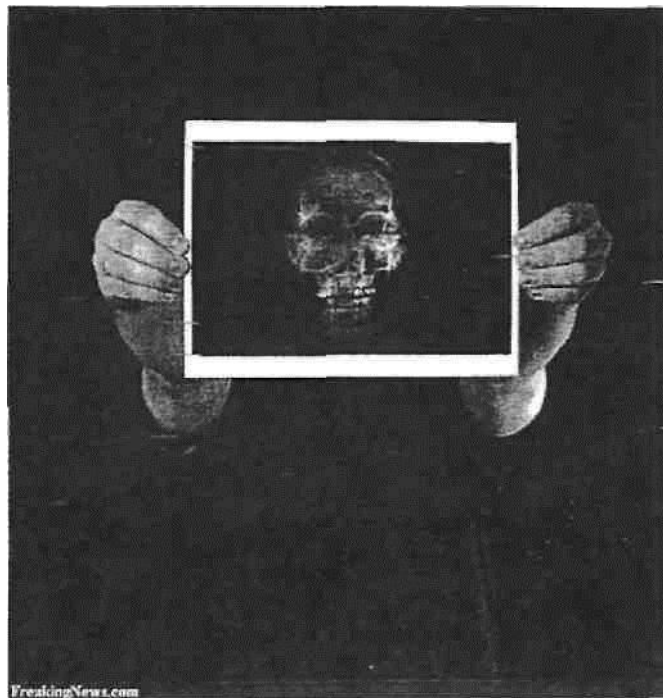


PIEDMONT TECHNICAL COLLEGE

DIVISION OF HEALTH SCIENCE



RADIOLOGIC TECHNOLOGY

STUDENT HANDBOOK

2017-2018

## **SECTION I**

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### **Health Science Division**

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# **Section I**

## **General Information**

### **Health Science Division**

## **Non-Discrimination Information**

Piedmont Technical College maintains a nondiscrimination policy involving equal access to education and employment opportunities, without regard to race, color, religion, sex, disability, veteran's status, age or national origin. The college complies with the provisions of Titles VI and VII of the Civil Rights Act of 1964, as amended; Title IX of the Educational Amendments of 1972 and the Higher Education Amendments of 1986; Sections 503 and 504 of the Rehabilitation Act of 1973; Executive Order 11246 and 1137; the South Carolina Human Affairs Law of 1975; and the Americans with Disabilities Act of 1990.

# **Health Science Curricula**

## [Associate Degree Programs](#)

Associate in Health Science – Major in Radiologic Technology  
Associate in Health Science – Major in Respiratory Therapy  
Associate in Health Science – Major in Cardiovascular Technology  
Associate in Health Science – Major in Veterinary Technology  
Associate in Health Science- Major in Human Services  
Associate in Health Science- Major in Funeral Services  
Associate in Health Science- Major in Occupational Therapy Assistant

## [Diploma Programs](#)

Pharmacy Technician Diploma  
Surgical Technology Diploma  
Medical Assisting Diploma

## [Certificate Programs](#)

Health Science Certificate  
Massage Therapy Certificate  
Patient Care Technology Certificate  
Phlebotomy Technician Certificate  
Emergency Medical Technician Certificate



## Health Science Division Faculty

**Jerry A. Alewine, Dean**  
**Kim Phillips, Administrative Assistant**  
**Nancy Wilkie, Administrative Assistant Funeral Services**  
**Quenithia White Administrative Assistant Newberry**

**Office 129H 864-941-8536**  
**Office 104H 864-941-8504**  
**Offices 114V 864-941-8774**  
**Office 402NN 803-768-8192**

Faculty Member	Program	Room Number	Telephone Number
Ann Piggott	Respiratory Care	116H	941-8533
Lee Balentine	Radiologic Technology	108H	941-8523
Dr. Ruthie Buist	Veterinary Technology	Newberry Campus 602NN	803-768-8162
Debbie McCallum	Phlebotomy Technician	115H	941-8464
Laura Boone	Cardiovascular Technology Non Invasive	103GC	941-8717
Karla Gilliam	Respiratory Care	117H	941-8629
Bil Heath	Radiologic Technology	107H	803-768-8152
Kindel Atkins	Patient Care Technician	114H	941-8326
Susan Kinney	Surgical Technology	118H	941-8535
Michelle Liggett	Massage Therapy	105H	941-8617
Tanya Niles	Veterinary Technician	Newberry Campus 601NN	803-768-8161
Debbie McCallum	Medical Assisting	115H	941-8464
Clay Sprouse	Pharmacy Technician	110H	941-8527
Lenette Thompson	Articulation / Surgical Technology	119H	941-8516
Christy Nichols	Cardiovascular Technology Instructor Invasive	101GC	941-8618
Jamilla Nelson-Jenkins	Human Services Instructor	111H	941-8508
George Christa	Human Services Instructor	113H	941-8688
David Martin	Funeral Services Program Coordinator	113V	941-8506
Dedrick Gantt	Funeral Services Instructor	112V	941-8521
Audrey Wilson-Alston	Occupational Therapy Assistant Program Director	230N	803-768-8189

## **Accrediting Agencies**

Programs in the Health Science Division are accredited by the following agencies:

Radiologic Technology Program

Joint Review Committee on Education in Radiologic Technology

[www.jrcert.org](http://www.jrcert.org)

Respiratory Care Program

Committee for Accreditation for Respiratory Care (CoARC)

[www.CoARC.org](http://www.CoARC.org)

Medical Assisting Program

The Medical Assisting Diploma program at Piedmont Technical College is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of Medical Assisting Education Review Board (MAERB).

Commission on Accreditation of Allied Health Education Programs

25400 US Highway 19 North, Suite 158

Clearwater, FL 33763

727-210-2350

[www.caahep.org](http://www.caahep.org)

Surgical Technology Program

Commission on Accreditation of Allied Health Programs

[www.caahep.org](http://www.caahep.org)

Pharmacy Technician Program

American Society of Health System Pharmacists

[www.ashp.org](http://www.ashp.org)

Veterinary Technician Program

American Veterinary Medical Association

[www.avma.org](http://www.avma.org)

Funeral Services Program

American Board of Funerals Service Education

[www.abfse.org](http://www.abfse.org)

Occupational Therapy Assistant Program

Accreditation Council for Occupational Therapy Education (ACOTE)

Of the American Occupational Therapy (AOTA)

4720 Montgomery Lane, Suite 200

Bethesda, MD 20814-3449

[www.aota.org](http://www.aota.org) and [www.acote.org](http://www.acote.org)

## INTRODUCTION

This handbook is designed to provide students with information concerning the policies and procedures specific to the program in which the student is enrolled.

*The faculty reserves the right to change, delete, or amend any of the contents of this handbook pending notification to the students. We wish you every success in your endeavor.*

This handbook is designed as a supplement to the Piedmont Technical College Catalog. Please refer to the handbook for additional information.

**Approved:**

<u><b>Jerry Alewine</b></u>	<u><b>6-12-2017</b></u>
<b>Dean of Health Sciences</b>	<b>Date</b>

<u>Lee Balentine</u>	<u>6-12-2017</u>
<b>Program Coordinator</b>	<b>Date</b>

**Dear Student:**

**It is truly a pleasure to welcome you to the Division of Health Science. Within the division, we have associate degrees, certificates, and diploma programs each with a specific learning outcome for you as the student.**

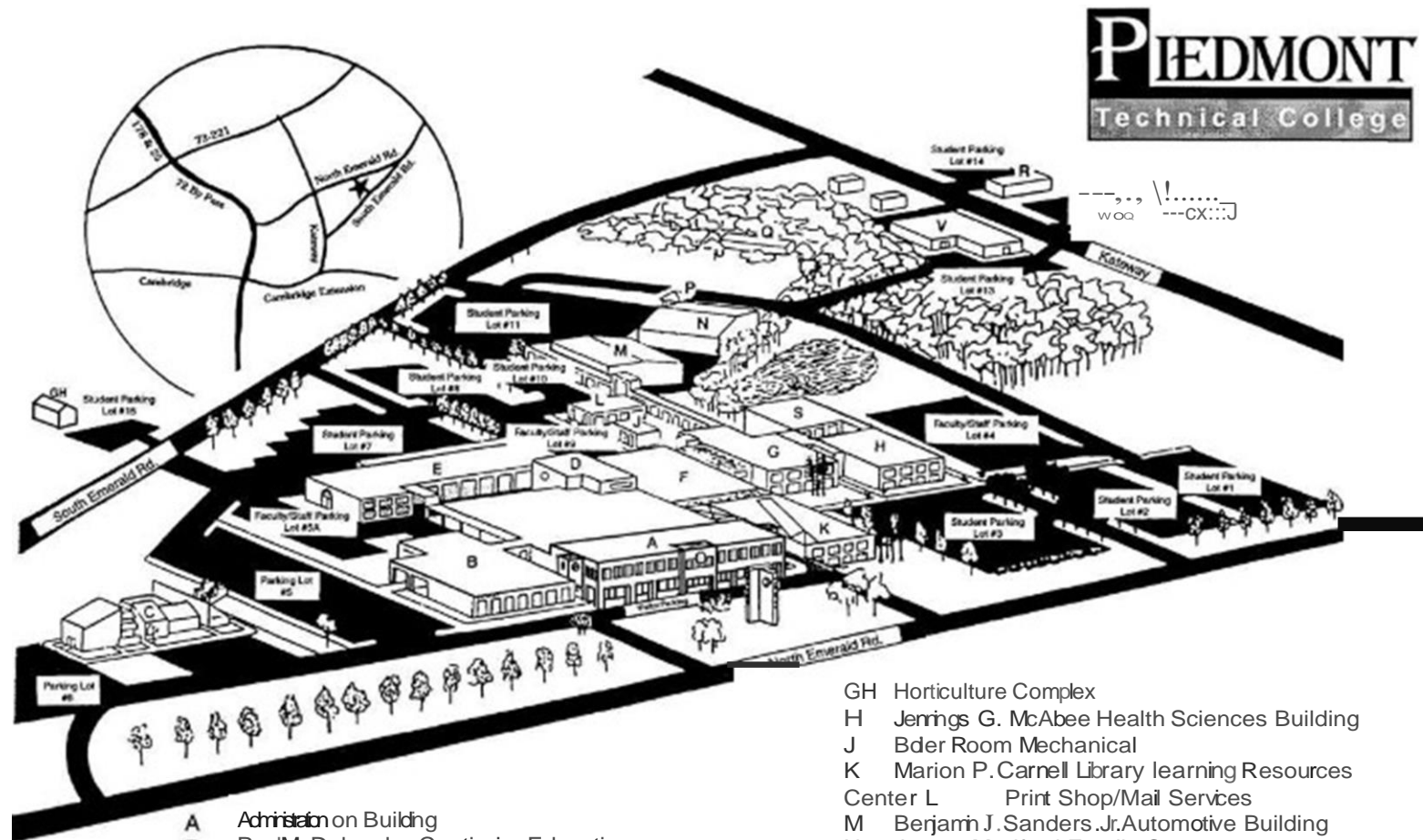
**The health science professions are a dynamic and ever changing career choice. Having been a respiratory therapist for over 17 years, I truly can tell you that every day is a new adventure! We as a division are always seeking new and innovative ways to keep pace with these changes. During your studies within the health science curriculum, you will experience tremendous opportunities for personal growth as well as professionally.**

**Our primary goal is taking you where you want to be within the healthcare workforce. These curriculums are challenging and require sufficient preparation on your part. As administrators, staff and faculty we are here to assist you on every step of the way.**

**Please know that every member of the health science division is a team player in your success.**

**Welcome and best wishes!**

A handwritten signature in black ink, reading "Jerry R. Bewine". The signature is written in a cursive style with a large, stylized "J" and "B".



**Piedmont**  
Technical College

- A Administration Building
- B Paul M. DeLoache Continuing Education
- C James C. Self Conference Center
- D Bennett G. Campbell Student Center
- E John W. Drummond Engineering and Industrial Technologies Center
- F Francis B. Nicholson General Education Building
- G P. Henderson Barnette Business Technologies Building

- GH Horticulture Complex
- H Jennings G. McAbee Health Sciences Building
- J Bldg. Room Mechanical
- K Marion P. Carnell Library Learning Resources Center
- L Print Shop/Mail Services
- M Benjamin J. Sanders, Jr. Automotive Building
- N James Medford Family Center
- P Physical Education Building
- O Masonry/Storage Building
- R Robert A. Uher Construction Technology Building
- S Doris S. Hall Nursing/Science Building
- V Henry Bohm Community Education Center
- W Literacy Facilities

## **Progression in Health Science Programs**

Candidates for a degree in any Health Science curriculum must meet the requirements for graduation of the college. In addition, students enrolled in Health Science programs leading to associate's degrees or diplomas and in articulated programs must progress in meeting the requirements of their program according to the following policy:

1. Students must complete all health science courses and BIO 106, BIO 210 and BIO 211 with grades of "C" or better.
2. Students may repeat a specific health science course one time to achieve a grade of "C" or better. Students who need to repeat a health science course are required to meet with their academic advisors to discuss repeating the course.
3. Students must maintain current CPR American Heart Association certification and yearly video updates through the duration of their program.
4. Students must maintain annual documentation of required OSHA educational programs, including blood borne pathogens, fire safety and body mechanics and required health screening procedures, such as tuberculosis screening. Additional required in services may be assigned as warranted for you specific program or to meet the needs of the Division of Health Science and/or the college.
5. Additional required in services may be assigned as warranted for your specific program or to meet the needs of the Division of Health Sciences and/or the College.
6. Students must maintain acceptable health status that allows required performance within the clinical environment.
7. Admission to any health science program is limited to two attempts per program and three attempts in any nursing and health science programs combined.
8. Students must successfully complete and pass drug screening and background check.
9. All students enrolled in a Health Science Program at Piedmont Technical College may be subject to random drug testing. At several points during their academic career, students may be eligible for random sampling. Refusal to submit will result in immediate removal from the program.

## **Piedmont Technical College**

### **Core Competencies**

1. Communicate effectively through reading, writing, speaking, and listening.
2. Apply those mathematical skills appropriate to the occupation.
3. Employ effective processes for resolving problems and making decisions.
4. Apply knowledge of technology on a level compatible with job demands.

### **STUDENT CODE AND STANDARDS OF CONDUCT**

Students are members of both the community at large and the school, must abide by the laws of the community, and are entitled to its protection and rights.

❖ ***General rights of students include:***

Nondiscrimination,  
Freedom of speech,  
Freedom of press,  
Protection against searches and seizures,  
Student representation in college governance.

❖ ***Student records:***

The office of student services will safeguard and maintain all student records. Records shall not be released to anyone without written consent except in cases provided by the law. Student's records will be managed in accordance with the guidelines established in FERPA.

❖ ***Prescribed conduct:***

Academic dishonesty and infringing on the rights of others violates prescribed conduct.

### **Unlawful Acts and Infractions:**



1. Falsification of records (includes hospital, patient or school records).
2. Unauthorized absence from assigned duty station during scheduled hours.
3. Loitering, loafing, or sleeping while in assigned clinical area.
4. Refusal to follow instructions in carrying out the duties assigned by your clinical instructor or preceptor.
5. Use of abusive or obscene language, or acting in a disrespectful manner to any faculty member, patient, visitor, staff member, supervisor or classmate (clinical or school).
6. Performing duties for which you have not been taught.
7. Illegal conduct of any nature.
8. Smoking on school property – Effective August 26, 2009 the campus will be tobacco free.
9. Use of, or unauthorized possession of, intoxicating beverages, narcotics, or other drugs while on school or hospital premises, or reporting to school or hospital under the influence of intoxicants.
10. Threatening, intimidating, or coercing a classmate, co-worker or other employee of the school or clinical site.
11. Fighting, horseplay, harassment, or other disorderly conduct on school or clinical site premises.
12. Possession of a weapon, such as a gun, knife, or other object commonly considered to be a “weapon” on clinical or school premises.
13. Gambling, or conducting games of chance, or possession of gambling devices on clinical or school premises.
14. Creating unsafe or unsanitary conditions.
15. Unauthorized possession, use, copying or reading of patient hospital records, or disclosure of information contained in such records to unauthorized persons.
16. Disregard of one’s appearance, uniforms, dress, or personal hygiene.
17. Larceny, misappropriation, or unauthorized possession or use of property including food, books, and supplies of all kinds belonging to the school, hospital, or to any patient, visitor, co-worker, classmate, etc.
18. Any negligence involving patient care.
19. Soliciting or accepting gratuities from patients, visitors or staff.
20. Disruptive behavior or intentional creation of distractions, disruptions or interference with the attention of instructors or other students in the classroom or to staff, families or patients in the clinical sites. (This includes cell phones and beepers).
21. Failure to uphold, above all else, the safety and well-being of patients entrusted to your care.



## Disciplinary Action for Level 1, Level 2, and Level 3 Offenses

Level 1 Offenses may result in the administration of disciplinary action which may include but not limited to:

First Offense:	Verbal with documentation
Second Offense:	Written warning and referral to the Dean of Health Science
Third Offense:	Final Written Warning and Suspension
Fourth Offense:	Removal from the Program

Level 2 Offenses may result in the administration of disciplinary action which may include but is not limited to:

First Offense	Written Warning and Referral to the Dean of Health Science
Second Offense	Final Written Warning
Third Offense	Suspension
Fourth Offense	Removal from the Program

Level 3 Offenses may result in administration of disciplinary action which may include but not limited to:

Interim Suspension and referral to the Chief Student Services Officer in compliance with the Student Code for the South Carolina Technical College System outlined in the College's Student Calendar and Handbook

## **CLASSROOM CONDUCT POLICY**

It is the expectation of the program that all classes will be conducted in an adult fashion. Both instructor and student will be present, on time and prepared.

The instructor will be in charge of the classroom at all times, both in selection of subject matter and method of instruction. It is understandable that the students may disagree with the instructor on occasion. On these occasions, all discussions shall be limited to after class so classroom objectives can be met. On any occasion the instructor feels as if the student is disruptive to the class, the student will be asked to leave. The student at all times has the right to due process as stated in the Piedmont Technical College regulations. If a student has an issue with the faculty member and they feel they have not gotten resolution, they should follow the chain of command for further assistance.

This chain follows:

1. Faculty Member....without resolution is advanced to
2. Department Head.... without resolution is advanced to
3. Dean of Health Science....without resolution is advanced to
4. Vice President for Academic Affairs.

For consideration this chain must be followed.

The grievance policy is initiated by the completion of and submission of the “Grievance Form”. This form can be located on the website [www.ptc.edu/appeal](http://www.ptc.edu/appeal). on page 54 in the 2016-2017 “Student Calendar and Handbook.” No grievance will be progressed without proper adherence to this policy.

## **SPECIAL CONCERNS**

Students should not eat, smoke, or drink in unauthorized areas. Failure to meet standards of conduct acceptable to the college may result in disciplinary action. Adherence to guidelines, rules and standards of any experiential site must be maintained.

## **STUDENT INTERACTIONS**

The student will consistently display a professional and positive attitude in all dealings with patients as well in any experiential setting. The student will always identify himself to the patient. The student will explain the purpose of his visit to the patient. The student will display courteous behavior towards the patient regardless of race, religion, sex, color, creed, or disease.

The student will maintain confidentiality of all patient information and records. The student will record all information in the patient chart accurately. The student will discuss information with the patient only if already known by the patient. The student will not refer to the patient by name when completing assignments for this program. The student will not discuss patients in public areas.

The student will display respect for the patient's right to privacy. The student will arrange clothing to protect the patient's modesty. The student will knock on the door before entering the room. The student will perform physical exam of the patient only when indicated and in the presence of a member of the same sex as the patient.

The student will demonstrate concern for the protection of the patient from injury during all procedures. The student will perform only those procedures they have been deemed competent to perform by the clinical instructor. The student will perform only those procedures with a written physician order.

### **Student/Student Interaction**

The student will consistently display a professional and positive attitude in all dealings with fellow students. The student will complete all individual assignments themselves, however, they may be asked to perform cooperatively.

### **Student/Instructor Interaction**

The student will consistently display a professional and positive attitude in all dealings with their instructor. The student will work to the best of their ability to complete all work as assigned. The student will utilize established procedures in order to resolve conflicts with the instructor. The student will demonstrate respect for the instructor at all times.

### **Student/Clinic/Externship Personnel Interaction**

The student will consistently display a positive and professional attitude in all dealings with clinical/externship personnel. The student will identify himself by wearing proper uniform and name tag at all times. The student will demonstrate respect for all hospital/externship personnel. The student will read and practice all rules, regulations, and procedures that are established by the medical office/ department in which the student is assigned. The student will first discuss all problems with clinic/externship personnel with the PTC clinical instructor. The student will not debate any clinical/externship practice in front of the patient or the family. The student will demonstrate respect for the clinical/externship facility. Should issues arise they will contact the instructor assigned and managing the course

## **A Patient's Bill of Rights**

1. The patient has the right to considerate and respectful care.
2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.
3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action.
4. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy.
5. The patient has the right to every consideration of privacy.
6. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases which as suspected abuse and public health hazards when reporting is permitted or required by law.
7. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.
8. The patient has the right to expect that, within its capacity, and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services.
9. The patient has the right to ask and be informed to the existence of business relationships among the hospital, educational institutions, or other health care providers, or payers that may influence the patient's treatment and care.
10. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent.
11. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.
12. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities.

**American Hospital Association (1992). "A Patient's Bill of Rights." American Hospital Association: Author.**

## **Study Tips**

- Be punctual for class
- Prepare for each class in advance by reading assignments
- Use time management skills
- Practice organizational skills
- Choose a quiet place to study without distractions
- Consider forming peer study groups
- If you are having difficulty in a class seek guidance from your instructor or advisor
- Take advantage of tutoring programs on campus
- Keep a calendar of reading assignments, class assignments, exams, etc.
- Keep up with reading and writing assignments
- Utilize library resources

## **Test Taking Tips**

- Be sure you know what material the test will cover
- Eat a meal before the test
- Take practice tests
- Get a good night sleep
- Read the test questions completely before answering
- Arrive early for the test
- Assume a positive attitude
- Don't cram for tests
- Don't stay up late at night (or the wee hours of the AM) studying

# SECTION II

For your information . . .

# INFECTIOUS DISEASE POLICY

## **PRE-ENTRY EVALUATION:**

The health of each student is evaluated prior to admission into any Health Science curriculum to determine if infectious diseases or other health related problems are present. Each student must have the Health Assessment form completed by a Physician or Nurse Practitioner prior to admission to clinic.

If potential or existing problems in a student's health are identified, the student will be referred to their private physician for treatment. This evaluation or treatment will be at the student's expense.

## **EXPOSURE TO DISEASE:**

Students need to be aware that in any health related curriculum you may be in contact with patients who have various infectious diseases. Medical aseptic techniques utilized in the care of patients with infectious diseases are included in each curriculum. Students will be instructed in the use of standard precautions as directed by the Center for Disease Control (CDC) when providing patient care. If a student acquires an infectious disease during a clinical rotation, they will follow the Exposure to Disease Policy.

As a result of these contagious diseases, you need to know what your risk of contracting a disease is and how to best prevent exposure. Students must also know how to protect the patients. Patients have lowered resistance to disease and we must take that into consideration when caring for them. Some of the common communicable diseases you may encounter are:

### ***Chicken pox (Varicella) and Shingles (Zoster)***

Spread by coughing and sneezing (highly contagious), by direct contact, and by aerosolization of virus from skin lesions. These are caused by the same virus exposure to one may cause the other. Once someone has had chicken pox, the virus remains dormant in the body and may be reactivated in the form of shingles later. If you have had chicken pox, you will not transmit the disease to others. If you are not immune, you could become ill and therefore expose others during the incubation period.

### ***Tuberculosis (TB)***

Tuberculosis (TB) is a contagious disease. Like the common cold, it spreads through the air. Only people who are sick with TB in their lungs are infectious. When infectious people cough, sneeze, talk or spit, they propel TB germs, known as bacilli, into the air. A person needs only to inhale a small number of these to be infected. Good hand washing and special masks should prevent you from contracting this disease.

### ***Human Immunodeficiency (HIV)***

This is a blood borne and body fluids virus that causes AIDS. Many people who are infected do not know it because they appear healthy and have no reason to suspect the disease. Because of this fact, you must consider that all patients could be potentially infected with HIV. Standard Precautions and Body Substance Isolation are used to prevent contact with blood and body fluids of all patients regardless of their HIV or AIDS status. Following these procedures eliminates most of the risk to you. Gloves, masks, protective eyewear, impervious gowns, and aprons are required as appropriate to prevent contact to non-intact skin and mucous membranes. As with all patients, sharp equipment and instruments must be handled cautiously and disposed of appropriately. When proper precautions are used in handling blood or body substances, the risk to you is low. Report all exposures to your instructor.

### ***Hepatitis B (HBV)***

Hepatitis B is a blood borne virus. This disease carries a significant risk to health care workers. You can protect yourself from Hepatitis B by using Standard Precaution and Body Substance Isolation and by taking the immunization. *NOTE: Some individuals who take Hepatitis B vaccine will not develop immunity and therefore will be unprotected.*

### **Meningococcal Meningitis**

This disease is transmitted in respiratory secretions. Good hand washing and masks should prevent you from contracting this disease.

Students should not report to clinical rotations with infections because hospitalized patients are more susceptible to infectious disease. Students should notify their instructor of exposure to infectious disease and/or blood or body substances immediately so as to make arrangements to make up the missed clinical time.

## **ACCIDENTAL INJURY/EXPOSURE:**

In case of accidental injury and/or exposure in the clinical, externship, or lab the Accidental Injury or Exposure Practice for students will be followed.





Your goals. Our mission.

## **IMMUNIZATION POLICY**

Effective Date: Fall 2011

Reviewed 5/2017

### **PURPOSE:**

Because of their contact with patients/clients or infectious material from patients/clients, HLTHSC students and faculty are at risk for exposure to and possible transmission of vaccine-preventable diseases. Maintenance of immunity is therefore an essential part of prevention and infection control. The following defines the HLTHSC divisional policy as it relates to immunizations for HLTHSC faculty and students.

### **POLICY:**

All HLTHSC faculty and students who come into contact with patients and/or clients must document proof of the following immunizations:

- Two (2) measles/mumps/rubella (MMR) vaccines: \*positive titers will be accepted unless clinical agencies/externships do not accept titers.
- Tetanus within the past ten (10) years
- Varicella (chicken pox) vaccine: history is not sufficient, therefore must have documentation of the two (2) vaccines or a \*positive titer unless clinical agencies/externships do not accept titers.
- Tuberculosis skin test: a 2-step skin test is required initially and a single skin test is required annually thereafter.
- Hepatitis B Series: This series of vaccines is not required but strongly recommended. All students are required to sign the Hepatitis B Information Sheet.
- Other vaccines as required by clinical agencies/externships according to facility requirements.
- Students and faculty within the Veterinary Technology program are only required to have documentation of the Tetanus within the past ten (10) years.
- Although strongly recommended, Massage Therapy students and faculty are not required to prove documentation of the Tetanus vaccination unless it is required by a clinical/externship site. However, those who choose not to maintain a current Tetanus vaccine will be required to sign a statement of declination.
- Vaccines must remain current throughout the program of study.

\*Students and faculty with documentation of negative or equivocal titers will be required to receive appropriate vaccine(s).

## PROCEDURE:

1. Due dates for documentation will be determined by the program.
2. HLTHSC faculty, staff, and students may request a **medical exemption from vaccination** based on guidelines from the Centers of Disease Control (CDC). Those CDC guidelines can be located on the CDC website (<http://www.cdc.gov/vaccines/vpd-vac/should-not-vacc.htm>). Documentation from a physician will be required. **No other reason(s) for exemption will be made.** Health exemption requests will be reviewed on a case by case basis.
3. Restrictions or limitations consistent with CDC suggestions or guidelines and those mandated by clinical agencies/externships may be required for those with approved health exemptions.
4. Those without an approved exemption, who fail to maintain current immunizations, or who with an approved exemption fail to comply with any applicable restrictions will not be allowed to participate in activities involving patient/client care. Failure to comply will result in disciplinary action up to and including termination of employment for faculty or the inability to progress through an academic program for students.
5. Although faculty and students may receive approved medical exemption from the College, participation in academic activities at clinical education centers and/or externships may not be permitted according to signed affiliation agreements between the outside facilities and Piedmont Technical College. Such circumstances may result in a change in faculty course assignments or the inability to progress through an academic program for students.

## IMMUNIZATION REQUIREMENTS:

The following immunizations/tests are required of each student:

- PPD (tuberculin test)
- Mumps/Rubeola/Rubella
- Hepatitis B
- Tetanus
- Varicella Zoster

# **INSTITUTIONAL DIRECTIVE 8-25**

**March 27, 2006**

**Reviewed 5/2017**

## **Title: Communicable Disease (Students)**

### **I. Purpose**

The purpose of this directive is to set forth policy and procedure for handling cases of suspected exposure of students to a communicable disease.

### **II. Policy**

It is the policy of Piedmont Technical College to insure the safety of all students. The college follows the established rules and guidelines of the State Board of Health Regulations.

### **III. Definition**

For the purposes of this directive, communicable disease shall include, but not be limited to:

- Chicken Pox Ringworm
- German Measles Scabies
- Hepatitis B Trachoma, Granulated lids
- Impetigo or acute conjunctivitis
- Lice Tuberculosis
- Measles Whooping Cough
- Mumps

### **IV. Procedures and Responsibilities**

A. If any student has knowledge of having a communicable disease or having been exposed to a communicable disease, it is the responsibility of the student to notify the Vice President of Student Development.

B. If a faculty member suspects a student of having a health condition which could possibly be communicated to others, the Vice President of Student Development should be notified immediately. The student may be excluded from the campus until an appropriate assessment of the student's medical condition can be made.

C. The assessment of a student with a suspected communicable disease and the determination of a student's ability to remain at school will be made by the President after a preliminary consultation with the Vice President of Student Development, based upon recommendation from local health authorities.

#### **Office of Responsibility: Vice President for Student Development**

D. If the President feels that the situation poses a real threat to the college or the community at large, he will notify the Public Health Authority of all known details and seek their advice and counsel.

E. Under provision of South Carolina Code 44-29-200, the President will prohibit the attendance of any student until a satisfactory certificate is obtained from one or more licensed physicians and the Public Health Authority stating that such attendance is no longer a risk to others at the college.

F. Under all circumstances, the individual's right of privacy will be protected. Only those individuals who are directly involved with the student(s) daily activities will be notified concerning the presence of a communicable disease.

## **ACCIDENTAL INJURY OR EXPOSURE PROTOCOL FOR STUDENTS**

### **I. PURPOSE**

To provide detailed information on how to obtain appropriate treatment for a student who has been involved with an accidental injury in the clinical agency.

### **II. PROCEDURE FOR ACCIDENTAL INJURY OR EXPOSURE**

If a student is accidentally injured in a clinical setting, including college labs, the following protocol will be enforced.

1. Immediately inform the instructor of the incident and the supervisory personnel in the clinical agency.
2. Complete the Incident Report for the agency and/or an Accidental Injury or Exposure Report for the College. On campus exposure - notify Public Safety to complete and file the report for the College.
3. If in an agency with an Employee Health Office refer the student to that office for assessment. If no Employee Health Office or the equivalent is available refer the student to the Emergency Room.
4. A student who is exposed in the clinical or externship site or in the lab on campus must take all bills to the Human Resource Office of the College to initiate appropriate payment. Failure to do so may make the student ultimately responsible for all costs incurred.

## Criminal Records Checks for Health Science Students

As required by the clinical and field placement agencies, students in specific programs are required to have a criminal background check and a 10-panel urine drug screen. These are conducted by an outside agency at the student's expense. Current fees for these tests are:

Criminal Background check \$107.75  
Urine Drug Screen

*{ However these fees are subject  
to change without notice }*

Pending criminal charges or conviction of any of the following crimes will make the student ineligible for enrollment or participation in clinical/field placement courses.

- Crimes of violence (murder, manslaughter, criminal sexual assault, crimes involving the use of deadly force, simple assault, assault and battery of a high and aggravated nature, assault and battery with intent to kill, criminal domestic violence)
- Crimes occurring within 7 years of the application date involving the distribution or use of illegal drugs.
- Crimes occurring within 7 years of the application date that involve moral turpitude, breach of trust and identify theft.

The results of the criminal background check and the drug screen will be available for review by designated personnel in each clinical or field placement agency. The agency has the right to refuse admission for clinical or field placement based on student background checks and drug screens. If a student is refused admission to a designated clinical site they will be administratively removed from the program. The Dean of Health Science will be notified immediately of a student's refused status.

The drug screen will be done on an unannounced basis after classes begin but before clinical or field placement assignments. Prescription medications may be validated by submission of a pharmacy printout of prescribed medications or a signed prescription.

The 10-panel urine drug screen will test for:

Cocaine	Marijuana
Opiates/Morphine	Amphetamines
Methamphetamines	Phencyclidine (PCP)
Benzodiazepines (inhalants)	Barbiturates
Methadone	Tricyclic Antidepressants

Failure to provide the required urine sample in an appropriate time or a test that is positive for any of the identified drug categories will result in immediate dismissal from any curriculum that requires a clinical/field placement component. When a Health Science student is dismissed because of a positive non-validated drug screen this will count as an attempt. Anyone who is found to have a second positive drug screen will not be admitted to any other health science or nursing program, and will forgo the right to appeal for a third attempt.

If a student tests positive and believes the results to be in error, they may request laboratory analysis or a re-test. Laboratory analysis or re-test will be at the expense of the student.

Students must request a re-test of the original sample within 24 hours for reconsideration to be made.

## **Criminal Background Check and Drug Screening**

A criminal background check and drug screen is required of all students entering a nursing or health science program at Piedmont Technical College. Students are responsible for the cost, which is completed upon acceptance to a nursing or health science program. Students taking AHS 117 or the continuing education nursing assistant class will also be required to complete a background check and drug screen. The cost will be assessed along with the tuition for the course. If a student is dismissed from the program for an issue relating to the criminal background check or drug screen, it will count as an attempt at that clinical program.

### **Background Check Information**

The background check will show any crimes occurring within seven years of the date that the background check is performed. Clinical providers have the sole control over students' access to the clinical site. Students must be accepted at all clinical sites to continue in their program of study.

If a charge is identified, it could take up to one year or more for it to be resolved. Students with convictions within seven years of their anticipated program entry date are encouraged to view the information on the PTC Health Science Resource page website detailing the difference between obtaining a pardon for those convictions and having them expunged from their criminal records. Piedmont Technical College recommends that students who have a previous conviction take steps to have the conviction expunged from their records if at all possible. Obtaining a pardon does not guarantee access to clinical sites.

### **Drug Screening Information**

Urinalysis drug screen will be performed upon admission to a nursing or health science program. Additional drug screening may be performed at random upon request of the college or a clinical site. The student will be responsible for the cost of any subsequent drug screening.

Urinalysis samples are tested for the presence of the following:

Cocaine	Marijuana	Opiates/Morphine	Amphetamines
Methamphetamine	Phencyclidine	Benzodiazepine	Barbiturates
Methadone	MDMA (Ecstasy)		

Failing the drug test or refusing to be tested will result in dismissal from the nursing or health science program. A student may reapply for program admission after one year. If a student is dismissed from a nursing or health science program due to a drug screen a second time, he or she will not be permitted to appealing for a third attempt in the chosen major or to apply for a third attempt in another nursing or health science major at Piedmont Technical College.

Urinalysis testing is performed by a third party contractor with no relationship to the college. If a student believes that a positive result is wrong, he or she can request that the contractor re-test the original sample at the student's expense.

*Piedmont Technical College reserves the right to conduct random drug testing at any time during which the student is participating in a clinical/field placement experience. Testing will be conducted at the expense of the student.*

## ***DRUG AND/OR ALCOHOL USE POLICY***

The Health Science Division adheres to the drugs and/or alcohol policy as outlined below.

Health Science faculty who suspect drug and/or alcohol abuse are required to take action as appropriate to patient and student safety. Any one or more of the following behaviors may constitute evidence that a student is under the influence of alcohol or drugs.

1. Observable lack of motor coordination without reasonable explanation. Such behavior must be described objectively by the person making such observations.
2. Incoherent speech without reasonable explanation.
3. Inappropriate decision-making behavior without reasonable explanation. This behavior must be described objectively by persons making such observations. The behavior must clearly be inappropriate based upon reasonable expectations of other students at the same academic level.
4. Odor of alcohol detected from a minimum distance of 2 feet.

Any student whose behavior or job performance indicates that they are working under the influence of drugs or alcohol in the clinical facility or campus laboratory may be approached by an instructor or clinical facility official. If the student acknowledges the use of drugs or alcohol, dismissal from the program may occur.

If a student refuses to acknowledge use of drugs or alcohol, upon being approached by the instructor, he or she may be asked to submit to a drug or alcohol test at the student's expense. If the student then chooses to submit, the clinical instructor or college personnel will accompany the student to the emergency department to have the drug or alcohol test done. The student will be required to sign a release, which would enable Piedmont Technical College to receive the test result(s).

Refusal to submit to a drug or alcohol test under these conditions will result in immediate removal from the clinical area or lab setting. Disciplinary action up to and including dismissal from the program may occur. The student will be asked to remain in the clinical facility or laboratory until someone can come to transport the student to his/her home.

A positive drug or alcohol test or an incident of reasonable suspicion will result in dismissal from the program. The incident will be reported to the Dean of the Health Science Division and the Office of Student Affairs. A written report will be placed in the student's file.

## Clinical Responsibilities

### STUDENTS RETURN TO CLINICAL AFTER AN ABSENCE RELATED TO SURGERY, INJURY, EXTENDED ILLNESS, PREGNANCY OR DELIVERY

Any student who has been absent due to surgery, injury, extended illness, pregnancy, or delivery and has not exceeded absences allowed for the course, must have a signed release form from their physician indicating that they may return to clinical at full capacity and that they can perform the essential functions required for the course. The release form may be obtained from the instructor. A student may *not* return to clinical if they cannot perform the essential functions required in the course for which they are currently enrolled or if they have not received a medical release.

### PATIENT ABANDONMENT

Any student who leaves the clinical facility without the instructor's permission may be dismissed from the program. Failure to provide assigned patient responsibilities timely and correctly may also be grounds for termination. Failure to notify the clinical agency or assigned instructor with an explanation of absence prior to the start of clinical day potentially constitutes grounds for dismissal.

### STUDENT DISMISSAL AS AN EMPLOYEE OF A CLINICAL FACILITY

It is the student's responsibility to notify the course instructor if they have been dismissed as an employee from a facility where they are scheduled to have a clinical experience. Failure to comply with this policy will be considered a form of falsification of fact and may result in dismissal from the program. Inability to attend a clinic's rotation may negate progression in the program.



## Instructor Availability Outside of Class

*Class is over! I had a question I wanted to ask my instructor but the instructor is gone. What do I do?*

- Go to their office and look on their door schedule to see where they could be and when they will be in their office. (Sometimes this requires coming back to campus after class hours, etc.)
- Check with Kim Easler, Division Administrative Specialist, room 104H, 864-941-8504. She usually knows the instructors whereabouts.

*If instructors are unavailable, in class, off campus, at a meeting, etc. . . .*

- Leave a message on the phone, e-mail, or with the Administrative Specialist. They'll get back to you when they get the message.
- Or call the Dean of Health Science, Dr. Jerry Alewine at 864-941-8536

## *For Your Information . . .*

### **CARDIOPULMONARY RESUSCITATION**

Each student is required to be AHA CPR certified prior to the first clinical/externship day.

Certification must be kept current for the duration of the program. **It is the student's responsibility to keep current.** Students will not be permitted in the clinical or externship setting without a current CPR certification.

### **PROFESSIONAL LIABILITY INSURANCE**

All students are **REQUIRED** by the State of South Carolina to carry professional liability insurance. This insurance covers the person only in the clinical or externship site while in the student role.

### **FINANCIAL ASSISTANCE**

At any time during the course of the year if you have financial difficulties, you are advised to see your counselor or contact the financial aid office. You may be unaware of possible options, which may help you. Several health agencies offer student loans. To apply, contact the personnel department of the institution.

### **FINANCIAL AID**

Students who make a decision to withdraw (or who are administratively withdrawn) prior to completing 60% of the term may be required to pay back part of the Pell Grant or Student Loan. Students receiving financial aid who feel the need to withdraw from a course should seek guidance from the Financial Aid Office first. (Section IV-A)

### **COUNSELING SERVICES**

Academic, personal and career counseling services are offered on an ongoing basis. Professional counselors are available to assist students with attendance problems, academic probation counseling, and personal concerns also to provide tips of study skills, time management and a variety of topics. Referrals to other agencies are sometimes made for additional information to assist students.

### **TUTORING**

Free tutoring services are offered to students for most academic courses. Students desiring tutoring may schedule sessions with the tutor coordinator in the B-Building.

### **HOLIDAYS**

School calendars are available each year and will identify the observed holidays and breaks.

### **LIBRARY**

All Piedmont Technical College students are entitled to the use of the library. You also have access to the library at Self Regional Healthcare, and Lander University. There is a wealth of resource material there not only in books, but journals, audio visuals and internet search engines.

### **EXTRACURRICULAR EMPLOYMENT**

It is highly recommended that students not work while enrolled in a Health Science program. All employment either on or off campus must not interfere with assigned classes or externship. Outside employment should not compromise course work.

## **INCLEMENT WEATHER**

In the event of hazardous weather, the student is requested to listen to local radio/TV stations, check the Piedmont Technical College web site at [www.ptc.edu](http://www.ptc.edu) or call the College's main number 864-941-8324 for college closing announcements. Clinical/externship rotations will be cancelled when the college has been officially closed due to inclement weather. Please contact your clinical instructor for additional concerns.

## **STUDENT RECORDS**

The student is responsible for notifying the Academic Program Director and the Student Records Department of any changes in names, address, and/or telephone number. This includes completing the appropriate paperwork. However, if a student feels conditions are too hazardous for them then they should not put themselves in danger.

## **BEEPERS AND CELLULAR PHONES**

The use of beepers and cellular phones during class or externship is prohibited. Cellular phones and beepers should be muted upon entering the classroom. If a student's beeper or phone goes off during class, the student will be asked to leave the class for disrupting the instructor as well as fellow students. Beepers and cellular phones interrupt patient care in the clinical or externship site and may not be worn or carried into any rotation.

## **HOSPITALIZATION INSURANCE**

Students are responsible for securing their own hospitalization insurance. Students are responsible for any medical costs incurred by them during their course of study.

## **OSHA/BLOODBORNE PATHOGEN TRAINING**

Students are required to complete the Occupational and Safety Health Administration's Bloodborne Pathogens and TB training prior to beginning clinical or externship experience. This will be coordinated by the program director and is mandatory.

## **CHILDREN ON CAMPUS**

Students are not allowed to bring children or outside guest to any Piedmont Technical College Training.

## STUDENT DISCLAIMER

See the following Student Disclaimer:

- Students who make a decision to withdraw (or who are administratively withdrawn) prior to completing 60% of the term may be required to pay back part of their Pell grant or student loan. Student receiving financial aid who feels the need to withdraw from a course should seek guidance from the Financial Aid Office first.
- Dependency: Students are not permitted to bring their off-spring, friends, or family into the classroom for any extended period of time to hang out. Aside from the students, the only authorized individuals permitted a presence in the classroom or clinical site are those who were approved upon by the Program Director and /or Instructor for continued educational purposes.
- Pets: Not permitted at the clinical site during testing or teaching; unless, part of course instruction.
- Remediation: Will be determined on a case by case basis in a manner conducive to PTC Policies and Guidelines, American Disabilities Act as legally documented, tests, and demonstrations as delineated by the Program Instructor. The student's attendance and participation during normal class hours will be heavily factored in.
- Smoking; As of the 26th August 2009; there is No Smoking and no use of tobacco products on the Piedmont Technical College Campus.
- If a student is denied access to a clinical site or is removed from the site for cause, the student may be administratively removed from the program.

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Print Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Program Director: \_\_\_\_\_

Date: \_\_\_\_\_

# SECTION III

## Health Science Division

### Forms

The following forms are to be used by  
The faculty and students in the  
Health Science Programs

***Health Science******AGREEMENT***

In consideration for my acceptance to the Health Science Division of Piedmont Technical College, I, the undersigned, agree to pursue this course of education to the best of my ability.

1. I will take care to maintain a professional attitude in my relationship with patients, peers, and instructors.
2. I will abide by the Rules and Regulations governing the Clinical or Externship facility and the College.
3. I will perform my work, both didactic and clinical, to the best of my ability.
4. I will treat every patient with courtesy and consideration and will regard all information concerning patients as strictly confidential.
5. I will exercise extreme care to insure that my personal appearance and hygiene will not be questioned.
6. I will not conceal any health problem that might endanger my patients or peers.
7. I will do all in my power to live up to and improve the highest traditions of my chosen profession.

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Student / P# / Date

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Program Director

## Health Assessment Form

The Health Assessment form is required before beginning any Health Science program. Your instructor will explain the form and give you an assigned date for the return of the completed form. The form is to be filled out in *blue ink*. It is a legal document and will be a part of your student record.

Please note that Student Health Assessment forms will be kept by the Program Coordinator until the student graduates. Upon graduation, the student may get their Health Assessment form from the Program Coordinator. *After graduation, the Health Assessment forms will be discarded.*

# Student Health Forms and Immunization Requirements

For Health Science and Nursing Students

You must submit every document noted on this checklist by the specified deadline in your acceptance letter. Failure to do so will result in the loss of your spot in the program. All completed Health Care Forms must be submitted as instructed by the Academic Program Director. **Faxed records will NOT be accepted.**

For questions or more information regarding completion of this packet, please refer to the online video or contact the Academic Program Director:

**Online Video:** <http://www.ptc.edu/college-resources/nursing-health-science/forms-resources>

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## Checklist

\_\_\_ **Student Information and Declaration:** Complete and sign page 2.

\_\_\_ **Physical & Mental Requirements:** Complete page 3 of the Student Health Form to verify your understanding of physical and mental requirements for your program.

\_\_\_ **Physical:** To ensure that you can meet the demands of working as a healthcare professional, you must have a physical exam, including auditory and vision screening by a qualified licensed physician or nurse practitioner. This exam must document your exam results and must be completed within 12 months of beginning the program. The Physical Assessment can be found on page 4 of the Student Health Form.

\_\_\_ **Immunizations/ Titters:** Students must submit proof of each of the following immunization series OR submit a positive titer for each. This must be documented on state-approved certificate of immunization form from the Health Department and/or your healthcare provider's letterhead. A copy of lab is required to verify titer results. *(The first step is to contact the health department to check your childhood immunization records).*

\_\_\_ **MMR:** Two (2) immunizations are required, or a positive titer.

\_\_\_ **Varicella:** Two (2) immunizations are required, or a positive titer. Chicken pox self-reports are not acceptable in lieu of documented immunizations or titer.

\_\_\_ **Hepatitis B:** A series of three (3) immunizations is required, or a positive titer.

\_\_\_ **Tetanus:** Immunization required within the past 10 years.

\_\_\_ **TB Skin Testing:** A 2-Step PPD is required upon admission. Thereafter, an annual PPD is required. Documentation must include: dates applied, dates read, results recorded in mm. TB tests must be administered 1-3 weeks apart with results read within 48-72 hours. Positive PPD results require: date with results recorded in mm, documented chest x-ray results, and documented prophylactic treatment dates. *(Please note: Vet Tech students are required to complete only a 1-Step PPD).*

\_\_\_ **Flu Vaccination:** All Nursing students are required to have a yearly vaccination. It is highly recommended that students in other health science programs giving direct patient care receive this vaccination.

**NOTE:** *It is recommended that you keep a copy of all documents that you submit to the Health Records.*

### ADDITIONAL REQUIREMENTS INCLUDE:

\_\_\_ **CPR: BLS (Basic Life Support)** through the American Heart Association is required. CPR training (AHS106) is provided prior to each semester for those who need it. The dates for this training will be announced at Orientation. CPR certification is valid for 2 years. Student must enter the program with a valid CPR certification and make sure it remains current for the duration of their program. *(Please note: Vet Tech students are not required to have CPR).*

**NOTE:** *Individual programs may have additional requirements which will be communicated to you during your program's Orientation.*



**PIEDMONTTECHNICALCOLLEGE**

620 Emerald Road P.O. Box 1467

Greenwood, SC 29648-1467

**STUDENT INFORMATION**

Program: \_\_\_\_\_ PTC ID: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
First MI Maiden Last

Date of Birth: \_\_\_\_\_  
Month Day Year

Address: \_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_  
Home Work Cell

Email: \_\_\_\_\_

Emergency contact: \_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Address Home Phone Work Phone

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**DECLARATION**

I hereby certify that all information is correct. I understand that false information may be cause for dismissal from the program. I

understand it is my responsibility to report any changes in my health status to the Program Director and/or Instructor.

I understand that this information:

- Is confidential
- Must be completed in its entirety and submitted for admission to specified program

I give permission for the official representative of the specified program to share this record, upon request, with appropriate college and/or clinical agency required for the provision of enhancing my educational and/or clinical experience.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

## PHYSICAL AND MENTAL STANDARDS

All nursing and health science programs require physical agility and strength sufficient to move from room to room, lift and position patients, maneuver in small places, and perform clinical services. Students must possess gross and fine motor abilities as well as auditory, visual, and tactile acuity, which are required to assess health status and perform effective patient care. See the chart below for specific requirements by program.

O = Occasionally (1 – 33%)

F = Frequently (34 – 66%)

C = Constantly (67 – 100%)

Physical Stamina Required (Description)	RES RAD	MAS	ADN PN PCT	CVT OTA	MED	PHB	PHM	VET	SUR
<i>Lift-</i> up to 50 lbs to assist moving patients, supplies, equipment	F	F	F	F	F	O	O	F	F
<i>Lift-</i> up to 200 lbs when moving patients	O	O	F	F	O	O	O	C	F
<i>Scoop-</i> adjust equipment	F	F	F	F	F	F	C	C	F
<i>Kneel-</i> manipulate equipment, perform CPR, plug in electrical equipment	O	F	O	O	O	O	O	F	O
<i>Reach-</i> overhead lights, equipment, cabinets, attach oxygen to outlets, stocking	C	C	C	C	F	O	C	C	C
<i>Motor skills, manual dexterity-</i> small and large equipment for storing, moving; apply sterile gloves; take BP; operate computers; perform CPR; utilize syringes, tubes, catheters; set up and maintain sterile field.	C	C	C	C	C	C	C	C	C
<i>Stand</i> for prolonged periods of time (to deliver therapy, check equipment and patients; perform surgical procedures)	C	C	C	C	C	C	C	C	C
<i>Feel-</i> palpate pulses; perform physical exams; feel arteries or veins for puncture; assess skin temperature	C	O	C	F	C	C	O	F	F
<i>Push/pull-</i> large wheeled equipment, i.e mechanical ventilators, wheelchairs, patients, x-ray, equipment, EKG machines, and office equipment.	C	C	C	F	O	O	O	O	F
<i>Walk</i> for extended periods of time	C	O	C	O	C	C	C	C	O
<i>Manipulate-</i> knobs, dials associated with diagnostic or therapeutic devices, small instruments, syringes.	C	C	C	C	C	C	C	C	C
<i>Hear-</i> verbal directions, alarms, telephone; hear through a stethoscope for heart sounds, lung sounds, and blood pressure.	C	C	C	C	C	C	C	C	C
<i>See</i> – patient conditions such as skin color, work of breathing; read small print and calibration on equipment; perceive color	C	C	C	C	C	C	C	C	C
<i>Talk-</i> communicate goals and procedures to patients in English	C	C	C	C	C	C	C	C	C
<i>Read-</i> typed, handwritten, computer information in English	C	C	C	C	C	C	C	C	C
<i>Write-</i> communicate pertinent information (patients assessment, outcome assessments) in English.	C	C	C	C	C	C	C	C	C
<b>MENTAL ATTITUDE</b>									
Function safely, effectively, and calmly under stressful situations.	C	C	C	C	C	F	F	C	C
Maintain composure while managing multiple tasks simultaneously	C	C	C	C	C	C	C	C	C
Prioritize multiple tasks	C	C	C	C	C	C	C	C	C
Social skills necessary to interact with patients, families, co-workers – of the same or different cultures; respectful, polite, discrete; able to work as a team	C	C	C	C	C	C	C	C	C
Maintain personal hygiene consistent with close contact during patient care	C	C	C	C	C	C	C	C	C
Display actions, attitudes, consistent with ethical standards of the profession	C	C	C	C	C	C	C	C	C
Exposure to blood borne pathogens – Hepatitis, HIV.	F	O	C	F	F	F	C	O	F

I have read the above requirements and understand that my inability to comply with these may result in my failure to successfully complete the program I have chosen.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PHYSICAL ASSESSMENT

To be completed by student: (May attach additional sheets for full explanation.)

1. Known Allergies (Medications, food, other) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Medical Conditions currently diagnosed or treatment has been recommended that could put you, patients, faculty or fellow students at risk, i.e. seizures, diabetes, infectious disease, etc.  
\_\_\_\_\_

To ensure that students are able to meet the physical and mental demands of working as a nurse, students are required to have a physical exam within 1 year prior to program entry. This examination must include hearing and vision screening by a Healthcare practitioner *before* entering the nursing program.

### Physical examination to be completed by Healthcare Provider

**NOTE: Please include information concerning this student's potential participation in patient care.**

<b>Nose</b>	<b>Abdomen</b>
<b>Throat</b>	<b>Hernia</b>
<b>Mouth</b>	<b>Nervous System</b>
<b>Neck</b>	<b>Skin</b>
<b>Breasts</b>	<b>Orthopedic</b>
<b>Lungs</b>	<b>Psychological</b>
<b>Cardiovascular</b>	<b>Other</b>
<b>Eyes</b> Vision Right _____ Left _____ Both _____	<b>Ears</b> _____ Corrective hearing Yes _____ No _____

Comments: \_\_\_\_\_

Significant changes in health status over last 12 months? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please explain: \_\_\_\_\_

Current health status: Medications: \_\_\_\_\_

Health Science and Nursing students are required to perform physical assessment and nursing care strategies that utilize sensory and psychomotor abilities. This requires physical agility and strength sufficient to move from room to room, lift and position patients, maneuver in small places, and perform nursing actions: gross and fine motor abilities sufficient to provide safe and effective care; and auditory, visual, and tactile acuity sufficient to assess health status and perform required actions.

Based upon my examination and interview of the above named individual there does not appear to be any health condition present physically or emotionally that would prevent this individual from participating as a health science or nursing student .

Physician/Nurse Practitioner Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Signature \_\_\_\_\_

License # \_\_\_\_\_

Phone: \_\_\_\_\_

Piedmont Technical College  
Health Science Division  
Prescription / Nonprescription Drugs

SEC-IV-10-B

This is to inform the Health Science faculty that I am presently taking the following medications: (Please list and state the reason for the prescription).

Drug Name	Reason for Taking

A release statement may be required from your physician stating that the medications will not interfere with your decision making and/or performance.

It is my responsibility to update this form as any changes arise in my medication treatment regimen (additions, deletions).

Student / P# / Date: \_\_\_\_\_

Program Coordinator: \_\_\_\_\_

Disabilities
--------------

To Students with Disabilities:

Faculty in the Health Science Division believes it is important to provide equal educational opportunities to all students. In order to implement reasonable accommodations which may be needed, the faculty must be aware of your special needs.

If you need accommodations for any type of disability, please make it known to your advisor and instructors and contact Piedmont Technical College's Coordinator of Student Disability Services.

I was made aware that if I need special accommodations, I can request them and to whom to direct the request.

\_\_\_\_\_  
Student / P#

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director

**The Americans with Disabilities Act – Section**  
**504 Voluntary Accommodation Revocation**  
**Form**

**(Student Name)**\_\_\_\_\_ **has voluntarily and willfully revoked**  
**accommodations set forth by the ADA Counselor under Section 504 of the Rehabilitation**  
**Act of 1973 at Piedmont Technical College for the following educational activity:**

\_\_\_\_\_.

**The student understands that this voluntary revocation will only be applied to this specific**  
**activity and the previous accommodations will be reinstated for all future activities.**

**Date:** \_\_\_\_\_

**Student / P#:** \_\_\_\_\_

**Program Director:** \_\_\_\_\_

*Health Science*

RELEASE FORM

A cumulative record is kept on each student regarding attendance, competence level, strong and weak points, and any special honors or activities the student may have received. This record is a profile summary and will be made available for individual inspection. This information is also valuable for prospective employers and may be used as a part of an individual reference statement.

If a prospective employer requests a reference, the Program Coordinator has my permission to release such information as outlined above.

---

Student Name / P#  
(Please print)

---

Student Signature / Date

---

Academic Program Director

## FIELD TRIP RELEASE FORM

The Division of Health Science of Piedmont Technical College endorses a number of field trip experiences for you, our students. These trips are planned to be an educational experience and are sponsored by a number of organizations related to your respective curriculum. Any student who participates in a field trip becomes a representative of the school. Since your behavior is a reflection on your curriculum you are expected to conduct yourself in a mature manner that would favorably reflect your chosen profession.

We must be ever mindful of our Code of Ethics and professional conduct. If we are to be respected for our profession, and ourselves we must be worthy of it.

I understand that every effort will be taken to ensure my safety and welfare on any field trip endorsed by my curriculum. I will not hold any Health Science Division faculty or Piedmont Technical College responsible for any accident or injury incurred on any field trip.

---

Student's Signature

---

Date

---

Parent or Guardian  
(If under 18 years of age)

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Date

---

Academic Program Director



*Health Science*

## **Clinical/Externship Confidentiality Policy**

**BE IT KNOWN**, that:

1. Confidentiality is protection of the patient's privacy.
2. It is imperative to safeguard the confidential information acquired from any source about the patient.
3. Such information is not public, and you have both an ethical and legal obligation to keep it to yourself.
4. If information about a patient is shared for teaching purposes, the identity of the patient is concealed to protect his/her privacy.

---

Student /P#/ Date

---

Academic Program Director

## Termination Policy

**BE IT KNOWN**, that any student will be terminated from this program if they fail to:

1. Abide by the rules and regulations of the program.
2. Employ proper conduct and judgment in the clinical area.
3. Meet course requirements.
4. Observe the attendance policy.
5. Act professionally as a representative of Piedmont Technical College.

**EVERY EFFORT** will be made to help the student to avoid termination. If a student is to be terminated, they will be counseled concerning the cause for termination. A second attempt is permissible. The student must arrange the second attempt with the program director.

**IF A STUDENT** withdraws from the program; he or she will confer with the department head concerning the cause for withdrawal. They will also return any school property in their possession on the final day of attendance.

**I UNDERSTAND THE ABOVE POLICY.**

---

Student / P# / Date

---

Academic Program Director

## Termination Form

Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Reason for Termination: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date entered program: \_\_\_\_\_

\_\_\_\_\_  
Student's Signature / P#

\_\_\_\_\_  
Academic Program Director's Signature

\_\_\_\_\_  
Dean of Health Science Division

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Re-Admission Policy**

Students seeking re-admission to a Health Science curriculum must follow the audit policy specific to their major. Audits and requirements will be based upon the progression within the program. The program director will provide you with the specifics on a case by case basis.

### **Criteria for audit:**

- Audit students are accepted in compliance with regulations of general admission to any Health Science curriculum.
- Audit acceptance is based upon availability, enrollment, and clinical site restrictions.
- Audit students will be included in the total count of class enrollment and therefore, total enrollment cannot exceed the approved student enrollment into the program.
- As financial aid will not pay for auditing classes students will be responsible for all incurred expenses.
- A measure of competency in the curriculum would be successfully completing all course work with a minimum of 75%. However, grades will not be adjusted or changed for previously taken class work for credit.

*\*Health Science curriculum classes are consecutive and are only offered during specific semesters of the academic year.\**

## **Health Science Readmission Agreement**

### **Second Attempt**

I understand that my current admission into the \_\_\_\_\_ curriculum at  
Piedmont Technical College constitutes my second attempt in the program. I also understand  
that if I am not successful in this attempt, I will not be allowed readmission into the  
\_\_\_\_\_ curriculum.

\_\_\_\_\_  
Student

\_\_\_\_\_  
P Number

\_\_\_\_\_  
Advisor

\_\_\_\_\_  
Enrollment Center

\_\_\_\_\_  
Date

## Personal Injury Report – Public Safety Division

Report Number: \_\_\_\_\_ Incident Type: \_\_\_\_\_ Day of the Week: \_\_\_\_\_

Incident Date &amp; Time: \_\_\_\_\_ Report Date &amp; Time: \_\_\_\_\_

Personal Status (Employee, Student, Visitor): \_\_\_\_\_

Location in Which Injury Occurred (Bldg &amp; Room): \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ SS# or Student ID: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Physical Appearance: \_\_\_\_\_

Part of Body Affected: \_\_\_\_\_

Specific Activity Engaged in When Injury Occurred: Equipment, Tools,  
or Chemicals Involved in Injury

Requested Medical Treatment: \_\_\_\_\_

\_\_\_\_\_  
Officer\_\_\_\_\_  
Victim\_\_\_\_\_  
Witness

The Section Below is to be completed if an employee is involved:

TO SUPERVISOR: \_\_\_\_\_

Action Taken To Prevent Recurrence (Attach additional sheets as needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Complete Then Forward to Public Safety and HR

## Student Information Sheet

**SEC-IV-27-0**

**Please print clearly!**

**Date:** \_\_\_\_\_ **Program:** \_\_\_\_\_

**Name:** \_\_\_\_\_

PTC P#: \_\_\_\_\_

Name you wish to be called by: \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone Number(s):** Home (\_\_\_\_) \_\_\_\_\_

**Work** ( ) \_\_\_\_\_

Cell ( ) \_\_\_\_\_

**Emergency Contact:**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Employed?**                      Yes \_\_\_\_\_                      No \_\_\_\_\_

**If yes, the number of hours you work per week: \_\_\_\_\_**

**Medical Problems:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

### Random Drug Testing Policy

As a student enrolled in a Health Science Program at Piedmont Technical College I understand and acknowledge that I will be subject to random drug testing. At any point during my academic career, I acknowledge that I may be eligible for random drug sampling. I understand that if I test positive for any prohibited drug, I will be subject for removal from my program of study and will not be allowed to return to the clinical setting. Further, I understand, accept, and acknowledge refusal to submit will result in my immediate removal from the program.

---

Student Name / P# / Date

---

Academic Program Director



## Documentation Sheet Regarding Handbook and Policies

I have read all of the material in my Handbook and signed all necessary forms listed and noted (\*) below and returned them to my instructor. I've had an opportunity to ask questions and have my questions answered. I agree to abide by the policies/rules herein.

SEC-IV-2-A	Health Science AGREEMENT
SEC-IV-3-B	Health Assessment Form SEC IV-3-THRU-10-B
SEC IV-11-C	Disability Letter
SEC-IV-12-C	<u>The Americans with Disabilities Act-Section 504</u> Voluntary Accommodation Revocation Form
SEC-IV-13-D	Health Science RELEASE FORM
SEC-IV-14-E	FIELD TRIP RELEASE FORM
SEC-IV-15-F	Health Science Clinical/Externship Confidentiality Policy
SEC-IV-16-G	Termination Policy
SEC-IV-17-H	Termination Form
SEC-IV-19-I	Health Science Readmission Agreement Second Attempt
SEC-IV-26-N	Piedmont Technical College Personal Injury Report – Public Safety Division
SEC-IV-27-O	Student Information Sheet
SEC-IV-28-P	Random Drug Testing Policy

---

Student Signature / P#

---

Date

## INSTRUCTOR PHONE NUMBERS

Lee Balentine, MS RT (R)(CT)  
Program Director / Instructor  
Office (864) 941-8523  
Home (864) 374-3222  
Office 108H  
[balentine.l@ptc.edu](mailto:balentine.l@ptc.edu)

Bil Heath, BS RT (R)  
Clinical Coordinator / Instructor  
Office (864) 941-8587  
Cell (864) 992-7699  
Office 107H  
[heath.b@ptc.edu](mailto:heath.b@ptc.edu)

Dana Long, MHA BA RT(R)  
Adjunct Clinical Instructor  
Cell (864) 993-8374  
[long.d@ptc.edu](mailto:long.d@ptc.edu)

**PROGRAM MISSION:** The mission of the Radiologic Technology Program is to provide an economically feasible didactic and clinical competency based curriculum which provides students from diverse backgrounds the opportunity to master skills required to enter the entry-level job market in diagnostic radiology, transfer to Baccalaureate programs, or seek sub-specialty education and/or employment. This Associate Degree program also strives to assist students in achieving personal and professional goals as well as instill life-long learning values.

## PROGRAM GOALS

- The student will graduate with the necessary skills to function effectively as an entry level radiographer.
- The student/graduate will provide quality patient care.
- The student will value life-long learning as a means of achieving personal and professional growth.
- The student will effectively communicate in a professional manner.
- The student will demonstrate critical thinking and problem solving skills.
- To provide a learning environment for students that stimulates personal and professional growth.
- To meet employment needs without saturating the market with the unemployable.

## STUDENT LEARNING OUTCOMES

- Understand, and apply, the principles of AIDET in the work environment
- Provide patient care
- Perform all routine diagnostic procedures
- Operate all diagnostic/auxiliary equipment found in most Radiology Departments
- Apply the rules of radiation safety when operating any radiation producing equipment
- Critique radiographs to determine diagnostic quality
- Calculate the technical changes necessary to produce a diagnostic radiograph under abnormal circumstances as evidenced by selecting the correct factors
- Perform emergency and special procedures
- Apply knowledge of medical ethics and law to the practice of Radiologic Technology
- Demonstrate knowledge of human structure, function, and pathology
- Evaluate and respond to radiographic systems performance with respect to quality and safety

## TECHNICAL STANDARDS

Technical Standards are required of students for admission and progression in the Radiologic Technology Program. Technical standards are the physical demands/sensory requirements that professionals need to work in the field of radiology. The training for radiologic technologists requires students to participate in clinical education in a manner that will enable them to assume the duties of any entry level technologist upon graduation. For this reason, applicants must meet the technical standards of the program.

Essential Function	Technical Standard	Some Examples of Necessary Activities (not all inclusive)
Critical Thinking	Critical thinking ability sufficient for clinical/placement judgment	Identify cause and effect relationships in clinical situations, make appropriate judgment decisions in an emergency, or where a situation is not clearly governed by specific guidelines
Communication Ability	Communication abilities sufficient for effective interaction with others in expressive and written English, including computer literacy	Explain treatment procedures, initiate health teaching with documentation and interpretation of clinical actions and patient responses, disseminate information relevant to patient and work duties, and exhibit command of the English language.
Physical Endurance	Remain continuously on task for several hours while standing, sitting, walking, lifting and bending, and/or transporting patients/clients.	Assisting patients with ADLs.
Mobility	Physical abilities sufficient to move from area to area and maneuver in small spaces. Have full range of motion, manual dexterity, and good hand/eye coordination	Move around in treatment rooms, workspaces, and treatment areas... administer cardiopulmonary procedures and evacuate patients in an emergency... withstand long hours of standing, walking, stooping, bending, and sitting.
Motor Skills	Gross and fine motor abilities sufficient to provide safe and effective patient/client care and operate equipment.	Calibrate and use equipment, position patients (to include lifting and moving), demonstrate manual dexterity and good eye-hand coordination. Is able to maintain good balance and capable of lifting 50 pounds independently.
Adequate Height	Ability to reach and operate overhead equipment	Adjust overhead lights.
Hearing Ability	Ability to distinguish different auditory wavelengths	Hear equipment alarms, emergency signals, cries for help, verbal instructions relevant to patient care, and work details including phone conversations. If hearing corrective devices are needed, they are to be worn during the clinical rotation.
Visual Ability	Normal/corrected visual ability sufficient for patient/client observation, assessment, and/or treatment...ability to discriminate between subtle changes in density (black to gray) of a color in low light	Observe/assess patient responses and read documents related to patient care. If corrective vision devices are needed, they are to be worn during all clinical rotation.
Professionalism	Ability to present a professional appearance/attitude and implement measures to maintain own physical/mental health and emotional stability.	Portrays professionalism and a positive attitude as a member of the healthcare team, displays polished, neat appearance, uses tact, and discretion when speaking.

# ASSOCIATE IN HEALTH SCIENCE

## MAJOR IN RADIOLOGIC TECHNOLOGY

First Semester (Fall)		Credit	Class	Lab
RAD 101	Introduction to Radiography	2.0	2.0	0.0
RAD 102	Patient Care Procedures	2.0	1.0	3.0
RAD 130	Radiographic Procedures I	3.0	2.0	3.0
RAD 152	Applied Radiography I	<u>2.0</u>	<u>0.0</u>	<u>6.0</u>
		9.0	5.0	12.0
Second Semester (Spring)				
RAD 110	Radiographic Imaging I	3.0	2.0	3.0
RAD 136	Radiographic Procedures II	3.0	2.0	3.0
RAD 165	Applied Radiography II	<u>5.0</u>	<u>0.0</u>	<u>15.0</u>
		11.0	4.0	21.0
Summer Term				
RAD 175	Applied Radiography III	5.0	0.0	15.0
RAD 201	Radiation Biology	2.0	2.0	0.0
RAD 205	Radiographic Pathology	<u>2.0</u>	<u>2.0</u>	<u>0.0</u>
		9.0	4.0	15.0
Third Semester (Fall)				
RAD 115	Radiographic Imaging II	3.0	3.0	0.0
RAD 121	Radiographic Physics	4.0	4.0	0.0
RAD 230	Radiographic Procedures III	3.0	2.0	3.0
RAD 256	Advanced Radiography I	<u>6.0</u>	<u>0.0</u>	<u>18.0</u>
		16.0	9.0	21.0
Fourth Semester (Spring)				
RAD 225	Selected Radiographic Topics	2.0	2.0	0.0
RAD 235	Radiographic Seminar I	1.0	1.0	0.0
RAD 268	Advanced Radiography II	8.0	0.0	24.0
RAD 282	Imaging Practicum	<u>2.0</u>	<u>0.0</u>	<u>6.0</u>
		13.0	3.0	30.0
Summer Term				
RAD 236	Radiographic Seminar II	2.0	2.0	0.0
RAD 276	Advanced Radiography III	<u>6.0</u>	<u>0.0</u>	<u>18.0</u>
		8.0	2.0	18.0
Total Credit Hours		89		
(Includes Program Ready/Gen. Ed. courses)				

# RADIOLOGIC TECHNOLOGY

## MAJOR STUDIES:

## CREDITS:

RAD 101	Introduction to Radiologic Technology	2.0
RAD 130	Radiographic Procedures I	2.0
RAD 102	Patient Care Procedures	2.0
RAD 152	Applied Radiography I	2.0
RAD 110	Radiographic Imaging I	2.0
RAD 136	Radiographic Procedures II	2.0
RAD 165	Applied Radiography II	0.0
RAD 205	Radiographic Pathology	3.0
RAD 201	Radiation Biology	3.0
RAD 175	Applied-Radiography III	0.0
RAD 121	Radiographic Physics	4.0
RAD 115	Radiographic Imaging II	3.0
RAD 110	Radiographic Procedures I	2.0
RAD 256	Advanced Radiography I	0.0
RAD 225	Selected Topics	2:0
RAD 235	Radiographic Seminar I	1.0
RAD. 268	Advanced Radiography II	0.0
RAD 282	Imaging Practicum	3.0
RAD 236	Radiographic Seminar II	3.0
RAD 282	Imaging Practicum	2.0

## GENERAL STUDIES:

BIO 210	Human Anatomy & Physiology I	4.0
BIO 211	Human Anatomy & Physiology II	4.0
ENG101	English Composition I	3.0
CPT170	Computer Applications	3.0
PSY201	General Psychology	3.0
Elective	Humanities/Fine Arts	<u>3.0</u>

TOTAL CREDIT HOURS: 89.0

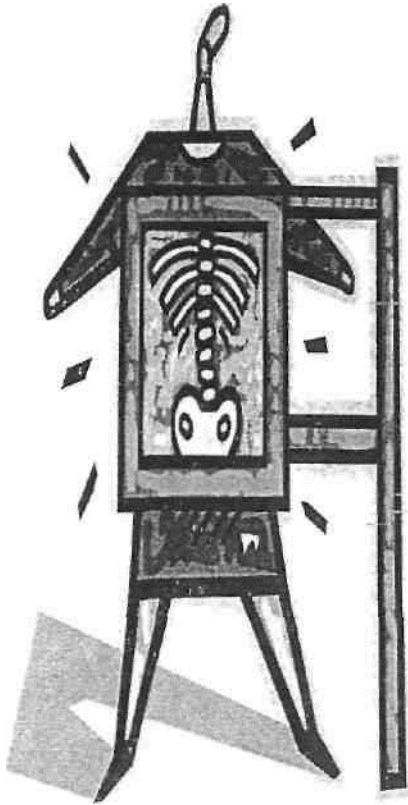
## COURSE DESCRIPTIONS

COURSE	TITLE	CREDIT	DESCRIPTION
RAD 102	Patient Care Procedures	2.0	This course provides a study of procedures and techniques used in the general care of the patient.
RAD 101	Intro to Radiologic. Technology	2.0	This course provides an introduction to Rad Tec with emphasis on orientation to the Radiology department, ethics, and basic radiation protection.
RAD 110	Radiographic Imaging I	3.0	This course provides a detailed study of the parameters controlling radiation quality and quantity for radiographic tube operation and image production.
RAD 115	Radiographic Imaging II	3.0	This course outlines a detailed study of primary and secondary influencing factors and accessory equipment related to imaging.
RAD 121	Radiographic Physics	4.0	This course introduces the principles of radiographic physics...incorporating theory and application of basic principles underlying the operation and maintenance of x-ray equipment
RAD 130	Radiographic Procedures I	3.0	This course provides an introduction to radiographic procedures. Positions of the chest, abdomen, and extremities will be included.
RAD 136	Radiographic Procedures II	3.0	This course provides instruction in radiographic procedures for visualization of the structures in the body.
RAD 152	Applied Radiography I	2.0	This course introduces the student to the clinical environment by providing basic instruction in the use of radiographic equipment and routine radiographic procedures.
RAD 165	Applied Radiography II	5.0	This course provides an environment which allows the student to continue to receive instruction in the use of radiographic equipment and performance of radiographic procedures within the clinical environment.
RAD 201	Radiation Biology	2.0	This course provides instruction in the principles of radiobiology and protection. It emphasizes procedures that keep radiation exposure to patients, personnel, and the population at large to a minimum.

RAD 205	Radiographic Pathology	2.0	This course provides a survey of disease processes significant to the radiographer including etiology, diagnosis, prognosis, and treatment
RAD 175	Applied Radiography III	2.0	This course provides the student the clinical education needed for building competence in performing radiographic procedures within the clinical environment
RAD 225	Selected Topics	2.0	This course includes instruction in necessary areas as specified by the Advisory Committee.
RAD 230	Radiographic Procedures III	3.0	This course provides instruction in special radiographic procedures.
RAD 235	Seminar I	1.0	This course provides instruction in selected areas of radiography that are unique or new to the field.
RAD 236	Radiographic Seminar II	2.0	This course provides instruction in selected areas of radiography that require additional study or application.
RAD 256	Advanced Radiography I	6.0	This course provides an environment for the student to function more independently while performing routine procedures in a working radiology department...while also being more involved in advanced radiographic procedures.
RAD 268	Advanced Radiography II	8.0	This course provides an environment which allows the student to improve competence in routine radiographic examinations, as well as advanced procedures...while containing to build self-confidence in the clinical atmosphere.
RAD 276	Advanced Radiography III	6.0	This course provides an environment which allows the student to gain the self-confidence and competence necessary in routine and advanced radiographic procedures in the clinical environment.
RAD 282	Imaging Practicum	2.0	This clinical course provides an opportunity for the Radiography student to explore career opportunity in Radiology and Advanced Imaging modalities.



Potential Radiologic Technology Students...please consider the following information to see if Rad Tech is the right curriculum for you. Did you know. . .



- There are “program ready” courses required for the Rad Tech curriculum.
- You must satisfy these requirements **before** becoming program ready. Courses include...BIO 210/211, ENG 101, MAT 102, and PSY 201
- You must maintain a 2.5 GPA to be considered program ready.
- When your name comes up for the program entry, you will be required to have a medical exam and immunizations.

- To complete the program you are considered a full time student...this requires that you complete a prescribed set of courses each semester.
- The time commitment for the program is very demanding, a lot of time is spent in clinicals each semester.
- The clinical rotation may require you to spend some hours on second shift and weekends.
- It is difficult to complete the program while holding a full-time job.
- Some clinical sites are out of the Greenwood area...travel is required for these clinical sites. You will need reliable transportation.
- You must average 75 or higher on every curriculum course to remain in the program. If you fail a course, you will not be allowed to continue but will have to place your name back on the waiting list for re-entry.
- You cannot enter the program more than two times.

- Program expenses are published under separate cover and are available to you at any time.
- Job placement information is available through the Placement Office, even though our placement record has been high, jobs are not guaranteed.
- Students must demonstrate performance competency (clinical internships) and the ability to pass exit (registry type) exams before graduating from the program.
- Students completing the program may choose to specialize or transfer to a four-year program of study for a BS degree.
- That you will be responsible for patient care which includes lifting, bending, stooping, giving enemas, etc.
- That you will be exposed to various body fluids, which may include vomit/blood/urine/feces as in any other health related program.
- That CPR certification, annual flu and tuberculosis vaccines, other required vaccines/titers...and various clinical site on-line orientation components are required before you can go to clinicals.
- That there is a uniform requirement for clinicals.

If you have questions/need additional information about the program, please contact the Program Coordinator...Lee Balentine at (864) 941-8523.

# RADIOLOGIC TECHNOLOGY PROGRAM APPROXIMATE FEE SCHEDULE

RAD 152 (Fall)	Insurance	\$25.00	
	Film Badge	\$35.00	
	SCSRT	\$35.00	
	Uniform	<u>\$270.00</u>	(includes shoes and 2 sets of radiographic markers)
	<b>TOTAL</b>	<b>\$365.00</b>	
RAD 165 (Spring)	Insurance		\$25.00
	Film Badge		\$40.00
	<b>TOTAL</b>		<b>\$65.00</b>
RAD 256 (Fall)	Insurance	\$25.00	
	Film Badge	\$40.00	
	<b>TOTAL</b>	<b>\$65.00</b>	
RAD 268 (Spring)	Insurance		\$25.00
	Film Badge		\$35.00
	<b>TOTAL</b>		<b>\$60.00</b>

## Additional Costs:

Tuition:	Dependent on county of residence
Graduation Gown:	\$50.00
One-way CPR mask:	\$20.00
CPR book/certification	\$15.00
Background check/drug screen:	\$107.75

Physical Exam/Immunizations:      Dependent on student health care provider

		<b>FALL</b>	<b>SPRING</b>	<b>SUMMER</b>
Cost of books	(1 <sup>st</sup> year)	<b>\$500.00</b>	\$200.00	\$200.00
	(2 <sup>nd</sup> year)	\$150.00	\$100.00	\$125.00

## **Radiologic Technology Clinical Dress Requirements (Revised 2015)**

- Basic uniforms will be worn...white scrub tops w/navy blue scrub pants.
- Embroidered, in navy blue, above the left breast will be...

**Piedmont Technical College (Logo)  
Division of Health Science  
Student**

- White “clinical” shoes or white tennis shoes (minimal colors, stripes accepted) will be worn. No “open toe” shoes/Crocs are permitted.
- White/navy blue hose, knee highs, or socks should be worn.
- White undergarments (black/tan where appropriate) should be worn. No patterned/inappropriate undergarments should be worn (bikini, lace, etc). It is recommended that you wear a white undershirt, or similar undergarment, under scrub top.
- If earrings are worn, they must be small and plain (gold, silver, pearl), and not hang below the earlobe. No other body piercings, including tongue, are allowed.
- Jewelry should be kept to a minimum.
- Tattoos must be covered.
- Student/hospital IDs must be worn at all times.
- Use moderation with regard to make-up, nail polish, lipstick, etc.
- Fingernails should be trimmed to no more than finger length (end of finger).
- Fake/decorative fingernails are prohibited.
- The use of cologne, perfume or scented lotions is discouraged.
- Hair color should match naturally occurring colors (blond, brown, black, red/auburn).
- If your hair falls over your face when you lean forward, it must be pulled back/up.
- Film badges must be worn at all times.
- You must have your personalized film markers with you at all times.
- Keep your uniform clean and wrinkle free, and your shoes clean and polished, as they readily identify “soiled areas”.
- You must adhere to the dress codes at each clinical site...if unsure, ask!
- Do not report to clinical out of uniform!
- Look and act professional at all times!

**IF YOU HAVE NOT FOLLOWED THE DRESS REQUIREMENTS, AS STATED ABOVE, WHEN YOU REPORT TO A CLINICAL SITE...YOU MAY BE ASKED TO LEAVE, AND POSSIBLY COUNTED ABSENT FOR THE DAY.**

## Piedmont Technical College

### **Pregnancy Policy: Student**

Revised: June 2017

Any female student who suspects that she is pregnant or who has confirmed pregnancy has the option of whether or not to inform the Program Director or Clinical Coordinator. If she chooses to inform the Program Official, it must be in writing. In the absence of the voluntary written disclosure, the student cannot be considered pregnant. However, it is recommended to inform the Program Official so appropriate precautionary procedures can be taken to protect the mother and fetus. The student has the right to rescind the disclosure at any time during the pregnancy.

Under no circumstances may a pregnant student hold a patient or image receptor for an examination. A pregnant student or employee must wear an extra fetal badge, which will be worn at the waist level at all times. During fluoroscopic exams the fetal badge must be worn under the lead apron.

If a pregnant student opts out of performing fluoroscopy, OR procedures, or mobile exams during the pregnancy, arrangements will be made for the student to complete these competencies prior to graduation. If a pregnant student requires a leave of absence from clinic, she will be allowed to make up the missed time. Faculty will schedule the make-up-time.

The Joint Review Committee on Education in Radiologic Technology (JRCERT) requires a program to publish and make known to enrolled females the Nuclear Regulatory Commission (NRC) regulations regarding the declared pregnant student (NRC Regulatory Guide 8.13)

A program's pregnancy policy must allow a female student the option of whether or not to inform the program officials of her pregnancy, it must be in writing and indicate the expected date of confinement (delivery). In the absence of the voluntary, written disclosure, a student cannot be considered pregnant.

If a student chooses to disclose her pregnancy, she must have the option of continuing the educational program without modification of interruption. Other options can include modification in clinical assignments, leave of absence from clinical assignments, and/or leave of absence from the program. The pregnant student will be allowed to make an informed decision based on her individual needs and preferences.

The National Council on Radiation Protection and Measurements (NRC) recommends that the Dose Equivalent Limits (DEL) to the embryo/fetus from occupational exposure to the expectant mother should be limited to 0.25mSv (0.025 rem) or 225 mr. for the entire gestation period and cannot exceed 25 mr. in any specific month. It is recommended by the NRC that persons involved in the occupation should notify the supervisor immediately if pregnancy is suspected.

**In keeping with the Federal recommendations, the following steps should be taken if a student suspects that she is pregnant.**

1. Declare pregnancy immediately to the Program Official; who will then review the program pregnancy policy with the student.
2. Sign the Declaration of Pregnancy Form.
3. Student may withdraw the Declaration of Pregnancy at any time; the withdrawal of declaration must be documented in writing.

**If continuing in full-time status, the student must abide by the following:**

1. Strict adherence to ALL safety precautions for protection purposes.
2. Submit statement(s) from the physician as to any changes or problems in the pregnancy.
3. Wear two (2) personnel monitoring devices: one on the collar and one on the abdomen for fetal monitoring (the second monitoring device (fetal badge) must be purchased from the college upon declaration of pregnancy). The Radiation Safety Officer, Program Director and the student will monitor readings closely and will be subject to immediate leave of absence from the clinical environment if at any point the Radiation Safety Officer deems it necessary.
4. At any time, the student feels they are working in an unsafe area or under conditions they feel detrimental to them self or fetus, they should stop immediately and report to the Clinical Coordinator or Clinical Instructor.

5. At no time and for any reason will the pregnant student place herself in the primary radiation field (no holding a patient or an image receptor during an exposure).
6. During the clinical experience, the student must adhere to the pregnancy policy of the clinical affiliate.

**Voluntary withdrawal from the Radiologic Technology Program**

1. The student will be required, upon return, to complete all clinical competencies, rotations and didactic (classroom) work missed or not completed prior to and during her maternity leave.
2. The student must complete, upon return, ALL requirements for graduation, including length of time in the program, required courses and clinical competencies and rotations. No degree will be issued until all requirements have been successfully met.
3. Each withdrawal and return to the program will be assessed on a case by case basis.

**Piedmont Technical College Declaration of Pregnancy:**

I, \_\_\_\_\_, (printed name) do hereby make this voluntary declaration of Pregnancy. My estimated delivery date is \_\_\_\_\_Month/Day/Year  
It has been explained to me that this declaration is voluntary. By declaring my pregnancy I understand that piedmont technical College radiologic Technology Program must take precautions to ensure that the total fetal/embryo gestational dose does not exceed .25mSv (0.025 rem/ 25 mr) per month. This requires wearing a separate personnel monitoring device to monitor the fetus/embryo exposure. I have read and understand the published program pregnancy policy. I also understand that I have the right to withdraw the Declaration of Pregnancy at any time.

\_\_\_\_\_  
Student Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Program Director Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Clinical Coordinator Signature:  
Fetal Badge Ordered: Date\_\_\_\_\_

\_\_\_\_\_  
Date:  
Initials:\_\_\_\_\_

**Withdrawal of Voluntary Declaration of Pregnancy**

I, \_\_\_\_\_, (printed name) do hereby withdraw this voluntary declaration of pregnancy as of \_\_\_\_\_ Month/Day/Year.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clinical Coordinator Signature

\_\_\_\_\_  
Date



## Radiologic Technology Radiation Protection Policy

### HOLDING PATIENTS FOR AN EXAMINATION:

Under no circumstances should a student hold a patient or an image receptor during a radiographic procedure. This includes exposures made during mobile examinations.

Students are required to have with them (at all times) the following when in a clinical/externship environment:

- A. Identification...**Students are required to wear appropriate identification any time they are at a clinical/externship site. Proper identification includes any clinical site student ID (if required) and their PTC student ID, at all times. Student who do not have proper identification will be removed from the clinical site until they conform to policy, and must not return until properly attired. Time missed will be counted as a clinical absence and must be made up before the end of the semester.

If a name tag is lost or broken, students are to replace it within seven workdays (at their expense).

- B. Markers...**Students are required to have initialed radiographic markers when reporting to a clinical/externship site. It is the student's responsibility to replace lost markers within two (2) weeks (at their expense). Each student will adhere to the Clinical Education/Externship Site's policy on the use of initialed ID markers.

- C. Dosimetry Badge (OSL)...**IT IS REQUIRED BY LAW THAT ALL PERSONS WORKING WITH OR AROUND IONIZING PRODUCING X-RAY MACHINES AND/OR RADIOACTIVE MATERIALS WEAR CURRENT DOSIMETRY MONITORING DEVICES/BADGES (DOSIMETRY BADGE POLICY). Dosimetry badge monitors are provided to you in accordance with existing state (DHEC) and federal regulations, which require that you wear it when working in areas where potential radiation exposure may occur. OSL's should be worn on the waist or collar at all times. During fluoroscopic exam the OSL is to be worn outside the lead apron. The monthly reports regarding your exposure become part of your permanent record and you are required to review and initial monthly in private and/or upon your request. If applicable and you declare your pregnancy you will be provided a fetal radiation monitor in addition to your regular radiation dosimeter. When you leave Piedmont Technical College, be sure to request a copy of your exposure record to take with you. You may also request that a copy be sent to your next employer. Dosimetry badge limits are set at a monthly threshold of 0.25mSv or 25 mr. If this dose limit is exceeded, the student will be counseled by the Clinical Coordinator to correct the deficiencies. Any student exceeding two consecutive quarterly dose limits will require written notification to the Depart of Health and Environmental Control (DHEC) and could result in disciplinary action.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clinical Coordinator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Coordinator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean of Health Science Signature:

\_\_\_\_\_  
Date:

## CLINICAL PLAN OF EDUCATION

**RATIONALE:** The primary aim of this entire curriculum is to prepare an individual to take the national board examination and for employment...that is educated in the professional, medical, technical, and patient care components of radiography. Of all the components, patient care should be the most important...without good patient care skills, the entire profession suffers.

The majority of a radiographer's time is spent on performance of radiographic and fluoroscopic examinations. In order to meet this criteria, students must gain competence/confidence in radiographic procedures. This includes not only routine radiographic examinations, but also exposure to the newer techniques and technology of radiography.

During the clinical phase of the program, the student will have an opportunity to rotate through each facility associated with the program...

- Self Regional – Main X-ray/Surgery/ER/Montgomery Center
- Self Regional - Imaging Center
- Self Regional – Orthopedic Associates of the Lakelands
- Self Regional – Tower Pointe Imaging
- Abbeville County Memorial Hospital
- Newberry County Memorial Hospital
- Greenville Hospital Systems/Laurens County Hospital
- Edgefield County Hospital

Additionally, students will have an opportunity to rotate through the areas listed below during the course of the clinical portion of the program at various clinical sites.

- Diagnostic Procedures (General)
- Diagnostic Procedures (Fluoroscopic)
- Mobile / Surgical Radiography
- Second Shift (if needed)
- Weekend (if needed)
- Special Procedures
- Computed Tomography
- MRI
- Nuclear Medicine
- Radiation Therapy
- Ultrasound
- ER
- Surgery

## **Radiologic Technology Clinicals**

Satisfactory clinical evaluations must be maintained in all clinical assignments. Clinical instructors may recommend to the Program Coordinator a probationary status for a student not performing to expectations in clinical.

Clinical instructors may also recommend to the Program Coordinator that a student be dismissed from the program for failing to meet clinical requirements.

Clinical Courses:	RAD 152	RAD256
	RAD165	RAD268
	RAD 175	RAD276
	RAD 282	

Grading Criteria: The lowest numerical grade for any RAD clinical course is 75. In clinicals, if a student fails to demonstrate competency on procedures (practical or critique portion) on the first attempt, he/she must successfully remediate that procedure twice before being allowed a second attempt at that grade. Each attempt has a 10 point deduction (see Syllabus Remediation Policy). Incomplete work for the semester will result in an "I" which becomes an "F" if not made up within 30 days at the beginning of the next semester.

## CLINICAL GRADING CRITERIA OVERVIEW

### RADIOLOGIC TECHNOLOGY

#### STAGE I (Freshman Spring/Summer Semesters)

After demonstrating competence in a laboratory environment, the student (**under direct supervision of staff radiographers**) will perform exams until he/she feels comfortable enough to perform that exam alone. When the student feels they have become proficient in a procedure, they may ask a registered technologist for a procedure grade on that exam. Once a grade is requested, the student must demonstrate competency by meeting the criteria stated on the Psychomotor Evaluation. After two (2) successful grading attempts on any given procedure, the student may schedule time with an instructor to critique that grade. If a student fails to meet the stated criteria for either the practical or critique portion of a grade, he/she must repeat that grade with passing marks to show competency. Grades are not recorded until they are “critiqued” by the clinical instructor/staff. If a student receives a score < 75 on the critique or a failing grade on the practical, they must successfully complete remediation (Remediation Policy) before being allowed to attempt that procedure grade again. If the student is unsuccessful on the next grade attempt, they will receive a “D” for the course and be unable to proceed in the program (see Grading Policy). Psychomotor Evaluations (grades) may be conducted by all registered radiographers, with a minimum of one year experience.

#### STAGE II (Senior Fall Semester)

As the student progresses through the program, they begin to gain the experience and knowledge needed to perform most procedures with only **partial supervision** by a registered technologist.

#### STAGE III (Senior Spring/Summer Semesters)

At this stage, the student (**under minimal supervision**) should be able to perform any procedure that presents itself in the clinical environment. Once a student has demonstrated competence on every mandatory procedure (including critique) in any given category, their instructor will randomly select one procedure (clinical setting) from said category and have them demonstrate competence one final time. If a student receives a score < 75 on the critique or a failing grade on the practical, they must successfully complete remediation (Remediation Policy) before being allowed to attempt that procedure grade again. If the student is unsuccessful on the next grade attempt, they will receive a “D” for the course and be unable to proceed in the program (see Grading Policy).

# **SUPERVISION OF STUDENTS**

## **RADIOLOGIC TECHNOLOGY PROGRAM**

### **COMPLETE SUPERVISION**

Students who fall under this category are in Stage I of competency evaluation.

This level of supervision requires that the Radiographer working with the student...

- Perform patient assessment to determine the appropriate level of student participation.
- Observe the student while he/she reviews order, prepares room, selects proper imaging plate (if needed), positions the patient, maneuvers imaging equipment, places individual markers, and shields patient.
- Observe the student while he/she selects exposure factors, sets controls, and makes the exposure.
- Evaluates the radiographs.
- Assists the student with any repeat radiograph.
- Offers constructive criticism if warranted.

### **PARTIAL SUPERVISION**

Students who fall under this category are in Stage II of competency evaluation. This level of supervision requires that the Radiographer:

- Assists student with patient assessment.
- Be available to the student if help is needed.
- Evaluates radiographs along with student.
- Is present during any repeat radiograph.
- Offers constructive criticism if warranted.

### **MINIMAL SUPERVISION**

Students who fall under this category are in Stage III of competency evaluation. This level of supervision requires that the Radiographer:

- Be available to the student for consultation/guidance regarding any area of the x-ray process.
- Approves corrective measures for repeat radiographs.

## **SIMULATION POLICY**

1. If, for some reason, you have not had an opportunity to get the required two procedures (1 grade) on certain elective (E) procedures by the end of the Spring Semester of your senior year...with the Clinical Coordinator's approval, you will have an opportunity to simulate that procedure.
2. Simulations will consist of the following:
  - a. Positioning of a classmate or manikin on that particular procedure.
  - b. An actual x-ray will be made if the manikin is used.
  - c. Film evaluation/critique will be conducted at the time the simulation is done.
  - d. The same (psychomotor) evaluation that is used on an actual procedure will be used on simulations.
  - e. Grading criteria that is used on an-actual procedure will be used on simulations.

## INFORMATION/POLICIES

### Didactic and Clinical

#### STUDENT RESPONSIBILITIES:

- Understand the college's attendance policy and make-up procedures for each course.
- Understand the rationale that active participation is necessary to accomplish the learning outcomes of the course.
- Understand the importance of attending class/clinical, and being prompt.
- You must have the clinical coordinator's permission to leave a clinical site early.
- Promptly communicate to the course instructor any problems affecting your attendance to class/clinical or change in enrollment status.
- Provide verification of reason for class absences if requested by an instructor.
- Promptly communicate to the course instructor any change in personal contact information.
- Attend class/clinical (as scheduled) on a regular basis.
- Be committed to completing class work and fulfilling class/clinical obligations.
- Show respect for the instructor and other students, communicate concerns clearly, and use appropriate grievous complaint channels should a misunderstanding occur.
- Students are responsible for work missed and are expected to complete all assignments on time.
- If you want a clinical grade on a particular procedure, you must ask a technologist to grade you **BEFORE** attempting the procedure. Under no circumstances should you ask a technologist for a grade **AFTER** you have attempted the procedure!
- Technologists are supposed to grade/evaluate you privately, in order to preserve the integrity of the program. Under **NO** circumstances are you to approach a technologist about a grade/evaluation. If evidence is provided that you have...the grade/evaluation will be thrown out and disciplinary action will follow.
- The clinical instructor/staff will not accept any grades/evaluations from students, only from clinical site staff...and placed in a sealed envelope.
- The clinical instructor has the right to evaluate any grade given to a student, and may require the student to demonstrate competency on that procedure again.
- A staff technologist/instructor must assist a student with all repeat exposures, regardless of what clinical stage the student is in.
- Students are not eligible to receive monetary compensation during any clinical education experience.
- Students may volunteer (minimum 4 hrs.) at a clinical site during non-clinical scheduled time if they wish...the Clinical Coordinator will approve receiving grades during that time.
- Food/drinks are not allowed in the classroom, and only in designated areas at clinical sites...ask.
- Cell phones, and other multi-media devices, must be turned "off" while in the classroom and in x-ray areas at clinical sites unless permission is given otherwise. If they go off or you are seen checking them, you could receive a "0" for the day (class) and/or asked to leave a clinical site.
- During testing, no cell phone calculator allowed.

*Note: It is inappropriate for students to use cell phones (or other multi-media devices) during any class, clinical, or laboratory activity, unless permission to do so is granted. Students who refuse to abide by this policy will be subject to the sanctions of the South Carolina Student Code of Conduct.*

## INFORMATION/POLICIES (continued)

It is the policy of Piedmont Technical College to allow students to use computer resources for educational purposes or for conducting college business, such as registration or processing financial aid applications. Students who use the computer resources for any other activity deemed to be inappropriate will be asked to suspend such activity. Continued inappropriate use may lead to disciplinary action according to the South Carolina Student Code of Conduct.

All instructors, as well as administrators, have express authority for general supervision of student conduct. The Vice President for Student Development and the Associate Dean of Students Services will recommend methods of handling cases of alleged misconduct, according to the Student Code for the South Carolina Technical College System.

The Student Code of Conduct can be found in your college Student Handbook.

*Note: For additional information on school/program policies, review your D2L Course Syllabus, Course Information, and Course Overview each semester.*

### ATTENDANCE EXPECTATIONS (Clinical):

Students are expected to attend clinicals as scheduled. Maintaining good attendance is very important, as it provides you with the only opportunity to gain the experience necessary to complete competencies and achieve mastery of clinical procedures. Clinical attendance is mandatory...If you realize you are going to be late, call the clinical site and Clinical Coordinator (or designee) prior to reporting time. Repeatedly failing to do so may result in you having to withdraw from the course. Clinical staff contact information...

Bil Heath	864-992-7699	Cell
Dana Long	864-993-8374	Cell
SRH Office	864-725-4793	

*Note: If you cannot reach one of the clinical instructors, contact...Lee Balentine*  
864-941-8523 PTC  
864-993-7232 Cell

The maximum number of allowed clinical absences (avoidable/unavoidable) varies by semester...it is explained in each course syllabus. If you repeatedly miss clinicals, an Early Alert will be started and you will be counseled with in an effort to get/keep you on tract. If you continue to miss clinicals, you may have to withdraw yourself from the program. There may be certain circumstances in which a student may be absent for a specified length of time...it will be mutually agreed upon between PTC, the Program and Clinical Coordinators, and the student.

Lateness/tardiness will not be tolerated. Arriving at a clinical site < 30 minutes late is considered tardy...3 tardies = an absence. Arriving > 30 minutes late will be considered an absence for the day unless the Clinical Coordinator (or designee) has been notified beforehand. Leaving a clinical site early (w/o proper permission or prior notice) is unacceptable and may result in disciplinary action. Students arriving early



to a clinical site cannot expect to leave early unless they have the Clinical Coordinator's approval. All absences will be made up within two weeks of the day missed unless the Clinical Coordinator approves otherwise....the Clinical Coordinator will approve date, time and place of make-up. The Clinical Coordinator may request an "excuse" for the absence at any time. There will be no "make-up" time approved after the last day of clinicals for that semester.

Whenever possible, appointments (medical/dental/other) should be scheduled during non-class/clinical time...if this is not possible, consult with your instructor for options. In case of inclement weather, please follow the college/program guidelines. Announcements are made on the PTC website and local radio/TV.

## **RADIOGRAPHY LAB POLICY/PROCEDURES**

The following policies and procedures will be adhered to regarding radiography labs:

1. The criteria used for competency check-off in clinicals will apply to lab check-offs.
2. There are five (5) standards that *must* be adhered to in lab check-off. *Automatic failure (zero) will result if the following are not demonstrated:*
  - a. Demonstrate knowledge of proper shielding
  - b. Use/position lead markers correctly.
  - c. Direct CR properly and align w/ bucky tray.
  - d. Position patient/body part correctly.
  - e. Know how to do the procedure.
3. Procedures (check-off) must be completed with a grade of 75 or better. You will have 3 attempts at each procedure, but there will be a 10 point deduction for the 2<sup>nd</sup> attempt and another 10 point deduction for the 3<sup>rd</sup> attempt. If you are unsuccessful after the third attempt, you will receive a "D" for that unit lab and be unable to proceed in the program.  
  
*Note: You are required to seek additional instruction (remediation) for lab deficiencies between attempts. It is your responsibility to correct any deficiencies, either by additional didactic work or lab practice. It is your responsibility to recruit an instructor for additional practice.*
4. Lab check-offs must be performed on the day scheduled, unless prior notification is given to the instructor. Failure to do so will result in a "zero" for that lab check-off.
5. It is your responsibility to re-schedule a missed lab check-off within one (1) week or you will receive a zero for that unit lab.
6. All equipment must be handled with care. No eating or drinking near equipment. Any defective or broken equipment must be reported to the instructor.
7. All students are responsible for cleaning up after each lab session. The instructors are not substitutes for housekeeping/mothers. Discard any papers or disposable equipment/supplies properly before leaving the lab. Make sure all equipment is turned off and returned to its proper place before leaving.

- 8. Horseplay of any kind will not be tolerated.**
- 9. Needles (if used) should not be recapped! All sharps should be disposed of in the puncture proof containers provided.**
- 10. When positioning patients, always follow safe lifting guidelines.**
- 11. When handling oral/IV contrast, or any other liquid substance involved with radiographic procedures...students should wear gloves and goggles.**
- 12. All liquid substances will be disposed of according to MSDS guidelines.**
- 13. If a needle stick occurs, your instructor must be notified immediately and an incident report filled out.**
- 14. Under no circumstances will a student x-ray or stick another student.**

### **Quality Assurance Plan:**

- > The radiographic unit will meet DHEC requirements necessary to pass-yearly inspections.
- > The radiographic unit will be calibrated yearly.
- > The processor will be cleaned routinely, with external maintenance performed bi-annually.
- > Appropriate radiation warning signs will be posted.
- > Technique chart will be posted.
- > Screens and cassettes will be cleaned on a quarterly basis and documentation of evidence posted.
- > Warnings about shielding requirements will be posted.
- > Lead aprons and other protective shields will be available.

South Carolina Radiation Quality Standards Association  
PO Box 7515 Columbia, South Carolina 29202  
Phone (803) 771-6141 Fax (803) 771-8048 [www.scrqsa.org](http://www.scrqsa.org)


## **PTC Radiographic Lab Policy**

**Radiology students must follow the guidelines below:**

- **Radiology Students must have permission from a Radiology Program Faculty before entering the Radiology Lab**
- **Students must notify a Radiology Program Faculty member their intention of entering the Radiology Lab for practice with equipment, competencies or general patient care techniques.**
- **The door to the energized lab must be closed during all exposures**
- **Students must wear their Radiation Dosimeters in the energized lab while practicing and making exposures**
- **A Radiology Program Faculty member must provide supervision when a Radiology Student is making an exposure.**
  - **Radiology Students will not make an exposure unsupervised**
- **Radiology Faculty and Students are not allowed in the energized lab room when an exposure is being made.**



# NON-PATIENT SCREENING FORM

	<p>The MR system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system 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 MR environment or MR system. Be advised, the MR system magnet is ALWAYS on.</p>												
<p>Date _____</p>													
<p><input type="checkbox"/> Team Member                      <input type="checkbox"/> Student                      <input type="checkbox"/> Visitor                      <input type="checkbox"/> Family Member</p>													
<p><b>Check applicable boxes if present:</b></p>													
<table border="0"> <tr> <td><input type="checkbox"/> Intracranial aneurysm clip</td> <td><input type="checkbox"/> Dorsal column (spinal cord) neurostimulator (TENS)</td> </tr> <tr> <td><input type="checkbox"/> Capsule Endoscopy (Camera)</td> <td><input type="checkbox"/> Vagus Nerve Stimulator</td> </tr> <tr> <td><input type="checkbox"/> Cochlear implant or inner ear metallic prosthesis</td> <td><input type="checkbox"/> Inferior vena cava filter umbrella</td> </tr> <tr> <td><input type="checkbox"/> Retained iron filings in the eye</td> <td><input type="checkbox"/> Cardiac valves; both metallic and porcine</td> </tr> <tr> <td><input type="checkbox"/> Cardiac Pacemaker</td> <td></td> </tr> </table>				<input type="checkbox"/> Intracranial aneurysm clip	<input type="checkbox"/> Dorsal column (spinal cord) neurostimulator (TENS)	<input type="checkbox"/> Capsule Endoscopy (Camera)	<input type="checkbox"/> Vagus Nerve Stimulator	<input type="checkbox"/> Cochlear implant or inner ear metallic prosthesis	<input type="checkbox"/> Inferior vena cava filter umbrella	<input type="checkbox"/> Retained iron filings in the eye	<input type="checkbox"/> Cardiac valves; both metallic and porcine	<input type="checkbox"/> Cardiac Pacemaker	
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<input type="checkbox"/> Retained iron filings in the eye	<input type="checkbox"/> Cardiac valves; both metallic and porcine												
<input type="checkbox"/> Cardiac Pacemaker													
<p><b>The following metallic objects or devices are permissible. Check applicable boxes if present.</b></p>													
<table border="0"> <tr> <td><input type="checkbox"/> Metallic dental work (amalgam fillings, crowns, bridges, and plates). Any removable dental work should be removed prior to the procedure.</td> <td><input type="checkbox"/> Coronary bypass clips and markers</td> </tr> <tr> <td><input type="checkbox"/> Metallic joint prosthesis such as total hip implant.</td> <td><input type="checkbox"/> Hearing aids</td> </tr> <tr> <td><input type="checkbox"/> CU-7 or other metallic intrauterine devices</td> <td><input type="checkbox"/> Intracranial shunt</td> </tr> <tr> <td><input type="checkbox"/> Standard surgical clips</td> <td></td> </tr> </table>				<input type="checkbox"/> Metallic dental work (amalgam fillings, crowns, bridges, and plates). Any removable dental work should be removed prior to the procedure.	<input type="checkbox"/> Coronary bypass clips and markers	<input type="checkbox"/> Metallic joint prosthesis such as total hip implant.	<input type="checkbox"/> Hearing aids	<input type="checkbox"/> CU-7 or other metallic intrauterine devices	<input type="checkbox"/> Intracranial shunt	<input type="checkbox"/> Standard surgical clips			
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<input type="checkbox"/> CU-7 or other metallic intrauterine devices	<input type="checkbox"/> Intracranial shunt												
<input type="checkbox"/> Standard surgical clips													
	<p>WARNING: Certain implants, devices, clothing or objects may be hazardous to you and/or may interfere with the MR procedure (i.e. MRI, MR angiography, functional MRI, SR spectroscopy). <u>Do not enter</u> the MR system room or MR environment if you have any questions or concerns regarding an implant, device or object. Consult the MRI Technologist or Radiologist BEFORE entering the MR System room. The MR system magnet is ALWAYS on.</p>												
<p>Remove <u>all</u> metallic objects before entering the MR environment or MR system room including hearing aids, beeper, cell phone, keys, eyeglasses, hairpins, barrettes, jewelry (including body piercing jewelry), watch, safety pins, paperclips, money clip, bank cards, magnetic strip cards, guns, coins, pens, pocket knife, nail clipper, steel toed boots/shoes, tools, and weapons of all kinds. Loose metallic objects are especially prohibited in the MR system room and MR environment.</p>													
<p><b>Please answer the following:</b></p>													
<p>1.. Do you have a tattoo? If yes, where?</p>		<p>Yes</p>	<p>No</p>										
<p>2. Is there any shrapnel in your body? If yes, please describe location and type:</p>		<p>Yes</p>	<p>No</p>										
<p>3. Have you had brain surgery? If yes, when and what kind?</p>		<p>Yes</p>	<p>No</p>										
<p>4. Have you ever had heart surgery? If yes, when?</p>		<p>Yes</p>	<p>No</p>										
<p>5. Do you have a Trans-dermal patch?</p>		<p>Yes</p>	<p>No</p>										
<p>6. Have you ever been a metal lathe operator or sheet metal worker?</p>		<p>Yes</p>	<p>No</p>										
<p>7. Do you have any implanted device or prosthesis in your body not mentioned above? If yes, What and Where _____</p>		<p>Yes</p>	<p>No</p>										
<p>8. Are you pregnant? Do you suspect you may be pregnant?</p>		<p>Yes</p>	<p>No</p>										
<p>I hereby state that to the best of my knowledge the above information is accurate. I read the contents of this form and had the opportunity to ask questions regarding the information on the form.</p>													
<p>_____ Print Name</p>		<p>_____ Signature</p>											
<p>_____ Date/Time</p>													
<p>Reason for Screening (please check one)    <input type="checkbox"/> Assisting with patient    <input type="checkbox"/> Non-MRI Team Member</p>													
<p><input type="checkbox"/> Non Hospital Employee working on equipment    <input type="checkbox"/> Local Fire Fighter    <input type="checkbox"/> Other (please explain)</p>													
<p>_____ Technologist Reviewing Form</p>													
<p>QSF-RAD-MR-0016 11/22/17/Rev 0 Retain for 1 year</p>													

## **Employment of Second Year Radiography Students (Limited Practice)**

Second year radiography students enrolled in accredited radiography programs may apply for a Temporary Limited Radiography Certificate, with documentation of completion of certain clinical competency levels that meet/exceed limited ARRT Radiographer/General Requirements...and Program Director approval. The temporary certificate will be in effect for a period of two years, or until such time as the student graduates from a two-year program. At the time of graduation, the student can then apply for a Temporary Radiographer (full) Certificate which will become permanent upon successful passing of the ARRT exam.

The Temporary Limited Radiographer/General Certificate will enable the student to become employed as a radiographer, with limitations as defined in the Scope of Practice for a Limited Radiographer.

### **Requirements:**

- Documentation will include a copy of the signed competency checklist (Clinical Coordinator) and a letter signed by the Program Director stating that the student is enrolled in the program and has completed the competency levels needed for Limited Radiographer/General Licensing.

- There is \$50 application fee for the certificate.

- Upon graduation from the program, the student should apply for a Temporary Radiography Certificate. They would need to pay the \$50 application fee, complete the application and include a copy of their diploma and/or a letter from the program director.

- Upon successful completion of the ARRT Registry, the student will send a copy of their ARRT card to SCRQSA with the request to change their Temporary Radiography Certificate to a Permanent Radiography Certificate

In order to be considered for Limited Practice/General, you must meet the following criteria...

1. Have successfully completed the Fall semester of your Senior year (2<sup>nd</sup> Fall Semester).
2. Have an overall “B “ average (85 OR ABOVE) In *all* prior RAD courses.
3. Further Consideration will be based on the Clinical Coordinator’s and Program Director's recommendation.
4. Have completed select clinical competencies as listed by the ARRT...simulations for some will be considered. Some procedures may be elective procedures...the completion of these competencies will be reviewed by the Clinical Coordinator.
5. Be graded on one random procedure from each of the above categories. And all of the additional procedures by your instructor. You must pass these with a “B “ (85 or above).
6. Complete a temporary application (obtained from Program Director) and a fee of \$50 must accompany this application.
7. Obtain a letter from the Program Director to mail along with the application and fee.

*Note: Make copies of everything that you send in and keep with you at all times until you receive your provisional certificate. Keep original copy of your certificate and give a copy to your supervisor and program director.*

## DIVISION OF HEALTH SCIENCE PROFESSIONAL STANDARDS

Students are expected to adhere to all policies and procedures outlined in the Student Handbook. Any violation of these professional standards may result in removal from the Radiologic Technology Program.

The following are examples of unprofessional behavior, and or inappropriate student interactions (not “all inclusive”):

- Being expelled from a clinical/experiential site due to unprofessional behavior
- Failure to attend the assigned clinical/experiential rotation without instructor’s knowledge and consent
- Leaving an assigned clinical/experiential site without consent and knowledge of the instructor
- Willful failure to comply with clinical/experiential site policy and procedure
- Falsifying signatures
- Cheating

The following is a list of behaviors, which will not be tolerated and will result in a student being charged with misconduct (not “all inclusive”):

- Irresponsible conversation at various clinical sites (answering questions that you are not qualified to answer and/or improper discussions related to personal matters)
- Lack of consideration for others (loud talking during tests, between classes, etc.)
- Idle use of spare time (sitting in the corner between procedures gossiping when you could be studying, reviewing, simulating procedures, doing film critiques, etc.)
- Leaving assigned area (leaving x-ray rooms, main department for out-patient, etc.) w/out permission
- Negative attitudes (grumbling and complaining to each other instead of going through proper channels)
- Procrastination of assigned tasks (grades, critiques, reports, etc.)
- Adhering to travel times for distant clinical sites from Piedmont Technical College/Greenwood Campus (Abbeville = 200 min each way, Laurens = 45 min, Newberry = 1 hour)
- Scheduling conflicts for students with part time jobs (**you must schedule "work-time" around clinical schedules not vice versa**)
- "I've got one of those" is not to be a part of your vocabulary! Do everything you are given an opportunity to do!
- Not following the chain of command when reporting a complaint/grievance
- Being disrespectful/discourteous to instructors (making smart or wise remarks, arguing about tests in front of the class, muttering under breath or to others in the room, etc.)
- Removing school/hospital property from the premises without permission
- Being late in keeping appointments and class attendance

- Using destructive criticism
- Not reporting any unusual incidents in the clinical area to the instructor promptly
- Repeating publicly, incidents/conversations overheard in clinicals/classroom and offering advice on medications/problems that normally require the advice of a physician or instructor
- Recommending individual physicians or suggesting a change in physicians/hospitals to anyone
- Appearing in the clinical area/classroom when the consumption of alcohol is evident
- Tobacco usage (including vaping) in non-designated areas
- Fighting or attempting bodily injury to anyone on hospital/school property, or engaging in any conduct violating common decency or morality
- Stealing
- Insubordination...including but not limited to, refusal to obey instructions or the use of abusive, profane or threatening language toward anyone
- Coercing/harassing fellow students/instructors or using insulting language toward them
- Sleeping while on clinical assignments
- Harboring disease which may endanger others
- Failure to exercise reasonable care, consideration, or courtesy in dealings with others



## Eligibility for Certification

Upon completion of the Radiologic Technology program, students will be required to sit for the American Registry of Radiologic Technologists (ARRT) Board Exam. All candidates must comply with the "Rules of Ethics" contained in the ARRT Standards of Ethics. These rules are the minimum accepted standards of professional conduct for all Registered Technologists and applicants. The Rules of Ethics are intended to promote protection, safety, and comfort of all patients.

Any conviction of a crime ***must*** be reported to the ARRT for review. Convictions include, but are not limited to...felonies, gross misdemeanors, misdemeanors (with the exception of speeding or parking violations). All alcohol and/or substance abuse related violations must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility to sit for the registry.

Individuals who have violated the Rules of Ethics ***must*** request a pre-application review of the violation in order to obtain a ruling of the impact on their eligibility for the ARRT examination. You ***must*** request a pre-application from the ARRT. The phone number is (651) 687-0048.

## **Continuance in the Radiologic Technology Program**

Because of the way the Radiologic Technology Program is designed, classes are only taught one time per year. If you are unsuccessful in a course, it will require you to withdraw from the program since you will be unable to proceed to the next sequential course. For example...Radiographic Procedures I (RAD 130.) is taught mini-A semester (Fall) and must be satisfactorily completed in order for you to begin the clinical phase of the program (RAD 152) mini-B semester (Fall). Satisfactory completion requires a grade of 75 or higher. If unsuccessful, you have the option of requesting re-admission to the program within the following year...if you are in good standing and there is space available.

Students seeking re-admission to a Health Science curriculum may audit the semester prior to the semester when the course work was taken for credit. Re-admitted students will not be required to audit classes prior to returning to the program. A student who has been suspended or has withdrawn from a Health Science program and subsequently readmitted will be subject to the current Health Science academic standards and policies. Criteria for auditing...

All courses offered in the specific curriculum during the audit semester must be taken.

Audit students are accepted in compliance with regulations of General Admission to any Health Science curriculum.

Audit acceptance is based upon availability, enrollment, and/or clinical site restrictions.

Audit students will be included in the total count of class enrollment and therefore total enrollment cannot exceed the approved student enrollment into the program.

As financial aid will not pay for auditing classes, students will be responsible for all incurred expenses. A measure of competency in the curriculum would be successfully completing all course work with a minimum of 75%. However, grades will not be adjusted or changed for previously taken class work for credit.

*Note: Health Science curriculum classes are consecutive and are only offered during specific semesters of the academic year.*

## ***Validation of Competencies for Readmission to Radiologic Technology Program***

Prior to readmission, the student may be required to do one or more of the following...or other means of validation as deemed necessary by the Program Director and Dean of Health Science. If a minimum score of 75 is not attained while validating a particular competency, be it a procedural check off or a final exam, the student will be required to audit that course at their own expense. Students also can voluntarily audit a course and forego the Validation of Competencies for Readmission procedure.

### **First Semester Readmission:**

- If unsuccessful in RAD 101 and/or RAD 102...  
Take COL 103 and/or AHS 102

For RAD 102 repeat/pass selected procedure skills assessment with a grade of 75% or higher (RAD 102 only)

Appointment with your instructor or program coordinator  
Complete math tutorial in Tutoring Center (RAD 101 only)

- If unsuccessful in RAD 130...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Upper Extremity-2  
Lower Extremity-2  
Chest-1  
Abdomen-1  
Pass RAD 101 and RAD 102 Final Exams with a minimum score of 75%  
Appointment with your clinical instructor
- If unsuccessful in RAD 152...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Upper Extremity-2  
Lower Extremity-2  
Chest-1  
Abdomen-1  
Shoulder-2  
Pass RAD 130 Final Exam with a minimum score of 75%  
Appointment with Clinical Instructor

### **Second Semester Readmission:**

- If unsuccessful in RAD 110...  
Pass Rad 152 Final Exam with a minimum score of 75%  
Appointment with Program coordinator
- If unsuccessful in RAD 136 and/or 165...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Pelvis/Hip-2                      Upper/Lower Extremity-2  
L-Spine-1                         Shoulder  
C-Spine-1                         Bony Thorax-1  
For RAD 136 and RAD 165 Final Exams with a minimum score of 75%  
Appointment with Clinical Instructor

### **Third Semester Readmission:**

- If unsuccessful in RAD 201...  
Pass RAD 110 Final Exam with a minimum score of 75%
- If unsuccessful in RAD 205...  
Pass RAD 201 Exam with a minimum score of 75%  
Appointment with Program Coordinator
- If unsuccessful in RAD 175...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Pelvis/Hip-2                      Upper/Lower Extremity-2  
L-Spine-1                         Shoulder  
C-Spine-1                         Bony Thorax-1  
Pass RAD 165 Final Exam with a minimum score of 75%  
Appointment with Clinical Instructor

#### **Fourth Semester Readmission:**

- If unsuccessful in RAD 121...  
Pass RAD 201 and 205 Final Exams with a minimum score of 75%  
Appointment with Program Coordinator
- If unsuccessful in RAD 115...  
Pass RAD 110 Final Exam with a minimum score of 75%  
Appointment with Program Coordinator
- If unsuccessful in RAD 230 and/or 256...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Skull/Facial-2      Pelvis/Hip-2  
L-Spine-1      Shoulder  
C-Spine-1      Upper/Lower Extremity-2  
Bony Thorax-1      Fluoro-2  
Sterile Tray set up  
For RAD 230...pass RAD 256 Final Exam with a minimum score of 75%  
For RAD 256...pass RAD 230 Final Exam with a minimum score of 75%  
Appointment with Clinical Instructor

#### **Fifth Semester Readmission:**

- If unsuccessful in RAD 225...  
Pass RAD 110 Final Exam with a minimum score of 75%  
Appointment with Program Coordinator
- If unsuccessful in RAD 268...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Skull/Facial-2      Pelvis/Hip-2  
L-Spine-1      Shoulder  
C-Spine-1      Upper/Lower Extremity-2  
Bony Thorax-1      Fluoro-2  
Sterile Tray set up  
Pass RAD 256 Final Exam with a minimum score of 75%  
Appointment with Clinical Instructor

### **Sixth Semester Readmission:**

- If unsuccessful in RAD 236...  
Pass RAD 225 and 268 Final Exams with a minimum grade of 75%  
Appointment with Program coordinator
- If unsuccessful in RAD 276...  
Pass selected procedure skills assessment with a grade of 75% or higher  
Upper Extremity                      Bony Thorax  
Lower Extremity                      Shoulder  
Hip    Pelvis  
Skull/Facial-2                      C-Spine  
L-Spine                                      Fluoro-1  
Sterile Tray Setup  
Pass RAD 268 Final Exam with a minimum score of 75%  
Appointment with Clinical Coordinator

## RECOMMENDATION FOR DISCIPLINARY ACTION (CLINICAL)

I am recommending the following student, \_\_\_\_\_ for disciplinary action for failing to meet clinical requirements as outlined by the Division of Health Science and this Clinical Facility.

Reason for recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Clinical Instructor: \_\_\_\_\_

Clinical Facility: \_\_\_\_\_

Action Taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Student Received Counseling: \_\_\_\_\_

By Whom: \_\_\_\_\_

Student placed on probation: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, for what period of time? \_\_\_\_\_

Formal contract issued? Yes \_\_\_\_\_

Follow-up date set? \_\_\_\_\_

Student informed of right to appeal: \_\_\_\_\_

Student initials

Student dismissed: Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, describe the final disposition of the student:* \_\_\_\_\_

DISCIPLINARY CONTRACT  
CLINICAL

Student's Name \_\_\_\_\_ P # \_\_\_\_\_

Date: \_\_\_\_\_ Curriculum: \_\_\_\_\_

Program Official: \_\_\_\_\_ Title: \_\_\_\_\_

Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action recommended to restoring student's good standing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student agrees to comply with the above action?    Yes        No

    If yes, date of follow-up appointment \_\_\_\_\_

    If no, describe action taken \_ \_\_\_\_\_

    Student informed of right of appeal? Yes \_\_\_\_\_ No

Final resolution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Warning issued to the student regarding future infractions: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Program Official's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



## RADIOLOGIC TECHNOLOGY 2<sup>nd</sup> ATTEMPT IN PROGRAM

I \_\_\_\_\_ understand that I am in my second attempt in the Radiologic Technology program at Piedmont Technical College. I am attending as an audit student. This means that I am expected to attend all classes, abide by attendance policies, complete all assignments, and pass the course with a 75 or better.

If I do not abide by the curriculum rules, I will not be allowed to continue in the Radiologic Technology Program and will not be allowed to make another attempt in this curriculum.

Student signature \_\_\_\_\_

Date \_\_\_\_\_

Instructor signature \_\_\_\_\_

Date \_\_\_\_\_

# RADIOLOGIC TECHNOLOGY

## STUDENT CLUB

### **Constitution**

#### Article I: Name

This organization shall be known as Piedmont Technical College Radiologic Technology Club.

#### Article II. Purpose

To promote the Radiography profession through group interaction working on projects and/or exchanging ideas and information that impacts the Radiologic Technology student.

#### Article III. Membership

The membership of this club shall consist of all full-time Radiologic Technology Program students at PTC. Pre-RAD students may join as Associate Members, but are not allowed to vote or hold office.

#### Article IV. Officers

The election of President, Vice President, Secretary, Treasurer, Student Council Representative, and Class Historian shall be decided by a majority of votes cast for each position (2/3 of the class must be present).

### **Rad Tech Club Officer Responsibilities/Duties**

#### **President:**

The President will preside over all meetings dealing with fundraisers, activities and various other class initiatives. This individual will maintain close liaison with the advisor(s) and instructors. The President is responsible for notifying fellow students of any schedule changes/updates on class initiatives, and appoint committee chairpersons if needed. This individual should be objective and represent the interests of the entire class. They also represent the Radiologic Technology Program at on/off - campus activities (if PTC/Club funded).

#### **Vice President:**

The Vice President (VP) will assist the President with class projects if requested, and serve on a committee(s) if needed. The VP will serve as the Pinning Ceremony Chair for the Freshman class. This person will preside over Rad Tech Club meetings and/or represent the Radiologic Technology Program in the absence of the President. The VP will step into the role of President if that position becomes vacant.

#### **Secretary:**

The Secretary will document any meetings/fundraisers and submit reports as necessary to the faculty adviser(s) or instructors. This individual will work closely with the Treasurer regarding reporting fundraiser/event activity. The Secretary will assume the role of Treasurer should that position become vacant.

**Treasurer:**

The Treasurer is responsible of keeping an accurate record of all Rad Tech Club finances in the club bank account (County Bank). This individual will work closely with the club advisor(s) regarding making bank deposits, collecting/validating monies raised, and review of account transactions/balances. The Treasurer will assist the Secretary with the coordination and reporting of fund-raising events...and will assume the role of Secretary should that position become vacant.

**Historian:**

The Historian is responsible for capturing and recording (electronically/scrapbook) their two year class "journey". This individual is responsible for taking the pictures of fellow classmates needed to create posters for clinical sites. The Historian will also create a slide presentation for viewing at their class Pinning Ceremony.

**Student Council Representative:**

The Student Council Representative will represent their class on the PTC InterClub Council (ICC). This individual is responsible for giving updates/reports to the ICC, and the SCSRT when requested, on Rad Tech Club activities. The SC Rep represents the Rad Tech Club on the SCSRT Student Board and should make plans to attend the annual SCSRT Education Board Meeting (Columbia, SC) to participate in the planning process for the SCSRT Annual State Conference. Should this office become vacant, the Vice President will be asked to assume the responsibilities. ***Note: The individual accepting this position needs to plan to attend the SCSRT Annual State Conference to assist with logistics.***

**Eligibility for Office**

To be eligible for to serve, and remain a Rad Tech Club officer, nominees must be a full-time student with a minimum "B" average.

**Term of Office**

Class officers shall serve a term of two years.

**Removal from Office**

A student may request to be removed from office at any time. The club advisor(s) may request the resignation of any class officer in the event the student fails to properly perform his/her duties, fails to maintain a 2.5 GPA, and/or unprofessional conduct.

**Filling Vacancies**

In the event of a vacancy in office, whether vacated voluntarily or involuntarily, such vacancies shall be filled in the following manner:

- President...vacancy filled by the Vice President
- Vice President...vacancy will remain vacant until the next class election
- Secretary/Treasurer...either one shall assume the role of the other
- Student Council Representative (ICC)...vacancy filled by Vice President

**Article V. The Conduct of Business**

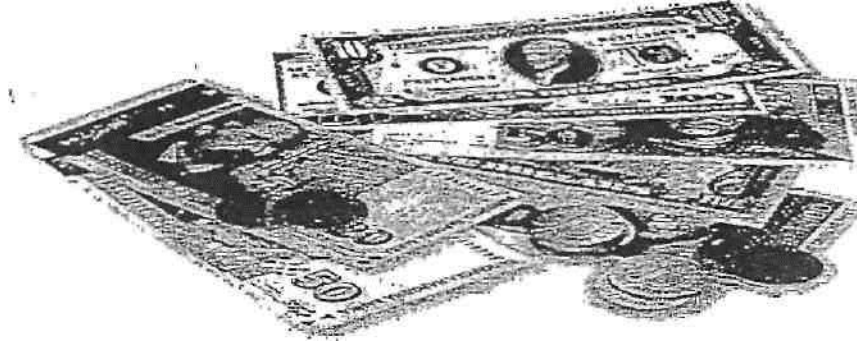
Meetings will be held monthly. Specific dates and times will be determined each semester.

Quorum...at least 2/3 of the class officers must be present for meetings before any business conducted is considered official.

**Article VI. Amendments**

Amendments to this Constitution must be presented to the club advisor(s) and class officers at least two weeks prior to a called meeting. Amendments must be approved by two-thirds of the class officers (with advisor(s) approval).

# DISTRIBUTION OF CLUB FUNDS



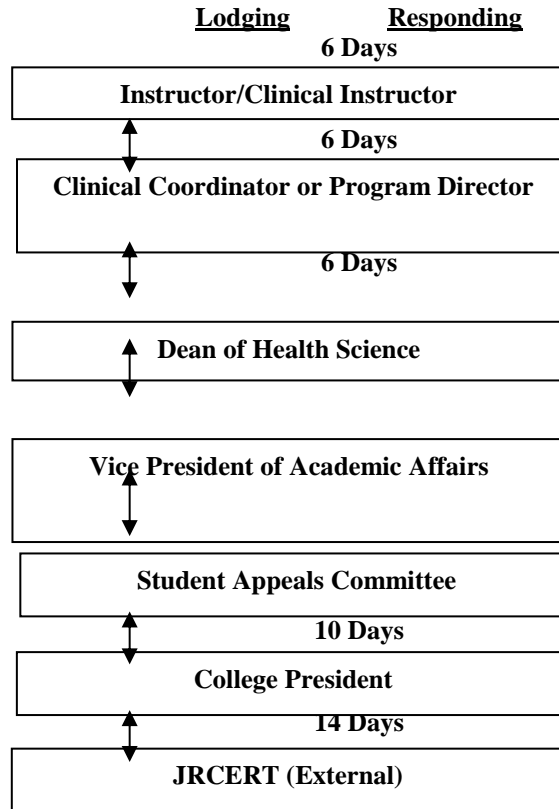
- Funds in the Rad Tech Club Account are there to primarily support the Annual Senior Class Pinning Ceremony, registration to the Annual SCSRT State Conference, and other special class initiatives the class officers feel are important...pending approval by the club advisor(s). Special initiatives may include, but are not limited to...
- Contribution to the SCSRT Scholarship Fund
- Contribution to a community charity project(s)
- Purchase of a special need item to the enhance the program
- Bereavement

*Note: At least one fund-raiser project per year is to be designated as money for special projects.*

## Academic Grievance/Complaint Due Process Procedures (Appeal Process)

\*Includes resolution of non-compliance with JRCERT Standards Procedure\*

In the event of an academic grievance/allegation of non-compliance of JRCERT/Piedmont Technical College Standards, the process listed below should be followed:



**Note: Refer to your Student Handbook for a copy of the PTC  
Grievance Form and Procedures.**

**Note: Radiology students wishing to petition the accrediting agency of the Radiologic Technology Program at  
Piedmont technical College may reach the agency at:**

JRCERT 20 N.Wacker Dr., Suite 2850  
Chicago, IL 60606-3182  
Phone/Fax: (312) 704-5300/5304  
[www.jrcert.org](http://www.jrcert.org)

**I have read/understand the Grievance Policy for the Radiologic Technology Program at Piedmont Technical College.**

**Date:** \_\_\_\_\_ **Name:** \_\_\_\_\_

## **Policy for Reporting Allegations of Non-Compliance of JRCERT Standards**

Students in the Radiologic Technology Program are provided a copy of the current JRCERT standards during the program orientation which is located in Section 4 of the Radiology Student Handbook starting on page 101. A copy of this policy is also located in Section 4 of the Radiology Student Handbook on page 100 as well.

In the event the student feels the need to report an allegation of the radiology program's non-compliance of JRCERT standards, they can lodge a complaint with the JRCERT at:

JRCERT  
20 N. Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
Phone-312-704-5300  
Fax- 312-704-5304 or  
[www.jrcert.org](http://www.jrcert.org)

A record / file of complaints and their resolutions will be located in the Radiology Program Directors Office Room 108H.

Date Revised: September 10, 2010

# **Standards for an Accredited Educational Program in Radiography**

**EFFECTIVE JANUARY 1, 2014**

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



*Joint Review Committee on Education in Radiologic Technology*

*20 N. Wacker Drive, Suite 2850*

*Chicago, IL 60606-3182*

*312.704.5300 • (Fax) 312.704.5304*

*[www.jrcert.org](http://www.jrcert.org)*

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

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

## Introductory Statement

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

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

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

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

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

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

**The submitted narrative response and/or documentation, together with the results of the on-site evaluation conducted by the site visit team, will be used by the JRCERT Board of Directors in determining the program's compliance with the STANDARDS.**



# Standards for an Accredited Educational Program in Radiography

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The program has sufficient resources to support the quality and effectiveness of the educational process.	
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The program's curriculum and academic practices prepare students for professional practice.	
<b>Standard Four: Health and Safety .....</b>	<b>47</b>
The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.	
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The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.	
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## **Standard One**

### ***Integrity***

- Standard One:**      **The program demonstrates integrity in the following:**
- **Representations to communities of interest and the public,**
  - **Pursuit of fair and equitable academic practices, and**
  - **Treatment of, and respect for, students, faculty, and staff.**

#### **Objectives:**

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

- 1.1 Adheres to high ethical standards in relation to students, faculty, and staff.
- 1.2 Provides equitable learning opportunities for all students.
- 1.3 Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.
- 1.4 Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.
- 1.5 Assures the security and confidentiality of student records, instructional materials, and other appropriate program materials.
- 1.6 Has a grievance procedure that is readily accessible, fair, and equitably applied.
- 1.7 Assures that students are made aware of the JRCERT **Standards for an Accredited Educational Program in Radiography** and the avenue to pursue allegations of non-compliance with the **STANDARDS**.
- 1.8 Has publications that accurately reflect the program's policies, procedures, and offerings.
- 1.9 Makes available to students, faculty, and the general public accurate information about admission policies, tuition and fees, refund policies, academic calendars, clinical obligations, grading system, graduation requirements, and the criteria for transfer credit.
- 1.10 Makes the program's mission statement, goals, and student learning outcomes readily available to students, faculty, administrators, and the general public.
- 1.11 Documents that the program engages the communities of interest for the purpose of continuous program improvement.
- 1.12 Has student recruitment and admission practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.
- 1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.

- 1.14 Has program faculty recruitment and employment practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.
- 1.15 Has procedures for maintaining the integrity of distance education courses.

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

### ***Explanation:***

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

### ***Required Program Response:***

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

### ***Possible Site Visitor Evaluation Methods:***

- Review of student handbook
- Review of employee/faculty handbook
- Review of course catalog
- Review of student records
- Interviews with faculty
- Interviews with students
- Interviews with staff

## **1.2 Provides equitable learning opportunities for all students.**

### ***Explanation:***

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

### ***Required Program Response:***

Describe how the program assures equitable learning opportunities for all students.

### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of master plan of education
- Review of course objectives
- Review of student clinical assignment schedules
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with clinical staff
- Interviews with students

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

***Explanation:***

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

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

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

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

Additionally, traditional programs that require students to participate in clinical education during evenings and/or weekends must assure that:

- students' clinical clock hours spent in evening and/or weekend assignments must not exceed 25% of the total clinical clock hours.
- program total capacity is not increased through the use of evening and/or weekend assignments.

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

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review listing of enrolled students in relation to clinical assignments, including evening and/or weekend, if applicable
- Review of clinical placement process
- Review of student clinical records
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with students

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

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of master plan of education
- Review of published program materials
- Review of student schedules
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students



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

***Explanation:***

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

***Required Program Response:***

Describe how the program maintains the security and confidentiality of student records and other program materials.

***Possible Site Visitor Evaluation Methods:***

- Review of institution's/program's published policies/procedures
- Review of student academic and clinical records
- Tour of program offices
- Tour of clinical setting(s)
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

### ***Explanation:***

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

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

### ***Required Program Response:***

Describe the nature of any formal grievance(s) that would jeopardize the program's ability to meet its mission.

Describe the nature of any complaint(s) that would jeopardize the program's ability to meet its mission.

Provide a copy of the grievance procedure.

Provide a copy of any formal grievance(s) resolution.

### ***Possible Site Visitor Evaluation Methods:***

- Review of institutional catalog
- Review of student handbook
- Review of formal grievance(s) record(s), if applicable
- Review of complaint(s) record(s), if applicable
- Interviews with faculty
- Interviews with students

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

***Explanation:***

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

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

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of program publications
- Interviews with faculty
- Interviews with students

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

***Explanation:***

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

***Required Program Response:***

Provide program publications that reflect program policies, procedures and offerings.

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student handbook
- Interviews with faculty
- Interviews with students

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

***Explanation:***

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

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

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

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of institutional materials
- Review of published program materials
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with Registrar
- Interviews with students

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

***Explanation:***

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

**Example:**

**Mission:**

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

**Goal: Students will be clinically competent.**

Student Learning Outcomes: Students will apply positioning skills.  
Students will select technical factors.  
Students will utilize radiation protection.

**Goal: Students will demonstrate communication skills.**

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

**Goal: Students will develop critical thinking skills.**

Student Learning Outcomes: Students will adapt standard procedures for non-routine patients.  
Students will critique images to determine diagnostic quality.

**Goal: Students will model professionalism.**

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of institutional and/or program Web site
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

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

#### ***Explanation:***

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of meeting minutes
- Review of evaluations
- Review of surveys
- Interviews with members of various communities of interest

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

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with students



**1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.**

***Explanation:***

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

***Required Program Response:***

- Describe the implementation of institutional and program admission policies.
- Provide institutional and program admission policies.

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with students

**1.14 Has program faculty recruitment and employment practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.**

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of employee/faculty handbook
- Review of employee/faculty application form
- Review of institutional catalog
- Interviews with faculty

### **1.15 Has procedures for maintaining the integrity of distance education courses.**

#### ***Explanation:***

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review the process of student identification
- Review of student records
- Interviews with faculty
- Interviews with students

## Summary for Standard One

1. List the major strengths of **Standard One**, in order of importance.
2. List the major concerns of **Standard One**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

## **Standard Two:**

### ***Resources***

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

### **Objectives:**

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

#### **Administrative Structure**

- 2.1      Has an appropriate organizational structure and sufficient administrative support to achieve the program's mission.
- 2.2      Provides an adequate number of faculty to meet all educational, program, administrative, and accreditation requirements.
- 2.3      Provides faculty with opportunities for continued professional development.
- 2.4      Provides clerical support services, as needed, to meet all educational, program, and administrative requirements.

#### **Learning Resources/Services**

- 2.5      Assures JRCERT recognition of all clinical settings.
- 2.6      Provides classrooms, laboratories, and administrative and faculty offices to facilitate the achievement of the program's mission.
- 2.7      Reviews and maintains program learning resources to assure the achievement of student learning.
- 2.8      Provides access to student services in support of student learning.

#### **Fiscal Support**

- 2.9      Has sufficient ongoing financial resources to support the program's mission.
- 2.10     For those institutions and programs for which the JRCERT serves as a gatekeeper for Title IV financial aid, maintains compliance with United States Department of Education (USDE) policies and procedures.

**2.1 Has an appropriate organizational structure and sufficient administrative support to achieve the program's mission.**

***Explanation:***

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

***Required Program Response:***

- Describe the program's relationship to the organizational and administrative structures of the sponsoring institution and how this supports the program's mission.
- Provide institutional and program organizational charts.

***Possible Site Visitor Evaluation Methods:***

- Review of organizational charts of institution and program
- Review of meeting minutes
- Review of published program materials
- Review of master plan of education
- Interviews with faculty and institutional officials
- Interviews with clinical instructor(s)

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

### ***Explanation:***

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

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

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

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

### ***Required Program Response:***

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

### ***Possible Site Visitor Evaluation Methods:***

- Review institutional policies in relation to teaching loads and release time
- Review of master plan of education
- Review of position descriptions
- Review of clinical settings
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

### **2.3 Provides faculty with opportunities for continued professional development.**

***Explanation:***

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

***Required Program Response:***

Describe how continued professional development opportunities are made available to faculty.

***Possible Site Visitor Evaluation Methods:***

- Review of institutional and program policies
- Review of program budget or other fiscal appropriations
- Review of evidence of faculty participation in professional development activities
- Interviews with administrative personnel
- Interviews with faculty



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

***Explanation:***

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

***Required Program Response:***

Describe the availability and use of clerical support services.

***Possible Site Visitor Evaluation Methods:***

- Review of program's staffing plan
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

## **2.5 Assures JRCERT recognition of all clinical settings.**

### ***Explanation:***

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

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

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

### ***Required Program Response:***

- Assure all clinical settings are recognized by the JRCERT.
- Describe how observation sites, if used, enhance student clinical education.

### ***Possible Site Visitor Evaluation Methods:***

- Review of JRCERT database
- Review of clinical records
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with clinical staff
- Interviews with students

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

***Explanation:***

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

***Required Program Response:***

Describe how classrooms, laboratories, and administrative and faculty offices facilitate the achievement of the program's mission.

***Possible Site Visitor Evaluation Methods:***

- Tour of the classroom, laboratories, and administrative and faculty offices
- Interviews with faculty
- Interviews with students

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

### ***Explanation:***

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

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

The JRCERT does not endorse any specific learning resources.

### ***Required Program Response:***

- Describe the available learning resources.
- Describe the procedure for review and maintenance of learning resources.

### ***Possible Site Visitor Evaluation Methods:***

- Tour of learning facilities
- Review of learning resources
- Review of surveys
- Review of meeting minutes
- Interviews with faculty
- Interviews with students

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

### ***Explanation:***

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

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

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

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

### ***Required Program Response:***

- Describe the students' access to student services.
- Provide published program materials that outline accessibility to student services.

### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Interviews with faculty
- Interviews with students

## **2.9 Has sufficient ongoing financial resources to support the program's mission.**

### ***Explanation:***

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

### ***Required Program Response:***

- Describe the adequacy of financial resources.
- Provide copies of the program's budget and/or expenditure records.

### ***Possible Site Visitor Evaluation Methods:***

- Review of program budget and/or other fiscal appropriations
- Interviews with administrative personnel
- Interviews with faculty

**2.10 For those institutions and programs for which the JRCERT serves as gatekeeper for Title IV financial aid, maintains compliance with United States Department of Education (USDE) policies and procedures.**

***Explanation:***

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

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

## Summary for Standard Two

1. List the major strengths of **Standard Two**, in order of importance.
2. List the major concerns of **Standard Two**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.



## **Standard Three**

### ***Curriculum and Academic Practices***

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

#### **Objectives:**

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

- 3.1     Has a program mission statement that defines its purpose and scope and is periodically reevaluated.
- 3.2     Provides a well-structured, competency-based curriculum that prepares students to practice in the professional discipline.
- 3.3     Provides learning opportunities in current and developing imaging and/or therapeutic technologies.
- 3.4     Assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.
- 3.5     Measures the length of all didactic and clinical courses in clock hours or credit hours.
- 3.6     Maintains a master plan of education.
- 3.7     Provides timely and supportive academic, behavioral, and clinical advisement to students enrolled in the program.
- 3.8     Documents that the responsibilities of faculty and clinical staff are delineated and performed.
- 3.9     Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.

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

***Explanation:***

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

***Required Program Response:***

- Provide a copy of the program's mission statement.
- Provide meeting minutes that document periodic reevaluation of the mission statement.

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of meeting minutes
- Review of master plan of education
- Interviews with faculty

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

#### ***Explanation:***

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

Programs must follow a JRCERT-adopted curriculum. An adopted curriculum is defined as:

- the latest American Society of Radiologic Technologists professional curriculum and/or
- another professional curriculum adopted by the JRCERT Board of Directors following review and recommendation by the JRCERT Standards Committee.

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

The program must submit the latest curriculum analysis grid (available at [www.jrcert.org](http://www.jrcert.org)).

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of master plan of education
- Review of didactic and clinical curriculum sequence
- Review of analysis of graduate and employer surveys
- Interviews with faculty
- Interviews with students
- Observation of a portion of any course offered via distance delivery
- Review of part-time, evening and/or weekend curricular track, if applicable

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

#### ***Explanation:***

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of master plan of education
- Interviews with faculty
- Interviews with students

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

***Explanation:***

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

***Required Program Response:***

Describe the relationship between the program length and the terminal award offered.

***Possible Site Visitor Evaluation Methods:***

- Review of course catalog
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

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

#### ***Explanation:***

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

### **3.6 Maintains a master plan of education.**

#### ***Explanation:***

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

The plan should be evaluated annually, updated, and must include the following:

- course syllabi (didactic and clinical courses) and
- program policies and procedures.

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

#### ***Required Program Response:***

- Identify the location of the component parts of the master plan of education.
- Provide a Table of Contents for the program's master plan.

#### ***Possible Site Visitor Evaluation Methods:***

- Review of master plan of education
- Interview with program director
- Interviews with faculty

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

***Explanation:***

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

***Required Program Response:***

- Describe procedures for advisement.
- Provide sample records of student advisement.

***Possible Site Visitor Evaluation Methods:***

- Review of students' records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students



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

- Full-time Program Director:

Assures effective program operations,

Oversees ongoing program assessment,

Participates in budget planning,

Maintains current knowledge of the professional discipline and educational methodologies through continuing professional development, and

Assumes the leadership role in the continued development of the program.

- Full-time Clinical Coordinator:

Correlates clinical education with didactic education,

Evaluates students,

Participates in didactic and/or clinical instruction,

Supports the program director to help assure effective program operation,

Coordinates clinical education and evaluates its effectiveness,

Participates in the assessment process,

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

Maintains current knowledge of the discipline and educational methodologies through continuing professional development, and

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

- Full-time Didactic Program Faculty:

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

Participates in the assessment process,

Supports the program director to help assure effective program operation,

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

Maintains appropriate expertise and competence through continuing professional development.

- Part-time Didactic Program Faculty:

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

Participates in the assessment process, when appropriate,

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

Maintains appropriate expertise and competence through continuing professional development.

- **Clinical Instructor(s):**

Is knowledgeable of program goals,

Understands the clinical objectives and clinical evaluation system,

Understands the sequencing of didactic instruction and clinical education,

Provides students with clinical instruction and supervision,

Evaluates students' clinical competence,

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

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

- **Clinical Staff:**

Understand the clinical competency system,

Understand requirements for student supervision,

Support the educational process, and

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

***Explanation:***

The clear delineation of responsibilities facilitates accountability. Faculty and clinical staff responsibilities must be clearly delineated and must support the program's mission.

Full- and part-time status is determined by, and consistent with, the sponsoring institution's definition. At all times when students are enrolled in didactic and/or clinical components, the program director and/or clinical coordinator must assure that their program responsibilities are fulfilled.

***Required Program Response:***

Provide documentation that faculty and clinical staff positions are clearly delineated.

***Possible Site Visitor Evaluation Methods:***

- Review of position descriptions
- Review of handbooks
- Interviews with faculty and clinical staff to assure responsibilities are being performed
- Interviews with students

### **3.9 Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.**

#### ***Explanation:***

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of program evaluation materials
- Review of clinical instructor evaluation
- Interviews with administrative personnel
- Interviews with program faculty
- Interviews with clinical instructor(s)
- Interviews with students

### Summary for Standard Three

1. List the major strengths of **Standard Three**, in order of importance.
2. List the major concerns of **Standard Three**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

**Standard Four**  
***Health and Safety***

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

**Objectives:**

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

- 4.1      Assures the radiation safety of students through the implementation of published policies and procedures that are in compliance with Nuclear Regulatory Commission regulations and state laws as applicable.
- 4.2      Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:
  - Written notice of voluntary declaration,
  - Option for student continuance in the program without modification, and
  - Option for written withdrawal of declaration.
- 4.3      Assures that students employ proper radiation safety practices.
- 4.4      Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.
- 4.5      Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.
- 4.6      Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.
- 4.7      Assures sponsoring institution's policies safeguard the health and safety of students.
- 4.8      Assures that students are oriented to clinical setting policies and procedures in regard to health and safety.

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

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with students

**4.2 Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:**

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

***Explanation:***

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

***Required Program Response:***

- Describe how the pregnancy policy is made known to accepted and enrolled female students.
- Provide a copy of the program's pregnancy policy.

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

### **4.3 Assures that students employ proper radiation safety practices.**

#### ***Explanation:***

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

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

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

#### ***Required Program Response:***

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

#### ***Possible Site Visitor Evaluation Methods:***

- Review of program curriculum
- Review of radiation safety policies/procedures
- Review of student handbook
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students



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

##### ***Explanation:***

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

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

Students must be directly supervised until competency is achieved.

##### ***Required Program Response:***

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

##### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

##### ***Explanation:***

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

##### ***Required Program Response:***

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

##### ***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

#### **4.7 Assures sponsoring institution's policies safeguard the health and safety of students.**

***Explanation:***

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

***Required Program Response:***

Provide program policies that safeguard the health and safety of students.

***Possible Site Visitor Evaluation Methods:***

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students

**4.8 Assures that students are oriented to clinical setting policies and procedures in regard to health and safety.**

***Explanation:***

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of orientation process
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

### Summary for Standard Four

1. List the major strengths of **Standard Four**, in order of importance.
2. List the major concerns of **Standard Four**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

## **Standard Five**

### ***Assessment***

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

#### **Objectives:**

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

#### **Student Learning**

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

#### **Program Effectiveness**

- 5.2      Documents the following program effectiveness data:
- Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
  - Five-year average job placement rate of not less than 75 percent within twelve months of graduation,
  - Program completion rate,
  - Graduate satisfaction, and
  - Employer satisfaction.
- 5.3      Makes available to the general public program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

#### **Analysis and Actions**

- 5.4      Analyzes and shares student learning outcome data and program effectiveness data to foster continuous program improvement.
- 5.5      Periodically evaluates its assessment plan to assure continuous program improvement.

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

***Explanation:***

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

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

***Required Program Response:***

Provide a copy of the program's current assessment plan.

***Possible Site Visitor Evaluation Methods:***

- Review of assessment plan
- Review of assessment tools
- Interviews with faculty



## **5.2 Documents the following program effectiveness data:**

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

### ***Explanation:***

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

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

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

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

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

### ***Required Program Response:***

Provide actual outcome data in relation to program effectiveness.

### ***Possible Site Visitor Evaluation Methods:***

- Review of program effectiveness data
- Interviews with faculty

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

***Explanation:***

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

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

***Required Program Response:***

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

***Possible Site Visitor Evaluation Methods:***

- Review of program publications
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with students

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

##### ***Explanation:***

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

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

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

##### ***Required Program Response:***

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

##### ***Possible Site Visitor Evaluation Methods:***

- Review of student learning outcome data and program effectiveness data to support the assessment plan
- Review of representative samples of measurement tools used for data collection
- Review of aggregate data
- Review of meeting minutes related to the assessment process
- Interviews with faculty

## **5.5 Periodically evaluates its assessment plan to assure continuous program improvement.**

### ***Explanation:***

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

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

### ***Required Program Response:***

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

### ***Possible Site Visitor Evaluation Methods:***

- Review of meeting minutes related to the assessment process
- Review of assessment committee meeting minutes, if applicable
- Interviews with faculty

## Summary for Standard Five

1. List the major strengths of **Standard Five**, in order of importance.
2. List the major concerns of **Standard Five**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

## **Standard Six**

### ***Institutional/Programmatic Data***

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

#### **Objectives:**

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

#### **Sponsoring Institution**

- 6.1     Documents the continuing institutional accreditation of the sponsoring institution.
- 6.2     Documents that the program's energized laboratories are in compliance with applicable state and/or federal radiation safety laws.

#### **Personnel**

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

#### **Clinical Settings**

- 6.4     Establishes and maintains affiliation agreements with clinical settings.
- 6.5     Documents that clinical settings are in compliance with applicable state and/or federal radiation safety laws.

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

- 6.6     Complies with requirements to achieve and maintain JRCERT accreditation.

## **6.1 Documents the continuing institutional accreditation of the sponsoring institution.**

### ***Explanation:***

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

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

### ***Required Program Response:***

Provide documentation of current institutional accreditation for the sponsoring institution. This may be a copy of the award letter, certificate, or printout of the institutional accreditor's Web page.

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

***Explanation:***

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

***Required Program Response:***

Provide certificates and/or letters for each energized laboratory documenting compliance with state and/or federal radiation safety laws.



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

- **Full-time Program Director:**

Holds, at a minimum, a master's degree,

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

Documents three years clinical experience in the professional discipline,

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

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

- **Full-time Clinical Coordinator:**

Holds, at a minimum, a baccalaureate degree,

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

Documents two years clinical experience in the professional discipline,

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

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

- **Full-time Didactic Program Faculty:**

Holds, at a minimum, a baccalaureate degree,

Is qualified to teach the subject,

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

Documents two years clinical experience in the professional discipline, and

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

- Part-time Didactic Program Faculty

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

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

- Clinical Instructor(s):

Is proficient in supervision, instruction, and evaluation,

Documents two years clinical experience in the professional discipline, and

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

- Clinical Staff:

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

***Explanation:***

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

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

***Required Program Response:***

- For all program officials not previously identified on the program's database, submit a request for recognition of program officials including a current curriculum vitae and documentation of current registration by the American Registry of Radiologic Technologists\* or equivalent.
- For all currently recognized program officials [program director, educational coordinator (if applicable), full-time didactic faculty, and all clinical preceptors], submit a current registration by the American Registry of Radiologic Technologists\* or equivalent.

\*These may be copies of current registration cards or "ARRT Identification" page available at [www.arrt.org](http://www.arrt.org).

#### **6.4 Establishes and maintains affiliation agreements with clinical settings.**

***Explanation:***

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

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

***Required Program Response:***

Provide copies of current, signed affiliation agreements with each clinical setting.

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

***Explanation:***

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

***Required Program Response:***

Provide letters, certificates, or printouts of Web pages demonstrating the current recognition status of each clinical setting.

## **6.6 Complies with requirements to achieve and maintain JRCERT accreditation.**

### ***Explanation:***

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

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

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

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

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

### ***Required Program Response:***

- Report any database changes.
- Report any substantive change not previously submitted.

### Summary for Standard Six

1. List the major strengths of **Standard Six**, in order of importance.
  
  
  
  
  
  
  
  
  
  
2. List the major concerns of **Standard Six**, in order of importance.
  
  
  
  
  
  
  
  
  
  
3. Provide the program's plan for addressing each concern identified.
  
  
  
  
  
  
  
  
  
  
4. Describe any progress already achieved in addressing each concern.
  
  
  
  
  
  
  
  
  
  
5. Describe any constraints in implementing improvements.

## **Awarding, Maintaining, and Administering Accreditation**

### **A. Program/Sponsoring Institution Responsibilities**

#### **1. Applying for Accreditation**

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

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

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

#### **2. Administrative Requirements for Maintaining Accreditation**

- a. Submitting the self-study report or a required progress report within a reasonable period of time, as determined by the JRCERT.
- b. Agreeing to a reasonable site visit date before the end of the period for which accreditation was awarded.
- c. Informing the JRCERT, within a reasonable period of time, of changes in the institutional or program officials, program director, clinical coordinator, full-time didactic faculty, and clinical instructor(s).
- d. Paying JRCERT fees within a reasonable period of time.
- e. Returning, by the established deadline, a completed Annual Report.
- f. Returning, by the established deadline, any other information requested by the JRCERT.

Programs are required to comply with these and other administrative requirements for maintaining accreditation. Additional information on policies and procedures is available at [www.jrcert.org](http://www.jrcert.org).

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

## B. JRCERT Responsibilities

### 1. Administering the Accreditation Review Process

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

The accreditation process includes a site visit.

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

The JRCERT is responsible for recognition of clinical settings.

### 2. Accreditation Actions

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

JRCERT accreditation actions for Accreditation Withheld or Accreditation Withdrawn may be appealed following the established procedure. Procedures for appeal are available at [www.jrcert.org](http://www.jrcert.org).

All other JRCERT accreditation actions are final.

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

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

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

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

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

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[www.jrcert.org](http://www.jrcert.org)

