

**Radiography Program**

**Student Handbook**

**2023-2024**

Rowan College at Burlington County does not discriminate based on race, sex, sexual orientation, gender identity, religion, color, national or ethnic origin, age, disability, or veteran status. Visit [rcbc.edu/hr](http://rcbc.edu/hr) for more details.

\*Information is current to the date of publication\*

# Welcome

The Radiography Program Faculty welcomes new and returning students. Our goal is to provide its students with a high-quality radiography education that prepares them as caring, safe and competent entry-level radiographers in today’s high-tech healthcare workplaces. We want to work cohesively to achieve this goal.

We wish you success in your radiography education at Rowan College at Burlington County.

The information in this handbook will help assist you through the program. Please become familiar with each part and keep it as a reference.

# Accreditation

Joint Review Committee on Education in Radiologic Technology

20 N. Wacker Drive, Suite 2850

Chicago, Illinois 60606-3182

P: (312) 704-5300

F: (312) 704-5304

mail@jrcert.org

New Jersey Department of Environmental Protection

Bureau of X-ray Compliance

PO Box 420, Mail Code 25-01

Trenton, NJ 08625-0420

(609) 984-5890

www.xray.nj.gov

Rev. 10/97, Rev. 4/98, Rev. 4/99, Rev. 4/00, Rev. 4/01, Rev. 12/01, Rev. 4/02, Rev. 4/03, Rev. 4/04, Rev. 4/05, Rev. 4/06, Rev. 4/07, Rev. 4/08, Rev.4/09, Rev.4/10, Rev. 4/11, Rev.2/12, Rev.3/13 & 10/13

Rev. 4/14, Rev.7/14, Rev. 5/15, Rev. 4/16, Rev 8/19, 4/22, Rev 4/23

**Rowan College at Burlington County**

# Radiography Program Staff

**1000 College Circle**

**Mt. Laurel, NJ 08054**

College Telephone Number: (856) 291-4283 extension 1410

Facsimile: (609) 726-0628

**Administration**

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Dean of Health Sciences Associate Dean of Health Sciences

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Radiography Director Clinical Coordinator

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Jennifer Fadden BSRSA, RT(R) Dennis Williams BS, RT(R)(CT)

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**Staff**

Ruby Murrani Danielle Garcia

Health Sciences Assistant Health Sciences Coordinator

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# Program Clinical Affiliates

Hackensack Meridian Health Southern Ocean Medical Center (609) 978-8932

1140 Route 72 West

Manahawkin, New Jersey 08050

Virtua Marlton Hospital (856) 355-6125

90 Brick Road

Marlton, New Jersey 08053

Virtua Mt. Holly Hospital (609) 914-6000 ext. 43709

175 Madison Avenue

Mt. Holly, New Jersey 08060

Virtua Our Lady of Lourdes Hospital (856) 668-8450

1600 Haddon Avenue

Camden, New Jersey 08103

Virtua Voorhees Hospital (856) 247-3788

100 Bowman Drive

Voorhees, New Jersey 08043

Virtua Willingboro Hospital (609) 835-2900 ext. 4237

218A Sunset Road

Willingboro, New Jersey 08046

**Clinical Preceptor List**

|  |  |
| --- | --- |
| Virtua Memorial (609) 267-0700 #43735Victoria Bergner RT(R)Jen Fadden BS, RT(R) Nancy Murray, AAS, RT(R) Parul Soni, AAS, RT(R) Christine Wallrath AAS, RT(R)  | Virtua Marlton (856) 355-6125Jesse Cave, RT(R) Amanda Whelan, BS, RT(R) Ian Highland, AAS RT(R)Jea Gun Lee, AAS RT(R)Lauren Smith, AAS RT(R) |
| Virtua Willingboro (609) 835-3070Robert Griffin AAS, RT(R)(CT)Samantha Sage AAS, RT(R)Christine Wallrath AAS, RT(R)  | Hackensack Meridian (SOMC) (609) 597-2140Jill Errico, AAS, RT (R) Kelli Ann Deckman, RT(R)Donna Halpin, AAS, RT(R) Jennifer Larrata AAS, RT(R)  |
| Virtua Voorhees (856) 325-3788Michelle Giletto, RT(R)(M) Ian Highland, AAS, RT(R) Jea Gun Lee, AAS, RT(R) Jennifer Lender, AAS, RT(R) Timothy Miller, RT(R)Nancy Murray, AAS, RT(R) Lauren Smith, AAS, RT(R)Christine Szymkowski, MS, RT(R)(CT)Richard Wallace, AAS, RT(R) Amanda Whelan, BS, RT(R) | Virtua Our Lady of Lourdes (856) 757-3513Marialice Baran, RT(R) Carol Clarke, RT(R) Stacey Davis, AAS, RT(R) Brittany Richter, AAS, RT(R) Deborah Slobodian, RT(R)  |

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| --- |
| **RCBC Clinical Preceptors**Karin Anderson, AAS, RT(R)(M)Genna Beaver, BS, RT(R)Jennifer Fadden BS, RT(R)Virginia Guccini, RT(R) Nancy Murray, AAS, RT(R)Parul Soni, AAS, RT(R)Dennis Williams, BS, RT(R)(CT) |

Didactic Education Component



# Mission

In support of Rowan College at Burlington County, a comprehensive community college, the mission of the Radiography Program is to provide affordable educational experiences, so that the student may develop academically, clinically and professionally into a competent, entry-level radiographer.

##

## Student Learning Goals

**Goal 1: Students will have knowledge and skills required to be clinically competent in all radiographic tasks necessary for an entry level radiographer:**

Student Learning Outcomes:

Students will apply positioning skills.

Students will utilize safe radiation protection practices.

**Goal 2: Students will demonstrate communication skills**

Student Learning Outcomes:

Students will demonstrate written communication skills.

Students will demonstrate oral communication skills.

**Goal 3: Students will develop critical thinking skills.**

Student Learning Outcomes:

Students will adapt standard procedures for non-routine patients.

Students will critique images for diagnostic quality.

## Program Effectiveness Goals

**Goal 1:** Five-year average credentialing examination pass rate of not less than 85% at first attempt.

**Goal 2:** Five-year average job placement rate of not less than 75% within 12 months of graduation.

**Goal 3:** Annual program completion rates, 80% of the students will complete the program within 3 years of program start.

**Goal 4:** Graduates will express satisfaction with the program, as assessed on the exit evaluation, 80 % of the graduates will be satisfied.

**Goal 5:** Employer will express satisfaction with the graduates of the program as assessed on the employer survey, 80% of respondents will be satisfied.

# Academic Progression

The Radiography Program requires 70 credits for graduation:

* 48 radiography credits and 22 credits in college general education courses.
* The graduate receives an Associate in Applied Science (AAS) degree for Radiography.

## Transcripts

Students taking supporting courses at other institutions must keep their records at RCBC current. In addition, they are to arrange for transcripts to be sent to the Registrar so records will include the correct pre- and co-requisites and graduation requirements. Transferred courses must have the same number of credits to be equivalent to RCBC’s courses.

General education courses and support courses may be taken earlier than suggested and in any sequence. However, it is important to plan to take supporting courses indicated as radiography program pre- or co-requisites. These must be taken in the order as outlined in the curriculum.

* Example: RAD 150 is a co-requisite of RAD 107 so it must be taken no later than the same semester as RAD 107 and prior to Radiography Clinical Procedures 3 (RAD 160).

## Co-requisite Courses

* Semester 1
	+ RAD 113: Introduction to Radiologic Science
	+ RAD 117: Patient Care in Radiologic Science
	+ RAD 127: Radiologic Image Production Characteristics, & Principles
	+ RAD 140: Radiography Clinical Procedures 1
	+ RAD 142: Clinical Practicum & Image Evaluation 1
* Semester 2
	+ RAD 107: Principles of Radiation Protection & Biology
	+ RAD 129: Digital Image Acquisition and Display
	+ RAD 150: Radiography Clinical Procedures 2
	+ RAD 152: Clinical Practicum & Image Evaluation 2
* Semester 3
	+ RAD 160: Radiography Clinical Procedures 3
	+ RAD 162: Clinical Practicum & Image Evaluation 3
* Semester 4
	+ RAD 235: Radiographic Imaging Equipment
	+ RAD 240: Radiography Clinical Procedures 4
	+ RAD 242: Clinical Practicum & Image Evaluation 4
* Semester 5
	+ RAD 250: Radiography Clinical Procedures 5
	+ RAD 252: Clinical Practicum & Image Evaluation 5
* Semester 6
	+ RAD 262: Clinical Practicum & Image Evaluation 6

Any student failing pre-or co-requisites or radiography courses (taken in sequence) must withdraw from the radiography program until these courses are successfully completed. Re-admission to the radiography program will be considered at that time on a space available basis only.

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# Radiography Courses

## RAD 107: Principles of Radiation Protection & Biology

Radiation effects on cells and living tissues are discussed. The principles and responsibilities of radiation protection are presented. Federal and state regulations are identified. (2/0/0)

* *Pre-requisites*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiography Clinical Procedures I, and Clinical Practicum & Image Evaluation I
* *Co-requisite*: Digital Image Acquisition & Display, Radiography Clinical Procedures II, and Clinical Practicum & Image Evaluation II

## RAD 113: Introduction to Radiologic Science

This course provides the student an overview of the foundations of radiography and the practitioner’s role in health care delivery. Principles, practices and policies of health care organizations are examined and discussed in addition to the professional responsibilities of the radiographer. The student is also introduced to the basic information concerning ethical and legal behavior within a health care environment. (2/0/0)

* *Pre-requisites*: Fundamentals of Anatomy & Physiology 1/including lab, Medical Terminology, and College Composition
* *Co-requisite*: Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiography Clinical Procedures I, and Clinical Practicum & Image Evaluation I

## RAD 117: Patient Care in Radiologic Science

The student is introduced to the methods of optimal patient care, including consideration for the physical and psychological needs of the patient and family. Communication between the technologist and health care team is stressed. Routine and emergency patient care procedures are described, to include infection control procedures using standard precautions. (2/0/0)

* *Pre-requisites*: Fundamentals of Anatomy & Physiology 1/including Lab, Medical Terminology, and College Composition
* *Co-requisite*: Introduction to Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiographic Clinical Procedures I, and Clinical Practicum & Image Evaluation I

## RAD 127: Radiographic Image Production, Characteristics & Principles

The student establishes a knowledge base in the technical factors that govern the image production process. This course focuses on the factors that influence the creation of the radiographic image. (2/0/0)

* *Pre-requisite*: Fundamentals of Anatomy & Physiology 1/including Lab, Medical Terminology, and College Composition
* *Co-requisite*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiography Clinical Procedures 1, and Clinical Practicum & Image Evaluation 1

## RAD 129: Digital Image Acquisition & Display

The student will learn about the components, principles and operation of digital imaging systems found in diagnostic radiology. Factors that impact image acquisition, display, archiving and retrieval are discussed in detail. Principles of digital imaging quality assurance and maintenance are presented as well. (2/0/0)

* *Pre-requisite*: Intro to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiography Clinical Procedures I, and Clinical Practicum & Image Evaluation I
* *Co-requisite*: Principles of Radiation Protection & Biology, Radiography Clinical Procedures II, and Clinical Practicum & Image Evaluation II

## RAD 140: Radiography Clinical Procedures I

The student is taught to perform radiographic procedures of the chest, upper extremity, shoulder girdle and abdomen. Anatomic structure and topographic landmarks are identified. Radiographic positioning nomenclature, aids, accessory equipment, production of quality radiographic images and radiation protection procedures are studied. Laboratory materials are used to demonstrate clinical applications of theoretical principles and concepts. Achieved laboratory competency is measured. (2/2/0)

* *Pre-requisite*: Fundamentals of Anatomy & Physiology 1/including Lab, Medical Terminology, and College Composition
* *Co-requisite*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, and Clinical Practicum & Image Evaluation I

**RAD 142: Clinical Practicum & Image Evaluation I**

The student is assigned to the radiology department in the first semester of a clinical education center. The practical application of imaging of the following: chest, upper extremity, shoulder girdle and abdomen can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers. (0/0/16)

* *Pre-requisite*: Fundamentals of Anatomy & Physiology 1/including Lab, Medical Terminology, and College Composition
* *Co-requisite*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, and Radiography Clinical Procedures I

## RAD 150: Radiography Clinical Procedures II

The student learns to perform radiographic procedures of the lower extremity, pelvic girdle and bony thorax. Anatomic structure and topographic landmarks are identified. Radiographic positioning nomenclature, aids, accessory equipment, production of quality radiographic images and radiation protection procedures are studied. Laboratory materials are used to demonstrate clinical applications of theoretical principles and concepts. Achieved laboratory competency is measured. (2/2/0)

* *Pre-requisite*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiography Clinical Procedures I, and Clinical Practicum & Image Evaluation I
* *Co-requisite*: Principles of Radiation Protection & Biology, Digital Image Acquisition & Display, and Clinical Practicum & Image Evaluation II

## RAD 152: Clinical Practicum & Image Evaluation II

The student is assigned to the radiology department in the second semester of a clinical education center. The practical application of imaging of the following: lower extremity, pelvic girdle and bony thorax can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers. (0/0/16)

* *Pre-requisite*: Introduction to Radiologic Science, Patient Care in Radiologic Science, Radiographic Image Production, Characteristics & Principles, Radiography Clinical Procedures I, and Clinical Practicum & Image Evaluation II
* *Co-requisite*: Principles of Radiation Protection & Biology, Digital Image Acquisition & Display, and Radiography Clinical Procedures II

## RAD 160: Radiography Clinical Procedures III

The student learns to perform radiographic procedures of the spine, sacrum, coccyx, and skull. Anatomic structure and topographic landmarks are identified. Radiographic positioning nomenclature, aids, accessory equipment, production of quality radiographic images and radiation protection procedures are studied. Laboratory materials are used to demonstrate clinical applications of theoretical principles and concepts. Achieved laboratory competency is measured. (2/2/0)

* *Pre-requisite*: Principles of Radiation Protection & Biology, Digital Image Acquisition & Display, Radiography Clinical Procedures II, and Clinical Practicum & Image Evaluation II
* *Co-requisite*: Clinical Practicum & Image Evaluation III

## RAD 162: Clinical Practicum & Image Evaluation III

The student is assigned to the radiology department in the third semester of a clinical education center. The practical application of imaging of the following: spine, sacrum, coccyx and skull can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers. (0/0/16)

* *Pre-requisite*: Principles of Radiation Protection & Biology, Digital Image Acquisition & Display, Radiography Clinical Procedures II, and Clinical Practicum & Image Evaluation II
* *Co-requisite*: Radiography Clinical Procedures III

## RAD 235: Radiographic Imaging Equipment

The content of this course is designed to establish a knowledge base in radiographic, fluoroscopic, and mobile equipment requirements and design. The content also provides a basic knowledge of quality control. Upon completion, the student will be able to understand the difference in performance and testing of imaging equipment. (2/0/0)

* *Pre-requisite*: Radiography Clinical Procedures III, and Clinical Practicum & Image Evaluation III
* *Co-requisite*: Radiography Clinical Procedures IV, and Clinical Practicum & Image Evaluation IV

## RAD 240: Radiography Clinical Procedures IV

The student is taught to perform radiographic procedures of mobile radiography, trauma, pediatric, geriatric, digestive, biliary, reproductive and urinary systems. Radiographic positioning aids, accessory equipment, use of contrast media, production of quality radiographs and radiation protection are presented. Laboratory materials are used to demonstrate clinical applications of theoretical principles and concepts. Achieved laboratory competency is measured. (2/2/0)

* *Pre-requisite*: Clinical Practicum & Image Evaluation III, and Radiography Clinical Procedures III
* *Co-requisite*: Radiographic Imaging Equipment & Clinical Practicum & Image Evaluation IV

## RAD 242: Clinical Practicum & Image Evaluation IV

The student is assigned to the radiology department in the fourth semester of a clinical education center. The practical application of imaging of the following: mobile radiography, trauma, pediatric, geriatric, digestive, biliary, urinary, and reproductive systems can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers. (0/0/24)

* *Pre-requisite*: Radiography Clinical Procedures III, and Clinical Practicum & Image Evaluation III
* *Co-requisite*: Radiographic Imaging Equipment, and Radiography Clinical Procedures IV

## RAD 250: Radiography Clinical Procedures V

The student is taught radiographic advanced imaging procedures including mammograms, arthrograms, myelograms, venograms, and arteriograms. Radiographic positioning aids, accessory equipment, production of quality radiographs and radiation protection are presented. The student will also evaluate radiographic images of all required program competencies. Finally, the student is introduced to the basic concepts of pharmacology, venipuncture and administration of diagnostic contrast agents and intravenous medications. The appropriate delivery of patient care during venipuncture is emphasized. (2/0/0)

* *Pre-requisite*: Radiographic Imaging Equipment, Radiography Clinical Procedures IV, and Clinical Practicum & Image Evaluation IV
* *Co-requisite*: Clinical Practicum & Image Evaluation V

## RAD 252: Clinical Practicum & Image Evaluation V

The student is assigned to the radiology department in the fifth semester of a clinical education center. The practical application of imaging of the following: bone survey, long bone measurement, bone age, foreign body, scoliosis survey, hysterosalpingography, myelography, and arthrography can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers.

***Correction***

The student is assigned to the radiology department in the fifth semester of a clinical education center. The practical application of imaging of the following: myelograms, arteriograms, arthrograms, and venograms can be performed on actual patients through the competency process. Hands-on experience is provided under the direct supervision of qualified radiographers. (0/0/24)

* *Pre-requisite*: Radiographic Imaging Equipment, Radiography Clinical Procedures IV, and Clinical Practicum & Image Evaluation IV
* *Co-requisite*: Radiography Clinical Procedures V

## RAD 262: Clinical Practicum & Image Evaluation VI

Students are assigned to the radiology department in the sixth semester of a clinical education center for practical application of the information presented in the prerequisite and co-requisite courses. This course allows the student sufficient clinical practicum to achieve entry level clinical competency. Hands-on experience is provided under the supervision of qualified radiographers. Clinical rotations in advanced modalities may be made available during this semester with the permission of the Clinical Coordinator. Achieved competency and pertinent initial and final clinical competency testing is performed. (0/0/24)

* *Pre-requisite*: Radiography Clinical Procedures V, and Clinical Practicum & Image Evaluation V
* *Co-requisite*: None

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## Radiography Support Courses

BIO 110/111: Fundamentals of Anatomy and Physiology I

BIO 114/115: Fundamentals of Anatomy and Physiology II

HIT 106: Medical Terminology

PSY 101: General Psychology

SOC 101: Principles of Sociology

ENG 101: English Composition I

SPE 102: Public Speaking

CIS 101: Fundamentals of Computer Science

MTH 107: Introduction to Statistics

All general education credits in the A.A.S. degree for radiography students at Rowan College at Burlington County afford the graduate the foundation to easily pursue additional higher educational programs.

*Please Note*: There are no substitutes for radiography support/general education courses.

Non-Radiography courses taken earlier than required may be retaken (twice) to improve the grade. The student’s progress in the radiography program will not be affected until the co-requisite course is reached.

For students to enter or remain in the radiography program, they must have obtained a grade of “C” or higher in all the radiography support courses, ENG 101, BIO 110, BIO 111, BIO 114, BIO 115, HIT 106, SOC 101, PSY 101, MTH 107, CIS 101 and SPE 102.

A student in the radiography program receiving less than a “C” grade in any of the above courses will not be given credit toward meeting radiography requirements. If a student receives less than “C” in a co-requisite course, the student will be required to drop out of the radiography program until a “C” grade or better has been attained. At the next application cycle, the student may apply for readmission.

Revised: 5/02, 5/09, 2/17, 8/19, 4/22

Reviewed: 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 6/18, 4/22, 4/23

# Academic Information

## Grading Standard Practice

Maintaining GPA

Students must maintain a GPA of 2.80 or better to remain in the program. If the GPA falls below a 2.80, the student must withdraw and apply to reenter on a ***space-available basis*** when the GPA is above 2.80. Students should monitor their GPA at the end of each semester.

Radiography Course Grading Scale

A 90-100

B+ 85-89

B 80- 84

C+ 79

C 70-78

D 60-69

F less than 60%

S Satisfactory

U Unsatisfactory

A student must achieve a grade of **79%** or higher in every RAD theory course and **85%** or higher in the RAD clinical/laboratory course to advance.

* A grade below a 79% in a RAD theory course or below an 85% in a RAD clinical/laboratory course requires the student to repeat that course before advancing to the next semester or graduating.
* If a student fails one or more first semester radiography course(s) he/she will be dismissed and there is no consideration for readmission into the program.
* A student who fails one Radiography course (semesters 2, 3, 4, 5, or 6) he/she must take a Leave of Absence and retake that course the following year (depending on availability).
* Finally, if a student fails more than one Radiography course (over the life of the program) he/she will be dismissed and there is no consideration for readmission into the program.
* If the student is readmitted to the Radiography Program, he/she must repeat the entire course (theory, clinical and lab components).

## Grade Appeal

**Student Grade Appeals NUMBER 217**

The purpose of this policy amendment is to reaffirm and provide technical revision and clarification to Board Policy 217 by explaining the applicable time frame and associated deadline for student grade appeals that are governed by this Policy, and companion Procedure.

The policy applies to all students enrolled in credit bearing courses, offered under any mode of delivery.

The purpose of this policy is to offer students an avenue to discuss and resolve problems, in a timely manner that may arise with his/her educational progress. This document establishes a policy that defines a grade appeal process that provides due process as articulated in Procedure 217, for students in the event of a final grade dispute with a course professor.

Grade appeals governed under this policy must be formally initiated by a student in a timely manner that shall not exceed the conclusion of the next successive semester of the regular academic year or, in the case of a summer term appeal, the next successive fall semester.

Student grade appeals that do not conform to this deadline for appeal shall be considered untimely and without merit.

This policy requires:

(Step 1), a written request for a formal meeting with the course professor related to the grade dispute,

(Step 2), a review and recommendation by the division Dean, and

(Step 3) an appeal to the Provost of Academic Programs who will convene the Grade.

The Appeal Committee will review the records relevant to any dispute and make a recommendation to the President or designee, whose decision will be final.

SUPERSEDES: July 1, 2007

EFFECTIVE: March 19, 2013

Reviewed: 4/14, 4/15, 4/16, 7/17, 8/19, 4/23

#

# LAMBDA NU

Lambda Nu is a national honor society for the radiologic and imaging sciences. Its objectives are to:

* Foster academic scholarship at the highest academic levels;
* Promote research and investigation in the radiologic and imaging sciences;
* Recognize exemplary scholarship.

**Criteria**

Individuals who have achieved academic honors are welcome to apply for acceptance into Lambda Nu. The criteria are:

* Enrollment in a radiologic or imaging sciences program as a full-time student and possess a GPA of 3.7 or higher on a 4.0 scale after three semesters.
* Evidence of professional commitment beyond minimal requirements of the program including, but not limited to:
	+ Actively pursuing an independent research paper
	+ Active membership in a professional organization, as evidenced by:
		- Holding office or committee appointments
		- Preparing for presentation of a professional paper or poster
		- Preparing for competition in a Quiz-Bowl
* No academic or clinical disciplinary actions on file during the duration of the program.

**Invitation**

Individuals meeting the criteria will be sent an invitation to become a member of Lambda Nu. Once the student accepts the invitation, an application for membership and a copy of the bylaws are emailed in June.

**Application**

The application must be completed by the student and signed by the Program Director. The application is accompanied with a personal check sent to the National Lambda Nu organization.

**Induction**

Induction into the Lambda Nu Honor Society will occur in conjunction with the Diagnostic Medical Sonography program in the fall.

Established: 4/13

Reviewed: 4/14, 4/15, 4/16, 7/17, 6/18, 8/19, 4/22, 4/23

# Graduation

# Standard Practice

The graduate of the radiography program is educated to function as an entry-level diagnostic radiographer in various settings, such as hospitals, imaging centers and private offices. The graduate integrates the component of Radiologic science to function as a member of the health care delivery team. Ongoing professional development as a member of the discipline is an expected behavior of all graduates. Participation in continuing radiography education is required of all registered technologists. Additional activities of a registered technologist include accountability to peers and consumers of radiologic services and contributions to improving the delivery of health care.

# RCBC graduation

It is the responsibility of the graduate to submit the appropriate application to RCBC for the obtainment of the A.A.S. degree in radiography within the time frames published. Students may go to <http://www.rcbc.edu/graduation> for specific information.

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## Graduation Requirements

 To be eligible for graduation, the student must:

* Meet all didactic education requirements
* Meet all clinical education requirements

Achieve minimal terminal competencies by being able to:

* Provide basic patient care and comfort
* Apply principles of body mechanics
* Recognize emergency patient conditions
* Initiate first aid and basic life support
* Practice radiation protection for the patient, self and others
* Position the patient and imaging system to perform radiographic procedures
* Modify standard procedures to accommodate for patient condition
* Determine proper exposure factors to obtain the following in accordance with the ALARA concept:
	+ diagnostic quality radiographic images;
	+ adapt exposure factors based upon various conditions/situations;
	+ image gently
* Perform basic mathematical functions
* Apply knowledge of quality assurance
* Objectively critique recorded images for various factors
* Operate radiographic imaging equipment and accessory devices
* Exercise independent judgment and discretion in the technical performance of medical imaging procedures
* Demonstrate an acceptable standard of medical ethics in the performance of all duties
* Recognize the need to keep skills and knowledge through continuing education
* Achieve program goals and educational objectives
* Fulfill all financial obligations to the college
* Earn a minimum of 70 credit hours specified by the program with a minimum cumulative grade point average of 2.80.

# Graduation Awards

There are several awards that are given upon the completion of the program.

## Academic Award

The Academic Award is presented to the student that has the highest RCBC cumulative GPA. If two students have the same GPA, the award will be given to the student who has acquired the greatest number of credits at RCBC. This award is given out at the Academic Awards Ceremony.

## Kenneth L. Queener, R.T. Award of Technical Excellence

Kenneth Queener was retired military and worked as a technologist at Virtua Memorial Hospital. He had outstanding clinical skills and deeply cared for the students. He was a mentor to all students and educating them on how to produce the best images possible. Radiology personnel at all the clinical affiliates are asked to select one student, who has produced the highest quality radiographs with the lowest radiation exposure (repeats) to the patient.

##

## Patricia Ann Taylor, R.T. Humanitarian Award

Patricia Ann Taylor was a technologist that is honored through the Humanitarian Award. She had graduated from the Virtua Memorial Hospital’s program and was employed as a technologist when she lost her battle with cancer.

Radiology personnel are asked to select the student who best meets the following criteria:

* + Shows love and concern for all
	+ Empathizes with others feelings
	+ Gives freely of themselves
	+ Responds to the need of others
	+ Exhibits good interpersonal skills
	+ Shows respect for all

## Clinical Excellence Award

Radiology Personnel are asked to select the student who best meets the following criteria:

* Demonstrates a thorough understanding of the radiological examination process.
* Plans, organizes and executes all responsibilities of an entry-level radiologic technologist.
* Possesses and uses a sound knowledge base of radiologic technology.
* Works in cooperation with all members of the healthcare team.

Revised: 2/06, 5/05, 5/09, 5/11, 4/22

Reviewed: 4/14, 4/16, 6/17, 6/18, 8/19, 4/23

# National Registry

The Program Director (or designated program official) will direct expected graduates in applying for the American Registry of Radiologic Technologists national certification examination. The program is responsible for the provision of all necessary information required. The program is not responsible for submitting or paying application fees.

# New Jersey State Licensure

Upon successful completion of the ARRT exam, the student may apply for a New Jersey Diagnostic Radiography License. This application is through the State of New Jersey, Department of Environmental Protection and Energy, Radiologic Technology Board of Examiners. The program is responsible for the provision of all necessary applications and the information required.

Submission of the appropriate application and fee is the responsibility of the student. The application cannot be sent until the results from the ARRT registry examination are received. Furthermore, the application must be accompanied by the fee, a copy of the ARRT results, and a letter from the Program Director stating completion of the accredited program (a copy of the degree may not be available at the time of program completion).

Revised: 2/06, 5/05, 5/09, 5/11, 4/22

Reviewed: 5/09, 4/10, 4/12, 3/13, 4/14, 5/15, 4/16, 6/17, 8/19, 4/22, 4/23

# Educational Master Plan Junior Year

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| --- | --- | --- |
| ***Summer*** | ***Fall*** | ***Spring*** |
| **DIDACTIC EDUCATION** |
| RAD 113: Intro to Radiologic Science | RAD 107: Principles of Radiation Protection & Biology | RAD 160: Radiography Clinical Procedures 3 |
| RAD 117: Patient Care in Radiologic Science | RAD 129 Digital Image Acquisition & Display | RAD 162: Clinical Practicum & Image Evaluation 3 |
| RAD 127: Radiographic Image Production, Characteristics, & Principles  | RAD 150: Radiography Clinical Procedures 2 | SPE120: Public Speaking |
| RAD 140: Radiography Clinical Procedures 1 | RAD 152: Clinical Practicum & Image Evaluation 2 | --- |
| RAD 142: Clinical Practicum & Image Evaluation 1 | BIO114/115: Anatomy & Physiology 2 | --- |
| **CLINICAL EDUCATION** |
| Practice laboratory: chest, abdomen, upper extremity, and shoulder girdle | Practice laboratory: bony thorax, lower extremity, and pelvis | Practice laboratory: spine, skull, arches, nasal bones, facial bones, orbits, mandible, and TMJs  |
| Clinical 1: introduction rotations – refer to schedules | Clinical 2: subsequent rotations – refer to schedules | Clinical 3: subsequent rotations – refer to schedules |
| Initial Competency Testing begins | Continue Initial Competency Testing | Continue Initial Competency Testing |
| --- | --- | Continual Competency begins |

# Educational Master Plan Senior Year

|  |  |  |
| --- | --- | --- |
| ***Summer*** | ***Fall*** | ***Spring*** |
| **DIDACTIC EDUCATION** |
| RAD 235: Radiographic Imaging Equipment | RAD 250: Radiography Clinical Procedures 5 | RAD 262: Clinical Practicum & Image Evaluation 6 |
| RAD 240: Radiography Clinical Procedures 4 | RAD 252: Clinical Practicum & Image Evaluation 5 | MTH 107: Introduction to Statistics |
| RAD 242: Clinical Practicum & Image Evaluation 4 | PSY101: General Psychology | --- |
| CIS101: Introduction to Computers | SOC101: Principles of Sociology | --- |
| **CLINICAL EDUCATION** |
| Practice laboratory: digestive, urinary, biliary, and reproductive systems | Practice laboratory: C-arm, IVP, mobile, and minor special procedures | Practice laboratory: review all past material & additional equipment  |
| Clinical 4; subsequent & interrelated discipline rotations – refer to schedules | Clinical 5: subsequent & interrelated discipline rotations – refer to schedules | Clinical 6: final and elective rotations – refer to schedules |
| Continue Initial and Continual Competency Testing | Continue Initial and Continual Competency Testing | Continue Initial & Continual Competency Testing |
| --- | --- | Terminal Competency  |

# Radiography Program Semester Objectives

## First Year - Summer Semester

Upon completion of the first semester, the student radiographer will be able to:

1. Discuss and apply elementary principles of radiation protection for self, patient and

 other personnel.

1. Apply principles of body mechanics.
2. Discuss the history of medicine with emphasis upon Radiology.
3. Discuss the structure of a radiography program in the State of New Jersey.
4. Discuss the organizational structure of the program.
5. Effectively communicate by using the language of medicine orally and in written

form.

1. Conduct oneself in a professional and ethical manner.
2. Discuss various medico-legal considerations.
3. Provide basic patient care and comfort.
4. Empathize with the patient.
5. Recognize emergency patient conditions and seek appropriate medical assistance.
6. Utilize the radiology computer system.
7. Perform basic clerical procedures associated with the department of radiography.
8. Utilize skills developed in expository writing.
9. Identify the skeletal structure and topographic landmarks of the upper extremity,

 shoulder girdle, chest, and abdomen.

1. Explain the procedure for performing radiographic examinations of the upper

extremity, shoulder girdle, chest, and abdomen.

1. Discuss factors that govern and influence the production of the radiographic image

 on the image receptor.

1. Combine appropriate aspects of first semester radiography courses to perform

radiographic examinations of the upper extremity, shoulder girdle, chest, and abdomen.

1. Discuss factors that govern and influence the production of the radiographic image.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| RAD 113 | 1,3-5 |
| HIT 106 | 6 |
| RAD 142 | 7 |
| RAD 117 | 2,7-13 |
| RAD 142 | 9-13 |
| ENG 101 | 14 |
| RAD 140 | 15-16 |
| RAD 127 | 17,19 |
| RAD 142 | 18 |

##

## First Year - Fall Semester

Upon completion of the second semester, the student radiographer will be able to:

1. Achieve all objectives from the previous semester.
2. Identify and explain anatomical structures and physiology of the chest, abdomen,

 and upper extremities.

1. Identify the skeletal structure and topographic landmarks of the pelvic

girdle, bony thorax and lower extremities.

1. Explain the procedure for performing radiographic examinations of the pelvic

girdle, bony thorax and lower extremities.

1. Select from a group of radiographs, images that exhibit diagnostic

quality.

1. Identify anatomical parts of the, thorax, pelvic girdle and lower extremity on a radiograph.
2. Evaluate finished images for technical errors and make recommendations for

correction.

1. Explain the principles of radiation biology.
2. Discuss and apply all necessary principles of radiation protection for self, patient

and other personnel.

1. Combine appropriate aspects of all current and preceding radiography courses to

 perform radiographic examinations of the bony thorax, pelvic girdle, lower extremities

 in addition to previous examinations.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| Previous Semester | 1 |
| BIO 114/115 | 2 |
| RAD 150 | 3-7 |
| RAD 107 | 8&9 |
| RAD 152 | 10 |

## First Year - Spring Semester

Upon completion of the third semester, the student radiographer will be able to:

1. Achieve all objectives from the previous semesters.
2. Identify the skeletal structure and topographic landmarks of the spine and skull.
3. Explain the procedures for performing radiographic examinations of the spine and

 skull.

1. Select from a group of radiographs, images that possess diagnostic quality.
2. Identify anatomical parts of the spine and skull which are visible on a finished

radiographic image.

1. Evaluate finished radiographs for technical errors and make recommendations for

correction.

1. Identify and explain anatomical structures and physiology of the spine and skull.
2. Combine appropriate aspects of all current and preceding radiography courses to

perform radiographic examinations of the spine and skull in addition to previous examinations.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| Previous Semester | 1 |
| RAD 160 | 2-8 |
| SPE 102 | 9 |
| RAD 162 | 10 |

## Second Year – Summer Semester

Upon completion of the fourth semester, the student radiographer will be able to:

1. Achieve all objectives from the previous semesters.
2. Identify topographic landmarks associated with the digestive, biliary, reproductive and

urinary systems, as well as pediatric, and mobile examinations.

1. Identify the various types of fluoroscopic and tomographic equipment.
2. Explain the use of contrast media for radiographic or fluoroscopic procedures of

the biliary, digestive, reproductive and urinary systems.

1. Explain the procedure for performing radiographic examinations of the digestive, biliary,

 reproductive and urinary systems, as well as pediatric and mobile examinations.

1. Identify anatomical parts of the digestive, biliary, reproductive and urinary systems

on finished radiographs.

1. Select from a group of radiographs those images that are of diagnostic quality.
2. Evaluate finished radiographs for technical errors and make recommendations for

corrections.

1. Discuss the various aspects of quality assurance.
2. Explain the impact of various radiographic systems on the production of quality

images.

1. Discuss the disciplines interrelated to radiography.
2. Combine appropriate aspects of all current and preceding radiography courses, to

perform radiographic examinations of the biliary, digestive, reproductive and urinary systems in addition to previous examinations.

1. Discuss the role of computers in medicine and radiology.
2. Explain the concepts of radiation physics in the areas of electrostatics,

electrodynamics, currents, circuits, magnetism, electromagnetism, rectification, x-ray tubes, x-ray circuits and the production and characteristics of x-radiation.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| Previous Semester | 1 |
| RAD 240 | 2-8 |
| RAD 235 | 3, 9-11,14 |
| RAD 242 | 12 |
| CIS 101 | 13 |

## Second Year – Fall Semester

Upon completion of the fifth semester, the student radiographer will be able to:

1. Achieve all objectives from the previous semester.
2. Discuss the various aspects of social science.
3. Identify topographic landmarks associated with advance radiographic procedures.
4. Explain the procedure for performing advanced radiographic examinations.
5. Identify the various types of equipment used for advanced radiographic procedures.
6. Explain the use of contrast media used in advanced radiographic procedures.
7. Identify anatomical parts visualized on a finished radiograph when advanced

radiographic procedures are performed.

1. Select from a group of radiographic images that are of diagnostic quality.
2. Evaluate finished radiographs for technical errors and make recommendations for

correction.

1. Combine an appropriate knowledge base for current and preceding radiography courses to

perform advanced radiographic procedures.

1. Discuss the concept of psychology, and how the person learns, thinks and communicates.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| Previous Semester | 1 |
| SOC 101 | 2 |
| RAD 240 | 3-9 |
| RAD 242 | 10 |
| PSY 101 | 11 |

## Second Year - Spring Semester

Upon completion of the sixth semester, the student radiographer will be able to:

1. Achieve all objectives from the previous semesters.
2. Discuss and perform the basic principles of CPR.
3. Discuss the concept of pathology and disease as they relate to various radiographic

procedures.

1. Adjust radiographic exposure factors to compensate for the presence of existing

pathology.

1. Discuss questions pertinent to radiography for preparation of certification with entry-level skills, perform all duties associated with the profession.
2. Utilize basic statistical concepts.

The above objectives are covered as follows:

|  |  |
| --- | --- |
| ***Course*** | ***Objective #*** |
| Previous Semester | 1 |
| CPR Renewal | 2 |
| RAD 262 | 3-5 |
| MTH 107 | 6 |

Clinical Education Component



# Clinical Requirements

To meet requirements of the clinical settings, all students must submit the following documents to the compliance repository selected by the College before full acceptance into the Radiography program:

* Criminal History Background Check
* Drug Screening
* Physical Examination
* Health Insurance
* CPR for the Healthcare Provider: American Heart Association
* Malpractice Liability Insurance

### Physical Examination

Prior to admission, all conditionally accepted radiography students are required to have a complete physical examination.

The following must be accomplished:

* Complete physical examination
* Complete blood count
* Serology
* Urinalysis
* Immunization or titers: Polio, Rubella, Varicella, Tetanus, Covid-19, etc.
* Hepatitis B Vaccine: the series must be at least in progress.
* Influenza (annual)
* Tuberculosis:
	+ Initial Testing
		- QuantiFERON blood test OR
		- Skin test (two-step) OR
		- Chest x-ray
	+ Annual Testing
		- QuantiFERON blood test OR
		- Skin test (one-step) OR
		- Chest x-ray

The health care provider must certify that the student is physically and mentally able to undertake the radiography program. Besides the provider’s signature, his/her name, address and telephone number should be clearly printed.

### Health Insurance

All radiography students must carry health insurance coverage for their personal health/medical needs. Documentation of coverage must be submitted to the compliance repository prior to final acceptance and for the length of the program.

*Students who allow their insurance to lapse cannot return to clinical and must obtain insurance to remain in the Program.*

**CPR for the Healthcare Provider**

All radiography students must successfully complete a course in CPR Basic Life Support (BLS) for the health care professional through the American Heart Association. It is a pre-requisite for final acceptance and must be current throughout the student’s time in the program.

*Students who allow their CPR certification to lapse cannot return to clinical until the program has received a current/valid card.*

**Malpractice Liability Insurance**

All radiography students must carry malpractice insurance with limits of liability of $1,000,000/$3,000,000 while enrolled in the program. The college provides this insurance and the fee is included for the Clinical Practicum and Image Evaluations courses at the time of registration.

**Criminal History Background Check (CHBC)**

Students are accepted on a conditional basis. The student will contact the compliance repository to process the CHBC. The conditional acceptance will convert to full acceptance based on a negative background screening as well as meeting all other requirements of the program. The student’s conditional acceptance will be rescinded with a positive CHBC result.

**Drug Screening**

Information for prospective students on urine drug screening procedures and fees are per SentryMD guidelines.

Students are accepted on a conditional basis. The student will contact the compliance repository. The conditional acceptance will convert to full acceptance based on a negative drug screening as well as meeting all other requirements of the program. If amphetamines are screened, a physician’s letter must be submitted with the drug prescribed, reason for the prescription, dosage, etc. The student’s conditional acceptance will be rescinded with a positive drug screening result.

Students may not enter the class, lab or clinical setting while under the influence of prescription or non-prescription pain medications or opioids, alcohol, or marijuana. Students may not enter the class, lab or clinical setting while utilizing medical marijuana or prescription opioids or other medications that have the potential to alter perception. Students may be tested at random while in the program. Testing positive for any legal or non-legal substance that may impair performance, including alcohol and marijuana, at any time while in the program is cause for dismissal.

**Policy**

A urine drug screen is required for all conditionally accepted students. Because clinical education is an essential and required component of the curriculum, if the student does not have a clean drug screening, the student will not be accepted into the program.

**Procedure**

1)  After a conditional acceptance of admission, an independent urine drug screening will be conducted and completed for each matriculating student. The urine drug screening will be performed at the student’s expense by a vendor identified and approved by the RCBC Health Science Division.

2) The Radiography Program shall be responsible for ensuring that information is treated confidentially as required by state and federal law.

3)  The multi-panel urine drug screening tests for amphetamines, methamphetamines, cocaine metabolites, marijuana metabolites, opiates, and PCP.

* **If the report does not indicate any drugs**, it will be retained with the student’s record in the digital repository.
* **If a report indicates any illegal drugs**, the Director of the Radiography Program will call and/or send a letter to the prospective student rescinding his/her conditional acceptance.
* **If the results indicate amphetamines and/or opiates**, the prospective student must provide written documentation on letter head from the ordering physician the medication, dose amount and the reason for the medication, and be given to the Program Director within thirty days of the positive test. If the student does not provide a letter documenting a valid medical reason for the screening results, the Director of the Radiography Program will call and/or send a letter to the prospective applicant rescinding the student’s conditional acceptance.

4) Appeal

* If the applicant challenges the information in the report as erroneous, the applicant may ask the vendor to investigate further to determine whether the information is accurate.
* An applicant may appeal the rescinded acceptance in accordance with the Due Process Policy at RCBC.

5)  A completed urine drug screening will be valid and satisfy the requirements of the Radiography Program’s urine drug screening for the duration of the student’s enrollment in Rowan College at Burlington County, unless the student has a break in his/her enrollment, or as determined to be necessary by the Program. Students will be notified of any additional urine drug screenings occurring after enrollment, and shall be required to provide consent and pay all fees associated with any additional urine drug screening.

Revised – 5/08, 6/18, 4/22

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 7/17, 6/18, 6/19, 4/22, 4/23

# Competency Based Clinical Education Standards

Competency based clinical education (CBCE) is a progressive approach to the clinical development of a student. Competency evaluations are designed to assess the student’s development of clinical skills, verify level of competency maintained and ensure that the graduate has achieved entry-level clinical skills. To assure each step has been achieved, evaluation will be performed in a progressive fashion.

The steps for successfully completing this process are listed in sequence:

1. Clinical observation
2. Classroom instruction and testing
3. Lab demonstration and testing
4. Clinical participation (under direct supervision)
5. Initial Clinical Competency Evaluations
6. Clinical participation (under indirect supervision)
7. Continual Clinical Competency Evaluations
8. Spot Check Testing
9. Terminal Clinical Competency Evaluations

**Clinical Observation**

Beginning in May of the first year, students are scheduled at a clinical education site for an observational rotation. During this time, students are expected to assist the radiographer to the best of their abilities and training to date but are NOT permitted to perform any procedure until it has been presented and tested in the classroom and laboratory settings.

# Classroom Instruction and Testing

Beginning with the first day of the summer semester of the first year, students will receive didactic instruction that will lay the foundation for the performance of clinical procedures. Periodic testing will document their mastery of the information.

To pass the theory portion of each non-clinical radiography course the student must:

* Follow the course outline and take each test as scheduled
* Pass with a final course grade of 79% or higher
* Adhere to the radiography course policies

# Laboratory

Clinical labs are scheduled following didactic instruction to provide hands on application and skill development. The clinical laboratory procedure will consist of instructor demonstration, student practice, and student return demonstration.

Students will learn and practice clinical skills in the lab before they are performed in the clinical setting. To pass the lab portion of each radiography course, the student must obtain a passing grade of 85% or higher on each lab return demonstration.

* Failure to attend a regularly scheduled laboratory demonstration/return will result in an automatic 10-point deduction from the student’s grade regardless of reason.

# Clinical Participation

After didactic and laboratory instruction along with documented laboratory proficiency in a procedure, the student is now able to participate in the clinical setting under *direct supervision*. In the participation stage, the student may now assume a more active role in his/her clinical responsibilities.

## Direct Supervision

Following the successful completion of laboratory return demonstration of a particular examination, the student will actively participate in that examination under the direct supervision of a qualified, licensed radiographer. Direct Supervision means the licensed radiographer will:

* Review the exam request in relation to the student’s knowledge and competency
* Evaluate the condition of the patient in relation to the student’s knowledge and competency
* Be present in the room to observe and supervise the student during the examination
* Review and approve the completed radiographic images before the patient leaves
* Be present in the room for any repeat radiographs

### Initial Competency Testing

Once a student has performed the minimum number of cases required for a specific body part under direct supervision, he/she is able eligible to participate in an Initial Clinical Competency Evaluation.

## Indirect Supervision

Upon the successful completion of an Initial Clinical Competency Evaluation (Initial CCE), the student progresses to *indirect supervision* by a qualified licensed radiographer for that procedure.

 Indirect Supervision means the licensed radiographer will:

* Review the exam request in relation to the student’s knowledge and competency
* Evaluate the condition of the patient in relation to the student’s knowledge and competency
* Be immediately available in the room or adjacent to the room to assist the student
* Review and approve the completed radiographs before the patient leaves
* Be present in the room for any repeat radiographs

“Immediately available” is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

The student may remain under indirect supervision for exams of this specific body part for the remainder of the program. During this period, the student will continue to strengthen his/her skills in this exam under more difficult situations (i.e. trauma, difficult patients, etc.)

Regardless of competency status, mobile radiography, fluoroscopy and operating room rotations require the student remain under *direct supervision* at all times regardless of the student’s skill level. The student also must always have a radiographer present (*direct supervision*) while repeating any image. In addition, it is the responsibility of the licensed radiographer and *not* the student to approve and accept images before the patient leaves the department.

If at any time, a program official observes a student performing a procedure and in his/her opinion the student is not fully competent, the student will revert to direct supervision for that procedure.

## Continual Competency Testing

Beginning in the spring semester of the first year (third semester), Continual Clinical Competency Evaluations (Continual CCEs) are conducted to ensure that the student has maintained proficiency in a particular exam. Continual CCEs should be performed on procedures and patient types that are progressively more difficult than Initial CCEs. Prior to requesting a continual competency, the student must have successfully completed an initial competency on that exam. The minimum number of Continual CCEs are determined by the Program and is subject to change. All Continual CCEs must be performed on patients; no simulations will be accepted.

### Spot Checks

Spot checks will be performed in the third, fourth and fifth semesters. Three spot checks will be completed and factored as part of the clinical grade. The spot checks are done on exams that the students are performing with indirect supervision and are at the discretion of the Clinical Preceptor, Clinical Coordinator or Director.

### Terminal Competency Testing

Terminal Clinical Competency Evaluations (Terminal CCEs) are conducted in the last semester prior to graduation. These evaluations encompass various exams to ensure that the student has remained proficient in all previously tested categories. Terminal CCEs should be performed on procedures and patient types that are progressively more difficult than Initial and Continual CCEs. In order to begin the terminal competency process, all other clinical testing must be completed (spot checks, mandatory and elective CCEs). Students eligible for terminal competency testing will be selected in random order at the discretion of the clinical preceptor. Once all other testing has been completed, this evaluation will take place during the last 3 months of the Program. The minimum number of Terminal CCEs are determined by the Program and is subject to change. All Terminal CCEs must be performed on patients; no simulations will be accepted. Those who successfully complete this will meet program requirements for clinical competency.

The Program’s terminal competency procedure minimumsare listed below:

* Chest 2-view (stretcher or wheelchair only)
* Abdomen
* Upper Extremity
* Lower Extremity
* Spine/Cross-Table Lateral Hip (2 views)
* C-arm Procedure (2-views)
* Mobile Examination

Students will review the completed Terminal Competency Testing Evaluation Forms in the record maintenance system. A hard copy record of all competencies completed will be on the student in the clinical setting and in his/her clinical file.

# Simulations

Occasionally required exams do not come in as frequently as other exams. Every attempt will be made to have the student pass a competency on a real patient. However, the exam may not be available. In this situation, the student may perform a simulated competency. Simulated competencies must meet the following criteria:

1. The student is required to competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor and affective skills required in the clinical setting.
2. The Program Director is confident that the skills required to competently perform the simulated task will transfer to the clinical setting.
3. No more than 10 ARRT “Mandatory and Elective” procedures can be evaluated via simulation.
4. Simulation exams can only be performed during the last 3 months of the program.
5. Simulated exams must be done prior to terminal testing.
6. Mandatory testing that ***must*** be on an actual patient and not simulated:
	1. Ribs
	2. Thumb/finger
	3. Humerus
	4. Tibia/Fibula
	5. Femur
	6. Thoracic Spine
	7. Hip (Cross-table Lateral)
	8. Abdomen (Upright)
	9. C-arm Procedure (requiring manipulation to obtain more than one projection)
	10. Surgical C-arm Procedure (Requiring manipulation around a sterile field)
	11. Chest (Pediatric Patient: Age 6 or younger)

For successful completion of the clinical experience of each radiography course, the student must:

* Receive a grade of 85% or higher on all required behaviors identified on the Clinical Performance Evaluation form.
* Demonstrate mastery of all published clinical rotation performance objectives.
* Demonstrate all previously required RCBC Radiography Course Behaviors.
* Practice safety measures pertaining to the patient, self, others and the environment.
* Adhere to the Radiography Program attendance policy.
	+ Clinical attendance is necessary for the student to meet the objectives and the Clinical Coordinator to adequately evaluate required behaviors.

# Clinical Performance Evaluations

Five clinical performance evaluation tools are utilized to assess vital aspects of clinical objective mastery:

* Clinical Procedure Competency Evaluation Forms
* Clinical Rotation Evaluation Forms
* Adjunct Clinical Preceptor Student Observations
* Program Staff Clinical Evaluations
* Mid and End of Semester Evaluations

**Clinical Procedure Competency Evaluation Form**

This form is used to determine the student’s mastery of clinical procedures. It is also designed to assess: (1) the development of clinical skills, (2) the verification level of competency maintained and (3) that the graduate has achieved entry-level clinical skills. To assure each step has been achieved, the evaluation process will be performed in a progressive fashion. The steps utilized are initial, continual and terminal evaluation.

**Clinical Rotation Evaluation Forms**

The licensed radiographer will evaluate student achievement of published objectives at the completion of each clinical rotation using the *Clinical Rotation Evaluation form*.

**Adjunct Clinical Preceptor Student Observations**

The Program employs adjunct clinical preceptors to help aid the student achieve his/her clinical evaluation requirements for each semester. All adjunct clinical preceptors are to provide appropriate, accurate feedback and constructive criticism to the Program Director and Clinical Coordinator for each student when visiting the clinical sites.

**Program Staff Clinical Evaluations**

At the end of each semester, the Board-approved clinical preceptors evaluate students at their respective site. This evaluation consists of various criterion. Each student is evaluated in terms of how he/she has met the stated objectives and not in comparison with other students.

**Mid-Semester and End-of-Semester Evaluations**

Radiography students require mid-semester and end-of-semester evaluations with the Clinical Coordinator and the Program Director. This formative evaluation also allows the student to set personal goals and gives the Clinical Coordinator and Program Director the opportunity to provide support and direction for continued clinical performance.

## Clinical Performance Guidelines for Satisfactory and Safe Performance

Students will perform within the legal and ethical codes of radiology; demonstrate accountability in imaging procedures and provide for appropriate patient, personnel and general public radiation safety and/or monitoring**.**

Examples of unsafe or unsatisfactory performance include, but are not limited to the following:

* Inappropriate behavior in any assigned clinical experience, such as not reporting known errors, falsifying documents, signatures, or assignments
* Incorrect or omission of appropriate radiation safety and/or monitoring, such as imaging equipment abuse, gross procedure errors or failure to comply with monitoring standards
* Physical, mental or emotional abuse of patients
* Inappropriate interpersonal relations with the clinical affiliate, staff, peers, or faculty members
* Failure to accurately document imaging procedure parameters
* Failure to maintain confidentiality of patient information and records
* Failure to notify the clinical affiliate and/or college faculty/staff of absence
* Coming to clinical under the influence of alcohol/drugs
* Unexcused tardiness to clinical assignments.
* Smoking in areas where it is prohibited.

A student whose behavior is unsafe or unsatisfactory may be removed from the clinical area at the discretion of the clinical site, Clinical Coordinator, and/or Program Director. Such behavior may result in an unsatisfactory grade for clinical and/or dismissal from the program.

Revised

Reviewed – 5/09, 4/10, 3/12, 3/13, 4/14, 4/15, 6/18, 8/19, 5/23

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# Clinical Rotations

Each student is scheduled for the indicated number of two-week rotations in the following areas of diagnostic radiology. Below is a list of mandatory and optional rotations as mandated by the Program.

|  |  |
| --- | --- |
| General Diagnostic Radiology | Mandatory |
| Emergency Department | Mandatory |
| Fluoroscopy | Mandatory |
| Operating Room | Mandatory |
| Mobile Radiography | Mandatory |
| Interventional Radiography | Optional |
| Computed Tomography (CAT Scan) | Optional |
| Mammography | Optional |
| DEXA Scan | Optional |
| MRI | Optional |
| Ultrasonography | Optional |
| Cardiac Cath Lab | Optional |
| Radiation Oncology | Optional |
| Nuclear Medicine | Optional |

At the completion of the rotation, the student’s performance will be evaluated by a licensed technologist based on the objectives. Additionally, the radiographer, clinical preceptor and/or supervisor assigned to the area may provide a brief written student performance review.

Students involved in fluoroscopy, mobile and operating room rotations may not spend 100% of their time in these areas and therefore must report to a busier area where no student is present.

# Specialty Rotations

A radiography related discipline may not account for more than 10% of the total clinical education experience. If a student expresses an interest in a specific discipline, he/she may request to spend additional time in that area during the spring semester of the second year (sixth semester) provided that the related discipline total does not exceed the maximum.

At the completion of the specialty rotation, student performance will be evaluated by a licensed registered technologist in that area. Additionally, the area supervisor (or assignee) may provide a brief written student performance review.

### Fluoroscopy

Students will not fluoroscope any patient, unless under the direct supervision of a Radiologist. All fluoroscopic procedures must always be performed under direct supervision of a licensed technologist, regardless of the level of competency.

### Operating Room (OR)

No more than one student shall be permitted in a single operating room at any time. All surgical procedures using either radiographic or fluoroscopic equipment must always be performed under direct supervision of a licensed technologist, regardless of the level of competency. Once the case has been completed, the student observing/participating must return to the radiology department with the technologist. Under no circumstances may a student remain in the operating room area unsupervised.

All students leaving the OR (for any reason) must remove their OR scrubs and put on the approved program uniform. If the student is expected to return to the OR the same day, he/she must don a new pair of scrubs for any additional cases.

### Gender

The program supports and complies with “Fair Practices in Education.” Therefore, all students are required to participate in the same clinical education experience regardless of gender.

### Ebola

The New Jersey Board of X-ray Compliance recommends to all educational programs under its jurisdiction, that students are not permitted to be involved in the care of patients with suspected or confirmed Ebola. The Board made this recommendation because: (a) students have not completed the educational program in radiologic technology; and (b) there are adequate numbers of licensed radiologic technologists to assist in such care.

### Other/Coronavirus

Each clinical site may restrict the exams that students participate or observe if a patient is suspected or a confirmed Coronavirus case. Students should check with the lead technologist or manager to determine the restrictions for this particular population. Furthermore, students must wear the appropriate N-95 mask to participate in taking care of said patients.

# Clinical Hours

The radiography program schedules students Monday through Friday from 8:00 a.m. to 4:30 p.m.\*. The number of days per week that the student is scheduled is determined by the class year.

The total number of clinical hours assigned for Program completion is 1680.

The student will not be scheduled to the clinical site on days that the College is officially closed.

In addition, the total number of students at a particular clinical assignment cannot exceed the number on file with the Joint Review Committee on Education in Radiologic Technology (JRCERT).

* Virtua Marlton Hospital clinical hours are 7:30 a.m. to 4:00 p.m.
* Virtua Voorhees Hospital clinical hours are 7:30 a.m. to 4:00 p.m.
* Virtua Willingboro Hospital clinical hours are 7:30 a.m. to 4:00 p.m.

## Off-Hours

The program does not offer its students off-hours at this time.

Revised: 5/12, 6/14, 5/16, 2/17, 4/22, 5/23

Reviewed: 5/09, 4/10, 3/12, 3/13, 4/14, 4/16, 6/18, 6/19

# Imaging Procedures Identification List

This list may change to meet the current New Jersey Competency Base Clinical Education Standard and ARRT competency requirements for the examination in radiography.

**1st Year Summer: upper extremity, chest and abdomen**

\*Minimum Required Testing: 3 Actual

|  |  |  |  |
| --- | --- | --- | --- |
| *Chest Routine:* | PA & Lateral | *Forearm:* | AP & Lateral |
| *Chest AP:* | AP Stretcher or Wheelchair & Lateral | *Elbow:* | AP, Both Obliques, Lateral |
| *Chest:* | Lateral Decubitus | *Humerus:* | AP & Lateral |
| *Abdomen:* | AP Supine | *Shoulder:* | Department Protocol |
| *Abdomen:* | Upright  | *Clavicle:* | AP & Axial |
| *Abdomen:* | Decubitus | *Scapula:*  | AP & Oblique |
| *Thumb/Finger:* | Department Protocol | *AC Joints:* | AP w/ & w/o weights |
| *Hand:* | PA, Oblique, Lateral | *Trauma Shoulder:* | Scapular Y, Transthoracic or Axial |
| *Wrist:* | PA, Both Obliques, Lateral |  |  |

**1st Year Fall: lower extremity, pelvis and bony thorax**

\* Minimum Required Testing: 9 Actual

|  |  |  |  |
| --- | --- | --- | --- |
| *Toes:* | Department Protocol | *Hip:* | AP and Frog Lateral |
| *Foot:* | AP, Oblique, lateral | *Pelvis:* | AP |
| *Ankle:* | AP, Both Obliques, lateral | *Cross-Table Lateral Hip:* | Danelius-Miller or Clements Nakayama Method |
| *Knee:* | AP, Both Obliques, lateral | *SI Joints:* | AP Axial & Obliques |
| *Tibia/Fibula:* | AP & Lateral | *Ribs:* | AP (Upper & Lower) & Obliques |
| *Femur:* | AP & Lateral | *Sternum:* | RAO oblique & Lateral |
| *Patella:* | Department Protocol | *SC Joints:* | PA & Obliques |
| *Calcaneus:* | AP Axial & Lateral |  |  |

**1st Year Spring: spine & skull**

\* Minimum Required Testing: 10 Actual

|  |  |  |  |
| --- | --- | --- | --- |
| *Soft Tissue Neck:* | AP and Lateral | *Skull:* | PA Caldwell, Both Laterals, AP Axial Towne |
| *Cervical Spine:* | AP, Lateral, Both Obliques, Open Mouth Odontoid, & Cervicothoracic Lateral (If Needed) | *Facial Bones:* | PA Caldwell, Lateral (Affected Side), Parietoacanthial Waters Method (Or Modified Waters Method) |
| *Thoracic Spine:* | AP, Lateral, & Cervico-thoracic Lat. (If Needed) | *Mandible:* | PA, PA Axial, Axiolateral Oblique, AP Axial Towne, Submentovertex |
| *Lumbar Spine:* | AP, Both Obliques, Lateral, L5/S1 | *Temporomandibular Joints:* | AP Axial Towne Method, Axiolateral Modified Schuller Method, Axiolateral Oblique Modified Law Method |
| *Sacrum & Coccyx:* | AP & Lateral | *Nasal Bones:*  | Parietoacanthial Waters Method, Both Laterals |
| *Scoliosis:* | Department Protocol | *Orbits:* | PA Axial Modified Caldwell Method, Parietoorbital Oblique Rhese Method, Parietoacanthial Modified Waters Method, Lateral |
|  |  | *Sinuses:* | PA Axial Caldwell Method, Lateral, Submentovertex, Parietoacanthial Waters Method |

**2nd Year Summer: mobile/trauma, pediatric/geriatric, fluoroscopy, and surgical**

\* Minimum Required Testing: 9 Actual

|  |  |  |  |
| --- | --- | --- | --- |
| *Mobile Radiography:* | AP Chest | *Upper GI Series, Single or Double:* | Department Protocol |
| *Mobile Radiography:* | Abdomen | *Contrast Enema, Single or Double:* | Department Protocol |
| *Mobile Radiography:* | Upper or Lower Extremity | *Small Bowel Series:* | Department Protocol |
| *Pediatric:* | Chest Routine | *Esophagus:* | Department Protocol |
| *Pediatric:* | Upper or Lower Extremity  | *Cystography:* | Department Protocol |
| *Pediatric:* | Abdomen | *ERCP:* | Department Protocol |
| *Pediatric:* | Mobile Study | *HSG:* | Department Protocol |
| *Geriatric:* | Chest Routine | *Intravenous Urography:* | Department Protocol |
| *Geriatric:* | Upper or Lower Extremity | *C-arm Procedure:* | *Requiring Manipulation to Obtain More Than One Projection* |
| *Geriatric:* | Hip or Spine | *Surgical C-Arm Procedure:* | *Requiring Manipulation Around a Sterile Field* |

\* Pediatric imaging: patients 6 years or younger

\* Geriatric imaging: at least 65 years old *and* physically or cognitively impaired

**2nd Year Fall: advanced procedures – venipuncture, arthrography, and myelography**

\* Minimum Required Testing: 9 Actual

|  |  |
| --- | --- |
| *Venipuncture:* | Department Protocol |
| *Arthrography:* | Department Protocol |
| *Myelography:* | Department Protocol |

**2nd Year Spring: All remaining and terminal testing**

Revised – 5/12, 4/16, 6/18, 8/19, 5.23

Reviewed – 5/09, 4/10, 3/12, 3/13, 4/14, 4/16, 4/22

#

# Competency Exam Objectives

1. During each tested procedure the student will be able to:

* evaluate the requisition;
* identify the procedure to be completed;
* identify the correct patient;

2. Demonstrate facilities readiness by:

* + keeping the radiographic table and equipment clean;
	+ selecting the correct image receptor or collimation field size;
	+ preparing the control panel for exposure;
	+ placing the tube into the correct position;
	+ checking all locks on the tube and table for safety;
	+ ensuring availability of immobilization devices and/or positioning aids;
	+ ensuring availability of radiation protection devices;
	+ fulfilling all other pertinent readiness requirements.

3. Demonstrate appropriate student/patient relationship by:

* + addressing the patient by proper name;
	+ speaking to the patient in a polite and gentle manner;
	+ ensuring patient safety at all times;
	+ escorting the patient to/from the radiographic room;
	+ assisting the patient on/off radiographic table;
	+ ensuring patient privacy and modesty;
	+ providing appropriate moving and breathing instructions;
	+ conducting the examination in a professional and ethical manner;
	+ fulfilling all other pertinent communication requirements.

4. Demonstrate procedural skills by:

* + manipulating the patient into the correct position for each projection;
	+ utilizing positioning aids and restraining devices as needed;
	+ appropriately orienting the part of interest to the image receptor;
	+ placing markers appropriately on the image receptor;
	+ angling the central ray appropriately;
	+ directing the central ray to the midpoint of the image receptor and/or part;
	+ performing all projection in a logical sequence;
	+ completing the examination in a reasonable time period;
	+ fulfilling all other pertinent procedural requirements.

5. Manipulate equipment effectively by:

* + utilizing the Bucky tray and all associated locks;
	+ utilizing the tube and all associated locks;
	+ utilizing the table and all associated locks;
	+ utilizing the control panel;
	+ fulfilling all other pertinent equipment manipulation requirements.

6. Demonstrate proper radiation protection measures by:

* + documenting the patient’s stated last menstrual period and chance of pregnancy;
	+ utilizing appropriate collimation for the part of interest;
	+ utilizing appropriate gonadal shielding;
	+ utilizing required radiation monitoring devices;
	+ utilizing appropriate radiation safety devices for all concerned (i.e. lead

apron, thyroid shield, etc.);

* + fulfilling all other pertinent radiation protection requirements.

7. Set appropriate exposure factors by:

* determining patient body habitus;
	+ using appropriate technical factors for the body part;
	+ adjusting basic factors for changes in SID and/or grid ratio;
* adjusting basic factors for patient pathology, body habitus and the reduction of motion;
	+ setting adjusted factors on control panel;
	+ fulfilling all other pertinent exposure factor requirements.

8. Demonstrate proper image evaluation techniques by identifying at least five anatomic structures on the finished radiograph and proper contrast and brightness.

Revised – 5/12, 4/16, 6/19, 5/23

Reviewed – 5/09, 4/10, 3/12, 3/13, 4/14, 4/16, 4/22

# Clinical Competency Grading Policy

## Competency Grades

Each Clinical Competency Evaluation (CCE) performed evaluates the student’s abilities within a specific clinical procedure. The clinical preceptor assigns a number of points as determined by the student’s performance from the criteria. *To be considered competent, the student must achieve a minimum of 85% or higher.*

All Initial CCEs completed within a semester will be averaged to determine a numerical grade for that portion of the clinical grade. Students who do not meet the number of required initial competencies will receive a grade of zero for the competencies not completed.

In semesters where applicable, all Continual CCEs completed within a semester will be averaged to determine a numerical grade for that portion of the clinical grade**.** Students who do not meet the number of required continual competencies will receive a grade of zero for the competencies not completed. In the final semester, all Terminal CCEs will be averaged to determine a numerical grade for that portion of the clinical grade.

# Failure Protocol

Students are permitted a maximum of *three* opportunities to achieve a minimum passing grade of 85% on each examination on which they are tested. Students who fail to achieve the minimum passing grade after three attempts will be dismissed from the Program. Failures are handled as follows.

## Didactic (procedure courses)

The instructor will:

1. record grade achieved;

2. conference with the student (one-on-one) and review reason for failure;

3. review specific test items answered incorrectly;

4. tutor student in areas of actual difficulty;

5. give written assignment for reinforcement;

6. document session.

**Lab (return demonstration)**

The lab instructor will:

1. conference with the student (one-on-one) and review reason for failure;

2. review specific procedural aspects performed incorrectly;

3. reinforce those aspect by didactic review and repeat demonstration in the

 laboratory setting;

4. assign a date for re-evaluation;

5. document session on lab form (from failed session).

6. upon the successful completion of step 5, a maximum grade of 85% is recorded.

**Initial Competency Testing**

The clinical preceptor will:

1. conference with the student (one-on-one) and review reason for failure;

2. develop an educationally valid plan of remediation as based upon specific

 reason for failure;

3. apply reinforced knowledge in a laboratory setting.

Upon completion of steps 1, 2, and 3, the student will:

4. apply reinforced knowledge in the clinical setting;

5. present proof of a minimum number (assigned by clinical coordinator) of exams performed under direct supervision.

Upon completion of steps 4 and 5, the instructor will:

6. perform a second competency test on that procedure;

7. document remediation and performance on a student counseling form.

8. upon the successful completion of step 6, a maximum grade of 85% is recorded.

**Continual Competency Testing**

Indirect supervision status is removed for that exam only.

The clinical preceptor will:

1. conference with the student (one-on-one) and review reason for failure;

2. develop an educationally valid plan of remediation as based upon specific

 reason for failure;

3. apply reinforced knowledge in a laboratory setting.

Upon completion of steps 1, 2, and 3, the student will:

4. apply reinforced knowledge in the clinical setting;

5. present proof of a minimum number (assigned by clinical coordinator) of exams performed under direct supervision.

Upon completion of steps 4 and 5, the clinical preceptor will:

6. perform a second initial competency test on that procedure;

7. restore indirect status upon passing this competency;

8. perform a second continual competency on that procedure approximately two weeks later.

9. upon the successful completion of step 8, a maximum grade of 85% is recorded.

**Terminal Competency Testing**

Indirect supervision status is removed for that exam only.

The clinical preceptor will:

1. conference with the student (one-on-one) and review reason for failure;

2. develop an educationally valid plan of remediation as based upon specific

 reason for failure;

3. apply reinforced knowledge in a laboratory setting.

Upon completion of steps 1, 2, and 3, the student will:

4. apply reinforced knowledge in the clinical setting;

5. present proof of a minimum number (assigned by the clinical coordinator) of exams

 performed under direct supervision.

Upon completion of steps 4 and 5, the clinical preceptor will:

6. perform another initial competency on that procedure;

7. restore indirect status upon passing the competency;

8. perform a final competency exam on that procedure;

9. upon the successful completion of steps 6 through 8, a maximum grade of 85% is recorded.

Revised – 5/12, 6/14, 5/23

Reviewed – 5/09, 4/10, 3/12, 3/13, 4/14, 4/16, 6/18, 6/19, 4/22

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# Clinical Disciplinary Policies

## Disciplinary Measures

If a student should display behavior that is not conducive to that of a student radiographer, the following will occur:

1. first offence – verbal warning
2. second offence – written warning
3. third offence – suspension, probation, or possible dismissal from the program

# However, it is the faculty’s discretion to remove any student from the clinical or academic setting whose behavior is unsafe or unsatisfactory.

**Clinical Suspension**

The Radiography Program reserves the right to suspend a student from the clinical education center immediately when the health and safety of a patient is affected by the negligent, incompetent, unethical or illegal practice of the student as stated in the syllabus for each procedure class.

Should it be necessary to suspend a student, the following procedure will be followed:

* The clinical preceptor or manager will notify the Program Director and/or Clinical Coordinator about the student incident verbally and in writing.
* The student may not return to the clinical education site until the Program Director has reviewed the incident and the suspension is lifted.
* The student may continue to attend all course lectures until disposition of the incident has been rendered.

# Clinical Dismissal

It is essential that necessary regulations be established for students to follow to enable the Program to provide the best education possible to each student. Students will perform and adhere within the legal and ethical codes of radiography. Students will also demonstrate accountability in preparation, provision, documentation and continuity of care and promote the well-being of the total patient.

Patient safety is of paramount importance. Safe clinical performance is required, where the inside and outside customer’s physical and/or psychological welfare are of utmost importance. Unsafe clinical performance places a patient in physical and psychological jeopardy. In addition, the Program must be vigilant in assuring the best care and safety possible to all patients. Students may be dismissed at any time for clinically unsafe behavior without chance of readmission. For this reason, the following are examples but not a complete list of “Just Cause” for disciplinary action, up to and including dismissal from the Program.

Examples of unsafe or unsatisfactory performance include, but are not limited to, the following:

* Falsification of application to the RCBC Radiography Program (discovered at any time).
* Not meeting the hospital performance standards.
* Abuse or inconsiderate treatment of visitors, patients, students, and clinical personnel, school faculty and staff.
* Improper Professional (ARRT standards of professional behavior) attitude during clinical/academic assignment.
* The use of profanity.
* Soliciting or accepting tips from patients and/or visitors.
* Leaving patients unattended or not safely secured during procedures.
* Releasing confidential information without authorization (HIPAA policy).
* Mismanagement of hospital funds or property.
* Violation of departmental or hospital safety rules including patient safety, employee safety.
* Refusal to accept or participate in a reasonable clinical assignment, including competency testing.
* Inability to perform according to hospital or department standards.
* Excessive absences and /or tardiness.
* Failure to report absences/tardiness/time off promptly.
* Failure to maintain or falsification of required student documents.
* Clocking in and out for another student.
* Leaving the clinical area without permission.
* Sleeping on clinical assignment.
* Smoking in areas where it is prohibited.
* Eating in areas where it is prohibited.
* Failure to report to clinical/academic assignment without notification.
* Failure to report to clinical/academic assignment alert and ready to work.
* Failure to report to clinical assignment in proper complete professional attire. (See dress code).
* Insubordination towards a clinical, didactic, or other department or hospital official.
* Failure to participate in academic or clinical projects or assignments.
* Leaving the clinical or academic area early without notification
* Disruption either verbally, by gesture, or any other action deemed disruptive by the faculty and staff.
* Aggression or behavior considered dangerous to patient safety or hospital personnel.
* Violation of Code of Ethics for Radiologic Technology (ARRT Ethics).
* Inappropriate actions during any assigned clinical experience, such as not reporting known errors, falsifying documents, signature or assignments.
* Incorrect or omission of prescribed care, such as, medication or procedure errors.
* Coming to clinical under the influence of alcohol or other drugs.
* Lying, stealing and/or cheating
* Failing to have a licensed technologist in the room while performing exams prior to becoming competent (direct supervision).
* Failing to have a licensed technologist in the area while performing exams after becoming competent (indirect supervision).
* Failing to have a licensed technologist in the room while performing a repeat exam.
* Inappropriate interpersonal relations with staff, peers or faculty members.
* Personal gifts to individual staff or faculty members.
* Failure to maintain confidentiality of patient information and records.
* Failure to demonstrate competence in the presence of the patient.

Students who receive verbal warnings will be notified in writing and a copy will be kept in their file and/or entered in the Trajecsys system. Students will also have a counseling session with a follow-up. Suspensions can be a minimum of one day to a maximum of five days. Missed clinical time due to a suspension will be made up according to policy. Students dismissed will not be considered for re-entry into the program. The faculty reserves the rights to require at any time the withdrawal of any student who gives the evidence of being unable to carry out the responsibilities of a radiologic technologist, and/or perform to entry-level standards (ARRT).

Revised 4/15, 4/16, 8,19, 5/23

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/16, 6/18

**Energized Lab Policy**

The Radiography Program Laboratory (Lab) consists of a fully energized tube in the Health Science Center, Room 229 on the Mt. Laurel Campus. The unit meets all state and federal regulations. The unit is utilized to meet the objectives in courses as stated in the curriculum.

The Energized Lab will be restricted to the following:

1) Admission to the lab accompanied by a member of the Radiography Program faculty.

2) Admission requires the student wear his/her radiation monitoring device at all times.

3) Exposures will be made under the direction of the Radiography Program faculty.

4) Students in the lab will observe all rules and standards of the practice of radiation safety as covered in:

* RAD 107: Radiation Protection & Radiobiology
* RAD 127 Radiographic Image Production, Characteristics, and Principles
* RAD 129 Digital Image Acquisition & Display
* RAD 142 Clinical Practicum & Image Evaluation 1
* RAD 152 Clinical Practicum & Image Evaluation 2
* RAD 162 Clinical Practicum & Image Evaluation 3
* RAD 235: Radiographic Imaging Equipment
* RAD 242 Clinical Practicum & Image Evaluation 4
* RAD 252 Clinical Practicum & Image Evaluation 5
* RAD 262 Clinical Practicum & Image Evaluation 6

5) Students must wear closed-toed/fully enclosed shoes in the laboratory setting.

6) Students must wear their RCBC uniforms for all positioning labs.

7) Students must sign in and out when using the laboratory during off-lab hours (i.e. open lab).

***Students who refuse to adhere to these rules are subject to dismissal.***

Revised – 5/10, 4/16, 4/18, 6/19, 4/22

Reviewed – 3/11, 4/12, 4/13, 4/14, 4/16, 5/23

## Safety Procedures

This policy is to ensure the health and safety of employees and students to common workplace hazards, including fire, electrical and chemical contact in the clinical setting.

**Procedure:**

* Prior to the start of the program, students are introduced to the Annual Mandatory Competencies (aka: Virtua Annual Compliance for Colleagues).
* Prior to the start of the program all students must complete:
	+ Virtua Hospital confidentiality form
	+ Virtua safety training
* At the onset of the second year of the program the student must repeat the Safety Training and submit another confidentiality agreement.
* In addition, prior to the first clinical day, the students must complete an MRI screening form and also view the MRI PowerPoint. The PowerPoint will be e-mailed to the students and they must submit the answers to the Program Director. If a student receives a grade of less than 80%, he/she must review the information and retake the quiz.
	+ If the student’s health status changes he/she must notify the Program Director and complete a new MRI screening tool.

**Radiation Protection Policy**

**General**

Students must comply with all rules which have been established to ensure radiation safety for all patients and personnel. The program uses the New Jersey Administrative Code (N.J.A.C.) Subchapter 19 and the NJ Radiologic Technology Board of Examiners Accreditation Standards for schools of Diagnostic Radiologic Technology to form the radiation policy.

The student is made aware of the radiation policy several times throughout the program. During orientation the student is given a Radiography Program Handbook approximately one month prior to start of the program covering the policies in greater detail. In addition, the student must sign and return the final page of the student handbook denoting that he/she read and understands the handbook. The policy is reviewed again when the student is given his/her radiation dosimeter on the first day of class.

Before entering the clinical education component, relative risks from radiation exposure (including the relative risks to an embryo or fetus in the event of student pregnancy) and radiation protection methods must be explained by a qualified program instructor. *Each student must complete a cognitive and psychomotor evaluation with a minimum grade of 85% before being permitted to begin clinical education.*

**Radiation Monitoring**

The college provides each student with a radiation monitoring device. The monitoring device is left at the student’s clinical site in a specific non-ionizing location when it is not in use. The exception is when the student moves from one clinical location to another and attends lab. The radiation readings are reviewed by the Program Director and the student each month. If there is an unusually high reading, the student is questioned and a Student Radiation Safety Incident Report Form is completed. The student initials the report noting knowledge of his/her reading.

**Safety Rules**

1. **NEVER** become careless or complacent while working with radiation. As ionizing radiation can destroy body tissue, it is a powerful weapon and must be treated with respect.
2. A radiation monitoring device must be worn while in the clinical areas at the collar level.
3. Students are **FORBIDDEN** to hold a patient during radiographic exposures.
4. Radiographic room doors must be closed during exposures.
5. Remain behind a lead barrier when an exposure is being made.
6. Wear lead aprons, thyroid shields and gloves when there is no other type of protective barrier available during fluoroscopy or mobile examinations.
7. **NEVER** stand in the path of the primary beam.
8. Withhold exposures until all persons are adequately protected.
9. Written authorization from a physician is required for radiographic examinations. Do not make a radiographic exposure until you have the proper authorization.
10. Restrict the exposure to the area of interest **only**.
11. Refer all radiation protection questions to a program official, supervisor, radiation safety officer or radiologist.
12. **DO NOT** proceed until you are sure of the proper procedure.

**Radiation Safety:**

A. The use of x-ray equipment by students must comply with N.J.A.C. 7:28-1 et seq.

B. The school of diagnostic radiologic technology shall ensure that each student is provided with a personnel radiation-monitoring device during his or her period of attendance. [N.J.A.C. 7:28- 19.13(f)13].

 Although this provision requires each student to be provided with a personnel radiation-monitoring device during the period of attendance, the device only needs to be worn during laboratory instruction (prior to and during any x-ray exposures) and

during all times at clinical education.

C. Student exposure to radiation shall not exceed any of the occupational limits prescribed in N.J.A.C. 7:28-6.1. [N.J.A.C. 7:28-19.13(f)13]

D. Within 30 calendar days of the school’s receipt of any radiation dosimetry report, the school shall inform all students of their most recent exposure readings. [N.J.A.C. 7:28-19.13(f)13].

A radiation monitoring device must be exchanged with a new device in accordance with the vendor’s requirements. (Example: a device having a vendor’s required wear period of one month must be exchanged monthly and cannot be used as a quarterly monitoring device.) The school may use either monthly or quarterly monitoring devices. However, a student, who has declared a pregnancy, must be provided with a monthly device.

E. In the event that a student receives an exposure of 50 mrem (0.5 mSv) or greater on any monthly radiation dosimetry report, or 100 mrem (1.0 mSv) or greater on any bimonthly radiation dosimetry report, or 150 mrem (1.5 mSv) or greater on any quarterly report, or an exposure that exceeds any of the occupational limits in N.J.A.C. 7:28-6.1, the school shall begin an investigation to find the cause and prevent recurrence of the exposure. The investigation report shall be completed within 30 calendar days of the school's receipt of notification of the exposure. This investigation report shall include any action to be taken to reduce unnecessary radiation exposure.

The investigation report shall be given to the student and shall be maintained in the student's file. If any of the occupational limits in N.J.A.C. 7:28-6.1 is exceeded, a copy of the investigation report must be submitted to the Department. [N.J.A.C. 7:28- 19.13(f)13]

F. Within 90 calendar days of departure from the school, the school shall provide each student with a complete record of his or her radiation exposure history. [N.J.A.C.

7:2819.13(f) 13]

This cumulative record of radiation exposure will contain:

 1. badge number

 2. name

 3. date of birth

 4. period monitored

 5. cumulative record of radiation exposure

 6. occurrence of high or unusual exposure and reason

 7. monitoring company's name and address

 8. hospital/school account number

The student must comply with all guidelines, which have been established to ensure radiation safety for all patients and personnel.

Revised – 5/00, 5/13, 4/22

Reviewed – 5/09, 3/10, 4/12, 4/14, 4/15, 4/16, 6/19, 5/23

**Pregnancy Policy**

The student is made aware of the pregnancy policy several times throughout the program. Initially, this policy is explained to students at their advising session, prior to accepting a spot in the radiography program. The student must acknowledge that everything was covered. The pregnancy policy is reviewed in further detail at this time. Additionally, the students must sign, date, and return the back page of the RCBC Radiography Student Handbook thus noting that students have read and understand all policies and procedures set forth by the program including the pregnancy policy.

Applicants accepted into the program are advised on the Student Health “Pregnancy Policy”. The policy clearly informs students that if pregnancy occurs the student has the following options:

* Continue their education without modification, interruption, and continue in their scheduled clinical education cycle.
* Interrupt their education in radiography by taking a leave of absence
* Formally withdraw from the program

Created – 4/15, 6/19, 4/22

Reviewed – 4/16, 6/18, 6/19, 5/23

# Student Health: Pregnancy

All students must follow a planned clinical education rotation pattern in order to ensure an appropriate variety of radiographic procedures/examinations throughout the program.

If pregnancy occurs, the student has three options as stated above in the Pregnancy Policy. Should the student voluntarily declare the pregnancy to the program authorities, timely radiation safety counseling can be provided (the associated form can be requested from the Program Director). It is recommended by the National Council on Radiation Protection & Measurement (NCRP) that the student inform program authorities immediately upon learning of the pregnancy. At any time, a declared pregnant student may voluntarily undeclare (withdraw the declaration) her pregnancy (associated form can be requested from the Program Director).

The student who has declared her pregnancy to the program authorities will receive advisement from program authorities and the clinical site’s Radiation Safety Officer. Discussion will include the nature and potential radiation injury associated with in utero exposure, the regulatory limits established by the NCRP and the required preventative measures to be taken throughout the gestation period. After advisement, the student will be required to complete the Student Response Form.

The student declaring her pregnancy will be asked to select one of the three available options.

1. The student may elect to continue her formal education without interruption and continue in her regularly scheduled clinical education cycle without modification.
2. The student may elect to interrupt her formal education by requesting a leave of absence.
3. The student may elect to terminate her formal education.

Whenever a declared pregnant student is acquiring clinical education, she will be required to wear a second radiation monitoring device at the abdominal level, which enables program/hospital authorities to monitor exposure to the embryo and/or fetus. If a protective lead apron is worn, the secondary badge must be worn under the protective apron in order to determine the absorbed dose. The NCRP recommends that the Maximum Permissible Dose (MPD) equivalent to the embryo-fetus from occupational exposure to the expectant mother should be limited to 0.5 rem for the entire gestation period. It is possible to limit all occupational exposure to under 0.5 rem per year through proper instruction of all safety precautions. Please refer to the State of New Jersey’s Board of Medical Examiners Policy that supports the Nuclear Regulatory Commission Regulation 10 CRF.20.1208 – “Dose to the Embryo/Fetus” and NCRP Report No. 116 “Protection of the Embryo –Fetus”.

Within seven calendar days of the school's receipt of a radiation dosimetry report, the school shall inform the pregnant student of her most recent exposure readings. If the Deep Dose Equivalent in any month is 50 mrem (0.5 mSv) or higher, the school and student shall consult with a medical physicist or health physicist, who is certified by the American Board of Radiology, American Board of Medical Physics, American Board of Health Physics or the equivalent as determined by the Commission; and submit to the Department, with a copy to the student, a report of the consultation provided, if required, including any recommendation(s), assignment modifications and the student's exposure history, within 21 calendar days of the school's receipt of the radiation dosimetry report.

A declared pregnant student continuing in the program will be required to complete all program requirements (didactic courses and clinical education missed) as a result of any absence. Student disability and duration of excused absence must be determined by a physician and require written verification. If the situation warrants, the student may contract for an “I” or “X” under the provisions published in the RCBC catalog.

Additional information regarding federal guidelines for prenatal radiation exposure may be found at [www.nrc.gov/NRC/08/08-013.html](http://www.nrc.gov/NRC/08/08-013.html).

Revised – 12/01, 3/14

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13. 4/15, 4/16, 6/19, 5/23

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# General Policies and Procedures

## College Closing

Closure of the College or cancellation of classes will be made through Connect-Ed. Please keep your contacts up to date. Closures are also posted on the college web site: www.rcbc.edu.

If the College is closed for adverse weather or a national disaster, the student may not go to the clinical setting. If the College is not closed, students must make every safe attempt to arrive as scheduled. On subsequent mornings, if adverse conditions continue and the College is not closed, students are expected to depart earlier to compensate for the extended travel time.

If adverse weather conditions occur during the day and the College closes, the student must leave the clinical site. However, if the College is not closed the student will be encouraged to complete all scheduled educational experience.

Contact should be made with the clinical site, all traveling clinical preceptors, the Clinical Coordinator and the Program Director if the student is not attending and the College remains open.

Any clinical time lost due to adverse weather conditions when the College is not closed must be made up. *Please* s*ee Make-Up Policy*.

# Social Media Policy

Social Media is a term that describes Internet-based technology communication tools and refers to venues such as blogs, networking sites, photo sharing, video sharing, microblogging, and podcasts, as well as comments posted on these sites. RCBC’s Radiography Program respects the desire of students to use social media for personal expression. However, students’ use of social media can pose risks to patients’ confidential, proprietary and sensitive information, can harm affiliates’ reputation in the community, and can jeopardize RCBC’s compliance with business rules and laws, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and related laws and regulations protecting patients’ protected health information.

The purpose of this policy is to govern the use of social media as it relates to the student’s role at RCBC, and to set forth the guidelines for prohibited and permissible content when utilizing social media forums. This policy has been established in order to protect the privacy of all concerned.

This policy includes, but is not limited to, the following specific technologies or sites:

personal blogs, personal websites, forums or message boards, Facebook, YouTube, Twitter, Instagram, Pinterest, TikTok, LinkedIn, Google Plus+, Tumblr, Reddit, Flickr, Vine, Keek. etc. The absence of, or lack of explicit reference to, a specific site does not limit the extent of the application of this policy.

The National Council of State Board of Nursing has developed a Nurse’s Guide to the Use of Social Media with additional information, it can be found at <https://www.ncsbn.org/NCSBN_SocialMedia.pdf>.

The Radiography Program at RCBC has adopted the Nurse’s Guide to the Use of Social Media.

**HIPAA Policy**

Disclosure of Patient Information is prohibited. “Patient Information” is defined as any information relating to a patient or patient encounter, including, but not limited to patient records, patient images, videos, or recordings, personal patient information such as name, date of birth, address, or family names, conversations and interactions with patients, any information about a patient’s health condition, medications, admission/discharge, treatment, diagnosis, payment, or financial information, etc. Patient Information is confidential and may not be disclosed whether or not it includes personally identifiable information. It is prohibited to photograph, interview, videotape, record or publish information, statement or images of any patient.

Due to the potential for issues such as HIPAA breaches, invasion of privacy (patient, families or students) sexual or other harassment, confidential and proprietary information, videotaping, photographing, or recording (including via personal cell phones) is prohibited in any clinical institution where the student is assigned. No photographs should be taken in any area of a clinical institution as this can identify the student with that institution. ***Students cannot take cell phones into clinical settings under any circumstance.***

## Employment

The NJ Administrative Code, Title 7, DEPE, expressly forbids unlicensed students enrolled in a radiography program from using acquired clinical skills for financial gain prior to completion of the program. This includes the positioning, selection and setting of technical exposure factors and the actual production to ionizing radiation for the purpose of making a radiographic exposure on a living human being for pay during program off hours.

The program will report all suspected violations of this code to the New Jersey Department of Environmental Protection for investigation and possible legal action.

# Financial Aid

Refer to Rowan College at Burlington County’s web site, <https://www.rcbc.edu/financial-aid>

# Radiography Club

The objectives of this organization shall be to cultivate, promote, and sustain the art and science of radiology, to represent and safeguard the common interest of the members of the radiology profession, and to contribute toward the improvement of radiation awareness and medical pathological conditions of the public.

The organization functions within the RCBC Student Government Association (SGA) and has its own bylaws, representation at meetings, a budget and requirements to remain as an organization.

In addition to the objectives of the organization and the requirements to SGA, the students need to participate in community service projects and have the opportunity to raise funds. Funds are used to promote unity, attend competitions, and celebrations.

Revised – 5/12, 4/16, 6/19

Reviewed – 5/09, 4/10, 3/12, 3/13, 4/14, 4/16, 8/17, 6/18, 5/23

# Students’ Right to Privacy - FERPA

Refer to Rowan College at Burlington County’s web site <http://www.rcbc.edu/students-right-know>

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# Transportation to Clinical Agencies

Each student is responsible for providing his/her own transportation to and from the clinical sites and other health related facilities required and stated in the course syllabi. Furthermore, the student is also responsible for additional fees if applicable (i.e. parking, tolls, etc.).

# Trips/Seminars/Special Classes

The radiography program may request or grant permission for groups of students to attend activities outside the Radiography program. Permission is granted through the Director and coordinated with the instructors. All expenses and transportation for any activities are the responsibility of the individual student. Students are required to dress in business casual attire to any trips, seminars, or special classes in which they are participants.

# Tuition

Refer to Rowan College at Burlington County’s web site <https://www.rcbc.edu/tuition>. Each accepted student is given a list of the courses needed for the degree; as well as the tuition and fees for the degree at the time of the program’s post-admission advising.

# Refunds, Withdraws

Refer to Rowan College at Burlington County’s web site <https://www.rcbc.edu/student-accounts/policies>

# Leave of Absence Standard Practice

To meet the needs of the student for extenuating circumstances.

## Standard Practice

A student enrolled in the program, after completing the first semester, may take a leave and return a year later on a space available basis.

## Procedure

 1. Initiation of a Leave of Absence – may be made by the student or upon the

 recommendation of the Program Director.

 2. Reasons for Leave:

* personal
* health of one’s self
* health of a family member
* financial reasons
* academic – failure of a radiography or support course taken in sequence

 3. Completion of Form – student requests a form:

* form is filled out by the Program Director
* an advising session is arranged
* form is explained, reviewed by student and signed

## Reinstatement

* Leave is only for one year.
* Reinstatement is dependent on available space.
* Student must meet all health, background and drug screening.
* Student must take a test to assess the knowledge retained.
* Student must meet with the Clinical Coordinator to assess skills retained.
* Student is responsible for material mastered to and including the last full semester completed.
* Student must satisfy all current program requirements prior to graduation.

Revised – 5/02, 4/22

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 6/18, 6/19, 5/23

**Attendance**

# General Hours of Operation

The program week is Monday through Friday. Required student participation in didactic and clinical education may not exceed 40 (forty) hours per week and 8 (eight) hours per day. Regular clinical hours may be scheduled between 7:30 a.m. and 4:30 p.m. each day.

Students are provided individual printed schedules, that indicate the required didactic and clinical education hours. Schedule modifications are made at the discretion of the Clinical Coordinator and/or Program Director.

# Absence

Absence negatively impacts the educational process. Limits for classroom absence are identified in accordance with Rowan College at Burlington County Attendance Policy. See student handbook <http://www.rcbc.edu/publications>.

Students who will be absent from clinical must notify the faculty members of RCBC at least 1 hour prior to the start of their clinical day. Students are to follow the procedure below:

1. Contact the clinical site via telephone and obtain the person’s name.
2. Send ***ONE*** email to ***ALL*** of the following: Program Director, Clinical Coordinator, all traveling clinical preceptors and site clinical preceptors.

Students who do not follow the procedure will receive a ***zero*** for their clinical professionalism grade for each occurrence.

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# Clinical Attendance

Students **are required to attend** all clinical education and other designated program activities as scheduled. Any unreported absence of *three* consecutive clinical days will be regarded as the voluntary termination of the educational process.

The program utilizes a competency based clinical education system. Each student achieves clinical competence at a unique pace, therefore it is impossible to establish a minimum number of required hours for each student. However, as the student continues to gain clinical expertise after achieving competence no student is permitted to reduce his/her total clinical hours from those scheduled as to gain critical experience.

Upon arrival at the clinical site, students will access the Trajecsys system as per the site’s protocol. This tool is used to monitor clock in and clock out times. Students who do not report for didactic or clinical education as scheduled each day will be marked absent. The students will be given a schedule of their clinical days and if there are any absences it should be noted on that day.

All absences must be personally reported to the Program Director, Clinical Coordinator, all traveling clinical preceptors and clinical preceptors at the assigned clinical site prior to scheduled clinical hours stating the actual reason and duration of the absence. If length cannot be specified, students must call daily.

As per policy of the clinical site, students whoare ***not well*** are not permitted on site as they may pose a health risk to the patients.

An attending physician’s written verification indicating an actual **physical reason** and medical release for absence and restriction (including duration) must be presented to program authorities before a student is permitted to resume the educational process if the absence is for 3 or more consecutively days.

Any clinical time lost due to illness/injury must be made up. *Please see Make-Up Policy*.

# Tardiness

All tardiness must be reported to the Clinical Coordinator, Program Director, and traveling and site preceptors via email, stating the reason and duration of the lateness.A call must also be placed to the clinical site if a student anticipates arriving later than the five-minute grace period. A student arriving late for clinical education must physically report to a program official upon arrival. Three occurrences of lateness in a semester is abuse of the policy and will be subject to disciplinary actions. A lateness is considered a clock-in time of six minutes (6) after the student’s scheduled start time. For example, a student with a start time of 8:00 a.m. clocking in at 8:06 a.m. is considered to have arrived late at his/her clinical assignment. Any student arriving and clocking in 30+ minutes after his/her scheduled start time will be required to make up their entire 8.5-hour day.

Any clinical time lost due to lateness must be made up. *Please see Make-Up Policy*.

# Early Dismissal

Under extreme conditions students may ***request*** early dismissal. Students must receive permission from program authorities before departure. Any clinical time lost due to early dismissal must be made up. Any unapproved early departure from the clinical site will be considered as an absence. Students will be required to make up the entire 8.5 hours of clinical at the end of the semester during finals week. *See Make-Up Policy*.

# Make Up Time Policy

Any time missed due to an absence, lateness, or early dismissal, must be made up during final exam week. The time to be made up is equal to what was missed. Make up time must be scheduled with the Program Director and Clinical Coordinator. Clinical time may not be made up when the College is closed (i.e. holidays or weekends). Absence, tardiness, or early dismissal on three occasions per semester is considered excessive and may warrant disciplinary action. Every three (3) lateness, early dismissal or no clock-in equals one absence which the student will be required to make up during finals week at the end of the semester.

# Funerals

Students are permitted a maximum of 3 (three) consecutive clinical days when a death occurs in their immediate family (including: spouse, partner, child, parent, brother, sister, grandparent, parent-in-law, grandparent-in-law, or family member living in their household). Any clinical time missed due to a funeral does not have to be made up.

Funeral leave may be requested by contacting the Program Director for those who are not listed above. However, the day missed needs to be made up according to the make-up policy.

# Military

Federal law prohibits reservists from making up time missed to fulfill their obligation to the Federal Government.

# Intercession

Intercession falls between the end of one academic semester and the beginning of the subsequent academic semester (approximately 7 weeks per year). No didactic education is scheduled during intercessions. Students are not permitted on site during non-scheduled hours or if the College is closed.

# Parking Clinical Sites

* Southern Ocean Medical Center

Students are to park in the employee parking lot.

* Virtua: Marlton

Students are to park in the back of the hospital parking lot

* Virtua: Memorial

Students are to park their vehicles in the “Satellite Parking Lot”. This lot is located on Ridge Avenue about 4 blocks from Madison Avenue. Parking in the visitor’s lot and street parking is prohibited.

* Virtua Our Lady of Lourdes Hospital

Students are to park in the employee parking lot.

* Virtua: Voorhees

Students are to park in the designated employee parking lot by the heliport.

* Virtua Willingboro Hospital

 Students are to park in the employee parking lot.

Revised 5/05, 4/15, 4/16, 4/22

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/16, 6/19, 5/23

# Dress Code

To promote professionalism and a mark of excellence, students are required to wear a neatly dressed uniform. When reporting to lab at the college and clinical at the affiliating hospitals, students must be in complete uniform. The following code has been adopted from the standard practices at RCBC and the clinical affiliates for the safety of the patients, staff, and student.

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## Acceptable

* Appropriate blue scrub top and pants (set) neat in appearance-no tears or ragged hems, ironed, pants not worn below waist. All uniforms must be of reasonable fit to enable the wearer to perform his/her duties and maintain a professional appearance.
* Appropriate blue scrub jacket.
* White leather or leather-like sneakers or white nursing shoes (a logo no larger than a quarter is permissible in blue or black). Shoes must be impervious to fluids.
* White nursing hose or socks.
* A long sleeved, plain white crew neck tee shirt or turtleneck may be worn under the scrub top.
* Students must be clearly identifiable as RCBC Radiography students with name pin and embroidery denoting the radiography program as well as the status of a student. Older uniforms may have the Rowan College at Burlington County patch covering the embroidery of the previous college name (Burlington County College).
* Student identification badge.
* Appropriate radiation monitoring device.
* Positioning/annotation markers.
* Two post or stud piercing per earlobe.
* Ear stretching - plugs/gauges must be of a natural skin color (can also be white or black) and cannot be open.
* A pen and a watch appropriate to monitor a pulse rate.
* Long hair must be pulled back, off the collar and tied in a clip or clasp and placed in a bun to avoid injury (no pony tails or loose braids).
* Fingernails should be short and clean (no longer than ¼” above the tip of the finger) for sanitary and safety reasons.
* Hair is to be of a natural color. The only natural colors that are permitted (black, brown, blonde, etc.)
* No Beards (for proper N-95 fitting), a neat mustache is okay.

## Unacceptable

* No eating, drinking, or gum chewing in the clinical areas.
* Pants that are too long must be hemmed and not folded up or cuffed.
* Pants that are too short.
* Long-john shirts or shirts with any design or stripes.
* Open toed shoes, sandals, boots, high heels, clogs, slip-ons, or Croc’s.
* Mesh sneakers.
* Sweatshirts or hoodies.
* Any false fingernails (acrylic, wraps, etc.) and nail polish.
* Body piercings are prohibited (MRI safety).
	+ Facial jewelry including
		- tongue rings,
		- nose rings,
		- lip rings,
		- bars, etc. must be removed.
	+ Unless cultural or religious to the student.
* Excessive jewelry.
	+ No more than one necklace (short)
	+ One ring per hand (can wear wedding set)
* Oversized hair accessories (large bows/flowers, headbands wider than 2”).
* All visible tattoos (must be covered).
* Electronic Devices
	+ mobile/cellular phones
	+ personal pagers
	+ portable music devices
	+ laptops
	+ I-pad and tablet devices
	+ smart watch devices
	+ vape pens

**NOTE**: The student’s appearance must remain within the standards of the clinical site dress code. The instructor and/or clinical affiliate has the right to remove the student from the clinical setting if he/she is not in compliance with this dress code.

Revised – 5/04, 5/06, 5/12, 10/13, 04/14, 4/16, 6/18, 6/19, 4/22, 5/23

Reviewed – 5/09, 4/15, 4/16, 6/19

# Due Process - Standard Practice

This policy is designed to outline, for the student, the due process for which any of his/her complaints, misgivings, or grievances can be handled and given prompt consideration until resolved.

The student has the right to appeal decisions through the Student Dispute Resolution provision as documented in the RCBC Catalogue and below. The program follows the same procedure as specified for handling disputes regarding a possible violation of *Section 504 of the Rehabilitation Act (Administrative Procedure 904a).* See Student Handbook <http://www.rcbc.edu/publications>

Recommendations for the dismissal of a student, can be made for any serious reason:

* health problems which interfere with attainment of program goals and which cannot be resolved;
* behavior which is contrary to the ethical code of the Radiography profession;
* misuse of privileges extended by the clinical education site.

A student who has been dismissed from the Radiography Program is not eligible for re-admission in the future to the Radiography Program.

# Early Release - Standard Practice

The Radiography Program does not have an early release procedure. The completion of the program is graduation.

Revised – 5/08, 5/11

Reviewed – 5/09, 4/10, 4/12, 3/13, 4/14, 5/15, 4/16, 6/18, 6/19, 5/23

# Student Advising: Standard Practice

The purpose of advising is to communicate the expectations of the program and the progression of the students. Advising occurs at several points along the student’s progress.

* **Information Seminar** – These seminars are scheduled several times throughout the year. There is a PowerPoint presentation by the Program Director.
* **Acceptance Advising** – In the Spring semester prior to the start of the program the 17 students that have met the criteria and are conditionally accepted will be advised as to the requirements of the program. An AAS course plan will be completed as well. (see Admission Advising Form & AAS course plan).
* **Orientation –** The 17 students accepted into the program will attend an orientation prior to the start of the program. The objectives of this meeting are to have the students meet the other members of their cohort, review the handbook and the policies they will need to know for the start of the program, review assignments they will need to complete and register for classes. Second year students may also be in attendance to answer any questions from a student’s perspective.
* **Semester Conferencing** – Students enrolled in the program are advised on a regularly scheduled basis. Depending on the semester, advice will be given on the future endeavors of the student. Advising sessions are scheduled during the:
	+ **Middle of Semester** – to review the grades from the previous semester and current semester, discuss the competencies that need to be completed for the semester and to review the program staff evaluations and adjunct observations.
	+ **End of Semester** – to review the academic progress of the student, review the clinical progress of the student and affective behaviors from the reviews of the staff in the clinical education setting. Strengths and weaknesses are communicated to the students so suggestions can be implemented in a timely fashion.

Student advising shall be conducted to provide positive reinforcement in any area where the student has shown exceptional initiative. The Program Director, Clinical Coordinator, Clinical preceptors and/or other authorities shall provide and document all students advising through the Trajecsys system. Student advising should also be provided in the event of problems or concerns in the following areas:

 1. didactic education

 2. clinical education

 3. published policies

 4. professional ethics

 5. discipline

 6. personal

Revised – 4/15, 6/18

Reviewed – 5/09, 4/16, 6/19, 5/23

# Student Health

## Accident

Any student injured at the clinical site must immediately report the occurrence to program authorities and site clinical preceptors. An Incident/Occurrence Report must be completed in accordance with the clinical site’s policy. Failure to complete an Incident Report at the time of the injury may jeopardize the student's rights. A copy of the report must be placed in the student’s clinical file.

The student may opt to go to the Emergency Room, his/her personal physician for treatment, or waive treatment. All expenses incurred are the responsibility of the student. The student is responsible for the completion of all didactic and/or clinical assignments missed as a result.

## Illness on duty

Any student who becomes ill while on duty must report to program authorities and site clinical preceptors to request permission for early departure. Program authorities or a clinical preceptor must ask the student if they need transportation or if he/she can transport him/herself. Transportation will be arranged if needed.

The student may opt to go to the Emergency Room, his/her personal physician for treatment, or waive treatment. All expenses incurred are the responsibility of the student. The student is responsible for the completion of all didactic and/or clinical assignments missed as a result.

## Infectious Disease Control

Students or faculty who contract any communicable disease must notify the Program Director immediately. These persons are to be excluded from classes, labs and clinical activities for the period that their condition may endanger the health of others. This may interrupt the course of study and depending on the length of absence, students may be required to take a medical leave or withdraw from the program. A return to clinical form must be completed by the physician and will be required for the resumption of class, lab and clinical experiences. Because each case and surrounding circumstance is different, each will be evaluated on an individual basis.

Communicable disease is defined as an illness due to an infectious agent or its toxic products, which is transmitted directly or indirectly to a person from an infected person or animal through the agency of an intermediate animal, host or vector, or through the inanimate environment. Communicable disease shall include, but not be limited to:

* AIDS Influenza
* Chickenpox Measles
* Conjunctivitis Meningitis
* Coronavirus Positive HIV antibody status
* Hepatitis A, B, and D Tuberculosis
* Infectious Mononucleosis Whooping Cough

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# Periodic Physicals

At any time, program officials may request a student be evaluated during the educational process if it is believed the student is not physically able to perform essential clinical education functions. This expense is also the responsibility of the student.

## Accidental needle stick/mucous membrane exposure

Any student experiencing accidental exposure to blood, body tissues or body fluids, will be evaluated for testing and possible treatment against Hepatitis B and Human Immunodeficiency Virus. The student is required to report the occurrence to the Program Director or designee and complete a Needle Stick/Mucous Membrane Occurrence Report. A copy of the report will be placed in the student’s clinical file. Evaluation will be done by the Occupational Health Department and/or Emergency Department. Follow-up care will be determined on a case-by-case basis.

All expenses incurred are the responsibility of the student. The student is responsible for the completion of all didactic and/or clinical assignments missed as a result.

# Influenza Immunization

The purpose of this policy is to provide protection to students by minimizing transmission of the influenza virus in the clinical setting to fellow students, colleagues, patients and members of the community which we serve.

Annual influenza vaccination has been found to be both safe and effective in reducing the risk of influenza and health-care related transmission. The Centers for Disease Control and Prevention (CDC) recommends vaccination of all workers in health care settings. This policy is intended to maximize the protection offered to our students and patients.

POLICY:

All radiology students attending clinical education must obtain the influenza vaccine annually. Students are required to obtain the vaccination by October 31st of each calendar year. The vaccine can be obtained through:

* the student’s current clinical site (if provided),
* the student’s physician,
* other health care facility,
* other vaccination service available in the community.

Documentation of the vaccination includes a receipt listing the influenza vaccine information, lot number, and date of administration. Documentation must be submitted to the program’s repository.

Compliance Monitoring

* The Program Director will have proof that the students received the influenza vaccine. Under our affiliation agreement with the clinical sites, the program will maintain records and monitor compliance for the students. The Program Director will release a copy of said documents to the clinical site upon request.
* Students not in compliance by October 31st will not be able to attend clinical until documentation is received.

Definitions

* Student – For the purpose of this policy only, a student is any person enrolled in the Radiography Program at Rowan College at Burlington County.
* Influenza (flu) – A mild to severe contagious illness caused by viruses that infect the respiratory tract.
* Influenza vaccine – A preparation of influenza antigens (killed virus), which stimulate the production of specific antibodies when introduced to the body. These antibodies provide protection against influenza virus infection.

References:

* Mortality and Morbidity Weekly Report (MMWR), Recommendations and Reports, February 24, 2006/55(RR02): 1-16, Influenza Vaccination of Health Care Personnel
* Centers for Disease Control Guidelines for Prevention and Control of Influenza, Mortality and Morbidity Weekly Report (MMWR). 2011:50(RR04): 1-46,
* The Hospital and Health System Association Pennsylvania. Universal Flu Immunization Programs for Health Care Personnel. 2010:1-78.
* The Joint Commission (2012) Comprehensive Accreditation Manual for Hospitals: The Official Handbook, Joint Commission on Accreditation of Healthcare Organizations.

Created 1/13

Reviewed: 4/14, 10/14, 4/15, 4/16, 6/18, 6/19, 4/22, 5/23

# Smoking

Students must observe the hospital smoking policy as well as RCBC smoking policy.

RCBC smoking policy can be found on the student handbook <http://www.rcbc.edu/publications>

Smoking on College property by any person at any time anywhere is strictly prohibited. College property includes all College vehicles as well as real estate owned by the College.

The effect of this Policy is to prohibit smoking not only in all buildings but also on all areas of College property. This means that smoking any tobacco product (includes vaping) is prohibited on the grounds, playing fields, walkways, roadways, parking lots, in and around the perimeter of any building.

**Sanctions against violators**

Any employee who violates this policy shall be subject to appropriate disciplinary action. Any student who violates the Policy shall be subject to disciplinary measures in accordance with the provisions of the Student Code of Conduct. Other individuals, including visitors to the College, who violate this policy, may be asked to leave the College property. All violators are also subject to sanctions provided by applicable laws and regulations.

ROWAN COLLEGE AT BURLINGTON COUNTY

BOARD POLICY

TITLE: Smoking Prohibition on College Premises

NUMBER: 604

EFFECTIVE: April 18, 2007

SUPERSEDES: March 21, 2001

Revised – 3/14, 5/23

## Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 6/19, 4/22

# Sexual Harassment

**At the college**

It is the policy of this program that no member of the college community may sexually harass another. If you believe you are the victim of sexual harassment, a procedure for handling complains is available from the Sexual Harassment Office in the Public Safety Office. The Sexual Harassment Officer will discuss this matter with you further and advise you on how to handle your complaint.

The Board policy on sexual harassment is published in the RCBC Student Handbook <http://www.rcbc.edu/publications>

**At the clinical site**

If you believe you are the victim of sexual harassment in the clinical education site, go directly to the Administrator of the radiology department. The Administrator will direct you to speak with the Sexual Harassment Officer in that clinical education site.

Revised – 11/09

Reviewed – 5/09, 4/11, 4/12, 3/13, 4/14, 4/15, 6/19, 4/22, 5/23

## Contaminated Uniforms

In accordance with OSHA's Blood borne Pathogen Standard, students whose uniforms become contaminated will be loaned a scrub suit. The contaminated uniform will be taken home and laundered. Students failing to return the scrub set will be charged for the cost of a replacement.

# Prohibited Conduct

# Substance Abuse

Rowan College at Burlington County is committed to providing its employees, students and guests with an environment that is conducive to the achievement of work and academic goals. Moreover, the College is required to comply with the Drug Free Workplace Act of 1988, 41 U.S.C., Section 701, et.eq and the Drug-Free Schools and Communities Act Amendments of 1989, Public Law 101-226-34 CFR Pare 86, as well as other related substance abuse laws. Therefore, the College has adopted the following policy regarding the use of drugs and alcohol by College students and employees and other individuals on the College campuses, in College facilities and in College vehicles.

**Use of Alcohol**

It is also strictly forbidden for any individual to be under the influence of alcoholic beverages while engaged in College-related activities, or while on the College campuses, in College facilities, in College vehicles or when present at any of our clinical affiliates.

**Use of Drugs**

The manufacture, use, possession, sale, distribution, or being under the influence of illegal narcotics, chemicals, psychedelic drugs or other controlled substances by an individual engaged in College related activities or while on the College campuses, in College facilities, and in College vehicles is strictly forbidden. Similarly, the unprescribed, illegal or abusive use of prescription or over the counter drugs or narcotics is strictly forbidden.

**Sanctions**

Persons violating this policy will be subject to all applicable civil and criminal penalties. Violations of local ordinances or of state or federal laws regarding alcohol or controlled dangerous substances by members of the College community, if they are of a serious nature, may entail College disciplinary action regardless of where such violations occur. When appropriate, the College will apply progressive discipline and depending on the particular circumstances, continued association with the College by violators of this policy may be made contingent upon satisfactory participation in an alcohol or drug abuse assistance or rehabilitation program.

In addition to the above sanctions, violators of this policy may also be subject to forfeiture of public employment under the State Forfeiture of Public Office Stature (N.J.S.A. 2c:51-2) and/or loss of grant or other financial aid. For more information regarding state, local or federal regulations and applicable sanctions, contact the Human Resources Department or the Office of the Vice President of Student Services.

# Education

The College shall provide an awareness program to educate students, faculty, and staff to the dangers of drug and alcohol abuse and to enable administrators, supervisors, and faculty to identify persons who may need assistance and refer them for evaluation and treatment.

Revised – 11/09

Reviewed – 4/10, 4/11, 4/12, 3/13, 4/14, 5/15, 4/16, 6/19, 4/22

# Student Health: Return to Clinical

**Purpose:** To ensure the health of the student when he/she has been out of the clinical setting due to illness or injury. If a student becomes physically or mentally ill while in the program, a note from an appropriate health care provider is required stating that the student can safely return to his or her duties.

**Reasoning:**

* To ensure that if the patient under the student’s care needs to be lifted or to protect him/her from a fall that the **patient** does not become injured by the student having limitation.
* To ensure that if the patient under the student’s care needs to be lifted or to protect him/her from a fall that the **student** does not become injured by the student extending their limitation.
* To educate the student’s **physician** as to the physical expectations of the student engaging in clinical activity does not **jeopardize the healing process**.

**When the student:**

* presents with any type of limiting device on his/her body (braces, wraps, etc.)
* has had surgery/procedure of any kind.

**Procedure:**

1. When returning after an illness (i.e. cold, flu, infection, etc) present a return to school/clinical note/prescription from your physician or provider to the Program Director.
2. When returning after an injury or procedure/surgery – present a Technical Requirements Form signed by the physician or health care provider to the Program Director.

*All clinical time missed from an illness, injury, or procedure must be made up during finals week at the end of the semester****.***

Revised – 4/15

Reviewed – 4/10, 4/11, 4/12, 3/13, 4/14, 4/16, 6/18, 6/19, 4/22, 5/23

# Resources & Records

Various resources are available for students in the RCBC radiology lab.

Below is a listing:

**Sectional body phantoms -** Available phantom body parts are:

1. pelvis (transparent)
2. knee (transparent)

3. elbow (transparent)

4. disarticulated skeletons

5. articulated skeletons

6. patient care materials

Phantom body parts are kept in the RCBC Radiography Lab. Phantom parts borrowed must be signed in/out with program authorities and logged on the sheet located in the lab. The borrower will be held financially responsible for any phantom part damaged or lost.

## Radiograph Teaching File

A variety of teaching file radiographs may be borrowed with permission of program authorities. A teaching file is maintained in the laboratory at HSC 229. Radiographs to be used within the confines of the program lab/classroom need not be signed out. Individuals wishing to remove the radiographs from the confines of the classroom for any reason must submit a written request no later than three working days before the required date. The borrower must sign a “Radiograph Release Form” upon pick up. To maintain patient confidentiality, all patient identification must be removed before the radiographs can be signed-out. Borrowed radiographs must be returned within one week of the date on which they were signed-out. Upon return, all radiographs must be signed-in with program authorities.

## Audiovisual materials

The program has a considerable variety of videotapes and DVDs. These materials are available for use by instructors and students and are maintained in the radiology lab at RCBC. Students are permitted to use these materials within the confines of the lab/classroom.

## Computer Software

The program has a variety of computer software for the use of the student. These materials are available for use by instructors and students and are maintained within the lab.

## Library

College

The program maintains a collection of print material, which contains a variety of up-to-date books, periodicals, reference material, and research subscriptions pertinent to the study of radiography. Books borrowed must be signed in and out in accordance with RCBC library policies. The borrower will be held financially responsible for any book damaged or lost.

Hospital

Some clinical education settings maintain a Health Science Library. See individual clinical sites for days and times.

Revised – 5/09, 5/15, 5/23

Reviewed – 5/09, 4/11, 4/12, 3/13, 4/14, 4/1, 6/18, 6/19, 4/22

# Student Records

**Non-Permanent Records**

Files maintained on current students may contain the following:

1. radiography course grades
2. student conference forms
3. clinical lab evaluation forms
4. clinical competency evaluations
5. spot check forms
6. staff evaluation forms
7. program staff evaluation forms
8. correspondence
9. physician's written verification of illness
10. occurrence reports
11. student counseling documentation
12. formal warning notices & associated documentation
13. letter(s) of reference generated by the program
14. pre-admission records
* applicant advising session form
* AAS advising form
* technical requirement documents
1. change of vital information form

These records will be maintained for a period of two (2) years following a student's departure from the program.

**Permanent Records**

The following records will be permanently maintained:

 1. course grades (online)

 2. final radiation dosimetry report

 3. all data pertinent to student completion of clinical competency

 4. all data pertinent to student dismissal

 5. all data pertinent to legal cases between the student and the program

 6. letters of recommendation

7. information associated with application to ARRT credentialing and State of

 New Jersey licensing.

**Access to Records**

The following persons are authorized to access student records:

 1. Program Director

 2. Dean of Health Science Division

 3. Accrediting organizations (JRCERT, State of NJ– DEP, Middle States)

 4. Court officials (the program will attempt to notify the student before complying with a court order)

***Prior consent is not required for disclosure of educational records to the parties listed above.***

 I. Maintenance and Access of Records

 A. RECORDS: are identified above

 B. LOCATION: student records are secured in a location at the college.

 C. PROCEDURE: all requests for access of records must be submitted in writing to program authorities. Files covered by the act will be made available within 45 days of the request. Under normal circumstances, arrangements will be made for the student to read his/her records in the presence of a program authority in program facilities. Students may have copies of their records at their own expense at prevailing rates charged by the program.

II. Disclosure limitations and exclusions

 A. State of New Jersey: the program will release to the Department of Environmental Protection and Energy, Bureau of Radiation Protection the following information:

 1. student name

 2. address

 3. phone number

 4. social security number

 5. entrance date

 6. exit date

 B. PRIOR CONSENT NOT REQUIRED: for disclosure of educational records to parties as identified above

 C. PRIOR CONSENT REQUIRED: the program will not release or allow access to any personally identifiable records without prior consent of the student. Unless the disclosure is to the student him/herself. A written consent form is signed and dated by the student which specifies the records to be disclosed, recipient is identified and purpose of the disclosure must be submitted to program offices. Upon request, a copy of the disclosed record will be provided to the student at his/her own expense. The program will maintain each request for disclosure with the permanent record, except:

 1. disclosure to the student

 2. disclosure permitted by student's written consent

 3. disclosure to program authorities

 4. disclosure to the State of New Jersey (see III: A)

III. Correction of educational records

 A. REQUEST TO AMEND: a student who believes information contained in his/her records is inaccurate, misleading or a violation of privacy or other rights, may submit a written request to the Program Director specifying the documents challenged and the basis of the complaint. A copy of the request will be forwarded to the person originating the record in question. The student should follow the due process policy.

IV. Release of information

 A. GENERAL: The following information will be released, without student permission in response to an inquiry.

 1. student's current enrollment status

 2. dates of attendance

 3. certificate of completion earned

 4. honors received

 B. GOVERNMENTAL: Investigators appearing in person and presenting proof of identity will be assisted by a designated program official for purposes of explanation and evaluation of educational records.

 1. formal request to view records must be presented

 2. requests received via U.S. mail from government agents will be completed as identified in II-A.

Revised: 1/98, 4/03, 5/09, 1/10, 2/11, 2/12, 5/23

Reviewed –3/13, 4/14, 4/15, 4/16, 6/19, 4/22

# Transfer Students

**Transfer Students to Program:**

Due to the uniqueness of each radiography program it is difficult to accept credits from other institutions. For this reason, any Radiography Courses from other institutions will not be accepted.

**Transfer to Other Programs:**

Every effort has been made to design a curriculum that consists of courses that are required in most other college based A.A.S. Radiography programs. Understanding the uniqueness of each radiography program, other programs may not accept credits earned in this curriculum and may necessitate repeating courses.

**Transfer to Other Institutions:**

Every effort has been made to design a curriculum that has transferability to a four-year institution. Please refer to the College Catalog, for feasibility of transferring earned credits to a Bachelor’s degree.

# Transfers

Refer to RCBC’s website <https://www.rcbc.edu/registration> for the transfer of support courses.

Revised –1/01, 4/22

Reviewed – 5/09, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 6/18, 6/19, 5/23

# NJ Administrative Code

All violations will be reported by program authorities to the Department of Environmental Protection (DEP) for legal action.

**7:28-19.12 Requirements for students engaging in the scope of practice of radiologic technology**

1. Only students who meet the requirements of N.J.A.C. 7:28-19.1(c) 4 are permitted to engage in the practice of radiologic technology.

(b) Any licensed practitioner, registered dental hygienist, or licensed radiologic technologist, who is acting within the scope of that license or registration, shall provide direct or indirect supervision to student technologists that include:

1. The evaluation of the request for the radiological examination in relation to the student's knowledge and competency;
2. The evaluation of the condition of the patient in relation to the student's knowledge and competency; and
3. The evaluation and approval of all resultant radiological images and/or data.

(c) The school of radiologic technology and the clinical education center shall:

1. For students in schools of diagnostic radiologic technology, ensure that students are supervised in accordance with the following:

i. Prior to a Board-approved faculty member determining that a student is clinically competent in a given radiographic procedure, the student shall perform that procedure only under the direct supervision of a licensed diagnostic radiologic technologist.

ii. After clinical competency in a radiographic procedure has been determined by a Board-approved faculty member, the student may perform that procedure under indirect supervision of a licensed diagnostic radiologic technologist.

iii. Any exposure that needs to be repeated shall be repeated under the direct supervision of a licensed diagnostic radiologic technologist.

2. For students in schools of radiation therapy technology, ensure that all therapy simulation and therapeutic procedures are performed under direct supervision of a licensed radiation therapist.

3. For students in schools of chest, orthopedic, podiatric, and urologic radiologic technology, ensure that all radiographic procedures are performed under direct supervision of a licensed practitioner, a licensed diagnostic radiologic technologist, or a person licensed in that specific category of radiologic technology.

4. For students in schools of dental radiologic technology, ensure that all procedures are performed under direct supervision of a licensed dentist, registered dental hygienist, a licensed diagnostic radiologic technologist, or a licensed dental radiologic technologist.

5. Ensure that students in schools of diagnostic radiologic technology do not initiate x-ray exposure during fluoroscopic procedures.

6. Ensure that students are not assigned to clinical education rotations in such a manner as to substitute for radiologic technologists.

7. Ensure that during clinical education activities the number of students assigned to a clinical education center and on site at any time does not exceed the Board-approved student capacity for that clinical education center.

8. Ensure that during clinical education activities students wear visible identification name badges that identify them as student radiologic technologists.

9. Ensure that during clinical education activities each student wears a personnel radiation-monitoring device.

10. Ensure that all activities involving clinical education are performed in accordance with the school's published policies and procedures, and the agreement between the school of radiologic technology and the clinical education center.

11. Ensure that students are not:

i. In the primary beam;

ii. Permitted to remain in the x-ray room outside the control booth during an x-ray exposure unless the student is provided with a protective apron or shield that is at least 0.5 mm of lead equivalent; or

 iii. Permitted to engage in any other practices likely to result in unnecessary exposure to ionizing radiation.

Revised – 5/08

Reviewed – 5/09, 4/15, 6/18, 6/19, 4/22, 5/23

# Committees

The following committees have been formed to assist the Program Director in the management of the program.

## Radiography Advisory Committee

Members:

Program Medical Advisory; Chair
Program Director

Clinical Coordinator
Clinical Preceptor(s); all clinical sites
Lead Technologist, Diagnostic Radiology; all clinical sites

Radiology Managers; all clinical sites

College Administration Representative(s); RCBC
Dean of Health Science Division; RCBC

Associate Dean of Health Science Division; RCBC
Student Development Specialist; RCBC

Assessment Coordinator; RCBC
Outside Employment Representative(s)
Community Representative(s)
Student Representative(s)

This committee will meet in April and October each year to:

1. promote public relations within the medical, allied health and general communities.

2. review and recommend updates in program structure.

3. study radiography manpower needs.

4. monitor program self-evaluation process.

5. review program evaluations performed by outside accrediting agencies.

6. recommend changes for research and implementation.

## Voting Procedures

Program committee decision will be made by a simple majority of the members present.

* Voting may be open or by secret ballot as determined by the committee chair.
* All members of the committee have equal voice and are entitled to vote on an issue.
* In the event that a committee member has a personal interest in an issue, he/she must abstain from voting.

# Radiography Faculty Committee

Members:

* Program Director
* Clinical Coordinator
* Clinical Preceptors
* Didactic Faculty

This committee will meet prior to the start of each semester:

 1. determine standards required for admission;
 2. review applicants’ qualifications;
 3. review the didactic and clinical standing of each student;
 4. review disciplinary actions taken by program authorities;
 5. evaluate individual educational problems and determine appropriate course of action;
 6. accept applications and determine recipient(s) of available scholarships;
 7. review the progress of all scholarship recipients;
 8. review prospective graduate records for the purpose of bestowing graduation awards;
 9. convene hearings for students challenging the contents of their educational records;
10. implement changes proposed by the Advisory Committees;

 11. determine the need for changes in the curriculum or textbooks;

 12. execute the evaluation plan of the program.

## Voting

* Program Committee decision will be made by a simple majority of the members present.
* Voting may be open or by secret ballot as determined by the committee chair.
* All members of a committee have equal voice and are entitled to vote on an issue.
	+ In the event that a committee member has a personal interest in an issue, he/she must abstain from voting.

# Health Science Division Meeting

This meeting is held once a month and is attended by representatives from the Nursing, Health Information Management, Diagnostic Medical Sonography, Dental Hygiene, Paramedic Science, and Radiography programs.

Revised

Reviewed – 5/09, 4/10, 4/11, 4/12, 3/13, 4/14, 4/15, 4/16, 6/18, 6/19, 4/22, 5/23

# Membership, Licensure, Registration, Certification

# Accreditation Standards

New Jersey Radiologic Technology Board of Examiners accreditation standards for Schools of diagnostic radiologic technology

This document contains the Board’s accreditation standards for schools of diagnostic radiologic technology which must be fulfilled to receive and maintain Board approval. This document also provides guidance on activities that require Board approval and activities that must meet the Joint Review Committee on Education in Radiologic Technology (JRCERT) standards.

**New Jersey Society of Radiologic Technologists- Student Membership**

The purpose of the student membership in the New Jersey Society of Radiologic Technologists (NJSRT) is to assist in the professional development of students. Student membership is offered at a reduced rate for the duration of the educational process and entitles the student to participate in professional activities at a reduced rate, attend continuing education lectures and enables the student to participate in the Annual Student Competition. Students are requested to join the NJSRT and attend the annual meeting.

# New Jersey State Licensure

Radiologic Technologist licensure is regulated by the New Jersey Department of Environmental Protection. Each applicant for a diagnostic x-ray technologist, RT(R) license shall have satisfactorily completed a 24-month of study in radiography approved by the Radiologic Technology Board of Examiners (Board) or its equivalent as determined by the Board.

Applications are available through the Director and online. Submission of the appropriate form, letter of completion of the program from the Program Director, copy of the ARRT results, and the associated fee are to be sent to the State of New Jersey and is the responsibility of the student. Submission of the information can only be done after receipt of the grades from the ARRT. A license will be mailed to you. You must possess the license in order to work as a registered technologist in the state of New Jersey.

If the student fails to meet all program graduation requirements as of the anticipated completion date, the program has the duty to inform the NJ DEP that the student is ineligible for licensure until all program requirements have been achieved.

##

## American Registry of Radiologic Technologist Certification Examination

The ARRT establishes qualifications for certification and for registration in radiography. It evaluates applicants for certification and registration using those qualifications and certifies and registers individuals meeting these qualifications:

a. be a graduate of an approved educational program or demonstrate professional preparation equivalent to that of a graduate of an approved educational program.

b. be a person of good moral character and must not have engaged in conduct that is inconsistent with the ARRT rules of ethics.

1. pass all required and elective radiographic competencies per the ARRT standards
2. agree to comply with the ARRT Rules and Regulations and the ARRT Standards of Ethics

The ARRT Board of Trustees shall have the right to reject the application of any person for certification as the Board determines in its sole and absolute discretion that the person does not meet the qualifications for certification. The ARRT examination is a computer-based test. Digital application booklets are available on the ARRT website. Submission of the application and associated fee to the ARRT is the responsibility of the student. If the student fails to meet all program graduation requirements, the program has the duty to inform the ARRT that the student is ineligible for certificate until all program requirements have been achieved.

**Forms****Rowan College at Burlington County**

**Radiography Program**

**Leave of Absence Policy Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_interrupt my formal education process by requesting a Leave of Absence.

The reason for this request is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I am fully aware that:

1. a leave of absence may not exceed 1 (one) year;
2. re-entry is on a space-available basis;
3. only full semesters will be counted toward program completion;
4. upon re-entry, I must satisfy all current program requirements prior to graduation;
5. upon re-entry, I must undergo continual clinical competency to determine my level of clinical skills.
6. upon re-entry, I must undergo a didactic evaluation to determine the level of my academic skills.
7. upon re-entry, I must undergo a drug screening, background check, physical exam, etc.

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

 Signature Date

*For department use only:*

A leave of absence has been granted with the following conditions:

Anticipated return: \_\_\_\_\_\_\_\_\_\_\_\_

Conditions:

.

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

 Radiography Director Date

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

 Witness Date

I agree to comply with the stipulations set herein. Should I violate the terms of this agreement, I understand I will be terminated from the program.

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

 Student Signature Date

Revised – 5/08, 6/19, 5/23

Reviewed – 5/09, 4/15, 4/16, 7/17, 4/22

**Rowan College at Burlington County**

**Radiography Program**

**Change in Demographics Form**

Anytime a student has a change in demographics, the student must notify the Radiography Director and Registrar in writing.

**\*\* Please complete the information below for submission within 5 days of occurrence**\*\*

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

Student ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Change effective: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for change: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

------------------------------------------------------------------------------------------------------------

New name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New next of kin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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For internal use only

Form received: Filed: \_\_\_\_\_\_\_\_\_\_\_\_

Revised - 4/15, 5/18

Reviewed - 5/09, 4/16, 8/17, 6/19, 4/22, 5/23

**Rowan College at Burlington County**

**Radiography Department**

**Radiation Safety**

**Student Radiation Incident Report Form**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CLASS OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF INCIDENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TIME OF INCIDENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification:

\_\_\_\_ lost monitoring device

\_\_\_\_ monitoring device exposure

\_\_\_\_ damaged monitoring device

\_\_\_\_ other

Description of incident:

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

Date of Report Signature of Preparer

***Submit completed report to program authorities for forwarding***

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

RADIATION SAFETY COMMITTEE COMMENTS:

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

Signature Date

**Rowan College at Burlington County**

**Radiography Program**

**Technical Requirements**

**Return from illness or injury**

Upon a student’s return to the clinical setting from an illness, injury, surgery, etc., the Program must be assured that the student will not cause injury to him/herself, a patient or a peer. For that reason, the student is required to have his/her healthcare provider be aware of the technical requirements and acknowledge the student’s ability to meet these requirements. The following list reflects entry-level requirements. If there are any restrictions of these abilities, the student may not return until all restrictions are lifted.

Radiology is considered medium strength work requiring the lifting of 50 lbs. maximum with frequent lifting and/or carrying objects weighing up to 25 lbs.

In a working environment, the student radiographer can experience:

**Constant Exposure -** defined as representing not less than 67% of clinical hours to infectious diseases

**Frequent Exposure** - defined as representing 34% - 66% of clinical hours.

**Occasional Exposure** - defined as representing 1% - 33% of clinical hours

**Physical Factors**:

standing

walking

using of controls

carrying - max. 25 lbs. for 50 feet

stooping/bending

twisting/turning

reaching - above, below and at shoulder level

simple grasping, both hands (e.g. picking up pen/pencil)

firm grasping, both hands (e.g. moving boxes)

fine manipulation, both hands (e.g. processing image receptors)

writing, one hand

keying/typing, both hands

**Sensory Factors**:

feeling/touching

talking

hearing (with/without aids)

near vision, reading 20’ or less (with/without aids)

far vision, 20’

depth perception (with/without aids)

color perception (e.g. change in patient’s skin tone)

**Frequent Exposure continued**

**Environmental Conditions**:

moving mechanical parts

radiation

toxic/caustic chemicals

latex or non-latex products (i.e. gloves)

**Physical Factors**:

sitting

pushing force, max. 300 lbs. for 150 yds. with assistance using both hands (e.g. carts, wheel chairs)

 pulling force, max. 200 lbs. for 50 yds. with assistance using both hands (e.g. beds)

 lifting

* from floor, max. 50 lbs.
* from table, max. 50 lbs.

 kneeling

 crouching/squatting

 neck motions

* static
* flexion
* extension
* rotation

**Environmental Factors**:

noise

fumes/odors (e.g. cleaning chemicals)

**Infrequent Exposure** - defined as those tasks which are not performed daily but can be encountered 1-3 times per week

 Physical Factors:

* overhead lifting, max. 30 lbs. with assistance
* crawling

 Environmental Factors:

* poor ventilation
* wearing a respirator

As the care-giver for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student), I acknowledge the technical requirements of the student radiographer. I do consider the student able to meet the technical requirements of the program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M.D./D.O./N. P.

 (Care Giver’s Name – Print or Type)

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

 Care Giver’s Signature Date

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

(Care-Giver’s Address and Phone number)



Radiography Program

Radiation Safety Policy Form: Pregnancy Student Response

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ upon declaring my pregnancy, have elected to:

 Print Name

❒ Continue my education without modification, interruption, and continue in my scheduled clinical education cycle.

❒ Interrupt my education in radiography by taking a leave of absence beginning

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and ending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

❒ Terminate my education as of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Prior to making the above decision, I was provided with a full explanation of the U.S. Nuclear Regulatory Commission, Regulatory Guide 8.13 Instruction Concerning Prenatal Radiation Exposure and have been counseled by program authorities and the Radiation Safety Officer.

I fully understand that:

* I must use all precautions/procedures to keep my exposure as low as reasonably achievable.
* I shall not receive a dose of more than 0.5 rem (500 millirem or 5 mSv) during the nine-month gestation period.
* I shall not receive a dose of 0.05 rem (50 millirem or 0.5 mSv) in any one month of my pregnancy.
* My exposure rate will be closely monitored in accordance with program and institutional policies.

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

Student Signature Date Completed

Revised 2/17

Reviewed 4/22

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**Rowan College at Burlington County**

**Radiography Program**

**Program Policy Acknowledgments**

**2023-2024**

Student Name (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID# \_\_\_\_\_\_\_\_\_\_\_\_\_

**Instructions**

Please read the following statements carefully to assure yourself that the information contained in the statement is true and understood by you before signing at the bottom. Your *initials* are to be entered in the space provided at the end of *each* statement.

**Students Handbook Acknowledgment**

The radiography program at RCBC assures that students employ proper safety practices through its use of a competency-based curriculum sequence. All procedural didactic courses must be passed with a grade of 79% or higher. If the student falls below this requirement, the instructor provides the student a remediation assignment to reinforce the areas of weakness. Furthermore, a student cannot generate radiation on a live patient until he/she has successfully completed the sequence of lecture, laboratory demonstration, and return laboratory demonstration. The laboratory grade must be at least 85% or higher for the student to progress to taking radiographs on a patient. Once the above sequence has been met, can a student be permitted to radiograph a patient under direct supervision.

The college provides each student with a radiation monitoring device. The monitoring device is left at the student’s clinical site in a specific non-ionizing location when it is not in use. The exception is when the student moves from one clinical location to another and attends lab.

The director sends all new students a PowerPoint to view and a link with a short film on MRI safety. Prior to the first day of clinical, the student must watch the PowerPoint and film as well as complete an MRI quiz with 80% or higher. If a student fails the quiz he/she must review the PowerPoint and film again and retest. Finally, students are to complete an MRI screening tool during orientation. This screening tool is kept in the student’s record. The director will review the screening forms and if there is an area of concern she will contact an MRI manager for clarification.

The student has read the contents of the handbook, and agrees to abide by all policies, procedures and rules.

Your initials: \_\_\_\_\_\_\_\_\_\_

**RCBC Catalog Acknowledgment**

I have researched the RCBC online catalog (2023-2024), have read and understand its contents, and agree to abide by all policies, procedures, and rules.

Your initials: \_\_\_\_\_\_\_\_\_\_

**Student Handbook Calendar**

I have received the RCBC Student Handbook Calendar (2023-2024): <http://www.rcbc.edu/academic-calendar> I have read and understand the contents of the handbook, and agree to abide by all policies, procedures, and rules.

Your initials: \_\_\_\_\_\_\_\_\_\_

**Permission to Post Grades**

I give permission to the Radiography Program to post all of my radiography course grades using my student ID number.

Your initials: \_\_\_\_\_\_\_\_\_\_

**Confidentiality Statement**

I understand and agree that in the pursuance of my education as a student in the radiography program I must hold all medical information with regard to specific patients, healthcare workers and healthcare facilities in confidence. I understand that I will be privy to such information both in the classroom as well as at the clinical affiliates. I also understand that all medical information regarding specific patients, healthcare workers and healthcare facilities, whether it is obtained in written, verbal, or any other format, is considered a privileged communication between the patient and the patient’s physician, and as such, may not be released without the patient’s written consent. I further understand that any violation of the confidentiality of medical information may result in dismissal from the Radiography program as well as possible legal action against me.

Your initials: \_\_\_\_\_\_\_\_\_\_

I read and understand each of the above statements individually, as indicated by my initials, and I agree to abide by these statements.

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

Student Signature Date