RADIOLOGIC TECHNOLOGY PROGRAM & CLINICAL MANUAL

FALL 2026

Rose State College
6420 Southeast 15th Street
Midwest City, OK 73110-2799

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Welcome to the Rose State College Radiologic Technology Program! You have chosen a program with a rich history in training radiographers in the metropolitan area & beyond. We have a great team of Faculty, & we are grateful you have chosen to learn with us. This field is both rewarding & challenging. We look forward to helping you navigate the ups & the downs of intense education over the next two years. In addition to learning the technical & cognitive components of the program, you will also learn about yourself & how you work with others in a variety of settings.

This manual delivers the Program's Policies & Procedures. If your questions are not answered in this manual, or you are unclear about a policy, please come & ask!

Sincerely,

Katie Holloway, M.Ed., R.T.(R)(QM)(ARRT)
Program Director, Radiologic Technology
Room HSC 117
405-733-7569
6420 SE 15th Street
Midwest City, OK 73110

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Rose State College Introduction

Rose State College is a public, two-year institution with an "open-door" admissions policy. The school offered its first classes on September 21, 1970. Initially called Mid-Del Junior College, it was renamed Oscar Rose Junior College in memory of the Midwest City-Del City Superintendent of Schools. In April 1983, the name was officially changed to Rose State College. Today, Rose State welcomes more than 13,000 students each year & is dedicated to helping each & every student succeed.

Rose State College was developed under the guidelines established by the Oklahoma State Regents for Higher Education and has received full recognition by that body. This assures the transferability of credits from Rose State College to four-year universities within the state of Oklahoma. Rose State College is also accredited as a degree-granting institution by the Higher Learning Commission.

Rose State College Vision, Mission, & Values

Vision

Supporting, serving & advancing the common good — sustaining & advancing a tradition of excellence.

Mission

As an open-admission institution, Rose State College invests, supports, and leads to improve quality of life and foster lifelong learning.

Core Values

Core values are unwavering principles that guide an organization's internal conduct as well as its relationship with the outside world. These values declare what is held sacred to Rose State College:

- **Learning Excellence** – Rose State College is committed to fostering a culture of academic rigor, innovation, and continuous improvement. We prioritize high-quality teaching, meaningful learning experiences, and student achievement in every program and service we provide. Through evidence-based practices, collaborative engagement, and ongoing assessment, we empower learners to think critically, grow intellectually, and succeed in an evolving global society.
- **Integrity and Transparency** – We uphold the highest standards of honesty, accountability, and ethical conduct in all that we do. Integrity guides our decisions, actions, and relationships, ensuring fairness and respect across our campus community. Through open communication and transparent processes, we build trust with students, employees, partners, and the public we serve.
- **Service and Support** – Rose State College is dedicated to meeting students where they are and providing the resources, guidance, and encouragement they need to thrive. We cultivate a student-centered environment that values responsiveness, compassion, and collaboration. By supporting academic, personal, and professional growth, we strengthen not only individual success but also the well-being of our broader community.
- **Welcoming Community** – We are committed to creating a respectful environment where every individual feels valued and empowered. Rose State College celebrates the various perspectives, backgrounds, and experiences of every student as essential to learning and innovation. Through mutual respect and belonging, we foster a community where all can engage fully and achieve their potential.

Health Sciences Division Mission

The Health Sciences Division supports the development of students through basic courses to provide opportunities to excel in a diverse selection of health disciplines & to prepare them to be entry-level health care professionals.

Program Introduction

The Rose State College Radiologic Technology Program was first established in 1971 & was first accredited in 1972 by the Joint Review Committee on Education in Radiologic Technology. For 50+ years, the RSC Radiologic Technology Program has been producing patient-centered, quality driven technologists that work in all aspects of the profession.

The Radiologic Technology Program at Rose State College is committed to quality health care, quality education, & professional standards of accreditation & credentialing in radiography. While preparing students for a professional career, the Program draws upon the exceptional instruction capabilities of our Faculty, as well as specialized resources from the radiographic community.

The Program pursues its mission of producing well-educated, competent, & highly motivated radiographers who will safely deliver highly technical, sometimes hazardous, yet medically necessary services.

The Program is accredited by the *Joint Review Committee on Education in Radiologic Technology (JRCERT)*. In seeking programmatic accreditation, RSC Radiologic Technology Program cements its commitment to providing a quality program seeking to graduate quality professionals. Educational standards have been established & maintained in coordination with the JRCERT. The Program follows an established, professional curriculum published by the American Society of Radiologic Technologists and is comprised of didactic & clinical education, arranged & integrated to assure mastery of both theory & application. A national certifying examination exists for credentialing, & the Program is designed to meet these standards. Students completing the Program satisfactorily & graduating with the A.A.S. degree are eligible to apply for examination & certification.

The Program recognizes that the choice of a profession in the healing arts is a unique commitment, capable of producing a high level of personal satisfaction & personal growth. A diligent effort is made by the Faculty to motivate & stimulate the students to experience & appreciate the personal enrichment that our profession offers.

Many of the Policies & Procedures contained herein are based on those of the institution. The rules & regulations of Rose State College are contained in the Student Handbook. This publication can be found on the Rose State College website under the “Current Students” tab https://rose.edu/current-students/student-services/student-handbook/

Radiologic Technology Program Mission & Goals

The Radiologic Technology Program meets the needs of the students & a diverse community by providing effective education to students who will possess professionalism & entry-level employment skills in diagnostic radiography upon graduation.

In support of this mission, data reflective of Student Learning contributes to analysis of the following goals:

1. Students will demonstrate clinical competence.
2. The student will communicate effectively in the academic and healthcare environment.
3. Students will demonstrate critical thinking and problem-solving skills.

Program Effectiveness Data

The following data will be annually collected & utilized to measure Program achievement. This information* is posted on the RSC Radiologic Technology Webpage under the Accreditation tab or by clicking here: https://rose.edu/program/radiologic-technology/

- Five-year average credentialing examination (ARRT) pass rate.*
- Five-year average job placement rate.*
- Program completion rate.*
- Graduate satisfaction.
- Employer Satisfaction.

You can find the definitions* of these terms by visiting the JRCERT webpage here: https://www.jrcert.org/program-effectiveness-data/

Program Personnel & Offices

RSC Radiologic Technology Program Faculty are highly qualified, enthusiastic, & dedicated professionals who believe in preparing students for a successful career through effective teaching.

Full-Time Faculty:

Katie Holloway, M.Ed., R.T.(R)(QM)(ARRT)
kmholloway@rose.edu
Program Director: (405) 733-7569

Elaine McCurley, A.A.S, R.T.(R)(CT)(MR)(ARRT), MRSO
emccurley@rose.edu
Clinical Coordinator: (405) 733-7568

Kaitlyn Workman, A.A.S., R.T.(R)(CT) (ARRT)
kworkman@rose.edu
Professor: (405) 736-0293

Division Office: (405) 736-0336

Adjunct Faculty:

Samantha Carlisle, A.A.S., R.T.(R) (ARRT)
Adjunct Professor: scarlisle@rose.edu

Kyla Chase, R.T. (R)(CT)(M)(ARRT
Adjunct Professor: kchase@rose.edu)

Ashley Blundell, A.A.S., R.T.(R) (ARRT)
Adjunct Professor: ablundell@rose.edu

Jeremy Matrone, A.A.S., R.T.(R)(CT) (ARRT)
Adjunct Professor: jmatrone@rose.edu

The Radiologic Technology Program offices are in the first corridor to the right (117, 118, 119) in the Health Sciences Center. **If you wish to meet with Faculty outside of class hours**, please go to the Division Office through the glass doors on the east side of the lobby (to the left through the main glass doors) and an administrative assistant will call to make sure we are here. It is best to email the professor before coming to campus to make sure we are available. The classroom (151) & laboratory (148) are located off the second corridor to the right. The offices for the Health Sciences Division Dean & staff are located in room 100A.

Email communication to each adjunct professor should be sent to the official RSC email address listed.

Program Officials' Responsibilities

The following is a non-exhaustive list of the Program officials' responsibilities. Some responsibilities are outlined by the JRCERT and some by the college.

Program Director:

- Assures effective Program operations
- Oversees ongoing Program accreditation & assessment
- Participates in budget planning
- Participates in didactic instruction
- Participates in clinical instruction, when needed
- Evaluates students
- Maintains current knowledge of the professional discipline & educational methodologies through continuing professional development
- Ensures JRCERT Standards are met and equally applied
- Validates and approves ARRT Didactic and Clinical Requirements have been met for credentialing examination
- Serves a Radiation Safety Officer
- Assumes the leadership role in the continued development of the Program
- Chairs Advisory Committee
- Maintains students health maintenance records
- Maintains program records
- Maintains clinical affiliation records

Clinical Coordinator:

- Correlates clinical education with didactic education
- Participates in didactic & clinical instruction
- Evaluates students
- Serves as a *Clinical Site Supervisor*
- Supports the Program Director to help assure effective Program operation
- Coordinates clinical education & evaluates its effectiveness
- Participates in the accreditation & assessment process
- Cooperates with the Program Director in periodic review & revision of clinical course materials
- Maintains current knowledge of the discipline & educational methodologies through continuing professional development
- Maintains current knowledge of program policies, procedures, & student progress
- Maintains record of student progress towards ARRT Clinical Requirements
- Chairs *Clinical Site Supervisor* Staff Meetings
- Advisory Committee member

Didactic Program Faculty:

- Prepares & maintains course outlines & objectives, instructs, & evaluates students, & reports progress
- Participates in didactic & clinical instruction
- Participates in the assessment process

- Serves as a *Clinical Site Supervisor*
- Supports the Program Director to help assure effective Program operation
- Cooperates with the Program Director in periodic review & revision of course materials
- Maintains appropriate expertise & competence through continuing professional development.
- Advisory Committee member

Adjunct Clinical Program Faculty:

- Serves as *Clinical Site Supervisor*
- Attends & delivers student progress report at Clinical Site Supervisor Staff Meetings
- Participates in clinical instruction & student evaluation
- Evaluates students' clinical competence
- Participates in the assessment process, when appropriate
- Cooperates with the Program Director in periodic review & revision of course materials
- Maintains appropriate expertise & competence through continuing professional development

Clinical Preceptor(s):

- Maintains knowledge of Program mission & goals
- Are determined and retained by the Clinical Affiliate
- Understands the clinical objectives & clinical evaluation system
- Understands the sequencing of didactic instruction & clinical education
- Assigns and supervises students' departmental rotations ensuring adequate exposure to all rotating students regardless of program.
- Provides students with clinical instruction & supervision
- Evaluates students' clinical competence
- Participates in the assessment process on the Advisory Committee
- Maintains competency in the professional discipline & instructional & evaluative techniques through continuing professional development
- Maintains current knowledge of program policies, procedures, & student progress

Clinical Staff:

- Understand the clinical competency system
- Understand requirements for student supervision
- Are determined and retained by the Clinical Affiliate
- Support the educational process
- Evaluate students' clinical competence
- Maintain current knowledge of program policies, procedures, & student progress

Academic Policies & Procedures

Technical Standards/Physical Qualifications

Radiography is a physically demanding profession. The Program, by school charter, is able to accept all students who qualify academically. The American Registry of Radiologic Technologists has specific objectives that must be met by all persons before they can apply to sit for the National Registry & are not subject to change. Employers will have very specific job descriptions that must be met by those who seek employment as radiographers. ***The following general guidelines are based on job descriptions of hospitals in the area, & are considered for admission to, & progression through, the Radiologic Technology Program*.** Should an event arise where you are not able to fulfill any of the standards & qualifications, you must notify the Program Director prior to attending clinic rotation.

1. Manual dexterity, range of motion, coordination, & strength to:
    a. Adjust, manipulate, & move a variety of radiographic equipment & controls with speed & accuracy
    b. Arrange, attach, & adjust supportive devices
    c. Write neatly & legibly
    d. Reach over the head numerous times in the course of a day
    e. Bend, lift, turn, grasp, & squat with full motion
    f. Climb stairs, stools, & ramps
    g. Provide physical support to patients during radiographic procedures
    h. Transport, move, & lift patients
    i. Stand & walk for eight hours
    j. Wear a 15-20 pound lead apron for hours while standing
    k. Exert 100 pounds of force occasionally, 50 pounds of force frequently, & 20 pounds of force constantly
2. Adequate visual acuity to:
    a. Be able to observe & assess patient behavior
    b. Read printed & hand-written material, meters, gauges, & computer monitors
    c. Assess patients non-verbally to include changes in respiratory rate & effort, & changes in skin tone
    d. Evaluate radiographic images in shades of gray for spatial resolution, positioning, exposure factors, anatomy, & other information
3. Adequate verbal skills to:
    a. Communicate effectively in order to explain & direct patients during radiographic examinations
    b. Provide emotional support to patients during radiographic procedures
    c. Communicate in a professional manner with various health care colleagues regarding radiography & patients
    d. Use an intercom & telephone
4. Adequate auditory acuity to:
    a. Use a telephone
    b. Respond to verbal communications & commands given through a mask over the face, in a darkened room, & when the speaker has his or her back turned

c. Perceive the nature of sounds of machinery
d. Distinguish sounds such as a patient breathing, wheezing, or gasping

5. Be capable of:
    a. Handling stressful situations related to technology, procedures, or patient care
    b. Providing emotional support to patients during radiographic procedures
    c. Responding effectively & quickly to situations requiring first aid or emergency care of patients until more qualified help can arrive
    d. Critical thinking & problem-solving skills in the laboratory & clinical education site

Rose State College will provide reasonable accommodation to persons with disabilities in order for students to have access to educational programs & services. Students with disabilities requiring accommodation should make the initial request to Student Access Services, LRC room 106, as soon as possible upon acceptance. The documentation will be given to the Program Faculty & Director. For additional information, see: https://rose.edu/current-students/student-services/student-access-services-sas/

Transfer Students

Rose State College's Radiologic Technology Program does not accept transfer credit of professional Radiologic Technology courses from any institution. Prerequisite general education courses may be accepted for transfer in compliance with RSC policy. It is recommended you contact the Program Director prior to application to the Program to ensure your transfer credits meet the qualifications necessary for prerequisite courses.

Student Liability Insurance

To provide protection for patients, students, healthcare professionals, clinical affiliates, & the college, students are required to purchase liability insurance. This insurance is in effect when the student is enrolled & in good standing with the college. It is limited to student responsibilities at clinical assignments. It protects the student from professional liability when following the Program & facility policies & procedures.

Background Checks

It is the intent of the Program to prepare students to function in the delivery of health care services to the patient in the clinical setting. To protect both patients & coworkers, the student is obligated to accept certain social responsibilities. To assure all hospital personnel adhere to high ethical standards, clinical education sites require all RSC employees & students to obtain a clear federal background check. This background check is a condition of Program acceptance. Should a student take a leave of absence from the program for any reason, a new background check will be required for readmittance. All fees associated with the background check are the responsibility of the student.

ARRT Eligibility for Certification

It is the policy of Rose State College that the College should be open to all students who are qualified according to its admission standards. The Radiologic Technology Program abides by these standards.

The American Registry of Radiologic Technologists has very stringent rules regarding misconduct & eligibility to take the national board exam. Students enrolled in a program intending to fulfill the requirements for the ARRT credentialing exam are considered Candidates and are required to follow the *Standards of Ethics* of the ARRT. The clinical affiliates also have certain safeguards in place to ensure the safety of their patients.

For these reasons if the prospective or current student has been charged with, entered a plea of guilty, Alford plea, or plea of no contest (nolo contendere), or been convicted of any felony or misdemeanor offenses, the student should apply for & receive a pre-application review from the ARRT. If a situation occurs during the program that meets the above designations, the student must report this to the ARRT **and** the program **within 30 days**. The required paperwork can be obtained by contacting the ARRT at (651) 687-0048 or by visiting the ARRT website at: https://www.arrt.org/pages/earn-arrt-credentials/initial-requirements/ethics/if-you-have-a-potential-ethics-violation

PLEASE NOTE**:** The information you provide to the ARRT for this process must be complete & truthful for this preapplication to be valid.

In all fairness to the student, notification of the ethics requirements should come at the beginning of a program & before applying for the certification exam.

1. All students are advised of the ARRT requirement for exam eligibility before admission to the Program. This information is part of the program application with an attestation statement. Prospective students are encouraged to begin the pre-application process upon receiving the program application to know if the student should accept a spot in the program should one be offered.
2. A copy of the ARRT Standards of Ethics is available online at https://www.arrt.org/pages/resources/ethics-information The following questions must be answered upon application to sit for the credentialing exam:
    a. Have you ever been charged with or convicted of a misdemeanor or felony? (This includes court convictions & military courts-martial.)
    b. Has a regulatory authority or certification board (other than ARRT) ever done one or more of the following?
        i. Denied, revoked, or suspended your professional license, permit, registration, or certification?
        ii. Placed you on probation (excluding ARRT Continuing Education probation), under consent agreement, or under consent order?
        iii. Allowed voluntary surrender of your professional license, permit, registration, or certification?
        iv. Subjected you to any conditions or disciplinary actions?
    c. Have you ever voluntarily withdrawn—or been suspended, dismissed, or expelled—from an educational program you attended to meet ARRT certification & registration requirements?
3. ARRT provided checklists with more information about each potential violation are provided at the end of this handbook in the forms section.
4. Should a student initiate and be granted pre-approval from on ARRT Ethics Pre-Application, the student should **submit a *copy* of the approval letter to the Program Director ASAP**. This will aide in any potential problems regarding concerns with the background check.
    a. The student should also maintain a copy of that letter to use when creating the ARRT Application Portal. The ARRT number contained on the letter will be required.

5. Any students with questions or concerns regarding the ARRT eligibility requirements are urged to contact the ARRT directly:

   The American Registry of Radiologic Technologists
   1255 Northland Drive
   St. Paul, Minnesota 55120-1155
   (651) 687-0048

Any affirmative answer to any combination of the listed questions requires that the student submit a Preapplication to the ARRT following their protocol. For confidentiality reasons, past history, prior to program acceptance, does not need to be disclosed to the Program Director, however an affirmative answer on the 3rd question does need to be disclosed upon acceptance to the program. If you have previously attended & not completed a radiography program, for any reason, you must notify the Program Director once a program acceptance offer has been extended.

Additionally, **if any action occurs that violates any of the first two questions during the program**, you will need to **report that to the ARRT** & **the Program Director within 30 days of the event**.

Drug Test Policy

Federal law clearly indicates that medical professions fall under what are considered *safety sensitive* professions. Given this status, individuals within these professions should refrain from taking any substance that may affect their ability to safely perform essential functions & thereby result in a direct threat to the safety of others. Prior to entry into the Program, & on an annual basis, all selected students in Health Sciences programs must have a negative result on their drug screening panel. The drugs tested include:

> *Benzodiazepines, Barbiturates, Marijuana, Propoxyphene, Oxycodone, Opioids, Methaqualone, Phencyclidine, Amphetamines, Cocaine & Methadone.*

If a screening test shows a non-negative result (some amount of the drug is detected), the medical review officer (MRO) becomes involved. The MRO contacts the student to determine if they have a current legal prescription for the drug(s) detected. If they have a current prescription & the quantity detected is within the limits of the prescription, the test result will be reported as negative. The exception to this is marijuana. A Medical Marijuana license is not a legal prescription &, therefore, any test screened as non-negative will be reported as a positive result. Any test result reported as positive means that the student cannot start or will not be allowed to continue in their Program.

Even though a student may have a current legal prescription for any of the above listed drugs, students cannot use, or be experiencing the effects of, these substances when attending classes, labs, or clinicals.

If the positive drug test occurs prior to Program entry, the student may reapply the following year. If a second pre-program drug test is positive, another application will not be considered.

During the Program, if there are performance indicators that are observed that indicate that a student may be under the influence of any drug or alcohol at the clinical site or the college, the student will be asked to immediately have a drug screen performed at CRG Laboratories at their cost. Once requested the student will immediately report to CRG laboratories & provide the sample. If the student is behaving in a way that suggests driving would be unsafe, the Program will contact the student-designated emergency contact for transportation. If the request is made & there is not enough time to report to the laboratory on the same day, the student will provide the sample the next business day. The student may not attend clinical rotation until

the results are reported. Absences, late arrivals, & early departures will follow normal the Clinical Attendance Policy. The student may continue to attend didactic courses until the results are reported. If the result is positive, the student will be immediately administratively withdrawn from all clinical classes, & withdrawal or continuation of didactic classes will be handled on a case-by-case basis.

If either pre- Program or during Program drug screen appears to have been tampered with, i.e. dilution, purchased sample, presence of chemical additives, or perceived delays in providing a sample, the student will submit to a follow-up drug screen within 24 hours of notification of irregularity. All drug screening costs are the responsibility of the student. Failure to retest within the timeframe will be considered a voluntary withdrawal from the Program.

If the student would like to rejoin the Program following a positive drug test, they will follow the Re-Admission Procedure outlined in this manual. Conditions of return will include being on a probationary status for the duration of the Program & may include scheduled & random drug tests at the student's expense.

Health Insurance, Immunizations, & CPR

As a condition of acceptance & before the student is allowed to enroll in professional courses, the student must submit the following. Documentation already in electronic format, i.e. patient portal, emailed results, etc. may be submitted electronically. Documentation received in hard copy must be submitted to the Program Director directly. All documentation, in whichever format, must include **student's full name, birthdate, name of inoculation, date given and/or date reported on the same document**.

1. **Proof of health insurance** or a statement acknowledging that the student accepts financial responsibility for any medical expenses incurred by the student during clinic hours. Insurance can be provided through family or group policy or by a government agency (i.e., V.A. or Indian Health Service). Some clinical education sites require that the student have health insurance. Students without health insurance will be ineligible for rotations at these facilities.
2. A copy of the **student's immunization/PPD record** to include:
    a. Immunity to Mumps, Rubeola, & Rubella: This is a **required** series. Submit shot records showing proof of two immunizations for MMR. If you do not have proof of immunization, you may have Mumps, Rubeola & Rubella titers drawn & submit verification of positive results for each of the illnesses. If results are negative or equivocal, on any or all of the three diseases, you are required to receive two MMR immunizations at least one month apart & submit proof.

    b. Immunity to Varicella (Chickenpox): This is a **required** series. Submit shot record showing proof of two immunizations. If you do not have proof of two immunizations, you may have a varicella titer drawn & submit proof of positive results. If results are negative or equivocal, you are required to receive two immunizations 4–8 weeks apart & submit verification.

    c. Documentation of one TB blood test, or two TB skin tests, showing negative results within the past year. A negative TB test, whichever kind, is **required**.

        i. Blood test: The blood test is a single step process. Blood will be drawn, labs run, & results reported. Your submitted documentation must clearly show the date of the blood draw and the date of the results reported. If this is a subsequent annual test, the results must be reported before one year has been reached from previous test.

ii. Two Skin Tests: If two skin tests have not been completed within the past year, two separate tests must be done 7 to 14 days apart. Each of the two skin tests has two steps. At one visit the test is placed. At the second visit, 48-72 hours later, the test is read. If this is the initial test, this two-step process needs to be repeated 7-21 days later. Documentation for skin tests must include a "placed" date & a "read" or "reported" date.

1. If either test was positive, proof of a negative chest x-ray & a TB risk assessment completed by the county health department.

iii. This test must be repeated annually. The subsequent annual test only requires one skin test providing that it is performed & read before the previous year's test expires.

d. Documentation of a Tetanus, diphtheria, & pertussis booster: Tdap, vaccine **required** within the last ten years.

e. Hepatitis B immunization is **required**. If you have not received the entire series, documentation of each immunization must be provided once received.

f. Hepatitis A immunization is highly recommended, but not required. If you have received the series, documentation of both immunizations must be provided. An acknowledgement will be provided for those persons not immunized. This form will be provided to the student during the first four weeks of the Program.

g. Documentation of COVID vaccine: The Program is required to report vaccine status. There is a waiver process available. This process is disbursed when notifications of acceptance to the program are extended.

3. Current Healthcare Professional level of CPR certification is **required**. The **Basic Life Support for Healthcare Professional** course is offered by the **American Heart Association**. Healthcare provider level CPR courses are offered at various locations within the community & at Rose State College. The skills portion of the training must be in-person. This must be current at graduation.

4. Prior to their first clinical assignment, students are **required** to complete an MRI Environment Screening form. This information is kept on file throughout the Program. If any updates to this form are needed, the student should notify the Clinical Coordinator or Program Director within 2 weeks of the change.

Student Seeking Waivers

The RSC Radiologic Technology Program Director and Clinical Coordinator are tasked with creating a clinical experience program that affords all enrolled student the opportunity to complete requirements for graduation that fulfill the minimum requirements of the American Registry of Radiologic Technologists (ARRT) and any additional requirements that will produce professionals with the ability to perform procedures that are expected of our local medical community. The fulfillment of those requirements is solely the responsibility of the student within the support of the framework. Not all procedures and exams are offered at all facilities and there is no guarantee of any exam at any particular facility during any semester. Clinical assignments are determined by needed exams for the entire cohort. Additional variables can make this difficult.

In order to remain in compliance with accreditation standards set forth by the Joint Review Committee on Education in Radiologic Technology (JRCERT), these clinical assignment policies and procedures must be equitably applied to all enrolled students. Standard 4.4 states, in part, "*Programs must have a process in place to assure timely, appropriate, and educationally valid clinical experiences to all admitted students. A meaningful clinical education plan assures that activities are equitable…Clinical placement must be nondiscriminatory in nature and solely determined by the program*." Students may neither request nor deny any clinical assignment and the lack of a waiver offered by a clinical facility, nor the potential for denial of obtained waiver, will be a consideration when assessing needed exams of the cohort. Any denial of a pursued waiver by a clinical facility will only affect the student seeking the waiver and not affect another student's placement.

Students who wish to seek a waiver from a clinical affiliate regarding the COVID vaccine and/or the Flu vaccine may schedule an appointment with the Program Director to discuss the process the student would need to complete. Those are the only two vaccine requirements that any facility with which we partner entertains the possibility of a waiver. The responsibility of obtaining the paperwork from each facility, the approval of a desired waiver by each facility, and the verification of waiver acceptance from each facility is at the sole responsibility of the student. The vaccine requirements are not the request of the Program nor the college and therefore are not ours to waive.

Not all facilities allow for a waiver process and not receiving waivers from all facilities will prevent a student from completing the program. Should, if in the best interest of the cohort, a student seeking a waiver is assigned to a facility that denies the waiver, or does not entertain a waiver process, the student will not be able to continue in the clinical portion of the program. Should a student not be able to complete required competencies at a facility that approves a waiver and the other facility that offers those exams denies a waiver, the student will not be able to continue in the clinical portion of the program. A student must complete all aspects of the program, didactic and clinical, to graduate the program.

Scheduled Renewal of Flu Shot, TB Test, CPR, & Drug Test

It is the responsibility of the student to maintain individual inoculations & CPR compliance. As a courtesy, the Program Director will send a reminder email in the month prior to the due date or expiration date. If the due date or expiration date falls between semesters, it may be necessary for the student to submit documentation on the break or before the previous semester ends. If the student allows the expiration date or due date pass without documentation of compliance, the student may not attend clinic until it is remedied. This can be up to several weeks. Missed clinical time will be handled using the Clinical Attendance Policy addressed in this policy manual.

1. Flu Shot: The deadline for flu shots is typically early-October. The specific date will be announced each fall via an announcement in the LMS, currently that is Canvas.
2. TB (PPD or blood) test:
    a. In the case of a TB blood test, results must be reported before the previous test expires. The documentation must clearly show date blood is drawn and date the results are reported.
    b. If it has been less than one year from your previous test, only one skin test is needed. In the case of a skin test, the test must be read before the date of your previous test.

Documentation for skin tests must include a "placed" date & a "read" or "reported" date. If you do not have the test reported before the 364 day mark, you will need to complete 2 skin tests as described in the initial test in the previous section.

3. CPR: is valid for 2 years. The student must have current CPR certification throughout the program & at the time of graduation. The didactic portion can be online, but the **skills portion must be in person**.
4. Drug test: a yearly drug test is scheduled in the summer with continuation of the program contingent upon a negative result. You will receive a letter stating the date you need to appear for your test. The cost is around $30.

Non-Discrimination

Rose State College does not discriminate on the basis of race, color, sex, age, national origin, religion, disability, genetic information, sexual orientation, gender identity or expression, or status as a veteran in any of its policies, practices or procedures. This includes, but is not limited to: admissions, employment, financial aid, and educational programs, activities, or services. The person designated to handle inquiries regarding the nondiscrimination policies, including issues of noncompliance, is the Associate Vice President, Human Resources, 6420 SE 15th Street, ADM Room 104, Midwest City, OK 73110, (405) 733-7979. Complaints and grievances will be handled in accordance with the College's Grievance Procedures.
Title IX

Attendance Policies- Classroom/Laboratory

It is important that you be present in class as information is learned daily. It is also important that you do not disrupt class by arriving late &/or leaving early. To **excuse an absence, late arrival &/or early departure**, call Program Faculty before class begins. It is customary that Faculty do not answer the phone before class so absences, late arrivals, & early departures are left as voicemails for documentation. Same day/next day notification must be delivered via phone call. Advanced notice of a planned absence may be delivered via email.

Unexcused absences, late arrivals &/or early departures will result in a deduction of points; 10 points for absence, 5 points for late arrival &/or early departure. An unexcused late arrival &/or early departure includes but is not limited to entering the classroom after lecture has begun, coming back late from lunch break, packing up &/or leaving before being dismissed from class, & taking excessive breaks. Sleeping in class will initiate the unexcused attendance policy without notice. Loss of attendance points are not announced & are your responsibility to track. They are taken from total earned points at the end of the course.

Late arrival-time is based on professor's phone time. Late arrival-time of 15 minutes or more in any class will be handled as an absence.

Tests & Assessments

Tests & assessments are the methods by which the College can provide a scholastic grade. Therefore, each student should make every effort to be in class when tests are given & when assessments are performed. It is imperative that the student adhere to due dates to avoid late penalties and remain on schedule with didactic content delivery.

1. There will be periodic tests covering the material presented in all Radiologic Technology courses.
2. All tests will be announced. Quizzes may or may not be announced.
3. Re-testing for didactic **Positioning** unit exams will be proctored in the LRC Testing Center. Details are included in the respective didactic course syllabus.
4. Assessment comes in more forms than just testing; consult the following section "Assessment Types" for description of the varied methods of assessment in the didactic portion of the Program.
5. The testing environment will mimic the Pearson VUE Testing Center and are outlined in each year's publication of the ARRT Primary Eligibility Pathway Handbook found on their website. The registry is 3.5 hours long. You need to build up to tolerate sitting in a chair and concentrating for this amount of time. These include:
    a. **Supplies provided**: noise canceling headphones, test, calculator, scantron (if applicable)
    b. You **may bring** pencil, eraser, and/or pen.
    c. You **may not bring** these items into the classroom for the test: purses, wallets, backpacks, blankets, food, drink, hats, phones, watches. Pearson VUE also does not allow hoodies. They are not currently prohibited, but a professor may ask you to remove it based on suspicious actions. You may keep these items in the laboratory cubbies during the exam.
    d. These items **you may bring**, but they **will be inspected**: Hoodies, glasses, hairclips.
    e. Pearson VUE also **restricts certain behaviors and movements** during the test. You should practice these, so you are not thrown off by them for your registry. Professors will ask you to stop certain behaviors. This includes excessive movement, laying on the desk, tapping the table, crossing your legs. Restroom breaks are discouraged. Should you be allowed to visit the restroom, you will not enter the laboratory.
6. The following grading scale is used in all the Radiologic Technology courses:

A	=	93	-	100%
B	=	85	-	92%
C	=	74	-	84%
D	=	70	-	73%
F	=	Below	70%	

7. Any student caught cheating on a test will be reported to the Office of Student Accountability. During the investigation, the student may continue to attend class but will not attend clinic. Missed clinic time will be handled according to the Clinical Attendance Policy. If substantiated, the student will be immediately Administratively Withdrawn from the program, an "F" will be given in the course, & a report of the incident will be placed in the student's personal file for future reference. Students administratively withdrawn from the Program for cheating are not eligible to return or reapply to the Program. This withdrawal will initiate an ARRT Ethics Review Preapplication should the student desire to apply to another radiologic technology program. Decisions regarding enrollment in non-program classes at Rose State College will be addressed through the Office of Student Accountability.

Assessment Types

Classwork is that which is assigned in class & given class time to begin it. Occasionally, time runs out & the professor instructs the class to take it home. **Collaboration should occur on classwork**; however, equal effort should be made for all those working together. If the professor observes one or more class members not contributing, but benefiting from the answers, the professor may instruct the class to work independently. All math components must show work & the work shown must result in the answer given.

Class Discussions occur often in class- both informally and formally. The professor will make effort to ensure all students in class are participating and contributing to the discussion. This can occur organically by students volunteering to answer questions/ give feedback or formally in which specific students are called on. All students should approach class discussions with an attitude of collaboration and curiosity.

Complete Anatomy is an anatomy software program that the Program purchases for the student. In all positioning classes, as well as some procedures classes, the student will be assigned review material & quizzes from this program. While it can be accessed on mobile devices, **to get the full effect & functionality, it is recommended the student access it on a desktop**. There are desktops available in all computer labs on campus & two available in the Radiology Lab. The quiz score will be collected & entered as part of the official grade. Instructions on how to set up an account, current activation codes, & any procedural updates will be posted on the Radiologic Technology Program Students Canvas page (aka. the Patch page).

Groupwork will be assigned both in-class activities & projects that require outside preparation. Group members can be intentionally assigned or randomly assigned by the professor. **All members are expected to contribute equally.** With each assignment there must be evidence of that equal contribution. All group members receive the same grade.

Homework is assigned by a professor either on paper or on Canvas. The expectation is the student **completes the homework independently** & can then compare with classmates to increase understanding. Homework turned in after the stated due date or received late because of unexcused absence will incur a deduction in points. See syllabus for details. All math components must show work & the work shown must result in the answer given.

Laboratory Assignments can be assigned to individuals or groups. Often, laboratory assignments include group participation. Students must make every effort to be fully engaged in laboratory assignments. Standing back & letting others take the lead prevents you from learning & being prepared for your patient. Lab assignment papers, if applicable, must be turned in by stated due date. Students must wear laboratory Rad Badge during the entirety of your lab assignment, as well as having on appropriate clothing including shoes.

Laboratory Tests will be performed independently. Expectations will be outlined by the professor.

Onboarding Topics Quizzes are assigned in the first semester HSXT 1105. This are required trainings from our clinical affiliates. These quizzes must be passed by an **85% or higher score**. Failure to complete a quiz at the adequate level of knowledge will prevent the student from proceeding forward to clinical training.

Professional Presentations are assigned each Spring semester. This has individual and group aspects. Detailed instructions are given for the assignment. A detailed rubric is provided regarding the point breakdown.

Post-Quiz or Post-Test Reviews are typically performed in the class period following the assessment. During reviews of quizzes & tests, the student's desk will be completely clear except for a pen or highlighter in a color not used on the test. No pencils will be out. There will be no smartwatches on. Recorders will be turned off. No notes will be taken. Students are encouraged to write clarifications of knowledge on the test. Following the review, the tests will be collected & kept secure in the respective professor's office. **A student may request to see a past assessment at any time- in fact, it is encouraged!** Further review of the test will have the same supply requirements as the initial review (i.e. pen, recorder, smartwatches, etc.). If it is found a student was taking notes, recording, or in any other way documenting test/quiz questions, this is considered cheating, & the student will meet with the Program Director. This may result in an Administrative Withdrawal from the Program.

Presentations can be informal following in class work or formal following preparatory time. They can be given individually or as a group. The professor will provide the instructions & the parameters for the assignment. Meeting the minimum instructions for the assignment will result in an average score. It is expected that each student puts effort into the assignment including using professional presentation skills.

Projects may be completed as an individual or with a group and can occur in the classroom, outside the classroom, or at clinic. The professor will provide the instructions & the parameters for the assignment. Meeting the minimum instructions for the assignment will result in an average score. It is expected that each student puts effort into the assignment. Projects from students in previous semesters are not to be used as guides unless provided by the program.

Quizzes can be announced or unannounced, on paper or online. There is no collaboration allowed on quizzes. The student must be on time to class to take the quiz for credit. Missed quizzes will not be made up. Desks will be clear of all materials, books, bags, paper, etc. No smart watches will be worn during quizzes.

Review Games are occasionally played in class. Points are awarded for participation in the game. Game rules are the prerogative of the professor & may change mid-game based on pace & performance of students. Being more than 10 min late on a game day reduces the participation opportunity & limits the benefit of review, therefore a student can earn a maximum of half credit for participation whether the late arrival is excused or not. If the game is nearly over, the professor will direct the student to sit & listen & no points will be earned. There is no note taking, recording, or smartwatches allowed during review games. If it is found a student was taking notes, recording, or in any other way documenting review questions, this is considered cheating, & the student will meet with the Program Director. This may result in an Administrative Withdrawal from the Program.

Tests are scheduled & notification is given via syllabus. Tests can be on paper, in the lab, or on Canvas. Nothing will be on the desk during the test. Smart watches will be placed in backpack.

Late arrivals of less than 10 minutes on a test day allows the student to take the test but forfeits any bonus offered. Late arrivals of more than 10 minutes on a test day initiates the makeup test policy. The time of the arrival is the professor's device.

Tests not taken during **scheduled** class time must be rescheduled in advance within 5 business days of original test date. It is recommended that a known missed test be taken before the assigned test date. In the event of sickness or other emergency that prevents advanced rescheduling, the student must schedule a makeup test with-in 5 business days of missed exam. The student will receive a grade deduction of 10 points per business day for missed written tests- whether they are prescheduled or not. This included taking the

test immediately following the scheduled class time. This test may be in a different format than the originally administered test.

Tests not completed within 5 business days of original testing date, a grade of zero will be given. However, the test must still be taken & earn a passing score to ensure knowledge of the material for the safety of our patients.

Communication & Response

Thorough & timely communication is important throughout the entire program's duration. Class wide specific communication is typically handled via the Canvas Announcement feature in each respective program course. Individual communication is handled via email. The Clinical Coordinator & Program Director will routinely email time-sensitive information, requests, & other topics to your student email. Even during semester breaks, these require prompt response. Professors will respond to email communication within 24 business hours unless otherwise stated or an "out of office" notification is programmed. It is strongly suggested that urgent emails state their urgency in subject line. Students are expected to respond to emails in the same timeframe unless a date is specified in the email, or it is informational in nature.

Your RSC Student account is the email the program will use to communicate with you outside of the classroom. If you miss a class or have a question outside of class time, please **use your student email as a form of communication**. Understand that email is not a confidential medium, therefore professors cannot communicate grades via email. Your student email resembles something like: first-last@raider.rose.edu When emailing program personnel, please do it from your school email account, not through Canvas; oftentimes these emails are delayed.

It is highly suggested that you forward your email to an account you routinely check. Correspondence to program personnel must come from your student email. Failure to routinely check your student email in a timely manner does not constitute a viable reason for missing deadlines.

Accurate Program Contact information is imperative to ensure effective communication. Should the student's information (name, address, phone number, etc.) change subsequent to what was listed during program enrollment, the student should notify the Program Director within 10 business days.

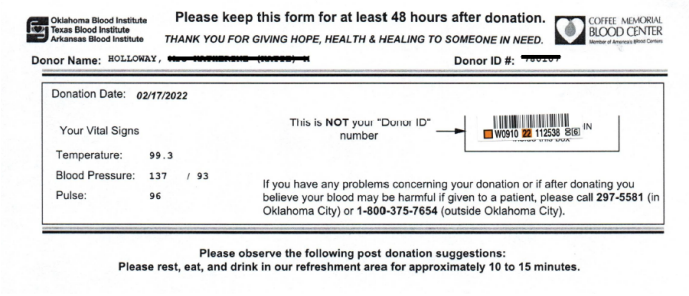
Community Service Incentives

Students have the opportunity to earn incentives for community service activities as outlined by the Program Director. Currently, this is available for blood donation & voting. Occasionally, additional professional opportunities will be offered and communicated as they arise. Documentation of the community service must be submitted as outlined below. The voucher will be relinquished when redeemed. Misplaced vouchers will not be replaced. Whether redeeming for CTAs or points on a test, the voucher must be filled out & submitted to the appropriate professor or clinical coordinator **before the benefit is used**. These vouchers do not expire. **A maximum of two (2) vouchers may be used for clinical hours in any one semester**.

Blood Donation: Twice a 16-week semester & once an 8-week semester, the student may donate blood at any blood donation center. Documentation of attempt or success must be submitted within 3 days from donation. If for any reason the student is not able to successfully donate, the student may submit the form given by the blood donation facility to the Program Director. The student must still wait 56 days between attempts for documentation submission. At that time a voucher will be given to the student. This voucher can be used for EITHER 2 hours CTA or 10 points on a unit test (not a final). These points are categorized as

bonus points & will not count towards a passing score on a unit positioning test but will be added to the final recorded score.

Please do not have the staff fill out extra paperwork! Just put the form you receive in the Program Director's mailbox (example below)


Oklahoma Blood Institute
Texas Blood Institute
Arkansas Blood Institute

Please keep this form for at least 48 hours after donation.

THANK YOU FOR GIVING HOPE, HEALTH & HEALING TO SOMEONE IN NEED.

COFFEE MEMORIAL BLOOD CENTER

Donor Name: HOLLOWAY, [redacted] Donor ID #: [redacted]

Donation Date: *02/17/2022*

Your Vital Signs

Temperature: 99.3

Blood Pressure: 137 / 93

Pulse: 96

This is **NOT** your "Donor ID" number

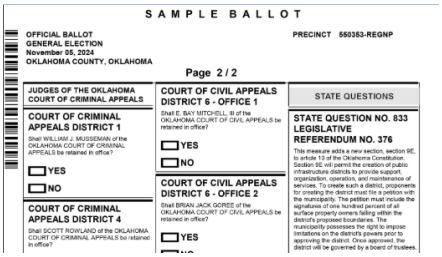
W0910 22 11238 [redacted] IN

If you have any problems concerning your donation or if after donating you believe your blood may be harmful if given to a patient, please call **297-5581** (in Oklahoma City) or **1-800-375-7654** (outside Oklahoma City).

Please observe the following post donation suggestions:
Please rest, eat, and drink in our refreshment area for approximately 10 to 15 minutes.

Voting: Each election <u>during a semester</u> is eligible for community service incentives. The student will bring a copy of the **sample** ballot & the "I voted" sticker obtained after voting within 3 days of the election. Sample ballots can be found by visiting https://okvoterportal.okelections.us/ Put in your name & date of birth, click "find me". Your voter information will come up & your sample ballots can be viewed & printed. **Do not fill in the ballot**. Once documentation is submitted, a voucher will be given to the student. This voucher can be used for EITHER 1 hour CTA or 5 points on a unit test (not a final). These points are categorized as bonus points & will not count towards a passing score on a unit positioning test but will be added to the final recorded score.

Please do not have the staff fill out extra paperwork! Just put the form you receive in the Program Director's mailbox (example below). Of note, you cannot print out the sample ballot after polls close- so you will need to do this before election day and have it ready when you vote and receive your sticker.


SAMPLE BALLOT

OFFICIAL BALLOT
GENERAL ELECTION
November 05, 2024
OKLAHOMA COUNTY, OKLAHOMA

PRECINCT 550353-REGNP

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JUDGES OF THE OKLAHOMA COURT OF CRIMINAL APPEALS

COURT OF CRIMINAL APPEALS DISTRICT 1

Shall WILLIAM J. MUSSEMAN of the OKLAHOMA COURT OF CRIMINAL APPEALS be retained in office?

YES
NO

COURT OF CRIMINAL APPEALS DISTRICT 4

Shall SCOTT ROWLAND of the OKLAHOMA COURT OF CRIMINAL APPEALS be retained in office?

COURT OF CIVIL APPEALS DISTRICT 6 - OFFICE 1

Shall E. BAY MITCHELL, III of the OKLAHOMA COURT OF CIVIL APPEALS be retained in office?

YES
NO

COURT OF CIVIL APPEALS DISTRICT 6 - OFFICE 2

Shall BRIAN JACK GORES of the OKLAHOMA COURT OF CIVIL APPEALS be retained in office?

YES

STATE QUESTIONS

STATE QUESTION NO. 833
LEGISLATIVE REFERENDUM NO. 376

This measure adds a new section, section 9E, to article 10 of the Oklahoma Constitution. Section 9E will permit the creation of public infrastructure districts to provide support, organization, operation, and maintenance of services. To create such a district, proponents for creating the district must file a petition with the municipality. The petition must include the signatures of one hundred percent of all surface property owners falling within the district's proposed boundaries. The municipality possesses the right to impose limitations on the district's powers prior to approving the district. Once approved, the district will be governed by a board of trustees.



Mid-Semester Conferences

The Program Director will hold mid-semester conferences at specific intervals in the first year & upon recognition of concerning practices the second year. First year students will have a mid-semester conference in the first 8-week class, HSXT 1015. The student & the Program Director will discuss progress in class, performance in lab, & study habits up until this point. The student will leave the conference with an understanding of how to maintain or improve their current grade, concerns noticed with laboratory performance, & any study tips or tools that may be helpful. This conference is mandatory. In the first Spring Semester, first year students will meet in the 6th-8th week to discuss progress in the two didactic & one clinic course. Study tips, time management, & classroom cohesiveness will also be addressed.

During their second year of the Program, students will be requested to have a semester progress conference with the Program Director dependent on didactic course progress &/or clinical progress.

Semester Enrollment

The Program Director will enroll each student in the subsequent semester once notification has been made by other professors that the student has passed the current classes. Assignment grades are put in Canvas as soon as possible. Canvas grades do not reflect deductions for attendance. The Professors' grade documents are the official grade. It is advised that students maintain their own grade calculations. Should the Program Director run into an enrollment hold on your account, you will receive an email. Once you have rectified the hold, you must notify the Program Director to enroll you again.

Prolonged Illness, Physical Injury, or Impairment

A student may acquire an illness, sustain a physical injury, or other serious impairment while enrolled in the Program. For the safety of the student, the patient, & the staff it may be necessary to take a temporary leave of absence from clinic. Various actions could occur depending on the type/location of injury, i.e. it may be possible for a student to continue in clinical courses with an orthopedic shoe, but not with a finger splint. As soon as a student recognizes a physical issue that may effect their clinical rotation, the student should schedule a meeting with the Program Director and/or Clinical Coordinator to see if further action needs to occur. Any effort made to hide a condition that would affect a students ability to perform to the Technical Standards & Physical Qualifications policy may result in a Professionalism Concerns Report. If a student is unable to continue in the normal pattern of the Program the following procedures will take effect:

The student will:

1. Submit a doctor's statement attesting to the student's physical condition including limitation in time &/or activity.
    a. **The student must provide the doctor with a copy of the *Technical Standards/Physical Qualifications* found in this handbook.**
    b. The doctor's statement must **specify** which Technical Standards/Physical Qualifications cannot be performed by the student & either how long the activity must be avoided &/or when the student will be evaluated next.
2. Be excused from class &/or clinic as required for recovery.
3. Make up class on an individual basis as arranged with each professor. If possible, it is preferred that the student attend class, virtually if in-person attendance is not possible, to benefit from classroom discussion.
4. Schedule make-up time in the clinic through the clinical coordinator & clinical preceptor. For extended clinical absence that required excessive clinical make-up time, a personalized clinic time make-up form may be created. This will be used for only the time owed from the documented condition. Any additional time missed will follow established clinic attendance policy including time and grade requirements.

Time &/or absences will not be counted against the student's clinical attendance grade with doctor's statement. Clinic time missed will be made up. Any unused CTA will be exhausted as a portion of the missed clinical time.

Full reinstatement into the Program may be accomplished by presenting a physician's statement attesting the health & recovery of the student as it relates to the physical & mental demands of the profession. The doctor's statement must address the related Technical Standards/Physical Qualifications noted when the

injury occurred. Any remaining attendance modifications or activity limitations must be listed. If there are none, that should be listed as well. The student should pay special attention to the drug policy. Even prescribed medications that alter or affect attention, reaction time, or other mental requirements may not be used, nor the student be under the effect of them, during clinical time.

If the illness, physical injury, or other serious impairment will prevent the student from attending clinical for a timeframe longer than it is possible to make up the time in the current semester, the student will receive an *I* in the course or withdraw from the course. The *I* will be resolved in the semester following the 6th semester using the Special Topics Course. If the student withdraws, this clinical semester will be made up using the Special Topics Course in the semester following the 6th semester. As the coursework must be completed within 3 years, this Special Topics option is not available to students who have a gap in enrollment in the Program & been readmitted.

Contingency Plan

Many emergencies or catastrophic events may occur that would necessitate the implementation of a contingency plan. Natural disasters, severe or seasonal weather systems, cyber-attacks, widespread medical emergencies, among others all have the potential to interrupt the normal flow of content delivery. The Radiologic Technology Program will partner with campus wide emergency response protocol on a cohort wide basis. The Program is unable to frame contingency plans based on individual students. During the entirety of the event, the Program Director will be in communication with Faculty, students, administration, & accreditation body. Changes, updates, & discontinuation of the contingency plan will be clearly communicated. It is imperative that students remain in communication with all Faculty during this time and ask questions as they arise. Challenges to that communication, such as loss of power, need to be disclosed as soon as possible.

As each emergency or disaster will be a unique experience, the following guidelines are broad in nature & specific plans will be designed & implemented following collaboration of Program Director, Clinical Coordinator, College Administration, & Facility Administration. While the Program is carefully designed around prerequisites & progression, the safety of the students will outweigh the need to complete the Program.

In the following list are general options that may happen during an event:

- Disruption of face-to-face didactic education
- Disruption of laboratory education
- Disruption of clinical education

Potential actions to alleviate the disruptions include, but are not limited to:

- Online didactic delivery
- Modified, remote laboratory exercises
- Extension of graduation dates allowing students to fulfil didactic &/or clinical requirements
- Delaying admissions to allow current students more flexibility to complete the Program
- Campus closures may supersede Program continuity plans

Campus & Classroom Contingency Plans:

- Program Director will be notified of campus closures via the Office of Academic Affairs or the Dean of Health Sciences.
- Program Director will notify Faculty of the details of the event.

- Students will be notified of campus emergency protocol via the Rose Alert System, email, Canvas, &/or local news stations.
- Faculty will post announcements on Canvas & send through email communication regarding class schedule, delivery method, & assignment adjustments.
- Altered educational experiences may be put in place such as case study analysis, video submission of skills, or rearrangement of course schedule.
- In the event the campus network is down, the Program Director & Clinical Coordinator will make individual phone calls to students.
- In the event didactic education is moved online, the Online Class Policy will be in effect. This will be communicated to students via the working communications systems. Education may be delivered by Zoom, Panopto in Canvas, Google Docs, etc.).
- Campus wide changes in services available (Faculty offices, LRC, student services) will be communicated by the campus.

Clinical Education Contingency Plan:

- All effort will be made to continue in-person laboratory exercises in a controlled environment with enhanced safety measures during the timeframe of clinical interruption.
- Student will only return to clinical assignments when the Faculty deems it safe.
- Adjustment of location or time of clinical assignments may be necessary.
- All JRCERT Supervision policies will be adhered to.
- The Program will ensure adequate PPE is available to students during their rotations or laboratory experience.
- The Program will remain in contact with each clinical affiliate to assure both parties are aware of temporary policy changes & notified when permanent policies are reinstated.

Raider Alert System

Raider Alert is Rose State's emergency notification system. It allows authorized Rose State officials to send information & instructions simultaneously through cell phones, text messaging, landline phones & email.

While you are automatically registered for Raider Alert when you come to Rose State College, we ask that you regularly confirm or update your contact information at https://www.getrave.com/login/rose to ensure we can contact you at a moment's notice.

You can also receive Rose State College emergency text notifications on your phone by texting the phrase RSCAlert to number 67283. A confirmation will be sent back along with instructions on how to unsubscribe to Raider Alerts. Please note message & data rates may apply, depending on your phone provider's plan.

Inclement Weather Policy

Oklahoma weather can interrupt the educational process in any season, at any time. All effort is made to disrupt the classroom & clinical educational process as little as possible. Campus wide closure decisions are made at the administrative level & communicated via the Raider Alert System & local news channels. Often, if inclement weather is expected, the College will move instruction to virtually delivered. Therefore, it is expected that **students have the supplies listed in the Online Class Policy readily available** for rapid change in delivery. Procedures regarding class & clinic attendance vary based on the type of interruption & its expected arrival time.

The manner in which the college announces changes to instruction on inclement weather days limits what the program can deliver as far as content and/or expectations of attending class. In general, those are:

- **"Campus Closed. Classes moved to virtual":**
    - Lecture will be held online during class time. This includes quizzing and testing where possible.
    - This allows us to not lose content delivery days and syllabuses generally are unaffected.
    - The student **may not attend clinic**.
- **"Campus open late/close early":**
    - Class time will be divided amongst topics as outlined on Canvas.
    - **Clinic attendance is required** during campus open times unless the student decides to use CTA.
- **"Campus closed. Classes canceled"**:
    - **The program is not allowed** to hold nor require virtual classes.
    - The professor may post a recorded lecture, hold optional "makeup" sessions once campus opens again, hold class in lieu of clinic, or hold mandatory extended class once the college opens again.
    - The student **may not attend clinic**.
    - Should classes be canceled too many days to be able to absorb in a syllabus**, the program will provide recorded lectures.** These lectures will be in lieu of class and the contained content will be required as if delivered in class on that day.

Class:

1. *If inclement weather is expected, but **the campus has not yet closed***:
    a. The student will come to class. If the college is open we will have class.
    b. If the student feels their route to the college is not safe, the student may choose to stay home. Normal class absence policies will be in effect including missed assignments, class points, etc.
2. *If the **college announces a timed closure***, class will be released at that time. (ex. 9:00 am close)
    a. If the time the college announces is *within 1 hour of class beginning time*, classes will be canceled that day. This will be reinforced via announcement on Canvas & through email. (ex. Class begins at 8:30 & college closes 9:00 am: no class; Class begins at 8:30 & college closes 12:00 pm: yes, class)
    b. Each professor will let you know how dues dates, schedule etc. will be handled.
3. *If the **college announces a late open time***, class will begin at that time. (ex. 11:00 am open)
    a. If the time the college announces is *within 1 hour of class ending time*, classes will be canceled that day. This will be reinforced via announcement on Canvas & through email. (ex. Class ends at 11:30 & college opens 11:00 am: no class; Class end at 11:30 & college opens 10:00 am: yes, class)
    b. Each professor will let you know how dues dates, schedule etc. will be handled.
4. In any circumstance, **the student should be prepared for instruction to move to virtual format.** The students are notified of this change at the same time as the professors. Watch Canvas Announcements & your Raider email for instructions. Topics/activities that can be delivered online will be topics/activities that cannot will be rescheduled.

5. Occasionally, depending on how many class sessions are canceled &/or moved to virtual, it may be necessary to schedule **curriculum recovery sessions** outside of normal class/clinic time.
    a. The sessions will not be mandatory; therefore, attendance will not be taken. However, the content delivered is required for professional knowledge & therefore will appear on tests.
    b. Every effort will be made to notify the students in time to rearrange any pre-scheduled activity.

When the college campus closes for weather related events, clinic rotations are canceled as well. In the event that the college may close while the student is already in clinic, or has already begun the trip to clinic, the Program desires for the student to make travel decisions based on what is safest for the student. Equally, it is important for the student to realize the profession they are entering is considered essential. The radiography department does not close for inclement weather. Radiologic Technology Faculty will make decisions about applying the Absence/Late arrival/Early departure grade component to inclement weather days. However, all time missed from clinic, other than time the college is officially closed or that which is covered with your allowed Clinical Time Allotments (CTAs), will be made up according to Clinical Attendance policies.

Notification of campus closure, delayed opening, or early closing will be broadcast using the Raider Alert System. While at clinic, the student should not have access to a personal phone or a smartwatch, therefore early releases will be communicated by Faculty members to the hospital department phone. At no time should a student call from clinic to ask if school is closed. See that section for further information.

Clinic:

1. *If inclement weather is expected,* ***but the campus has not closed yet***:
    a. The student may choose to use CTAs & stay home. Call in as stated in the Clinical Attendance Policy.
    b. If the student has no remaining CTAs, the student will report to clinic. If the school closes, your clinical site will get a call from the Program Faculty releasing you to leave.
    c. If the student has no remaining CTAs & does not feel it is safe to travel, the student will call in to the clinical site & college as stated in the Clinical Attendance Policy. The hours missed will be made up.

2. *If the* ***college announces a timed closure*** (ex. 10:00 am close):
    a. The RSC Faculty will call the facility & release students.
    b. If a student has a time deficit, the student may call the Program Director or Clinical Coordinator from a hospital phone & request to stay to fulfill make-up time. A Make-Up Time Agreement form will be filled out & the PD or CC will document its approval.
    c. If a student desires to remain at the clinical site to take advantage of competency opportunities that may arise, the student may call the Program Director or Clinical Coordinator from a hospital phone & request to stay. A Make-Up Time Agreement form will be filled out & amended to reflect the potential competency opportunity. The time the student stays is not banked & will not be available to take off at a later time.

3. If the ***college announces a late timed open*** (ex. 10:00 am open):
    a. Report to clinic at college open time.
    b. If the student does not feel it is safe enough to drive, the student may use CTAs for the remaining hours of clinic (5 hours in this scenario).

c. If the student does not have remaining CTAs, the student may call in as stated in Clinic Attendance Policy. The student will fill out make up time agreements to make up the time according to the Clinical Attendance Policy.

Online Class Policy

In the event the college determines face-to-face classes are no longer safe, Radiologic Technology classes may need to shift to online format. All effort will be made to preserve laboratory & clinical components unaltered. Attending class online requires an increased level of concentration, time management, & effort. This policy is intended to put the framework in place for students to create an effective learning space away from the college campus. Note: some classes may have a combination of Synchronous, Asynchronous, & Laboratory components.

Synchronous Class:

For each class, the professor determines which is best supported by synchronous classes via Zoom or another platform, students will:

- Create a learning environment at home or other location that supports an uninterrupted, well-lit surface area for the student to be present in class during posted class times.
- Troubleshoot internet connection to ensure continuous, quality connection for the entirety of class.
- Attend class via Zoom; enter class on time. Follow professor's instructions regarding mute, video, & chat.
- Follow class rules as stated in syllabus & Policy & Procedure Manual including cell phone usage, breaks, & attendance policy.
- Be proactive with communication with professor regarding absences, course work questions, & other questions.

Asynchronous Class:

For classes the professor determines is best supported by asynchronous classes via Zoom or another platform, students will:

- Create a learning environment at home or other location that supports an uninterrupted, well-lit surface area for the student to be present when completing learning activities.
- Pay close attention to due dates. Oftentimes, discussions will have two dates- the first being when you need to post your response to the prompt & the second when you should complete discussions with others regarding their responses.
- Respond to integrity statement regarding cheating, plagiarizing, submitting unoriginal work, & other forms of dishonesty.

Quizzes & Tests proctored by Respondus Lockdown Browser with Monitor:

In the event quizzes & tests require proctoring, the student will abide by the following guidelines. Failure to do so will result in reduction of grade on the assignment & conference with professor & Program Director. Repeated violations will result in disciplinary action according to the Policy & Procedure Manual.

- Create a learning environment at home or other location that supports an uninterrupted, well-lit surface area for the student to complete quiz or test.
- Prepare your area for the test or quiz: there should be nothing on the area around your computer.

- Nothing means nothing: beverage, snack, cell phone, additional computer, books, notebooks, folders, blanket, cat, lizard, & anything else that would be considered a something.
- If a calculator is required, you will use the calculator on Respondus.
- Your professor may allow one, blank piece of paper & one writing utensil. You will show both sides of the paper on your environment video. Before submitting your test, you will once again- slowly- show both sides of the paper.

- Prepare your webcam for accurate recording:
  - Do Webcam Check if you have not your webcam with the Program before, or if your computer, location, or Wi-Fi network is different than you have used before.
  - Do not wear a hat or baseball cap.
  - If you are asked to adjust anything by the facial recognition software, you must perform the adjustment.
  - Have your computer on a firm surface, not a bed, your lap, or any other surface that may cause the computer to move.
  - For integrated webcams, refrain from adjusting screen once the initial pre-test activities are completed. The frame should include your shoulders to just above your head.
  - For external webcams, the camera should be directed to the anterior surface of your face & include your shoulders to just above your head.
  - The room will be well lit & not backlit.
- Remain at your workstation for the duration of the test.
  - As stated in the Respondus directions, if you need to leave the frame for any reason, look directly in the camera, state the reason you are leaving. After viewing the video, it will be up to the professor to determine if a conference should be scheduled. This should be a never or rare occurrence.

- Follow all directions given in the Start Up Sequence:
  - Terms of Use: Read & Agree
  - Webcam Check:
    - Does your webcam image meet the requirements stated above?
  - Additional Instructions: Read them
  - Guidelines: Read them & make adjustments as necessary.
  - Student Photo: Position yourself in the camera & take the picture
  - Environment Check Video: This is the most important component of the Start Up Sequence. Inadequate environment checks will result in grade reduction & conferences with professor & Program Director. Repeated violations will be handled using Student Professionalism Concerns Report & Program Discipline Policy.
    - The video should be taken slowly, allowing your camera to focus on surfaces. The lightening in the room should be bright enough to identify items.
    - The video should include all surface the device is laying on: front, back, both sides. All surface below where student is sitting: front, back, both sides. A 360° pan of the area around the device at level of student.
    - The video will be a minimum of 20 secs.

- Facial Detection Scan: Once you get the green thumb, you should remain in that general area. The only time your face should not be visible is if you are working on your scratch paper. Proof of working on your scratch paper will be shown at the end of your test.

- Respond appropriately when program prompts you about your face being in frame, lighting issues, etc. Dismissing the prompts without rectifying the issue may result in a conference with professor.

Professionalism

Students are expected to act in a professional manner in the classroom as well as in the clinical environment. Evaluation of students' behaviors occur in a variety of situations including environments of stress, academic pressure, high workload, individual & group assessments, receiving constructive criticism, etc. Students will receive informal feedback from professors & clinical staff & should respond to that feedback appropriately. Students will receive formal feedback via clinical evaluations at each rotation & following class assessments. When deficiencies are noticed in a student's professional attitude or behavior in the classroom or the clinical environment a Professionalism Concerns Report will be completed & discussed with the student.

Professional Concerns Reports provide the student valuable feedback of his or her actions not able to be evaluated by a normal assessment method. Professional Concerns Reports are necessary to assist the student in recognizing weaknesses in their professional conduct in order to improve.

Professional Concerns Reports are completed not necessarily in relation to specific incidents, but a pattern of behavior. This report becomes part of the student's Program record. While intended to be formative, failure to improve professional behavior initiating repeated Professional Concerns Reports may lead to the initiation of the Disciplinary Policy.

Students also have the opportunity to give feedback about the Program, Faculty, clinical sites, & clinical preceptors several times throughout the Program & after graduation. Giving feedback is an equally important component of professionalism as is receiving feedback. Positive feedback & suggestions of improvement are important to the growth of the Program. Feedback is solicited at the end of each semester, at the end of the Program, & one year post graduation. While participation in the feedback process is not mandatory, it is expected.

Electronic Communication Devices in Classroom

Use of electronic communication devices is prohibited in the classroom, during class &/or lab hours, including testing time, in either respective location. Electronic communication devices will not be on your person during laboratory usage nor at the clinical site. Cellphones, Smartphones, iPods, smart glasses, MP3 players, PDAs, smartwatches, pen scanners, recording devices, & laptops are all considered distractions & disrespectful of the learning environment, peers, & instructors.

1. Phones will not be visible & must be set on vibrate/silent or turned off during class hours.
2. If a phone rings, or notification alert occurs, the student will be asked to leave, & an unexcused absence will be recorded in all courses that day. No credit will be given for course work performed the day of the offence.
3. Students may use any of the listed devices during class breaks, & before or after class.
4. Taking excessive breaks during lecture to check device in hallway with initiate attendance policy without notice.

5. Exceptions are with pre-class instructor permission; for example, laptops may be used in portions of courses for research.
6. **Should the student have a specific need** for use of a communication device during class, the student should discuss that with the associated professor before class begins.

Recording Devices:

Auditory recording devices may be used for classroom lectures. They must be visible to the instructor when in use. They will be turned **off** before any review activity & when the professor is going over quizzes & tests in the classroom &/or in the laboratory. It is the student's responsibility to turn off the device whether or not the instruction is given by the professor.

This must be a separate device other than the prohibited electronic communication devices stated above. Visual recording devices are not allowed. Failure to turn off the device during the prohibited times will be considered cheating & no credit will be given for the assignment in question. If it is a test, the test will still be taken & passed to ensure adequate knowledge for the care of patients, but no credit will be given. ***None of the program faculty nor adjunct faculty give permission for the recordings to be posted, shared, uploaded or in any other fashion disseminated to other people or accounts***. Posting, sharing, uploading or in any other way making the recording available to anyone outside of the program or in any semester other than when the original recording was made will initiate the Disciplinary Action Policy.

Laboratory Usage

The Laboratory proper (HSC 148) can be divided into two (2) zones based on purpose. The study area is the area with tables, computers, & dry erase boards. The training area includes all three equipment rooms: Unenergized Lab, Energized Lab, & Overhead Room.



Students may use the study area in the laboratory during any professor's office hours after notifying Faculty they would like to study in the lab. When using the study area, students should not use, manipulate, or handle radiographic equipment without prior approval from Faculty.

No student will be permitted to use the laboratory equipment without first scheduling the time with a Faculty member. The same radiation protection practices will be used for all laboratory activities that would be necessary in the clinical setting. The student will be expected to cooperate fully with the Program

procedures for maintaining the supplies & equipment in an orderly & safe manner during, & at the completion of, the laboratory activity.

1. The Program laboratory is available to students Monday through Friday corresponding with any Radiologic Technology Faculty 's office hours. The Faculty member must be immediately available should a question or problem arise.

2. **Students will check in with a Faculty member** before entering laboratory. **Students will check out with Faculty member** upon leaving the laboratory.

3. Students will wear laboratory appropriate attire.

    a. Close-toed shoes, hair pulled up, limit jewelry, no fragrances, no pants dragging, wear Rad Badge, no gum, no cellphone nor smartwatch.

4. Questions or problems in the use of the laboratory &/or any of the equipment should be brought to the attention of the supervising Faculty immediately & before continuing with the laboratory activity.

5. During the preclinical laboratory activities, there will be a Faculty member in both the energized & unenergized areas.

6. Students may handle small phantoms & phantoms already in a support device: i.e. foot, head, arm, Oscar in a box, Rose on a cart, etc.; students may not handle large phantoms without a Faculty member present: i.e. pelvis, Oscar's torso, full-body Rose, etc. Phantoms that need to be moved from one surface to another require a Faculty member to be present when it is moved: i.e. from stretcher to table, from table to stretcher, wheelchair, etc.

7. Upon completion of laboratory activities, the student will ensure all ancillary devices (sponges, shields, image receptors, calipers, angliners, phantoms, etc) have been returned to their appropriate areas. Repeated disregard for Program equipment will initiate the disciplinary policy & the student will lose unsupervised laboratory usage.

Social Media Policy

Use of social media platforms to share lives, make connections, & stay informed have become an integral part of society. It is important to recognize the potential hazards that exist in the social media environment, both as a professional as well as a caretaker for others. The following policies & procedures are designed to help mitigate your risk as you navigate the new profession of radiography. Social media & networking platforms include Facebook, X (Twitter), Threads, Reddit, LinkedIn, Instagram, TikTok, YouTube, Snapchat, BeReal, internet forums, personal blogs, among others. While your posts are intended to contain your personal viewpoints &/or opinions, that may not be explicitly clear to the reader. You can still be held liable as representing the views of the college or clinical facility. The Rose State College Radiologic Technology Program will determine, in its sole discretion, whether a particular internet posting violates professional, &/or Program, &/or college policies. Violation of these policies will be handled via the Disciplinary Policy explained elsewhere in this Manual.

1. The Rose State College marketing department must approve and have the username and password for any publicly accessible social media account.

2. Students will not use Social Media to share, post, or otherwise disseminate information obtained during their clinical education.
3. Students may not disclose any protected health information (PHI) or other patient identifiable information of any kind on any social media. Although an individual may not be identified by name, if there is a reasonable basis to believe that the person could be identified from information, its use could be a violation of HIPAA.
4. Students may not post videos or photographs of materials displaying any Rose State College equipment, logo, or other identifying information without prior approval.
5. Students will not discuss personalities or interactions involving college Faculty, clinical preceptors, other students, physicians, hospital personnel, or patients on private or public platforms.
6. Students may also not discuss problems, issues, or negative experiences encountered either on campus or during their clinical experiences in any online forum. Any concerns experienced in these areas should be discussed with the appropriate college personnel.
7. To maintain the professional relationship between any current students & all Faculty, **current students shall not "friend" (on Facebook) or "follow" on other platforms any member of the Program Faculty including adjuncts & clinical preceptors.** Once graduated, the student may decide to initiate a social media relationship.
8. It is highly encouraged students do not initiate or accept "friends" or "follows" from hospital staff until graduation.
9. If the class decides to make a group on a social media platform or other group communication application, it shall be set to private. Posts to this site must follow all the above guidelines regarding privacy, confidentiality & respect, as well as abide by the Rose State College Code of Conduct. When posting to a blog or other social networking site, assume Faculty, other students, co-workers, clients/patients, hospital personnel, & potential future employers may have access to this information, now, or in the future. If a student has a question or concern, it is best to ask Faculty directly rather than relying on hearsay from other students.
10. Posting to or accessing assignments, questions, or activities on other social or sharing websites in order to get answers or share answers is considered cheating. This may result in Administrative Withdrawal from the program.

Disciplinary Action

The Rose State College Student Handbook outlines reasons & procedures for disciplinary action. In addition to the reasons listed in that Handbook, disciplinary action may also be taken if a Program student does not consistently & appropriately meet standards of safety & professional behavior in the classroom, laboratory, or clinical site. These standards include, but are not limited to:

1. Safely employing the psychomotor skills necessary to provide patient care as outlined in the clinical course syllabus & on the individual competency forms.
2. Meeting the Technical Standards/Physical Qualifications as listed in this Program & Clinical Manual.
3. Recognizing the need for assistance & seeking supervision from the clinical staff members & Program Faculty to ensure safe practices in the classroom, laboratory, & clinical setting.

4. Following the rules set forth in this Radiologic Technology Program Policies & Procedures & Clinical Manual, & in the Rose State College Student Handbook, including the Rose State College Drug-Free Policy.
5. Following the *ARRT Standards of Ethics*. Copies of the *ARRT Standards of Ethics* are available in the Program office & online at www.arrt.org This includes any misdemeanor or felony charges that are required to be reported during program tenure. Should the nature of the charges require removal from the clinical setting, this policy will be in effect.

Maintaining the safety of patients & colleagues in the classroom, laboratory, & clinical area is a high priority. Unsafe behavior is that which places the patient, other students, &/or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means the student creates an environment of anxiety, distress, or uneasiness for the patient, family of the patient, other students, or staff. Unsafe behavior may be a single occurrence of a very serious nature or may be a pattern of behavior involving unacceptable risk.

Additional Behavior that may result in disciplinary action includes, but is not limited to:

1. Plagiarism
2. Cheating
3. Abuse or mistreatment of patients
4. Excessive absences
5. Soliciting or accepting coursework from past students to complete an assignment in the current semester
6. Failure to fully participate in departmental flow & patient care responsibilities
7. Possession of weapons, including those with a perceived usefulness: pocketknives, box cutters, etc.
8. Possession, consumption, being under the influence of intoxicating beverages, narcotics, or other behavior-affecting drugs
9. Gambling
10. Profanity, foul, or abusive language
11. Improper behavior toward patients, visitors, other students, or staff
12. Loitering at clinic before or after clinic time
13. Possession and/or use of a cell phone or smartwatch in the patient care area
14. Capturing, or possessing, an entire, or partial, radiographic image taken from an image acquired at a clinical affiliate
15. Illegal possession of school &/or clinical or clinical-related property
16. Fighting
17. Posting prohibited information on a social media platform.
18. Sleeping during clinical assignment
19. Cheating during competency procedure
20. Presenting an exam for competency that was not performed independently
21. Failure to maintain, or falsification of, records
22. Vandalism or willful destruction of school &/or clinical or clinical-related property
23. Removal from clinical education site
24. Parking anywhere other than student parking at clinical facilities

Students may enter the system of disciplinary action at any of the given levels based on the severity of the offense.

Level 1 The student receives a **verbal warning** from the Faculty member. A contract may be established outlining the expectations. Depending on the nature of the offense, an Incident Report &/or a Professionalism Concerns Report will be completed. The Faculty member may document this verbal warning for program documentation via a variety of methods including, but not limited to, reporting in Faculty Meetings, completing a Professionalism Concerns Report, or informal mentorship at the clinical site.

Level 2 The student & Faculty member meet with the Program Director, & the student is placed on probation for the remainder of the Program. Depending on the nature of the offense, an Incident Report, Student Conference Report, &/or a Professionalism Concerns Report will be completed.

Level 3 The student is recommended for dismissal from the Program. Depending on the nature of the offense, an Incident Report, Student Conference Report, &/or a Professionalism Concerns Report will be completed. If dismissed, the student will receive the documentation laid out in the Academic Probation, Academic Dismissal, & Administrative Dismissal located elsewhere in this manual.

Incident Reports

Incident reports are required in order to provide the College & the clinical affiliate with pertinent information related to any happening not consistent with the routine care of the patients or in normal student operations. Accidents resulting in personal injury, damage to property, theft, or other incident inconsistent with the normal operation in class, lab, or clinic require that the student complete an incident report. It is the policy of the Program that supervisory personnel be alerted to possible hazardous conditions that require corrective action as well as to provide factual information regarding the possible legal implications arising from such incidents. The Incident Report is not intended to imply guilt or serve as admission to unethical or unlawful behavior, nor does its creation imply acceptance of responsibility. It is intended to document facts near the time of occurrence of an abnormal event.

1. An Incident Report is completed with a Faculty member, within twenty-four hours of any occurrence. Every incident, no matter how minor, is reported by listing the facts surrounding the incident.
2. If the incident occurs in the clinical setting, the student will notify the clinical preceptor &/or supervisor immediately & follow through with the hospital policy for dealing with incident reports.
3. The student must also notify a Program Faculty member by phone the same day on which the incident occurs, & then file a report within the twenty-four hour period.
4. All incidents recorded by students on specified hospital forms must also be reported & recorded on Rose State Conference Forms for purposes of legal documentation. Continuity is needed in order to keep from jeopardizing the student's progress & maintain a professional & trustworthy relationship with the hospitals & affiliations.

Please Note: Rose State College does not provide accident &/or hospitalization coverage for students. If a student sustains an injury & seeks medical attention, the student is responsible for all expenses incurred.

Grievance Procedure

The grievance procedure shall be available to any currently enrolled Radiologic Technology Program student. The procedure is applicable to items contained in the Program & Clinical Manual & is applied fairly & equitably. It is the responsibility of the Rose State College Radiologic Technology Program to provide an equitable & comprehensive radiography education to all students. The Program maintains national accreditation with the Joint Review Committee on Education in Radiologic Technology (JRCERT). While maintaining this voluntary accreditation, the Program is required to meet the JRCERT. Standards for an Accredited Educational Program in Radiologic Sciences. A copy of The Standards is available in the Program Office & online at www.jrcert.org

Clinical Staff Personnel Grievance Procedure

1. The student will contact the Clinical Preceptor & Clinical Site Supervisor assigned to the facility as soon as possible & make him or her aware of the concern. Written documentation shall be submitted to the Clinical Preceptor, Program Faculty, &/or Director at this time.
2. The Clinical Preceptor will investigate the situation & determine if a meeting between the individuals involved &/or a higher authority is in order to help address the situation or concerns of the student.
3. The Clinical Preceptor will document the incident/concern & relay the information to the Clinical Site Supervisor, Clinical Coordinator, & Program Director.
4. An initial response will be provided to the student within 10 working days following the initial presentation of the issue to the Program Director.

Program Faculty Grievance Procedure

1. Contact the Faculty person with whom you have concerns & discuss the issue.
2. If you prefer not to contact the Faculty person directly, you may request to meet with the Program Director. Be prepared to submit a written copy of your concerns at that time.
3. Should you prefer to meet with a third party initially, you may contact the Dean of the Health Sciences Division directly. Provide a written copy of your concerns to the Dean & Program Director at that time.
4. An initial response to the issue of concern will be provided to the student within 10 working days following the initial presentation to Faculty.

Institutional Grievance Procedure

Rose State College provides for appeals process to be addressed by various committees & persons on campus. For specific information regarding the procedures for filing grievance/complaints/appeals within the institution, refer to the *Rose State College Student Handbook*. The steps of a formal resolution conducted in a timely manner are described. A copy of the handbook is available online.

Grievance Related to JRCERT Standards Non-Compliance

1. The student must first follow Program & College Grievance Procedure. If still unsatisfied & the complaint involves JRCERT Standards, the student may elevate the concern using the following procedure.
2. Concerns, complaints, or allegations of non-compliance with the JRCERT Standards by the Program may be submitted by any individual or group, including students, graduates, Faculty, & clinical staff. The allegations must relate to the Standards, be provided in writing, & signed by the complainant.

The complainant must indicate that efforts have been made to bring the allegations of non-compliance with the Standards to the attention of Program officials &/or college.

3. Initial allegations of non-compliance & documentation of the events that lead to the complaint should be presented in writing to:

   The Program Director

   OR

   The Dean of the Health Sciences Division
4. An initial response to the complaint will be given within 10 working days.
5. If there is no satisfactory resolution to the complainant, & dependent on the nature of the allegations, it may be forwarded to the Vice President of Academic Affairs &/or the President. This step will be completed within 20 working days.
6. Should the complainant continue to feel that no satisfactory resolution has been achieved at the local level, the JRCERT may be contacted.

   JRCERT
   20 N. Wacker Dr., Suite 2850
   Chicago IL 60606-3182
   (312) 704-5300, FAX (312) 704-5304
7. If the allegations appear to be valid, the JRCERT will contact the sponsoring institution with a deadline for the submission of a written response.
8. Once the response of the sponsoring institution has been received, the JRCERT members will be provided with all pertinent information.
9. After deliberation, the JRCERT committee determines the appropriate action.

Personal Withdrawal

If a student decides to withdraw from the Program an *Exit Interview* must be scheduled with the Program Director. Students must bring the following items to the Exit Interview: clinic ID badge, Rad Badge, clinic notebook. **Following the Exit Interview, the Program Director will unenroll the student from all HSXT courses.** Students who withdraw in the first Fall semester will need to reapply to the Program. In semesters 2-6, failure to complete an Exit Interview prohibits the student from petitioning for readmission. Failure to turn in program equipment may prevent the student from petitioning for return to the Program. Program studies must be completed within three years. Therefore, any policies regarding the Special Topics course following the consecutive sixth semester are not available to students who withdraw & petition for readmission.

Personal Withdrawals require the student to answer “yes” to the ARRT Ethics question number 3 upon completion of the Rose State College Radiologic Technology Program or any other program you may attend. The Program Director will automatically notify the ARRT of Personal Withdrawals, as required.

Questions regarding tuition, fees, & penalties regarding late withdraw should be directed to the Admissions Department https://rose.edu/affordability/financial-aid/

Academic Probation, Academic Dismissal, & Administrative Dismissal

The purpose of the Academic Probation & Dismissal Policy is to ensure the highest quality student, both for Rose State College & the profession of Radiologic Technology. Should the student necessitate an Academic Dismissal or Administrative Dismissal, an Exit Interview must be scheduled with the Program Director.

Students must bring the following items to the Exit Interview: clinic ID badge, Rad Badge, clinic notebook. **Following the Exit Interview, the Program Director will unenroll the student from all HSXT courses.** Failure to complete an Exit Interview prohibits the student from petitioning for readmission. Failure to turn in program equipment may prevent the student from petitioning for return to the Program. Program studies must be completed within three years. Therefore, any policies regarding the Special Topics course following the consecutive sixth semester are not available to students who are dismissed & petition for readmission.

Academic & Administrative Dismissals require the student to answer "yes" to the ARRT Ethics question number 3 upon completion of the Rose State College Radiologic Technology Program or any other program you may attend. The Program Director will automatically notify the ARRT of Academic &/or Administrative Dismissals as required.

The following are regulations regarding dismissal:

1. The student must attain a C or better grade in all professional courses. Program courses begin with prefix HSXT & often are composed of mini-topics within each course number. The entire course by the end of the eight-week or sixteen-week semester must be a C or better.
2. A grade of D, F, or I in a professional course will result in academic stop out from the Program until the following year when the student may petition for readmission & the course can be retaken & completed with a satisfactory grade.
3. Students who cheat, plagiarize, or use artificial intelligence assistance on assignments &/or competencies may not be eligible for readmittance.
4. Students who are academically or administratively dismissed in the first Fall semester of the Program must re-apply for readmittance.
5. The student may repeat a professional course only once at Rose State College.
6. Proficiency ratings from clinical courses must be satisfactory in all respects for the student to be considered for readmission.
7. Any student refusing to comply with all regulations set forth in this Manual is subject to recommendation for probation or full dismissal from the Program. Depending on the actions leading to dismissal, readmission may or may not be available to the student. This will be discussed in the Exit Interview.
8. Dismissal from a clinical site while on probation.
9. Students must successfully complete a drug test in the summer of their first year to continue to the second year.

Note: Withdrawing from the Program is different than withdrawing from classes. *If you withdraw, or are academically or administratively dismissed, it is your responsibility to withdraw from classes*. All college drop/withdraw dates apply & can be found in the college catalog.

Probationary Status

The intention of probationary status is offered to assist the student in developing habits, behaviors, skills, &/or attitudes related to the knowledge & competence required in a profession that cares for a vulnerable population. In the event a student is put on probation, a Student Conference Report will be completed by the Program Director that outlines the deficiency that led to the probation, evidence of the deficiency, & parameters of probation. The length of probation should also be outlined, which could reflect the duration of the Program. For students placed on probation due to readmission to the Program following a personal

withdrawal, probation does not imply a deficiency, but a recognition that a full year away from the radiography Program can cause didactic, confidence, & skills gaps that need to be closely monitored. Additionally, the Student Conference Report will list the actions the student must perform to show improvement in the deficiency & increased performance of the didactic, clinical, or behavioral components of the Program. The following items are intended to serve as a guideline for probationary activities; they are not inclusive of all possibilities as details will be unique to each situation.

Potential Probation Progress Activities may include, but are not limited to, the following:

1. Create & submit didactic study schedules
2. Create & submit laboratory practice schedules
3. Submit proof of study group participation
4. Scheduled &/or random drug test at the student's expense
5. Reviewing patient care sheets in person with the Clinical Coordinator or Program Director
6. Reading, watching, & responding to professional articles or videos
7. Evidence of adherence to professional appearance policy
8. Review of clinical time sheet
9. Completion of remedial coursework or laboratory activities
10. Simulation of exams in laboratory

Readmission

Readmission following personal withdrawals, academic dismissals, & administrative dismissals in the second through fifth semesters will be available one time only at the beginning of the applicable semester provided space is available in that class. Any student who fails a program course can repeat that course one time only the next time the course is offered, provided the student is readmitted, & space is available in that class. Program studies must be completed within three years. Therefore, any policies regarding the Special Topics course following the sixth consecutive semester is not available to students who withdraw or are dismissed, & petition for readmission.

1. The student must write a **letter of petition** to the Program Faculty describing the student's perception of the reason for the withdrawal or failure & steps that the student has taken, or will take, to correct the problem. For students who withdrew for personal reasons & not because of an academic or clinical deficiency, the letter of petition must reflect what attempts were made, if any, to maintain knowledge & skills over the course of the year. This letter must be received in the semester preceding the desired return. The Exit Interview Document will have the final date listed when a letter of petition can be received.
2. Prior to consideration for re-entry into the Program, the student must successfully complete the ARRT Ethics Review Preapplication as your dismissal instructs you to answer "yes" on Ethics question #3. The Ethics Review Preapplication can be found here: https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/d67eef6f-1560-49bb-9a49-c958d2a67b67/ethics-review-prepplication.pdf A print copy of the application can be obtained from the Program Director. I copy of the ARRT Letter in Response to the Preapplication will be turned in with the readmission petition letter.
3. The Program Faculty will review the letter of petition and the ARRT Response at their next scheduled meeting. The committee may set certain criteria that must be met by the student before the student can be considered for readmission. The criteria may include, but are not limited to:

a. Taking remedial classes
b. Completing computer-assisted instructional programs
c. Attending workshops or support groups offered on campus
d. Performing laboratory remediation exercises

4. Readmission to the course is on a space available basis only. The student is not guaranteed readmission even if the criteria established by the Faculty is met. If readmitted, the student will be placed on probation for the remainder of the Program.
5. The readmission paperwork will list the parameters of the student's probation. By enrolling in HSXT courses, the student agrees to the listed parameters.
6. Retention of completed competencies will be at the discretion of Program officials following a review & simulation process as outlined by the Clinical Coordinator.
7. The student must resubmit &/or reaffirm Program admittance documentation to include background check, drug test, CPR certification, PPD test at their cost.
8. The student will be oriented to the current Policy & Clinical Manual.
9. If the student chooses not to return to the Program at the next offering of the course, the student will need to re-apply to the Program.
10. Students are limited to a single petition to the Program for readmission. Program studies must be completed within three years.

Remediation

It is the Program's intent to prepare students to function in the delivery of health care services. Patient care, radiation protection, & imaging procedures are introduced in the first semester during the pre-clinical phase of the Program. Should it come to the attention of the Faculty that the student is not functioning at an appropriate level, remediation is recommended. Additionally, if a student has petitioned to re-join the Program after a year of absence, remediation will be a component of probationary status & Program officials will construct a review & simulation plan.

1. If the student is not meeting the Program requirements, the student will be counseled. A recommendation may be made by the Faculty or Program Director that the student perform remedial work. This work is designed to reinforce objectives previously covered in the curriculum.
2. Program requirement for remediation is necessary to ensure competency at graduation for the entry-level radiographer. If at any point in the educational process a student consistently demonstrates critical clinical errors, lack of judgment, or incompetence, remediation is recommended.
3. The reassessment of skills & competencies will proceed as necessary that may include, but is not limited to:
   a. Practical evaluations & written exams to evaluate specific deficiencies as noted by Faculty
   b. Written exams to identify additional areas in need of remediation
   c. Reading, writing, &/or laboratory coursework will be assigned
   d. Repeated practical & written evaluations
4. Successful remediation is based on the outcome of the reassessment process. A Remediation Plan will be developed by the Faculty & student to address the specific areas of concern. Dates, times, & objectives will be agreed upon & a contract will be signed by the Director & the student. If all parts of the Remediation Plan are not fulfilled, the student will not progress to the next semester.

Professional Activities

With the understanding that the health care provider undertakes a career-long obligation to learning & maintaining professional competence, the radiologic technology student has certain professional responsibilities to the community & to the profession. **Currently our State Society is not active. Program Officials are working towards selecting new professional activities. Those will be communicated when the decision is made.*

The Program has purchased an institutional membership to ACERT, The Association of Collegiate Educators in Radiologic Technology. Instructions on how to create your account & use the benefits.
Students are encouraged to participate in:

1. National, state, & local professional associations.
2. Local meetings & the holding of office when appropriate.

Graduation

RSC holds one Graduation Ceremony in May of each year. Radiologic Technology students are Summer Candidates for graduation that walk in the Spring ceremony. Your official graduation date is the conclusion of the Program in July. The degree of Associate in Applied Science (A.A.S.) will be awarded to all students who meet the following requirements:

1. Complete required curriculum courses (didactic & practicum) as listed on the degree worksheet.
2. Attain a "C" or better grade in all professional course work.
3. Completion of all 52 imaging procedures requirements & 10 mandatory patient care procedures requirements
    a. If a student has not completed the required competencies within the 24-month program & has been continuously enrolled, the student will be required to enroll in a one-time only additional 8-week Special Topics course.
    b. Following the completion of the Special Topics Course, for continuously enrolled students, or the 6th semester, for readmitted students, any competencies not completed & ineligible for, or beyond the limit of two, simulation will result in the student receiving an “F” for the course & ineligibility to take the ARRT Credentialing Exam.
4. The Clinical Competency list may contain no more than two simulated procedures. Details about simulation are covered elsewhere in this Manual.
5. Program studies must be completed within three years. Therefore, any policies regarding the Special Topics course following the consecutive sixth semester are not available to students who are dismissed & petition for readmission.
6. Inoculation record & CPR certifications are up to date.
7. Apply for graduation through the Office of Admissions & Records the semester before completion of the Program curriculum.

Graduation & Pinning Ceremonies

Graduation

Students are **invited** to walk in the Rose State College Spring Commencement Ceremonies. Students should follow the instructions received in their student email account in the Spring semester. Graduation ceremonies are special events in the lives of graduates & their families. It is strongly encouraged graduates attend this celebration.

Pinning

The Radiologic Technology Program & Academic Affairs hosts a Pinning Ceremony in July to recognize the accomplishments & successful completion of the Program. This is an opportunity for Faculty, administrators, underclassmen, & family to celebrate with the graduating class. **Participation in the Pinning ceremony is mandatory**.

Student Safety

Radiation Protection in Laboratory

DO'S:

1. Do stand behind a safe barrier during an exposure.
2. Do make sure all other personnel are behind barriers before exposing.
3. Do wear your radiation monitor.
4. Do try to do everything right the first time to eliminate repeats.
5. Do wear appropriate safety attire in the laboratory during scheduled practice & self-study time: hair secured, close-toed sturdy shoes, minimal jewelry, etc.
6. Notify a professor if the x-ray function is on during practice.
7. Do only handle phantoms as instructed.
8. Do use practice image receptors during practice.

DON'TS:

1. Don't remain in the radiographic room while an exposure is in progress.
2. Don't stick your head around the shield or wall barrier while making an exposure.
3. Don't leave the doors open during exposures.
4. Don't allow others to be in the radiographic room during exposures.
5. Don’t wear sandals or high heels.
6. Don’t manipulate phantoms without supervision and assistance.
7. Don’t use digital detectors without direct supervision from faculty.

Radiation Protection & Monitoring Badges

Program students must maintain safe radiation protection practices at all times & wear radiation monitoring badges as directed. Unsafe radiation practice will initiate the Disciplinary Action policy.

1. The taking of exposures on another student, intentionally or unintentionally, is **absolutely prohibited**. All exposures on human beings are to be taken for medical reasons only & as prescribed by a physician.
2. Students will not hold image receptors during exposure.
3. Students shall not hold patients or image receptors during radiographic procedures.
4. Students must never be in the primary beam.

5. Each energized tube has a key-lock function where the equipment can be disabled from producing x-rays, but still function for practice.
6. Each student is assigned two Optically Stimulated Luminescence (OSL) Dosimeters (commonly referred to as a Rad Badge) on a monthly basis, & the student is responsible for their care.
    a. One badge will have student's full first name & last name. This badge is for clinical wear. This badge will be kept with your clinical supplies. Some facilities offer a location for students to hang their badges daily. Otherwise, you will need to keep your badge with you to and from clinic.
    b. One badge will have the student's first initial & last name. This badge is for laboratory wear. This badge will be hung on the board outside the laboratory: Energized room for 1st years and Overhead room for 2nd years.
7. While the OSL badge is not sensitive to heat or moisture, the badge should be kept out of the sun & away from other sources of radiation & should not be laundered.
8. You will wear your current Rad Badge until the next one arrives. Up to date information about delays will be communicated via email.
9. The Program Director will put new badges in your mailbox; this is your signal to exchange both badges.
10. **Do not take the new badges before returning your old ones.** You should not be in possession of more than one month's badges at any time.
    a. Badges should be exchanged within one week of the new badges being placed in your box.
    b. Failure to exchange in that timeframe will require you to exchange your badge in person with the Program Director & discuss what caused the delay.
        i. Repeated failure to exchange badges in a timely manner will result in a Professionalism Concerns Report & may initiate the Disciplinary Action policy.
11. Rad badges are worn face/name forward, at the collar, & outside a lead apron.
12. Badges are to be removed & placed outside the radiographic room when undergoing diagnostic procedures as a patient.
13. Failure to wear the dosimeter will be grounds for the student to be asked to leave clinic until the badge is found & placed on the uniform. Clinic time missed will be counted as a time infraction & makeup time may be necessary if the student has exhausted all CTAs.
14. Loss of monitor badges, mistreatment of badges, or the misuse of badges **must be reported in writing to the Program Director within 5 school days**. It can be weeks before a new badge arrives if needed. The disclosure of the irregularity will be reported using the form at the end of this manual.
15. Monthly badge reading reports will be posted in the lab on the bulletin board. **You must initial your current badge reading each month.** You should initial your reading within one week of the form being hung. Failure to do so will necessitate the Radiation Safety Officer (RSO) meeting with you to personally to explain the importance of this procedure & will result in a Professionalism Concerns Report. Repeated violations may initiate the Disciplinary policy.
16. The Program has set the threshold exposure limit for students of **60 mrems/month (0.6 mSv/month) or 1 rem/year (0.01 Sv/year)** of deep, whole body radiation. Exposure levels in excess of these values will be considered excessive & the investigative protocol, described below, shall be initiated.
17. Should the Program threshold limit be exceeded, the student will:
    a. Be interviewed by the Radiation Safety Officer of the Program to determine how the excessive reading may have occurred.

b. Sign a conference report form documenting discussion & counseling with the RSO/Director due to the high dosimetry report.
c. A list of materials on radiation protection & radiobiology may be given to the student to review so that a follow-up exam can be given if deemed necessary by the radiation safety officer.

18. Additional episodes of excessive radiation exposure may lead to the student being removed from clinical practice. A student removed from clinic for this reason will receive an "F" for the course & will be Administratively Withdrawn from the Program.

Standard Precautions

Many people who carry highly infectious pathogens (e.g., AIDS virus, hepatitis A & B, influenza, SARS-CoV-2, etc.) are not aware of it, thus all students & Faculty will strictly adhere to Standard Precautions while in the clinical education setting. These safety guidelines are designed to protect the students, Faculty, & patients from the spread of infectious diseases. While a healthy individual may be able to easily overcome exposure, patients who are already sick &/or injured are more susceptible to lower thresholds of exposure.

1. Wash hands or use alcohol-based hand sanitizer before & after all patient care activities & patient interactions. Pre-exam hand hygiene should be performed in front of the patient.
2. Hands must be washed following exposure to patients that have, or are suspected of having, Clostridioides difficile, AKA Clostridium difficile, (C. Diff.). Alcohol-based hand sanitizer is not effective against C. Diff.
3. Wash hands after handling any blood & body fluids.
4. Wear gloves at all times when working with patients where blood/body fluids are evident or likely, i.e., open wound trauma, barium enema tip insertion, IV injection.
5. Wear gloves when wiping blood/body fluids from equipment. Use appropriate cleaning solutions.
6. Wearing gloves &/or the use of alcohol foam is not a replacement for handwashing. Handwashing should occur following the removal of gloves.
7. Dispose of linens soiled with blood & body fluids appropriately.
8. All infectious needles, tubing, etc., need to be placed in puncture-proof containers. **Do not clip, bend, or recap needles**.
9. All injuries & splashes must be reported to the clinical preceptor or Faculty person immediately following proper washing of the affected area. If neither of these persons are available, report the incident to the department floor supervisor. An incident report must be completed for both the facility & the Program.
10. If an incident should occur that requires that the student be sent to the health services or other appropriate treatment facility for evaluation & care, the student is responsible for any costs incurred.
11. Periodically, many hospitals are requiring increased infection control measures. Students are required to abide by all stated facility measures included, but not limited to continuous mask wearing, goggles or face shields, respirators, gowns, closely shaven facial hair, having no jewelry below the elbows, etc. Students should adhere to the guidelines regardless of technologist compliance.

Magnetic Resonance Imaging (MRI) Safety Policy

Prior to clinical rotations, students will receive MRI safety training to include the dangers of implants &/or foreign bodies & will be screened for magnetic wave &/or radiofrequency hazards. Students will sign a roster to document MRI safety training & screening documentation will be maintained in the student's record. Any

change in status regarding any of the questions must be reported to the Program Director within 10 business days.

During Clinical rotations, students may assist radiologic technologists with the transport of patients to various parts of the imaging department to include MRI; however, students who do not meet the Programs screening safety criteria for MRI exams will not be permitted beyond zone III of the MRI department. Foreign bodies & implants can cause harm to the individual or others when within the influence of the MRI magnetic field. When in this environment, internal foreign bodies or implants may move or heat causing organ damage to surrounding tissue. Additionally, depending upon the type of implant, the implant may malfunction or stop working completely, such as medication pumps or pacemakers that are not MRI safe. External foreign bodies carried into zone 4 (MRI suite) may be attracted to the magnetic field at a high velocity & injure the individual or anyone in the path of the object's trajectory.

Examples of foreign bodies/ implants that may harm the individual include but are not limited to:

- PACE Makers
- Insulin pumps
- Neurostimulator
- Mechanical devices
- Shunts
- Stents
- Heart valves
- Aneurysm clips
- Coils
- Filters
- Penile implants
- Ocular implants
- Prostheses
- Shrapnel of metal
- Bullets & pellets

Examples of objects that can harm the individual or others include but are not limited to:

- Oxygen tank
- IV pool
- Keys
- Lighter
- Cell phone
- Pen
- Scissors
- Stethoscope
- Wheelchair
- Hair pins
- Anything attracted to a magnet

Student Pregnancy

The nature of our profession introduces possible dangers for pregnant radiographers. Potential harm to the fetus because of radiation exposure & the strenuous work environment necessitates an option for pregnant students to make decisions about the timeline of continuation of the Program. As a student enrolled in radiography at Rose State College, you are given the option to inform (declare), or not inform, Program officials of your pregnancy. If officials are informed it must be in writing. In the absence of this voluntary & written disclosure, the student cannot be considered pregnant. The Student Pregnancy Declaration form is in the Appendix section of this manual. A copy of the NRC requirements is available in the Office or online at the NRC.gov website. Regulatory Guide 8.13: Instruction Concerning Prenatal Radiation Exposure:

http://pbadupws.nrc.gov/docs/ML0037/ML003739505.pdf

https://radsafety.wustl.edu/documents/manual/17-PrenatalRadiationExposure.pdf

The declared pregnant student* has the following options:

Option #1

1. Continue in the Program completing didactic & clinical requirements in a consecutive manner.
2. An additional Rad badge will be provided to the student that will be used to monitor radiation exposure to the fetus.

3. A copy of the Technical Standards/Physical Qualifications will be provided to the attending physician by the student.
4. A statement from the attending physician must be submitted to the Program Director three times during the course of the pregnancy stating that the student is released to continue her clinical education. This statement must include attestation that the Technical Standards/Physical Qualifications were reviewed.
5. At the time of delivery, the student will submit a physician's note with an estimation of recuperation time.
6. Following delivery & recuperation, the student will be readmitted to clinic & classes with the attending physician's release. This statement must include attestation that the Technical Standards/Physical Qualifications were reviewed.
7. All clinical & class time missed due to delivery & recuperation will be made up. Please contact your instructors to make individual arrangements.

Option #2

1. Continue in the Program until the end of the current semester.
2. An additional Rad Badge will be provided that will be used to monitor radiation exposure to the fetus.
3. Withdraw from the Program in accordance with College policy at the completion of the current semester.
4. The student may re-enter the Program at the next offering of classes, in approximately 1 year. The student will follow the Readmission Policy contained elsewhere in this manual. The student is not limited to class size in this instance.

Option #3

1. Withdraw from the current clinical course in accordance with College policy. A notation of "W" will be given for the course.
2. Consecutively continue in all didactic classes
3. The student may enroll in the clinical course at the next semester.
4. To complete required clinical course postponed, the student will enroll in a **Special topics course** in the Fall semester following the competition of didactic education.

Option #4

1. Continue with the consecutive clinical courses. Do not enroll in clinic in the semester of delivery.
2. Consecutively continue in all didactic classes
3. The student may enroll in the clinical course at the next semester following delivery. To complete all required clinical courses, the student will enroll in a **Special topics course** in the Fall semester following the competition of didactic education.

Option # 5

1. Withdraw immediately from the Program in accordance with College policy.
2. The notation "W" would be assigned to all courses.

3. The student may re-enter the radiography Program when the current courses are once again offered by following the Readmission Policy addressed elsewhere in this manual. The student is not limited to class size in this instance.

The Declared Pregnant Student* Will:

1. Declare pregnancy on the form provided or in writing. The letter must have the estimated date of conception. Obtain a physician's initial statement allowing clinical participation while pregnant. The Technical Standards (physical requirements) for Program students shall be provided to the Physician by the student.
2. Discuss radiation protection practices with the Radiation Safety Officer.
3. Read the Regulatory Guide on Instruction Concerning Prenatal Radiation Exposure as available in the office or online.
4. Choose which option to follow; the student can change options, or withdraw declaration, at any time.
5. (Options #1, #2, #4) Submit a signed form from a health care provider (e.g., physician, midwife, etc.), at specified intervals (3 mo., 6 mo., & 8 mo.), approving participation in the clinical education portion of the curriculum. The Technical Standards (physical requirements) for Program students shall be provided to the Physician by the student.
6. Throughout the pregnancy, notify the Program of any physical limitations directed by the Physician within 5 days of the notice. Physician communicated physical limitations that would prevent the student from safely participating in the clinical environment may initiate the need to change the selected option.
7. If no physical limitations are needed, the letter should state that as well.

The Program Will:

1. Provide a copy of the NRC 10 CRF Part 20 guide.
2. Counsel with the student on radiation risks, protection & options.
3. Provide an additional radiation monitor for the fetus.
4. Discuss options available & consequences of each course of action.

**Declared pregnant student* is a student who has voluntarily informed the Program, in writing, of pregnancy & the estimated date of conception. The declaration remains in effect until the declared pregnant student withdraws the declaration in writing or is no longer pregnant.

See College Catalog & Program Policies & Procedures Manual for additional information regarding the "W" notation & time limits for Program readmission.

Harassment

Rose State College & the Program are committed to the principles of equal access, opportunity, & fair treatment of all students. No student or campus organization shall ridicule a member of the College community on the basis of the other's race, color, sex, age, national origin, religion, disability, sexual orientation, or status as a veteran.

Since some members of the College community hold positions of authority that may involve the legitimate exercise of power over others, they have the responsibility to be sensitive to that power. Faculty & supervisors, in particular, in their relationships with students & subordinates, need to be aware of potential

conflicts of interest & the possible compromise of their evaluation capacity. Because there is an inherent power difference in these relationships, the potential exists for the less powerful person to perceive a coercive element in suggestions regarding activities outside those appropriate to the professional relationship. The responsibility of Faculty & supervisors is to behave in such a manner that their words or actions cannot reasonably be perceived as sexually coercive, abusive, or exploitive.

To provide the radiography student with an environment which is conducive to learning in the clinical setting, the following needs to be considered:

Persistent taunting, criticism without correction, verbal abuse, or harassment of any nature by full time or adjunct professors, will not be tolerated.

The accreditation standards of the JRCERT state that criteria for successful performance should be equitably applied, without discrimination, & provision for dismissal from the Program should be made for students who do not make satisfactory progress according to these criteria.

1. Tell the person involved to stop their actions.
2. If the actions persist, report it to the clinical preceptor that is assigned to your clinic. You may bring a witness with you when making the report.
3. If the problem continues, you & the clinical preceptor are required to meet with the Program Director.

Additional information may be found in the *Rose State College Policies & Procedures Manual* in the *Rose State College Student Handbook*. Both are available online.

Smoking Policy

Exposure to cigarette smoke, whether direct or indirect, is a major cause of preventable disease & death. Both cigarettes & e-cigarettes pose a fire danger. The Radiologic Technology Program, in partnership with area health care facilities, is committed to providing a safe, clean, & healthy environment for our patients, visitors, employees, & students.

1. **Rose State College is tobacco free campus**. Students will not smoke, use tobacco, nicotine products, or vaping devices on college grounds.
2. **Clinical education sites are tobacco free campuses**.
3. Students will not smoke, use tobacco, nicotine products, or vaping devices on hospital grounds. Students are not permitted “smoking breaks” that allow them to leave hospital grounds to smoke.
4. These policies include drug delivery devices such as e-cigarettes & nicotine vapor cartridges. Use of smokeless cigarettes, also known as vapor cigarettes, on campus is a violation of the Rose State College Tabacco Free Campus Policy (reference Policy & Procedure Manual Section 4-100. The use of these devices is prohibited.
5. Failure to comply with the smoking/e-cigarette policy (or any other policy) of any health care facility to which the student is rotating will lead to the student receiving a clinic grade of “F” for that semester.

Clinical Education Policies & Procedures

Your clinical education can, & no doubt will, be a challenge that is unlike any you have experienced before. Not only will you be in a unique & stressful environment, but your position within this setting is unique as well. Having realistic expectations of the individuals with whom you will be working, & yourself, can enhance the satisfaction that you will experience in your training.

Communication with the patients, staff, & other students is critical. Asking for help, admitting to a lack of knowledge in specific areas, & demonstrating a willingness to learn, will all benefit you as a student & further support your development as a professional. Be willing & eager to learn from every encounter, whether positive or negative. The mistakes of others can be fertile ground for learning.

Many students have outside responsibilities, including families & jobs, which can make the pursuit of an education even more difficult. Setting attainable goals & having a plan to reach those goals is critical to remaining focused & increasing your satisfaction with clinical training.

One of the most difficult parts of your clinical education will be working with a large number of radiographers in several different radiology departments. Some radiographers will enjoy the responsibilities involved with training students. Others will not see those duties as part of their job & do not feel comfortable when in that position.

Be aware that each radiographer with whom you come in contact, like every patient & every student, is a unique individual with stresses & job demands that can & will affect their daily lives. Keep in mind that in today's health care climate, job stresses can be related to repeat & reject rates, increased infection control protocols, as well as patient load & productivity demands.

Remember that you are, in effect, applying for a job at every hospital to which you rotate. The medical imaging community is very small, & your actions & attitudes in one hospital can easily be shared with persons at other facilities. Maintain a professional attitude & a willingness to learn at each venue. Practice the skills with which you have been equipped & accept the responsibility for your education.

Also, it is important to recognize that your relationship is with the Program, and the Program has a relationship with the facility. You will be a valued guest there for a short period of time, but their relationships with each other and the Program are ongoing. Be a good guest. Your questions/concerns should be directed towards the Program and/or Clinical Preceptor. Staff technologists do not speak for the Program.

The contents of the Program & Clinical Manual may change at any time. Students & Faculty will receive written notice of such changes.

Clinical Affiliates

The following is a list of the clinical education centers that participate with the Rose State College Radiologic Technology Program:

SSM Health St. Anthony Hospital- OKC
1000 North Lee Street
Oklahoma City, OK 73102-1080
Phone: (405) 272-6588
Clinical Preceptor: Shonda Jay

SSM Health St. Anthony Hospital- Midwest
2825 Parklawn Drive
Midwest City, OK 73110-4258
Phone: (405) 610-8892
Clinical Preceptor: Amanda Mallory

SSM Health St. Anthony Hospital- Shawnee
1102 W MacArthur St
Shawnee, OK 74804
Phone: (405)
Clinical Preceptor: Russell Busenius

Indian Health Services
4913 W. Reno Avenue
Oklahoma City, OK 73127
Phone: (405) 948-4900 X 906
Clinical Preceptor: Lisa Walling

Integris Baptist Medical Center
3300 NW Expressway
Oklahoma City, OK 73112-4481
Phone: (405) 949-4112
Clinical Preceptor: Gina Lira

Integris Southwest Medical Center
4401 South Western
Oklahoma City, OK 73109-3441
Phone: (405) 636-7572
Clinical Preceptor: Amy Walker-Callaghan

Mercy Health Center
4300 West Memorial Road
Oklahoma City, OK 73120-8362
Phone: (405) 752-3642
Clinical Preceptor: Kourtnei Storm

Mercy Health Center South
5200 E Interstate 240 Service Rd.
Oklahoma City, 73135
Phone: (405) 768-3736
Clinical Preceptor: Jared Holbrook

Oklahoma Heart Hospital South
5200 East I-240 Service Road
Oklahoma City, OK 73135
Phone: (405) 628-6380
Clinical Preceptor: Caitlyn White

South Oklahoma City VA Clinic
7919 Mid-America Boulevard
Suite 250
Oklahoma City, OK 73135-6610
Phone: (405) 855-6006
Clinical Preceptor: Jeannie Miller

OU Health
Children's Hospital
940 N.E. 13th Street
Oklahoma City, OK73104
Phone: (572) 244-7005 opt 2
Clinical Preceptor: Kelsey Williams, Michaela Davis

Physicians Building
825 N.E. 10th Street
Oklahoma City, OK 73102
Phone: (572) 244-6264
Clinical Preceptor: Brian Boyle

OU Medical
700 NE 13th Street
Oklahoma City, OK 73104
Phone: (405) 271-9189
Clinical Preceptor: Kyle Quang, Emily Richardson

Norman Regional Health System
Norman Regional
3300 HealthPlex Pkwy
Norman, OK 73072
Phone: (405) 515-1606; (405) 515-2088
Clinical Preceptor: Leslie Stecklein

Norman Regional Moore
700 S. Telephone Rd.
Moore, OK 73160
Phone: (405) 912-3036
Clinical Preceptor: Modesto Resendiz

Oklahoma City VA Center
921 Northeast 13th Street
Oklahoma City, OK 73104-5007
Phone: (405) 456-3975 or (405) 456-3017
Clinical Preceptor: Taylor Cain, Craig Tesla

McBride Orthopedic Hospital
9600 North Broadway Extension
Oklahoma City, OK 73114
Phone: (405) 230-9319
Clinical Preceptor: Chelsea Hittle, Molly Jenkins

Clinical Onboarding

The Radiologic Technology Faculty will provide orientation materials required by the clinical affiliates covering bloodborne pathogens, tuberculosis, HIPAA, fire safety, age related considerations, infection control, hazardous materials, vital signs, MRI safety, & body mechanics. Some clinical sites have specific onboarding requirements before a student may begin a rotation. Students must complete all facility specific requirements before they can report to clinic. A delay in completion & inability to report to clinic as scheduled will result in the student missing clinical time. Missed clinical time will be handled using Clinical Attendance Policy discussed in this manual.

Some clinical sites require enrollment in certain **onboarding apps that require a one-time &/or semester fee**. The cost of the fee will be the students' responsibility. Students will be notified and upon clinical assignment if they will be attending a site that requires payment for onboarding.

Clinical assignments are made in the interest of the entire cohort and at the discretion of the Program. Students may not request a location to attend or not to attend. The Clinical Coordinator will determine clinical placement based on a number of factors including needed competencies, location, variety of exams, etc. No student will be placed at a location not identified by the JRCERT.

Clinical Policy Quiz

On Canvas in the Clinical Course for each semester there is a quiz over policies from this Handbook. Students will complete this quiz during the first week of each semester. Three (3) attempts will be given and a score of 85% is required. Students must complete the quiz before they can continue in the clinical rotation. There are 20 questions from a bank with a time limit of 40 minutes. The Program and Clinical Handbook is the only resource that may be used. It is recommended this quiz be attempted early as there is a wait limit for a subsequent attempt and waiting until the weekend prior to the start of the semester does not allow time for the professors to reset the quiz if needed. Missed clinical time will be handled according to the established Clinical Attendance Policy.

Clinical Attendance

Due to the concentrated content of the Program, absence from required clinical coursework is detrimental to the student's progress. Absenteeism, misuse of assigned clinical time, late arrivals, early departures, &/or extended lunch periods reflect an unsatisfactory work ethic by the allied health student.

1. **Clinic hours** are from:
   7:00 a.m. to 3:30 p.m.; 30 min for lunch: All locations not listed below
   6:45 a.m to 3:15 p.m.; 30 min for lunch: Mercy South
   7:30 a.m. to 4:00 p.m.; 30 min for lunch: McBride, VA-South clinic, OU Physicians
   8:00 a.m. to 4:30 p.m.; 30 min for lunch: Indian Health Center
   a. 30-minute lunch period will be calculated from the time the supervising technologists sends the student to lunch until the time the student arrives at their assigned location. For this reason, it is recommended the students bring lunch as the cafeteria lines can be long.
   b. Should a student decide to order food via the hospital system or an outside vendor (Door Dash, Uber Eats, Grubhub, etc.) the 30-minute lunch period begins when the student arrives at the location of the mobile device (breakroom, car, etc.) to place the order. At no time will a student leave the department flow to order food via a mobile device and assume a lunch

period begins at a later time. Should a longer lunchtime be needed to accommodate ordering from a device, the student should follow the Off-Campus Lunch procedure outlined below.

2. **Attendance Documentation:**
   a. Students will **sign in** when they arrive at clinic & a radiographer that is in the department will initial the time sheet at that time. When leaving clinic students must request a radiographer, which is in the department, initial their time sheet at that time to **sign out**.
   b. Documented in & out time will reflect the clock time the radiographer is initialing. Failure to keep the time sheet current & initialed will result in an infraction being assessed for each occurrence.
   c. Should the student fail to sign in or out at the prescribed time, the supervising technologist must verify the time & initial the time sheet. This must not be on a consistent basis.
   d. Timesheets shall be kept in the designated student area at all times. They should never be in the possession of the student.
3. **Time is not accumulated**:
   a. Students are not allowed to accumulate time by working through lunch. If the student should arrive before their respective clinic start time, the time does not accumulate.
   b. If the student must stay late to finish an exam, to participate in an exam, or to observe an unusual exam, this should be noted on the time sheet & in the patient log so that it can be brought to the attention of the Clinical Site Supervisor when clinical time is being calculated. This time is not banked to be used at a later date.
4. **Off campus lunches:**
   a. Students are discouraged from leaving the hospital for lunch. If the student should leave for lunch, the time sheet must reflect that fact.
   b. A **supervisor** will initial the **out & in** time that the student leaves & returns from lunch. If more than 30 minutes are taken this is an infraction & results in a deduction from Clinical Time Allowance (CTA) hours.
      c. This same procedure will be followed should a student need to order from food apps that cannot be ordered, received, and eaten within the allotted 30 min lunch. The supervisor will initial the student out of the workflow on the timesheet, the student may order the food and eat. The supervisor will initial the student back into the workflow. If more than 30 minutes are taken this is an infraction & results in a deduction from Clinical Time Allowance (CTA) hours.
5. **Off campus appointments:**
   a. Students must sign in & out & have their time sheet signed **by a supervisor** each time they leave or return to the hospital after their initial arrival in the morning (doctor appointments, personal leave, etc.).
6. **Absences:**
   a. Students must notify the **clinic, Clinical Site Supervisor, & college** when they are not going to be attending clinic. The student must notify an RT in the assigned site at the hospital **before the scheduled arrival time** at their respective clinical location, on the day of the absence. The notification to the **college** must be a phone call, not an email.
   b. Notification to the Clinical Site Supervisor may be an email.
   c. Failure to adhere to the rules of notification is considered a **notification infraction** & will result in a 2-point reduction in the final clinical grade for each occurrence.
7. **Late arrivals & Early Departures** are reflected in time infractions & should be avoided.

a. If necessary, the student must notify the clinical site before the scheduled start time. If the late arrival should be longer than 15min, the student must notify the college as well.
b. Failure to adhere to the rules of notification is considered a **notification infraction** & will result in a 2-point reduction in the final clinical grade for each occurrence.
c. If notification of late arrival cannot be made by the scheduled start time., i.e. overslept, notification must be made ASAP. Transparency about reason for noncompliance of the rules is expected. This should be a rare occurrence. Repeated occurrences will initiate a Professionalism Concerns Report & a conference with the Clinical Coordinator &/or Program Director.

8. The clinical site supervisor will maintain the completed time sheets during the semester & may periodically advise the students on current attendance. The ultimate responsibility for proper clinic attendance remains with the student.
9. Clinical preceptors have the discretion to dismiss students from clinic & sign them out if they are (for example) not participating in the departmental patient flow, are exhibiting a disregard for Program rules in reference to uniform policy or clinic behavior or are ill. The clinical preceptor will notify the Program of this action. The student must meet with Program Faculty before returning to clinic. The incident will be considered a time infraction & any time missed must be made up.
10. **Inclement Weather:** Occasionally the school will close while the student is in clinic. Should this occur, clinic is dismissed as well. If the student has a current time deficit, the student can elect to remain in clinic as documented make-up time. If there is not a current time deficit but the student chooses to stay, the time will not be banked. For more information, see the section Inclement Weather Policy.
11. Time records will not be removed from the hospital *unless specifically requested* by Program Faculty.

Clinical **Time** Deficit Policy: Absences & Time Infractions

12. Students receive **Clinical Time Allowance (CTA)** each semester: 8 hours in the 1st & 6th semester & 16 hours in all others. These may be used in any time increments the student chooses.
13. All excess time missed over the allowed CTA each semester due to absenteeism, late arrivals, early departures, doctor appointments, long lunches, etc., must be **made up** before the deadline listed on the clinic syllabus.
    a. Note: Several clinical sites have limited opportunity for make up time due to their schedules. Should time be exceeded, students may need to make up time over Finals week. It is recommended a student does not exceed the allowed absences while assigned to the following locations:
        OU Physicians
        Mercy South
        Indian Health Services
        VA South clinic
        McBride
14. Arriving in clinic after the scheduled start time. or leaving before the scheduled end time is considered a **time infraction**. An equal amount of time is deducted from the student's CTA. Other time infractions include but are not limited to: extended or excessive breaks, extended lunch periods, & not being in assigned areas.

15. **Make-up Time** is only allowed between 7:00 a.m. & 10:00 p.m. Monday through Friday, & 7:00 a.m. until 12:00 p.m. on Saturday. Authorization of the clinical preceptor, shift supervisor, & clinical site supervisor is required before make up time will be approved.
    a. **Some Clinical Sites have limited opportunity for Make-Up Time** due to not being a 24/7 facility. The student must take this into consideration when deciding to be absent from clinic over the allotted CTAs.
16. The Make-Up Time Agreement form is a contract & routine attendance procedures & penalties apply.
17. Thirty minutes will be deducted from the clinical make-up time if the student stays **after** 12:00 p.m. &/or 7:00 p.m. to cover the meal break.
18. The shift supervisor must initial the time sheet at the beginning & end of make-up time.
19. Make-up time shall be documented on the attendance sheet separately from regular scheduled clinical time.
20. Students must make up all time missed in excess of the Clinical Time Allowance by the final clinic day of the semester at the scheduled end time when the timesheets are picked up by the clinical supervisor.
21. **Under no circumstances** will the student spend more than 40 hours in class & clinic, combined, per week. Any time spent in clinic in excess of 40 hours will not be considered.

Clinical **Grade** Deduction Policy: Absences & Time Infractions

Absences from clinical education are absences from required participation in on-site, patient care procedures. The student performs these individually as part of an educational process in which they personally apply knowledge of theory gained in the lecture & laboratory portions of the Program. Therefore, the accumulation of three or more absences from clinic at any time during a semester is considered excessive & the clinic grade will be affected.

22. Clinical grade reductions will occur based on the number of absences (a full clinical day missed), time infractions (any portion of the day missed less than a full day), & notification infractions (failure to follow the rules of notification) obtained throughout the semester.
23. The sixth absence in the FIRST & SIXTH semesters & the ninth absence in all other semesters will result in the student being unable to continue in the Program until the clinical course can be repeated. A grade of "F" will be recorded for that clinical course even if all clinical time has been completed.
24. Clinic absences, late arrivals, & early departures, result in a reduction of clinic grade. Three time infractions (any portion of the day missed less than a full day) will be equal to one absence when computing clinical grades.
25. There is a total of 20 points in the clinic grade related to attendance. See following information:

    The following scale applies to the **FIRST & SIXTH** semesters only:

    0 Absences = + 2 points
    1 Absence = 0 points
    2 Absences = - 5 points
    3 Absences = - 10 points & a verbal warning

4 Absences = - 15 points & a verbal reprimand
5 Absences = - 20 points & a written reprimand
6 Absences = - an "F" for the clinical course & the student will be unable to continue in the Program

Students are allowed 8 CTA hours from clinic during these semesters without penalty.

Three (3) time infractions=1 Absence

Failure to notify Hospital & Program of absence or other infraction= 2 points off the clinical grade per occurrence

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The following scale applies to the **SECOND through FIFTH** semesters:

0 Absences = + 4 points
1 Absence = + 2 points
2 Absences = 0 points
3 Absences = - 3 points
4 Absences = - 6 points
5 Absences = - 9 points
6 Absences = - 12 points & a verbal warning
7 Absences = - 16 points & a verbal reprimand
8 Absences = - 20 points & a written reprimand
9 Absences = - an "F" for the clinical course & the student will be unable to continue in the Program

Students are allowed 16 CTA hours from clinic during these semesters without penalty.

Three (3) time infractions= 1 Absence

Failure to notify Hospital & Program of absence or other infraction=2 points off the clinical grade per occurrence

Professional Appearance

Professional appearance makes a strong impression on the patient's attitude toward the hospital, profession, & school and are created based on the patient facing policies outlined by our clinical affiliates. The students will maintain a professional appearance while in the clinical setting. Infection control procedures may change from one facility to the next. Because the student will be rotating to many of the possible facilities, the Program & student will adhere to the most conservative of these policies. It is beneficial both to the student & the school that certain regulations be followed. If a student is not properly dressed, the student will be sent home to change. Time lost will be counted as a time infraction & will be taken from remaining CTA hours or made up. Visitors & personal phone calls disrupt the continuity of care to patients & the progress of clinical procedures & are not permitted except in emergencies.

1. The prescribed RSC uniform will be worn by all students when reporting to their clinical rotation. Conversely, the Program uniform may not be worn during employment hours in a healthcare facility. This is misrepresentation & may result in liability action.
2. Required uniform pieces include: 2 sets (each of the same brand to ensure color match) of top and bottoms; one scrub jacket (any approved brand/style number); white or black, all leather closed-toed, tie or Velcro shoes.

    a. Undershirts are recommended and the requirements of those listed below.
    b. It should be noted that if new garments are needed during the program, they must be from the approved list as well. Any updates to approved style numbers will be posted on the current Uniform Policy document on the Patch Canvas page.
3. Uniform tops & lab coats must have the Rose State College Radiologic Technology patch permanently affixed to the upper portion on the left sleeve. RSC Clinical ID badges must be worn at the clinical sites. Lanyards & retractable badge holders are not part of the RSC uniform.
4. **Approved uniforms**: Students will wear the prescribed navy blue uniforms only. Students found to be out of uniform while in clinic will be sent home. Clinic time missed will be counted as a time infraction.
    a. Uniforms must be clean, neat, & not wrinkled. Uniforms must be free of stains or tears.
    b. Pants will have straight legs & will not touch the floor.
    c. T-shirts or long-sleeved shirts visible below the sleeves of the uniform will be **white** & without decoration. Shirts will be tucked into the uniform pants. Skin will never be visible between the top & pants with movement.
    d. **Personal jackets** will not be worn in clinic.
5. A student's personal positioning indicator **markers** are part of the uniform. Competency exams may not be attempted without the use of personal markers unless contraindicated by hospital policy.
6. **Hair** will be clean, neatly combed, worn in a professional manner, not to be distracting to patients &/or employees in the clinical environment. Long hair must be back & secured.
    a. Long hair is described as any hair that falls forward from the shoulders & face when leaning over a patient.
    b. Any loose strands around the face that would prompt the student to smooth them back requires securing.
    c. Headbands must be navy, white, black, or match your hair color. Thick, fabric headbands are not allowed.
    d. Extremes in hairstyles are prohibited. Hair color must be a naturally occurring hue.
7. **Cosmetics** should be moderately applied & appropriate for daytime wear. False eyelashes, temporary or permanent, are not allowed.
8. **Facial hair** will be worn neat & clean. Due to heightened infection control practices, facial hair may need to be completely shaven to ensure tight fitting mask wearing.
9. All leather, white or black athletic type &/or nursing-style **shoes** are required & should be kept clean. Shoes must tie or Velcro. Clog styles are not allowed. These should be a dedicated pair of shoes, not worn in other situations.
10. **Fingernails** will be clean & will not extend beyond the tip of the finger.
    a. NO false fingernails are allowed.
    b. Regular polish, if worn, will be clear, not chipped, & refreshed regularly. Dip, gel, acrylic, or other types of embellishment are not allowed in the hospital setting. False nails & chipped polish have been shown to harbor bacteria & puts the health of vulnerable patients in jeopardy.

11. Acceptable **jewelry** is limited to a wristwatch (not a smartwatch), a ring, & a single pair of subtle, pierced earring studs worn in lobes.
    a. It will be noted that in this time of increased awareness of infection control, many facilities prohibit the wearing of anything below the elbows.
    b. Facial piercings, even those behind the mask, must be removed. Any retainers used for face &/or ear piercings must be clear, small, & inconspicuous.
    c. Tongue piercings must be removed.
    d. Gauges will be solid, and clear or a color that matches the skin.
12. All **tattoos** that would be visible while dressed in the required clinical uniform, with movement, must be kept covered during scheduled clinical hours. This includes tattoos that are visible with hair secured. Whatever method the student chooses to cover tattoos, it must be supplied by the student. If sleeves are required, they will be white & decoration free.
13. Student assignments which require wearing of hospital scrub clothing require the student must arrive at clinic in approved uniform & then change to hospital provided scrubs. At the end of the day, the student will remove the scrub clothing & put on the Rose State College uniform before leaving the hospital. **Hospital provided scrub clothing will not be worn outside of the hospital**. Scrubs are the property of the hospital. Leaving hospital grounds with scrub clothing is considered theft & will lead to the activation of the Disciplinary Policy.
14. **Surgery scrubs** will be covered with the required navy lab coat when leaving the surgery department. The required navy lab coat, with the RSC Radiologic Technology patch on the upper left sleeve, will be worn at all times when the student leaves the surgery department. If the student will be participating in imaging exams between surgery cases, the student will wear the required navy RSC scrub jacket, with RSC patch, during those exams. It is unethical to participate in exams without visibly identifying yourself as a student.
15. Students will not chew gum, wear perfume, cologne, or perfumed lotion while in the clinic. Some deodorants & fabric softeners are also quite fragrant & should be avoided. Smoking, or being around those who do, also deposits odors that are harmful to patients. If the student is found to be odorous, the student will be asked to leave clinic & not return until the problem has been eliminated. This situation will result in the student being charged a time infraction & the time missed will count against his or her CTA.
16. **Radiation monitoring badge** & **Rose State College name badge** will be worn on all uniforms when in the clinic. If the student is wearing a lab coat, the name tag will be affixed to the outside of the coat. If a student finds they are missing either one of these items when arriving to clinic, the student should follow the procedure for reporting a late arrival & go retrieve the item(s).
17. **Cell phones & smartwatches are not allowed in patient care areas** & should be secured in a locker or other location provided for the security of personal belongings.
18. Students found with a cell phone or smartwatch in the patient care or core areas of the department, even in a pocket, will be sent home immediately. This will result in the student being charged a time infraction & the time missed will count against his or her time allowance. Violations of this policy will be documented as a Level 2 Disciplinary Action or higher.

a. Personal phone calls are discouraged & should be for emergencies only. Students will give the provided desk number to family members in case of emergency.

19. Family members & visitors should refrain from coming to the hospital & clinical environment. Only authorized personnel & patients are allowed in the diagnostic area of radiology during the course of the students' clinical rotation.

All professional appearance issues are at the discretion of the Rose State College Faculty.

Identification Markers

Students will use their own initialed RIGHT & LEFT positioning indicator markers to properly identify patient anatomy. These markers are to be used during laboratory activities & at the clinical facilities. Under no circumstances will a student lend their marker to anyone or borrow anyone else's marker. If a student loses a marker, it is their responsibility to purchase a new one. Faculty will place the first order for new students (students assume payment responsibility). Faculty will notify students each fall when a marker order will be placed if the student would like to purchase another set then. Additional orders are the responsibility of the student & must adhere to the type, color, & size as program ordered markers. Competencies cannot be attempted without the correct marker. If a student finds they are missing their markers when arriving to clinic, the student should follow the procedure for reporting a late arrival & go retrieve them.

Communicable Disease Policy

Rose State College Health Sciences Division recognizes & is diligent to protect the health of students through informed education of the potential risk of exposure to communicable diseases. The means of transmission for communicable diseases include but are not limited to: contact with blood & bodily fluids & ingestion of airborne viruses. Precautionary means of protection will be demonstrated & applied; however, the handling of specimens in a manner other than those taught by the Faculty & or the affiliated clinical support staff, may create a risk of injury, illness, & even fatal results.

In the event of an exposure to a communicable disease during clinical education, the clinical preceptor must be immediately notified, & the Clinical Coordinator contacted.

Any student with an infectious process that could affect other students &/or Faculty must notify the Program Director if on campus & the Clinical Coordinator & clinical preceptor at the clinical education site. You will need to be able to monitor your temperature throughout the program, so **you will need a thermometer**. They can be purchased for a nominal cost at discount stores.

In addition to the risk of contracting a communicable disease from the clinical setting, students who are sick can transmit illnesses to vulnerable patients. Any student with the following infectious signs or symptoms must not report to their clinical assignment & should report the symptoms to the Clinical Coordinator:

- Sore throat associated with fever of 101 degrees or above & swollen lymph nodes
- Fever of 101 or greater
- Flu-like symptoms (respiratory)
- Conjunctivitis (pink eye)
- Scabies
- Herpes labialls (cold sores)
- Draining of open sores, boils, & burns
- Productive cough with fever or congestion in lungs
- GI flu (diarrhea, nausea, & vomiting)

Clinical Supervision

Supervision guidelines at the clinical educational sites must be observed diligently for the Program to remain in compliance with the JRCERT Standards for an Accredited Educational Program in Radiologic Sciences. It is the focus of the Program to have students obtain adequate experience to enable them to perform radiographic exams consistently & competently. It is also the responsibility of the Program to see that patient care & the ALARA radiation exposure standards are not compromised in this pursuit. **Only ARRT registered radiographers are permitted to supervise students**. It is the responsibility of the students to ensure that all supervision procedures are followed. Limited licensure technologists do not meet the supervision requirements.

1. The registered radiographer reviews the examination request as it relates to the student level of competence.
2. The radiographer assesses the patient's condition as it relates to the level of acquired competencies of the student.
3. The radiographer assesses the student competency level & assures that all exams are done under **direct supervision** until competencies are complete.
4. Following the demonstration of competency on an exam, the student may then perform the exam with **indirect supervision**. Indirect supervision means that a qualified radiographer is immediately available to the student. This does **not** include having a radiographer available electronically. A radiographer that must be contacted by phone, or paged, is **not** considered to be immediately available.
5. A radiographer is present for direct supervision during all repeated exams no matter the level of competence the student has achieved.
6. The supervising radiographer will initial the patient record sheet to verify his or her presence at the repeat exam & whenever adding electronic anatomic markers.
7. The radiographer evaluates all images & approves them for diagnostic reading.
8. Some exams do not qualify for indirect supervision even after the student has gained competency. These exams include Pediatrics, Trauma, Portables, Surgery, Fluoroscopy.

Confidentiality

Confidential information is valuable, sensitive, & protected by law as well as by hospital policies. All hospital & patient records are confidential in nature. The intent of these laws & policies is to ensure that confidential information will remain confidential & will be used only as necessary to accomplish hospital business. Failure to keep confidential information confidential could cause harm to the patient, family, or the hospital & could also result in a lawsuit against the hospital, &/or the employee, &/or student who disclosed the information.

1. Competency forms are to have the **accession number ONLY**. Under no circumstances is the patient's name or medical records number to appear on the competency form.
2. If CDs are printed for educational purposes at the request of Program Faculty, the images MUST be de-identified before they leave hospital property.
3. Patient information will not to be removed from the hospital grounds.
4. Students will not access confidential information for which they have no legitimate need to know.
5. Restrict oral communications. Patient information is never discussed in public access areas.
6. Dispose of patient health information appropriately. Many, if not all, facilities will provide access to shredders. Use them appropriately.

7. Students will be required to abide by the confidentiality standards of the Health Insurance Portability & Accountability Act of 1996 (HIPAA), which will be explained during class & clinical experiences.
8. Failure of the student to comply with HIPAA guidelines during hospital rotations will result in disciplinary action, which may include termination of the hospital rotation & expulsion from the Program.
9. Students will not image family members or other patients they know.

Patient Records

It is imperative that complete & accurate records of patients encountered, & procedures performed be kept documenting the clinical progress of each student. These records are also a necessary part of compliance for program accreditation by the Joint Review Committee on Education in Radiologic Technology & a portion of the semester clinical grade relies on this documentation.

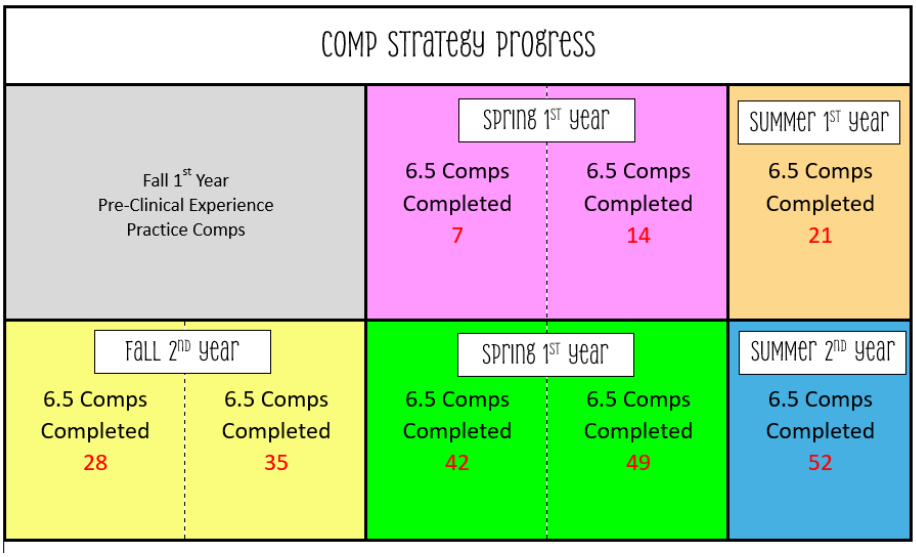
1. Program issued **navy blue Clinical Binder & patient sheets** must be kept in the radiography department during clinical hours. These should be in the area of the department the student is rotating in. These are property of the program and no insinuation of privacy from Program Faculty should be assumed.
2. Each student must keep complete & accurate records of radiographic examinations performed & patients assisted as evidence of clinical involvement.
3. Record all days present, all absences, & partial days on your patient sheets. Make-up time procedures will be documented as well. You will also record any days that the campus closes on an assigned clinical day.
4. Record estimated time spent with the Clinical Site Supervisor.
5. To earn full points for Patient Sheets, the following information must be **consistently** included:
    a. All patient encounters
    b. Accession number
    c. Exam type
    d. Assist/Lead/Comp
    e. Claim repeats & e-markers
    f. Tech initials where appropriate
    g. Helpful comments that allow you to become a better radiographer
    h. Indication if the encounter is a competency attempt
6. Additionally, patient sheets must reflect a variety of locations & radiographers present at your facility indicating the range of procedures & mentors available during your rotation. An example of what should be included on patient sheets is included at the end of this document under “forms”.
7. Patient sheets will be turned in to the Program Director via the basket on the credenza in the lab before the 5th of the following month for feedback on documentation.
    a. The student will fill out the corresponding month’s check off form and self-evaluation and paperclip the checklist to the organized patient sheets of the month and put them in the appropriate tray on the credenza.
    b. Repeated disregard to improve quality of patient sheets will initiate a Student Professionalism Concerns Report & Program Discipline Policy.

c. Falsification of information on the patient sheets including addition of exams not involved in, fabrication of accession numbers & exams, or embellishment of time spent with Clinical Site Supervisor will be handled by Program Discipline Policy.

8. The supervising radiographer will **initial all repeat exposures**, & any images requiring correction or addition of an **electronic marker**, on the patient sheet.

Competency Procedure

A Radiography Program Faculty member must evaluate all clinical competencies before they are added to the Master Log. Students are required to complete a minimum number of competencies per semester with Program Faculty that contribute to the completion of the Master Log. It must be noted that by only accomplishing minimal competencies each semester, the student will not reach the required number for completion of the Program. A list of available competencies is contained in each semester's syllabus. To maintain a pace to achieve all required competencies, the student must complete an average of 6.5 competencies each 8 week period beginning the first Spring semester. Failure to remain at this pace will result in a meeting with the Clinical Coordinator & the Program Director to assess whether completion of the program is possible.



The student has proven readiness to challenge a clinical competency by passing the didactic portion of each specific academic segment.

All students attempting clinical competency will follow the following procedure.

A Competency with Program Faculty

1. The student will inform the Faculty member of a competency attempt & provide the proper competency form **prior** to the radiographic exam.
2. Students will attempt competency on entire exams only. For example, if the requested exam is a cervical spine with obliques, the student must perform all projections to submit for competency. This is important to both show student competency on the entire exam & to provide continuity of care to the patient.

3. Unless contraindicated by hospital policy, the student will use their personal markers. Positioning indicator, side indicator, & student initials must be visible on each image. It is best practices to widen the "black surround mask" prior to sending to PACS to show a partially clipped marker. The required components of the marker must be distinguishable.
4. The Faculty member will evaluate the competency attempt from start to finish. The competency will be granted if the student satisfactorily completes all competency criteria.
5. Program Faculty has the option of requiring completion of **maintenance competencies**. This will entail the Faculty member observing the student complete a competency on an exam that the student has completed previously.
6. Competencies granted previously can be scrutinized by Program Faculty at any time during the Program. Should the Faculty member determine that the student's skill level on a particular exam has not been maintained, the competency will be revoked & must be repeated by the student.

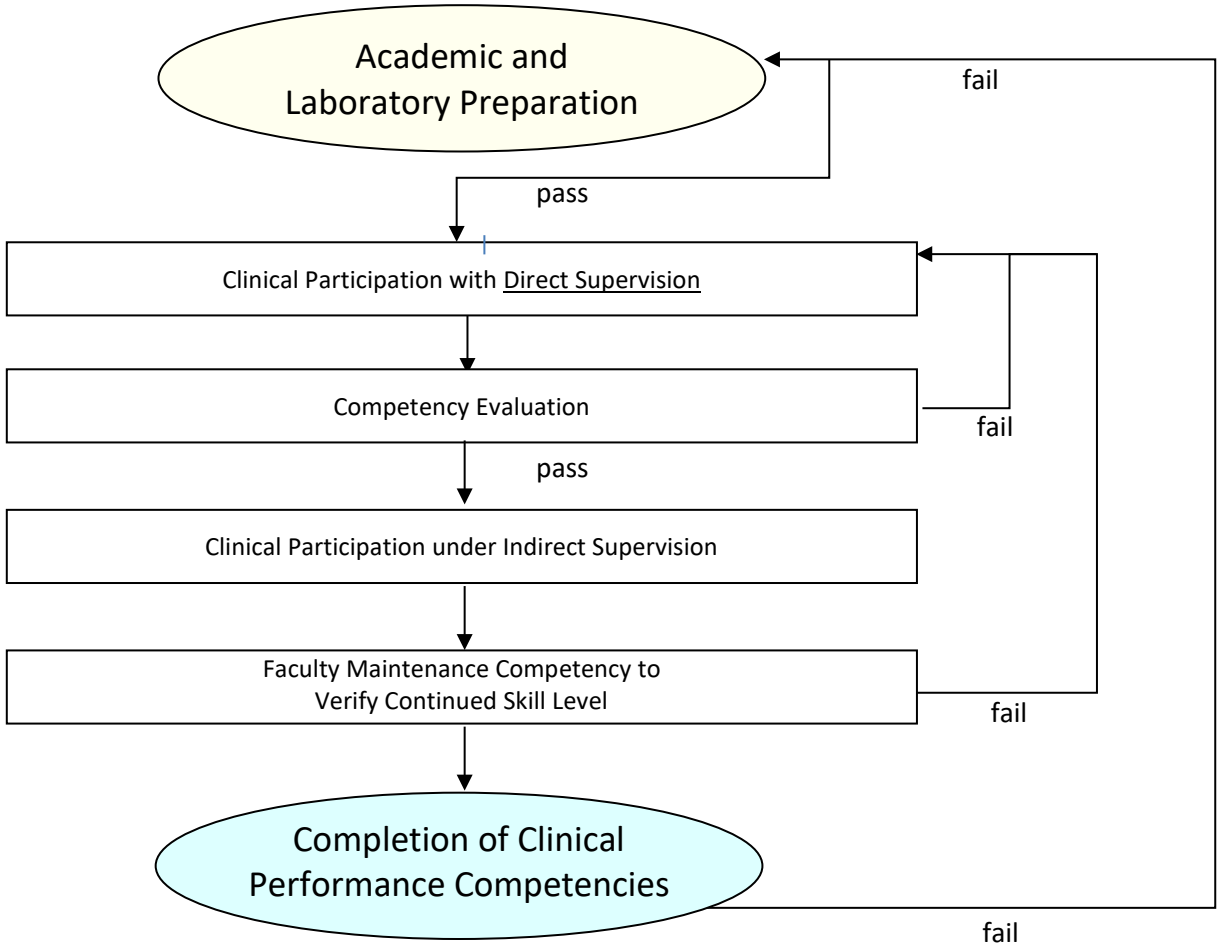
A Competency with Staff Radiographers

1. Only ARRT registered radiographers are permitted to complete competency forms. The student will provide the eligible staff radiographer with the competency form **prior** to the attempted competency.
2. Unless contraindicated by hospital policy, the student will use their personal markers. Positioning indicator, side indicator, & student initials must be visible on each image. It is best practices to widen the "black surround mask" prior to sending to PACS to show a partially clipped marker. The required components of the marker must be distinguishable.
3. The radiographer will evaluate the competency attempt from start to finish. The radiographer will evaluate all competency criteria & complete the front page.
4. During the competency attempt, should the student ask a question or the radiographer offer tips, step in on duties, or leaves the area the competency step is void.
5. The student will bring the competency form for the exam to the Faculty member as soon as possible or within two weeks of the exam completion. The Faculty member will complete the form with the student. If longer than two weeks have passed & the student is avoiding sitting for the competency, the Faculty member may void that attempt.
6. Students will not use any form of notes or assistance in the completion of a competency attempt.
7. In rare cases, & on request from the Faculty, it may be necessary to make hard copies of the competency exam images. These copy films can then be used for competency evaluation.
8. The Faculty member will evaluate the exams & competency criteria with the student. At that time the Faculty member, in his or her professional opinion, will grant or reject competency.
9. If a staff radiographer should feel that the student has not maintained the skill level required on a previously completed competency, the radiographer may contact the Faculty member with this concern. The student may be required to repeat the competency.
10. Following the completion of a competency, the student must update the **posted** Master Competency Log. The master log is to be kept up-to-date at all times.

General Competency Requirements

11. The student will maintain an updated, original Master Competency Log in his or her clinical notebook the entirety of the Program.
12. All exams that earn competency must be documented on the associated day's patient sheet. If at semester's end, upon reconciliation of clinical paperwork, the comped exam cannot be located on a patient sheet, the competency will not be granted.
13. The American Registry of Radiologic Technologists (ARRT) requires specific core competencies be demonstrated to establish eligibility for ARRT Certification. Students must demonstrate competency in all forty-one (42) of the mandatory radiological procedures & at least ten (10) of the thirty-one (31) available elective procedures.
    a. Simulations are not guaranteed. Simulations are reserved for instances where the student *has not had the opportunity* to comp on the exam, **not** that the student has *not been able* to successfully complete the exam.
    b. Some categories of exams are not eligible for simulation, these include fluoroscopy, pediatrics, geriatrics, trauma, surgery.
    c. No more than two (2) competencies may be simulated.
    d. Only one of the simulated exams can come from the Head section.
14. Should a student achieve all 52 competencies before and/or during the final semester, additional competencies may be required to obtain the minimum five comps necessary to justify a clinical grade. These can be exams not previously attained and/or repeated maintenance comps that already appear on the Master Log. Existing requirements of Faculty Comps still apply in this semester.
    a. Until the required 52 competencies are reached, any Maintenance Comps performed by Faculty members will not count towards the minimum five competencies required to justify a clinical grade.
15. If a student has not completed the required competencies within the 24-month program, & have been continuously enrolled, a <u>one-time only</u> additional 8-week "Special Topics" course will be offered. Consult Graduation Policy for additional information. Any required competencies not completed at the conclusion of this course will be awarded a score of zero & averaged into the score of the course. Failure to attain all required competencies will result in failure of the program.

Clinical Performance Competency Flowchart



Fluoroscopy Competency Procedure

Fluoroscopic and dynamic imaging procedures offer the student valuable experience in extended, often complicated collaboration with radiologists and physician extenders. Developing the skills necessary for an entry level radiographer requires both time in and variety of procedures. Therefore, the Fluoroscopy Competency Procedure includes both a "number of" and a "category of" procedure completions. Two (2) pre-comps and one (1) Final Comp in two (2) categories will be completed.

Additionally, 50 total fluoroscopy or dynamic imaging procedures must be completed by graduation. Requirements for post-imaging vary greatly among facilities and providers. The student will follow the established post-imaging requirements for their assigned facility for each procedure. One of the three (3) procedures for each category should include some aspect of post-images. Small Bowel Follow Throughs will not be included unless the facility at which you are rotating does fluoroscopy spots images.

For the graduating class of 2027, 30 total fluoroscopy or dynamic imaging procedures must be completed by graduation.

There are several forms associated with the Fluoroscopy Competency Procedure. This section explains what is required:

Patient Sheets: Students should record all fluoroscopic and dynamic imaging procedures on the patient sheet. This includes all required sections- including Fluoro Time. See Patient Sheets.

Fluoroscopy Time Log: List each fluoroscopy procedure case you are involved in, the times in which you are involved, and have the supervising radiographer initial the exam. No patient identifiers should appear on this form.

Total Fluoro Time: Record the fluoro time used in the exam.

Fluoroscopy Exam: Record the name of the procedure. Only use industry standard abbreviations.

Post-Imaging: Check this box if this exam required one or more post-images.

Supervising Radiographer Initials: The technologist who supervised you will sign the exam. If you are with the same technologist for several consecutive exams, they may use ditto marks rather than having them sign each. This will need to be initialized at the start of the next round after a break, a lunch period, or the next day. If you work with more than one radiographer that day, they will need to initial the associated cases.

Fluoroscopy Competency Forms: The purpose of the Pre-Comp exams is to demonstrate varied, meaningful experience in the fluoroscopy department. This demonstration is evidenced by feedback and reflection. The tech must write comments, and the student must write reflections for each pre-comp. Failure to write meaningful comments may result in required repeat of competencies.

Fluoroscopy- GI: Esophogram, Upper GI, Contrast Enema, Small Bowel Follow Through that Fluoroscopic Spots were done.

Fluoroscopy- Other: Cystography, Myelography, ERCP, Arthrography, HSG.

Surgical Competency Procedure

Gaining confidence & competence in the surgery setting requires prolonged time spent in the surgery suite & exposure to various exams, surgeons, & the surgical team. Therefore, surgical competencies are achieved using a unique method. Four (4) pre-comps in each competency category (C-arm Sterile Filed & C-arm More Than One Projection) will be independently performed & documented before the official competency will be attempted. The student can receive minimal assistance & ask minimal questions during the four pre-comps. The final competency attempts shall be unassisted. Additionally, the student will document 50 hours of participation in the surgical setting before graduation. Record of these exams are on the Surgical Log Form. Each semester the student will turn in this form with the total surgery hours calculated in decimal format (6 hours 25 min= 6.42 min). If no surgery time is completed in a semester, the student will turn in a form indicating zero surgery hours. Students may begin documenting surgery time as soon as the clinical site supervisor of the facility deems the student ready to participate in surgery rotations, typically beginning following Spring Break of the 2nd Semester. See the Canvas Patch Class for examples of forms.

There are several forms associated with the Surgical Competency Procedure. This section explains what is required:

Patient Sheets: Students should record all surgical procedures on the patient sheet. This includes all required sections- including Fluoro Time. See Patient Sheets.

Surgery Time Log: List each surgery case you are involved in, the times in which you are involved, and have the supervising radiographer initial the exam

Current C-Arm Checklist Unit Type & Date: The C-Arm Checklist you completed at this rotation, its unit (Phillips, GE, GE OEC 9900, etc.), and the date you completed it. You must have a Checklist at each rotation for surgery time to count.

Date: The date of the procedure. You may use ditto marks (“) for the day.

Time In and Out includes all time spent on one particular case. This includes setup of the equipment, actual time spent in the OR suite, breakdown and removal of equipment from suite, as well as sending images and completing associated paperwork.

Procedure: Name of Surgical Procedure. No patient identifiers should be used here. You may decide to list fluoro time here so you will have it to add to the patient sheet. **You will not use ditto marks**- each procedure needs to be individually listed. Professionally accepted abbreviations can be used (ORIF, CABG, etc.) but other exams must be spelled out.

Supervising Radiographer Initials: The technologist who supervised you will sign the exam. If you are with the same technologist for several consecutive exams, they may use ditto marks rather than having them sign 17 in a row. This will need to be initialized at the start of the next round after a break, a lunch period, or the next day. If you work with more than one radiographer that day, they will need to initial the associated cases.

C-Arm Checklist: A checklist is required at each rotation you attend that you will be participating in surgery or other C-arm procedures (pain management, bronchs, etc.). Ideally, these are performed in an empty surgical suite where you are clearly doing each step individually. As you progress through the program, this may be done more so in an exam. Keep track of the parts you need to demonstrate and ask to do that at the conclusion of a procedure. Additionally, it is best for you to perform a checklist on each model/type of c-arm at that location. Keep track, and add them to your resume.

Surgery Competency Forms: The purpose of the Pre-Comp exams is to demonstrate varied, meaningful experience in the surgical suite. This demonstration is evidenced by feedback and reflection. The tech must write comments, and the student must write reflections for each pre-comp. Failure to have meaningful comments may result in required repeat of competencies.

C-Arm procedure: More than one projection: Involves manipulating the c-arm to gain more than one projection (Ex. PA, Lateral, Oblique, Axial, AP, Etc.)

C-Arm procedure: Sterile Field: Involves manipulation around a sterile field.

Pain Management cases, while they use a c-arm, are significantly different than routine surgery cases. Therefore, only two (2) of the five (5) comps for each C-Arm Competency can come from Pain Management. This includes the pre-comps and the final comp- only two (2) total from Pain Management. All Pain Management time will count towards 50 hours.

Repeat Images

Repeating images are part of the learning process and should be expected. However, the purpose of proving competency on the ARRT required exams and procedures is to demonstrate growth and application of the lessons learned on previous exams. On most competencies, repeats are not accepted. In certain cases, the Clinical Site Supervisor may accept one repeat on rare exams. The decision to do this is the responsibility of the Clinical Site Supervisor in conjunction with the Clinical Coordinator. Their decision is final.

It is important to understand what constitutes a repeat. A repeat is any additional image needed following the student not performing any part of the exam up to best practice standards including personal lead marker inclusion (where allowed), positioning, central ray placement, breathing instructions, collimation, etc. Additionally, beginning in the second year, technical factor selection that causes a repeat fall under the responsibility of the student.

Additional images necessary to accommodate body habitus or pathology are not considered repeats. For example, if a student centers a KUB correctly at the iliac crest and clips either the pubic symphysis and/or the upper pole of kidneys, the student should take the appropriate additional image, well collimated, to show the clipped anatomy. Should the student take another full size image of the abdomen including large amount of anatomy already captured, this would not follow radiation protection practices and would not be accepted as competency.

Advanced Modality Rotations

Students will participate in advanced modality observations integrated in semester rotations as long as the student has demonstrated sufficient clinical progress. Sufficient clinical progress is determined by collaboration of the CSS of the facility, the Clinical Coordinator, & documented competency progress. The student must be in good standing with the Program at the time of the observation. By the end of the first summer semester, the student must have completed approximately 26 competencies to include at least one of the required fluoroscopy competencies. Possible observations include: CT, MR, US, Cath Lab, Interventional, NM, & Mammography. The decision for placement in which modality is dependent on the opportunities available at the student's site. The Clinical Coordinator will first assign each qualifying student a CT rotation & ask student their preferences for subsequent observations, but those cannot be guaranteed.

Students may request the opportunity to participate in clinical mammography observations. The Program will make every effort to place students in a clinical mammography observation if requested & available at the current rotation; however, the Program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to students. Students are advised that placement in a mammography observation is not guaranteed & is at the discretion of a clinical setting.

Clinical Behavior

Radiography students demonstrating behavior not considered professional or conducive to proper patient care will not be allowed to carry out clinical assignments. This includes activities against the scope of practice of a student radiographer but may be allowed once the student has earned credentials.

While at the clinical site the student **will**:

1. Abide by the Program Policies & Clinical Manual guidelines.
2. Abide by all facility policies & procedures. Students that do not comply with the clinical education site rules may be dismissed from their rotation & the Program.
3. Park only in areas designated as student parking by the facility.
4. Actively participate in department expectations of AIDET and the 10/5 rule.
5. **NOT** sleep while in clinic. Sleeping during clinical hours will result in the student being sent home from clinic immediately & a clinical course grade of "F" being assigned.
6. Bring appropriate study materials to stay productive during department downtime.
7. Be aware that the use of drugs & alcohol is prohibited. If a student is suspected of drug &/or alcohol use while in the clinical education setting, the clinical site can have the student tested immediately, at his/her own expense, & the student will be removed from the site. The student found to have drugs or alcohol in his or her system during clinical hours will be dismissed from the Program. The student's documented emergency contact will be notified to pick up the student so as not to put a potentially incapacitated person behind the wheel.
8. Theft from the clinical education site or individuals will result in the student being withdrawn immediately from the Program. The student will not be eligible for readmission to the Program.
9. Eat & drink only in designated areas. Smoking, including e-cigarettes, is not allowed in or on the grounds of any clinical education sites.
10. Leave clinical assignment for meals, coffee break, etc., with the consent of authorized person(s) (clinical supervisor, diagnostic supervisor, or designee) only.
11. Not image their own family members.
12. Not engage the fluoroscopy switch. Students may manipulate the carriage, depress buttons consistent with collimation, depress buttons consistent with magnification, & other controls under direct, physical supervision by the radiologist/R.A./ P.A.
13. Decline any type of gratuity or tip from a patient or a patient's family.
14. Clinical Site Supervisor phone numbers are given to you for official use only. Limit contact with CSS to reasonable hours. Do not call or text with business that can be handled during their next visit to your site. Do not add their numbers to group texts.
15. Avoid using clinic site photocopy equipment.

In addition, it is expected students will demonstrate professionalism & practice professional etiquette, including but not limited to:

16. Introduce yourself as a student radiographer, explain your role & what to expect during & after the imaging procedure.
17. Show concern for your patient through effective & frequent communication, address their needs in a prompt & caring manner, follow all safety policies, & maintain confidentiality standards.

18. Show respect, courtesy & dignity towards all people encountered.
19. Attend to the safety & comfort of all patients, family members, & visitors.
20. Remain in assigned area unless permission granted by clinical preceptor or RT assigned to your specific area.
21. Demonstrate a readiness to learn by being alert, on time, asking appropriate questions & actively participating in procedures. Students will not sit in clinic.
22. Conduct themselves with honesty & integrity.
23. Not use cell phones, smart watches, & other electronic communication/entertainment devices while in clinic/patient care areas. Cell phones will be placed in a secure location (i.e. locker) while the student is in clinic.
24. Refrain from making or receiving personal communication. Students may give the control desk number to families for emergency contact.
25. Accept assignments & take directions from supervisory staff commensurate with the student's capabilities.
26. Maintain a professional attitude with fellow students, staff technologists, Program Faculty, physicians & the public.

Violations or actions divergent from the above list will be addressed using a Professionalisms concerns report & may be elevated to the Disciplinary Action Policy.

Clinical Grade

The clinical grade is obtained through the method of clinical competency-based education. Each student must pass the didactic portion of the radiographic procedures before attempting clinical competency for the covered procedures. The goals & objectives for each semester are met through the process of performing various procedures & exams at a standard level of achievement. Each semester, as demonstrated through a list of objectives that are coordinated with classroom lectures, the student meets the institution's standard level of performance through competency certifications.

The college Faculty will evaluate the overall performance of students twice each semester in order to ensure that the building blocks of skills & knowledge required are increasing along with the course content. Because of the critical nature of the profession, the performance skills required for the satisfactory completion of competencies during each successive semester are essential. The numerical values for passing a clinical competency are more stringent than those used for didactic courses.

The clinical technologist must complete all specified portions of the competency form before the student brings it to the adjunct professors. Competency forms must be finalized by adjunct professors for the competency to be added to the Master Competency List of the student. Clinical time records & patient sheets are monitored to assure the student has acquired professional work habits. Patient sheets are kept current & turned into the Program Director at the end of each month. The clinical personnel & clinical site supervisor evaluation portions of the clinical grade come from professional assessments of the student's clinical skills & interdepartmental relationships.

1. 40% of the semester clinical grade will come from competency scores.
   The grading scale for competencies is:
   A = 93 – 100%
   B = 85 – 92%
   84% or below is unacceptable
2. 10% of the clinical grade is from the clinical site supervisor evaluation.
3. 15% of the clinical grade is from patient sheets.
4. 15% of the clinical grade will be from clinical staff professional evaluations.
5. 20% of the clinical grade will be from attendance.
6. Failure to notify clinical site &/or college of absences, late arrivals, or early departures will result in a 2 point deduction from the clinical grade for each occurrence.
7. Any student caught cheating on clinical grades or involved in the falsification of records, such as patient &/or time sheets, will be reported to the Office of Student Accountability. During the investigation, the student may continue to attend class but will not attend clinic. Missed clinic time will be handled according to the Clinical Attendance Policy. If substantiated, the student will be immediately dropped from the program, an "F" will be given in the course, & a report of the incident will be placed in the student's personal file for future reference.

Part-Time Student Technologist Employment

As a student in a program intended to prepare you for eligibility to challenge the ARRT certification exam, you are now considered a Candidate as stated in the ARRT Standards of Ethics. Participating in job duties which consist of delivering ionizing radiation to the public can cause unintentional violations of the Rules of Ethics. Therefore, students with jobs that have these responsibilities are required to disclose that to the Program.

Rose State College Radiologic Technology Program recognizes that part-time employment is the only way some students can finish their education. However, part-time employment takes away from valuable study time & can affect academic &/or clinical performance.

Any student accepting a student radiographer position at any clinical affiliate, or other employer where they are performing radiographer duties, must keep that employment outside the context of the Program.

Activities & examinations performed during clinical employment **may not be applied** to the educational requirements of the Program. Clinical rotation requirements may not be completed during employment time.

It is the official position of this Program that at no time prior to successful completion of an accredited 2-year radiography Program are any students competent to work in any capacity as a radiologic technologist. Students &/or hospitals involved in the employment of students as technologists should be aware of the following rules:

1. Current program students must disclose employment that includes delivery of ionizing radiation to the public.
2. A student accepting employment in a clinical setting performing duties as a radiographer before the start of their second year will be placed on probation until the beginning of their second year.

Acceptance of employment includes but is not limited to orientation and/or pre-employment activities requested by employer.

3. The terms of employment of a student by a medical establishment, clinical affiliate or not, are strictly a matter between that student & the establishment, as long as said employment does not interfere with scheduled clinical rotations.
4. Clinical time/examinations & employment time/examinations will remain totally separate & will not count toward completion of Program requirements.
5. Students are re-informed that student liability insurance coverage is only for college sponsored & approved scheduled clinical rotations & will therefore be inactive for employment.
6. A student will not rotate at a facility where they are employed. If a student accepts a position during their rotation at that same location, they are advised of the increased risk associated with liability, privacy & confidentiality, & the increased scrutiny of which time sheets & competency exams will undergo. If a student accepts a position at an approved rotation site they have not been to, it limits the options the Clinical Coordinator has in sending the student to facilities that have the procedures needed for completion of competency exams.
7. Student will not wear school identified clothing or Rad Badges while on clock time.
8. Infractions of the above policies are subject to disciplinary actions.
9. Upon acceptance of a student radiographer position, the student shall meet with the Program Director & fill out a Student Employment Declaration. Failure to declare employment that includes delivery of ionizing radiation to the public will initiate the Discipline Policy.

ROSE STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
RSC Radiologic Technology Program Make-Up Time Agreement

- Make up time may be accomplished only between **7:00AM and 10:00PM Monday through Friday**, and **7:00AM to 12:00PM on Saturday**.
- Thirty minutes will be deducted from the clinical time to cover the meal break if the student stays after 7:00PM.
- Time worked before time in, after time out, or outside of time limitations will not count.
- Signed authorization from the clinical preceptor, shift supervisor, and clinical site supervisor is required before make-up time will be approved. The shift supervisor must initial the time sheet at the beginning and end of the make-up time.

The total time that a student can be in class and clinic WILL NOT be in excess of 40 hours per week.

I_____ will makeup clinical time on the following date and time:
(Print)

Day: _____ Date:_____

Time in: _____am/pm Time out: _____am/pm

I have approval from:

_____ _____
Clinical Site Supervisor Signature Date

_____ _____
Clinical Preceptor signature Date

_____ _____
Shift Supervisor signature Date

Regular attendance policy and procedure penalties apply to this agreement.

All clinical time must be completed by 3:30 p.m. on the student's last day of clinic. This date is listed on the Official Rotation Schedule hanging in the student area.

Areas mandatory for comp to be valid when you meet with CSS

Rose State College
Radiologic Technology Program
Student Competency Evaluation - **Sample**

Student _____ Date _____

	85% required for competency	Points Possible	Points Awarded
1.	**Preparation**: Knowledge of room; room set up; checks order, chart, and diagnosis	**5**	
2.	**Patient ID**: *ID patient x 2; introduction of self; *pregnancy inquiry; history	**5**	
3.	**Patient Care**: Explanation of exam; instructions to patient; communication; comfort; modesty; assists pt. with wheelchair, clothing, jewelry, IV, O_2, Foley, etc.	**20**	
4.	**Professionalism**: Exhibits self confidence; instills confidence in patient; interpersonal skills; treats patient with respect; Standard Precautions	**10**	
5.	**Exposure Factors**: Knowledge of control panel; technique selection; SID; AEC selection; Bucky use; equipment manipulation; foreign object removal	**10**	
6.	**Image Identification**: *Marker; marker placement; patient identification; exam identification; annotation	**5**	
7.	**Positioning**: Knowledge of department routines; proper body position; IR orientation; centering of patient, central ray, and IR; accurate tube orientation; correct part position; organization of procedure; watches patient for exposure	**25**	
8.	**Radiation Safety**: *Beam limitation; patient shielding; *protection of self and others; proper exposure index number; *avoids repeats due to preventable errors	**10**	
9.	**Image Evaluation**: Recognizes acceptable radiographs; determines whether radiograph should be repeated; able to correct mistakes when indicated; *all necessary anatomy included on images	**5**	
10.	**Exam Completion**: Completes exam in timely manner; has images checked by supervising radiographer; dismisses patient; processes images; manipulates computer system; leaves room ready for next exam	**5**	
Comments:			
	Total Points	**100**	

I believe the student can perform this exam independently under normal circumstances.
Procedure Evaluator Signature: _____

Clinical Supervisor Evaluation

		Points Possible	Points Awarded
1.	Marker placement	10	
2.	*Evidence of radiation protection: Collimation; shielding; technique; exposure index	10	
3.	Technique selection and explanation: Control panel; justification	10	
4.	*Technique and EI#: **PA** kVp mAs EI# **Lateral** kVp mAs EI# **Rm.#**	10	
5.	Procedure recognition: Explanation; description	10	
6.	Procedure knowledge: CR; pt. instruction; justification; evaluation criteria	10	
7.	Image quality and evaluation: Exposure index; contrast; mottle; positioning; centering; rotation; motion; alignment; artifacts	20	
8.	*All necessary anatomy included on images: List parameters	Pass	Fail
9.	*Images are of diagnostic quality	Pass	Fail
10.	*Personal marker	Pass	Fail
	Total	80	

Anatomy

1.	Apices, costophrenic angles	2	
2.	Diaphragms, hilum, vascular markings	2	
3.	Heart, mediastinum	2	
4.	Aortic arch, thoracic aorta	2	
5.	Trachea, carina, bronchi	2	
6.	Clavicles, humeral heads, sternum	2	
7.	T-spine, ribs, SC and AC joints	2	
8.	Scapulae, coracoid, acromion	2	
9.	Other	2	
10.	Obvious abnormality, pathology, artifacts, lines and/or tubes	2	
	Total	20	

*Critical Factor omission will result in a maximum score of 168 or 84%. Score is entered as part of semester competency grade. No competency will be awarded.

Pt. Information: **Accession Number**: _____

_____

Total points front _____ **Repeats** _____ Total points _____/200

Total points back _____ Grade _____%

I feel confident that I can perform this exam independently under normal circumstances.

Student Signature: _____

I believe the student can perform this exam independently under normal circumstances.

Competency Evaluator Signature:_____ Date _____

Radiologic Technology Program

Approved Uniform List Fall 2026

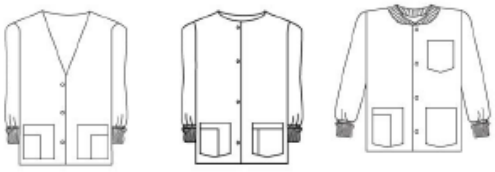
Required Uniform Pieces:

- 2-3 tops (only you know your laundry schedule; you will have at most 3 clinic days a week)
- 2-3 pants (only you know your laundry schedule; you will have at most 3 clinic days a week)
- 1 Uniform Jacket
- 1 Radiologic Technology patch for each top/jacket (3-4) (More info at orientation)
- 1 pair of shoes- only to be worn for clinic, not shared with other use
- Radiographic Markers: Minimum 2 sets of radiographic positioning markers will be purchased during the second week of classes. The order form and specifics will be announced in orientation. The cost of each set of markers is approximately $45.

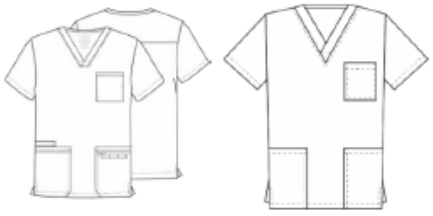
Additional Requirements & Recommendations:

- Each set of top/bottom need to come from same brand so colors match
- See diagrams for acceptable characteristics
  - **Pants:** Straight leg only- no cuff, jogger, or flare
  - **Tops:** V neck, short sleeve only- no wrap, mock wrap, button front, t-shirt style
- White, plain undershirt recommended- long sleeve if you are covering tattoos
- You will need pockets! The more pockets the better.
- Compression socks will be a lifesaver

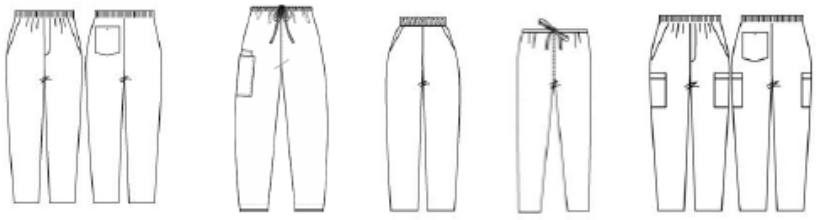
Characteristics of jacket: Cuff sleeves, not fitted, snap shut



Characteristics of top: V neck, no extra seams, no pleats, any combination of pockets



Characteristics of pants: tie waist or drawstring. Straight leg; no flair. Must not touch floor w/ shoes on



Shoes: All leather or other solid material (not cloth); no perforations (ask yourself would blood, urine, a needle, or feces get through this?); solid **BLACK** or **WHITE** with no insignias; athletic type and/or nursing-style shoes. Shoes must tie on or Velcro. Clog styles are not allowed.

Allowed Brands, lines, and their colors:

Landau: https://www.landau.com/ **Navy**

Scrub Zone: https://www.landau.com/women/collection/scrub-zone (women & unisex)
https://www.landau.com/men/collection/scrub-zone

Essentials: https://www.landau.com/women/collection/essentials (women & unisex)
https://www.landau.com/men/collection/essentials

Examples using Style Numbers in the search bar:
Yes: 75231, 83221, 70221, LB403, 85221, 7602, LT121, LJ709, 7502, 8555, 7525, 8219, 8380, 8327
No: LB404, LT104, anything from Forward collection, anything from ProFlex collection

Cherokee: https://www.cherokeeuniforms.com/ **Navy**

Workwear Originals: https://www.cherokeeuniforms.com/workwear-originals-women-scrubs.html
https://www.cherokeeuniforms.com/workwear-originals-men-scrubs.html
https://www.cherokeeuniforms.com/workwear-originals-unisex-scrubs.html

Workwear Professionals: https://www.cherokeeuniforms.com/workwear-professionals

Examples using Style Numbers in the search bar:
Yes: 4876, 4725, 4100, 4043, 4350, 4700, 4005, 4743, 4243, 4000, WW340, WW170
No: WW650, 4101, anything from Achieve collection, anything from Revolution collection, anything from Core Stretch collection, anything from FORM collection, anything from Atmos collection, anything from Infinity collection, anything from AllHeart collection

Dickies: https://www.dickies.com/scrubs/ **Navy Blue**

EDS Essentials: https://www.dickies.com/scrubs/shop-all-scrubs?prefn1=family&prefv1=eds-essentials

EDS Signature: https://www.dickies.com/scrubs/shop-all-scrubs?prefn1=family&prefv1=eds-signature

Examples using Style Numbers in the search bar:
Yes: L10776, 83706, 83006, DK305, DK010, DK615, 85906, 86106, 81906, 81006, DK015, DK635,
No: L10674, A85UG, DK625, anything from Balance collection, anything from EDS NXT collection

Websites to try:

Amazon: https://www.amazon.com/ref=nav_logo
A1Scrubs: https://www.a1scrubs.com/
AllHeart: https://www.allheart.com/
Scrubs and beyond: https://www.scrubsandbeyond.com/
Uniforms & Scrubs: https://www.uniformsandscrubs.com/

Student Employment in Radiography Department Declaration

- ☐ I am a student in the RSC Radiologic Technology Program. I have been offered and accepted a position as a student radiographer.
- ☐ I understand I lack the full training of a radiographer and will approach my job with that understanding.
- ☐ I understand that when working as a student radiographer I do not have the protection of a supervising radiographer if something goes wrong.
- ☐ I also understand that choices made during my employment as a student radiographer can affect my ability to sit for the national registry.
- ☐ I understand that my student liability insurance is not valid when I am working for my employer.
- ☐ I will not perform radiographic examinations outside of the training I have received.
- ☐ I will not access clinical computer systems while on student time.
- ☐ If future rotations must be assigned at this corporate facility, I will disclose this and discuss the unique challenges it poses with the Clinical Coordinator and/or Program Director.
- ☐ I will not wear RSC student scrubs while on the job nor present myself as a RSC student.
- ☐ While on the job, I will not work with students from any program. This violates the 1-1 supervision required by the JRCERT and can put both RSC and the other program in jeopardy.
- ☐ Should in my job function I learn or perform duties in advanced modalities, I understand this program does not instruct on increased responsibilities necessary in those modalities and I have not received any preliminary training.
- ☐ I will not prioritize my student job over my studies.

I have accepted a job at: _____

Printed name: _____

Signature: _____

- ☐ Employment start date: _____
- ☐ I no longer work for this employer. Date: _____

Program Director Signature and date: _____

ROSE STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
PREGNANCY DECLARATION

☐ I am declaring that I am pregnant. I believe I became pregnant _____month _____year.

The reading material listed below has been made available to me to demonstrate that the risk during my pregnancy is much less than that for most occupational groups. I further understand that, although I will be provided with a second radiation monitor.

1. U.S. Nuclear Regulatory Commission, Regulatory Guide, Office of Nuclear Regulatory Research, Regulatory Guide 8.13, Instruction Concerning Prenatal Radiation Exposure, (Draft issued as DG-8014), [PDF Version (32 KB) - Divisional Index - Regulatory Guide Index 8.13—NRC Home Page

   http://pbadupws.nrc.gov/docs/ML0037/ML003739505.pdf

   https://radsafety.wustl.edu/documents/manual/17-PrenatalRadiationExposure.pdf

2. Protection of Pregnant Personnel, Chapter 9 & 10, "Radiation Protection in Medical Radiography", by M.A. Sherer, P. Visconti, and E.R. Ritenour 7th Ed.

3. Late Effects of Radiation Ch. 37 and Health Physics Ch. 38,"Radiologic Science for Technologists", 10th Ed., by Stewart C. Bushong

I acknowledge that I have received counseling regarding my clinical responsibilities during my pregnancy. I understand that there is a slight possibility that radiation exposure during my clinical rotations will adversely affect my fetus.

Student's Signature_____ Date _____

Program Director's Signature_____ Date _____

☐ I withdraw my pregnancy declaration. Date of Withdrawal _____

Student's Signature_____ Date _____

Program Director's Signature_____ Date _____

ROSE STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM

INVESTIGATION OF HIGH DOSIMETRY READING

In accordance with the Nuclear Regulatory Commission, the Program has set the following limit of exposure (threshold) that should not exceed 60 mrems/month (0.6 mSv/month) of deep whole body radiation. Your dosimetry reading for the month of _____ gave a reading of _____ mrem for deep and shallow accumulated amounts Dose Equivalent (DE) types of radiation.

I acknowledge that I have received counseling regarding my radiation protection responsibilities during my clinical rotations.

_____ _____

Student's Signature Date Signed

I. Assignment areas and types of procedures:

II. Type of lead shielding and location to radiation source:

III. RSO analysis/recommendation:

_____ _____

Radiation Safety Officer's Signature Date Signed

ROSE STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM

REPORT OF IRREGULARITY IN THE CARE AND MAINTANANCE OF RAD BADGE

While in my possession, my radiation monitoring badge suffered damage, was lost, or was in a situation where excessive exposure not related to my exposure during my clinical responsibilities occurred. This is a report of the incident to explain any potential reading irregularities.

I acknowledge that I have received counseling regarding my radiation protection responsibilities during my clinical rotations.

I. Description of incident:

II. Type of lead shielding and location to radiation source:

III. RSO analysis/recommendation:

Student's Signature Date Signed

Radiation Safety Officer's Signature Date Signed

ROSE STATE COLLEGE
Radiologic Technology Program
PROFESSIONALISM CONCERNS REPORT

Please type or print all entries.

Student Name & RSC ID Number	Date(s) of occurrence(s):
Signature of Faculty or Program Director filing the form (**required**)	Date Discussed with Student:

This report is prepared when a student exhibits behavior not consistent with the RSC Student Professional Behavior/Code of Conduct Policy. It is intended to assist the student in meeting professionalism expectations in academic, professional or administrative settings. Improvement in the area(s) noted below is needed in order to meet the standards of professionalism inherent in being a radiologic technologist.

Check the appropriate category(ies). Comments are required.

Integrity & Honesty

- ❑ The student provided false information in an academic, professional, or administrative setting.
- ❑ The student acted outside the scope of his/her role in an academic, professional, or administrative setting.
- ❑ The student presented the work of others as his/her own.
- ❑ The student used his/her professional position for personal advantage.
- ❑ The student used the physical or intellectual property of others without permission or attribution.
- ❑ The student misrepresented himself or herself as a credentialed professional.
- ❑ Other behavior that demonstrated lack of integrity: _____

Patient-Centered Care & Patient-Safety

- ❑ The student did not act in the best interest of the patient with regard to positioning, technical factor selection, or other.
- ❑ The student did not demonstrate sensitivity to the needs, values, or perspectives of patients, family members, or caregivers.
- ❑ The student did not establish appropriate rapport with patients, family members, or caregivers.
- ❑ The student did not demonstrate openness/responsiveness to the patient's ethnic and cultural background.
- ❑ The student did not respond to patient needs in a timely, safe, or effective manner.
- ❑ Other unprofessional behavior related to Patient Centered Care: _____

Respect

- ❑ The student did not demonstrate respect for the rights of others in academic or professional settings.
- ❑ The student did not demonstrate respect in interactions with others.
- ❑ The student did not establish or maintain appropriate boundaries with patients, family members, fellow students, faculty, or staff.
- ❑ The student did not demonstrate equal respect for all persons, regardless of, race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
- ❑ The student did not demonstrate respect for the confidentiality rights of patients, research participants, or others.
- ❑ Other behavior that demonstrated lack of respect: _____

Service & Working within the Team

- ❑ The student did not function, collaboratively within the healthcare team.
- ❑ The student did not demonstrate sensitivity to the requests of the healthcare team.
- ❑ The student did not demonstrate the ability to collaborate with students, faculty, and staff in a learning environment.
- ❑ Other behavior that impeded collaboration: _____

Responsibility

- ❑ The student demonstrated a pattern of late arrival, early departure, extended breaks, absent, and/or misses deadlines/appointments.
- ❑ The student was disruptive or rude.
- ❑ The student needed continual reminders in the fulfillment of responsibilities.
- ❑ The student did not accept responsibility for his/her actions, recommendations, or errors.
- ❑ The student did not adhere to policies, procedures, and/or instructions.
- ❑ The student did not dress in attire appropriate for the setting.
- ❑ The student failed to follow, and/or manipulated clinic policies.
- ❑ The student failed to adhere to protective equipment and/or infection control guidelines.
- ❑ The students repeatedly showed disregard to laboratory equipment: fixed and/or ancillary.
- ❑ Other irresponsible behavior: _____

Responsiveness, Adaptability, & Self-Improvement

- ❑ The student was resistant or defensive when provided with constructive feedback.
- ❑ The student did not demonstrate awareness of his/her own limitations and/or willingness to seek help.
- ❑ The student resisted adopting recommendations from faculty or others to improve learning or performance.
- ❑ The student did not demonstrate adaptability in a patient care, classroom, or laboratory environment.
- ❑ The student did not correct his/her errors when were brought to his/her attention.
- ❑ Other behavior that impeded self-improvement: _____

Comments: Briefly describe the specifics of the incident – who, what, when, where. Attach additional information as needed.

To remedy the professionalism concerns listed on this report this student needs further education or assistance with the:

Disciplinary Action

_____ N/A

_____ Level I Verbal warning documented by faculty

_____ Level II Council with faculty and Program Direct to include Probation

_____ Level III Failure in Course and/or Dismissal from Program

Comments (use back or attach additional information if desired)

---------- This section is to be completed by the student (optional) ----------

I have read this report and have discussed it with the Faculty Member and/or Program Director.

Student Signature Date

Your signature indicates that you have read the report, and it has been discussed with you. It does not represent your agreement or disagreement with the PCR. If you disagree or want to comment, you are encouraged to comment in the space above. A copy of this PCR will be placed in the student's file.

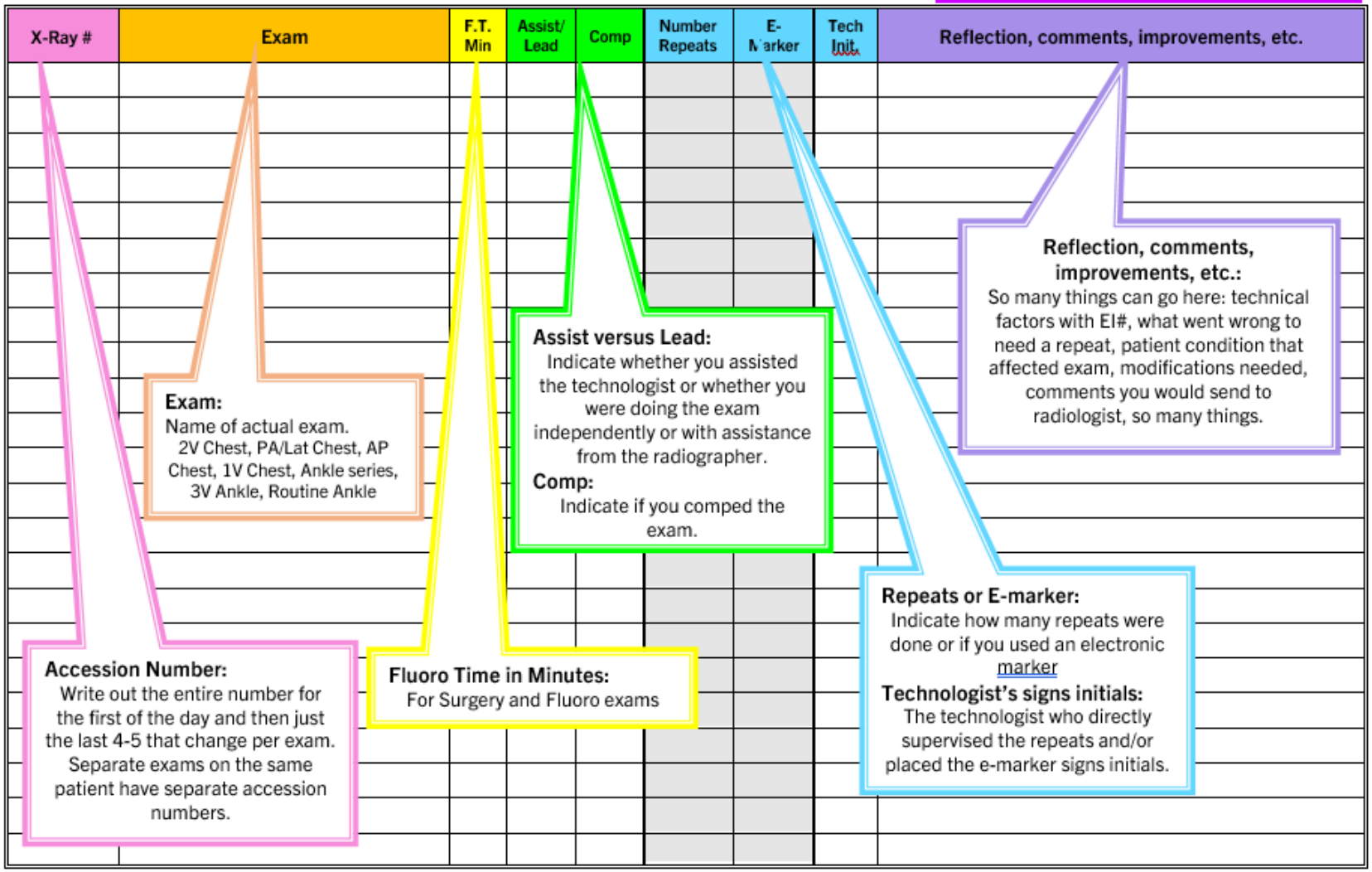
ROSE STATE COLLEGE – RADIOLOGIC TECHNOLOGY PROGRAM

PATIENT SHEET

DAILY RECORD OF CLINICAL EXPERIENCE

Your exams and supervising radiographers should represent experience in a variety of locations and staff.

Date _____ **STUDEN**



THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS®

ETHICS REVIEW CHECKLIST CRIMINAL VIOLATION

Below you'll find details about the documentation we require for an ethics review.

If you're reporting an ethics violation as part of your online renewal, application for certification and registration, or Continuing Qualifications Requirements (CQR), make sure we receive all related documentation **within 30 days** of your submission.

Disclosing the information to your state licensing agency doesn't mean you've disclosed it to ARRT.

Mail your documentation to ARRT, Ethics Requirements Department, 1255 Northland Drive, St. Paul, MN 55120.

Questions? Contact Ethics Requirements at 651.687.0048. Select the option for Ethics Requirements.

You have answered "Yes" to:	Have you ever been charged with or convicted of a misdemeanor or felony? (This includes court convictions and military courts-martial.) You are required to report: • Charges or convictions—including those that were stayed, withheld or deferred, set aside, or suspended • Any plea of guilty, Alford plea, or plea of no contest (nolo contendere) • Court conditions applied to your charge—including court supervision, probation, or pretrial diversion • Traffic violations charged as misdemeanors or felonies • Traffic violations that involved drugs or alcohol
The required information for an ethics review is:	1. **Personal explanation** of the events that led to each charge or conviction. 2. Official **court documents*** to confirm: • The **charges filed** (misdemeanor, felony, or military court-martial) to include the date and jurisdiction in which the situation occurred; • The **final judgment** (guilty, no contest [nolo contendere], withheld or deferred adjudication, stayed sentence, set-aside sentence, suspended sentence or pre-trial diversion); • The **sentencing requirements** (parole, probation, fines); and • The **status of the conditions** of the court (e.g., completed, case closed, dismissed). **Continue on next page**

THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS®

ETHICS REVIEW CHECKLIST REGULATORY VIOLATION

Below you'll find details about the documentation we require for an ethics review.

If you're reporting an ethics violation as part of your online renewal, application for certification and registration, or Continuing Qualifications Requirements (CQR), make sure we receive all related documentation **within 30 days** of your submission.

Mail your documentation to ARRT, Ethics Requirements Department, 1255 Northland Drive, St. Paul, MN 55120.

Questions? Contact Ethics Requirements at 651.687.0048. Select the option for Ethics Requirements.

You have answered "Yes" to:	Has a regulatory authority or certification board (other than ARRT) ever done one or more of the following? • Denied, revoked, or suspended your professional license, permit, registration, or certification? • Placed you on probation (excluding ARRT Continuing Education probation), under consent agreement, or under consent order? • Allowed voluntary surrender of your professional license, permit, registration, or certification? • Subjected you to any conditions or disciplinary actions?
The required information for an ethics review is:	• **Personal explanation** of the events that led to the violation. • Official **documentation of any consent agreement or consent order, disciplinary action or conditions** taken by a state or federal regulatory authority or certification board or **documentation of voluntary surrender.** • Copy of **current state license**, if applicable.
Don't report:	• If you have no offenses • If your only offense is ARRT Continuing Education (CE) probation • For offenses previously reported to ARRT and for which ARRT has sent you communication

THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS®

ETHICS REVIEW CHECKLIST HONOR CODE VIOLATION

Below you'll find details about the documentation we require for an ethics review. The information must be mailed to ARRT, Ethics Requirements Department, 1255 Northland Drive, St. Paul, MN 55120; or faxed to 651.687.0449.

Questions? Contact Ethics Requirements at 651.687.0048. Select the option for Ethics Requirements.

You have answered "Yes" to:	Have you ever voluntarily withdrawn—or been suspended, dismissed, or expelled—from an educational program you attended to meet ARRT certification and registration requirements?
The required information for an ethics review is:	1. **A written explanation** of the events that led to your suspension, dismissal, or expulsion 2. Copies of all **documentation relevant** to the matter (don't send original records)
You must also:	Waive confidentiality of your education records so that we may communicate freely and openly with your educational program director. Use the Family Educational Rights and Privacy Act (FERPA) waiver found on our website.

AFFIRMATION STATEMENT

I hereby affirm by signature that I have read the Rose State College Health Sciences Division Radiologic Technology Program and Clinical Manual for Fall 2026 in its entirety, and that I understand and will abide by the contents therein. I do also agree to comply with all policies and procedures of the clinical education sites to which I rotate. I also understand that my photo may be taken and used on official RSC social media accounts.

Student's Printed Name: _____

Student's Signature: _____

Date: _____