# MERRITT COLLEGE

# RADIOLOGIC SCIENCE PROGRAM

# STUDENT HANDBOOK



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# **INTRODUCTION**

Merritt College is one of four public, comprehensive two-year community colleges maintained by the Peralta Community College District in Alameda County. The college is fully accredited by the Accrediting Commission for Community and Junior Colleges (ACCJC).

## RADIOLOGIC SCIENCE PROGRAM MISSION STATEMENT

The purpose of the Radiologic Science Program at Merritt College is to prepare qualified practitioners for competency in the art and science of diagnostic medical imaging. The goals of the program are:

- 1. Students will be clinically competent.
- 2. Students will demonstrate effective communication skills.
- 3. Students will develop critical thinking and problem-solving skills.
- 4. Students will demonstrate professionalism.

# RADIOLOGIC SCIENCE PROGRAM STUDENT LEARNING OUTCOMES

Upon completion of the program graduates will be able to:

- 1. Produce diagnostic quality medical images in a competent, safe, and compassionate manner for all basic radiography examinations in a hospital work environment.
- 2. Communicate effectively with patients and family members by taking appropriate histories, giving clear instructions, and providing information as needed.
- 3. Communicate in a professional manner with hospital staff, instructors, and peers.
- 4. Exercise critical thinking and problem-solving skills by adapting radiographic examinations to individual patient needs and conditions.
- 5. Establish and maintain satisfactory professional relationships with other members of the health care team.
- 6. Function as an effective health care team member by providing services in a manner that complements those performed by other team members.
- 7. Demonstrate a commitment to professional development.

The Program is accredited by the Joint Review Committee on Education in Radiologic Technology, 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182. An outline of The JRCERT Standards for an Accredited Educational Program in Radiography may be found in the Appendix of this handbook.

Students may visit the website: <a href="www.jrcert.org">www.jrcert.org</a> for an expanded version of the Standards as well as for other accreditation information and program effectiveness data. To make a formal complaint to JRCERT about the program, students may go to <a href="http://www.jrcert.org/students/">http://www.jrcert.org/students/</a> for instructions.

The program is also regulated by California Department of Public Health, Radiologic Health Branch, MS 7610, P.O. Box 997414, Sacramento, CA 95899-7414. To make a formal complaint to CDPH-RHB, students may email Marilyn Cantrell, Senior Health Physicist, at Marilyn.Cantrell@cdph.ca.gov.

# **DESCRIPTION OF THE PROFESSION**

The profession of Radiologic Science or Radiography requires the ability to provide appropriate health care services. Radiographers are highly skilled professionals, qualified by education to perform imaging examinations and carry out responsibilities at the request of physicians. The radiographer applies knowledge of radiation protection, medical ethics and law, equipment operation and quality control, image production and evaluation, radiographic procedures and positioning, pharmacology, and patient care in producing quality radiographs while maintaining safety.

The following are some duties of the Radiographer:

- 1. Apply knowledge of anatomy and physiology, positioning and radiographic techniques to produce radiographs that accurately demonstrate anatomical structures and pathology.
- 2. Determine exposure factors to achieve optimum radiographic techniques with minimum radiation exposure to the patient.
- 3. Evaluate radiographic images for appropriate positioning and image quality.
- 4. Apply the principles of radiation protection to the patient, self and others.
- 5. Provide patient care and comfort.
- 6. Recognize emergency patient conditions and initiate life-saving first aid and basic life support procedures when indicated.
- 7. Detect and report equipment malfunctions.
- 8. Apply the knowledge of safe equipment operation procedures.
- 9. Exercise independent judgement and discretion in the performance of medical imaging procedures.
- 10. Participate in radiologic quality assurance and quality control programs.
- 11. Provide patient and public education regarding radiologic procedures and radiation safety.

# **RADIOLOGIC SCIENCE ORGANIZATIONS**

Joint Review Committee on Education in Radiologic Technology 20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182 www.jrcert.org

California Department of Public Health
Radiologic Health Branch, MS 7610
P.O. Box 997414
Sacramento, CA 95899-7414
<a href="http://www.cdph.ca.gov/programs/Pages/RadiologicHealthBranch.aspx">http://www.cdph.ca.gov/programs/Pages/RadiologicHealthBranch.aspx</a>

American Registry of Radiologic Technologists 1255 Northland Drive St. Paul, MN 55120-1155 www.arrt.org

American Society of Radiologic Technologists 15000 Central Ave. SE Albuquerque, NM 87123-3917 www.asrt.org

California Society of Radiologic Technologists 575 Market St. Suite 2125 San Francisco, CA 94105 www.csrt.org

# RADIOLOGIC SCIENCE PROGRAM GENERAL REQUIREMENTS

The program is designed to prepare competent practitioners in the art and science of diagnostic imaging. Upon successful completion of the program, students will graduate with an Associate Degree and will be eligible to sit for the national registry examination required for state and national certification.

The course of study includes instruction in Applied Radiologic Science and clinical experience in affiliated health care facilities. Students are provided opportunities to develop skills in team building, critical thinking, and effective communication. Clinical experience instills appropriate attitudes and fosters affective growth in providing care and responding to the patient's needs. The program seeks to promote professional growth and life-long learning with emphasis on ethical behavior in all aspects of the educational experience.

California law requires that all community college students pay a fee unless special consideration has been allowed.

At any time during the program, if a Radiologic Science student is convicted of a crime including a felony, a gross misdemeanor, or a misdemeanor with the sole exception of speeding and parking violations, s/he must report this to the American Registry of Radiologic Technologists. All alcohol and/or drug related violations must be reported. A student who believes that this may relate to himself or herself should contact the ARRT and request a "Pre-application Review" of the violation to obtain a ruling on their eligibility for the ARRT examination. This review may enable the student to avoid delays in processing the examination application that is made at the time of graduation. The ARRT contact information can be found on the previous page of this handbook.

Radiologic Science students must maintain currency with all health requirements throughout the two-year program. Students must complete a background check, drug screen, and medical clearance with documentation of immunity to communicable diseases prior to beginning the program. All records must be uploaded onto the student's individual Castle Branch profile. N-95 respirator mask fit tests are provided by the program once each year. All students must participate in fit testing and upload the fit test card (signed by the tester) onto the Castle Branch profile. Generally, TB testing is required every year, other vaccinations should be boosted as needed. All required documents must be uploaded onto each student's profile on CastleBranch. Students are responsible for printing a copy of all pertinent documents to be submitted to the clinical instructor at each assigned clinical education site. Students must print documents for each site they rotate to, whether temporary or permanent.

All Radiologic Science students must obtain CPR (American Heart Association Basic Life Support for Healthcare workers) certification prior to program start. CPR certification must be kept current throughout the duration of the student's course of study in the program. Generally, CPR certification is valid for two years. The certification will be verified by the program. The student must retain their original card, upload a copy of the card to their CastleBranch.com profile, and provide a copy to each assigned clinical education site.

At no time are Radiologic Science students allowed to concurrently participate in a second educational program if classes and or clinical times conflict.

# RADIOLOGIC SCIENCE COURSE SEQUENCE

	1st Sem (Fall)	2nd Sem (Spring)	3rd Sem	4th Sem (Fall)	5th Sem (Spring)	6th Sem
			(Summer)			(Summer)
Monday	3A lec 8 - 9:30 3A lab 9:30-11:30 3A lab 1:30-3:30 5A lab 10:30-11:30 5A lec 12-1:30	2B lec 8 - 9:30 3B lab 11:30-1:30 3B lab 1:30 - 3:30 3B lec 9:30-11:00 2B lab 11:30-1:30 2B lab 1:30 - 3:30	9B Clinical Exp 8 - 5 (8 hours)	9C Clinical Exp 8 - 5 (8 hours)	9D Clinical Exp 8 – 5 (8 hours)	9E Clinical Exp 8 – 5 (8 hours)
Tuesday	1B lec 9 – 12 (first 6 weeks) 1C Clinical Exp. 8 – 2:40 (last 11 weeks)	9A Clinical Exp. 8 - 5 (8 hours)	4A & B Lec 9-12:36 10A lab & lec 1 - 3:40	2C lec 8 - 9:30 2C lab 9:30-11:30 2C lab 12 - 2 5B lec 2 - 3:30	8 lec 8 - 10 7 lec 10 - 11:30 6 lec 12 - 1 6 lab 1 - 3	9E Clinical Exp 8 - 5 (8 hours)
Wednesday	3A lec 8 - 9:30 3A lab 9:30-11:30 3A lab 1:30-3:30 5A lec 12-1:30 5A lab 1:30-2:30	2B lec 8 - 9:30 3B lab 11:30-1:30 3B lab 1:30 - 3:30 3B lec 9:30-11:00 2B lab 11:30-1:30 2B lab 1:30 - 3:30	9B Clinical Exp 8 - 5 (8 hours)	9C Clinical Exp 8 - 5 (8hours)	9D Clinical Exp 8 - 5 (8 hours)	9E Clinical Exp 8 - 5 (8 hours)
Thursday	1B lec 9 – 12 (first 6 weeks) 1C Clinical Exp. 8 – 2:40 (last 11 wks)	9A Clinical Exp. 8 - 5 (8 hours)	4A & B Lec 9-12:36	2C lec 8 - 9:30 2C lab 9:30-11:30 2C lab 12 - 2 5B lec 2 - 3:30	8 lec 8 - 10 7 lec 10 - 11:30 6 lec 12 - 1 6 lab 1 - 3	9E Clinical Exp 8 - 12 10B lec & lab 1 - 3:40
Friday	2A lec 9 – 10:30 2A lab 10:30 – 12:30 2A lab 1:00-3:00		9B Clinical Exp 8 - 5 (8 hours)	9C Clinical Exp 8 - 5 (8hours)	9D Clinical Exp 8 - 5 (8 hours)	9E Clinical Exp 8 - 5 (8 hours)

<u>NOTE:</u> The program runs for two years with minimal breaks (occurring between fall and spring semesters and in mid-spring), students should not schedule any activities that interfere with attendance in any course in the program except during scheduled breaks.

This class sequence is subject to change without prior notice.

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<sup>1&</sup>lt;sup>ST</sup> SEM: 1B lecture during the first 6 weeks; clinical experience 1C scheduled during the last 11 weeks on Tue & Thu 8 - 2:30

<sup>2</sup>A lecture is concurrent but students are assigned either Fri AM or PM lab

<sup>3</sup>A lecture is concurrent but students are assigned either 9:30 or 1:30 lab

<sup>5</sup>A lecture is concurrent but students are assigned either Mon. or Wed. lab 2<sup>ND</sup> SEM: 2B lecture is concurrent but students are assigned either 11:30 or 1:30 lab

<sup>3</sup>B lecture is concurrent but students are assigned either 11:30 or 1:30 lab

<sup>3&</sup>lt;sup>RD</sup> SEM: Clinical Exp. is 8 hours on Mon, Wed & Fri. during the entire summer from the end of the Spring semester to the beginning of the Fall semester.

<sup>4</sup>A & B and 10A are held for approx. 10 weeks in the summer, please check the college Schedule of Classes. In general, clinical is 12 weeks and classes are 10 weeks in duration.

<sup>4&</sup>lt;sup>TH</sup> SEM: 2C lecture is concurrent but students are assigned either 9:30 or 12:00 lab

<sup>5&</sup>lt;sup>TH</sup> SEM: 6 lecture is concurrent AND students are assigned either Tues or Thur lab

<sup>6&</sup>lt;sup>TH</sup> SEM: Clinical Exp is 8 hrs on Mon, Tue, Wed and Fri and 4 hrs on Thu. for the entire summer

<sup>10</sup>B is scheduled on Thursday for 4 hours. This combination will total 40 hours. Please check the college Schedule of Classes for the actual duration of 10B.

# RADIOLOGIC SCIENCE COURSE SEQUENCE

# Required Prerequisites:

- a) Intermediate Algebra, Math 203 or higher (equivalent may be taken at other colleges).
- b) Anatomy and Physiology (must be a two-semester course with a minimum of 8 total units and include a lab. Equivalent may be taken at other colleges).

# At Merritt there are two options that qualify:

Bio 20A and 20B (5 units each, 10 units total) OR Bio 2 and Bio 4 (5 unites each, 10 units total)

- c) Survey of Radiologic Technology, RADTE 1A (this course may not be waived for any reason AND must be taken at Merritt College to qualify).
- d) Prior degree or completion of Merritt College General Education Requirements

FIRST YEAR			<u>UNITS</u>
First Semester	RADSC 1B	Introduction to Radiologic Science (Lecture)	2
(Fall)	RADSC 1C	Introduction to Rad. Science (Clinical Education)	2.5
	RADSC 2A	Radiographic Physics I	2
	RADSC 3A	Positioning I	4
	RADSC 5A	Patient Care I	2
Second Semester	RADSC 2B	Radiographic Physics II	4
(Spring)	RADSC 3B	Positioning II	4
	RADSC 9A	Clinical Experience I (16 hours per week)	4
Third Semester	RADSC 4A	Radiation Protection	2
(Summer)	RADSC 4B	Radiobiology	2
	RADSC 10A	Seminars in Radiologic Science I	1.5
	RADSC 9B	Clinical Experience II (24 hours per week)	4
SECOND YEAR			
Fourth Semester (Fall)	RADSC 2C	Computer/Digital Applications for Medical Imaging	4
` '	RADSC 5B	Patient Care II	3
	RADSC 9C	Clinical Experience III (24 hours per week)	6
Fifth Semester	RADSC 6	Quality Management/Fluoroscopy	2.5
(Spring)	RADSC 7	Advanced Imaging Procedures	3
	RADSC 8	Sectional Anatomy & Radiographic Pathology	4
	RADSC 9D	Clinical Experience IV (24 hours per week)	6
Sixth Semester	RADSC 10B	Seminars in Radiologic Technology II	1.5
(Summer)	RADSC 9E	Clinical Experience V (36 hours per week)	66
		Total Units	71

# STUDENT LEARNING OUTCOMES (FOR PROGRAM COURSES)

# **Didactic Courses**

# 1A: Survey of Radiologic Science

- 1. Decide whether medical imaging is an appropriate career choice.
- 2. Follow the appropriate steps for applying to the program.
- 3. Become educated consumers of medical imaging services.

## 1B: Intro to Medical Imaging

# In a simulated classroom environment:

- 1. Recognize the chain of command and hierarchical structure of an imaging department.
- 2. Function as a team member in a hospital environment.
- 3. Properly identify and prepare patients for imaging procedures.
- 4. Communicate effectively with patients by taking appropriate histories, giving clear instructions, and providing information as needed.
- 5. Utilize the radiology information system to retrieve patient demographics, requisitions, images, and transmit data through the PACS system.

## 2A: Radiographic Physics I

- 1. Use medical imaging equipment safely and appropriately in the performance of radiography procedures.
- 2. Protect personnel and patients from unnecessary ionizing radiation during medical imaging procedures.

# 2B: Radiographic Physics II

- 1. Use medical imaging equipment safely and appropriately in the performance of radiography procedures.
- 2. Protect personnel and patients from unnecessary ionizing radiation during medical imaging procedures.

## 2C: Computer/Digital Applications for Medical Imaging

- 1. Perform digital quality control tests in a clinical environment.
- 2. Utilize the Radiology Information System to retrieve patient demographics, requisitions, and transmit data through the PACS system.
- 3. Utilize Picture Archiving and Communication Systems to transmit and store images.
- 4. Set appropriate technical factors, acquire images, and critique digital images for quality.

# 3A: Positioning I

- 1. Accurately perform basic radiographic examinations of the upper and lower extremities, chest and abdomen, bony thorax and pelvis.
- 2. Communicate accurate information and give correct instructions to patients for basic radiographic examinations of the upper and lower extremities, chest and abdomen, bony thorax and pelvis.
- 3. Protect the patient, self, and personnel from infectious diseases by observing principles of standard precautions.

4. Protect the patient, self, and personnel from unnecessary radiation exposure.

#### 3B: Positioning II

- 1. Accurately perform basic radiographic examinations of the upper and lower gastrointestinal tract, genitourinary system, and the bones of the axial skeleton and cranium.
- 2. Communicate accurate information and give correct instructions to patients for basic radiographic examinations of the upper and lower gastrointestinal tract, genitourinary system, and the bones of the axial skeleton and cranium.
- 3. Protect the patient, self, and personnel from infectious diseases by observing principles of standard precautions.
- 4. Protect the patient, self, and personnel from unnecessary radiation exposure.

#### 4A: Radiation Protection

- 1. Based on individual patient characteristics and conditions, adapt radiologic procedures and techniques to minimize radiation exposure
- 2. Provide accurate information about radiation exposure to patients in a manner that is understandable to the general public
- 3. Protect patients, personnel, and members of the general public from unnecessary radiation.
- 4. Describe cardinal principles of radiation protection.
- 5. Identify the effective dose limits for occupationally exposed persons and patients.
- 6. Identify and describe radiation protection devices and detectors employed in diagnostic imaging.

#### 4B: Radiobiology

- 1. Based on individual patient characteristics and conditions, adapt radiologic procedures and techniques to minimize radiation exposure.
- 2. Provide accurate information about radiation exposure to patients in a manner that is understandable to the general public.
- 3. Rank general types of cells, organs, and tissue according to radiosensitivity.
- 4. Protect patients, personnel, and members of the general public from unnecessary radiation.

# 5A: Patient Care I

- 1. Transfer patients in a manner that is safe for patient and radiographer.
- 2. Prepare contrast media for patient examinations.
- 3. Observe standard precautions when performing radiography examinations.
- 4. Use information from patients' medical records to carry out radiographic examinations.
- 5. Demonstrate awareness of cultural differences relating to health care.
- 6. Demonstrate sensitivity to the needs of geriatric and pediatric populations.
- 7. Prepare equipment for oxygen administration.

#### 5B: Patient Care II

- 1. Solve complex problems encountered in the clinical practice of radiologic technology.
- 2. Provide culturally cognizant care to patients from diverse backgrounds in the radiology department.
- 3. Respond appropriately to patient emergencies in the hospital setting.
- 4. Perform radiologic examinations of patients with central venous lines, chest tubes, endotracheal tubes, enteric tubes, and urinary catheters.
- 5. Perform venipuncture for the purpose of contrast media administration.
- 6. Demonstrate sensitivity to special needs of patients with chronic emotional and physical disabilities.

# 6: Quality Management/Fluoroscopy

- 1. Reframe a healthcare organization based on identified leadership styles.
- 2. Design a change process to address a problem in an imaging department.
- 3. Perform radiographic quality control procedures.

#### 7: Advanced Imaging Procedures

- 1. Educate patients regarding advanced/specialty medical imaging procedures.
- 2. Make career planning decisions regarding advanced modality training following completion of the radiography program.

## 8: Sectional Anatomy and Radiographic Pathology

- 1. Identify the systematic classification of diseases.
- 2. Identify the signs and symptoms of diseases.
- 3. Determine appropriate radiographic examinations and treatments for diseases
- 4. Demonstrate through presentations sectional anatomy identification, case studies, and image evaluations for necessary technical changes of radiographic examination.

# 10A: Seminar in Radiologic Science I

- 1. View experiences with the healthcare system from a patient's perspective.
- 2. Use critical thinking to collaboratively solve complex problems experienced in clinical practice.
- 3. Describe special concerns and procedures for imaging pediatric patients.
- 4. Demonstrate sterile technique as appropriate for medical imaging procedures in the radiology department and surgical suite.
- 5. Prepare and demonstrate use of surgical equipment for operating room procedures.

#### 10B: Seminar in Radiologic Science II

- 1. Demonstrate readiness to pass the ARRT registry examination.
- 2. Demonstrate readiness to pass the California Department of Public Health Radiologic Health Branch Fluoroscopy Examination.
- 3. Prepare a Cover Letter and Resume suitable for securing employment as an entry-level radiologic technologist.

# STUDENT LEARNING OUTCOMES (FOR PROGRAM COURSES)

# **Clinical Courses**

# 1C: Intro to Clinical Experience

- 1. Establish and maintain satisfactory professional relationships with other members of the health care team.
- 2. Properly prepare patients for imaging procedures.
- 3. Communicate effectively with patients by taking appropriate histories, giving clear instructions, and providing information as needed.
- 4. Utilize the radiology information system to retrieve patient demographics, requisitions, images, and transmit data through the PACS system.
- 5. Use imaging equipment safely and appropriately.

## 9A: Clinical Experience I

- 1. Produce diagnostic quality medical images for all basic radiography examinations learned in Positioning I in the clinical environment.
- 2. Provide compassionate and culturally sensitive care to patients and family members in the clinical environment.
- 3. Communicate effectively with patients by taking appropriate histories, giving appropriate instructions, and providing information as needed.
- 4. Communicate in a professional manner with hospital staff, instructors, and peers.
- 5. Function as an effective health care team member by providing services in a manner that complements those performed by other team members.

## 9B-E: Clinical Experience II-V

- 1. Produce diagnostic quality medical images in a competent, safe, and compassionate manner for all basic radiography examinations in the clinical environment.
- 2. Communicate effectively with patients by taking appropriate histories, giving appropriate instructions, and providing information as needed.
- 3. Communicate in a professional manner with hospital staff, instructors, and peers.
- 4. Exercise critical thinking and problem-solving skills by adapting radiographic examinations to individual patient needs and conditions.
- 5. Establish and maintain satisfactory professional relationships with other members of the health care team.
- 6. Function as an effective health care team member by providing services in a manner that complements those performed by other team members.
- 7. Function as an effective health care team member by providing services in a manner that complements those performed by other team members.

# ADDITIONAL PROGRAM REQUIREMENTS

# **Academic Advising Requirements**

The American Registry of Radiologic Technologists requires that all graduates of radiologic science programs have earned a degree prior to a candidate sitting for the Radiography Certification Examination.

- Students who enter the program without a prior degree must submit a Petition for the Associate Degree in Radiologic Science to Admissions and Records by the Summer Semester deadline of the graduation year. All General Education requirements must be met, along with completion of all program core courses.
- Students who have earned a degree from an accredited institution prior to entering the program have two options:
  - 1. Submit a Petition for the <u>Certificate of Completion</u> to Admissions and Records by the Summer Semester deadline of the graduation year.
  - 2. Submit a Petition for the <u>Associate Degree in Radiologic Science</u> to Admissions and Records by the Summer Semester deadline of the graduation year. Note that this option requires the student to have met all General Education requirements for Merritt College. This may mean that additional coursework may be required beyond the program core courses.

The Program Director is required to verify degree completion on the ARRT application for the radiography examination. All Radiologic Science Program students are required to meet with a Merritt College Counselor during the Spring Semester of both the first and second years of the program to assure that General Education requirements for Merritt College are met, and/or that the student has a prior degree from another accredited institution.

At each counseling session, it should be determined which is appropriate: the Petition for the Associate Degree in Radiologic Science, or the Petition for Certificate of Completion. Students are required to submit documentation of counseling with their General Education and/or prior degree status to the program director following the counseling appointment during Spring Semester of the first year.

The counselor must sign the student off for the appropriate petition during the final counseling session in the Spring Semester of the second year. This documentation must be submitted to the Program Director following the counseling appointment and will be used to determine whether the student is eligible to sit for the ARRT certification examination in Radiography.

Documentation forms for Counseling are found in the Appendix of this Handbook.

# **Service Learning**

Service Learning, or community service, is a graduation requirement for the Merritt College Radiologic Science Program. To fulfill this requirement, students must participate in a minimum of four hours of community service per year. Service-Learning projects are activities that contribute to the health and/or quality of life of members of the public.

Activities sponsored by churches, synagogues, mosques, or other religious organizations qualify if they benefit members of the public and are not limited to members of the organization.

Students are encouraged to choose activities that involve:

- a. Communication and education of clients/patients, and practice of clinical skills.
  - i. Examples of activities that qualify include making presentations about the profession of radiologic technology to area High School Students, sorting donated products at a food bank, delivering "meals on wheels," reading to a resident in a skilled nursing facility, or painting a house for Habitat for Humanity.
  - ii. Examples of activities that do NOT qualify include working in the nursery during church services or picking up litter at the private school attended by your child.

Occasionally, program faculty solicit student assistance at health or career fairs. These activities qualify for the Service-Learning requirement and do not require prior approval or documentation if a faculty member is present.

You must submit a "Request for Approval" form describing the activity ahead of the event. If you wish to participate in an independent activity, you must also obtain "Documentation of Independent Activity" when you attend the event.

You must write a short paper describing the event and your reaction to participating in the activity (see "Reflection Paper Assignment" for format) following completion of the Service-Learning activity. The paper along with accompanying documentation must be submitted before the final class meeting of the Summer Seminar course each year. Students who do not complete Service-Learning requirements will receive a grade reduction for the Seminar course(s) and delay in program completion until the requirement is met.

Instructions for completing the reflection paper and documentation forms are in the Appendix of this handbook.

# **Venipuncture Certification**

All students are required by the California Department of Public Health, Radiologic Health Branch, to complete certification in venipuncture on a model arm. Certification on live human subjects is optional.

Students must first demonstrate competency on the model arm to achieve a Basic Venipuncture Certificate before attempting Intravenous (IV) starts on human subjects. Students assigned to clinical sites at which venipuncture is not permitted may be rotated to a temporary site during the second year of the program to complete the optional sticks on live human subjects if desired. Students who successfully complete 10 sticks on live human subjects will achieve an Advanced Venipuncture Certificate.

# **HESI Exit Examination**

Passing the HESI Exit Examination with a minimum score of 75% is required for completion of the program. This examination is given at the end of the Seminar 10B course (final semester of the program). Students who fail the exam must make arrangements with the Program Director to schedule additional exit exam(s). Failing students must retake and pass the exam in order to graduate from the program.

# **Ethics and Professionalism**

Professional conduct and behavior are not limited to contact with any single group of people. It is reflected in attitude and in communication with instructors, classmates, physicians, supervisors, as well as patients. As a student, you are expected to perform and conduct yourself on a professional level both clinically and didactically.

All Radiologic Science students are required to meet mandatory professional conduct requirements based on the *Standards of Ethics* for Radiologic Technologists (Appendix) and the college Rules for Student Conduct (Appendix). These ethical standards and guidelines are reviewed and approved by the program advisory committee consisting of clinical affiliate managers, clinical instructors, program faculty and student representatives. Students of the program have profound responsibilities to themselves, to the program, to the college and to the profession to maintain a high level of integrity and a personal reputation of honesty and trustfulness. All students are expected to recognize and support the standards. Professional loyalty and dedication to your assigned clinical education facility are required both for your patient's protection and your own future.

# **Honor Code**

Honesty and integrity are particularly important for health professionals, whose decisions and actions affect the lives and well-being of all patients in their care.

Students are expected to take responsibility for their actions in the classroom as well as in the clinical education sites. Dishonesty of any kind will not be tolerated.

- Cheating on exams
- Falsifying didactic or clinical records (including falsifying a time clock, evaluations, competencies)
- Revealing privileged information is absolutely prohibited and may be cause for dismissal from the program

Cheating is strictly prohibited and may involve

- Looking at another student's exam for answers
- Referring to notes during an exam
- Using communications devices
- Accessing the internet for answers during an exam
- Sharing an exam with a student or students who have not yet taken the exam
- Reviewing another student's graded exam prior to taking the exam
- Selling or buying exam

Plagiarism, involving copying another student's work or presenting material without proper citation of sources, is strictly prohibited and is cause for dismissal from the program.

The program is required to report all violations of the honor code to the ARRT. Such violations may invalidate a student's eligibility to take the Registry Examination.

# **Attendance Policy**

The Merritt College Radiologic Science Program strives to maintain similar standards of attendance and punctuality for our student technologists as those adopted by our hospital affiliates for their employees. In this way we hope to establish proper work habits and employability in our graduate technologists.

We are also obligated to provide a specific number of hours of instruction and clinical education to conform to the requirements of the California Department of Public Health, Radiologic Health Branch. We must adhere to strict attendance/tardiness policies to ensure that upon graduation, students have fulfilled their hourly obligation according to state law.

See sections on clinical and classroom policies for specific attendance requirements.

# **Harassment Policy**

The Merritt College Radiologic Science Program is committed to providing a learning environment free from harassment and to fostering a learning community based upon the fundamental dignity and worth of all students, faculty, and staff. Consistent with this commitment is the policy of the College and the program:

- 1) not to tolerate harassment in any form
- 2) to actively foster prevention of harassment in the campus community
- 3) to provide students with mechanisms for seeking informal or formal resolution.

For purposes of this Policy "harassment" is defined as any action that impedes the performance or experience of others and is considered prohibitive to the enjoyment of the fundamental freedoms of inquiry, work, and study.

"Sexual harassment" is defined, as adapted from the Equal Opportunity Commission Guidelines, as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:

- submission to such conduct is made whether explicitly or implicitly a term or condition of receiving a grade or continuation in the program or clinical education.
- such conduct has the purpose or effect of unreasonably interfering with an individual's learning experience or creating an intimidating, hostile, or offensive learning environment.

Students who feel they are or have been the subject of harassment or sexual harassment are encouraged to report such treatment to the program director. If the student is uncomfortable/unwilling to report such treatment to the program director, he/she should report to the next level of authority, the Instructional Dean, the Vice President of Instruction, or the Vice President of Student Services. The person who receives the report will investigate the incident and determine the best course of action in the context of the circumstances.

# **FERPA Law Overview**

The Family Education Rights and Privacy Act of 1974, commonly known as FERPA, is a federal law that protects the privacy of student education records. Students have specific, protected rights regarding the release of such records and FERPA requires that institutions adhere strictly to these guidelines.

FERPA gives students the following rights regarding educational records:

- The right to access educational records kept by the school
- The right to demand educational records be disclosed only with student consent
- The right to amend educational records
- The right to file complaints against the school for disclosing educational records in violation of FERPA

There are two types of educational records as defined under FERPA. Each type has different disclosure protection:

- Directory Information A college or university may disclose this type of
  information without the written consent of the student. The student can exercise
  the option to restrict the release of directory information by submitting a formal
  request to the school to limit disclosure. Directory information may include:
  - 1. Name
  - 2. Address
  - 3. Phone number and email address
  - 4. Dates of attendance
  - 5. Degree(s) awarded
  - 6. Enrollment status
  - 7. Major field of study
- Non-Directory Information Any information not considered Directory Information. This information cannot be released to anyone without prior written consent. Non-directory information may include:
  - 1. Social Security Numbers
  - 2. Student academic information
  - 3. Race, ethnicity, and/or nationality
  - 4. Gender
  - 5. Transcripts; grade reports

# **Ethics, Civility and Mutual Respect Policy**

Members of the Peralta Community College District community are expected to treat other community members with civility and respect:

# A. Unacceptable behaviors.

a. Demeaning, intimidating, threatening, or physically or emotionally abusive behaviors that hamper the ability to learn or work in the college environment depart are unacceptable.

#### B. Retaliation.

a. Retaliation for reporting violations of this policy, for seeking to have prohibited conduct corrected, or for participating in an investigation is prohibited.

#### C. Violation.

a. A District community member who has violated this procedure is subject to disciplinary action in accordance with established disciplinary procedures. A member of the Board of Trustees who has violated this procedure is subject to public censure by the Board. (The provisions of this administrative procedure shall be in accordance with collective bargaining agreements.)

#### D. Restraining Order.

a. Any District community member who has obtained a restraining order against another District community member is encouraged to provide a copy of the order to Peralta Police Services for enforcement.

# E. Visitors.

a. Visitors, other people, vendors and families of students, staff, and faculty are expected to comply with the provisions of this procedure. Noncompliant behavior may lead to removal from district property.

# **Student Accessibility Services (SAS)**

Student Accessibility Services (SAS) (Formerly Disability Services Program)

The Student Accessibility Services (SAS) office provides assistance to facilitate equal educational opportunities for students who have disabilities.

Our mission is to:

- Empower students with disabilities for success
- Provide services to minimize the limiting effects of a disability
- Advocate for the needs and rights of students with disabilities
- Create a "level playing field" in the classroom and online
- Services are voluntary for qualified students who request services.

Counselors in the program provide counseling on an individual basis to determine academic accommodation needs.

• Academic accommodations/support services may include alternate media and adaptive equipment, sign language interpreting, testing accommodations, classroom note-taking assistance, priority registration, and referral to other campus and community resources.

Our goals are to:

- Focus on the true ability of students
- Determine and provide individualized accommodations
- Foster equal treatment through all Merritt College programs
- Promote awareness of disability rights and the philosophy of equal access

To access SAS services, students must provide current documentation of a verified disability, and make an appointment to meet with a counselor or with the Learning Disabilities Specialist. The SAS Office is located in Building R, Room 109. For information and appointments, call (510)436-2429.

Merritt College's SAS provides the following services:

- Alternate Media Services reformats books and study materials to auditory, large-print, and other formats.
- Computer Access Lab includes state-of-the-art adaptive computer hardware and software.
- Learning Opportunity Program serves students with diagnosed learning disabilities.
- On-campus tram service provides assistance to students with mobility impairments

Receiving services and accommodations will not adversely affect your grade. This information will be kept confidential (FERPA). Please meet with instructors in private as early in the semester as possible to discuss your learning needs.

# Policy on "Chain of Command" Reporting

Students who have a complaint or conflict with a person and feel they cannot talk directly to that person should report/complain to the *next* person in the chain of command. Students who bypass a link in the chain of command will likely be sent back to the "missing link." If the problem is not resolved at that level, students may then go to the next person in the chain of command.

## The Chain of Command at Merritt College:

- 1. Student
- 2. Instructor
- 3. Program Director: Dr. Jacqueline Custard 510-436-2427 jcustard@peralta.edu
- 4. Dean of Allied Health and Public Safety Mr. Nghiem Thai nthai@peralta.edu
- 5. Vice President of Instruction: Dr. Denise Richardson drichardson@peralta.edu OR Vice President of Student Services: Dr. Lilia Chaves 510-436-2478 vpss@peralta.edu
- 6. College President: Dr. David Johnson 510-436-2501 dmjohnson@peralta.edu
- 7. Chancellor of Peralta Community College District, Dr. Jannett Jackson 510-466-7203 jjackson@peralta.edu

#### The Chain of Command at the Clinical Site:

Verify persons in these positions and specific contact information with your Clinical Instructor

- 1. Technologists
- 2. Clinical Coordinator
- 3. Supervisor
- 4. Manager
- 5. Imaging Director-----(Parallel with)-----Physicians
- 6. Chief Operating Officer or Chief Executive Officer

# **CLINICAL POLICIES**

#### **Clinical Placements**

The Merritt College Radiologic Science Program is affiliated with fifteen clinical sites located throughout the East Bay. Some sites are close to the college, others are as far east as Brentwood, as far south as Hayward and Fremont, and as far north as Vallejo. The program cannot guarantee that students will be placed close to home or to a clinical site with access to public transportation. Students are responsible for providing their own transportation to clinical. Unlimited access to a reliable vehicle is required to participate in the program.

The program faculty reserve the right to use their discretion in placing students in clinical sites that they feel, based on their professional judgment and experience, best serve the students' educational needs. Faculty may find it necessary to relocate a student to a different clinical site at some point in the program to assure that clinical objectives are met. Students may request temporary or permanent transfers by submitting the "Request for Hospital Transfer" form found in the Appendix of this handbook. Clinical transfer requests initiated by students will be considered by faculty and granted or denied at faculty discretion. Students are not, under any circumstances, permitted to directly contact any clinical site to request a transfer.

The program is obligated to provide one clinical placement for each student. Students who are removed from a clinical site due to behavior or performance issues are not guaranteed placement at another site.

Clinical and academic courses are concurrent in the Merritt College Radiologic Science Program. Clinical leaves of absence are permitted for a maximum of six weeks and only under the specific terms outlined in the Clinical Leave of Absence Policy.

# **CLINICAL POLICIES**

# **Temporary Clinical Transfers**

Students are encouraged to request a temporary transfer to at least one site other than their "home" hospital, beginning in the Fall Semester of the second year.

Reasons for transfer may include:

- gaining experience and competency with pediatric patients
- developing trauma radiography skills
- completing venipuncture certification
- learning to use different types of equipment

Students must submit transfer request forms to the Clinical Coordinator by July 1<sup>st</sup> of the first summer to be considered for Fall transfers. Requests for Spring Semester should be submitted by November 1<sup>st</sup>, requests for Summer Semester must be submitted by April 1<sup>st</sup>. The Clinical Coordinator will evaluate the requests, seek permission from the Clinical Instructor and Manager at the transfer site, and schedule as appropriate.

# **CLINICAL POLICIES**

# **Hospital Orientation**

All students must attend a hospital orientation at their clinical site by the end of the first semester of the program. This is to assure that all students are "cognizant of clinical policies and procedures." The policies and procedures must, at a minimum, address the following: hazards (fire, electrical, chemical), emergency preparedness, medical emergencies, HIPAA, and Standard Precautions" (JRCERT Accreditation Standards, Standard 5: 2021).

Documentation of attendance must be included in the Clinical 1C portfolio and submitted at the end of the first Fall Semester. All students permanently transferring to a new hospital must attend orientation within the first 3 months following the rotation.

# **Behavioral Expectations at the Clinical Site**

- 1. Adhere to all policies specific to the hospital at which you are assigned.
- 2. Treat all peers, technologists, instructors, supervisors, physicians, patients, and visitors with kindness, courtesy, and respect. Use proper titles when addressing supervisors, physicians, and patients. Abusive language, harassment, sexual harassment, threatening behavior, or destruction of property belonging to the hospital or others will not be tolerated and may be grounds for program dismissal.
- 3. Be mindful of privacy considerations for hospital clinical instructors. If your Clinical Instructor (CI) has provided you with a personal e-mail address and/or cell phone number, be courteous in the content and timing of your communications. Do not call your CI on their personal cell phone number nights, weekends, or while they are out on vacation or personal leave.
- 4. Listen and follow instructions given to you by all technologists you work with.
- 5. Maintain a cooperative and uncomplaining attitude. Watch your body language. Eye rolling and other actions signifying boredom or unwillingness to follow instructions for whatever reason is unacceptable.
- 6. Approach learning at the clinical site with a sense of humility. Respect the expertise of your instructors and all technologists in the department. Consider each person you work with as a potential source of knowledge and skills. Respond to criticism with calm reflection rather than with hostility and defensiveness. Adjust your practice in response to feedback.
- 7. You are encouraged to ask questions, but be mindful of the timing, place, and what is going on around you. Never ask questions in front of a patient. Wait until you are outside of the exam room and the tech is not busy with other tasks. Ask questions in a respectful, rather than a challenging manner.
- 8. Attempt to establish rapport with fellow students, technologists, patients, and other personnel.
- 9. Take responsibility for your errors, report the error, and do your best to correct the error. If you are unable to do so by yourself, seek help from a supervisor.
- 10. Ask for guidance when you are unfamiliar with the protocol or routine.

- 11. Collaboration and teamwork are essential to the practice of the profession and contribute to knowledge sharing. Work collaboratively with technologists as a team, sharing responsibility and accountability for the outcome of the exam.
- 12. Take initiative to assist the technologists in whatever capacity you are needed.
- 13. Demonstrate compassion and concern in all patient care interactions.
- 14. Any information regarding the patient (condition, diagnosis, treatment, prognosis or personal information) is confidential information and must never be discussed in public. Public areas of the hospital include the cafeteria, elevators, waiting rooms, hallways and many other areas where a patient or family member may be. **The HIPAA Privacy Rule must be strictly followed.** Penalties can be up to one year in jail and a \$55,000 fine.
- 15. Be aware that use of communication devices is completely banned during work hours at many of our clinical affiliate sites. Students are not permitted to use cameras or other recording devices to photograph or record any patient or patient records at clinical sites at any time. Some clinical sites allow students to use smart phones as reference tools (utilizing apps such as IRad, calculator, medical dictionary, etc). If use of smart phones for this purpose is permitted at the site, they must never be used in the presence of a patient. Students must check with their CI regarding permitted uses of communication devices at their clinical site.
- 16. Students are prohibited from posting sensitive, privileged, or confidential information on social media sites such as Facebook. The following rules regarding social media must be observed by all students:
  - a. Protect patient information. Never post any information or photos that can be used to identify a patient's identity or health condition in any way. Even if an individual is not identified by name, if there is reasonable basis to believe that the person could be identified, then the posting could be a violation of confidentiality laws and program policy.
  - b. Protect hospital and program information. Never represent that you are communicating the views or opinions of the hospital or Merritt College Radiologic Science Program or do anything that might reasonably create an impression you are communicating on behalf or as a representative of either institution.
  - c. Be judicious. Do not post anything that is even potentially private or internal to the hospital or college without prior approval from the hospital director of corporate communications or the radiologic science program director.
- 17. Always wear your identification badge and dosimeter while participating in clinical education.
- 18. Student Technologists are prohibited from accepting gratuities (tips) from patients.
- 19. Do not consume food or chew gum or tobacco products when in contact with patients or visitors or in patient areas.
- 20. Students may not leave the clinical department at any time without permission from the faculty or department supervisor.
- 21. Students should refrain from personal conversations in the presence of any patient.
- 22. Students should refrain from conversing with patients about the student's personal information.

- 23. Students are not permitted to solicit personal information from a patient for any reason that is not necessary for their care. Students are not permitted to contact patients for the purpose of social interactions.
- 24. Unnecessary conversation and loud talking in radiographic rooms and corridors is unprofessional and should be avoided.
- 25. Keep the door closed after the patient has entered the exam room and assure that the patient is properly gowned and draped at all times.
- 26. In the presence of a patient, do not make any personal remarks, criticisms, or comments regarding physicians, patients, associates, or methods of treatment.
- 27. Never advise a patient about retaining or discharging a physician. The "good faith" a patient has in his or her doctor is thought by many to be as much a healing element as is any medical treatment.
- 28. The student and staff technologist are both responsible for the cleanliness of equipment and accessories of the radiographic rooms in which they are assigned to work.
- 29. Infection control practices must be observed. Linen should be removed and changed after every patient. Tabletops and upright Buckys must be disinfected when soiled or when any part of a patient's body will come in contact with it. Image receptors should be cleaned when soiled. The chin rest of the upright Bucky should be cleaned after each use.
- 30. Use waterless hand sanitizer or wash hands thoroughly before and after each patient contact. Use waterless hand sanitizer or wash your hands after any activity that may have soiled your hands such as using the rest room, blowing your nose, cleaning the table, or changing soiled linen. Use soap and water to wash hands rather than waterless hand sanitizer if your hands are dirty.
- 31. Wastepaper, soiled linen and "sharps" are to be placed in the proper waste receptacles as soon as possible.
- 32. Hospital supplies are to be used only for their intended purpose. Supplies and equipment must not be removed from the clinical education centers except with express permission from the imaging department manager, and then only for educational purposes.
- 33. At no time is the student to leave the department for break, lunch, or end of the day before completing an exam (including releasing the patient) or turning it over to another student or technologist. Doing so constitutes patient abandonment and will incur disciplinary action.
- 34. If you have a complaint about the way a student, staff member, supervisor, or physician is treating you, immediately communicate this to either the CI or manager of the hospital, AND a program faculty member or program director. Do not discuss your complaints with other staff members or students.

Failure of a student to maintain a professional attitude may result in clinical course failure, clinical grade reduction, and may subject the student to corrective disciplinary action and possible dismissal from the program.

# **Student Supervision**

The program's policy regarding direct supervision and indirect supervision of students must be strictly adhered to at all times in the clinical education setting. The program defines direct supervision as having a Certified Radiologic Technologist in the room with the student for the entire performance of a radiography examination. Indirect supervision is defined as having a Certified Radiologic Technologist in the general work area, readily available to immediately assist the student if needed during a radiography examination.

- As per Title 17 of the California Code of Regulations, technologists supervising students in any aspect of clinical education must possess a California Radiography Certificate and must have at least 2 years of radiologic technology experience (post-certificate).
- Students must be **directly supervised** (technologist in the room) for all exams that the student has not yet signed off on.
- Students may perform exams that they are signed off on under indirect supervision (technologist available for help if needed, but not necessarily in the exam room).
   Exceptions to this rule include surgery and portable exams as well as any exam performed by a student on temporary rotation to a hospital other than their "home base," until a 4th sign-off is achieved at the rotation site.
- Students must be **directly supervised** for all repeat examinations. The supervising technologist must initial the student's portfolio exam log for all repeat exposures.
- Students must be **accompanied by a technologist** on all **portable** exams, regardless of sign-off status. The technologist may be in an adjacent area if the student has signed off on the exam but must be present on the same floor within shouting distance (for example, in an adjacent room) to assist if needed.
- Students must be **directly supervised** for all Operating Room (OR) procedures regardless of sign-off status. This means that the technologist must be in the Operating Room (OR) room with the student, not in another room working on another case.
- Students on temporary rotation to a hospital other than their "home base" must be directly supervised for all exams, including those already signed off, until a 4<sup>th</sup> sign-off is achieved at the rotation site.
- Students may not energize a fluoroscopy unit (i.e., step on the pedal) unless they are **directly supervised** by a physician with a Supervisor/Operator Permit and/or a technologist with a Fluoroscopy Permit.

# **Student Supervision**

• All students must be directly supervised for procedures in which a foreign body is introduced into a patient's body. This includes, but is not limited to, placing an enema tip for a Barium or water-soluble contrast examination, or starting an IV for contrast administration (regardless of whether or not competency has been achieved). Students who have achieved competency on fluoroscopy procedures requiring oral contrast may hand the patient the cup of contrast without direct supervision.

If students are asked to perform examinations in violation of this policy, they are to report the violation to the clinical instructor (unless it is the clinical instructor requesting the performance of the exam in violation of the policy) AND the college clinical faculty AND the program director. Students performing examinations without adequate supervision place the patient and themselves in jeopardy as well as the hospital and the college at risk for a lawsuit.

## **Reporting Requirements**

• Errors such as a student X-raying the wrong patient, wrong exam, wrong part, contrast placed in the wrong tube or wrong body part MUST be reported to the Program Director immediately by the Clinical Instructor (CI) as well as the student. An email with a detailed summary of the event must be included in the report by both parties. The student should be sent directly to the college to meet with the program director following any error in which the patient was placed in danger or exposed to a health threat.

## **Clinical Attendance Policies**

# Attendance Policy for 1st and 2nd Year Clinical Experience 1C, 9A, 9B, 9C, 9D and 9E:

- Students are to clock in at the beginning of each day on Trajecsys from a hospital computer terminal. Students may NOT use their phone to clock in.
- Students must clock out at the end of each day from a hospital computer terminal. Students may NOT use their phone to clock out.
- Students may not "bank" hours ahead of an absence.
- All absences require make-up hours. Students must complete the make-up agreement form on Trajecsys at least 24 hours prior to making up hours. The Clinical Instructor at the site AND the Clinical Coordinator must approve the make-up hours prior to attendance. Any clinical hours made up without prior approval will not count and will require make-up at the end of the program.
- Absences totaling four or more, regardless of make-up hours performed, will result in a drop from the course and a dismissal from the program, unless the student has a documented medical condition or other emergency and has arranged with the faculty for a Leave of Absence before the fourth day of absence for Clinical Experience 1C, 9A and 9B.
- Absences totaling six days or more, regardless of make-up hours performed, will result in a drop from the course and a dismissal from the program, unless the student has a documented medical condition or other emergency and has arranged with the faculty for a Leave of Absence before the sixth day of absence for Clinical Experience 9C, 9D and 9E.
- ✓ Students are required to call both the hospital clinical site and the college clinical instructor (see course syllabus for phone numbers) at least thirty minutes before the start of shift if the student is to be absent.
- ✓ The student must also e-mail all radiologic science faculty advising them of a clinical absence before 6:00 AM the day of the absence.

## **Clinical Attendance Policies**

# **Make-up Time for Clinical Absences**

All absences accrued during clinical education must be made up following the absence. All make-up hours must be approved by both the Clinical Coordinator and the clinical instructor at least 24 hours prior to making up time. Students must use the Make-Up Agreement form located on Trajecsys to obtain the required signatures before arriving at the clinical site to make up time. Make-up hours performed prior to approval by the college and clinical instructor will not be accepted and the hours must be made up at the end of the program.

According to JRCERT requirements, weekly classroom and clinical hours may not exceed a combined total of 40 hours. Students may not work more than 10 hours in a single day. Students will not be permitted to make up hours more than the 40 hour per week limit. Hours may be made up between 7:00 AM and 10:00 PM on weekdays, and 9:00 AM to 6:00 PM on Saturdays with approval. First year students are usually not approved to work past 6:00 PM on weekdays or at all on Saturdays due to decreased staffing at those times.

#### **Clinical Tardiness**

Students are expected to allow sufficient time in their commute for traffic and parking so that they arrive at the hospital on time for their shift. Students who are tardy more than three times to their clinical site in a semester face disciplinary action including a deduction of one letter grade from their clinical grade. Students are to arrive at their clinical site fifteen minutes before the start of shift to put away personal belongings and check the daily schedule. Students are to clock in on Trajecsys upon arrival to the hospital, and to clock out from the hospital at the end of the day. Students are expected to report to the clinical instructor or other assigned personnel at or before the official start of shift.

Students are not to leave the department for more than their designated lunch period (usually 30 minutes). It is suggested that students bring their lunch from home to ensure time to eat and report back to the clinical instructor or assigned personnel within the designated period of time. Students who are tardy from lunch or other breaks more than fifteen minutes, more than three times in a semester face disciplinary action including a deduction of one letter grade from their clinical grade.

#### **Clinical Shift Hours**

The actual shift hours for clinical experience may vary slightly from hospital to hospital and are determined by the clinical instructor and department manager at each site. Shift hours are designated to ensure that students are present while the largest number and variety of patient exams take place. Students are expected to work the assigned hours and are to schedule outside jobs, family responsibilities and doctor's appointments, etc. for times not conflicting with the clinical schedule. Students will not set their own individual shift schedule by coming in early or late and adjusting their departure time accordingly. Any change from the published schedule must be approved by a hospital and college instructor and must be submitted in written form. It

## **Clinical Attendance Policies**

is recommended that students find some way to assist the department or enhance learning during "slow" times in the department. Students are permitted to leave clinical before the end of shift only in times of personal/family emergency. Time missed from clinical experience must be made up without exception.

# **Clinical Visits from College Faculty**

Radiologic Science students will be visited by Merritt College clinical faculty according to the visit schedule developed by the Clinical Coordinator at the beginning of each semester. Instructors may also visit on unannounced dates.

At each visit (scheduled or unscheduled), students must make themselves available to meet with the instructor and be prepared to show their

- ✓ American Registry of Radiologic Technologists (ARRT) Master Sign-off sheet
- ✓ Repeat Log (with supervising technologists' signatures)
- ✓ Copy of the most recent dosimetry badge report

Students must be prepared to work with the visiting faculty on actual patients, participate in retention and practice labs, and engage in image evaluations and other instructional activities.

## **Employment at Clinical Sites**

Radiologic Science students may not be employed or volunteer in their assigned clinical education hospital. This includes working as a transcriptionist, file clerk, transportation, etc. Students are required to disclose employment at affiliate hospitals to the program director prior to clinical education assignment.

## **Professional Appearance**

Students participating in clinical education are expected to always project a clean and professional appearance. Daily showering **before and after** clinical is strongly suggested and clothing should be freshly laundered. The use of a deodorant/antiperspirant product is required. Hair that is long should be worn in such a way as to not drape forward into the face or onto the patient. Nails, beards, and mustaches should be neatly trimmed.

Jewelry should be kept to a minimum and should not be of a type that could be caught in equipment, drape onto a patient, scratch a patient, or be pulled by a patient. Perfumes and colognes should not be worn at the clinical site as strong scents may nauseate an ill patient or aggravate the condition of a patient with sensitivities to scents. Teeth must be brushed before arriving at the clinical site. After eating, care should be taken so that the breath does not have an offensive odor to patients or staff.

## Hand Hygiene

- 1. Natural nails are to be kept clean and short. Natural nail tips should be kept at less than ¼ inch long.
- 2. Nail polish is not permitted.
- 3. Artificial nails, wraps, tips, acrylics, gels, fillers, etc are not permitted.

Failure to follow the policy will result in the suspension of the student from the clinical site until compliance to this policy. The hours missed due to suspension will be made up at the end of the program.

#### **Facial Hair**

The presence of facial hair (beards or mustaches) is discouraged due to the difficulty it creates in creating a seal between an N95 respirator mask and the face. This could represent an infection control risk. Any facial hair present must be contained within the borders of the N95 mask and may not interfere with the mask's seal.

Failure to follow the policy will result in the suspension of the student from the clinical site until compliance to this policy. The hours missed due to suspension will be made up at the end of the program.

#### **Professional Attire**

Clothing should be clean and wrinkle free and must include some means of identification including full name and student status. This should include a hospital name tag, identifying the student as an SRT (student radiologic technologist), as well as a Merritt College ID.

## **Professional Appearance**

Examples of acceptable attire are as follows:

Scrub top and pants with comfortable **clean** athletic or nursing shoes, matching socks, student identification. Lab jackets should be worn over scrub tops with student ID visible at all times.

The following items are **not allowed** to be worn at any time during clinical hours:

- outdoor jackets
- o jogging suits/sweatpants/sweat shirts
- o see-through garments of any kind
- o necklines exposing cleavage
- o crop tops exposing skin between shirt and waistband of pants
- o skin tight garments including leotards and leggings
- o tank tops or any sleeveless tops
- o halter tops
- o sagging clothes revealing underwear
- o audio headphones or hands-free communication devices
- o shorts, miniskirts
- o logo tee-shirts (nothing on front or back is allowed)
- o long-dangling earrings

Individual hospital clinical sites may have further restrictions/expectations regarding professional dress and hygiene. Students are expected to adhere to policies in effect at their assigned clinical site.

All clothing worn at the hospital should be removed as soon as possible after the clinical shift and laundered with warm or hot water in disinfectant laundry soap. Shoes worn for clinical should be easily wiped clean with disinfectant without causing damage (or machine washable). We recommend buying a pair of shoes exclusively for clinical use.

Students not adhering to the Professional Appearance and Hygiene policy will be sent home to change clothing and will be required to make up the time missed. Repeated infractions will result in disciplinary action, possibly including dismissal from the program.

#### **Tattoos and Piercings**

Each affiliate hospital enforces its own policy regarding visible tattoos and facial piercings. Students must adhere to the policy in place at the clinical site to which they are assigned. Students may be asked to cover visible tattoos with clothing and/or remove some or all facial piercings while participating in clinical education. Students should also be aware that should they rotate temporarily to a new clinical site, they will be expected to adhere to the new site's policy while participating in clinical education there.

#### **Electronic Devices**

In the clinical environment, the use of cell phones and tablets for personal communications are distractions and an annoyance to patients and associates. Use of such devices in the presence of a patient, associate, or supervisor is considered unprofessional behavior. Student technologists are not permitted to receive or make personal telephone calls or texts while on clinical duty. Any student found to be making or receiving personal calls or texting will be given a warning and will be subject to progressive discipline. At no time shall the student leave a patient unattended during a procedure to respond to a text or phone call. Leaving a patient is considered abandonment of care and will result in disciplinary action, including possible dismissal from the program. The only exception for using a cell phone or tablet at the clinical site is to log exams on Trajecsys, or to communicate through Trajecsys. These tasks may be performed at the clinical site, but not while on duty.

Many hospitals do not permit the use of communications devices for any purpose while on duty. Students are responsible for knowing and following the policy at their assigned clinical education site. Some hospitals permit the use of smart phones as reference tools (apps such as IRad, notes, or a medical dictionary). If these tools are permitted, they must be used discreetly and are never to be used in the presence of a patient.

#### **Classroom Policies**

#### **Behavioral Expectations**

- 1. Always behave in a professional and considerate manner while in the classroom.
- 2. Treat your instructor and classmates with respect.
  - a. It is OK to disagree, but please do so in a manner that respects the other person's point of view.
- 3. Allow equal time for listening vs. speaking.
- 4. Avoid the use of profanity or discussion of potentially offensive subjects.
- 5. Raise your hand to respond to a question, ask a question, or make a point, to avoid talking over others.
- 6. Check your e-mail every day for messages from your instructor.
- 7. Physical violence or inappropriate touching is always forbidden.
- 8. Check with your instructor regarding their eating/drinking policy in the classroom.
- 9. Check with your instructor regarding their policy on the use of smart phones in the classroom.
- 10. Cheating, plagiarism, or dishonesty in any form will not be tolerated and are cause for dismissal from the program. See the Honor Code for definitions.

#### **Classroom Tardiness**

Roll will be taken the first 5 minutes of each class period.

Tardiness to program courses more than 3 times per semester will result in a grade deduction of one letter grade.

#### **Absences**

Students should note that although absences are allowed for illnesses and emergencies, excessive absences may result in termination from the program.

#### Attendance policy for all didactic (classroom) courses:

Attendance is expected at all meetings of all courses in which the student is registered.

During the *fall or spring semester*, an instructor may drop a student from class if the number of absences during a semester exceeds the number of times the class meets *in two weeks*, unless there are extenuating circumstances warranting special consideration by the instructor.

During the *summer session*, an instructor may drop a student from class if the number of absences during a semester exceeds the number of times the class meets in *one week*, unless there are extenuating circumstances warranting special consideration by the instructor.

The instructor's decision to drop a student for not meeting the attendance requirements of the class is **FINAL**.

#### **Instructor/Course Evaluations**

Each student will receive an email from the program director containing links to an online evaluation for every instructor/course at the end of each semester. Hospital clinical instructors will be evaluated by students each November. These evaluations are required by the program's accrediting body, the Joint Review Committee on Education in Radiologic Technology. Evaluations are anonymous, and students are encouraged to provide constructive feedback to instructors. Instructors are required to respond to feedback from students to the program director.

#### **Return to Class and Clinical**

#### Following Short-Term Recovery from Surgery, Illness, or Injury

Students who undergo surgery while enrolled in the program, or experience an illness or injury serious enough to require medical attention must adhere to the following guidelines:

- If a student undergoes surgery during the program for any reason, he or she must present a physician's clearance indicating that it is safe for the student to return to the classroom and **full duty** at the clinical site.
- If a student is being treated by a physician for an illness (particularly if the illness is contagious), he or she must present a physician's clearance indicating that it is safe for the student to return to the classroom and **full duty** at the clinical site.
- If a student has an injury that causes a temporary disability for which participating in clinical education could represent a danger to the patient AND/OR a danger to the student, he or she must present a physician's clearance indicating that it is safe for the student to return to the classroom and **full duty** at the clinical site. Students are not permitted to attend clinical with braces, splints, casts, or other orthopedic treatments that restrict range of motion of any body part.

Clearance must be submitted to the program director AND the hospital clinical instructor prior to returning to the clinical site. All clinical hours missed must be made up. Students facing **long term** recovery from surgery, illness, or injury should read the following section on Leave of Absence options.

#### **Leave of Absence**

Students who face recovery from long-term illness, injury, pregnancy, or personal/family crisis may be eligible for a Leave of Absence from the program. A Leave of Absence would allow the student to withdraw temporarily from the program and return following a designated period of time. All Leaves of Absence must be arranged with the program faculty with terms established individually, depending on the circumstances. Eligibility for Leave of Absence for medical emergencies requires a physician's note.

Leaves of absence from the entire program will be granted for a period of one year or less, requiring the student to re-enter the program at the start of the semester s/he left the program, the following year. Students requiring more than one year's leave of absence are required to reapply to the program. Students will be re-admitted on a space-available basis only. Exact placement will be determined on an individual basis.

Students who, for medical reasons are not able to attend clinical, but are able to attend class, may be eligible for a Special Leave of Absence from clinical only. **Special Clinical Leaves of Absence** are for a maximum of six weeks and are recommended for situations such as recovery from surgery or a physical injury in which attendance at lecture classes is possible but physical restrictions prohibit clinical training. **Under these circumstances, the student will attend didactic courses only and will be required to make up the missed clinical hours at the end of the program**. Only one clinical leave of absence will be granted during the course of a two-year program.

Return following any medical Leave of Absence requires a written physician's clearance. Students must be able to attend class and clinical with no physical restrictions imposed.

#### **Attendance and Testing Policy**

- 1. Any student who is absent on an exam or practical day must bring in a doctor's note or documentation of an emergency to be permitted to make up the exam or practical.
- 2. When an exam or practical is given in any course, students may not be absent in any other courses that day without a doctor's note or documentation of an emergency. Failure to do so will result in a deduction of a letter grade for the exam.
- 3. When an exam or practical is given in any course, students who are absent from clinical the day before are required to bring in a doctor's note or proof of an emergency to be permitted to take the exam or perform the practical.
- 4. All final exams will be comprehensive in content.
- 5. Students should not schedule any activities which conflict with finals week activities: i.e., plan out of town trips, schedule medical or dental appointments, plan family activities, or other events which will prevent attendance during any time in the program. **NO EXCEPTIONS.**
- 6. Final exams will be scheduled during finals week as determined by each instructor.
- 7. For summer courses, the last week of each course is considered finals week.
- 8. Mandatory attendance for all students is required. Failure to attend due to an unexcused absence for the scheduled exam will result in a zero "0" being assigned and averaged into the final grade for the course.
- 9. Students with an excused absence on a final exam day (documented medical emergency) will not be allowed to take the exam later, but instead will be assigned a grade based upon all grades earned to date for that course.
- 10. Students must attend the clinical hours in the clinical education centers during finals week. Failure to do so will amount to an <u>unexcused</u> absence that must be made up at the end of the two-year program or other arranged times mutually agreed upon by the Clinical Coordinator and hospital clinical instructor. It is the student's responsibility to complete the clinical make up agreement and obtain signatures at least 24 hours prior to making up time.

**Note:** An INCOMPLETE grade may be assigned until this work has been completed. ARRT exam results will not be released until this has been completed satisfactorily with the college. This may result in a delay in employment at the end of the program.

Most clinical records and assessments are entered into Trajecsys (the secure clinical electronic management website). A limited number of hard copy documents must be maintained by each student in a Portfolio, including the

- 1) ARRT Master Sign-off sheet
- 2) Repeat log
- 3) Copy of the dosimetry report

These documents are to be submitted by the due date at the end of each semester. Paper Repeat Logs must be given to the College Clinical Instructor during each visit. The CI will enter it into Trajecsys. Late work for clinical education will be assigned one letter grade lower than earned. This policy will be strictly followed.

## Admission, Retention, Disciplinary Action and Re-Admission

## **Admission**

Approximately 24 students will be selected for admission into the Radiologic Science Program each fall based upon the completion of all admission requirements and the selection process as described in the program brochure and college catalog.

#### **Retention**

To continue in the Radiologic Science Program, a student must meet the following academic and program standards.

- 1. All courses in the program must be successfully completed with a final grade percentage of **75 or higher**.
- 2. Any student whose grade falls below 75% at any point in the semester will receive a written warning and will be counseled by the course instructor.
- 3. A student who receives a final grade below 75% in any Radiologic Science course will receive a failing grade and will not be permitted to continue in the program.
- 4. A student may elect to withdraw from any program course at any time. However, a student **CAN NOT** remain in the program if she/he withdraws from a program course.
- 5. A student who withdraws from the program may request re-admission if she/he meets the program's readmission criteria.

When a student's performance is unsatisfactory, the instructor will counsel the student. The student is expected to recognize the level of his/her progress and to seek assistance if needed.

The instructor of each course will communicate the grading policy to students via the course syllabus. The course syllabus will include the weighting of quizzes, exams, projects, and activities. Determination of a grade by the instructor in the absence of mistake, incompetence, fraud, or bad faith shall be final. Once submitted, grades are not subject to change except by the instructor.

## Admission, Retention, Disciplinary Action and Re-Admission

#### **Disciplinary Action**

Disciplinary action may be imposed on a student for violation of program, clinical site, or college policies. Violations that may result in disciplinary action includes but is not limited to:

- o unprofessional conduct such as gross insubordination, moral improprieties during patient care activities, failure to observe patient confidentiality, etc.
- o jeopardizing the safety of a patient
- o violation of program policies
- o disruptive behavior
- o physical or verbal abuse of associates, patients, instructors, clinical staff etc.
- o theft or damage to property
- o dishonesty in didactic and clinical courses or procedures
- o other violations as listed in the college catalog or clinical policy manual

Disciplinary action may range from temporary exclusion from the classroom or clinical site to expulsion from the program. Students who are dismissed for disciplinary reasons are not eligible for re-entry into the program.

The program is required to report all suspensions and disciplinary actions to the ARRT. Upon review of all documents pertaining to the incident(s) and disciplinary actions, the ARRT may deny a program graduate's eligibility to sit for the Registry examination.

## Admission, Retention, Disciplinary Action and Re-Admission

#### **Program Re-admission**

Students who have withdrawn or were dropped from the program due to one or more of the following reasons may apply to re-enter the program. The application for re-admission must be made at least six weeks prior to the beginning of the semester that the student wishes to re-enter.

- Withdrawal due to health or personal reasons.
- o Failed to complete a program course including Clinical Experience.
- o Earned a failing grade in any program course.

Applications for re-entry will be accepted one time only. The application for re-admission must be made at least six weeks prior to the beginning of the semester that the student wishes to reenter. Re-admission will be considered at the discretion of the faculty and is on a <u>space available</u> basis only. Re-admission applications will be considered on a case-by-case basis. There is no guarantee of re-entry.

Eligibility for Re-admission consists of:

- 1. Completion of the Application for Re-admission to the program.
- 2. Submission of the application at least six weeks prior to the semester the student desires re-entry.
- 3. Verification of completed contractual agreement (if applicable).
- 4. A recent medical exam with updated proof of immunity to communicable diseases.
- 5. Updated background check and drug screen with "cleared" status.
- 6. Current CPR certification.
- 7. Academic standing of 2.5 GPA for all completed Radiologic Science courses.

Meeting the eligibility requirements does not guarantee acceptance for re-entry. Acceptance for re-entry is at the discretion of the faculty. Upon receipt of the re-admission application and all supporting documents, faculty will review documents and make a recommendation to the program director to accept the student for re-entry, accept contingent on successful clinical interview, or deny re-entry. The student should be advised that if interviewed, the clinical supervisor has the option to contact the supervisor of the previous clinical assignment for a reference. The decision of the faculty to accept or deny re-entry students is final. If readmission is granted, the student will be notified by mail prior to the beginning of the semester in which she/he wishes re-entry.

A student who withdrew or was dropped due to unsatisfactory performance at a clinical facility is not eligible for re-entry. Any unsatisfactory grade or performance of the re-admitted student will result in termination from the program with denial of further re-admission.

Students are required to take both the didactic (classroom) and clinical components of the course during the re-admission semester in order to remain in the program.

#### **Radiation Safety Officer**

The designated Radiation Safety Officer for the Merritt College Radiologic Science Program is the Clinical Coordinator, Jerry Hollister, BA, RT(R)(BD). The duties of the Radiation Safety Officer are to:

- Assure that all Radiation Safety Policies are being followed on campus and at the clinical sites
- Administer the college dosimetry program
- Review dosimetry reports, assure that dosimetry reports are communicated to students, and to investigate any reading in excess of 60 mRem in any quarterly reporting period

The alternate Radiation Safety Officer is the Program Director, Jacqueline Custard Ed.D., RT(R)(M). The alternate RSO is to fulfill the duties in the event that the designated RSO is unable to do so.

#### **Radiation Safety**

A student is required to always exercise sound radiation protection practices. At no time may a student participate in a procedure using unsafe protection practices. Unsafe radiation protection practices are grounds for dismissal from the program. This includes, but is not limited to:

- 1. Failure to properly identify a patient prior to beginning an exam, and/or failure to take a complete patient history, resulting in exposures to wrong patient or wrong part constitute unsafe behavior and are grounds for dismissal.
- 2. Taking exposures, intentionally or unintentionally, on a student or technologist in the energized lab or hospital x-ray exam room.
- 3. Taking exposures on any member of the general public unless expressly ordered by a medical practitioner.
- 4. Attempting any procedure under indirect supervision unless competency has been achieved.
- 5. Repeating exposures without the direct supervision of a California certified radiologic technologist with at least two years of post-certification experience.
- 6. Taking exposures with the exam room door open or with unnecessary persons in the room.
- 7. Taking exposures on an unshielded patient, regardless of reproductive potential. **Always** shield **every** patient unless the shield interferes with demonstration of the clinical area of interest.

## **Student Fluoroscopy Policy**

As cited in Title 17 CCR, "A student currently enrolled in an approved Diagnostic Radiologic Technology School and Fluoroscopy Permit School, 'under the supervision of an instructor who is a certified radiologic technologist or a certified supervisor or operator,' may assist/perform fluoroscopy pursuant to California Health and Safety Code, section 106975."

Students may not participate in any fluoroscopy procedure until they have completed the Fluoroscopy Orientation and Set-up Competency for each fluoroscopy unit at the clinical site.

Students may not participate in Quality Control testing of lead aprons under fluoroscopy. Students' annual radiation dose is limited; therefore, any dose they receive should be sustained during patient exams only.

#### **Radiation Monitoring**

While at the clinical education site:

- The student shall wear a personnel radiation monitoring device (badge) at all times. The badge shall be worn at the collar on the front of the body, outside the lead apron when one is worn.
- The student will be provided with a radiation monitoring badge by the college Radiation Safety Officer in the first semester of the program.
- Any loss, damage, or misuse of radiation monitoring badges must be reported to the clinical supervisor and Radiation Safety Officer immediately. Students who lose, damage, misuse, or refuse to submit monitoring badges are subject to disciplinary action, including probation or dismissal from the program. Delay in reporting will result in the student repeating any clinical hours worked between knowledge of loss or damage and reporting of such loss or damage.
- Lost or damaged radiation monitoring badges must be reported to the Radiation Safety Officer and replaced as soon as possible. Until a replacement badge is received, the student may not participate in fluoroscopy or C-arm procedures. The student may receive a grade deduction for repeated loss of a monitoring badge.
- The student will be provided with a copy of the latest radiation badge report by the Radiation Safety Officer within 10 days of receipt.
- Badges are to be removed if the student is undergoing a procedure as a patient.
- Protect the badge from exposure to radiation, sunlight, excessive heat, and moisture during the time it is not being worn. Do NOT launder your badge with your uniform. When transporting badge from clinical site to home or the college, place it in a bookbag or purse, do not leave it in your car.
- Students may request a copy of their final exposure report upon exiting or graduation from the program. The Radiation Safety Officer recommends that graduates provide the final report to their employer so that the lifetime dose on future reports reflects exposure received while the student participated in clinical education while in the program.

#### **Radiation Monitoring**

While in the energized lab:

- The student shall wear their personalized monitoring badge.
- Pocket Dosimeters should only be used if a personalized monitoring badge has been lost or damaged. If using a pocket dosimeter, the student shall record the appropriate data on the monitoring form (provided by instructor) at the beginning and end of the laboratory session and secure the instructor's initials on the form. If any reading is noted, a copy of the record shall be placed with the monitoring badge reading reports.
- Never make an exposure on an energized machine unless an instructor is present.
- Energized stations will remain locked when an instructor is not present.
- Sign will be placed on the outside of the door reading "Exposure Lab in Process, Do Not Enter" in addition to the permanent caution signs when the energized tubes are in use.
- Non-energized machines (incapable of producing ionizing radiation) are clearly labeled as such. If a label is not present, assume the machine is capable of producing x-rays.

Radiation safety is a serious obligation and should never be taken lightly. The program will adhere to the NCRP recommendations from Report 91, which states that radiation exposure throughout a student's educational experience should not exceed 100 mRem annually (1mSv annually or 200 mRem for the total program).

Monitoring will be documented by a monitoring badge processed on a quarterly basis. Any reading in excess of 0.6 mSv (60 mRem) in one quarter will be investigated. The investigation may consist of the Radiation Safety Officer interviewing the student regarding the handling of their radiation monitoring badge, safety practices at the clinical site, and checking the student's patient exam records for lengthy fluoroscopy procedures. When indicated, the RSO will visit the clinical site to ascertain whether unsafe conditions resulted in the exposure reading. The RSO will assure that any unsafe practices or conditions are corrected before allowing students to return to the clinical site. The student will also be counseled regarding correct radiation safety practices.

#### **Radiation Safety with Energized Tubes**

Students shall remain behind the control panel during all radiography exposures. Students are never permitted to hold patients during radiography exposures.

During fluoroscopy, students shall wear shielding apparel if in the room while the tube is energized. Students shall remain as far from the tube as possible until their assistance with the patient is needed. If they are asked to frequently adjust patient positioning or assist with fluoroscopy, they should stand behind the radiologist or in front of the lead curtain for as much of the time as possible. During fluoroscopy, the radiation monitoring badge must be worn on the outside of the apron at collar level.

## **Safe Practices with Magnetic Resonance Imaging**

Students may not enter the MRI suite or participate in any MRI procedure prior to completing MRI safety instruction on the following topics:

- 1) Magnet Safety Preventing Projectile Injuries
- 2) Pregnant tech/pregnant patient in MRI
- 3) Emergency procedures in the MRI Suite
- 4) Magnet Safety Preventing Patient Injuries from Metal Implants
- 5) MRI Safety Preventing Injuries from RF Coils

Training will take place in the RADSC 1B course, prior to students beginning clinical education in the RADSC 1C course.

Students must be screened prior to participating in MRI procedures using the form found in the Appendix of this handbook. The MRI screening form must be completed by the students and reviewed and approved by the MRI technologist prior to the student's entrance into the MRI suite.

## **Pregnancy Policy**

The Merritt College Radiologic Science Program faculty do not make recommendations for or against a person's reproductive rights. However, participation in the program is extremely challenging (physically, mentally, and intellectually), as well as requiring at least a 40 hour per week time commitment. Due to the stress associated with the program and the possible negligible radiation risk associated with exposure to an unborn child during clinical education, the faculty suggests to all female students of childbearing capability that they make an effort to avoid pregnancy while enrolled in the Associate Degree Radiography Program. This suggestion is based on the knowledge that:

"...exposure to any level of radiation is assumed to carry with it a certain amount of risk. In the absence of scientific certainty regarding the relationship between low dose exposure and health effects, and as a conservative assumption for radiation protection purposes, the scientific community generally assumes that any exposure to ionizing radiation may cause undesirable biological effects and that the likelihood of these effects increases as the dose increases. At the occupation dose limit for the whole body of 5 rem (50 mSv) per year, the risk is believed to be very low."\*

"The NRC has reviewed the available scientific literature and has concluded that the 0.5 rem (5 mSv) limit specified in 10 CFR 20.1208 provides an adequate margin of protection for the embryo/fetus."\*

If a student becomes pregnant while enrolled in the program:

- a) She has the right to declare her pregnancy, in writing, to the program faculty and assigned clinical personnel, **or not**; as stated in 10 CFR Parts 19 and 20.
- b) A pregnant student who chooses to declare her pregnancy will be provided with a copy of U.S. Nuclear Regulatory Commission Regulatory Guide 8.13. The student is expected to read through the guide carefully, especially the sections regarding dose limits for the pregnant worker and potential effects resulting from exposure of the embryo/fetus to radiation and non-radiation risks, before submitting her written declaration of pregnancy.
- c) The declared pregnant student will be counseled by program faculty regarding radiation risks and radiation protection principles. These instructions will be provided both orally and in writing and comprehension will be tested by the administration of a simple written test covering the material addressed in the U. S. Nuclear Regulatory Commission Regulatory Guide 8.13.
- d) The declared pregnant student will be issued a second monitoring badge to be worn low on the abdomen, under the apron, for the purpose of monitoring the fetal dose during pregnancy. Although the risks to the unborn child are negligible under normal working conditions, the NCR has recommended to "ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv). Section 20.1208 also requires licensees to make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman."\*
- e) The declared pregnant student, clinical supervisors, and program faculty will work together to decide the best method for minimizing radiation exposure to the fetus. The student has the right to continue in the program without modification of the clinical schedule if desired.

However, program faculty will work with the clinical supervisor to modify the schedule if the student desires, so that exposure is minimized to the fullest extent possible. Some methods that might be used include reducing the time spent in radiation areas, wearing shielding over the abdominal area, and keeping an extra distance from radiation sources when possible. A health physicist will be able to estimate the probable dose to the unborn child during the normal nine-month pregnancy period and to inform the student of the amount. If the predicted dose exceeds 0.5 rem (5 mSv), the student, clinical and program staff will work out schedules or procedures to limit the dose to the 0.5 rem (5 mSv) recommended limit. If a schedule change is deemed necessary to accomplish this goal, the student must understand that the usual two-year length of time required for program completion may need to be extended to ensure completion of all clinical objectives.

- f) "It is important that the student inform the program faculty, in writing, of her condition as soon as she realizes she is pregnant if the dose to the unborn child is to be minimized."\*
- g) Declared pregnant students are not required to provide program officials with a physician's note. However, a declared pregnant student who feels that the physical demands of clinical education are too difficult at any time in the pregnancy may request a clinical leave of absence. Upon return to clinical education, the time missed must be made up within one year (as per program policy).
- h) Pregnant students may request a leave of absence from the program for the duration of the pregnancy, if desired. Students who elect to take the leave of absence rather than continuing in the program are expected to return within one year (as per program policy). Students who do not re-enter the program within one year must reapply if and when they wish to re-enter the program and will be individually assessed for clinical/didactic placement.
- i) Students who have declared a pregnancy may "undeclare," in writing, their pregnancy at any time; or after delivery. Pregnancy "undeclaration" must be given in writing to the program director.
- j) A pregnant student who chooses not to declare her pregnancy will be treated as any other student, will not be given a fetal dose monitoring badge, or be given the option of clinical schedule changes as a result of the pregnancy.

<sup>\*</sup>from the U.S. Nuclear Regulatory Commission Regulatory Guide 8.13, June 1999.

#### **Standard Precautions**

Radiologic Science students must adhere to recognized Standard Precautions procedures. The following are basic guidelines for body substance precaution.

- 1. Handle all blood and other body substances as potentially infectious.
- 2. Gel or wash hands before and after all patient and specimen contact.
- 3. Gel or wash hands after all activities that may have contaminated hands such as using the restroom, handling specimens etc.
- 4. Wear gloves for potential contact with blood and body substances and gel or wash hands after removal of gloves.
- 5. Wear gloves when splash with blood or body substances is anticipated.
- 6. Wear a mask for Tuberculosis (TB) or other respiratory organisms.
- 7. Wear protective eyewear and mask if splatter with body substances is anticipated.
- 8. Wear gloves when starting an IV or removing an IV from a patient.
- 9. Deploy safety needle device immediately upon removal from patient. Place used syringes, needles, or other "sharps" in the proper marked container; DO NOT recap used needles.
- 10. Treat all linen as soiled and infectious.
- 11. Handle all specimens as infectious.
- 12. Know the location and use of resuscitation equipment.

These are only general guidelines for body substance precautions. Refer to your clinical site policy for specific policies and protocols in effect at the site.

## **Venipuncture and IV Contrast Policy**

- Students are permitted to assist with the injection of contrast following venipuncture by a qualified radiologic technologist, nurse, or radiologist under direct supervision after proper training and following instruction in Patient Care II and Positioning II.
- Students are allowed to perform venipuncture for contrast administration on human subjects only after successfully completing 10 venipunctures on the model arm in the Patient Care II class; and only with written permission by the radiology department manager. Students shall observe all department policies regarding venipuncture for contrast media.
- Students must be <u>directly supervised</u> by a physician, nurse, or IV certified technologist until successful completion of 10 venipunctures on human subjects and the issuance of an Advanced Level IV Certificate by Merritt College Radiologic Science Program.
- Students may perform venipuncture on adult patients only (over 18 years old). No infants or children.
- Students are allowed only two attempts per patient (or one, if that is department policy). After two unsuccessful attempts, other qualified personnel should start the IV.
- Students shall not, under any circumstances, inject iodine contrast into a central venous access line.
- Students shall not perform venipuncture for autoinjection unless s/he remains in the room, monitoring the injection site visually and by palpation throughout the course of the entire injection. If the scan must begin before the injection is complete, the student is not to perform venipuncture for the exam. In case of extravasation, department protocol must be observed.
- Students shall not perform venipuncture with any device that does not have "engineered sharps protection" (shielded or retractable needle).
- Students shall not remove any "sharp" from a venipuncture site that does not have an "engineered sharps protection" device (needle shield).

## **Injury and Exposure Policy**

For INJURIES sustained during your clinical training at the hospital (<u>except for needle sticks</u>, TB, and body fluid exposures).

#### **Follow these steps:**

If it is an emergency, go to your hospital clinical site Emergency Department. If it is not an emergency, call the Company Nurse Injury Hotline at 1-888-770-0929. Give them the Group Code ASCIP and you will be directed to access appropriate medical treatment. Do this even if the injury seems to be insignificant.

Give this address to the billing department at the medical facility for billing for your care:

Peralta Community College District Risk Management Department ATTN: Carrie Burdick 333 E. 8<sup>th</sup> St. Oakland, CA 94606 Risk Management (peralta.edu)

This will ensure proper billing to the insurance company for the Worker's Compensation injury and will prevent you from being personally responsible for the bill.

Fill out the Employee's Claim for Worker's Compensation Benefits (DWC1). This document is found in the back section of your clinical portfolio or student handbook. This needs to be completed within 24 hours of the injury. An instructor needs to also fill out the Supervisor's Report of Employee Injury form, located in the back section of your clinical portfolio or student handbook.

Scan the claim forms IMMEDIATELY and email them as an attachment to the program director <a href="mailto:jcustard@peralta.edu">jcustard@peralta.edu</a>. Keep the original and bring it to class on the next scheduled class day.

## **Injury and Exposure Policy**

# <u>For NEEDLE STICKS/POSSIBLE TB exposure/body fluid exposures</u> to mucous membranes or non-intact skin.

#### **Follow these steps:**

Notify the department manager of the exposure. The patient should be detained for possible testing. If the patient is an outpatient, s/he should not be allowed to leave the department until you have reported your injury to the department manager and the Infection Control supervisor has been notified. Follow any instructions given to you regarding hospital protocol for exposures to pathogens. Get contact information for the Radiology department manager and the Infection Control supervisor. Bring this information with you to the treatment facility in case they need to reach clinical affiliate personnel.

Call the Company Nurse Injury Hotline at 1-888-770-0929. Give them the Group Code ASCIP and you will be directed to access appropriate medical treatment.

Give this address to the billing department of the medical facility for billing for your care:

Peralta Community College District Risk Management Department ATTN: Carrie Burdick 333E. 8<sup>th</sup> St. Oakland, CA 94606 Risk Management (peralta.edu)

This will ensure proper billing to the insurance company for the immediate and follow-up treatment and testing and will prevent you from being personally responsible for the bill. Treatment should include testing for immunity to hepatitis and a baseline HIV test. The source patient may also be tested by the hospital for Hepatitis B and HIV.

Fill out the Employee's Claim for Worker's Compensation Benefits (DWC1). This document is found in the back section of your clinical portfolio. This needs to be completed within 24 hours of the injury. In addition, fill out the Peralta Community College Exposure Incident Report. This form is also located in the back section of your clinical portfolio. An instructor needs to also fill out the Supervisor's Report of Employee Injury form, located in the back section of your clinical portfolio or student handbook.

Scan and e-mail the report immediately to the program director <u>jcustard@peralta.edu</u>. Keep the originals and bring them both to the program director on the next scheduled class day.

## **Injury and Exposure Policy**

# <u>For NEEDLE STICKS/POSSIBLE TB exposure/body fluid exposures</u> to mucous membranes or non-intact skin.

#### Note:

- For needlestick injuries, you will need to get a baseline HIV test.
- Your baseline HIV test will indicate your **pre-exposure** status.
- It should be done immediately following the exposure (within a couple of hours).
- You will need to retest in six weeks, three months, six months and one year following the
  exposure (or at intervals recommended by the physician at the facility to which you were
  referred).
- When you test, tell the physician that you need to have your test results in writing.
  - o If all are negative, you do not need to do anything else. If your baseline test is **positive**, this will indicate that you were positive before your hospital exposure and Workers Compensation will not pay for any services.
  - o If your baseline test is **negative** and subsequent tests are positive (if you have not engaged in any personal HIV exposure risks), Worker's Compensation is responsible for covering health services related to HIV infection and AIDS.

## Clinical Performance, Due Process, And Student Grievance Procedure

The Radiologic Science Program adheres to the Merritt College Student Grievance and Due Process Policy except in the case of dismissal for clinical performance. The college clinical laboratory instructor(s) has/have the responsibility and authority to evaluate, assess and grade the academic performance of a student consistent with clinical standards defined in the program.

The instructor has the responsibility and authority to remove a student from the clinical laboratory and dismiss a student from the Program for cause. For purposes of this policy, "cause" is defined as where, in the instructor's professional judgement, the instructor has determined that the student's clinical performance falls below the acceptable standard of care for the patient as outlined in the program objectives and evaluation requirements and poses a substantial danger to the health and welfare of the patient.

In the clinical setting, the student practices under either direct or indirect supervision by the clinical instructor, depending on the student's competency status. The student is directly responsible to the clinical instructor and assigned college instructor. Instructors are required to adhere to and enforce requirements of the program, the college, the hospital, the state, and federal regulations.

Unsafe medical care is any action or inaction on the student's part that threatens the physical or emotional well-being of a patient or other person. The college instructor has the unquestioned authority to remove a student from the clinical setting whenever that student's behavior, performance, or condition threatens another person. The program may suspend the student from further clinical education until a full investigation is conducted and a decision has been made regarding disciplinary action. The student will be notified of disciplinary action as soon as possible at a meeting on campus with program faculty and whenever possible, the Deans or Vice Presidents of Instruction and Student Services.

Students who exhibit behaviors that may be due to impairment by alcohol, drugs or emotional illness may be dismissed from the clinical setting for unsafe behavior.

Students who violate safe radiation protection practices may be dismissed from the clinical setting for unsafe behavior. Unsafe behavior will be documented on the "Student Unsafe Performance Report" located in the form section of this handbook. Unsafe performance will be reported to authorities appropriate to the specific circumstances of the incident.

An instructor may immediately remove a student under this policy where the student's performance poses an immediate and substantial danger to the health and welfare of the patient and where previous written notice is impracticable, in that situation, and where practicable, the instructor should provide the student with an oral explanation of the reasons for the removal and complete the written notice of disciplinary action as soon as possible following a full investigation of the incident, preferably within 3 business days.

A college instructor, hospital clinical instructor, or manager may suspend or permanently remove a student from clinical education for unsafe behavior, unprofessional behavior, disruptive behavior, or any behavior in conflict with the policies or mission of the hospital. In the case of suspension, hospital personnel must notify the program director as soon as possible by phone (510-436-2427) or e-mail (jcustard@peralta.edu). A written account of the incident must be e-mailed as soon as reasonably possible. Department faculty will determine appropriate disciplinary action in consideration of the incident. Faculty will arrange to meet with the student within 3 business days to notify him/her of the action. The student may not return to clinical until he/she has met with faculty.

In the case where a student is removed from a clinical site for performance or behavioral issues, faculty shall review all documentation of incidents/performance evaluations leading to the removal to decide the best course of action. Faculty may elect to return the student to the clinical site on probation with a performance improvement plan, transfer the student to a different clinical site on probation with a performance improvement plan, or dismiss the student from the program. If the student is being considered for transfer, the clinical instructor and/or manager of the new site have a right to know the reason the student was removed from the previous site and to review any relevant incident reports or performance evaluations, as well as to request an interview with the student if desired. The clinical instructor/manager has the right to allow or refuse the transfer. If a transfer site cannot be identified among existing clinical affiliates, the student will be dismissed from the program.

In the situation where the instructor concludes that cause exists for removal and dismissal from the program, where prior counseling has not led to improvement in the student's clinical performance, and where there is substantial but not immediate danger to the patient, the instructor may remove the student upon providing the student with written notice of intent to dismiss.

The written notice of intent to dismiss shall set forth the facts giving rise to the decision to remove the student, the reasons for the dismissal and summarize any prior counseling given to the student. The notice shall be hand delivered to the student or mailed by certified mail, return receipt requested.

Upon receipt of the notice of intent to dismiss, the student may request an immediate hearing under Section 11 of the procedures of this policy, if such request is made in writing three days of receipt of the notice. Alternatively, the student may elect to appeal the removal and intent to dismiss through the District's "Student Academic Grievance Hearing Procedure", as provided in Section 11 of the procedures of this policy. Students who would like to appeal a dismissal decision should contact either the Vice President of Student Services or the Vice President of Instruction.

A student who requests an immediate hearing under Section 11 of this procedure will be allowed to attend all classes except clinical laboratory classes until a finding is made by the Allied Health Student Grievance Committee. If the Committee's findings recommend that the instructor's decision be upheld and this finding is accepted by the Vice President of Student Services, the student may continue the appeal procedures under this Policy but shall not be allowed to attend further classes. If the Committee finds that the instructor's decision was without cause as defined above or based on mistake, fraud, bad faith or incompetence, and this finding is accepted

by the Vice President of Student Services, the student may continue to attend classes except for clinical laboratory classes, pending any appeal made by the instructor.

A student who successfully appeals the removal and dismissal decision shall be re-instated into the program. The college shall provide the student with assistance in making up any clinical education lost during the appeal process.

#### Procedure for Allied Health Student Appeal for Dismissal for Clinical Performance

#### I. Definitions

- A. "Days" shall mean working days of the District.
- B. Where the procedure refers to active participation by a District administrator, such as the Vice President of Student Services, or the Vice President of Instruction, that reference also includes any person appointed as designee.
- C. "Cause" is defined in Board policy 4.44.
- D. "Mistake", "fraud", "bad faith", or "incompetence" shall be interpreted under Education Code Section 76224.

#### II. Allied Health Student Grievance Hearing

#### A. Student Rights

A student who has been removed by an instructor for cause under this policy has the right to an Allied Health Student Grievance Hearing under the following conditions:

- 1. The student requests an immediate hearing within three days of receipt of the notice of intent to dismiss.
- 2. The request is submitted in writing to the Vice President of Student Services or the Vice President of Instruction.
- 3. The student submits an approved complaint form as described in the District's "Student Academic Grievance Hearing Procedure", section B.2 within business days of receipt of the notice of intent to dismiss.

#### B. Hearing

- 1. The immediate hearing will be scheduled within seven days of receipt of the complaint and request for an immediate hearing. The student and instructor shall be notified no less than three days prior to the hearing of the date scheduled for the hearing.
- 2. The Allied Health Student Grievance Hearing Committee shall be composed of the following:
  - a. The Vice President of Instruction, who shall chair the Committee
  - b. One faculty member from the program who is not a party to the grievance or another faculty member from a related health program may be substituted if necessary (appointed jointly by the PFT and the Academic Senate).
  - c. One faculty member from a related health program not involved in the grievance (appointed jointly by the PFT and the Academic Senate).
  - d. One administrator of the College who is not the Vice President of Student Services (appointed by the College President).

- e. One student of a program not involved in the grievance (appointed by the College President).
- C. The committee shall conduct the hearing and make a recommendation to the Vice President of Student Services based on the evidence and testimony given during the hearing. At least three members of the Committee must agree on a recommendation to the college President. The Committee must issue a written report, including a summary of the evidence, summary of the positions of the parties, findings of fact, conclusions on whether the dismissal was for cause or the instructor's evaluation was based on fraud, mistake, bad faith or incompetence. The committee shall make a recommendation to the college President on whether the student's dismissal should be reversed or upheld. If applicable, the members of the committee who disagree with the majority report may attach a minority report to the final written report. The Committee's written report shall be issued within two days after the hearing is completed and the evidence is submitted by the parties.

#### D. College President

The college president may accept, reject or return the recommendations to the Committee for further action. The college President shall notify the student, instructor and committee of his/her decision based upon the findings of fact of the committee.

#### E. Appeal of the Decision

The "Appeal Process" described in the "Student Academic Grievance Hearing Procedure" shall be used to appeal the decision by either the Vice President of Student Services, or the Vice President of Instruction, as appropriate and applicable.

#### Student Academic Grievance Hearing Procedure

#### A. Student Rights

A student who has been removed from the clinical internship class for cause under this Policy may alternatively file a formal grievance alleging mistake, fraud, bad faith or incompetence in the evaluation of the student's performance under the District's "Student Academic Grievance Hearing Procedure". Use of this procedure does not entitle the student to an immediate hearing as described above.

#### B. Procedure

The provisions of the "Student Academic Grievance Hearing Procedure" shall apply except that the "College Grievance Committee" shall be substituted by the Allied Health Student Grievance Committee as described above.

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## MERRITT COLLEGE Radiologic Science Program

#### MRI Student Screening

Facility Name:		_	
Address:		- -	
City, State, Zip:		_	
Student Name:		Date:	
Patient Accession Number:		Exam Date:	
	Please Print		

#### WARNING: THE MRI SYSTEM MAGNET IS ALWAYS ON

The MRI system has a very strong magnetic field that may be hazardous to persons entering the exam room if they have certain metallic, electronic, magnetic, or mechanical implants, devices or objects. Therefore, ALL visitors are required to fill out this form BEFORE entering the MRI exam room.

Remove all metallic objects before entering the MRI exam room, including:

- Hearing aids
- Cell phone and pagers
- Keys
- Eyeglasses
- Hair pins and barrettes
- Jewelry (including body piercing jewelry)
- Watch
- Safety pins
- Money clip and coins
- Credit cards, bank cards and magnetic strip cards
- Pens
- Pocket knife
- Nail clipper
- Steel-toed boots/shoes
- Tools
- All loose metallic objects

(Continue to next page)

Check any that you have below:

	Yes	No		Yes	No
Aneurysm clip(s)			Artificial or prosthetic limb		
Cardiac Pacemaker			Any type of prosthesis or implant		
Implanted cardioverter			Any metallic fragment or foreign body		
defibrillator (ICD)					
Electronic implant or device			Any internal or external metallic object		
Magnetically-activated			Body piercing jewelry		
implant or device					
Neurostimulation system			Pregnant		
Spinal cord stimulator			Hearing Aid		
Cochlear, otologic or ear			History of working with sheet metals		
implant					
Insulin or infusion pump			Other implant:		
Implanted drug infusion			Other device:		
device					

Consult the MRI Technologist if you have any questions or concerns BEFORE you enter the exam room!

## STUDENT ATTESTATION

I attest that the information on this form is correct to the best of my knowledge. I have read and understand the contents of this form and had the opportunity to ask questions regarding my safety in the MRI exam room.

Student Signature:	Date:
TECHNOLOGIST USE Screening performed by (print name)	
Technologist Signature:	

## Radiologic Science Program

Student Documentation of Counseling - Spring Semester of the First Year

Student's Name:			
Date of Counseling Appointment:			
Counselor's Name:			
Upon examination of this student's transcripts from all colleges attended, I have determined that:			
(circle all that apply)			
<ul> <li>a. This student has earned a prior degree from an accredited institution (Associate, Bachelors, Masters, Doctorate).</li> <li>Completion date if applicable: Please fill in</li></ul>			
b. This student has satisfied the general education requirements for Merritt College.			
c. This student has not satisfied the general education requirements for Merritt College. If "c" was circled, which general education requirements have not been satisfied?			
Based on my review of this student's transcripts I would recommend that this student submit in the summer semester of the graduation year			
(circle one or both)			
a. A petition for certificate of completion.			
b. A petition for the Associate degree in Radiologic Science.			
I have informed the student that either the petition for the Associate degree or the petition for the certificate of completion must be filed to graduate. I have discussed this process with the student.			
Counselor signature Date			
Please give this form to the student to return to Dr. Jacqueline Custard <u>jcustard@peralta.edu</u>			
Thank you for your assistance with this matter!			

## **Radiologic Science Program**

Student Documentation of Counseling - Spring Semester of the Second Year

Student's Name:	
Date of Counseling Appointme	nt:
Counselor's Name:	
Upon examination of this stude	nt's transcripts from all colleges attended, I have determined that:
	(circle all that apply)
Bachelors, Masters, Do	a prior degree from an accredited institution (Associate, ctorate). icable: Please fill in
b. This student has satisfie	d the general education requirements for Merritt College.
c. This student has not sat	sfied the general education requirements from Merritt College.
if "c" is circled, which	general education requirement have not been satisfied?
Based on my review of this stu the summer semester of the gra	•
	(circle one or both)
a. A petition for certificate	of completion.
b. A petition for the Associ	iate degree in Radiologic Science
· ·	t either the petition for the associate degree or the petition for the be filed by the deadline for summer semester graduation to
I have discussed this process w	ith the student.
The deadline date for submittir	g a petition for summer is
Counselor signature	Date
Please give this form to the stu	dent to return to Dr. Jacqueline Custard jcustard@peralta.edu
Thank you for your assistance	with this matter!

#### **Radiologic Science Program**

**Student Learning** 

Re	equest for Approval of Indepen	dent Activity
Student's Name		
Student	Learning Documentation of In	dependent Activity
Student's Name:		
Date of Activity:		
Phone Number of Agency of	or Contact Person:	
I certify that the above-named stude	nt has completedhours	of unpaid work with our agency/organization.
Printed Name	Signature	Date

#### Student Learning Reflection Paper Assignment

After the service-learning activity, write a short paper one-to-two-page double spaced paper summarizing the event you participated in. Include a description of the activity and your role in the event. A list of the skills you practiced at the event should be included. For example, EKG or blood pressure monitoring, patient education, communication skills, bone density, etc. List any new skills you learned by participating in the event. List new ideas to think about because of your participation in the event. Give a description of any encounters with the public, event organizers or participants that struck you as particularly interesting or meaningful. Explain how you helped your community by participating in this event and what you received by participating in this event.

## **Radiologic Science Program**

Application for Readmission to the Program

Date:	_
Student's Name:	_Student ID Number:
Current Address:	
Phone Number:	
E-Mail Address:	
Previous Clinical Site:	Last Semester Attended:
Reason for withdrawal or dismissal from the program: _	
Briefly describe why you wish to reenter the Merritt College Radio	logic Science Program in the space provided:

Provide documentation of any of the following.

- 1. List relevant coursework completed and attach all transcripts.
- 2. List volunteer work completed in the interim and attach letter of verification from supervisor listing duties performed and hours completed.
- 3. List any type of self-improvement activities that you wish to have considered and attach proof of career counseling, study skills, workshops, seminars, therapeutic counseling etc.
- 4. List receipt of any financial assistance you wish to disclose that will allow you to work fewer hours and provide additional study time and attach proof of receipt for scholarships, grants, government assistance, etc.

Note: You are not required to provide documentation of any activity that you do not wish to share with the radiologic science faculty, however it will not be considered in the evaluation of your request for readmission.

## **Radiologic Science Program**

## Request for Hospital Transfer Form

*Instructions:* Your request will be considered by the faculty, clinical coordinator and clinical instructor at your "home" clinical site and requested clinical site.

Students may transfer only upon approval by the college and both clinical sites.

Please complete the following form and have it signed by your "home" clinical instructor or supervisor and return it to the college instructor.

Student's Name:		Date:	
Home Clinical Site:			
Temporary Clinical Site:			
List desired objective (s) for the re-	quested temporary rotation	on	
1.			
2.			
3.			
Request type:	Temporary	Permanen	ıt
For temporary transfers, please indicate startand end dates			
Clinical Instructor			
Name	Signature	Date	
College/Clinical Instructor			
Name	Signature	Date	
	_		
Approved	Denied.		

## **Radiologic Science Program**

Student Unsafe Performance Report

Date:	Time:	
Student's Name:	Clinical Site:	
Reported by:	Role/title:	
Instructions: Describe the unsafe performance statement of the problem, "B" is pertinent and be considerations of options (what you found/think	orief information related to the situation, "A	<b>A</b> " is analysis and
Situation:		
Background:		
Assessment:		
Recommendation:		
recommendation.		
Additional corrective actions taken for patient c	are/exam taken at the clinical site:	
Clinical Instructor Signature		Date
Department Manager Signature		Date
Disciplinary Action Taken by College after Cor	nference Signature	Date

## **Radiologic Science Program**

Acknowledgement of Radiation Risk During Pregnancy

Ι	acknowledge that I have received counseling
fromresponsibilities during my pregnancy.	regarding my clinical educational
way adversely affect my pregnancy. The into demonstrate that the additional risk during occupational groups. I further understand that and provided with a second radiation monitorial control of the con	small probability that my student training will in any aformation listed below has been made available to me and pregnancy is much less than that for most hat, although I may be assigned to low exposure duties tor, these are simply added precautions and do not in a department is especially hazardous during my
"Instruction concerning prenatal radiation	n exposure,
NRC Regulatory Guide 8:13, Washington I	DC; June 1999, US Nuclear Regulatory Commission."
Student Signature	Date
Program Director/College Instructor	Date

## **Radiologic Science Program**

Pregnancy Declaration/Declaration Notification

## **Pregnancy Declaration**

This document should serve as official declaration to the faculty of the Merritt College Radiologic Science Program that I am pregnant.

I agree to read:

- 1) The Pregnancy Policy
- 2) The US Nuclear Regulatory Commission Regulatory Guide 8.13
- 3) Submit to counseling regarding radiation risk doing pregnancy

I agree to the terms for continuance stated in the pregnancy policy regarding monthly physical exams by my personal physician during the first eight months and weekly physical exams by my personal physician during the final month of pregnancy.

I understand that I will be allowed to continue in the program only with written documentation from my physician permitting me to attend class and clinical training with no restrictions.

My expected date of deliv	ery 1s:	
Physician Name and addre	ess:	
Student Name	Student Signature	Date
Program Director Signatur	re	Date
	Pregnancy Undeclaration	
	as official undeclaration of pregnancy to F um. As of the date below, I have undeclared	_
Student Name	Student Signature	Date
Program Director Signatur	re	Date

## **Merritt College Radiologic Science Program**

Receipt	of	Student	Handl	bool	k
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I have received a copy of the *Student Handbook*. It is my understanding that if I have any questions regarding the content of this document, I may contact any Radiologic Science Program faculty member for further clarification. I understand that I am responsible for the information contained in this document. I also understand that I will be expected to abide by the policies contained in this document and subsequent versions and revisions supplied to me throughout my didactic and clinical education.

Date	
	Date