radiologic Technology

The Joint Advisory Committee for Radiologic Technology meets once or twice a year. This committee is made up of hospital representatives at which students rotate, a radiologist or radiation safety officer, supervisors, and clinical instructors. This committee discusses any issues or concerns, reviews assessment data and makes suggestions for improvement. One student from each class will be selected by the program director. This student will be excused from clinic for this meeting, but must make up any class work missed, if it is on a class day. This student may be asked to relay information from the class to the advisory committee, or may be asked to speak on the students' behalf on something that is discussed at the meeting. Usually, the student gives a brief summary of the meeting in class. This student must communicate well and be respected by others.

The following are costs excluding the fees for physical exam and immunizations/shots.

Tuition costs (may vary w/ the number of credit hours)	$ 8340 In-state $14400 Out-of-state
Fees over 5 semesters (course, online, wellness, technology)	$ 830.00
*Drug screening and background check	$ 150.00
*Uniform 2 sets pants/top or shirt	$ 120.00
*Leather uniform shoes	$ 60.00
*Film Identification Markers 1 set	$ 20.00
*Radiation Dosimeter holder and monitor ($30 first semester)	$ 170.00
Immunizations (over the first year)	$ 180.00
Influenza vaccination annually	$ 60.00
*Physical exam	$ 100.00
Textbooks (used vs. new) For the First semester- $1,032 - 1188	$ 2103-2485
Online review (part of RA 225) 6 months	$ 100.00
HESI online package ($217; $263 with adaptive quizzing)	$ 263.00
CPR course or renewal	$ 30.00
Review Seminar for certification exam preparation	$ 260.00
ARRT Registry application fee	$ 200.00
WV Radiologic Technology Temporary License	$ 40.00
National Radiology Honor Society (if eligible)	$ 20.00
National Radiology Honor Society honor cord (if applicable)	$ 10.00
Pin for pinning ceremony	$ 10.00
Passport photo. For ARRT application	$ 15.00
Graduation Photos (optional)	$ 50.00
Graduation Fee (cap & gown, diploma)	$ 50.00
WVSRT annual conference, student registration (+join WVSRT)	$ 200.00
Lodging for conference, 2 nights	$ 200.00
Travel to/from clinical sites (varies depending on student address; Overnight stay if required)	$ 1000
Total Approximate Cost of Program	**$ 14,581 (In-state)** $ 20,641 (Out-of-state)

*These are first summer or first semester costs. Tuition depends on number of enrolled hours.

These are estimated costs intended to give you a rough idea of costs over the two year period. Tuition and book costs may change. Costs do not take into consideration grants, Promise or other deductions earned by the student. Physical exam cost varies if health insurance or private pay.

Revised 2012, 2013, 4/15; 8/16

Assessment

Southern WV Community and Technical College is required to perform assessment to indicate student learning. You will receive a letter of notification to attend assessment day or other testing. You will not have to make up clinic if it falls on a clinic day. Classes may be cancelled for Assessment Day. Usually second year students must attend Assessment day. Some years, an assessment activity is presented where allied health and nursing students participate in a mock disaster for example.

Courses are evaluated after midterm. You will be given the opportunity to make comments and evaluate each instructor and course. These evaluations are usually completed online. You will complete a separate evaluation for clinic rotations.

Professionalism

The Code of Ethics for Radiologic Technologists, found at ASRT.com, states how (s)he should conduct him or herself. The faculty would like to promote professionalism while the student is in the program. The following are a list of some of the ways in which the student can display professionalism, but may include others.

1. Respect others opinions
2. Listen as others speak
3. Address faculty as Miss, Mrs., Mr. or Professor unless told by them otherwise
4. Maintain a clean and neat appearance in class and clinic
5. Use respectful language in an appropriate volume and tone
6. Display positive body language
7. Do not use electronic devices in class, clinic or at conference sessions

The instructor is responsible for maintaining order that preserves the integrity of the learning environment. If the instructor feels that the behavior of a student is disturbing, interfering with instruction, offensive, or otherwise inappropriate, the student may be dismissed from the learning environment for that class period. Further action may be taken if indicated by the seriousness of the behavior including, **but not limited to,** dismissal from the program.

I understand that a conviction of a felony or misdemeanor requires documentation with a letter of explanation to the Radiology Department of Southern West Virginia Community and Technical College prior to entering the Radiology program.

I understand that such a disclosure does not guarantee that I will be allowed to enter and complete a program in the Department of Allied Health.

If I am allowed to enter the Radiology Program, I understand I must also send a copy of the documentation of the felony or misdemeanor (other than parking/speeding tickets) with the letter of explanation to the American Registry of Radiologic Technologists for determination of eligibility to sit for the ARRT Registry Examination. The state of WV board of examiners for radiologic technologists may ask for documentation. They may deny licensure depending on the nature and severity of the felony/misdemeanor.

Printed Name: _____ _____
Student Signature

Date: _____ Program official initials: _____

Sherry Adkins Memorial Scholarship
Scholarship History:

Established in 2008 to honor the life of the late Sherry Stepp-Adkins. Sherry was a Radiologic Technologist at Putnam General Hospital. The scholarship was established by her family and friends.

Criteria: Designated to assist non-traditional students (22 years and older) with their educational expenses while attending clinical settings in our area.

Applicant

- Must be a high school graduate
- Must be accepted into the Radiology Technology program at Southern
- Must have G.P.A. of 3.0

Amount:
Two - $500 awards per academic year ($250 for two semesters)
How to Apply: Apply by the deadlines- usually the semester before the award is given. Submit application to RT Coordinator. The application is found online.

Other Financial Assistance

From time to time, students may need financial assistance for travel costs to/from clinic, textbooks, or other fees. If the student cannot meet the Sherry Adkins Scholarship criteria, he or she may approach the Coordinator to pursue assistance from the Southern Foundation. The student must give rationale and justify the amount requested. It is the student's responsibility to complete financial aid forms, etc. but may always seek assistance from the office of financial aid. Logan Regional Medical Center offers a scholarship, for example.

I have received a copy of the Radiologic Technology Student Handbook and completed its orientation. I understand that I will be quizzed on its contents before attending clinical rotations and throughout the program. I must pass the quiz with a minimum of 85%. I may retake the quiz. Quizzes may be in an orientation session or online.

Changes may be made at the discretion of the program at any time.

I understand that I am responsible for the information, changes or revisions of the handbook as necessary. I will abide by the policies and procedures.

_____

Printed Name

_____

Signature

_____

Date

SWVCTC
Radiologic Technology Program

Clinical Manual
2016

Developed by: Russell Saunders
August 2006
Reviewed & Revised: August 2007, 8/2008, 5/2009, 8/2010, 8/2013, 8/2015; 8/16

High Frequency X-ray Machine

Health and Abilities of a Radiologic Technologist

To work around the sick, the student MUST be free of Communicable Diseases. The student RT must also be in good physical condition to be able to lift patients and manipulate heavy equipment. The student RT must be alert and mentally sharp to avert equipment malfunctions and select proper technique values per each patient. If the student is suspected of DRUG or ALCOHOL ABUSE while in clinical settings, he/she will be sent home and will receive an UNSATISFACTORY for the day. Prolonged DRUG or ALCOHOL use will be cause for dismissal from the program. If behaviors threaten self or others, immediate alcohol and/or drug testing will be conducted at the students' expense.

HEALTH REQUIREMENTS

All students who enter into a field of Health Sciences must have a PHYSICAL EXAMINATION which is to be submitted prior to clinical placement. The IMMUNIZATION for Tetanus must be current.

REQUIREMENTS:

1. A recent physical with forms to be submitted to the Program.
2. A recent Tuberculin Skin Test or recent Chest X-Ray.
3. A recent Hepatitis B Test or Waiver will be submitted to the Coordinator.
4. A titer (blood test) showing Hep B results
5. Annual influenza vaccination

Hand washing must be performed:

1. prior to all invasive procedures
2. if contaminated with blood and/or body fluids
3. immediately after gloves are removed.
4. Before and after eating

When contact will occur with a known infectious patient or a patient of high risk, the student must be under the direct supervision of a registered technologist.

Physical Attributes

The Radiology student must demonstrate that they possess the following physical attributes:

Mobility: Physical abilities sufficient to move from room to room and to maneuver in small spaces e.g. between beds, equipment, etc.

Motor skills: Ability to reach, manipulate and operate equipment, access supplies, and assist patients.

Hearing: Auditory ability efficient to hear alarms, patient's requests, take phone orders from physicians, and hear equipment malfunctions.

Visual: Visual ability sufficient for observation, and assessment of patients during radiographic procedures. Read forms, labels, and instructions; distinguish colors; and visualize detail on a radiograph.

Smell: Sense sufficient to maintain patient and co-worker safety, e.g. smell fire, gas, toxic agents, etc…

Temperament: Ability to deal effectively with stress and emergency situations.

Physical Requirements: Constant walking, standing, lifting, seeing, hearing, talking, public contact, decision making, equipment and computer operation, reading, handling, reaching, grasping, feeling, handling stress and grief. See also Technical Standards.

Standard of Conduct and Performance for Radiology Depts.
All policies, rules, and regulations regarding student rights, responsibilities, and conduct in West Virginia Universities and Colleges apply to the clinical portion of this program. These policies, rules, and regulations are listed in the Southern West Virginia Community and Technical College's Student Handbook and sections in the college catalog.

Additional standards and procedures exist for the Student Radiographer. As stated in the Agreement for Clinical Education, there is a clause which allows the clinical agencies to reject or dismiss any student whose behavior may be hazardous to that agency. If this occurs, the Faculty and/or College will review the case and render a decision as to the student's status. Students have all rights and privileges under this due process system, recognized in regulations mentioned above.

STUDENT CLINICAL ASSIGNMENTS AND PROCEDURES

Each student in the radiologic technology program will be assigned to clinical rotation sites each semester. It should be noted that most students will be assigned to more than one clinical site to perform their clinical education. The best clinical education includes a variety of clinical sites, personnel, and equipment, workload and patient demographics. Students travel distance is considered when making schedules. Each semester rotations may or may not be at a different clinical site. The availability of sites for the radiologic technology program is based on a contractual agreement between the facility providing the clinical rotation experience and Southern WV Community and Technical College, as well as mutual agreement on the clinical schedule and student placement for their facility. Based on clinical affiliation site contracts, each clinical site has the right to terminate their affiliation with Southern within a specified time frame but shall not affect those presently enrolled and performing clinical training. If a facility terminates a contract and/or denies permission for a student or students to perform clinical training in their facility, Southern's radiologic technology department will make every effort to find the student another clinical site in the college's service area; however, students should be aware that the only available site may in different locales than the original assignment. Should this situation occur, clinical rotation assignments will be made by the clinical coordinator and based on the availability of appropriate clinical sites. Students not able to be placed in a clinical site will be placed on a waiting list (in order of academic performance in RA courses) and will be placed as soon as an appropriate site becomes available. That student's clinical education will be the same as for all others.

A student may be admitted to the radiologic technology program under conditions in which a clinical assignment cannot be guaranteed and/or situations may arise once the student is enrolled that may delay or prevent clinical site assignment. These conditions include, but are not limited to:

1. Students who require accommodation that cannot be reasonably provided – The radiologic technology department will make reasonable attempt(s) to assign the student to a clinical site in a timely manner. Such a clinical assignment is not guaranteed and the student's completion of the curriculum may be delayed or may not be possible.
2. Students who are impacted by unusual circumstances that require a clinical site or Southern to temporarily or permanently suspend its clinical relationship – The radiologic technology department realizes that such circumstances are without foreknowledge of the student, and that the first responsibility of Southern is to the student enrolled in the curriculum. Every effort is made to re-assign the student within the shortest time frame to another clinical affiliate such that the student's graduation is delayed as little as possible.
3. Students who are convicted of a felony or become involved in criminal acts after admission preventing clinical assignment. Clinical assignment may be delayed or not be possible.

Examples of past clinical rotation schedules may be reviewed in the clinical coordinators office. It should be noted that these are only examples and schedules are somewhat unique each year. Your schedule may or may not be like these examples.

Revised from Dept. of AH/N policy and procedure. 12/2012

Clinical/ Class Assignments

Clinical rotation times may include early morning to late night. For example, 7:30 am – 4 pm (summer clinic), 3-11 PM second year, 7:30 am – 2 pm… Didactic courses follow the curriculum sequence. Students are responsible to registering for courses early to assure availability. No didactic classes may be taken on clinical days, unless they are online/Blackboard.

Any changes in schedules for Radiology students must go through the Program Director.

Any change in clinical assignment must be made through the Clinical Coordinator.

Presence in Authorized Clinical Areas

The student may only enter clinical authorized areas during the scheduled time periods of his time in the program due to capacity and confidential issues. Student presence at these sites during unscheduled times may be considered as trespassing and be subject to infringement of program policy. Furthermore, unauthorized use and/or possession of clinical supplies outside program guidelines is grounds for dismissal. Your uniform may be worn for scheduled times of clinic rotations.

Clinical Absences

Clinical rotations are courses and therefore adhere to attendance, tardiness and weather policies.

EXCUSED ABSENCES REFER TO:

A. INSTITUTIONAL (such as snow days, etc…)
B. UNAVOIDABLE- Death in the immediate family, illness (with physician's excuse)

To utilize excused clinical time under this policy, there will be proper documentation presented to the Clinical Coordinator.

UNEXCUSED clinical absences: those not meeting the excused criteria. Unexcused clinical absences cannot be made up. There will be a 1 letter grade deduction.

Any clinical time accumulated due to professional educational activities must be prearranged and documentation received by the Clinical Coordinator.

Reviewed and revised 5/2015

Clinical Tardiness

1. Tardiness is when any student reports to the clinical facility after seven (7) minutes from the assigned start time.
2. After receiving 3 tardies, there will be a 1 letter grade deduction.
3. If the student's tardies are cumulative of 30 minutes or more after receiving the unexcused absence due to being tardy, the clinic time will result in a grade deduction.

Student Approved Time Off Clinical Policy and Procedure

Time off will be granted as approved by the Clinical Coordinator in advance. The student must document the approved time off (SATO) on the timecard with the CI's initials. The maximum SATO varies per semester and can be used at the student's discretion. One day is defined as the number of hours assigned for one clinic day that semester. No make-up days. If an emergency occurs contact the Clinical Instructor and Clinical Coordinator.

The amount of SATO per semester follows:

RA 110 1 day
RA 125 1 day
RA 150 1 day

During the first year (RA 110, 125, 150) SATO must be taken by the end of the summer semester. No untaken SATO time may be carried over into the second year.

RA 200 1 day
RA 250 1 day

During the second year (RA 200 & 250) SATO must be taken by the end of the spring semester.

Reviewed & revised 5/09; 4/2015; 5/2015

Inclement Weather Policy for Clinical Education

In the event that inclement weather does occur, the following rules apply:

1. Clinical education is NOT cancelled UNLESS:
- ONE of the campuses is closed & classes are cancelled.
- Program faculty/Clinical coordinator cancel clinical education based upon current or forecasted weather. Students may be notified by phone, email, text message, and/or private group - social media page.
- In the event that scheduled day or evening classes are on a regular schedule and the other shift is cancelled due to changing weather conditions, the students attending that particular shift do not have to attend or make-up that clinical education activity.
- In the event that part of your clinical education shift is cancelled due to changing weather conditions, i.e. morning classes cancelled, you must attend the afternoon portion of your clinical education if applicable.
- Cancellation of clinical education authorized by the college or program faculty will not be rescheduled unless the student needs to complete specific exam competencies for graduation.

2. During an inclement weather situation, the student will routinely use the county school system decision in which they reside or where the clinical education center is located to assist them in making an informed/safe decision to travel to clinical education. However, if Southern does not cancel classes it must be rescheduled.
    - WARH, WMH, & MPR students will use the Mingo County, West Virginia school system in making this decision. This also applies to the county school system starting time delays. If your county residence or clinical education center county has a delay, you may follow their schedule for safety concerns. The missed time will be made up in the restricted time frame below or SATO will be used by the student.
    - Please use your discretion and judgment in traveling to your clinical education center.
    - For safety reasons, you do NOT have to attend clinical education that particular day or evening if the county school system in which you reside and/or attending clinical education has cancelled school.
    - HOWEVER, if Southern WV Community & Technical College classes are NOT cancelled, the scheduled clinical education activity must be rescheduled in the restricted time frame below with clinical coordinator/clinical instructor of the particular clinical education center or SATO will be used by the student.
    - The scheduled clinical education activity will be made up during the SAME shift and CES location and during the restricted time frame below or SATO will be used by the student:
        a. **Spring Semester:** Spring break week except for Good Friday - same CES & shift
        b. **Fall Semester:** Thanksgiving break week except for Thanksgiving Day or Friday - same CES and shift.

        c. Summer Semester: July 4th break week except for the actual holiday - same CES and shift.

3. Notify **the facility/clinical coordinator** 30 minutes prior to start time if you are not sure to travel. We do not want you in danger while traveling to clinical education so please use extreme caution when bad/inclement weather does occur.

   Students are urged to sign up with the Southern alert system for notifications.

   Reviewed and Revised: August 2010; August 2011; August 2013; January 2015; April 2015

Vacation and Attendance Policy

The accrediting body (JRCERT) for Radiology Program requires that the program hold the student to clinical competencies. These competencies are accomplished during your clinical assignments. Students will receive all breaks as scheduled in the academic calendar. The only period that this program will deviate from the academic calendar is during the summer clinical assignment. During this time there will be a one week break, usually near the July 4 holiday. For the types of absences, see the attendance policy.

Compensatory Time Policy

Compensatory time must be pre-arranged with the Clinical Coordinator and Clinical Instructor. It is the student's responsibility to see that all time is recorded promptly and accurately on the appropriate forms kept by the Clinical Coordinator. Compensatory time will be granted for out-of-program assignments and seminars- this may be used as clinic time as defined by the Program Director.

Overtime Policy

Students are only allowed to participate during scheduled clinical hours. No student will be allowed to accumulate overtime. No student may exceed 40 hours a week in scheduled class and clinic time combined.

Withdrawal from class

Students failing at Midterm will be notified by letter or online. Please consult with your advisor should you receive a failing letter. It is the student's responsibility to be aware of his/her average during the semester and to seek counseling accordingly. If you withdraw during the withdrawal period, your grade will be recorded as a "W" and will not count in your grade point average. If you withdraw after the withdrawal period ends, you will be given a "WF" (Withdraw Failing) or "WP" (Withdraw Passing) by the class instructor. A "WF" will appear on your transcript as a "WF" and will be averaged in with your grade point average. A "WP" will appear on your transcript and a "WP" but will not be averaged in with your other grades. Check your college calendar for the last day to withdraw with a "W". (Consult the Tuition Refund Policy online).

WITHDRAWAL IN A REQUIRED RADIOLOGY COURSE WILL PLACE THE STUDENT OUT OF THE PROGRAM UNTIL THAT COURSE HAS BEEN SATISFIED IN THE SEQUENCE OF COURSES. ALL RADIOLOGY COURSES MUST BE COMPLETED IN A THREE YEAR PERIOD.

Travel to Clinical Settings

A vital portion of the Radiologic Technology program curriculum is clinical education. To obtain the greatest possible opportunities for competency on different imaging systems, types, and the maximum availability of procedures, you will be expected to travel to each or most of the clinical sites at some point during the two years. You can arrange to carpool with fellow students or make arrangements for housing.

I understand that it is my responsibility to arrange travel to and from clinical sites for scheduled clinical rotations, tours and orientations.

_____ _____

Student's Printed Name Student's signature

_____, 2016

Date Note: Signature obtained at May or August orientation.

Clinical Dress Code

Students must maintain a professional appearance at all times. A conservative appearance in grooming is mandatory. Good personal hygiene is mandatory.

Clinical UNIFORMS

Only approved Southern Radiology uniforms must be worn. Returning students must adhere to current uniform policy. A plain, white or black shirt or turtleneck, may be worn under the top. Students working on portable and surgery may substitute hospital issued scrubs for the assigned uniform. Uniforms must be neatly pressed and pants at a length not below the shoe heel edge. Pants should not drag the ground. Pants must be worn at the waist, not below. Do not use plain bleach or uniforms will yellow. Hospital scrubs are the property of the hospital and MAY NOT be worn home.

Hoodies, sweaters are not permitted. A white or black long sleeve, plain t-shirt or turtleneck may be worn under the uniform top. The shirt may not have any writing or logos.

The uniform should be worn only in clinical settings or at an approved campus event. The entire uniform must be worn when entering or exiting a clinical site.

Undergarments, bare skin and/or cleavage should not show when leaning or bending over.

SHOES & SOCKS

Standard white or black leather shoes are required. Good quality shoes will be important to your feet and back. White or black socks or hose must be worn.

HAIR AND BEARDS

Hair must be confined neatly out of the face when in patient care areas. If below collar length, it must be pulled up (this also includes men). Plain, inconspicuous barrettes may be worn. Beards and mustaches are permitted if kept clean and neatly trimmed.

ID BADGES AND NAME TAGS

The approved ID will be the Southern ID. Name tags must be visible while at clinical sites and worn at the lapel or upper shirt pocket level, with the name side visible, not covered by stickers, pins, R/L markers.

RADIATION MONITORING (DOSIMETER) BADGE:

The dosimeter must be worn properly.
If only one badge is worn, it will be worn at the collar, outside the apron. If wearing two, the second one will be worn under the apron at the waist level. If the student does not have a dosimeter he/she will be sent home with the remaining hours for the day deducted from clinic time. The dosimeter must be worn for on campus labs.

GUM: Gum chewing is not permitted.

FRAGRANCES:

Most healthcare facilities are fragrance free. Co-workers, staff and patients may be allergic or sensitive to cologne or perfumes. This may include scented lotions and sprays.

JEWELRY

Jewelry must be kept to a minimum for safety and aesthetic reasons. Engagement rings and/or wedding bands may be worn if you choose EXCEPT in the situation where ALL jewelry is contraindicated (operating room, applying sterile gloves, etc…). A small, plain watch may be worn.

You may wear one pair of small, inconspicuous, post pierced earrings. One hole earrings only – no bar type. For safety and aesthetic reasons no other piercings may be worn on other body parts while attending clinical rotations. Ear gauges are not permitted. Bracelets that promote a cause or make a statement may not be permitted within the facility. You may be permitted to wear a small pin, badge during national RT week, with permission.

FINGERNAILS AND NAIL POLISH and MAKE-UP:

Fingernails must be kept short and filed smoothly so they do not extend beyond the ends of the fingers. This is to ensure both your and the patients' safety. Only clear nail polish is permitted. Acrylic nails (acrylic or gel) or tips are not permitted. Decals on nails are not permitted. No HEAVY make-up is permitted. You are to appear clean and professional.

TATTOS:

Tattoos may not be visible whether temporary or permanent. They must be covered.

R/L Markers:

Each student must purchase at least one set of markers with three initials. It is recommended that two sets be purchased. Markers not visible on competency means the competency is not graded.

Dress Code at Professional Meetings/Conferences:

The student is representing the College at the conference. It is expected that the student will dress and behave professionally. The Southern polo and/or approved t-shirt may be permitted for competition. College and program policies are to be followed.

Individual clinical instructors reserve the right to send a student home from clinic if these guidelines are not met. There will also be a reduction to total clinical time and assignments that could result in a grade reduction. Documentation will be placed in the student's file.

Reviewed and revised 5/2015

VIOLATIONS IN THE DRESS CODE OR ANY OTHER POLICY, WILL RESULT IN DISCIPLINARY ACTION.

Disciplinary Action:

The Student Session Documentation form is used to note any disciplinary action, or progress reports in clinic or didactic courses.

First Offense	Verbal Warning
Second Offense	Written Warning
Third Offense	Deduction of One (1) letter grade in the Clinical Area

See the form on the next page.

Student Session Documentation

Student: _____ Date: _____

Clinic: ___ or Class: ___

Reason(s) for Session:

- Clinical Progress ( ) Verbal
- Didactic Progress
- Disciplinary (Tardiness, clinical dress code, etc) ( ) Written
- Student initiated
- Other

Comments/Description:

Suggestions to improve:

Signatures: Student: _____

Instructor: _____

Copy will be maintained on file
Revised 4/2015

I. Purpose:

This policy describes the rules and procedures for maintaining a radiation safety program consistent with the ALARA concept. Note that this policy is written for a hospital imaging services department. Some specifics are not pertinent. When user or worker are mentioned, it refers to students. Additions are in italics usually to include program faculty.

II. Introduction:

Ionizing radiation is among the most versatile and useful tools of medicine and biomedical research. Like many other instruments of medicine, ionizing radiation is potentially hazardous unless used with strict adherence to safety rules and procedures. Thus the safety rules which govern the uses of radiation are concerned with preventing genetic damages as well as with protecting the health of the exposed individual.

The rules and procedures set forth here have one single, straightforward purpose; to protect the patients, employees and visitors from unnecessary and potentially harmful radiation. The existing safety program has many facets designed to keep levels of exposure to personnel at a minimum. The program has three main phases:

PHASE I

Achieve the objective of maintaining radiation exposures to "As Low As Reasonably Achievable" (ALARA) to employees, visitors, students, and patients who are not under medical supervision of the administration of radiation or radioactive material for diagnostic or therapeutic purposes.

PHASE II

Control operational procedures by the user of radiation sources.

PHASE III

Evaluate the radiation safety program performed by the Radiation Safety Office, health physics consultant, and the Radiation Safety Committee.

IMAGING DEPARTMENT
RADIATION SAFETY PROGRAM (ALARA)

INTRODUCTION

A. Purpose

This program sets forth the philosophy and general management policies that are established by this hospital to achieve the objective of maintaining radiation exposures "as low as reasonably achievable" (ALARA), for employees, visitors, students and patients not under medical supervision for the administration of radiation or radioactive materials for diagnostic or therapeutic purposes.

B. Policy

In addition to complying with the limits set forth in pertinent regulations, guides, and standards, users and supervisors of radiation sources shall make every reasonable effort to maintain radiation exposures, and releases of radioactive materials in effluence to unrestricted areas to as low as reasonably achievable.

MANAGEMENT *(Faculty)* COMMITMENT

A. The management *& faculty* and the entire staff of this hospital are committed to the program described herein for keeping radiation exposures, individual and collective, to as low as reasonably achievable.

B. We will perform a formal annual review of the radiation safety program including ALARA considerations. This shall include reviews of operating procedures and past exposure records, inspections, etc., and consultations with the radiation protection staff or outside consultants.

   a. Modification to operating and maintenance procedures and to equipment and facilities will be made where they will reduce exposures unless the cost, in our judgment, is considered to be unjustified. We will be able to demonstrate, if necessary, that improvements have

   b. been sought, that modifications have been considered, and that they have been implemented where reasonable. Where modifications have been recommended but not implemented, we will be prepared to describe the reasons for not implementing them.

   c. In addition to maintaining doses to individuals as far below the limits as is reasonably achievable, the sum of the doses received by all exposed individuals will also be maintained at the lowest practical level. It would not be desirable, for example, to hold the highest doses to individuals to some fraction of the applicable limit if this involved exposing additional people and significantly increasing the sum of radiation doses received by all involved individuals.

RADIATION SAFETY OFFICER, AND HIS CONSULTANT STAFF

ARE RESPONSIBLE FOR THE FOLLOWING:

A. Review:

i. Annual review of the Radiation Safety Program. The RSO will perform an annual review of the Radiation Safety Program for adherence to ALARA concepts. Reviews of specific procedures may be conducted on a more frequent basis.

ii. *review of Occupational Exposures usually monthly when students are in clinicals.* The RSO will review at least quarterly *(usually monthly)* the external radiation exposure of authorized users and workers to determine that their exposures are ALARA in accordance with the provisions of paragraph VII of this program.

iii. Quarterly review of records of Radiation Level Surveys. The RSO will review radiation levels in restricted and unrestricted areas to determine that they were at ALARA levels during the previous quarter.

B. Educational Responsibilities for an ALARA Program:

iv. The RSO will schedule briefings and educational sessions to inform *(students)* workers of ALARA program efforts, *if necessary and requested by faculty.*

v. The RSO will assure that authorized users, workers and ancillary personnel who may be exposed to radiation will be instructed in ALARA philosophy and informed that management, the RSO are committed to implementing the ALARA concept.

C. Cooperative Effort for Development of ALARA Procedures:

Radiation workers will be given opportunities to participate in the formulation of the procedures that they will be required to follow.

vi. The RSO will be in close contact with all users and workers in order to develop ALARA procedures for working with radioactive materials.

vii. The RSO will establish procedures for receiving and evaluating the suggestion of individual workers for improving health physics practices and encourages the use of those procedures.

D. Reviewing Instances of Deviation from good ALARA Practices:

The RSO will investigate all known instances of deviation from good ALARA practices and, if possible, determine the causes. When the cause is known, the RSO will require changes in the program to maintain exposure to ALARA.

AUTHORIZED USERS

A. **New Procedures Involving Potential Radiation Exposures:**

viii. The authorized user will consult with, and receive the approval of, the RSO and/or RSC during the planning stage before using radiation sources for a new procedure.

ix. The authorized user will evaluate all procedures before using radiation sources to ensure that exposures will be kept ALARA. This may be enhanced through the application of trial runs.

B. **Responsibility of the Authorized User and Those S/he Supervises:**

x. The authorized user will explain the ALARA concept and her/his commitment to maintain exposures ALARA to all of those s/he supervises.

xi. The authorized user will ensure that those under her/his supervision who are subject to occupational radiation exposure are trained and educated in good health physics practices and in maintaining exposures ALARA.

PERSONS WHO RECEIVE OCCUPATIONAL RADIATION EXPOSURES

A. The worker will be instructed in the ALARA concept and its relationship to her/his working procedures and work conditions.

B. The worker will know what recourses are available if s/he feels that ALARA is not being promoted on the job.

ESTABLISHMENT OF INVESTIGATIONAL LEVELS IN ORDER TO MONITOR INDIVIDUAL OCCUPATIONAL EXTERNAL RADIATION EXPOSURES

This institution hereby establishes Investigational Levels for occupational external radiation exposure, which, when exceeded, will initiate review or investigation by the Radiation Safety Officer or consultant staff. The Investigational Levels that we have adopted are listed in Table I below. These levels apply to the exposure of the individual workers.

TABLE 1 Ref Reg Guide 10.8 rev 2

Investigational Levels – (mrems per calendar Quarter)

	LEVEL I	LEVEL II
1. Whole body	125mrem/Qtr	375
2. Extremities or skin	1250/mrem/Qtr	3750
3. Lens of eyes	375/mrem/Qtr	1125

The Radiation Safety Officer will review the results of *(student)* personnel monitoring, not less than once in any calendar quarter. The following actions will be taken at the Investigational Levels as stated in Table I:

A. Quarterly exposure of individuals to less than Investigational Level I.

Except when deemed appropriate by the RSO, no further action will be taken in those cases where an individual's exposure is less than Table I values for the Investigational Level I.

B. Personnel exposures equal to or greater than Investigational Level I, but less than Investigational Level II.

The RSO will review the exposure of each individual whose quarterly exposures equal or exceed Investigational Level I. S/he will report the results of her reviews at the first RSC meeting following the quarter when the exposure was recorded. If the exposure does not equal or exceed Investigational Level II, no action related specifically to the exposure is required unless deemed appropriate by the Committee. The Committee will, however, consider each such exposure in comparison with those of others performing similar tasks as an index of ALARA program quality and will record the review in the Committee minutes.

C. Exposures equal to or greater than Investigational Level II.

The RSO will investigate in a timely manner the cause(s) of all personnel exposures equaling or exceeding Investigational Level II and, if warranted, take action. A report of the investigation, actions taken, if any, and a copy of the individual's dosimetry record will be presented to the *program faculty* following completion of the investigation. The details of these reports will be recorded, *documented and maintained in the students file.*

D. Re-establishment of an individual occupational worker's Investigational Level II above that listed in Table I.

In cases where a worker's or a group of workers' exposure needs to exceed Investigational Level II, a new, higher Investigational Level II may be established on the basis that it is consistent with good ALARA practices for that individual or group. Justification for a new Investigational Level II will be documented.

The Radiation Safety Committee will review the justification from, and will approve, all revisions of Investigational Level II. In such cases, when the exposure equals or exceeds the newly established Investigational Level II, those actions not listed in paragraph C above will be followed.

We, the management of this hospital *and Southern faculty*, are committed to the program procedures and the development of new procedures as appropriate to implement the ALARA concept.

With Permission, Reference: Thomas Memorial Hospital, Imaging Services, Policy and Procedures.
TMH Reviewed / Revised Dates: 2/1/2011 Revised to this handbook, 8/2013; 1/2014
TMH reviewed 7/2013 Reviewed by RSO, 2015

Radiation Protection Policy for Clinical Education and Labs

All students will be issued a dosimeter at the beginning of the program. This badge must be worn at all times in the radiology/imaging departments and during laboratory practice.

No student will hold a patient or film in any situation. All students must be completely behind the lead barrier during exposures unless they are assisting with a fluoroscopy case.

See policies for radiation protection for the CT room (room 112) and diagnostic room (room 113).

Violation to any radiation protection/safety policy will result in student session documentation.

The radiation safety program (ALARA) will be followed.

Reviewed and revised 4/2/2010; 8/2013

CT Lab, Room 112 Use

The following policy and procedures are to be followed in regard to Room 112, CT Lab, Building C. Disciplinary action may be taken if any are violated- refer to the policy in the student handbook. Serious violations involving occupancy during exposures, unsupervised use of equipment will result in immediate counseling with possible suspension or dismissal from the program.

1. Doors to room 112 will remain closed at all times and the control room locked.
2. Students must be directly supervised for all CT machine operations, simulations, exposures and image reviews.
3. Requirements for student use of CT lab:
    a. Instructor led review of basic CT unit, and radiation protection using CT clinical objective as a guide. Objective must be completed before student participation.
    b. Radiation dosimeter must be worn at all times when inside room or control room.
    c. Scheduled times approved and posted on outside door, by the instructor.
    d. While simulating positioning, no students are permitted in the control room.
    e. No students may be inside the room during exposures. The control room door must be closed. Some students must leave the room and remain outside the doors until told to re enter. Again, the main doors to the room will remain locked.
    f. Exposures may only be made using approved CT phantoms, under direct supervision, after checking that doors are closed.
4. When the "X-ray On" light is illuminated, do not enter the room.

Radiation Safety for Room 113, Diagnostic Lab

The following policy and procedures are to be followed in regard to Room 113, Diagnostic Imaging Lab, Building C. Disciplinary action may be taken if any are violated- refer to the policy in the student handbook. Serious violations involving occupancy during exposures, unsupervised use of equipment will result in immediate counseling with possible suspension or dismissal from the program.

1. Doors to room 113 will remain closed at all times when labs are scheduled. A sign must be posted on each door during lab times, stating LAB IN PROGRESS DO NOT ENTER
2. Students must be directly supervised for all machine operations, simulations, exposures and image reviews.
3. Requirements for student use of the diagnostic lab:
    a. Instruction of basic radiation protection methods in Introduction module. Complete before student participation.
    b. Radiation dosimeter must be worn at all times when inside room or control room.
    c. Scheduled times approved and posted on outside door, by the instructor.
    d. While simulating positioning, no students are permitted in the control room.
    e. No students may be inside the room during exposures. Prior to the exposure, the radiographer must verbally say, "X-ray, clear the room." Some students must leave the room and remain outside the doors until told to re enter. Again, the main doors to the room will remain locked.
    f. Exposures may only be made using approved phantoms, under direct supervision, after checking that doors are closed.
    g. The x-ray tube may not be aimed perpendicular to the wall of the CT control room. unless no one is in the CT control room.
    h. The "X-ray on" light will automatically turn on when the machine is on. If you are outside the room when the "X-ray On" light is illuminated, do not enter the room.

Standard for Wearing Radiation Monitors (Dosimeter)

The dosimeter must be worn on the collar of your uniform outside the apron. Any student found in the clinical site without their dosimeter badge on the collar will receive a documented warning following the dress code violation policy. Any student found in the clinical site without it altogether will be issued a warning and sent home, which will result in an unexcused absence. The dosimeter must be worn at the collar level of the shirt or top, for campus labs. Failure to wear dosimeter for scheduled labs may result in 0 attendance grade for the day.

Student Supervision
ALL STUDENTS DURING THEIR CLINICAL ASSIGNMENTS MUST BE SUPERVISED BY THE FOLLOWING STANDARDS:

A qualified registered Radiographer reviews the request for the Radiographic examination:

1. To determine the capability of the student to perform the examination with reasonable success, or
2. To determine if the condition of the patient contraindicates performance of the examination by the student AND
3. To ascertain that the student has obtained the necessary level of competency to perform the procedure.

If any of the above situations are questionable, the Radiographer should either perform the exam or be present in the room.

A qualified registered Radiographer checks and approves all radiographs/images prior to dismissal of the patient.

Radiography students must be supervised by a qualified and licensed Radiographer in the states of West Virginia and Kentucky during the program. There are two types of supervision:

I. DIRECT SUPERVISION

The student in this situation must have a Radiographer assigned to them on a one-on-one basis. This is for beginning or first years and in all out-of-the-department situations.

Direct Supervision Guidelines:

1. Radiographer reviews the request for each examination.
2. Radiographer determines the capability of the student to perform the exam with reasonable success.
3. Radiographer determines if the capability of the patient contraindicates the performance of the exam by the student.
4. Radiographer is to ascertain that the student has obtained the necessary level of competency to perform the exam.
5. If any of the above is questionable or negative, the radiographer should be present in the radiography room during the exam.

II. Indirect Supervision Guidelines:

Definition of indirect supervision: A qualified radiographer may be reached by the student vocally, i.e. qualified radiographer in an adjacent room or area. At no time should the student replace a staff radiographer to accommodate department needs. One student per radiographer in the department must be maintained 100% of the time.

1. Once a competency is obtained with a minimum score of 85%, the student will be under indirect supervision.

2. Exception: C-arm, Portable exams of trauma; Intensive/critical care patients where efficiency, time, and patient condition are of extreme importance: During these situations, direct supervision must be maintained.

Indirect usually applies to students at more advanced level of education and competency.

Repeat Policy

Students will be allowed to repeat a radiograph/image ONE time only. And this must be done with a qualified Technologist present in the radiographic room to assist if needed. If the repeat is not satisfactory, the Technologist must do the additional radiographs/images while the student observes.

Modality Observations

In an effort to provide opportunities for students to learn about additional modalities, observations may be permitted. Possible observations include, but are not limited to:

1. CT *
2. MRI
3. PET
4. Ultrasound
5. Bone Densitometry
6. Mammography **
7. Nuclear Medicine
8. Special Procedures

At any time during the second year, beginning in the fall, a student may request a day for observation. This will take place of a regular clinic day. This must be scheduled with the Clinical Instructor. The Clinical Instructor will notify the supervisor of the observation modality. All policies must be

followed during the observation day. No more than one student may observe on the same day, at the same location. A maximum of two observations can be scheduled per semester, per student. The student may elect to not observe.

Observation is defined as no direct patient care contact. No competency evaluations may be performed. The student is to ask questions to learn about the modality.

Following the observation the student must complete the following questions and submit to the CI to keep in the students file:

1- Observation date, location and modality
2- Why you selected this modality to observe
3- Discuss what you observed (type of procedures…..)
4- What questions you asked, including education necessary to be certified in this modality.
5- Are you interested in pursuing certification in this area following graduation? Why or why not?

* Scheduled CT rotation will be in RA 250. During this rotation, students will obtain competencies. See CT competency policy.

** Mammography is an optional competency that some students may choose to obtain after the content is covered in RA 203, second fall semester. Prior to completion of mammography course material, an observation may be scheduled.

5/09

Protocol for Equitable Mammography

Goal: To ensure compliance with JRCERT Standard Four, Curriculum and Academic Practices, 4.7, provide equitable learning opportunities for all students.

Since mammography is primarily performed on females, student observation and/or competency may be difficult. Mammography is not a required competency. The sensitivity of the procedure requires a professional attitude and confidence by the person performing the exam. As with all procedures, the patient has the right to ask that any student not observe or assist with the exam. To give both male and female radiography students an opportunity to observe and/or perform mammography exams, at least one clinical education setting has been identified to allow students to observe or perform exams, with the patient's permission. Following didactic education in RA 203 the student showing an interest in mammography, must notify the clinical coordinator who will arrange for the student to rotate/observe at this site, Logan Regional Medical Center.

8/2010; 8/2013

Laws Involving Radiology Students

According to the JRCERT's Standards policies and processes by which students may perform related work while enrolled in the program must be published and made known to all concerned IN ORDER TO AVOID PRACTICES in which students are SUBSTITUTED FOR REGULAR STAFF. Students SHALL NOT TAKE THE RESPONSIBILITY OR THE PLACE OF A QUALIFIED STAFF. However, after demonstrating competency, students may be permitted to perform procedures with appropriate supervision.

The West Virginia Radiologic Technology Board of Examiners Laws defines a Radiologic Technologist as one who assumes the act of positioning patients, setting techniques, and making exposures. Therefore, a student technologist is NOT CONSIDERED a Radiologic Technologist, and SHOULD NOT PERFORM the duties of a Radiologic Technologist. Otherwise they will be in VIOLATION OF WEST VIRGINIA CODE 20-23-3. A copy of the WV Radiologic Health Rules is in the Program Director's office, or can be found at wvrtboard.org.

Due Process (Student Grievance)
The Radiologic Technology Program follows the college policy for any issue needing resolved. The policy can be found in the College catalog online at Southernwv.edu.

For specific program issues related to non compliance to JRCERT Standards, see Complaints due Process policy.

JRCERT and Complaints Due Process Policy

Students in the program may submit a complaint or compliance issue in respect to JRCERT Standards. The following outlines the steps.

1. The student must submit the complaint or compliance issue in writing to the Coordinator.

2. The Coordinator will meet with the student within five (5) working days of receiving the student's letter. The Coordinator may include other faculty or involved persons as necessary. Discussion will be aimed at resolving the complaint or compliance issue. The student will receive a letter stating the resolution, within five (5) working days of the meeting.

If the student does not agree with the outcome, he/she may request a conference with the Division Head for Healthcare and Business programs. This request must be in writing and within five (5) working days of receiving the Coordinator's letter. The Division Head for Healthcare and Business programs will review the documentation and may request to meet with the student. The Division Head will send the student a letter stating a decision to uphold the Coordinator's decision or offer another. The letter must be sent to the student within five (5) working days of this meeting.

3. If the student does not agree with the outcome from the Division Head, he/she may contact the Vice President for Academic Affairs and Student Services, in writing (within 5 days), and request a meeting. A response from the VP of Academic Affairs and Student Services will be sent to the student within five (5) working days.

4. If the student remains dissatisfied with the outcome, he/she may contact the JRCERT. See contact information in the back of the Student Handbook or go to www.jrcert.org.

Clinic Code of Conduct: Rules and Regulations

1. The student will report to their assigned clinical session as soon as possible after clocking in.

2. On a daily basis, the student is responsible for periodically checking the workload for their clinical station in order to set the needed professional pace. This will assure that all radiologic examinations will be completed as soon as possible.

3. A student who has been assigned to a NON-OPERABLE or NON-FUNCTIONING ROOM must report to the department supervisor for reassignment. Before entering the newly assigned station, the student must report the change to the clinical coordinator for final approval. IF THERE IS WORK GOING ON IN THE CLINIC, A STUDENT SHOULD BE OBSERVING OR ASSISTING WITH IT.

4. A student who is assigned to another clinical affiliate for education in "specialty areas" must abide by that clinic's rules of conduct. If the equipment in a particular specialty station in inoperable (broken), the student will report to the affiliate's clinical instructor for further instructions or for reassignment to another specialty station.

5. The student should not leave the Radiology Department at any time during their clinical assignment; but if the need should arise, the student MUST ASK PERMISSION of their supervising staff technologist before departure.

6. Students are allowed 30 minutes for meals during their clinical assignment. If the student is unable or prefers not to eat meals during clinic, they should write "NO LUNCH (DINNER)" on their time card and this must be initialed by their supervising staff technologist.

7. Students are allowed a 15 minute break period per four (4) hours clinical assignment. Students must obtain permission from their supervising staff technologist for these breaks.

8. A student who had permission from the clinical instructor to leave clinic at an appointed time must also inform their supervising staff technologist at the beginning of the assigned shift.

9. When it is time for the student to leave clinic for the day, he/she may do so if:
   a. The supervising staff technologist is properly INFORMED and gives their permission for you to leave.

   b. The required evaluations (if any) have been completed.

NOTE:

IN THE EVENT YOUR ROOM or STATION HAS A DIFFICULT PATIENT ON THE TABLE OR IS PERFORMING A SPECIAL PROCEDURE, THE STUDENT MUST INFORM THE DEPARTMENT SUPERVISOR OF THEIR DEPARTURE. DOING SO WILL CLEAR THE STUDENT OF FURTHER PROFESSIONAL RESPONSIBILITY FOR THE PATIENT'S CARE.

10. When the student's station has concluded its patient load for the day, or has an inadequate patient load, the student must utilize their clinical time by: (in the order listed)

    a. Assisting in another radiographic station.
    b. Practice positioning with the supervising staff technologist or another available student.
    c. Practice and utilization of all equipment within the radiographic room.
    d. Cleaning and stocking supplies for the assigned station.
    e. Perform Film Critique Laboratories.
    f. Study material in didactic courses.

Occupational Blood and Body Fluid Exposure Refusal/Acknowledgment Form

I, _____ am aware that through my exposure to blood/body fluid, that I may have been exposed to a blood-borne pathogen which may include but not limited to hepatitis B virus (HBV), hepatitis C virus (HCV), and/or human immunodeficiency virus (HIV). My risk of infection from this exposure is not known. I also am aware that post-exposure protocols exists that may be effective in the prevention/treatment of theses blood-borne pathogens. Further, I understand that the Healthcare (Allied Health) Division strongly recommends that I seek health care immediately to discuss options and obtain appropriate treatment from my physician or the nearest emergency room **immediately** after the exposure to blood/body fluid occurs.

Student's/Faculty's Intended Course of Action

- ☐ I have already seen a physician and started a post-exposure protocol.
- ☐ I intend to see a physician and begin a post-exposure protocol.
- ☐ I refuse to participate in a post-exposure protocol.

_____
Student's/Faculty's Name (Please Print)

_____
Student's/Faculty's Signature Date

_____
Program Coordinator's Signature Date

_____
Division Head of Healthcare and Business Programs Signature Date

Southern West Virginia Community and Technical College
Blood and Body Fluid Exposure Report

Name of Exposed Student/Faculty: _____

Date and Time of Exposure:

Type of Exposure: □ Needle Stick □ Cut □ Mucous Membrane □ Skin

Type of Fluid: □ Blood □ Body Fluid- What kind? _____

Severity of Exposure (e.g., depth of injury, was fluid injected, condition of skin (chapped, abraded or intact), estimated volume of material):

Description of how and where exposure occurred:

Describe immediate steps taken by exposed to reduce untoward outcomes from exposure:

Was source of exposure able to be identified? □ Yes □ No

Is exposure source known to be HBV, HCV, or HIV positive? □ Yes □ No

If No and source is known, is source being tested with permission. □ Yes □ No

If status of source is known, list here:

Has exposed received HBV vaccination? □ Yes □ No

If yes, is vaccine-response known?

Is exposed pursuing post-exposure management by a physician? □ Yes □ No

If yes, when and with whom?

If not, why?

_____

Name of person completing report Date

Treating and Reporting Injury or Exposure to Transmitted Diseases

In the event that a student is injured or exposed to a transmitted disease while at a clinical education setting, the student must notify the clinical instructor and supervisor of the department immediately. Appropriate incident forms must be filed and will remain confidential. If treatment is needed, the student will report to the emergency room or infection control. The student is responsible for any costs incurred. Insurance may be obtain through Southern or a private agency.

Filing procedure:

1. Notify clinical instructor or supervisor of department
2. Report to the emergency room or infection control.
3. Follow protocol for treatment.
4. Assist in documentation of incident.
5. Notify program faculty.
6. The clinical instructor coordinator will document the incident and place a copy in the student's file.
7. Students are expected to use their personal insurance as primary coverage when health care is needed.
8. A report may be filed at the college, on a case-by-case basis, for coverage.
9. For infectious disease exposure, the infection control nurse/department will be notified. Protocol for treatment will be followed.
10. The student must be released from the emergency room or infection control, with a written statement to return to clinic or class.
11. Follow up with family physician as recommended.

PREGNANCY POLICY

The Radiologic Technology Pregnancy Policy is utilized to permit students in the program to voluntarily notify the program director of their pregnancy and inform students of the precautions and exposure limits that should be taken during pregnancy. In order to be declared pregnant the student will choose to voluntarily notify the program director in writing using the "*Voluntary Pregnancy Verification Form and Checklist*", as soon as possible; otherwise the student cannot be considered pregnant.

If a student does not voluntarily notify the program director the student cannot be counseled and given assistance with the "*Voluntary Pregnancy Verification Form and Checklist*". The program director and/or clinical coordinator in conjunction with the clinical instructor of the student's clinical education settings will have the student counseled by a radiation safety advisor as soon as possible upon voluntary notification. Due to the nature of ionizing radiation, it is recommended that the pregnant woman not be subjected to any radiation source whatsoever. There are possible genetic consequences to the fetus which may arise should one become pregnant during their two years in the radiologic technology program. The human fetus is highly radiosensitive and must be protected from excessive exposure to ionizing radiation. The maximum permissible dose equivalent for the developing fetus is 500 millirems (0.5 rem) during gestation, which is 1/10th the allowable annual level for occupationally exposed members of the radiologic technology profession. The program of radiologic technology at Southern WVCTC provides the following options to students once pregnancy is voluntarily verified in writing. Each student will be required to sign the Release and Verification policy for pregnancy as set forth by the Program.

I also understand that, if necessary, I can **voluntarily** un-declare my pregnancy by voluntarily notifying the program director in writing utilizing the *"Voluntary Pregnancy Verification Form and Checklist"*.

OPTION I

The student may elect to withdraw from the radiologic technology program and return within a one year period under the following conditions:

1. The student has achieved satisfactory completion of at least one semester.
2. A vacancy is available at a clinical facility.
3. If the student becomes pregnant at the middle or toward the end of the semester and chooses to withdraw, the student will be allowed to complete the didactic courses which are being taken at that time.
4. The student will have to follow the readmission criteria. Refer to the re-admission policy.

OPTION II

The student may elect to continue in the radiologic technology program fulfilling all program requirements as contained within the curriculum and adhere to all radiation protection guidelines and recommendations as follows:

Option 2, continued

1. The student may be required to purchase an additional film monitoring device to monitor the exposure to the fetus, if one is not provided by the student's major clinical education center.
2. The student will be required to adhere to all provisions in the ALARA program and acknowledge the risks to the embryo/fetus.
3. The student will be counseled by the appropriate radiation safety officer concerning pregnancy risks and protection.
4. Any clinical time missed while pregnant or after pregnancy will be treated under the absenteeism policy and the student will adhere to the college absence policy. Please refer to the clinical absenteeism policy.
5. The student will provide a full release from the attending physician when returning to clinical education. If circumstances occur to prevent the student from attending clinical education, the student will provide a full release from the attending physician upon returning. This must also be provided when returning post-partum. All clinical objectives as well as didactic objectives must be completed in order to progress to the next semester.

Reviewed and Revised June 2009; page 1, January 2014

RADIOLOGIC TECHNOLOGY PROGRAM VOLUNTARY PREGNANCY VERIFICATION FORM AND CHECKLIST

I, _____, understand that this notification of pregnancy is **voluntary** and, hereby notify the Program Director of my pregnancy and the estimated conception date of _____.

Southern has provided me with the following checklist and documentation, which I have **voluntaril**y agreed to comply. Within the next two (2) weeks I will:

1. Attend a scheduled advising session with the Radiation Safety Officer (RSO) at the clinical site currently attending or location of RSO.

2. Review Section Six and Section Thirteen of the Radiological Health Rule found at (http://www.wvsos.com/csrdocs/worddocs/64-23.doc).

3. Review and discuss NRC Appendix 8.13 with the Radiation Safety Officer.

4. Receive an additional film badge to be worn at the level of the waist for monitoring fetal radiation doses. I understand that this dose should not exceed 0.5 rem during the gestation period and that I may be required to pay any incurring costs for this badge.

5. Choose one of the following options for radiography students voluntarily declaring pregnancy:

   __ OPTION I - The student may elect to withdraw from the radiologic technology program and return within a one year period under the conditions set forth in the Student Handbook or College Catalog.

   __ OPTION II - The student may elect to continue in the radiologic technology program fulfilling all program requirements as contained within the curriculum and adhere to all radiation protection guidelines and recommendations as set forth in the Student Handbook or College Catalog.

UN-DECLARE PREGNANCY: I understand that I may VOLUNTARILY un-declare pregnancy at any time if it becomes necessary.

__I voluntarily notify the program director of my wish to un-declare pregnancy and complete this form. I understand that there will be no need for a meeting of the RSO but this form must be signed by the director and student. I also understand that my second film badge will no longer be necessary and that the readings will be provided to the program for my records.

Student Signature: _____ Date:_____

Program Director Signature: _____ Date: _____

RSO Signature: _____ Date: _____

Revised formatting 8/15

COMPETENCY BASED CLINICAL EDUCATION

A competency based clinical educational experience has been designed to ensure that all students are exposed to the many facets of Radiologic Technology. This educational system integrates didactic instruction with clinical instruction.

Throughout the course of study, students must demonstrate psychomotor skills at acceptable competency levels. Specific competency evaluations are completed during each semester in accordance to didactic instruction. Each student must exhibit both cognitive and clinical competency in each area.

By correlating didactic and clinical education, a unified goal is achieved in which competent technologists are trained that project professional maturity and a high degree of technical expertise.

Imaging examinations performed by, and accompanying responsibilities assigned to, a radiographer shall be at the direction of physicians qualified to request and/or perform imaging procedures. Upon completion of the program the radiographer shall have met the following learning outcomes:

1. The student will utilize effective communication skills when interacting with the patient and other members of the health care team, demonstrating knowledge of both communication and critical thinking skills necessary to the profession.

2. The student will demonstrate ethical and professional behavior, practicing within the code of ethics and scope of practice for the profession.

3. The student will understand the function of medical image processing, with demonstration of knowledge concerning various forms of image processing and determine the proper sequence for proper filing of a completed radiograph.

4. The student will evaluate radiographic quality, applying the knowledge of positioning and technical selection necessary for diagnostic radiographs.

5. The student will provide the patient with proper care during medical imaging procedures. This will include knowledge of body mechanics, patient immobilization, basic life support techniques, patient education for examinations, and overall patient care and comfort.

6. The student will demonstrate the proper methods of radiation protection and exposure selection with regard to the patient, the equipment, other personnel, and to oneself.

7. The student will properly position the patient in correlation with medical imaging equipment for the production of a diagnostic radiograph.

8. The student will demonstrate knowledge of radiation physics, understanding the basic operation and maintenance of radiographic equipment and the interactions of x-ray with matter.

9. The student will utilize problem solving skills and exercise independent thinking while performing medical imaging examinations.

Clinical competency achievement follows these steps: Clinical Competency = 85% minimum

1. The student attends and participates in didactic instruction of positioning and equipment. Successful assessment of knowledge is by quiz, exam or informal questioning.

2. Demonstration of positioning in the lab setting on campus and active participation in lab.

3. Observe the exam (positioning) during clinical rotations, as performed by qualified Radiologic technologists.

4. Perform the exam with direct supervision.

5. When confident, perform the exam for competency. When 85% or higher is achieved, student may perform the exam with indirect supervision. Exceptions are O.R., C-arm.

PROCEDURE PRACTICE FOR IMAGING PROCEDURES

In a laboratory situation the student will:

1. Demonstrate correct positioning, stabilizing or immobilizing as needed.

2. Select the correct film/IR size.

3. Align the x-ray tube to part and film/IR.

4. Adjust the collimator to appropriate field size. Use correct R/L marker.

5. Demonstrate the application of necessary protective shielding.

6. Measure the part by caliper utilization, if applicable.

7. Select & set exposure factors.

8. Notify others that an x-ray exposure is about to be made.

9. Expose the film/IR (if utilizing phantom).

10. Evaluate the film/image for accuracy of positioning and exposure quality.

Objectives for clinical areas, rooms, skills or processes

The objectives for various rooms, skills or processes are given here so that the student understands the expectations beforehand. Some of the areas have a specific form to be completed during clinical rotations. Further explanations are given in each clinical syllabus.

GENERAL RADIOGRAPHY

The Student Radiographer Will:

1. Differentiate between types of examinations.
2. Recognize methods of radiation protection to patients and self.
3. Be responsible for all aspects of equipment manipulation.
4. Identify each film cassette/size.
5. Prepare radiographic room with necessary supplies.
6. Provide a clean and orderly environment.
7. Establish professional student-patient-technologist relationships.
8. Observe all examinations in assigned areas.
9. Perform and/or assist staff as much as possible.
10. State location of emergency equipment (Crash cart, drugs, etc.).
11. Properly identify radiographs with pertinent information.(Name, Date, etc.)
12. Recognize universal protection, infection control procedures.
13. Maintain confidentiality of all patient examinations.
14. Assist with patient comfort and safety.

OFFICE/ Clerical/ Reception

The Student Radiographer Will:

1. Assist with processing a patient requisition following prescribed protocol methodology.
2. Identify records and forms for patient information purposes.
3. State the rationale for the filing system for the appropriate facility.
4. Demonstrate and exercise use in the operation of typewriters, fax machines, computers, etc.
5. Demonstrate proper method to answer the telephone and transfer calls.
6. Provide a neat and clean working environment.
7. Demonstrate proper methodology for patient scheduling, under direct supervision.
8. Maintain confidentiality of all patient information.
9. Demonstrate shredding of documents per departmental protocol.

TRANSPORT

The Student Radiographer Will:

1. Demonstrate proper method of patient transfer procedure.
2. Demonstrate proper method of wheelchair operation.
3. Raise footrests before allowing patient in or out of the wheelchair.
4. Keep wheelchair locked during procedure.
5. Provide assistance to patient to maintain their modesty.
6. Assist patient in movement to wheelchair and/or stretcher utilizing body mechanics and maintaining patient care and modesty.
7. Provide assistance to the transport personnel.
8. Observe methodology to provide proper support to injured and/or trauma patients.
9. Demonstrate proper placement and movement of medical equipment. (IV's, catheters, oxygen units, etc.)
10. Differentiate between disabilities and distinguish when assistance is necessary.
11. Communicate effectively with patients, staff, and peers.
12. Recognize universal protection, infection control procedures.
13. Demonstrate procedure for caring for patient's personal belongings.
14. Assist with patient comfort and safety.

FILE ROOM

The Student Radiographer Will:

1. Demonstrate procedure to dispense films.
2. Demonstrate process to file films in proper place.
3. Know method to check out or send films out.
4. Distinguish between films which have or have not been reported.
5. Provide assistance to file room personnel as much as possible.
6. Provide a clean and orderly environment.
7. Demonstrate shredding of documents per department protocol.

IMAGE PROCESSING

The Student Radiographer Will:

1. Demonstrate the procedure to activate and deactivate the automatic processor.
2. Identify monitoring devices for temperature and the correct temperature for operation.
3. Identify and locate size and type of films/IR plates available.
4. Provide a clean and neat environment.
5. Provide assistance to the darkroom personnel.
6. Demonstrate method to replenish system.
7. State basic principles of processing.
8. Identify and state the function of ancillary darkroom equipment.
9. In facilities where the darkroom is minimally utilized the student must learn the method employed in that facility. The clinic instructors will in-service in this area.
10. Students assigned to facilities with Computed Radiography and PACS systems will have to meet the requirements as set forth by the facility.

- ✓ Clinical schedules will not be changed in any manner without the approval of the clinical coordinator. This also includes starting & ending times.

- ✓ Dress code: may not be modified (only approved uniforms may be worn, this also includes shoes, visible name and dosimeter) failure to adhere to this policy would constitute the student being sent home and an unexcused absence.

- ✓ Competency forms & Weekly Evaluations: must be completed in full (it is your responsibility to fill in the Exam, Adult or Child, Technique, and ALL POSITIONS performed) failure to adhere to this policy will constitute the exam not being counted and a reduction in your grade.

- ✓ Failure to do an exam when asked will result in disciplinary action. Each experience will enhance your learning. If instructors hear you reply, "I don't need that exam," or "I already have one" you will be counseled.

- ✓ See other specific policies/procedures associated with clinical education.

COMPETENCY REQUIREMENTS:

First Fall Semester – 10 exam competencies & room objectives completed

First Spring Semester – 25 exam competencies & advanced room objectives completed

Summer Semester – 35 exam competencies & Category I Final Competencies completed

Second Fall Semester – 25 exam competencies & Category II Final Competencies completed

Final Spring Semester – 25 exam competencies & Category III Final Competencies completed and/or capstone comps if deemed necessary

Grand Total – 120 exam competencies in the 5 semester program

Clinical Exam Rechecks/Category Schedule/Final Competency Policy

1. Radiographic procedures completed by the student may be rechecked during any semester by the clinical instructor of each clinical education center or clinical coordinator.
2. Recheck examinations are at the discretion of the instructor or coordinator.
3. RA 275 - Returning students will perform recheck radiologic examinations during their first returning semester in clinical education. They may also perform competencies on new examinations during this time. They are required to perform the same amount of recheck examinations that corresponds to that semester. Image analysis is included.
4. Recheck examinations are also a component of Final Competency in Categories I, II, & III. These examinations are also at the discretion of the clinical instructor or clinical coordinator.
5. Category I must be completed by the summer semester.
6. Category II must be completed by the second fall semester.
7. Category III must be completed by the final semester & before graduation.
8. Capstone competencies with image analysis will be completed during the last semester.

Computed Tomography in the Clinical Education Setting

1. All senior (second year) students will be scheduled in the computed tomography area during their last year. This rotation will be for 1-2 weeks depending on their mandatory radiography clinical competency requirements completed at this point.
2. All senior students will have the CT technologist complete a clinical weekly evaluation for this rotation.

3. All senior students are required to be competent in the following at the end of their CT rotation: **Room Objective**: Gantry and Table Manipulation and Movement

4. Senior students are permitted to be exam competent by the end of their CT rotation in the following five examinations: **1. Non-Contrast Head 2. Non-Contrast Abdomen 3. Non-Contrast Chest 4. Non-Contrast Pelvis 5. Non-Contrast Sinuses/Facial**
5. Senior students are required to complete a CT exam competency evaluation for the above CT examinations. This is an opportunity for all seniors to further their knowledge of the computed tomography area.

6. Senior students are not permitted to inject intravenous contrast.
7. Senior students are not permitted to perform CT examinations without direct supervision.

8. Senior students also may complete the following during this rotation:
    1. Injector loading & unloading
    2. Sterile procedure set-up for biopsy or drainage procedure

CONFIDENTIALITY STATEMENT

It is the obligation of Southern West Virginia Community and Technical College's Department of Radiologic Technology to maintain the confidentiality of all clients' medical record information and to protect the clients' right to privacy.

As a student of the Department of Radiologic Technology, I understand that I am never to discuss or review, for personal purposes, any information from a clients' medical record or information relating to the care and treatment of any and all clients in the clinical or shadowing setting.

I understand that all field/clinical sites that I enter throughout this course will expect I maintain strict patient confidentiality. As a student in the Healthcare and Business Division, confidentiality means that I will not leave a field/clinical site and discuss patients I have encountered with anyone not involved with the direct care of a patient. I will not identify a patient with personal information such as medical history, assessment findings, and treatment. Any release of information without the express consent of the patient may result in a lawsuit against me for invasion of privacy, libel, slander, or breach of confidentiality.

I understand that violation of any portion of the policies and procedures of the Department of Radiologic Technology or the state and federal regulation governing the client's right to privacy will result in cause for immediate termination as a student in the program of Radiologic Technology.

_____ _____

Student's Signature Date

_____ _____

Radiologic Technology Coordinator Signature Date

Revised 5/2015

AUTHORIZATION TO RELEASE INFORMATION

Southern has entered into educational agreements with agencies at which student complete clinical or job shadowing rotations. It is a privilege for students to have access to various hospital/clinic settings within the region.

Students will complete any orientation required elements prior to rotations which include those required by The Joint Commission. Students will review department specific policies on the first day of the rotation.

I, _____, hereby authorize **SOUTHERN WV COMMUNITY AND TECHNICAL COLLEGE** to release to the **West Virginia Radiologic Technology Board of Examiners, American Registry of Radiologic Technologists, and all clinical affiliate organizations** any and all information concerning me. This authorization includes but is not limited to any felony and/or misdemeanor records, disclosure of drug and/or background checks results, medical reports or records relating to my physical, mental, or emotional condition and any treatment rendered to me; any medical or hospital bills relating to my treatment; school transcripts or other records relating to my attendance at any school; employment information, including personnel and wage information; military or government service records; and any records of the West Virginia Workers' Compensation Fund, Social Security Administration, Veteran's Administration, West Virginia Department of Human Services, Department of Labor, or any other agency. A facility may decide to not allow a student to enter their facility if he or she will not release the information.

I hereby waive any privilege I have regarding such information with respect to my attorneys. A photocopy of this authorization shall have the same force and effect as the original.

_____ I agree to allow the facility to have access to the above information.

_____ I request that my results for the information not be released to the facility.

_____

Student signature
(Must sign in presence of faculty witness)

_____

Date

Faculty Witness: _____ Date: _____

Revised 5/2015

COMPETENCY BASED CLINICAL EDUCATION FORMS

- Weekly Evaluation Form
- Exam Competency Form; Capstone competency form
- Clinical Coordinator End of Semester Evaluation
- C-Arm Competency Form
- Various Special Procedures Competency Form
- Various Miscellaneous Procedure Competency Form
- Venipuncture Competency Form
- Routine Radiography Room Competency Form
- Radiography/Fluoroscopy Room Competency Form
- Evening rotation objective
- Patient care objective
- CT room and gantry/table objective
- CT competency form
- Master Competency (checkoff) List
- Category I – III forms

**Some forms will be given out in the associated semester.

Rating Scales

For clinical competency evaluations and objectives the following ranking scale is used.

POINT SCALE: **1** – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, SOME ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

Minimum passing score for image analysis in each position/projection is 13/15.

POINT SCALE FOR Final Competency, categories is:

Rank 1-5

1- BELOW expectations; needs maximum assistance; 75-100% error
2- BELOW expectations; needs assistance; 50-75% error
3- SATISFACTORY; expectations met; 25% error
4- ABOVE AVERAGE; expectations met; 10% error
5- EXCELLENT; expectations exceeded; less than 5% error

A= Adult P= child (age 6 and under) I = Infant (under 1 year old)

Geriatric is older adult who is physically or cognitively impaired as a result of aging (according to the 2017 ARRT competency requirements)

Southern WV Community & Technical College
Student Radiographer
CLINICAL COMPETENCY EVALUATION FORM

SITE: LRMC____WARH____WMH____BMH____MPR____TMH____TIC_____TVARH____CAMC____

Student Name: _____ Date: _____

Technologist: _____Exam: _____ **A P I**

Type of Evaluation: COMPETENCY ( ) RECHECK ( ) IMAGE ANALYSIS, #7-11 ( )
The competency evaluation form is designed for evaluation a maximum of 5 projections per radiographic procedure – ie: Chest A. PA B. Lateral

Mark each area with a check mark to indicate point value. Criteria is given on the back of this form.
POINT SCALE: **1** – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

Position/Projection	**A**			**B**			**C**			**D**			**E**		
Performance Evaluation:	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
1. Evaluate Request															
2. Physical facilities readiness															
3. Patient Care															
4. Equipment Operation															
5. Positioning Skills															
6. Applied Radiation Protect															
Image Evaluation:															
7. Anatomy Identification															
8. Proper Alignment															
9. Technique / CR Image Adjust															
10. Film Identification/Markers															
11. Collimation															
NUMBER OF POINTS SCORED			**/33**			**/33**			**/33**			**/33**			**/33**
PERCENTAGE SCORE / GRADE															

MANUAL TECHNIQUE: KVP & MAS _____

Technologist's Comments:

_____

_____

_____

_____

Technologist Signature: _____

Student Signature: _____ *rs 5/2013;8/14;8/15;8/16 emh*

Performance Evaluation:	Criteria for clinical competency evaluation
1. Evaluate Request	-Verifies correct order versus request; student understands what exam should be performed -Communication skills: introducing oneself to patient, obtains 2 patient identifiers, LMP (if applicable), professionalism and friendliness, documentation of pertinent history for exam
2. Physical facilities readiness	-Exam room/area clean and ready -Needed supplies and equipment available (i.e. correct cassette sizes, immobilization devices, grid, cassette holder, etc)
3. Patient Care	-Assesses patient needs and condition -Maintain patient modesty -Patient handling (i.e. assertiveness versus passiveness)
4. Equipment Operation	-Tube Alignment/Bucky -Proper SID -Correct cassette size and placement (crosswise and lengthwise) -Use of accessory equipment (sponges, grids, etc.) -Sets technical factors for manual or automatic exposure -Effectively uses CR to annotate and window/level images when applicable; image archival
5. Positioning Skills	-Student shows confidence in knowledge of CR, angles, part rotations and positions -Speed -Organization of exam
6. Applied Radiation Protection	-Use of lead shield. **Student must shield all patients in which the shield does not interfere with the quality of the exam.** Failure to do so should result in a 0 for this category. If an exam cannot be shielded, tech may write N/A. -Practice radiation protection for self, patient, and other personnel
Image Evaluation:	
7. Anatomy Identification	-Correct anatomy for projection is obtained on image. (i.e. Water's view: must see petrous ridges below maxillary sinuses) -Student can correctly verbalize anatomy
8. Proper Alignment	-Correct central ray to part alignment and part to image receptor alignment -Rotation/Tilt of part
9. Technique / CR Image Adjust	-Image resolution -Contrast/density - LGM number within accepted limits
10. Film Identification/Markers	-Correct marker placement -Lead markers viewable on image. Digital annotated markers do not count.
11. Collimation	-Correct beam restriction for part as evidenced on image

Infant is under age of 1; P = age 6 and under; Geriatric = physically or cognitively impaired due to aging.

Copy this page on the back of the competency forms

85% minimum score to meet competency outcome.

MK 6/2011; RS 5/2013; 8/15

Capstone competencies:

At the end of the final semester, the student will demonstrate proficiency in selected imaging procedures in a lab or actual setting.
Each student must perform the items using the competency evaluation items to include set up, positioning, setting technical factors, acquiring images, demonstrating knowledge of anatomy, evaluating the image, finalizing image processing. Also included are aspects of patient care, taking history, problem solving, critical thinking. The student will be given a patient age and condition. The grading tool will be provided beforehand.
Capstone competencies will include procedures with a minimum of two projections:

1- One extremity procedure (upper or lower)
2- One spine procedure
3- One abdomen or chest
4- Headwork: one lateral, one PA/AP, one PA/AP axial (Towne's or Haas), SMV. May be of different areas like skull, facial bones or sinuses, etc.

Scoring:

The student:

1- may sign up to practice in the lab.
2- will be scheduled a time/day for testing.
3- must pass with a minimum of 85% for each of the 4 above.
4- must repeat any that score below 85%. The repeat may be a different procedure in that category.

If the student fails the second attempt, s/he must complete an imaging lab with assigned images before scheduling another attempt. This may delay successful completion of the course thereby delaying graduation.

1/2013

Southern WV Community & Technical College **Student Radiographer**
CLINICAL COMPETENCY EVALUATION FORM: CAPSTONE

Student Name: _____ Date: _____, 20____

Benchmark: Score of 85% minimum required per exam; repeat if not met. **SITE:** Campus Lab The competency evaluation form is designed for evaluation a maximum of 6 projections per radiographic procedure – ie: Chest A. PA B. Lateral Mark each area with a check mark to indicate point value.

POINT SCALE: **1** – **BELOW** EXPECTATIONS, ASSISTANCE Needed 100% of the time
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

Case: ____ Exam:

Position/Projection	**A**			**B**			**C**			**D**			**E**			**F**		
Performance Evaluation:	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
1. Evaluate Request																		
2. Physical facilities readiness																		
3. Patient Care																		
4. Equipment Operation																		
5. Positioning Skills																		
6. Applied Radiation Protect																		
Image Evaluation:																		
7. Anatomy Identification																		
8. Proper Alignment																		
9. Technique / CR Image Adjust																		
10. Film Identification/Markers																		
11. Collimation																		
POINTS SCORED		**/33**			**/33**			**/33**			**/33**			**/33**			**/33**	
PERCENTAGE SCORE																		

MANUAL TECHNIQUE:
[KVP & mAs for each]

Comments:

Evaluator: _____ Student Signature: _____

Emh 4/2013; 5/15

Southern WV Community & Technical College Student Radiographer
WEEKLY CLINICAL EVALUATION Week#____

LOCATION: LRMC___ WARH____ WMH____ BMH____ MPR____ TMH____ TIC____TVARH ___CAMC Gen___ CAMC Mem__

Student Name: _____ Date: _____

Performance: 75% of Grade	**5.0**	**5.5**	**6.0**	**6.5**	**7.5**	**Evaluator's Comments**
Quality of Work	Seldom Accurate	Repeated Mistakes	Acceptable	Consistent	Exceeds	
Quantity of Work	Slow	Needs Prodding	Acceptable	Above Average	Exceeds	
Patient Care	Poor	Fair	Average	Good	Excellent	
Equipment Care	Careless	Occasional Care	Acceptable	Careful	Exceeds	
Radiation Protection	Unconcerned	Seldom Shields	Occasionally Shields	Usually Shields	Always Shields	
Ability to Follow Directions	Poor	Fair	Average	Good	Excellent	
Judgment	Poor	Fair	Average	Good	Excellent	
Knowledge	Poor	Fair	Average	Good	Excellent	
Organization of Work	Poor	Fair	Average	Good	Excellent	
Ability to Follow Through	Poor	Fair	Average	Good	Excellent	
TOTALS:						**/75**
Personal Traits: 25% of Grade	**2.0**	**2.2**	**2.3**	**2.5**	**2.7**	**Student's Comments**
Professional Appearance	Unprofessional	Fair	Acceptable	Good	Excellent	
Professional Behavior	Unprofessional	Fair	Average	Good	Excellent	
Punctuality	Consistently Late	Occasionally Late	Acceptable	Always on time	Usually Early	
Dependability	Inadequate	Often Absent	Fair	Good	Excellent	
Adaptability	Poor	Fair	Average	Good	Excellent	
Confidence Level	Poor	Fair	Average	Good	Excellent	
Attitude	Hostile	Fair	Average	Good	Excellent	
Compassion	Poor	Fair	Average	Good	Excellent	
Ability to take criticism	Hostile	Fair	Average	Good	Excellent	
TOTALS:						**/24.3**

List a strength or positive comment:

_____
_____
_____

List an area to improve:

_____
_____
_____

Technologist Signature: _____ Student Signature: _____

Revised 4/2015; 8/16

OBJECTIVE: C-Arm Exam AREA:_____
Student Name: _____ SWVCTC Rad. Tech.
Date: _____
POINT SCALE: **1** – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

ACTIVITY			
RATING	1	2	3
1. Evaluate request			
2. Dress Properly for surgery			
3. Wipe down C-Arm before entering surgery			
4. Transport C-Arm to surgery			
5. Properly positioned C-Arm for exam			
6. Properly hooked up C-Arm cables, etc.			
7. Knowledge of on/off controls			
8. Knowledge of exposure factors			
9. Knowledge of tube locks			
10. Knowledge of Fluoro control			
11. Manipulated forward/reverse image controls			
12. Knowledge of exposure switch			
13. Knowledge of controls for image quality			
14. Assisted physician in fluoroscopy of the patient while maintaining a sterile field			
15. Properly recorded images			
16. Properly made hard copy images			
17. Identified anatomy on film			
18. Explained general purpose of exam			
19. Removed C-Arm away from sterile field			
20. Properly unhooked all electrical cables			
21. Properly cleaned C-Arm			
22. Removed unit from surgery to storage area			

Total Points: _____
66

Comments _____
_____
_____

Student's Signature: _____

Technologist's Signature: _____

Southern WV Community & Technical College
Radiologic Technology Program

Various Special Procedures Competency Form

Rating:

1 – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE
N/A – Not Applicable

Circle Procedure:

Arthrogram	T-Tube Cholangiogram	ERCP
Myelogram	Operative Cholangiogram	Venogram
Arteriogram	Hysterosalpingogram	Fistulagram

Student Name: _____

Date: _____

ACTIVITY				
RATING	0	1	2	3
1. Demonstrated proper pre & post patient care				
2. Located necessary supplies / fill syringe / injector				
3. Assisted & demonstrated sterile technique during exam				
4. Explained general purpose of exam				
5. Assisted with informed consent				
6. Performed filming/CR when applicable				
7. Identified anatomy on radiographs/images				
8. Demonstrated knowledge of operation of equipment				
9. Demonstrated proper disposal of contaminated items				
10. Properly cleaned room				
11. Assembled/processed radiographs/images for interpretation				

Total Points: _____
33

Comments _____
_____

Student's Signature: _____

Technologist's Signature: _____

Reviewed and revised 5/15

Southern West Virginia Community & Technical College
Radiologic Technology Program

Clinical **C**oordinator **S**emester **E**nd **E**valuation

Student Name: _____ 1st Fall 2nd Fall Summer 1st Spring 2nd Spring 20_____

Scale: 1 = below expectations; complete assistance needed
2 = average expectations; minimal assistance needed
3 = meets expectations; outstanding performance; no assistance needed

Expectation: Minimum of 2.0 average in first year; 2.5 for second year

Indicate the level of student performance in each of the following areas:

	1	2	3
Patient Care: Patient needs assessed & addressed Caring demeanor			
Interaction: Effective communicator; cooperates with staff; Team player;			
Radiation Protection Methods: Demonstrates proper radiation protection methods; Collimation; Limited repeats			
Proper knowledge & use of exposure factors:			
Proper positioning knowledge & skills:			
Quality of work: Organization; Overall performance			
Quantity of work: [depends on semester]			
Ability to make decisions: Analyzes work and can make improvements Critically think			
Dependability: Reports on time; uses time wisely; Calls in according to policy			
Professionalism: Presents in professional attire; appropriate actions			

Comments: _____

_____

Signatures: Clinical Coordinator:_____

Student: _____ Date: _____

12/08; 8/09; 8/15

Venipuncture Competency

Venipuncture Guidelines for Radiologic Technology Students:

The ARRT requires competency in venipuncture to be eligible for the Registry exam. The following outline the Program's competency:

The student must:

1. be enrolled in RA 203, Special Procedures Positioning
2. participate in class discussion regarding procedure, safe practices, needle disposal, ethical and legal considerations. Requires previous knowledge from patient care technology and other classes.
3. pass quiz or test on the material with minimum or 85% accuracy.
4. participate in venipuncture lab on campus.
5. complete venipuncture check sheet as verified by the instructor.

The student may NOT:

1. perform venipuncture at any clinical site.
2. inject contrast media, manually or by injector.
3. administer any medications.

Southern WV Community & Technical College
Radiologic Technology Program
Venipuncture
Competency Evaluation

After steps 1-3 of the venipuncture guidelines for the Program have been met, the student will complete the following under the direction of qualified personnel, in lab. Additional time may be arranged. Competency for this lab requires successful completion of every step.

Yes is defined as successful completion of the step. No is defined as unsuccessful completion of the step.

Student Name: _____

Steps:		Completion: Yes	No
1	Wash hands.		
2	Check patient's identification, state/assess for possible adverse reactions.		
3	Explain the procedure to the patient.		
4	Assemble necessary supplies. In actual practice, don gloves.		
5	Select appropriate venipuncture site.		
6	Cleanse site with alcohol wipe. (circular moving outward or one direction)		
7	Apply tourniquet with appropriate tension; ask pt to open and close fist to distend vein; hold a clenched fist.		
8	Stabilize vein, placing thumb on tissue just below site and gently pull skin toward hand.		
9	Hold needle at sides with bevel facing up.		
10	Insert needle at 15 degree angle, gently advancing into vein. Blood will floor into tubing when needle is correctly positioned. Decrease angle as needle is inserted.		
11	Attach syringe to hub; gently turn syringe to lock it in place if a luer lock syringe is used.		
12	Draw/pull back the syringe plunger to ensure blood return; tape the needle in place carefully.		
13	Remove the tourniquet.		
14	After injection of contrast media by qualified radiographers, don gloves and remove the needle; apply gentle pressure using a 2x2 gauze sponge or alcohol wipe; (follow institutional protocol)		
15	Dispose of the syringe and needle properly.		
16	Record relevant information.		

Student's Signature: _____ Date: _____

Evaluator's Signature: _____

Revised 8/2015

Southern WV Community & Technical College
Student Radiographer

Routine Radiographic Room Check-Off Sheet

LOCATION: LRMC____WARH____WMH____BMH____MPR____TMH____TIC____TVARH___ CAMC Gen___ CAMC Mem___

Student Name: _____ Date: _____

Activity	0	1	2	3	N/A
1. Identified & operated room circuit breaker					
2. Located emergency supplies & medications					
3. Located radiation protection devices					
4. Located & employed immobilization devices					
5. Demonstrated proper tube manipulation					
6. Demonstrated table bucky					
7. Demonstrated proper table manipulation					
8. Demonstrated operation of upright bucky					
9. Demonstrated operation of control panel					
10. Stocked room with necessary supplies					

Comments: _____
_____
_____
_____
_____
_____
_____
_____

Technologist Signature: _____

Student Signature: _____

Revised: 4/2015; 8/16

Southern West Virginia Community and Technical College
Student Radiographer

Radiographic/Fluoroscopic Room CHECK-OFF

LOCATION: LRMC____WARH____WMH____BMH____MPR____TMH____TIC____TVARH___CAMC Gen____ CAMC Mem____

Student Name: _____ Date: _____

Activity	0	1	2	3	N/A
1. Identified and operated room circuit breaker					
2. Located glucagon if applicable to department					
3. Located radiation protection devices					
4. Located and employed immobilization devices					
5. Loaded and operated image intensifier					
6. Demonstrated proper tube manipulation					
7. Demonstrated operation of table bucky					
8. Demonstrated operation of fluoroscopy imaging device					
9. Demonstrated proper table manipulation					
10. Demonstrated operation of control panel					
11. Located supplies for fluoroscopy					
12. Unlocked and pulled fluoroscopy tower across table					
13. Identified and demonstrated all locks and/or controls					
14. Identified hand exposure switch					
15. Demonstrated setting imaging device to different settings					

Comments: _____
_____
_____
_____

Technologist Signature: _____

Student Signature: _____

Revised 4/2015; 8/16

Blank page

EVENING ROTATION: Check off sheet (Must complete as a 1st and 2nd year)

Name: _____ Date: _____

Clinical Location: _____ SWVCTC Rad. Tech.

Rating Scale:

1 – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

Activity:	1	2	3
1. Described differences in day and evening operations.			
2. Located emergency supplies and medications.			
3. Stated radiation protection methods for trauma calls.			
4. Employed immobilization devices for difficult patients.			
5. Demonstrated proper tube manipulation for non routine exams or critical patients.			
6. Assisted with C-Arm operation in dept. or O.R. as first year Or manipulated C-Arm as 2nd year.			
7. Performed extremity procedures independently – 1st year; Performed spine procedures independently – 2nd year.			
8. Responds well to emergency situations- stays composed, etc.			
9. Accurately sets techniques for the radiographer.			
10. Briefly write about a radiographic procedure you assisted with or completed alone that you had to adapt your positioning and why. Do not use patient identifiers.			
Comments:			
Student's Signature:			
Technologist's Signature:			

Total possible points: 30

_____/ 30

OBJECTIVE: Patient Care (first year) SWVCTC

Student Name: _____ Radiologic Technology

Date: _____

1 – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

ACTIVITY			
RATING	1	2	3
1. Provide clean table and equipment			
2. Check patient ID bracelet & address by last name			
3. Ask patient/family if comfortable			
4. Provide basic needs for patient comfort			
5. Maintain patient modesty (gown tied, etc.)			
6. Room door closed during procedure			
7. Demonstrate concern with direct eye contact			
8. Proper care of any patient medical equipment like oxygen tank, IV tubing….			
9. Technologist: Give the student a scenario of a patient's condition or situation, with patient age. Student must tell you how (s)he would handle it. (i.e. screaming 5 yr old)			

Total possible: /27

Comments _____
_____
_____

Student's Signature: _____

Technologist's Signature: _____ 08/08; 8/15;8/16

OBJECTIVE: Patient Care (SECOND YEAR) SWVCTC

Student Name: _____ Radiologic Technology

Date: _____

1 – **BELOW** EXPECTATIONS, COMPLETE ASSISTANCE NEEDED
2 – **AVERAGE** EXPECTATIONS, MINIMAL ASSISTANCE NEEDED
3 – **MEETS** EXPECTATIONS, OUTSTANDING PERFORMANCE

ACTIVITY			
RATING	1	2	3
1. Provide comfort and safety for pt & family			
2. Check patient ID bracelet & address by last name			
3. Anticipate physical needs of patient			
4. identifies emotional needs of pt & family			
5. Asks patient history prior to exam			
6. Room door closed during procedure			
7. Demonstrate concern with direct eye contact			
8. Asks LMP of all female pts of child bearing age			
9. Proper care of any patient medical equipment like oxygen tank, IV tubing….			
10. Utilizes collimation			
11. Technologist: Give the student a scenario of a patient's condition or situation, with patient age. Student must tell you how (s)he would handle it & why. (i.e. screaming 5 yr old)			

Total possible: /33

Comments _____
_____
_____

Student's Signature: _____

Technologist's Signature: _____ 08/08; 8/15; 8/16

Southern WV Community & Technical College
Student Radiographer

CT Room Objectives

SITE:
LRMC___WARH____WMH____BMH____MPR____TMH____TIC____TVARH____CAMC___

Student Name: _____ Date: _____

Gantry and Table control/function

Activity	0	1	2	3
1. Identify gantry and gantry control panel.				
2. Explain the function of buttons on the control panel.				
3. Demonstrate the use of the gantry controls.				
4. Identify table, table controls, table restrains, and table attachments.				
5. Demonstrate the table functions and safety devices.				
6. Demonstrate and perform the proper procedure for cleaning the table and gantry.				
7. Identify the gantry and table emergency stop buttons.				

COMMENTS_____
_____

Student signature:_____ Date:_____

Technologist signature:_____

Revised 8/16

Southern WV Community & Technical College
Student Radiographer

CT Exam Competency

SITE:
LRMC____WARH____WMH____BMH____MPR____TMH____TIC____TVARH____CAMC____

Student Name: _____ Date: _____

CT Exam:

( ) Non-Contrast Brain ( ) Non-Contrast Abdomen
( ) Non-Contrast Chest ( ) Non-Contrast Pelvis ( ) Non-Contrast Neck
( ) Non-Contrast Sinuses/Facial ( ) Non-contrast Spine

Activity	0	1	2	3
1. Obtain requisition, evaluate for pertinent data.				
2. Properly prepare patient for ordered procedure.				
3. Obtain patient history and vitals.				
4. Positioned and centered patient properly on CT table.				
5. Input patient data into scanner computer.				
6. Programmed proper parameters for ordered procedure.				
7. Released patient with proper education and instructions.				
8. Filmed/networked procedure in proper sequence.				
9. Gathered all required material and placed material in designated area to be read by the radiologist.				

COMMENTS_____

_____

Student signature:_____ Date:_____

Technologist signature:_____ revised 8/16

Master Competency check sheet (documentation form) "Master List"

The ARRT requires competency of certain exams or content area. General patient care is also a part of the required competency. See ARRT.org for content specifications.

Each student will be given a copy of the updated clinic rotation competency check sheet at the beginning of each semester. It is the responsibility of the student to maintain accurate documentation.

A different version of the form will be given to the student at the end of each semester.

Circle Semester: 1st Fall-**F1** 1st Spring-**S1** Summer-**SU** 2nd Fall-**F2** 2nd Spring-**S2**

Fill in the year 20___

CLINIC ROTATION COMPENTENCY CHECK OFF SHEET
NAME:_____
A = adult P = child I – Infant

As defined by the ARRT, Pediatric is age 6 and under; Geriatric is physically or cognitively impaired as a result of aging.

The Program defines infant as under 1 year old.

Some competencies will be completed multiple times. For example, C-Arm procedures.

2017 ARRT C-arm competency requirements include:

- C-arm procedure requiring manipulation to obtain more than one projection.
- Surgical c-arm procedure requiring manipulation around a sterile field.

8/15; 8/16 emh

Southern West Virginia Community & Technical College – Radiologic Technology Program

Name: _____ *revised 8/15 RS; 8/16 emh*

MASTER CLINICAL COMPETENCY EVALUATION LIST

THORAX	**Adult**	**Pediatric**	**Infant**	**VERTEBRAL COLUMN**	**Adult**	**Pediatric**	**Infant**
CHEST – 2 Views		**m**		CERVICAL Spine 3 Views			
CHEST – Decubitus				CERVICAL Spine 5 Views			
CHEST – Lordotic				CERVICAL Spine 7 Views			
CHEST – Oblique				CERVICAL Spine – Portable XTL			
CHEST – Portable ERECT				CERVICAL Spine – with Fuchs or Judd			
CHEST – Portable SUPINE				CERVICAL - Soft Tissue Neck			
CHEST – Black Lung Evaluation				COCCYX			
CHEST – Wheelchair				SACRUM			
CHEST – Stretcher				LUMBAR Spine - 3 Views			
RIBS				LUMBAR Spine - 5 Views			
STERNUM				LUMBAR Spine - 7 Views			
ABDOMEN	**Adult**	**Child**	**Infant**	LUMBAR Spine - Port w X-table or Trauma			
ABDOMEN – 3 views				THORACIC Spine - 3 Views – Swimmers			
ABDOMEN – Flat/Upright				THORACIC Spine - Port w X-table or Trauma			
ABDOMEN – Decubitus				SCOLIOSIS Series			
ABDOMEN – Port or Tube Placement				**URINARY SYSTEM**	**Adult**	**Child**	**Infant**
ABDOMEN – KUB (SUPINE)				Cystogram or VCUG			
ABDOMEN – Portable Decubitus				IVP or Hypertensive			
ABDOMEN – Prone				Retrograde Pyelogram or Stent Placement			
ABDOMEN – Portable Flat / Upright				**DIGESTIVE SYSTEM**	**Adult**	**Child**	**Infant**
UPPER EXTREMITY	**Adult**	**Child**	**Infant**	Barium Enema - (Double or Single Contrast)-(2)			
CLAVICLE				UGI - (Double or Single Contrast)-(2)			
ELBOW				Barium Enema – Colostomy			
FINGER				Esophagram or Barium Swallow			
FOREARM				Modified Barium Swallow (Video)			
HAND				Small Bowel Series			
HUMERUS – Non-trauma				ERCP or T-Tube Cholangiogram			
HUMERUS – Trauma - (TRANSTHORACIC)				Operative Cholangiogram			
SCAPULA				**CT – SURGERY – MISCELLANEOUS**			
AC JOINTS				C-ARM Exams – x 5 1 mandatory hip, femur or tibia rodding			
SHOULDER – Non-trauma				Hysterosalpingogram			
SHOULDER – Trauma - (TRANSTHORACIC)				Arthrogram or Myelogram			
SHOULDER -- w Axillary or Y view				Dexa – Bone Density			
SHOULDER – Grashey with Series				CT Head NC			
THUMB				CT Chest NC			
WRIST				CT Abdomen NC			
NAVICULAR or Scaphoid				CT Pelvis NC			
BALL CATCHER'S HANDS				CT Neck NC			
PORTABLE or Trauma - UPPER EXTREMITY				CT Spine NC			
CAST Upper Extremity or Extremity Foreign Body				**OBJECTIVES**			
LOWER EXTREMITY	**Adult**	**Child**	**Infant**	Automatic Injector Loading/Unloading			
ANKLE				Sterile Procedures/Field Set-Up			
FEMUR				Patient Care Objective – 1st Year			
FOOT				Patient Care Objective – 2nd Year			
FOOT or ANKLE – Weight Bearing				Evening Clinical Rotation Check-off Sheet			
HIP – (Non-trauma)				Room Set-Up – Radiographic			
HIP – (Trauma) – X-table				Room Set-Up – Radiographic/Fluoroscopic			
INTERCONDYLOID FOSSA (Any)				Office/PACS Procedure			
KNEE SERIES 3 OR 4 VIEW				Image Duplication/CD Copying Procedure			
KNEE – (Trauma) – X-table				IR Processing/Dark Room Procedure			
KNEE – Weight Bearing				CT Gantry and Table			
LOWER LEG – Tibia/Fibula				GERIATRIC			
OSCALCIS – Calcaneus				Geriatric routine Chest			
PATELLA				Geriatric upper extremity: _____			
PELVIS or Standing/Weight Bearing				Geriatric lower extremity: _____			
SACROILIAC Joints							
TOE							
PORTABLE or Trauma - LOWER EXTREMITY				**SPECIAL EXAMS**			
CAST Lower Extremity or Extremity Foreign Body							
CRANIUM	**Adult**	**Child**	**Infant**				
FACIAL BONES							
MANDIBLE or TMJ's							
NASAL BONES				**SEMESTER**	**Exams**	**Hours**	**Completed**
SINUSES Series - (3 OR 4 views)				**Fall – 1**	**10**		
SKULL Series - (4 OR 5 views)				**Spring – 2**	**25**		
SKULL Series with X-table Laterals				**Summer – 3**	**35**		
ORBIT Series w or w/o Rhese				**Fall – 4**	**25**		
ZYGOMA or SMV of any area				**Spring – 5**	**25**		
MASTOIDS				**FINAL Category I -**			
				FINAL Category II -			
				FINAL Category III -			

m = mandatory as required by the 2017 ARRT clinical competency requirements;
must comp. on pediatric chest; Must comp. on geriatric Chest, an upper and a lower extremity.

General Patient Care Competencies Radiologic Technology Southern WVCTC

ARRT candidates must have demonstrated competence in all six patient care activities listed **below. The activities should be performed on patients whenever possible, but simulation is** acceptable if state or institutional regulations prohibit candidates from performing the procedures on patients.

Some are completed as part of clinical competencies, objectives, in supervised labs as part of RA courses.

The Program Director will complete this for each student and is part of the students file.

Student: _____ Class of 2016-2018

Mandatory General Patient Care Procedures:	Date completed:	Competency verified by:
CPR (AHA BLS HCP course)		
Vital signs – Blood pressure		
Vital signs – temperature		
Vital signs - pulse		
Vital signs - respiration		
Vital signs- pulse oximetry		
Sterile and Aseptic Technique		
Venipuncture		
Care of Patient Medical Equipment (Oxygen tank, IV Tubing)		

Per the ARRT clinical Competency Requirements as of 2017, from ARRT.org.

8/2015 emh

Southern WV Community and Technical College Radiologic Technology
Clinical Orientation Checklist **Site: _____**

On the first day of clinic, the clinical instructor will begin the orientation to the department using the following check sheet. It should be completed by the end of the second week of clinic.

- ☐ Introductions: introduce yourself, RT's, Director, Radiologists, transporters, other staff
- ☐ Roles of above members of dept.; discuss expectations
- ☐ Location of timeclock and timecards; Locker location or where they can secure personal items, coats….
- ☐ Entrances- main and to dept. & if security access required.
- ☐ Parking
- ☐ Tour of other associated departments: ER, Lab, Registration, Infection Control; OR; where and how to obtain scrubs. Policy on wearing of scrubs.
- ☐ Emergency numbers within hospital/clinic: fire, respiratory, cardiac….. and what will be paged. Location of fire extinguisher, fire pull; crash cart…. Also, how to contact infection control.
- ☐ General operation of registration (if done in dept. or main Regis.), filing system, who approves images; how to answer the phone;
- ☐ Location of procedure protocols (projections for exams)
- ☐ Location of technique books/charts
- ☐ Documentation: what & where student is to document (history, LMP, shielded, initials….) R/L marker use; policy for what to do if not shown or forgotten
- ☐ General operation of each room; Location of PPE
- ☐
- ☐ Student should review policies from the handbook regarding:
  - competency system
  - tardiness & absences- obtain phone number to call
  - repeats
  - dress code
- ☐ Review JC policies if not done above. **** Student must submit required signed pages For some clinical sites**
- ☐ Other

Clinical Instructor's Signature: _____

Date completed: _____ *Maintain this in a file at your clinical site. *revised 8/15*

Clinical Education Settings and Clinical Instructor Contact Information

Logan Regional Medical Center
Shane Brumfield (acting) & Chris Reed (& Director)
20 Hospital Drive
Logan, WV 25601
831-1192 Fax: 831-1633

Tug Valley ARH Regional Medical Center (formerly Williamson Appalachian Regional Hospital)
Kristin Collins & Tammy Hensley Teddy Hall - Director
260 Hospital Drive
South Williamson, KY 41503
606 237-1700 ext 1741 Fax: 606 237-1600

Williamson Memorial Hospital
Justina Stallard (Claudette- 899-6182) CI and Director
859 Alderson Avenue
Williamson, WV 25661
235-2500 ext 140 Fax: 235-7030

Boone Memorial Hospital
Toni Williams, CI & Director; Angel Kimble , Angie Chafin
701 Madison Avenue
Madison, WV 25130
369-1230 ext 212 Fax: 369-2601

CAMC Memorial Hospital
Eric Halstead –CI Memorial Chuck Wilson –CI General 388-6045
3200 MacCorkle Avenue SE
Charleston, WV 25304
304 388-9220 Fax: 388-9707

Mingo/Pike Radiology, Inc.
Donnie Tackett (CI & Director)
411 Central Avenue
Suite One
South Williamson, KY 41503
606 237-6300 Fax: 606 237 7444

Thomas Memorial Hospital
Lora Hall, supervisor
Sara Holcomb, CI
4605 MacCorkle Ave SE
South Charleston, WV 25309
304 766-3811
304 766-4581

Thomas Imaging Center
Emily Muncy CI
4800 MacCorkle Ave., SW
So. Charleston, WV 25309
304 767-7730

SUBJECT TO CHANGE

In the event of an emergency and family needs to be contacted, the clinical coordinator has student contact information. *Revised 8/15; 8/16*

COMPETENCY BASED CLINICAL EDUCATION FORMS

Final Competencies

- Category I Final Competencies
- Category II Final Competencies
- Category III Final Competencies

FINAL COMPETENCY
CATEGORY I
RA110, RA125 & RA 150 – Summer Semester

GRADING SCALE 1 – 5 (4.5 points minimum for passage)
POSSIBLE POINTS: **200**

STUDENT'S NAME_____

Selection from the below subcategories are made at the discretion of the Evaluator.
Criteria selected is also made by the Instructor. Grading Scale is 1 to 5 and student must achieve 4.5 for passage. **Place score & initials beside subcategory**.

1. BELOW expectations; needs maximum assistance; 75-100% error
2. BELOW expectations; needs assistance; 50-70% error
3. SATISFACTORY; expectations met; 25% error
4. ABOVE AVERAGE; expectations met; 10% error
5. EXCELLENT; expectations exceeded; less than 5% error

I. EQUIPMENT MANIPULATION (5 of 9)

_____ Cassette Manipulation/Orientation.
_____ Film/Plate/IR Loading
_____ Film/Plate/IR Processing
_____ Control Panel Manipulation
_____ Tube Manipulation
_____ Table Manipulation
_____ Caliper Use
_____ Grid Manipulation
_____ Radiation Protection

II. PATIENT CARE (5 of 9)

_____ Transport, Wheelchair
_____ Transport, Ambulatory
_____ Transport, Stretcher
_____ Transport, Transfer/Lift Patient to Table
_____ Shielding
_____ Patient Communication
_____ Hand Washing
_____ Room Hygiene Technique
_____ Isolation Technique

III. PROCEDURE ORIENTATION (3 of 6)

_____ Evaluation of Requisition
_____ Physical Facilities Readiness
_____ PACS Procedure
_____ Evaluation of Patient Records
_____ Image Receptor Readiness
_____ Patient/Technologist Relationship

IV. SUPPORT SERVICES (3 of 6)

_____ Patient History
_____ Patient Menstruation History
_____ Patient ID on Radiograph
_____ Image Receptor Marker Use
_____ Office Services/Procedures
_____ Contrast Preparations

V. TORSO (3 of 3)

_____ Chest
_____ KUB
_____ Pelvis

VI. UPPER EXTREMITY (3 of 8)

_____ Hand
_____ Finger
_____ Wrist
_____ Elbow
_____ Humerus
_____ Shoulder
_____ Scapula
_____ Clavicle

VII. LOWER EXTREMITY (3 of 7)

_____ Foot
_____ Calcaneus
_____ Ankle
_____ Tibia/Fibula
_____ Knee
_____ Femur
_____ Hip

VIII. PORTABLES (3 of 3)

_____ Chest
_____ Abdomen
_____ Extremity

IX. SPINE (3 of 5)

_____ Cervical
_____ Thoracic
_____ Lumbar
_____ Sacrum
_____ Coccyx

X. TRAUMA (3 of 6)

_____ Cervical
_____ Hip
_____ Shoulder
_____ Chest
_____ Abdomen

XI. STRESS VIEWS (3 of 6)

_____ AC Joints
_____ Bending – Flex./Ext. Spine
_____ Weight Bearing Knees
_____ Weight Bearing Feet
_____ Scoliosis Series
_____ Navicular/Scaphoid/Stecher

XII. TECHNIQUE MANIPULATION State (3)

MA TIME MAS KVP

_____

_____

_____

Reviewed and revised 8/15

FINAL COMPETENCY

CATEGORY II

RA200 – Second Fall Semester

GRADING SCALE 1 – 5 (4.5 points minimum for passage)
POSSIBLE POINTS: **200**

STUDENT'S NAME_____

Selection from the below subcategories are made at the discretion of the Evaluator.
Position(s) required in the selection is also made by the Instructor. Grading Scale is 1 to 5 and student must achieve 4.5 for passage. **Place score & initials beside subcategory**.

a. BELOW expectations; needs maximum assistance; 75-100% error
b. BELOW expectations; needs assistance; 50-70% error
c. SATISFACTORY; expectations met; 25% error
d. ABOVE AVERAGE; expectations met; 10% error
e. EXCELLENT; expectations exceeded; less than 5% error

I. TERMINOLOGY (10 of 20)

_____ Cecum
_____ Hepatomegaly
_____ Fatigue
_____ Cochlea
_____ Diaphysis
_____ Diagnosis
_____ Jejunum
_____ Toxic
_____ Abduction
_____ Adduction
_____ Lordosis
_____ Osteogenesis
_____ Amniocentesis
_____ Mammary
_____ Mesentery
_____ Heparin
_____ Prognosis
_____ Carcinogenic
_____ Incision
_____ Excision

II. ROOM AND MODALITY OBJECTIVES (2 of 3)

_____ Fluoroscopy Room
_____ Routine Room
_____ Chest Room

III. MODALITIES OUT OF THE DEPARTMENT (3 of 4)

_____ Mobile Radiography
_____ Emergency and/or Trauma Radiography
_____ C-Arm Exam
_____ Surgery Radiography

IV. BILIARY SYSTEM (2 of 4)

_____ Flat and Upright Abdomen
_____ T-Tube Cholangiogram
_____ Operative Cholangiogram
_____ ERCP (Endoscopic Retrograde Cholangiographic Pancreatography)

V. DIGESTIVE SYSTEM (3 of 5)

_____ Esophagram or Barium Swallow
_____ UGI
_____ Small Bowel Series
_____ Single Contrast Barium Enema
_____ Double Contrast Barium Enema

VI. URINARY SYSTEM (2 of 4)

_____ KUB
_____ IVP or Hypertensive
_____ Cystogram or VCUG
_____ Retrograde Pyelogram

VII. CRANIUM (6 of 11)

_____ Skull
_____ Skull with cross – table lateral
_____ Facial Bones
_____ Paranasal Sinuses
_____ Nasal Bones
_____ Mandible
_____ Orbits or Optic Foramina
_____ Temporal-Mandibular Joints
_____ Zygomatic Arches
_____ Mastoids
_____ Submento-Vertex Skull

VIII. BONY THORAX (2 of 3)

_____ Ribs
_____ Sternum
_____ Sterno-Clavicular Joints

IX. PREPARATIONS (5 of 9)

_____ UGI
_____ Small Bowel Series
_____ Barium Enema
_____ Esophagram or Barium Swallow
_____ IVP
_____ Cystogram
_____ Child Barium Enema
_____ Child IVP
_____ Infant UGI

X. TECHNIQUE MANIPULATION State (5)

MA TIME MAS KVP

_____

_____

_____

_____

_____

Reviewed and revised 5/15

FINAL COMPETENCY

CATEGORY III

RA250 – Final Spring Semester

GRADING SCALE 1 – 5 (4.5 points minimum to pass) **POSSIBLE POINTS: 100**

STUDENT'S NAME_____

Selection from the below subcategories are made at the discretion of the Evaluator.
Position(s) required in the selection is also made by the Instructor. Grading Scale is 1 to 5 and student must achieve 4.5 for passage. **Place score & initials beside subcategory.**

1. BELOW expectations; needs maximum assistance; 75-100% error
2. BELOW expectations; needs assistance; 50-70% error
3. SATISFACTORY; expectations met; 25% error
4. ABOVE AVERAGE; expectations met; 10% error
5. EXCELLENT; expectations exceeded; less than 5% error

I. AUTOMATIC INJECTION AND CONTROL PANEL – Demonstration (3 of 4)

_____ Setting Controls on Control Panel (protocols)
_____ Load/unload Automatic Injector
_____ Set Controls on Automatic Injector
_____ Identify Contrast Media Used

II. MYELOGRAPHY – Instructor QUESTIONS (1 of 3)

_____ Cervical
_____ Thoracic
_____ Lumbar

III. THORAX SPECIALITY EXAMS – Instructor QUESTIONS (1 of 3)

_____ Bronchogram
_____ Cardiac Fluoroscopy
_____ Lung Needle Localization

IV. ARTHROGRAPHY - Instructor QUESTIONS (1 of 3)

_____ Shoulder
_____ Knee
_____ Elbow

V. NEURO/ABDOMINAL ANGIOGRAPH - Instructor QUESTIONS (1 of 5)

_____ Cerebral Arteriogram
_____ Aortogram
_____ Aortogram with Run-Off
_____ Renal Arteriogram
_____ Renal Venogram

VI. OTHER SPECIALITY AREAS - Instructor QUESTIONS (2 of 4)

_____ Hysterosalpingogram
_____ Super Mesenteric Arteriogram
_____ Extremity Venogram
_____ Extremity Arteriogram

VII. ACCESSORIES - Instructor QUESTIONS (4 of 5)

_____ Catheters
_____ Special Tray Set-Ups & proper disposal
_____ Sterile Technique
_____ Putting on Sterile Gloves
_____ 2 Syringe Flushing Technique/Pressure Bad Technique

VIII. FILMING/IMAGE ADJUST/CD COPYING – Demonstration (1 of 2)

_____ CD Duplication/Image Duplication
_____ Digital Subtraction

IX. PREPARATIONS - Instructor QUESTIONS (3 of 6)

_____ Hysterosalpingogram
_____ Arteriogram
_____ Venogram
_____ Lung Biopsy (CT)
_____ Arthrogram
_____ Informed Consent

X. OTHER MODALITY BIOPSIES – Instructor QUESTIONS (1 of 2)

_____ CT
_____ MRI

XI. TECHNIQUE MANIPULATION STATE (2)

MAS KVP

_____

_____

Revised 4/2015

Safety screening protocol for students accessing or potentially accessing the magnetic resonance environment.

Added 2016

Southern will screen radiologic technology students entering MRI scanner areas whether observing or entering the scan room, to ensure their safety.

Protocols:

1. All students will be made aware of the magnetic fields used with MRI and understand the consequences of not following safety guidelines.
2. Students accepted into the program or those job shadowing will undergo an initial safety screening by completing the screening questionnaire.
3. Prior to any possible entry, the clinical setting will conduct additional screening either verbally or written specific to their department.
4. It is the student's responsibility to contact the clinical coordinator and/or MRI technologists of any changes to the screening form question answers. For example, if the students has a piercing or transdermal patch.

Safety information:

The powerful magnetic field of the scanner can attract certain metallic objects that are ferromagnetic, causing them to move suddenly and with great force towards the center of the MRI system/scanner. This may pose a risk to you or anyone in the path of the object. Therefore, great care is taken to prevent ferromagnetic objects from entering the MRI scanner room.
It is vital that you remove metallic objects before entering the MRI static magnetic field, including watches, jewelry, and items of clothing that have metallic threads or fasteners.
Items that need to be removed before entering the MR system room may include:

• Purse, wallet, money clip, credit cards or other cards with magnetic strips
• Electronic devices such as beepers or cell phones
• Hearing aids
• Metallic jewelry, watches
• Pens, paper clips, keys, nail clippers, coins, pocket knives
• Hair barrettes, hairpins
• Any article of clothing that has a metallic zipper, buttons, snaps, hooks, or under-wires
• Shoes, belt buckles, safety pins

Before entering the MRI scanner room, you may be asked to fill out a facility department screening form asking about anything that might create a health risk or even death.

If you have a bullet, shrapnel, or similar metallic fragment in your body, there is a potential risk that it could change position, possibly causing injury. Also, the magnetic field of the scanner can damage an external hearing aid or cause a heart pacemaker to malfunction.
Examples of items or things that may create a health hazard or other problems:
• Pacemaker
• Implantable cardioverter defibrillator (ICD)
• Neurostimulator system
• Aneurysm clip
• Metallic implant

• Implanted drug infusion device
• Foreign metal objects, especially if in or near the eye
• Shrapnel or bullet
• Permanent cosmetics or tattoos (if being scanned)
• Dentures/teeth with magnetic keepers
• Other implants that involve magnets
• Medication patches that contain metal foil (*i.e.,* transdermal patch)

Find additional information in the ACR Guidance Document on MR Safe Practices: 2013.

With permission from Brad Holben MSHA, RT(R)(MR)
MRI Education Program Coordinator
WVU Medicine
WVU Hospitals Revised: 6-18-14

Student's Name: _____Date:_____

This questionnaire is designed to assist Southern in determining if it is safe for you to enter into the MRI exam room at any clinical education setting (during a procedure or not). It is important that you answer all of the following questions. **If for some reason you don't understand the question please ask the MRI Technologist for assistance.**

		Circle One	
1	Do you have a pacemaker, wires, defibrillator, stents or implanted heart valves?	YES	NO
2	Have you ever had a head surgery requiring an aneurysm clip or coil?	YES	NO
3	Have you ever had any type of surgery?	YES	NO
4	Do you have any metal implanted in your body from a surgical procedure?	YES	NO
5	Have you ever had an injury to your eyes or body where metal fragments could be lodged?	YES	NO
6	Do you have any electronic pumps, stimulators, shunts or t.e.n.s. units implanted in your body?	YES	NO
7	Do you have any metal pins, joints, prosthesis or metallic objects in or attached to your body?	YES	NO
8	Do you have dentures, hearing aids, or middle/inner ear prosthesis?	YES	NO
9	Do you have any form of body piercing (ear, tongue, nose, exotic)?	YES	NO
10	For females, are you pregnant or is there a possibility that you could be pregnant?	YES	NO
11	Is there any device or item that you think should be brought to the attention of the MR technologist prior to your entry into the MRI scan room?	YES	NO

If yes, list _____

I certify that I have read and understand the questions asked in the questionnaire and have responded to the best of my ability. I have read the safety information. I understand that it is my responsibility to inform Southern and the clinical site of any metal or implanted devices that may be in my body and that failing to do so may cause serious injury or be life-threatening. I agree that should I have any metal in my body that after review and screening by the physician/technologist, elect to enter the MRI scan room whether having the procedure or not, I agree to release Southern and the clinical site from any and all liability for any injury.

_____	_____	_____
Student's Signature	Print Name	Date
_____	_____	_____
Witness or Interpreter	Print Name	Date
_____	_____	_____
*Physician/MRI Technologist	Print Name and Title	Date

*The physician/MRI Technologist signature will be obtained only if required by the clinical setting. Or a department specific form/release may be used.

Developed 11/2015 & adopted 1/2016

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

Joint Review Committee on Education in Radiologic Technology
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Chicago, IL 60606-3182
312.704.5300 ● (Fax) 312.704.5304
www.jrcert.org

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**.

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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For the complete Standards, go to JRCERT.org.

Southern West Virginia Community and Technical College does not discriminate on the basis of race, color, national origin, ethnicity, sex, disability, age, religion, gender, sexual or gender orientation, marital status, and veteran status in the administration of any of its educational programs, activities, or with respect to admission or employment. Faculty, staff, students, and applicants are protected from retaliation from filing complaints or assisting in an investigation. The following persons have been designated to handle inquiries regarding nondiscrimination policies and complaints:

Title IX Coordinator
Mr. Darrell Taylor
Director of Enrollment Management
and Student Engagement
P.O. Box 2900
Mount Gay, WV 25637
Phone: 304-896-7432
Fax: 304-792-7096
TTY: 304-792-7054
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Affirmative Action Officer
Ms. Debbie Dingess
Director of Human Resources
P.O. Box 2900
Mount Gay, WV 25637
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Ms. Dianna Toler
Director of Disability and Adult Services
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For further information on notice of nondiscrimination, contact the Office of Civil Rights, U.S. Department of Education, The Wanamaker Building, 100 Penn Square East, Suite 515, Philadelphia, PA 19107-3323; Phone: 215-656-8541; Fax: 215-656-8605; TTY: 877-521-2172; or email OCR.Philadelphia@ed.gov.

Class of 2016-2018

CLINICAL MANUAL AGREEMENT

I have received a copy of the Southern WV Community & Technical College Clinical Manual in Radiologic Technology. I agree to abide by the policies and procedures that are within this manual and understand that changes may occur during the program and that I will be notified of such changes.

Student Name: _____

Date: _____