Southwestern Illinois College Radiologic Technology Program







Policies & Guidelines for Student Performance

Revised March 2024

Preface

These guidelines have been prepared to assist you in successfully completing the program in Radiologic Technology at Southwestern Illinois College (SWIC) with an Associates of Applied Science (AAS) degree. A thorough understanding of the curriculum policies and standards within the program is essential for your success.

The following guidelines are subject to renewal and revision by the Radiologic Technology faculty and approval of the Dean of Health Sciences & Homeland Security programs.

The student is reminded that the College Catalog contains other policies and procedures for which the student is also responsible and may be accessed on the Southwestern Illinois College website at www.swic.edu. Any questions concerning these policies or procedures should be discussed with the Program Coordinator.

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Southwestern Illinois College Radiologic Technology Program's Mission Statement and Goals

The Mission

The Radiologic Technology Program upholds the dignity and worth of all people and believes that learning is a lifelong process that enhances the quality of life. The program provides a comprehensive curriculum that meets or exceeds state and national standards for certification and licensure.

The curriculum instills and enhances the intellectual, psychomotor, and affective qualities of students giving them the basics skills necessary to successfully complete the program and graduate with an Associate of Applied Science degree, pass the registry examination, and obtain employment in the profession as an entry-level radiographer. Through a system that assesses the performance and progress of each student during the pursuit of their professional development, the program ensures that its students learn what the profession requires of radiographers as it relates to clinical competency, communication, problem solving and professional development.

The Goals

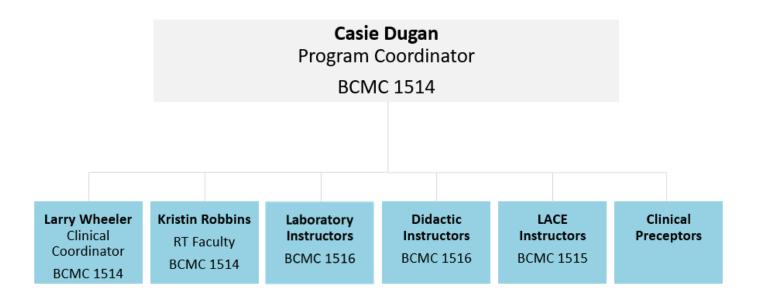
Programs goals related to students:

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

Programs goals related to faculty:

5. Faculty will monitor program effectiveness.

Radiologic Technology Organization Chart



^{*}LACE=Learning Assistance Center for Excellence

RADIOLOGIC TECHNOLOGY STUDENT PERFORMANCE ESSENTIALS

Recognized as a description of the profession the following statement is taken from the American Registry of Radiologic Technologists (ARRT) Website: As radiographers, "you'll capture images of patients' internal organs, soft tissues, and bones using X-ray equipment. You also might assist radiologists with a range of procedures, such as fluoroscopic imaging or gastrointestinal exams that require the use of contrast media. A career as a radiographer is challenging and rewarding. Working in this field, you'll be an important part of a medical team that diagnoses and treats patients who have a range of diseases and injuries."

The ARRT administers certification for Radiography as well as other disciplines of Radiologic Technology. The requirements for certification focus on three areas: ethics, education and examination. The Radiography certification requires annual renewal and compliance with continuing education requirements.

Performance essentials or essential functions are defined as those physical, mental, and psycho-social characteristics that are necessary to meet the demands of the Radiologic Technology educational process and eventual patient care contact in the clinical facilities.

Becoming a radiologic technologist requires the completion of a technical educational program that is both intellectually and physically challenging. The purpose of this policy is to articulate the demands of the program in a way that will allow students to compare their own capabilities against these demands.

There are times when reasonable accommodations (i.e. hearing devices to improve communication) will be necessary in order to assist a student in performing the essential functions. Reasonable accommodation does not mean students are exempt from performing any of these tasks, but that students are allowed an opportunity to complete the task in a fashion that may be different than what is considered the typical way to achieve the outcome. Students seeking accommodation are required to make formal declaration of special needs with the SWIC Disability & Access Center. If admitted, a student requesting an accommodation must also make the program coordinator of the Radiologic Technology Program aware. An offer of admission may be withdrawn if no reasonable accommodation can be made to allow the student to safely and effectively participate in the program.

Performance Expectations for the Classroom/Lab/Clinical Experience Students must:

- Meet class standards for course completion throughout the curriculum.
- Complete readings, assignments, and other activities outside of class hours.
- Be able to read, write, speak, and understand English at a level consistent with successful completion and development of appropriate relationships with peers, instructors, patients, family, other allied health professionals, and the community.
- Have interpersonal skills as needed for productive classroom discussion, respectful
 interaction with classmates and faculty, and development of appropriate radiologic
 technologist-patient relationships.

- Collect decision-making data during patient assessment activities in a class or in the clinical setting without the assistance of an intermediary such as a classmate or an aide.
- Perform radiographic examinations in the energized lab and in the clinical setting.
- Apply critical thinking to their work, exercise sound judgment and follow safety procedures established in the classroom and the clinical facility.
- Maintain personal appearance and hygiene conducive to classroom and clinical settings.
 (Refer to student dress code regarding appropriate/inappropriate attire, body piercing(s), tattoos, etc).
- Pass a cardiopulmonary resuscitation course at the healthcare provider level.
- Demonstrate appropriate health status prior to class enrollment per medical examination, including documentation of required immunizations.
- Follow standards and policies specified in the Student Handbook.
- Demonstrate ability to perform typical physical and mental functions (listed on the following pages) required of the role of radiologic technologist. The typical functions of a radiologic technologist are listed next.

Typical Functions required of working as a Radiologic Technologist:

Physical function:

- Uses auditory, tactile, and visual senses to collect data regarding patient status and to
 provide patient intervention (e.g. auditory cues to hear breath sounds, take blood
 pressure measurements; tactile cues to monitor pulse, feel the ease of patient movement
 during positioning; visual cues to inspect skin, report abnormal motion or visible
 indications of pathology).
- Applies universal/standard precautions regularly in the classroom and clinical facility –
 regular hand washing (free of skin conditions irritated by frequent washing), applies mask,
 gown, gloves (applies without assistance of another individual).
- Coordinates verbal and manual activities with gross motor activities (e.g. can move a portable x-ray machine and position the tube head while verbally communicating with a patient or can assist patients with movement during positioning and give directions with the correct timing to complete the activity).
- Uses hands repetitively with simple grasp and frequently uses a firm grasp and manual dexterity skills.
- Pushes or pulls equipment or devices.
- Lifts or provides sufficient support to safely assist patients/classmates when they are moving from sitting to standing positions or from one surface to another (e.g. chair to bed/x-ray table, wheelchair to bed/x-ray table, or stretcher to bed/x-ray table).
- Quickly and coordinately moves patients/classmates from one position to another (e.g. squats, kneels, bends, stands, reaches above shoulders, reaches across x-ray table).

Mental function:

- Attentively listens to patients.
- Controls verbal and nonverbal behaviors when communicating with others.
- Accurately self-assess own strengths and weaknesses.

- Modifies behaviors after receiving corrective feedback.
- Takes responsibility for own actions-does not blame others for situations or behaviors.
- Behaves honestly and truthfully.
- Concentrates on tasks at hand for extended period of time.
- Utilizes problem-solving skills to meet needs of situation.
- Handles stress of an intensive training program in preparation for clinical situations
 - Heavy academic demands
 - Fast paced clinical situations
 - Psychosocial responses of patients with illness, injuries, deformities, disabilities, malignancies or other pathological conditions.

Radiologic Technology Curriculum – Associate in Applied Science Degree

(For pre-requisite coursework, see the RT application planning guide at https://www.swic.edu/academics/career-degrees/health-sciences/radiologic-technology/applicants/

Summer Semes	iter				
Course Number	Course Description				
RT 100	Radiologic Technology I	2.5			
RT 101	Radiographic Positioning I	3.5			
RT 102	RT Math Computations	1			
HRO 100	Medical Terminology	1			
	Total Semester Credits:	8			

Fall Semester		
Course Number	Course Description	Credits
BIOL 105	Human Biology**	4
RT 110	Radiologic Technology II	3
RT 111	Radiographic Positioning II	4
RT 112	Clinical Experience I	3
RT 131	X-ray Physics I	4
	Total Semester Credits:	18

Spring Semeste	er	
Course Number	Course Description	Credits
ENG 101	Rhetoric & Composition I	3
RT 150	Radiologic Technology III	3
RT 151	Radiographic Positioning III	4
RT 152	Clinical Experience II	3
RT 180	X-ray Physics II	4
	Total Semester Credits:	17

Beginning 2nd year

Summer Seme	ster	
Course Number	Course Description	Credits
RT 160	Clinical Experience III	3
	Total Semester Credits:	3

Fall Semester		
Course Number	Course Description	Credits
PSYC 151	General Psychology	3
RT 230	Pathology for Radiographers	1
RT 241	Clinical Experience IV	3
RT 242	Clinical Modalities I	1
RT 244	Radiobiology	4
	Total Semester Credits:	12

Spring Semest	er				
Course Description Number					
COMM 151 COMM 155	Fundamentals of Public Speaking OR Interpersonal Communication	3			
RT 297	RT 297 Radiologic Technology Review				
RT 296 IT for Radiography					
RT 298 Clinical Modalities II					
RT 299	RT 299 Clinical Experience V				
	Human Relations Course*	3			
	Total Semester Credits:	15			
	Total Credits:	73			

^{*}See the blue AAS degree pages in the college catalog for a listing of all Human Relations course options.

Per ICCB: 50 min of course contact is equivalent to 1 credit hour; for clinicals 30-60 contact hours equates to 1 credit hour; for internships 75-149 hours equates to 1 credit hour.

Program Distribution of Credit Hours (73 total credits) and %					
College General Education Requirements 17 23%					
Rad Tech Lecture 27.5 38%					
Rad Tech Lab 11.5 16%					
Rad Tech Clinical Experience 17 23%					

^{**}BIOL 105 can be replaced by BIOL 155 & 156 or BIOL 157 & 158.

PROGRAM CURRICULUM COURSE Prefix & Number THE STUDENT (Discipline) SHALL BE **ABLE TO:** RT 101 102 110 111 112 131 150 151 152 180 160 230 241 242 296 297 298 299 100 244 **Educational Goals Listed Here:** Ε Ε Ε Ε R R R R R R R Students will select technical factors. R R Ε R R R R R R Students will critique images. Ε Ε Ε R Ε Ε Ε R R R R R R Students will utilize radiation protection. Students will demonstrate effective written communication skills. Ε Ε R Ε R R R R R R R Students will demonstrate effective oral Ε R Ε R R R R communication skills. Students will adapt standard procedures for non-routine patients. Ε R Ε R Ε R R R R R R Students will respond appropriately to life Ε Ε Ε R R R R R R R R R threatening situations. Students will demonstrate professional Ε R R R R R R R R ethics. Students will evaluate the value of life-long

I= introduce, E=emphasize, R=reinforce

learning and demonstrate adaptability in

the workplace.

Ε

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Professional Organizations for Radiographers

The Joint Review Committee on Education in Radiologic Technology

The Joint Review Committee on Education in Radiologic Technology (JRCERT) promotes excellence in education and elevates the quality and safety of patient care through the accreditation of educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. The essentials and guidelines on an accredited educational program for the radiographer by the program review committee of the Joint Review Committee on Education in Radiologic Technology program are available for all interested parties on the JRCERT website (www.jrcert.org).

The Southwestern Illinois College Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology 20 North Wacker Drive, Suite 2850 Chicago, IL 60606-3182 312-704-5300

Email: mail@jrcert.org

Standard One: Accountability, Fair Practices, and Public Information

The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Standard Two: Institutional Commitment and Resources

The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Standard Three: Faculty and Staff

The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Standard Four: Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Standard Five: Health and Safety

The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

Standard Six: Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement

The extent of a program's effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.

The American Society of Radiologic Technologists

The mission of the American Society of Radiologic Technologists® (ASRT) is to advance and elevate the medical imaging and radiation therapy profession and to enhance the quality and safety of patient care. The ASRT strives to be the premier professional association for the medical imaging and radiation therapy community through education, advocacy, research and innovation. The American Society of Radiologic Technologists® (ASRT) is an organization that represents the interests of radiographers by sponsoring numerous educations programs, annual conferences and by developing and publishing the curriculum guide for educational programs in Radiologic Technology. The Practice Standards for Medical Imaging is located on the ASRT website.

ASRT 15000 Central Ave. SE Albuquerque, NM 87123-3909 800-444-2778 OR 505-298-4500 www.asrt.org

The American Registry of Radiologic Technologists®

The American Registry of Radiologic Technologists® (ARRT) is a credentialing organization that seeks to ensure high quality patient care in radiologic technology. The ARRT tests and certifies technologists and administer continuing education and ethics requirements for their annual registration. The Registry requires 24 hours of continuing education in a two-year period to renew certification. ARRT certifications awarded, as of January 1, 2011, will be time-limited to 10 years. Prior to the end of the 10-year period, an individual will be required to demonstrate continued qualifications in order to maintain certification. The Standards of Ethics is listed on the ARRT website. Please note: Regarding concerns about ethics eligibility, please reference the ARRT –pre-review section of the ARRT handbook or contact the agency.

The American Registry of Radiologic Technologists® 1255 Northland Drive
St. Paul, Minnesota 55120-1155
651-687-0048
www.arrt.org

Progressive Radiographers Organization (PROs)

The Progressive Radiographers Organization, PRO's, is a campus club that promotes professionalism through social awareness, social interaction, and radiologic technology education. Membership in PROs is required and membership in the ISSRT is highly encouraged, as both represent a significant step into the professional community. The PROs annual membership fee is \$20.00. Frequently students in the program will participate in activities to assist the program coordinator and clinical coordinator in promoting the program. Students must be in good academic standing and specifically must be passing in all current classes at the time of the activity.

Requirements for Students to Participate in Clinical Experience for Health Sciences Programs:

Background Check and Drug Testing Requirements for Health Science Programs

Students accepted into specific Health Science programs must purchase an on-line screening package which includes:

1. Criminal Background Check 2. Government Registry Search 3. Urine Drug Test

Program acceptance is contingent upon meeting deadlines for completion of the screening and results which allow the student to participate in the clinical portion of the program.

1. Criminal Background Check

Program acceptance letters will include deadline details and directions for accessing and purchasing the on-line screening for criminal background checks. Background checks are required for the clinical portion of health science programs and may also be required after graduation to take licensure/registry/certification examinations, which are required for employment.

Criminal Background Check Details:

• Background checks are conducted for Illinois, Missouri and every state in which the student has lived or worked since the age of 18.

Criminal Convictions:

- Certain criminal convictions are identified as "disqualifying" for working with patients or their
 personal information. Fines, probation, or conditional discharge are convictions and will appear
 on a criminal history check. If the student is unsure as to whether an arrest resulted in a
 conviction, he or she should contact the county in which the arrest occurred and speak to a
 representative in the Circuit Clerk's or State's Attorney's office, or contact an attorney.
- A complete list of disqualifying convictions is available from the Illinois Department of Public Health (IDPH) at the following website: http://www.idph.state.il.us/nar/disconvictions.htm
- Students convicted of a "disqualifying" offense will be asked to produce a waiver from the Illinois Department of Public Health and will be removed from the program if a waiver cannot be produced.

Waiver Process for Disqualifying Convictions:

- Students with disqualifying criminal convictions as listed on the IDPH's website must obtain a
 waiver in order to retain their seat in any Health Science program which they have been
 accepted into.
- Typically, it takes 8-12 weeks to receive a waiver determination from the IDPH, so **students** should start the waiver process as soon as possible, before program acceptance.
- Applicants should be aware that obtaining a waiver does not guarantee program admission, and that not every clinical facility accepts the IDPH waiver, therefore obtaining the waiver is not a guarantee that the clinical portion of the program can be completed.
- Applicants should also be aware that less than half of those who apply for an IDPH waiver receive one. Each waiver application is reviewed on an individual basis. In general, a waiver is not granted in the following circumstances:
 - The crime committed involved an elderly or disabled person.
 - There are more than 2 similar crimes.
 - The crime involves murder, sexual assault, aggravated battery, armed robbery, exploitation of a child, child pornography or kidnapping.
 - The offense occurred less than 2 years ago.

How to Request a Waiver:

Call the Illinois Department of Public Health at 1-217-785-5133 and ask for a waiver application.

2. Government Registry Search

The on-line screening package also includes a search for the student's name on multiple government registries. Students whose names appear on these registries as offenders will lose their seats in the program.

Government Registry Search Details:

• A search will be conducted to confirm that the student is not listed as an offender on any government registry. A standard set of registries will be searched for all programs, while select programs require additional registries to be searched.

Registries for All Programs:

The following registries will be searched for all students accepted to Health Science programs:

- Disqualification list for the MO Department of Health and Senior Services
- Division of Family Services (DFS)
- The Office of Inspector General (OIG)

Additional Registries for Select Programs: *Note: These additional registry checks increase package cost.*

- Certain Health Science programs will use additional registries, based on clinical site requirements. These registries include:
- The Missouri Department of Health and Senior Services Employee Disqualification List
- The Department of Mental Health Employee Disqualification Registry

3. Urine Drug Testing

Purchase of the on-line screening package also includes a random urine drug test that will be completed at a time determined by the college. At the time the package is purchased, instructions may be listed on the website to complete the urine drug test. Students should ignore these directions and wait for further instructions from the college regarding the date for their random drug test.

Urine Drug Testing Details:

A urine drug test will be conducted to ensure that the student has not used illegal drugs or taken
a prescription medication that belongs to someone else. If the student's drug test result is
positive for any substance, proof of prescription is required or the student will be dropped from
the program. The use of prescriptive medication is not a problem as long as the medication is
prescribed to the student.

When to Take the Test:

- The college will assign each student's drug test at a random time after the on-line package has been purchased.
- When the test is assigned, students MUST complete the test within 48 hours regardless of schedule conflicts.

Where to Take the Test:

- All drug testing will be completed at a Quest Diagnostics Lab.
- Students schedule a drug test appointment with a Quest lab after notification from the college.

Communication with Quest Diagnostics:

- If contacted, it is vital that students communicate with Quest Diagnostics and their affiliates during the drug testing process.
- In the event that a drug test is positive, students will be contacted and must provide proof of prescription.

4. Cost

All costs associated with the on-line screening package (Criminal Background Check, Government Registry Search and Urine Drug Test) are the responsibility of the student. **Costs are set by the vendor of the screens and may change at any time.**

Cost Details:

- Students are required to visit the website of the vendor to order an on-line package through the website.
- The cost of the on-line package varies based on the program applied, resident history and work history:

Requirements of clinical facilities for each program set the base cost for the on-line package. There are currently two categories:

- A. For the Medical Assistant, Medical Laboratory Technology, Phlebotomy, Respiratory Care and Paramedic programs, the starting cost of the package is \$87.
- B. For the Nursing Education, Advanced Standing Nursing Education, Physical Therapist Assistant and Radiology Technology programs, the starting cost of the package is \$102, due to additional required registry checks.

Residence and Work History

For students who have lived or worked in any state (since the age of 18) other than Illinois or Missouri, an additional fee of \$13 per state will be added to the base cost.

5. Assistance and More Information

For assistance with any of these processes or to request more information, contact the Coordinators' Assistant at (618) 235-2700, ext. 5355.

Students who are dismissed for a positive criminal background check, drug test or listing on a government registry are not eligible for refund of tuition or lab fees.

Additional requirements that students may be asked to provide in order to participate in Clinical Experience for the Radiologic Technology Program includes but is not limited to:

- -A completed medical evaluation form with updated tuberculosis screening and vaccinations (to request a medical and/or religious exemption, please contact the program coordinator)
- -Respiratory Fit Testing
- -cell phone number
- -address
- -date of birth
- -social security number
- -student ID number
- -student email
- -license plate number

Ethics Requirements for Licensure in the State of Illinois and for taking the certification exam administered by the American Registry of Radiologic Technologists (ARRT)

Note: The previous section focused on the requirements for students to participate in clinical experience in Health Sciences programs at Southwestern Illinois College, per the college standards.

The following statements must be answered by applicants seeking to take the certification exam administered by the American Registry of Radiologic Technologists (ARRT) or apply for licensure in the State of Illinois with the Illinois Emergency Management Agency (IEMA). *If you answer "yes" to any of the questions, you may be required to go through a due process prior to taking the certification exam or issuance of a license. This information is provided to inform you and should not deter you from the radiography program. Should you have any concerns about ethics eligibility for the American Registry of Radiologic Technologists certification or licensure in the State of Illinois, a student may obtain a pre-application review from the ARRT. The pre-application form is downloadable from the "Ethics" section of the www.arrt.org website or by calling (651) 687-0048.

ARRT:

- 1. Have you ever been charged with or convicted of a misdemeanor or felony? (This includes court convictions and military courts-martial.)
- 2. Has a regulatory authority or certification board (other than ARRT) ever done one or more of the following?
 - Denied, revoked, or suspended your professional license, permit, registration, or certification?
 - Placed you on probation (excluding ARRT Continuing Education probation), under consent agreement, or under consent order?
 - Allowed voluntary surrender of your professional license, permit, registration, or certification?
 - Subjected you to any conditions or disciplinary actions?
- 3. Have you ever voluntarily withdrawn—or been suspended, dismissed, or expelled—from an educational program you attended to meet ARRT certification and registration requirements?

IEMA

- 1. Have you been convicted of a felony?
- 2. Have you been denied or had a license/certification revoked?
- 3. Do you have a drug or alcohol problem that would impair your ability to perform professional duties?
- 4. Do you have a mental or physical disability that would impair your ability to perform professional duties?
- 5. Are you more than 30 days delinquent in complying with a child support order?

The decision to allow an individual to take the ARRT examination rests solely with the American Registry of Radiologic Technologists certifying board. Likewise, the decision to be granted an Illinois license after passing the examination rests solely with the Illinois Emergency Management Agency.

^{*}The questions identified were accurate on February 20, 2024 per the IEMA and ARRT websites.

SAFETY POLICIES

Health Policy

A radiologic technology student on admission is required to have a medical examination (**see Student Medical Exam Form, Appendix 1**) and a statement signed by his/her physician that the applicant is considered to be physically and mentally able to undertake the program in radiologic technology. If the physician does not feel that the student is physically or mentally able to fulfill the responsibilities of a radiologic technology student, continuation in the program will be withdrawn.

Health requirements must be kept current.

Please note: An annual TB test and an annual influenza vaccination (flu shot) are required.

Students should keep a copy of their health records.

The medical examination documentation must be provided to the program coordinator prior to the summer semester. Specific dates are shared at the orientation meeting.

Encountering a Major Health Problem While in the Program

- 1. **Physical illness** A statement from the attending physician that the student is physically able to continue the program.
- 2. <u>Mental illness</u> A statement from the attending psychiatrist that the student is mentally able to continue the program.
- 3. It is the responsibility of the instructor to evaluate the physical and mental condition of the student whether in the campus classroom or when the student is practicing in the clinical area. If, in the judgment of the instructor, the safety of the patient, classmates, hospital staff, or the student is at stake, the student will be asked to leave the classroom or clinical area. The student may be advised to see a doctor, to go to the emergency room of the hospital, or to go home. The instructor will report the incident to the program coordinator.

BLOODBORNE PATHOGENS

Introduction

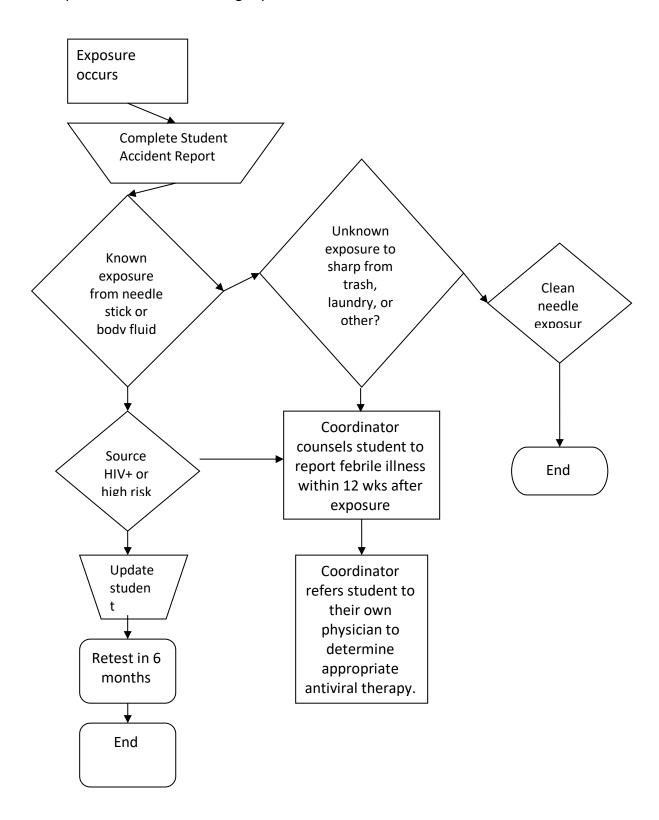
Human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV) are bloodborne pathogens transmitted through sexual contact and exposure to infective blood, blood components and/or other body fluids.

I. Policy

Students who may be exposed in the clinical setting will follow that facility's existing policy and procedures. In all other situations, students will be referred to their personal physician for individual assessment and prophylaxis, if indicated. Prophylaxis, if indicated, should be initiated promptly, usually within hours post-exposure. Records associated with the exposure or treatment will be treated as confidential medical records and will not be discussed with anyone other than those involved in counseling, providing care, or maintaining records. A violation of confidence in unethical and will not be tolerated. A student who suspects that this trust has be violated should report the concern to the program coordinator as soon as possible.

II. Recommended Prophylaxis After Occupational Exposure:

Prescriptions for medications should be given by the student's personal physician or the ER physician based on current CDC Guidelines.



Background

There has been an increase in the number of reported sensitivities to natural rubber latex. Because of the extent of exposure to latex by health care providers and students in those and other related career paths, the potential exists for the development of sensitivity to latex products by students and staff members. This protocol is meant to address incidences of acquired latex sensitivity by individuals exposed in the course of their studies or faculty obligations.

Various health care products including dipped products like gloves, condoms, and balloons, are made from collected sap of rubber trees cultivated for this purpose. Increased exposure to latex has resulted from the institution of universal precautions by health care workers. A rise in IgE-medicated latex allergy has been noted by the American Academy of Allergy and Immunology, the Food and Drug Administration, and the rubber industry. An allergic response to latex can range from a delayed type IV, cutaneous reaction to a Type I, IgE anaphylactic and life-threatening reaction. Now a recognized affliction, the latex allergen is felt to be a proteinaceous product of the rubber tree, *Hevea brasiliensis*. However, the processing of natural latex may result in the formation of neo-antigens.

"Signs and symptoms of an allergic reaction associated with latex include local or systemic urticaria, hay fever-like symptoms, abdominal cramps, difficulty in breathing, a rapid heart rate, a drop-in blood pressure and potential anaphylactic shock". Foods known to be cross-reactive with latex are bananas, avocados, and chestnuts. The presences of allergic symptoms such as oral itching is "recognized risk factors for latex allergy" (Weiss, 1995, p.4.)

Individuals at Risk

There are three populations considered at high risk to sensitization: children with myelomeningocele/spina bifida (34-100%); rubber industry workers (11%), and health care workers (4.5-14%), including student nurses, medical laboratory technicians and medical imaging technologists. Increased exposure to the allergen/s over time can result in a diagnosis of latex allergy. Risk factors associated with a latex allergy include:

- *Previous allergic reaction to latex or latex-containing products
- *Previous unexplained anaphylaxis
- *Hand eczema
- *Allergic reaction such as oral itching from cross-reactive foods
- *Multiple surgeries in childhood
- *Spina bifida

Latex Allergy Testing

When an allergy to latex is suspected, the individual needs to be assessed regarding the presence of risk factors, and history of latex exposure and immediate reactions such as contact urticaria, pruritus, dermatitis, rhino conjunctivitis or asthma. Confirmatory testing consists of a blood test **AlaSTAT**, which measures specific IgE antibodies against latex. The in vitro test is performed on a blood sample and takes about 3.5 hours. AlaSTAT is intended for diagnosis of patients with suspected latex allergy. It is not intended as a screening tool.

Should an individual test positive for the latex allergy, the following actions must be taken:

- *The individual must be counseled regarding continued exposure. The list of latex containing health care and other products is long and includes many commonly used items.
- *The latex-sensitive/allergic person needs to be aware of his or her responsibility to inform instructors, health care providers, supervisors, etc. of the allergy or sensitivity.
- *Documentation from the person's health care provider regarding diagnosis and treatment must be on file in the person's health record at the Health Center.

 Precautions recommended by the practitioner, if any, need to be included in the report.
- *Clinical staff should notify SWIC faculty if latex sensitivity of a student is suspected.
- *Alternate products for use in the laboratory and clinical area must be provided.

References

Weiss, J. (1995). <u>AlaSTAT: Latex allergy.</u> Diagnostics Product Corporation Technical Report.

Pharmaceutical Information Associates, Ltd. <u>Blood Test for Latex Allergy.</u> Medical Sciences Bulletin, 05/11/97.

HEPATITIS B VACCINATION

Hepatitis

Hepatitis means inflammation of the liver, and can be caused by a number of agents or conditions. The most common causes of hepatitis are viruses.

Hepatitis B Virus

Hepatitis B virus infection is the major infectious blood-borne occupational hazard to health care workers.

Hepatitis B Virus (HBV) is a potentially life-threatening blood borne pathogen. Centers for Disease Control estimates there are approximately 20,000 HBV infections each year in the U.S.

Transmission of HBV

HBV infection is transmitted through exposure to blood and other infectious body fluids and tissues. Anyone with occupational exposure to blood is at risk of contracting the infection.

HBV Vaccination

The Hepatitis B vaccination is a noninfectious, yeast-based vaccine given in three injections in the arm. It is prepared from recombinant yeast cultures, rather than human blood or plasma. Thus, there is no risk of contamination from other bloodborne pathogens, nor is there any chance of developing HBV from the vaccine.

The second injection should be given one month after the first, and the third injection six months after the initial dose.

More than 90 percent of those vaccinated will develop immunity to the Hepatitis B virus. To ensure immunity, it is important for individuals to receive all three injections. At this point, it is unclear how long the immunity lasts, so booster shots may be required at some point in the future.

The U.S. Public Health Service recommends that "High Risk" health care professionals receive Hepatitis B vaccination. Radiologic Technologists are considered to be in the "high risk" category because of the cardiovascular injected examinations and the upper and lower GI tract examinations performed in the Radiology Departments.

Radiologic Technology students are advised to obtain the Hepatitis B vaccine. Future employment may require that you have obtained this vaccine. (see Hepatitis B Vaccine (HBV) Form for Student Responsibility, Appendix 3).

OSHA FactSheet

Hepatitis B Vaccination Protection

Hepatitis B virus (HBV) is a pathogenic microorganism that can cause potentially lifethreatening disease in humans. HBV infection is transmitted through exposure to blood and other potentially infectious materials (OPIM), as defined in the OSHA Bloodborne Pathogens standard, 29 CFR 1910.1030.

Any workers who have reasonably anticipated contact with blood or OPIM during performance of their jobs are considered to have occupational exposure and to be at risk of being infected. Workers infected with HBV face a risk for liver ailments which can be fatal, including cirrhosis of the liver and primary liver cancer. A small percentage of adults who get hepatitis B never fully recover and remain chronically infected. In addition, infected individuals can spread the virus to others through contact with their blood and other body fluids.

An employer must develop an exposure control plan and implement use of universal precautions and control measures, such as engineering controls, work practice controls, and personal protective equipment to protect all workers with occupational exposure. In addition, employers must make hepatitis B vaccination available to these workers. Hepatitis B vaccination is recognized as an effective defense against HBV infection.

HBV Vaccination

The standard requires employers to offer the vaccination series to all workers who have occupational exposure. Examples of workers who may have occupational exposure include, but are not limited to, healthcare workers, emergency responders, morticians, first-aid personnel, correctional officers and laundry workers in hospitals and commercial laundries that service healthcare or public safety institutions. The vaccine and vaccination must be offered at no cost to the worker and at a reasonable time and place.

The hepatitis B vaccination is a non-infectious, vaccine prepared from recombinant yeast cultures, rather than human blood or plasma. There is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine.

The vaccine must be administered according to the recommendations of the U.S. Public Health Service (USPHS) current at the time the procedure takes place. To ensure immunity, it is important for individuals to complete the entire course of vaccination contained in the USPHS recommendations.

The great majority of those vaccinated will develop immunity to the hepatitis B virus. The vaccine causes no harm to those who are already immune or to those who may be HBV carriers. Although workers may desire to have their blood tested for antibodies to see if vaccination is needed, employers cannot make such screening a condition of receiving vaccination and employers are not required to provide prescreening.

Employers must ensure that all occupationally exposed workers are trained about the vaccine and vaccination, including efficacy, safety, method of administration, and the benefits of vaccination. They also must be informed that the vaccine and vaccination are offered at no cost to the worker. The vaccination must be offered after the worker is trained and within 10 days of initial assignment to a job where there is occupational exposure, unless the worker has previously received the vaccine series, antibody testing has revealed that the worker is immune, or the vaccine is contraindicated for medical reasons. The employer must obtain a written opinion from the licensed healthcare professional within 15 days of the completion of the evaluation for vaccination. This written opinion is limited to whether hepatitis B vaccination is indicated for the worker and if the worker has received the vaccination.

Declining the Vaccination

Employers must ensure that workers who decline vaccination sign a declination form. The purpose of this is to encourage greater participation in the vaccination program by stating that a worker declining the vaccination remains at risk of acquiring hepatitis B. The form also states that if a worker initially declines to receive the vaccine, but at a later date decides to accept it, the employer is required to make it available, at no cost, provided the worker is still occupationally exposed.

Additional Information

For more information, go to OSHA's Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the "U.S. Department of Labor" listing in your phone book, or call us toll-free at (800) 321-OSHA (6742).

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.

For assistance, contact us. We can help. It's confidential.



DSG 1/2011

OSHA Fact Sheet from www.osha.gov, February 2023.

PROGRAM POLICIES

Introduction

The Radiologic Technology program consists of lecture classes, laboratory classes and clinical experience. The program is academically rigorous and may seem restrictive and demanding at times. The student capacity for the lab is limited, requiring the need for multiple sections. Clinical experience is planned at a variety of healthcare sites which schedule SWIC students as well as many other students. Consequentially, students must be flexible and adjust to these schedules as assigned to ensure that all program objectives are met.

Note: Non-RT classes are to be taken prior to, or during the semester identified, as listed in the catalog. Failure to adhere to the catalog may result in dismissal.

Students <u>will be assigned</u> by faculty to lecture classes, laboratory classes and clinical sites. Students may be assigned to any lab and any clinical site; therefore, students should be prepared to attend any lab session or any clinical site. Students must consider this when arranging work, childcare, and non-RT class schedules. Students will be allowed to identify multiple preferences regarding clinical sites and faculty will take this into consideration when assigning clinical sites.

Note: Clinical hours are <u>never</u> eligible for compensation. The primary objective of clinical education is to demonstrate competency in the performance of radiologic procedures. Clinical experience is not a job and students are not paid for this time. Sometimes students will work in a radiology department outside of clinical hours; however, they must not deliver ionizing radiation in Illinois. For emphasis: Other state laws may vary, but radiography students who work outside of clinical hours must not take radiographs for any kind of compensation in Illinois. This type of employment is typically highly discouraged during the first year of the program. No employment time should ever overlap with clinical hours.

Note: Student liability insurance does not cover a student when they are at the clinical site as an employee. The program provided dosimeter must **NOT** be worn during employment. The employer must provide a separate radiation monitoring device.

If students have children at home or have other family responsibilities, it is important for the student to make adequate arrangements as the college policy does not allow children in the classroom, lab, or a clinical. Also, childhood illness is rarely an anticipated event, so it is very important to have emergency/alternate plans for care arranged for the children in advance.

Students with a spouse or significant other find it is wise to include these individuals in understanding the demands of their RT schedule. There is a huge time commitment involved in study and preparation for the program.

Working hours outside of the program should be arranged so there will be no conflict with the program schedule. The program must be considered a student's priority as attendance is taken seriously (Attendance Policy/Absences). RT faculty stress that a great deal of time must be devoted to college work and that alertness in the classroom and at clinical sites is imperative to

student success in the program. RT faculty encourage students to consider this significant time commitment regarding employment decisions while in the RT program.

Studying takes times. Many times, students will ask how much time will need to be devoted to studying. Some commonly accepted rules of thumb include: For every credit hour of lecture, the student should plan on spending double that amount of time outside of class studying and doing homework. Depending on the learning style; however, many times students require more time for certain classes.

When meeting with faculty members, students may request to have an additional person present, provided that the necessary Family Educational Rights and Privacy Act (FERPA) documentation has been properly completed.

Internet E-mail

During attendance of the RT program, students may authorize RT faculty from Southwestern Illinois College to send information to them electronically, to a student specified e-mail address. (*Permission to E-Mail Information Form, Appendix 4*).

By semester, the following table shows hours per week and <u>an estimate</u> of the study hours per week, needed for RT class/study time (non-RT classes are not included). All RT coursework must be taken as sequenced:

EXAMPLE – weekly time requirements for RT classes and estimated study time (Note: Non-RT classes are not included in this table, only RT classes)					
First Summer (1st semester)	Hours/week in lecture/lab/clinical			Estimated hours/week spent on studying	
	lecture	lab	clinical		
RT 100 Radiologic Technology I	5 hr			10 hr	
RT 101 Radiographic Positioning I		7 hr		14 hr	
RT 102 RT Math computations	2 hr			4 hr (or more)	
	Total hr weekly in	lect./lab/clinical:	14 hr	Studying: 28 hr (or more)	
First Fall (2 nd semester)	lecture	lab	clinical		
RT 110 Radiologic Technology II	3 hr			6 hr	
RT 111 Radiographic Positioning II		4 hr		8 hr	
RT 112 Clinical Experience I			15 hr		
RT 131 X-Ray Physics I	4 hr			8 hr (or more)	
	Total hr weekly in	lect./lab/clinical:	26 hr	Studying: 22 hr (or more)	
First Spring (3 rd semester)					
RT 150 Radiologic Technology III	3 hr			6 hr	
RT 151 Radiographic Positioning III		4 hr		8 hr	
RT 152 Clinical Experience II			15 hr		
RT 180 X-Ray Physics II	4 hr			8 hr	
	Total hr weekly in	lect./lab/clinical:	26 hr	Studying: 22 hr (or more)	
Second Summer (4 th semester)					
RT 160 Clinical Experience III			30 hr	as needed	
	Total hr weekly in	lect./lab/clinical:	30 hr	Studying: as needed	
Second Fall (5 th semester)					
RT 244 Radiobiology	4 hr			8 hr	
RT 230 Pathology for Radiographers	1 hr			2 hr (or more)	
RT 241 & 242 Clinical Experience IV & Clinical Modalities I			20 hr		
	Total hr weekly in	lect./lab/clinical:	25 hr	Studying: 10 hr (or more)	
Second Spring (6 th semester)					
RT 296 IT for Radiography	1hr			2 hr	
RT 297 Radiologic Technology Review	4 hr			8 hr (or more)	
RT 298 & 299 Clinical Modalities II & Experience V			20 hr		
	Total hr weekly in lect./lab/clinical: 25 hr			Studying: 10 hr (or more)	

Grading Policies

Grading Criteria

The student will achieve a final grade based upon the scores of components specific for a course (such as, but not limited to tests, quizzes, assignments, and final). The percentages for the components will be specified in the course syllabus. The grade scale consists of the following distribution:

A - 92 - 100

B - 83-91

C - 77 - 82

D - 65-76

F – 64 & below

All assignments are due at the beginning of class on the due date, unless otherwise specified by the instructor. Late assignments will be penalized per the specific penalties identified in the course syllabus.

Test Criteria

In general, there will be a test upon the completion of each section of content and a comprehensive final examination. The sections covered in the final will be specified in the syllabus as some courses span multiple semesters. The retake policy follows:

Below 77 – on any test

If a student receives a score below 77% on ANY test, the student will be required to take a new test within one week of the original exam being returned by the instructor. The re-take test will be constructed with approximately 20 questions, testing the same content area as the original test and will consist of multiple choice and short answer/fill in the blank questions. **Note: A retake cannot be administered for the comprehensive final.**

If a student scores less than a 77% on the re-take test (or fails to take the re-take test within the allowed time frame), the student will be placed on probation status for the remainder of the program. At this time the student will be allowed to continue in the course but the original test score will remain as the one recorded in the grade book.

If a student scores a 77% or above on the re-take test, the student will have passed the exam, be allowed to continue in the course in the same status, and the original test score will be logged as the grade for that unit test.

Note:

For students passing the re-take, a second occurrence of receiving a score below 77% on any test will result in the student being placed on probation status. For students on probation, failure of a re-take test or failure of two tests will result in dismissal.

The retake policy does not apply to the summer semesters or any radiologic technology lab classes.

CPR Policy

A current Cardiopulmonary Resuscitation (CPR) certification for American Heart Association Basic Life Support (BLS) must be on file prior to the first clinical experience. CPR will be offered to students on 1 or more days (typically on Fridays) during the first summer semester, which will be announced during the summer semester in class. Students must attend and pass the session, or attend and pass a CPR class for BLS outside the program, during a valid timeframe. The CPR offered by Southwestern Illinois College will not generate any additional expense for the student. Any expense associated with outside classes will be the responsibility of the student. Please note: No other level of CPR is accepted other than BLS. If BLS is taken outside of the program offering, the valid timeframe is May 15 to July 1 of the first summer semester.

Student Insurance (Liability)

Students are covered for liability by a group plan carried by Southwestern Illinois College. The cost of this liability insurance is included in the Radiologic Technology lab fees.

Student Insurance (Personal)

<u>Students</u> are responsible for all personal injury, medical treatment and expense arising out of their own actions during the course of their clinical affiliations. Students should maintain their own medical insurance for this purpose.

Students need to purchase insurance <u>prior</u> to clinical experience so the insurance company can process the necessary paperwork needed to show proof of insurance. Proof of insurance will be required each year (*see Medical Insurance Verification form, Appendix 2*).

All accidents must be reported in a timely manner to the program coordinator.

Student Insurance (Auto)

<u>Students</u> are responsible for their transportation. Students should maintain their own automobile insurance.

Students need to purchase insurance 6-8 weeks <u>prior</u> to clinical experience so the insurance company can process the necessary paperwork needed to show proof of insurance.

Attendance Policy

The Radiologic Technology Program consists entirely of college level instruction which requires the student to attend and perform at that level. Attendance for all instruction is required. Students are expected to arrive on time and be prepared for the scheduled class activities at the starting time assigned by the instructor. Students are expected to remain for the duration of all class sessions until dismissed by the instructor.

Absences

Attendance/ promptness – these two qualities are of the utmost importance. These qualities (being there and being on time) measure responsibility and dependability which are two of the most important personality traits that future radiographers should possess.

You are expected to be present (and on time) for all assigned classes – lectures classes, laboratory classes and clinical experience. If you are absent more times during the semester than the number of times the class meets per week, you may be **DROPPED** from the course at the discretion of the instructor. For example, a student having lecture twice a week, may be dropped for missing more than two lecture class sessions in a semester. If you are tardy more than three times during the semester, your course grade will be adjusted down a letter grade. After six late arrivals, you may be **DROPPED** from the course at the discretion of the instructor. When a student is dropped by an instructor with an effective date before the midterm date of the class a "W" will be recorded. When a student is dropped for non-attendance by an instructor with an effective date after the midterm date, the instructor will have the prerogative to assign a grade of "WF" or "W".

NOTE: The summer semester compresses the usual 16 weeks into 8 weeks; therefore, any single lecture or laboratory actually counts as two classes. Following the same logic any single absence actually counts as two absences, meaning a student may only have one absence per class in the summer semester. Since RT 102 only meets once per week, there should be no absences. Likewise, a student may only have two tardies per class in the summer semester. (See chart for tardy policy).

Vacations should always be scheduled during the break between semesters or during a scheduled break within the semester. Vacations should not be scheduled during the semester while classes are in session.

Lecture and Laboratory Classes Absentee Protocols

- 1. A student must personally notify the instructor of an absence <u>prior</u> to scheduled <u>lecture</u> or <u>laboratory</u> classes. Notify Larry Wheeler at 618-235-2700, ext. 5301 or Casie Dugan at 618-235-2700, ext. 5303.
- Absence from examinations must be supported by documentation acceptable to the
 instructor. It is the responsibility of the student with an excused absence, to contact the
 instructor for arranging make-up examination(s) during the <u>first</u> class session attended
 following the excused absence. Make-up examinations are administered at the
 discretion of the instructor.

3. Missed labs may require instructional assistance (LACE) at the discretion of the laboratory instructor. Mandatory LACE sessions will be required of students missing more than two laboratory classes in a semester. A LACE session form for lab make-up (in purple LACE book) needs to be filled out by the student during the first day back from the absence and placed in clinical coordinator's mailbox. The LACE time for missed labs should be made-up as soon as possible, either the same week or the immediate next week. Exceptions to this need to be arranged by the student with the clinical coordinator.

NOTE: Situations of extenuating circumstances will be addressed on an individual basis.

Clinical Absentee Protocols

- 1. A student must personally notify the clinical preceptor of an absence **prior** to the assigned scheduled clinical.
- A student <u>must also</u> personally notify the Clinical Coordinator, Larry Wheeler at 618-235-2700, ext. 5301 or Program Coordinator, Casie Dugan at 618-235-2700, ext. 5303 prior to the assigned scheduled clinical assignment.

NOTE: If a student arrives at the clinical site, but must depart early from the clinical site, the student **must personally** notify the clinical preceptor and the college.

- 3. Absence from scheduled clinicals <u>must</u> be made up as assigned by the program coordinator/clinical coordinator in conjunction with the clinical preceptor. Failure to make up missed clinical sessions may result in being dismissed from the program. When an absence from clinicals is known in advance, it is highly recommended that the student make arrangements to make up the clinical time prior to the absence, provided the absence and the make-up time all occur within the same semester. When clinical time is logged prior to the absence, it is typically referred to as banking and can only be done with approval by the program coordinator or the clinical coordinator. Banking of hours will not be allowed to be used to shorten the length of a semester.
- 4. The make-up time of missed clinical time should be completed as soon as possible, either the same week or the immediate next week. Exceptions to this, such as performing make-up time later than the immediate next week or during finals week, should be arranged by the student with the clinical coordinator. Make-up time should be performed in increments of a minimum of one hour. Make-up clinical time is clinical time and follows the same clinical absentee protocols as standard clinical time. Consequently, failure to attend a make-up clinical day would be logged as another absence.
- 5. Clinical assignments and schedules will be prepared by the program coordinator and clinical coordinator in consultation with the assigned clinical preceptor. **No** deviation from the schedule is allowed except with the permission of the program coordinator. Students who are **late** for a clinical assignment (for any reason) four (4) times during a semester may be dropped from that course, at the discretion of the program coordinator. The final course grade will be reduced proportionally to reflect less than six (6), but more than three (3) late arrivals by a student (See chart for tardy policy).

Tardy Policy for Lecture, Lab & Clinical Courses

Arriving Late/Leaving Early (Tardy)

Students who are **late/leave early** for a lecture, lab, or clinical (for any reason) **six times** during a semester may be **dropped** from that course. The final course grade will be reduced proportionately to reflect more than three late arrivals/early departures by a student. (The fourth late arrival/early departure drops the course grade by one letter grade.)

New Grade Based On # of Times Late/Early Departure

Original	# of Tardies					
Grade	1 2 3 4 5 6					6
Α	NA	NA	NA	В	С	D-Dropped
В	NA	NA	NA	С	D-Dropped	
С	NA	NA	NA	D-Dropped		

Bereavement Policy

At the beginning of each summer semester, the student will be awarded 2 bereavement days for the program year. The program coordinator grants these days for immediate family (child, spouse, parent, mother in-law, father in-law, grandparent, great-grandparent, sibling, stepparent, step-sibling and child of sibling). Bereavement days do not require make-up time.

Academic Dishonesty-College Policy

Academic misconduct including, but not limited to, cheating, plagiarism, and forgery; failure or refusal to follow clinical practice standards; and soliciting, aiding, abetting, concealing, or attempting such acts; may result in one of the following being imposed by the Program Coordinator: **Disciplinary Reprimand, Probation, Social Probation, Suspension, and Expulsion.**

Cheating: Working on a class assignment with others, including student tutors, when the instructor <u>has not</u> said that such collaboration activity is permitted. (While it is permissible to have general discussion about course work, unless your instructor tells you otherwise, any work you hand in must be a result of your individual effort and not the result of collaboration or plagiarism.)

Reproducing, sharing, discussing, or copying any test and/or quiz questions is not permissible and may be subject to immediate dismissal.

Plagiarism: Failing to enclose quotations in quotation marks, failing to cite a source, or incorporating another's work into your own.

Note: Falsification of any student information, such as but not limited to attendance records, competency forms or clinical evaluations, may be subject to immediate dismissal from the program.

Probation

A student may be placed on probation for academic or non-academic reasons. Academic reasons may involve not meeting the objectives in a lecture class, lab class, or clinical experience. Non-academic reasons may involve, but are not limited to, disciplinary issues, attendance issues, dismissal from a clinical site, or other misconduct issues. A probation agreement for the specific student with the specific reason for the probation, will be prepared in a fair and just manner. A student placed on probation will remain on probation for the remainder of the program. Failure to adhere to the probation agreement, as well as adhere to the Policies and Guidelines for Student Performance (known as the handbook), will result in dismissal. An event that triggers probation, by a student already on probation, will result in dismissal from the program.

Cell Phones and all other Electronic Devices (i.e. cameras, watches, tablets)

No phone calls/messages/texting, etc. are allowed in lecture, lab, or clinical. All electronics should be turned off and put away prior to entering the lecture, lab or clinical. Failure to follow this policy will be considered a student disruption under the Student Conduct Code. Electronic device misconduct may result in Disciplinary Reprimand, Probation, Suspension, and Expulsion. For exceptions, inform the instructor <u>prior</u> to the start of lecture, lab or clinical. Any permission for usage of electronic devices will be at the discretion of the instructor.

Note: Public Safety may be contacted at 618-235-2700, ext. 5221. Courtesy/Emergency message delivery is a service provided by Public Safety. It is the student responsibility to share this phone number with any person/parties that need an emergency contact phone number for the student. (This service is documented in the college catalog under the Department of Public Safety.)

Calculators

Scientific calculators are allowed for quizzes or exams. Graphing or other programmable calculators are never allowed for quizzes or exams. Calculators may not be shared during a quiz or exam. Cell phones may not be used as calculators in the classroom.

Internet Usage Policy

Internet usage on computers in classrooms should be limited to Radiology education purposes. **NO** personal internet usage is allowed. Personal internet usage may be done in the college library. Failure to comply is grounds for dismissal from the program.

Disciplinary Action

Since students in Health Sciences Programs are involved in learning situations which deal with human lives, the responsibility they have to those under their care demands that they adhere to certain rules and regulations. Honesty, integrity, and ethical conduct are essential and failure to adhere has consequences. Therefore, any breach of the above may lead to disciplinary action ranging from reprimand up to and including dismissal from the program. The faculty reserves the right to recommend the disciplinary action, including dismissal of any student, for any of the following types of misconduct:

- 1. Any adverse disruption of the lecture, laboratory or clinical learning environments.
- 2. Excessive tardiness and absenteeism.
- 3. Failure to comply with the rules and regulations of the affiliating health care facility regarding individual conduct including the use of profanity or curse words while in the affiliating health care facility.
- 4. Failure to comply with the rules and regulations and the code of ethics of the American Registry of Radiologic Technologists certification board and the American Society of Radiologic Technologists professional organization.
- 5. Abuse or inconsiderate treatment of patients.
- 6. Divulging any information, including idle conversation, concerning patients, their records, personnel records of employees, or any confidential information belonging to the affiliating health care facility (See Cooperating Agency Agreement, Appendix 5, Student Confidentiality Agreement, Appendix 6).
- 7. Theft or misappropriation of property belonging to the school, health care facility, patient, or co-worker.
- 8. Use or unauthorized possession of controlled or uncontrolled substances/drugs not specifically prescribed by a physician. Faculty reserves the right to randomly drug screen students at any time during the program, at the student's expense.
- 9. Use, intoxication, or unauthorized possession of any intoxicating beverage while on the premises of the school or affiliating health care facility.
- 10. Cheating, plagiarism, copying or allowing others to copy on examinations or assignments.
- 11. Knowingly obtaining, using, buying, selling, transporting or soliciting in whole or part the contents of an un-administered test.
- 12. Furnishing false information to faculty or college officials with the intent to deceive.
- 13. Dishonorable, unethical, or unprofessional conduct likely to deceive, defraud, or harm the public.
- 14. Failure to currently update the clinical record book to within 2 weeks after exams were performed will result first in a verbal warning. The 2nd violation will result in a written warning and may result in a 2-day suspension from the Program. The 3rd violation will result in dismissal from the Program. For students using Trajecsys the same guidelines apply.
- 15. Refusal to perform any examination (previously performed and competency achieved) in the clinical facility. However, the student has the right to professionally refuse to perform an examination if he/she believes that their safety is threatened, or if they have not yet acquired patient care skills to safely position a patient due to the patient's medical condition.

Student Social Media Policy

Social media is a valuable tool when used wisely. The very nature of this medium, however, can pose a risk as it offers instantaneous posting opportunities that allow little time for reflective thought and carries the added burden that what is posted on the Internet is discoverable by a court of law even when it is long deleted.

Students should be aware that postings on social media (even in private groups) may be seen by faculty, clinical supervisors, other members of the community. You need to be very careful about anything you post on a social network, and know that limiting access through privacy settings is not sufficient to ensure privacy. Minimize the risk of using social media by adhering to the following, as a breach may result in your dismissal from the clinic and/or the program:

- 1. Confidentiality:
 - a. Do not use names or identifiers of any patients' personal health information or patient information – Sharing individually identifiable information includes any information that relates to the past, present or future physical or mental health of an individual, or provides enough information that leads someone to believe the information could be used to identify an individual. Using a nickname, room number, diagnosis to refer to the patient in the post remains a breach in confidentiality.
 - b. Do not upload images of yourself, patients, or any others in a clinical environment, or any images taken of the clinical environment itself.
 - c. Do not disclose confidential information about the College, employees or students
- 2. Behavior: Harassment, Disrespectful, and Bullying
 - a. Do not make disparaging remarks about the college personnel, students, clinical preceptors, or patients even if not specifically identified.
 - b. Do not make threatening, harassing, profane, obscene, explicit, derogatory, discriminatory or other offensive comments.
- 3. Do not state personal opinions as being endorsed by the College or clinical site
- 4. Do not use of information and participate in activities that may violate an academic policy or local, state, or federal law or regulation, or clinical site policy.

The ease of posting and the commonplace nature of sharing information via social media may appear to blur the line between one's personal and professional lives. The quick, easy and efficient technology enabling use of social media reduces not only the time it takes to post, but also the time to consider whether the post is appropriate and what ramifications may come from posting inappropriate content. Pause before you Post.

ADDITIONAL SOCIAL NETWORKING GUIDELINES

- 1. Do not reveal too many personal details such as contact details, your date of birth, etc. Such information could put you at risk of identity fraud.
- 2. Healthcare providers occasionally have to take out restraining orders on obsessive patients so if you have any concerns, do <u>not</u> put yourself on a public networking site.
- 3. Do not upload any images of yourself or any others in a clinical environment, or any images taken of the clinical environment itself.
- 4. Before posting images or joining any causes be aware that it is not just your friends and colleagues who may see this but also patients and employers.

Letters of Recommendation/Release of Information (Personal and/or Academic)

If letters of recommendation need to contain personally identifiable information obtained from a student's education record, the student must provide written consent before the information may be released by the Program Coordinator or Clinical Coordinator. (See Letters of Recommendation/Release of Information, Personal/Academic, Appendix 7).

RADIATION PROTECTION POLICIES

One of the program's primary objectives is to educate the student about the necessity for the use of radiation protection methods for the patient, self, and others. The student education includes the use of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure.

The program will provide dosimeters for each student and the dosimeter must be worn while in the laboratory on campus and while on duty during clinical experience. Dosimeters must be worn by all students while in the radiology laboratory and during their clinical experience. Students not in compliance will not be allowed to remain in lab or at clinical and will be required to make-up all missed clinical hours. Quarterly reports, stripped of confidential information, will be printed by the program coordinator and made available to students within 30 days of receipt of the data. The reports are reviewed and initialed by the students, and later stored by the program coordinator.

If a dosimeter is lost or damaged, the program coordinator must be notified to inform the radiation monitoring company of the unusual occurrence. If the coordinator detects or radiation monitoring company detects and contacts the coordinator about an irregular exposure, the coordinator will talk with the student to determine the cause of the irregularity. If there were no abnormal occurrences or special circumstances that caused the irregular exposure on the dosimeter, a letter will be written by the program coordinator to the Illinois Emergency Management Agency to remove the irregular reading from the student's live-time dose. If it was determined that the dosimeter was deliberately tampered with or placed in unusual surroundings (under fluoro or near radiation doses), the student responsible will be dismissed from the program.

The following policies are derived from the National Council on Radiation Protection and Measurements (NCRP) reports 53, 54, 57, 91, 102, 105, and 116 from the Illinois Emergency Management Agency Division of Nuclear Safety Rules and Regulations. They are designed to protect the students, to convey awareness of the presence of ionizing radiation and to encourage safe habits in the clinical environment.

Note: During orientation prior to the start of the program, all students shall read the United States Nuclear Regulatory Commission (NRC) guide #8.13 on possible risks to the fetus and embryo and the NCRP Report No. 53. The student must sign an acknowledgment form stating that they understand the risk of prenatal exposure, and that they accept responsibility for any increased risk associated with exposure to an unborn child should they be pregnant. The signed forms will be placed in the students' files.

During the first semester, prior to the initial clinical experience in the second semester, all students will be taught basic radiation protection procedures. These instructions will provide

information so that students will be able to understand the possible biological risks of ionizing radiation to the embryo and fetus. These instructions will provide information so that all students value the application of radiation safety practices for the patient, self, and others. At the beginning of the second semester, which is the initial clinical experience, students will be reminded of basic radiation protection procedures taught during the first semester. At the beginning of semesters three through six, while the students have become more proficient regarding radiation protection, students will be reminded of basic radiation protection procedures.

In the fifth semester, the students will complete a Radiobiology course to learn more about the theory associated with safe radiation practices. In the sixth and last semester, the students will complete a Registry Review course, which reviews radiation protection.

These **six policies pertain and apply to all** Radiologic Technology Program students:

- 1. Students **Shall** always wear a dosimeter and it is to be worn at collar level. When wearing a lead apron, the dosimeter is to be worn outside of the apron.
- 2. Students **Shall** wear lead aprons while observing, assisting or performing mobile radiographic procedures.
- 3. Students **Must Not** hold IRs during any radiographic procedures and students Should Not hold patients during any radiographic procedures when an immobilization method is the appropriate standard of care. *
- 4. Students **Shall** wear lead aprons when observing fluoroscopic examinations and **Shall** also wear lead gloves and lead thyroid shield if the hands and neck are exposed while assisting, holding or positioning the patient.
- 5. When possible, students should **NOT** stand at the uncurtained part of the fluoroscopic tube while it is emitting x-rays.
- 6. Students at all clinical sites are expected to conform to all radiation safety standard as defined by federal, state, and local regulations.

*Student radiographers are trained to use immobilizing devices, such as but not limited to pigg-o-stats, tape, sandbags, and sheets. If a person needs to stay in the x-ray room to hold a patient or an IR, ideally it will be a non-pregnant person such as a parent, friend, relative, nurse, or non-radiology staff member. Only as a last resort should the person staying in the room be an occupationally exposed worker/student. The person that stays in the room should avoid standing in the primary beam and, as previously stated, should always don appropriate protective gear.

Radiation Protection Policy and Voluntary Declaration of Pregnancy Policy regarding Occupational Exposure of Fertile Women to Ionizing Radiation:

A number of studies have suggested that the embryo/fetus may be more sensitive to ionizing radiation than an adult, especially during the first three months (trimester) of gestation. The National Council on Radiation Protection and Measurements (NCRP) has recommended that special precautions be taken to limit exposure when an occupationally exposed woman could

be pregnant. Specifically, the NCRP has recommended the maximum permissible dose to the fetus from occupational exposure of the mother should not exceed 5 mSv (500 mrem) for the gestational period. Also, the embryo/fetus may not exceed 0.5mSv (0.05 rem) in any onemonth period. This fetal dose limit is $1/10^{th}$ of the dose limit for occupational workers. The embryo/fetal dose is limited to $1/10^{th}$ of the dose limit because the embryo/fetus is considered a member of the general population who is unwillingly brought into a hazardous environment by virtue of its mother's occupation. With the threshold adjusted for the time spent at clinicals, the program monthly fetal dose limit is 0.3 mSv (30 mrem)/month. Any readings over the M for minimal on a monthly fetal dosimeter report limit will prompt a meeting between the student and the program coordinator.

For protection of the unborn child, the student may discuss any suspected or confirmed pregnancy with the program coordinator. The student will be counseled regarding potential radiation risks and options regarding voluntary declaration of the pregnancy.

If the student chooses to formally declare their pregnancy:

- A. It is the responsibility of the student to voluntarily inform the program coordinator by a written declaration should pregnancy occur during the educational period. The written declaration must include the estimated date of conception. The estimated date of conception is necessary in the determination of the accumulated dose the embryo/fetus may have received prior to the declaration of pregnancy.
- B. The possible risks to the embryo/fetus shall be reviewed and the review documented by the program coordinator and the student. The student and the program coordinator will discuss the pregnancy options listed immediately below.
- C. The student will decide and the program coordinator will document one of the following **options:**
 - 1. A leave of absence may be taken until the birth of the child. All radiography grades will be recorded as withdrawn (W) if the student's grades are acceptable at the time. This will permit the student to return to the same semester the following year with no penalty.
 - 2. The student may continue in the program upon receipt of the student's written declaration of pregnancy and a written recommendation of the student's obstetrician or prenatal agency that has the student under its care. In this case, two dosimeters will be used, one worn at the collar outside of the lead apron for the whole body dose of the student and one worn at the waist level under the lead apron to record the embryo/fetal exposure. The student who chooses to continue in the program must acknowledge that all course objectives and rotations shall be equivalent to any and all students enrolled in those particular courses. Adherence to Policies #1-4 on the previous page should eliminate almost all fetal exposure. It is not recommended that pregnant students perform radiographic procedures on

patients with intracavitary or interstitial sources of gamma radiation. Upon request of the pregnant student to the clinical coordinator, clinical rotation schedules may be modified so as to schedule the student through low radiation areas, specifically during the first trimester.

Counseling on radiation procedures shall be done as needed or as requested by the student. Should the recorded fetal exposure reach 50 mSv (500 mrem) at any time during the pregnancy, the student will be required to take a leave of absence. (See item #1).

The monthly report, provided for the student by the program coordinator, will be reviewed and initialed by the student, and stored by the program coordinator.

- 3. The student may terminate the program.
- D. Exposure limits will apply until the student gives birth, notifies the program coordinator (in writing) that she is no longer pregnant, or informs the program coordinator (in writing) that she is no longer wishes to be considered pregnant by revoking her previously declared pregnancy.

The student has the right at any time to revoke the written declaration of pregnancy. The revoking of the declaration of pregnancy must be in writing.

(See Memo for the Record, Appendix 8, Declaration of Pregnancy, Appendix 9).

RADIATION OVEREXPOSURE PROTOCOLS

In compliance with Subpart B: Radiation Protection Programs, Section 340.110 of the Rules and Standards for Protection Against Radiation/32 Illinois Administrative Code, Parts 310 and 340; and Regulations for Medical X-Ray Facilities/32 Illinois Administrative Code, Parts 360 and 410 as mandated by the Illinois Emergency Management Agency Division of Nuclear Safety, the SWIC Radiologic Technology Program will follow the Occupational Dose Limits for Adults as specified in Section 340.210.

- a) The licensee or registrant shall control the occupational dose to individual adults, except for planed special exposures pursuant to Section 340.260, to the following dose limits:
 - 1. An annual limit, which is the more limiting of:
 - A. The total effective dose equivalent being equal to 0.05 Sv (5 rem); or
 - B. The sum of the deep dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 0.5 Sv (50 rem).
 - 2. The annual limits to the lens of the eye, to the skin and to the extremities which are:
 - A. An eye dose equivalent of 0.15 Sv (15 rem).
 - B. A shallow dose equivalent of 0.5 Sv (50 rem to the skin or to any extremity).
- b) Doses received in excess of annual limits, including doses received during accidents, emergencies and planned special exposures, shall be subtracted from the limits for planned special exposures that the individual may receive during the current year and during the individual's lifetime (see Section 340.260 (3)).
- c) The assigned deep dose equivalent and shallow dose equivalent shall be for the portion of the body receiving the highest exposure.

- d) The deep dose equivalent, eye dose equivalent and shallow dose equivalent may be assessed from surveys or other radiation measurements for the purpose of demonstrating compliance with the occupational dose limits, if the individual monitoring device was not in the region of highest potential exposure, or the results of individual monitoring are unavailable.
- e) pertain to radioactive nuclides and do not pertain to the radiography program.
- f) The licensee or registrant shall reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person during the current year. (See Section 340.250 (a) and (d)).

Student guidelines for radiation exposure dose is as follows: 50 mSv or 5000 mrem/year with the threshold adjusted for the time spent at clinicals as 30 mSv or 3000 mrem/year. Any readings over 100 mrem on a quarterly student dosimeter report will prompt a meeting between the student and the program coordinator. (For the threshold for a monthly or fetal report and values that prompt a meeting, see: Radiation Protection Policy and Voluntary Declaration of Pregnancy Policy regarding Occupational Exposure of Fertile Women to Ionizing Radiation.)

Energized Lab Policy

Dosimeters must be worn by all students during lab/LACE time. Students not in compliance will not be allowed to remain in class.

Only registered students and faculty are allowed in the lab. For LACE, radiology students should team up or plan on using other resources as the patient (mannequin, doll, etc.) Students must not be in the lab without a qualified radiographer. During exposures the door must be closed. When leaving lab, the door must be locked.

In the lab, students should never be in the radiation field and must not remain in the radiologic examination room during the use of ionizing radiation. All personnel must be behind the lead barrier wall during exposures. Exposures shall be performed on positioning phantoms and never performed on an individual. Students will never be used to immobilize phantoms during the exposure.

Students Must Not hold IRs during any radiographic procedures.

Radiation safety must be a priority during lab use to ensure no exposure to students and instructors. Students should practice ALARA (as low as reasonably achievable) and follow the cardinal principles of radiation safety: time, distance and shielding while at the clinical site.

Retention Policy

Any student receiving a final grade below "C" in any RT-prefixed course (or withdraws) will be placed on program probation, and will be required to repeat the course and must earn a grade of "C" or better. Depending upon when this occurs, it will likely extend the time of the two-year program; however, the program must be completed within a contiguous three (3) year period of time. If a student on probation receives a final grade below "C" in any subsequent RT-prefixed course (or withdraws), they will be dismissed from the program. Any student receiving two grades of less than a "C" in RT-prefixed courses (or withdrawing twice) during the same semester will be dismissed from the program.

Any student receiving a final grade below "C" in any non RT-prefixed program required course will be placed on program probation, and will be required to repeat the course and must earn a grade of "C" or better. Depending upon when this occurs, it will likely extend the time of the two-year program; however, the program must be completed within a contiguous three (3) year period of time. If a student on probation receives a final grade below "C" in any subsequent non RT-prefixed course they will be dismissed from the program. Any student receiving two grades of less than a "C" in any non RT-prefixed program required courses during the same semester will be dismissed from the program.

Re-entry into the program

Students leaving the program due to personal circumstances may be given considerations regarding re-entry admission into the program via an exit interview. It is the student's responsibility to schedule the appointment with the program coordinator for the exit interview. It is highly advisable to complete the exit interview as soon after leaving the program as possible, and the exit interview must be completed within the semester of departure. For reentry, the exit interview must be completed and be on file.

If a student leaves after the program start date, and if the recommendation in the exit interview included re-entry the following year, stipulations of re-entry will be identified in a reentry agreement. Stipulations may include, but are not limited to: performing tutoring sessions (LACE) to evaluate clinical competency, taking written examinations to evaluate the knowledge base, taking/auditing radiologic technology courses to refresh the knowledge base, and updating the medical form to re-establish medical information. The cost of taking/auditing radiologic technology courses will be the student responsibility. Also, the cost of updating the medical form will be the student responsibility.

If circumstances permit re-entry into the program, all RT classes must be completed within a contiguous three (3) year period of time. The student will adhere to all policies, procedures, and curriculum current at the time of re-entry. Faculty will provide section assignments.

Southwestern Illinois College

Radiologic Technology Program Clinical Competency Requirements

There are core clinical competencies that all Radiologic Technology Program graduates must demonstrate to establish eligibility for ARRT certification. This document describes the competency requirements for Radiography that became effective January 2022. The requirements listed are the minimum core clinical competencies necessary for graduation from Southwestern Illinois College with an Associate of Applied Science Degree in Radiologic Technology and to establish eligibility for participation in the ARRT Radiography examination. This document will be periodically updated to reflect changes in the requirements of professional practice.

Definitions:

Backfills – to log performance of a radiographic procedure on a patient, to replace (or backfill) a previously logged entry performed as a simulated competency.

Competency – is demonstrated by performing radiographic procedures on a patient.

Simulation – is demonstrated by performing radiographic procedures on a phantom or some other non-patient person or object.

Note: The ARRT requirements specify that certain clinical procedures may be simulated. Simulations must meet the following criteria: 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.

Trauma – trauma is considered a serious injury or shock to the body and requires modifications in positioning and monitoring of the patient's condition. Simply put, positioning would be different from the "routine". A great example is a hip that requires a cross table lateral. A procedure that requires no positioning modification, even though it may be performed on an emergency room patient would not be a trauma per the competency process.

Geriatric patient – patient is physically or cognitively impaired as a result of aging.

Clinical Requirements:

Students must demonstrate competency in all 36 mandatory (M) Radiological Procedures. Up to 13 mandatory procedures may be simulated for the entire program.

Students must demonstrate competency in 15 of the 34 elective (E) Radiological Procedures. Students must select one elective procedure from the Head section and must select two elective procedures from the Fluoroscopy section and Category IV as part of the 15 electives.

In addition to the Radiological Procedure competencies, ten General Patient Care competencies are mandatory. These competencies may be simulated.

Per the SWIC Radiologic Technology program, second year students, in the fall and spring semesters re-comp on all mandatory radiographic procedures*.

*exceeds the ARRT requirements Revised January 2022

Guidelines for Competency:

Students will learn, perform, and test on projections/positions one semester prior to performing the examination at the clinical site. For example: Category I comps will be completed during the fall semester of the first year after the student has learned about those exams in the prior semester (summer semester) of that first year.

Students may perform more than one competency per patient. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur but not both).

Multiple students cannot comp on the same patient (one student – one patient).

Any repeat radiographs performed require **direct** supervision.

Fall and spring semesters of the first year, students can only work ahead if category for that semester is completed per the following: less than 25% simulations and an approval signature from the Program Coordinator or Clinical Coordinator in the clinical book.

Second year students re-comp on all mandatory examinations in Categories I through III during their last two semesters (fall and spring). Re-comps should not be performed in RT 160 during the summer semester. The summer semester should be focused on Category III and backfilling previous categories

Category I – RT 112 Freshman year, fall semester

Imaging Procedures		Ì	1	5	ation	Comp	leted	Ву	
	i		Simulation	ı	II	I	II	ı	II
Chest routine	M								
Chest AP w/c or stretcher	M								
Chest age 6 or younger	M		S						
Chest routine geriatric	М								
Chest lat decubitus		E	S						
Abdomen supine	M								
Abdomen upright	M		S						
Abdomen decubitus		E	S						
Abdomen age 6 or younger		E	S						
Finger or thumb	M		S						
Hand	M								
Wrist	M								
Forearm	M								
Elbow	M								
Toes		E	S						
Foot	M								
Calcaneus		E	S						
Ankle	M								
Tibia-Fibula	M		S						
Knee	M				_				
Patella		E	S						
Upper or lower ext. age 6 or younger	?	E	S						
Upper or lower ext. geriatric	M								

Category II – RT 152 Freshman year, spring semester

Radiographic	Mandatory	Elective	Eligible for	Patient or Simulation	Date Completed	Verified By
Imaging Procedures	manaator,	2.000.70	Simulation	I II	I II	I II
Humerus	M		S			
Humerus	IVI		3			
Shoulder	М					
Shoulder/Humerus						
trauma (scapular Y, axillary or transthoracic)	M					
Trauma: upper ext.						
nonshoulder	M					
Trauma: lower ext.	М					
Femur	М		S			
Llin	N 4					
Hip Cross-table lat. hip	M					
(horizontal beam, pt.						
recumbent)	M		S			
			-			
Hip or spine geriatric		Е				
Pelvis	M					
Fluoroscopy Section						
Upper GI single or double		E				
Barium enema single or double		E				
Esophagus (NOT						
Swallowing Dysfunction						
study)		E				
Small bowel series		E			_	
Siliali bowei series						
IVU / IVP		E				
Cervical spine	M					
Thoracic spine	M		S			
Lumbar spine	M					
Cross-table lat spine						
(horizontal beam, patient						
recumbent)	M		S			
Scoliosis series		Е	S			
Sacrum and/or coccyx		E	S			
Sacroiliac joints		E	S			

Category III – RT 160 Sophomore year, summer semester

Radiographic	Mandatory	Elective	Eligible for	Patient of Simulation		ate pleted	Verifi By	
	ivialidatory	Elective	Simulation		I	ll	I By	II
Imaging Procedures			Simulation	<u> </u>	•	- "	'	11
Scapula		E	S					
эсариіа		<u> </u>	3					
Clavicle	M		S					
Clavicic	141		3					
AC joints		Е	S					
j		_						
SC joints		Е	S					
-								
Ribs	M		S					
Sternum		E	S					
Upper airway (soft								
tissue neck)		E	S					
Head Section								
Skull		E	S					
			_					
Paranasal sinuses		E	S					
		_						
Facial bones		Е	S					
Negal beneg		_						
Nasal bones		Е	S					
Orbits		E	S					
Orbits		L	3					
Mandible		Е	S					
Temporomandibular								
Joints		Е	S					
		_						
Mobile chest	М							
	1							
Mobile abdomen	М							
Mobile upper or lower ext.	М							
Mobile age 6 or								
younger		E	S					
C-arm procedure (more								
than one projection)	М		S					
Surgical C-arm (sterile	1		-					
field)	М		S					
/	1	1	i –	1		1	1	L

Category IV – RT 241 and RT 299 Sophomore year, fall and spring semesters Fluoroscopy Studies

	Mandatory	Elective	Eligible for Simulation	Date Completed	Patient or Simulation	Verified By
Cystography -						
Cystourethrography		E				
Myelography		E				
ERCP		E				
Arthrography		E				
Hysterosalpingography		E				

Category V – RT 242 Sophomore year, fall semester

	Date Completed	Verified By
Ultrasound Procedures		
Observe, assist and provide documentation		
Nuclear Medicine Procedures		
Observe, assist and provide documentation		
Radiation Therapy Procedures		
Observe and provide documentation		

Category VI – RT 298 Sophomore year, spring semester

	Date Completed	Verified By
CT Procedures		
Observe, assist and provide documentation		
MRI Procedures		
Observe, assist and provide documentation		
IR Procedures		
Observe and provide documentation		

General Patient Care Competencies

In addition to the Radiological Procedures, students must complete the following mandatory General Patient Care competencies. They may all be simulated.

	Date Completed	Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs - Temperature		
Vital Signs - Pulse		
Vital Signs - Respiration		
Vital Signs - Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift,		
Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank,		
IV Tubing)		

Sophomore year – Due at end of program

Procedures Performed	Total
Thorax	
Abdomen	
Upper extremity	
Lower extremity	
Humerus, shoulder	
Femur, pelvis	
Fluoroscopy	
IVP	
Vertebral column	
Bony thorax	
Head	
Mobile	
Surgery	
Ultrasound	
Nuclear Medicine	
Oncology	
СТ	
MRI	
Special Examinations	
Grand total	

ADDITIONAL COMPETENCIES REQUIRED FOR GRADUATION – This list applies to all versions of documents titled: Radiologic Technology Program Clinical Competency Requirements.

A student's performance in the clinical facility requires demonstration of knowledge, ability and initiative. To achieve the necessary requirements for graduation, the following competencies must be met by the student:

- 1. Use of oral and written medical communication
- 2. Demonstrate knowledge of human structure, function and pathology
- 3. Anticipate and provide basic patient care and comfort and apply principles of body mechanics

Please note: A student will need to palpate patients in order to provide patient care. Students are taught how to palpate patients in an appropriate manner.

- 4. Perform basic mathematical functions
- 5. Operate radiographic imaging equipment and accessory devices
- 6. Position the patient and imaging system to perform diagnostic radiographic examinations and procedures
- 7. Modify standard procedures to accommodate for patient condition and other variables
- 8. Process images
- 9. Determine exposure factors to obtain diagnostic quality radiographs with minimum radiation exposure
- 10. Adapt exposure factors for various patient conditions, equipment, accessories and contrast media to maintain appropriate radiographic quality
- 11. Practice radiation protection for the patient, self and others
- 12. Recognize emergency patient conditions and initiate first aid and basic lifesupport procedures
- 13. Evaluate radiographic images for appropriate positioning and image quality
- 14. Evaluate the performance of radiographic systems, know the safe limits of equipment operation, and report malfunctions to the proper authority
- 15. Demonstrate knowledge and skills relating to quality assurance
- 16. Exercise independent judgment and discretion in the technical performance of medical imaging procedures

Competency Education and Evaluation - Classroom and Energized Laboratory

The cognitive and psychomotor aspects of the Radiologic Technology curriculum occur simultaneously. The classroom and energized laboratory practicum will correlate to assure a meaningful clinical participation.

The student's cognitive abilities will be demonstrated by objective testing based on lecture presentations.

After the instructor demonstrates positioning of specific category examinations, based on presented lectures, the student will practice performing these category examinations utilizing phantoms, radiographic and processing equipment, simulation of examinations, interpretation of image critique, and quality assurance.

After demonstrating laboratory competency in specific categories, the student will be evaluated for category performance according to laboratory evaluation objectives. Upon successful achievement of category performance, the student will be allowed to perform specific category examinations on a patient in the clinical facility under direct supervision of a clinical preceptor or appointed staff member.

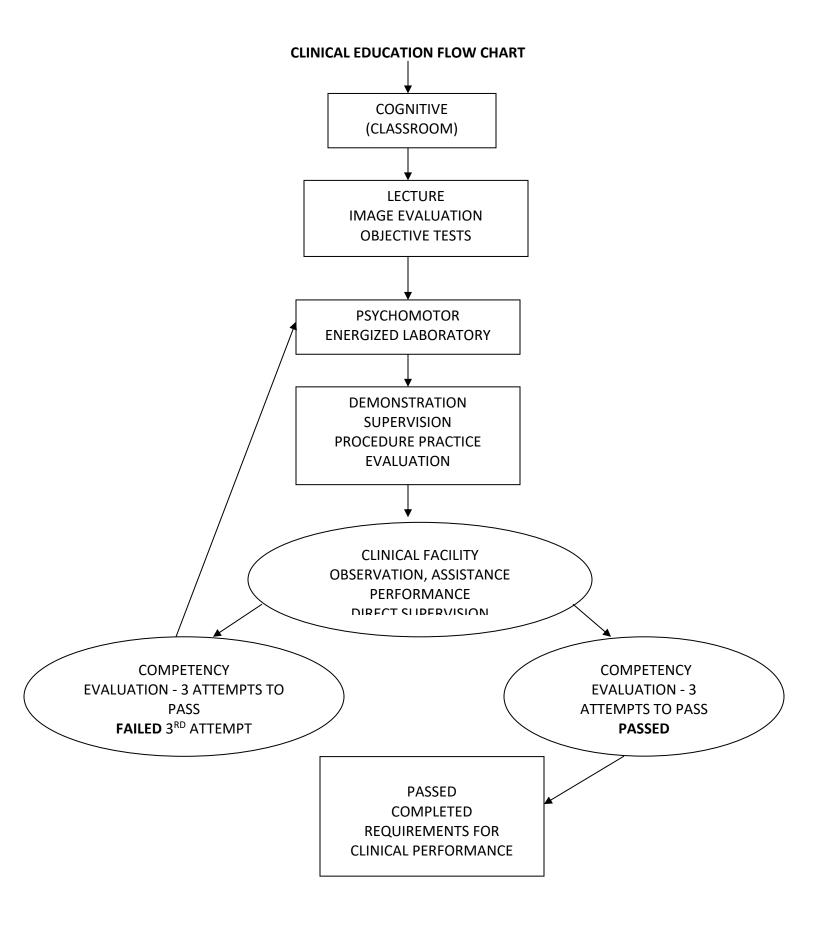
Category examination time schedules, according to semester presentations will be closely followed. (Clinical Competency requirements/Additional Competencies required for graduation)

Clinical Education in Radiologic Technology:

General Purpose

The purpose of clinical education in Radiologic Technology is to allow the student to apply theoretical principles of radiography, patient care and departmental procedures to practical experience.

Clinical education consists of the student's participation by observing, assisting an' performing radiographic examinations with direct or indirect supervision. The student is perfecting and expanding clinical performance.



Relationships with Clinical Education Sites

During the student's assignment at the clinical education site, they will observe the regulations and policies imposed by the site with regard to departmental and examination procedures, patient safety and welfare, attendance and room rotations.

The student's role in the clinical education site is one of a learner and <u>not</u> a staff technologist. As a learner, the student is directly responsible to the appointed clinical supervisor/preceptor or staff member in charge of the room to which the student is assigned. If any operational or personal problem arises, the clinical supervisor or preceptor should be contacted.

Clinical Education Site Orientation

The student will complete, at their assigned clinical education site, a departmental orientation, introduction and facility tour. This may occur on the first day of clinical experience or is sometimes arranged in advance. Personal information will be obtained as required, and time schedules will be arranged according to the course schedules.

Clinical Progress

The program coordinator and faculty will visit the clinical facility on a regular basis to review student's clinical progress. The clinical coordinator may also observe the student(s) during visits to evaluate their clinical progress. Clinical education site clinical preceptors may contact the program coordinator or the clinical coordinator at any time to discuss student(s) progress or student(s) situations or problems that require immediate attention.

Clinical Examination Documentation

In order for the college to certify that the student has fulfilled all the requirements as established by the American Registry of Radiologic Technologists (ARRT), the Joint Review Committee on Education in Radiologic Technology (JRCERT), and the North Central Association for Accreditation of Community Colleges, it is imperative that clinical hours, radiographic examinations and dosimetry records be recorded and maintained for the student's permanent file. Trajecsys and/or the clinical record book is designed to keep a well-established record of clinical experience in the major categories of radiographic examinations.

Failure to keep Trajecsys and/or the clinical record book updated in its entirety, to within 2 weeks after exams were performed, may result in dismissal from the program.

The number of all procedures performed in the clinical site will be totaled during May of the second year, prior to graduation, and collected by the program coordinator and clinical coordinator. The number of examinations will be recorded on Trajecsys and/or the category examination sheet provided in the clinical record book. This record becomes part of the student's permanent file.

Clinical hours and attendance records are maintained by the student and reviewed by the clinical preceptor, clinical coordinator and program coordinator. After graduation they are available upon request, contingent upon the regulations set forth in the Family Rights and Privacy Act.

Clinical Education Terminology

DIRECT supervision

Until students achieve the program's required competency in a given procedure, all clinical assignments should be carried out under the **DIRECT** supervision of qualified radiographers. Following are the parameters of **DIRECT** supervision:

- 1. The qualified radiographer supervises the student.
- 2. The qualified radiographer reviews the request for examination in relation to the student's ability.
- 3. The qualified radiographer evaluates the condition of the patient in relation to the student's ability.
- 4. The qualified radiographer <u>is physically present</u> during the student's examination performance.
- 5. The qualified radiographer reviews and approves the images.
- 6. The qualified radiographer is present during student performance of a repeat of any unsatisfactory image.

INDIRECT supervision

INDIRECT supervision is defined as that supervision provided by a qualified radiographer immediately available to assist students for completed competency procedures regardless of the level of student achievement. However, if an image needs to be repeated, the **REPEAT IMAGE POLICY** shall be adhered to, and a qualified radiographer will be **physically present in the room** for the repeated image or exam. **(See Repeat Image Policy)**

Immediately available is interpreted as the physical presence of a qualified practitioner 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. Informally, indirect supervision may be described as "within shouting distance". Phone, pager, intercom access, etc. is not considered acceptable. Portables/surgical cases should never be done alone by a student or by students.

Clinical site

Clinical sites are recognized by the JRCERT as meeting appropriate qualifications for delivering clinical education and evaluation of clinical competency. A minimum of one clinical preceptor is designated at each site. Clinical sites involve patient care.

Observation site

Observation sites are used for student observation of the operation of equipment and/or procedures. Students are not involved in patient care.

Image Evaluation Documentation

With the cooperation of the clinical facilities, students obtain diagnostic radiographic images (copies without protected health information) to bring to campus. The films/images are evaluated as group critiques in classes.

Clinical Education Sites (alphabetically)

Clinical Site	City	State
Alton Memorial	Alton	IL
Alton MultiSpecialists	Alton	IL
Anderson Hospital	Maryville	IL
Barnes-Jewish Hospital (BJC)	St. Louis	MO
Carlinville Area Hospital	Carlinville	IL
Christian Hospital Northeast	St. Louis	MO
Community Memorial Hospital	Staunton	IL
Gateway Regional Hospital	Granite City	IL
Goshen Imaging	Edwardsville	IL
Jersey Community Hospital	Jerseyville	IL
Maryville Imaging	Maryville	IL
Memorial Hospital Belleville	Belleville	IL
Memorial Hospital East	Shiloh	IL
Memorial Hospital Chester	Chester	IL
Mercy Hospital South	St. Louis	MO
Northwest Healthcare, Christian	Florissant	MO
Red Bud Regional Hospital	Red Bud	IL
Shriners Hospitals for Children	St. Louis	MO
Sparta Community Hospital	Sparta	IL
SSM Cardinal Glennon Children's Hospital	St. Louis	MO
St. Anthony's Health Center	Alton	IL
St. Elizabeth's Hospital	O'Fallon	IL
St. Louis University Hospital	St. Louis	MO
Touchette Regional Hospital	Centreville	IL

Clinical Education Sites (list by city within state, with phone numbers)

	Illinois		
City – Clinical site	Address	Main number	Department number
Alton, IL			
Alton Memorial	One Memorial Drive	618-463-7311	618-463-7250
Alton MultiSpecialists	One Professional Drive	618-463-8530	618-463-8530
St. Anthony's Health Center	1 St. Anthony's Way	618-465-2571	618-474-6441
Belleville, IL			
Memorial Hospital	4500 Memorial Drive	618-233-7750	618-257-5005
Carlinville, IL			
Carlinville Area Hospital	20733 North Broad St.	217-854-3141	217-854-3141 ext 307
Centreville, IL			
Touchette Regional	5900 Bond Avenue	618-332-3060	618-332-5463
Chester, IL			
Memorial Hospital	1900 State	618-826-4581	618-826-4581 ext 1224
Edwardsville, IL			
Goshen Imaging	3417 Anderson Healthcare Dr #101	618-288-4929	618-288-8480
Jerseyville, IL			
Jersey Community Hospital	400 Maple Summit Rd	618-498-6402	618-498-8383
O'Fallon, IL			
St. Elizabeth's Hospital	1 st St. Elizabeth Blvd	618-234-2121	618-234-2121, ext 1649
Granite City, IL			
Gateway Regional	2100 Madison Avenue	618-798-3000	618-798-3181
Maryville, IL			
Anderson Hospital	6800 State Route 162	618-288-5711	618-288-5711 ext 5435
Maryville Imaging	2023 Vadalabene Dr.	618-288-4929	618-288-4929
Red Bud, IL			
Red Bud Hospital	325 Spring Street	618-282-3831	618-282-3831 ext 5133
Shiloh, IL			
Memorial Hospital East	1404 Cross Street	618-607-2124	608-607-2125
Sparta, IL			
Sparta Community Hospital	818 E. Broadway	618-443-2177	618-443-1396
Staunton, IL			
Staunton Community Memorial	400 Caldwell Street	618-635-2200	618-635-4308

Missouri

City – Clinical site	Address	Main number	Department number
St. Louis, MO			
Barnes-Jewish Hospital BJC	4511 Forest Park Ave	314-747-3000	314-362-2834
Christian Northeast	11133 Dunn Road	314-653-5000	314-653-5552
Mercy Hospital South	10010 Kennerly Road	314-525-1000	314-525-1063
Northwest Healthcare, Christian	1225 Graham Road	314-953-6000	314-953-6557
Shriners Hospitals for Children	4400 Clayton Avenue	314-432-3600	314-872-7832
St. Louis University Hospital	1201 South Grand Blvd.	314-257-8000	314-257-1420
SSM Cardinal Glennon	1465 S. Grand	314-577-5600	314-577-5652 press 7

Clinical Education Site Assignment and Rotation Schedules

Clinical education assignments will be arranged by the program coordinator/clinical coordinator in conjunction with the affiliating clinical education sites. The students will receive schedules at the beginning of each semester. The scheduled assignment will be adhered to closely. Only scheduled clinical education in an accredited affiliating facility shall be recognized by the college as meeting the required hours of clinical experience.

Students who do not report to the assigned clinical education site, as stated in the rotation schedules, are subject to program dismissal. Changes in the clinical education site assignment will occur only at the discretion of the program coordinator/clinical coordinator and clinical preceptor.

The clinical preceptor will prepare a rotation schedule for the site (site specific by room or RT or **Rotation of Assignment Schedule, Appendix 10).** This rotation schedule for the site will provide the student with sufficient exposure to all radiographic procedures. Room/RT rotations are to be scheduled according to the semester performance time schedule.

Staffing considerations should allow for a radiographer for each student (a 1:1 ratio). If the case is rare, a second student may also observe the procedure. Other than a rare case, there should never be more than one student with a radiographer as there will only be one student scheduled with a radiographer.

Clinical Education Site Schedules

Absences (see Absence Policy)

Students will report to the clinical education site during the semesters assigned by the program coordinator/clinical coordinator. Time schedules are prepared by the clinical preceptors. Students must record daily attendance on the forms provided *(Clinical Attendance Form, Appendix 11)* or record daily attendance through Trajecsys.

The clinical education performance **contact hours** are as follows:

First Year	Fall semester	15 hours per week/16 weeks
	Spring semester	15 hours per week/16 weeks
Second Year	Summer semester	30 hours per week for 8 weeks
	Fall semester-Diagnostic	20 hours per week/13 weeks
	Radiation Therapy	1 week/20 hours
	Nuclear Medicine	1 week/20 hours
	Ultrasonography	1 week/20 hours
	Spring semester-Diagnostic	20 hours per week/13 weeks
	Interventional Radiology	1 week/20 hours
	MRI	1 week/20 hours
	СТ	1 week/20 hours

Clinical Schedules/College Calendar

- 1) The college academic calendar will be followed.
- 2) School holidays and semester breaks will be observed.

First year students are required to be at the clinical site 15 hours per week for 16 weeks in the Fall and Spring semesters.

Second year students are required to be at the clinical site 30 hours per week for the 8-week Summer semester and during the Fall and Spring semesters, for 20 hours per week.

3) Clinical education will adhere to college day class hours and facility work shifts within these timeframes:

Monday – Friday Clinical Education site day shift - between 7:00 A.M. – 5:00 P.M. A routine full day is 7.5 hours of clinical time and 30 minutes for lunch, Any clinical education that extends beyond 5 hours in duration requires that a 30-minute lunch is taken.

(Example: A 2nd year student plans to perform 1.5 hours of make-up time on a Friday and they are already scheduled to perform 5 hours of clinicals on that Friday. The student will be at the clinical site for a total of 7 hours, consisting of work for 6.5 hours with a 30-minute lunch.

Any alteration to the clinical hours (hours, rotations, days, etc.) must be approved by the program coordinator or clinical coordinator in writing prior to the change.

No clinical education should extend beyond a 10-hour day. **Total didactic and clinical involvement never extends beyond 40 hours per week.**

4) During the second year, summer semester, students will perform 30 hours per week of clinical education experience during various facility work shifts for exposure to different circumstances presented by patients and procedures. Appointed qualified personnel must be present. The shift must extend until at least 8:00pm and may go later; however, the shift must terminate by 9:50pm. The prior agreement of the program coordinator/clinical coordinator must be obtained before scheduling the above shifts.

If the clinical site (perhaps an imaging center) does not offer this opportunity, it can be delayed until the following fall semester.

5.) It should be noted that the time scheduled for each clinical rotation is the minimum number of hours.

Clinical Education Time Schedule

FIRST YEAR

A. Summer Semester

1. The student spends the entire summer semester on campus in the classroom (cognitive) and energized lab setting (psychomotor) preparing for entrance into the clinical education site during the following fall semester.

B. Fall Semester – Clinical Objectives

- 1. The student is assigned to a clinical education site during the fall semester.
- 2. **Perform** exams in clinical education site 15 hours per week during regular scheduled college class hours. School holidays will be observed.
- 3. **Observe** the general functions of the radiology department.
- 4. **Assist** and **perform** routine imaging processing techniques and quality assurance procedures when provided.
- 5. Observe, assist and perform with DIRECT supervision, all examinations as stated in Category
- I. Category competency must be achieved in the energized lab prior to performance.
- 6. **Perform** all examinations as stated in Category I for successful completion of category competency evaluation.
- 7. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluation, all examinations as stated in Category I.
- 8. Observe, assist and perform with DIRECT supervision, all examinations as stated in Category
- II. Category competency must be achieved in the energized lab prior to performance.
- 9. Observe and assist with DIRECT supervision, all examinations as stated in Category III.
- 10. **Observe** and **assist** with **DIRECT** supervision, trauma radiographic examinations.

C. Spring Semester – Clinical Objectives

- 1. The student is assigned to a clinical education site during the spring semester.
- 2. **Perform** exams in clinical education site 15 hours per week during regular scheduled college class hours. School holidays will be observed.
- 3. **Observe** the general functions of the radiology department.
- 4. **Assist** and **perform** routine image processing techniques and quality assurance procedures when provided.
- 5. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluations, all examinations stated in Category I.
- 6. **Observe**, **assist** and **perform** with **DIRECT** supervision, all examinations as stated in Categories II.
- 7. **Perform** examinations as stated in Categories II for successful completion of category competency evaluation.
- 8. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluation, all examinations as stated in Categories II.
- 9. Observe, assist and perform with DIRECT supervision, all examinations as stated in Category
- III. Category competency must be achieved in energized lab prior to performance.
- 10. **Observe, assist** and **perform** with **DIRECT** supervision, trauma radiographic examinations.
- 11. Observe and assist with DIRECT supervision, all examinations as stated in Category IV.

A. Summer Semester - Clinical Objectives

- 1. The student is assigned to a clinical education site during the summer semester.
- 2. **Perform** exams in clinical education site 30 hours per week during regular scheduled college class hours. School holidays will be observed.
- 3. **Observe** the general functions of the radiology department.
- 4. **Assist** and **perform** routine image processing techniques and quality assurance procedures when provided.
- 5. Students will spend one week (30 hours) on evening shift for exposure to different circumstances related to patients and procedures.
- 6. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluations, all examinations as stated in Categories I and II.
- 7. **Observe**, **assist** and **perform** with **DIRECT** supervision, all examinations as stated in Category III.
- 8. **Perform** all examinations as stated in Category III for successful completion of category competency evaluations.
- 9. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluations, examinations as stated in Category III. Mobile, surgery and c-arm procedures will **always** be performed with **DIRECT** supervision.
- 10. **Observe, assist** and **perform** with **DIRECT** supervision, trauma radiographic examinations.

B. Fall Semester – Clinical Objectives

- 1. The student is assigned to a clinical education site during the fall semester.
- 2. **Perform** exams in clinical education site 20 hours per week during regular scheduled college class hours. School holidays will be observed.
- 3. **Observe** the general functions of the radiology department.
- 4. **Assist** and **perform** routine image processing techniques and quality assurance procedures when provided.
- 5. Clinical education performance in nuclear medicine, oncology, and ultrasound will consist of 20 hours per week for each modality.
- 6. Students may be assigned to a different clinical facility for modality rotations.
- 7. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluations, all examinations as stated in Categories I, II, and III. Mobile, surgery and c-arm procedures will **always** be performed with **DIRECT** supervision.
- 8. **Observe**, **assist** and **perform** with **DIRECT** supervision, all examinations as stated in Category IV. Competency for Category IV will be attained during the fall or spring semesters.
- 9. **Observe**, **assist** and **perform** with **INDIRECT** supervision, trauma radiographic examinations, according to the student's ability and the discretion of the clinical instructor and clinical facility.
- 10. **Perform 50%** of all examinations for final competency (re-comps) evaluations as stated in Categories I, II, and III.
- 11. **Observe** and **assist** with **DIRECT** supervision, all routine procedures in nuclear medicine.
- 12. **Observe** with **DIRECT** supervision, all routine procedures in oncology treatments.
- 13. **Observe** and **assist** with **DIRECT** supervision, all routine procedures in ultrasound.

C. Spring Semester – Clinical Objectives

- 1. The student is assigned to a clinical education site during the spring semester.
- 2. **Perform** exams in clinical education site 20 hours per week during regular scheduled college class hours. School holidays will be observed.
- 3. **Observe** the general functions of the radiology department.
- 4. **Assist** and **perform** routine image processing techniques and quality assurance procedures when provided.
- 5. Clinical education performance in computerized tomography (CT), magnetic resonance imaging (MR), and interventional radiology (IR, also known as special procedures) will consist of 20 hours per week for each modality.
- 6. Students may be assigned to a different clinical facility for modality rotations.
- 7. **Perform** with **INDIRECT** supervision, after successful completion of category competency evaluations, all examinations as stated in Categories I, II, and III. Mobile, surgery and c-arm procedures will **always** be performed with **DIRECT** supervision.
- 8. **Observe**, **assist** and **perform** with **DIRECT** supervision, all examinations as stated in Category IV. Competency for Category IV will be attained during the fall or spring semesters.
- 9. **Observe**, **assist** and **perform** with **INDIRECT** supervision, trauma radiographic examinations, according to the student's ability and the discretion of the clinical instructor and clinical facility.
- 10. **Perform remaining 50%** of all examinations for final competency (re-comps) evaluations as stated in Categories I, II, and III. These re-comps should be performed by the end of week
- 11. **Observe** and **assist** with **DIRECT** supervision, all routine procedures in CT.
- 12. **Observe** and assist with **DIRECT** supervision, all routine procedures in MR.
- 13. **Observe** and **assist** with **DIRECT** supervision, all routine procedures in IR (special procedures).

Clinical Education Competency and Simulation Schedule

	Category I	Category II	Category III	Category IV	Category V	Category VI
Fall 1 st year RT 112	Competency/ Simulations					
Spring 1 st year RT 152	Backfill	Competency/ Simulations				
Summer 2 nd year RT 160	Backfill	Backfill	Competency/ Simulations			
Fall 2 nd year RT 241	Re-comp Mandatories	Re-comp Mandatories	Re-comp Mandatories	Competency/ Simulations		
Fall 2 nd year RT 242					Observation	
Spring 2 nd year RT 299	Re-comp Mandatories	Re-comp Mandatories	Re-comp Mandatories	Competency/ Simulations		
Spring 2 nd year RT 298						Observation

Clinical Category Competency Evaluation Guidelines

After a student has successfully performed a category examination, the student may request to be evaluated in that particular category of radiographic examinations. Simulations can be performed for competency when limited examinations exist in a particular category. (See Guidelines for Competency Simulations)

The clinical preceptor or appointed staff member will observe the performance for evaluation and document examination on the appropriate form *(Clinical Category Competency Evaluation Form, Appendix 12a).* For students using Trajecsys this information will be completed electronically.

- 1. Category competency evaluations will be performed according to specified semesters (time sequence). Initial evaluations will be performed during the first year, fall and spring semesters and second year, summer semester. Final evaluation will be performed during the second year, fall and spring semesters.
- 2. Objective guidelines are provided for evaluator's reference (Evaluation Criteria for Performance in Clinical Facilities Grading Criteria, Appendix 12b).
- 3. Pass/fail grade prevails.
- 4. Examinations will be performed according to the clinical education site departmental procedures.
- 5. All ten performance objectives must be met, per position, per examination, to achieve a passing grade.
- 6. Student will be allowed to perform category examinations three times to achieve a passing grade.
- 7. If a student fails the competency evaluation 3 times, the student will not progress to the next category until they have successfully completed the preceding category and the student will return to the energized laboratory for additional instruction and practice.
- 8. If the student does not successfully complete all category evaluations as specified for each semester, they will receive a grade of I-Incomplete for the course. The student will continue at their assigned clinical site during semester break until successfully completing all assigned categories. The grade will then be changed to the appropriate letter grade. (See course grade scale).

NOTE: If the student does not complete all final competencies they will not have met the requirements for graduation. The final competencies required for graduation are included as *Clinical Competency Requirements/Additional Competencies required for graduation*.

- 9. Upon successful completion (pass) of specific category competency evaluation, the student will be allowed to perform all examinations within that category with indirect supervision. The student will be allowed to perform all examinations while pursuing the experience required to perform examinations that apply to the next category competency evaluation.
- 10. Final category competency evaluations will be performed as follows:

Second year, fall semester, 50% to 75% of all category examinations to be performed and documented. Second year, spring semester, remaining 50% or 25% of all category examinations to be performed and documented. Final evaluations include all mandatory category examinations performed in the first year, fall and spring semesters, and second year summer semester.

- 11. Additional comments regarding student's progress, personal traits, attendance, etc, must be documented in the appropriate segment on the personal evaluation form at mid-semester and end of semester (*Clinical Evaluation Form, Appendix 13*).
- 12. The imaging modality rotations will be evaluated and documented on modality specific evaluation forms (Student Clinical Evaluation Radiation Therapy Rotation, Appendix 14, Student Clinical Evaluation Nuclear Medicine Rotation, Appendix 15, Student Clinical Evaluation Sonography Rotation, Appendix 16, Student Clinical Evaluation CT Rotation, Appendix 17, Student Clinical Evaluation Magnetic Resonance Rotation, Appendix 18, Student Clinical Evaluation Interventional Radiology Rotation, Appendix 19).
- 13. Evaluation forms will be forwarded by the clinical education site to the program coordinator for documentation and retention in the student's permanent file. All documentation must be one week prior to the end of each semester.
- 14. For students using the clinical record book all exams (adult & pediatric) must be documented by the student. If the exam involves a pediatric patient the "x-ray #" field must also be highlighted in pink. (This is so that the clinical coordinator can see that the student is involved with an adequate number of exams on pediatric patient)

For students using the clinical record book all exams on which they have completed their **competencies** must be highlighted in blue "Exam description" field.

Hence, an adult competency exam will have the blue highlight on the "Exam description" field while a pediatric competency exam will have both pink highlight on "X-ray #" field and a blue highlight on "Exam description" field.

Guidelines for Competency Simulations

Simulations of competencies may NOT be performed in the clinical education sites for **ANY** examinations in Categories I through IV. Category I through IV simulation competencies will be performed in the energized lab on campus. An exception may be made only if approved by the clinical preceptor, clinical coordinator, and/or the program coordinator.

Simulated procedures are to be performed in the lab but not during lab time and will be scheduled during the last quarter of the semester. This will be coordinated by the Clinical Coordinator and accomplished through LACE – Learning Assistance Centers for Excellence.

A variety of days and times will be offered to students on a sign-up sheet and will include several different instructors. Students need to sign up with another student to assist in being the patient. Only a student in the program can be a patient, no friends or relatives may be the patient, only another student.

When scheduling simulations, allow 5-10 minutes for each simulation. Competency/simulation forms will be available in the lab and students must fill out one form per simulation and have the instructor sign it before putting it into the competency folder. If a scheduled appointment is not able to be met, or if available times are not convenient, please contact the Clinical Coordinator.

Student Clinical Education Sites and Clinical Preceptor Evaluations

To assure the continuation of quality student clinical education, clinical education sites and preceptors will be evaluated by the assigned students at the end of each semester.

Evaluation forms will be provided and will be reviewed by the program coordinator, clinical coordinator, and the clinical preceptor (Affiliate Clinical Facility Evaluation, Appendix 20 & Student Evaluation of Clinical Preceptor, Appendix 21) For students using Trajecsys this information will be completed electronically.

Clinical Courses

First Year, Fall Semester: RT 112

First Year, Spring Semester: RT 152

Second Year, Summer Semester: RT 160

Second Year, Fall Semester: RT 241

RT 242

Second Year, Spring Semester: RT 298

RT 299

Uniforms and Appearance

Appearance in the classroom

Students are required to wear appropriate attire to all lab/lecture classes. An example: short shorts, low cut tops, sleeveless shirts, halter tops, or low-rise pants, would <u>not</u> be appropriate attire. If student fails to wear appropriate clothing they may be asked to wear a patient gown, or leave the classroom and accept an absence for the class session.

At clinicals, students shall be required to meet the appearance codes of the affiliating clinical facility to which they are assigned; otherwise, they shall dress as follows:

1. Uniforms

White scrub uniform

OR

Deep purple scrub uniform

(Many brands are available, such as White Swan, Cherokee, Crest, Landau, Dickies, etc.) A white t-shirt (preferably short sleeve) may be worn under the scrub top. Only white, no other color of t-shirt is acceptable.

WITH

White shoes

White socks

White Lab Coat (Optional, typically for warmth). No other color of lab coat is allowed, only white. No other coat, jacket, or sweater is acceptable, only a lab coat. When wearing a lab coat, the SWIC school emblem patch and student name badge must be visible.

Student uniforms must be clean and neat. Student uniforms must be of sufficient thickness for modesty (no spandex or clingy materials) and must not show undergarment lines (undergarments must be worn). Student uniforms should be styled in such a way to prevent exposure when stooping and bending.

No sweats or jeans are allowed. No sweatshirts and no sleeveless tops of any type are appropriate. Pants must come to the ankle.

PLEASE NOTE: A purple scrub uniform <u>is required</u> for pinning. Other pinning details are in the RT 299 Syllabus.

- 2. Shoes should be well made, comfortable, and with a good arch support. White tennis shoes are not acceptable unless they are **all leather**, **all white and no significant logos**. No open toed shoes are allowed.
- 3. The Radiologic Technology student is required to wear the Southwestern Illinois College school emblem patch on the **LEFT** shoulder of the uniform (with the top of the patch starting approximately 2" from the shoulder) **and** lab coat. These can be purchased at the SWIC Bookstore.

- 4. The student must wear a SWIC name badge on the uniform or lab coat that depicts their name and the program name, that will be provided to them. If lost or damaged, a name badge replacement must be purchased through the SWIC Print Shop for a small fee to the student (under \$5.00). Name badges must be worn above the waist, on the left side of the uniform and be visible at all times. Clinical facility ID tags must be worn when required by a clinical facility.
- 5. Hair should be clean, well-groomed, of a natural color and appropriate for the work area. No fashion extremes of style such as cutouts, spikes, Mohawks, etc. Hair color should be of a natural color- i.e. blonde, brunette, etc. The hair should be neat, off the face and off the collar. If the hair is longer than collar length, it should be pulled back with a barrette or rubber band. Beards and mustaches are permitted, providing they are neatly trimmed and well groomed.
- 6. Heavily scented perfume, cologne, or aftershave lotion should be avoided in the clinical facilities. No scent or only light scents are permitted. Due to close contact with others, deodorant/antiperspirants should be worn. Only light makeup is appropriate.
- 7. The only jewelry acceptable with a professional uniform is a watch and ring. Necklaces, dangling earrings, bracelets, or any other jewelry is **not acceptable**. Only stud type pierced earrings are acceptable and are limited to 3 earrings per ear. Tongue, lip, eyebrow, nose or any other facial piercing is **NOT ALLOWED** and must be removed. Ear lobe gauge rings are highly discouraged and are not allowed unless worn with flesh tone plugs.
- 8. Any visible or potentially visible tattoos (body art) must be removed or be covered, preferably by clothing. This may require long sleeves or high collars to cover any arm/shoulder/neck tattoos. This may require socks or pant lengths that cover any leg/ankle/foot tattoos. Using Band-Aids to cover tattoos is unacceptable. Depending on the size and location of the tattoo and the hospital policy, flesh colored gauze tape or flesh colored tattoo covering sleeves may be options for covering tattoos.

Note: MRI SAFETY - Additionally, any body piercing metallic objects, metallic objects such as jewelry, and possibly some tattoos, are considered potentially dangerous when performing the MRI rotation.

- 9. Fingernails should be clean, natural nails maintained at a reasonable length so as not to endanger student, patients or equipment. Nail polish should be clear or subdued colors with no nail art or chips. Students are not allowed to wear multicolored nails, nail ornaments or artificial nails of any kind, such as but not limited to glue-ons, tips, wraps or extenders. Natural nails must be less than a ¼ inch long.
- 10. Miscellaneous items needed for the clinical site: Pocket-size notebook or notecards, and a pen or pencil.

Regarding uniforms and appearance, as you see, there are many rules. Patients in healthcare settings expect their healthcare providers to dress and act professionally. Any questions may be directed to the program coordinator or the clinical coordinator. If student fails to wear appropriate clothing they may be asked to leave the clinical site.

Repeat Image Policy

Whenever any student, freshman or sophomore, produces an image that is diagnostically unacceptable and must be repeated, a registered radiologic technologist must be physically present in the radiographic room when the image is repeated. This policy is mandated to eliminate additional radiation exposure to the patient and to permit the student to understand how to correct the mistake.

Mobile (Portable) and Operating Room Radiography Policy

The students in the Radiologic Technology Program will be required to demonstrate competency by written examination, observation, and assistance in routine mobile and operating room radiographic procedures. Portables/surgical cases are performed with direct supervision (supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement).

Transport Policy

Transportation of a patient (ambulatory or non-ambulatory) by the student with indirect supervision is limited to a permissible area. The permissible area is the area immediately surrounding (adjacent to or across the hall from) the radiology department that is within a distance close enough for departmental staff to hear a student if there is a call for assistance. Indirect supervision is not sufficient for a student when patient transportation extends beyond the permissible area. Students are permitted to accompany and assist the individual/s responsible for patient transportation beyond the permissible area.

Contrast Media Policy

The student will not, under any circumstance, handle, prepare, "draw up", "push" or inject contrast media, radiopharmaceuticals or any other type of medication requiring intramuscular or intravenous administration. Orally administered gastrointestinal contrast agents, e.g., barium sulfate, are still permissible forms of contrast the student may handle, prepare or administer for prescribed patient exams.

Magnetic Resonance Imaging (MRI) Environment Screening for Students Policy

Before any student is allowed into the MRI environment, they must be screened by an MRI-safety trained healthcare worker (Level 2 MRI personnel) per hospital policy. In addition, per the Southwestern Illinois College policy, screening involves the use of the Magnetic Resonance Imaging (MRI) Environment Screening for Students (*See Appendix 18.5*) to be completed prior to the first clinical experience. MRI safety orientation will be introduced during the first

summer semester with screening to be completed prior to any clinical experience and education ongoing throughout the program.

Note: At no time should the student enter the MRI scanner room (Zone IV) during MRI acquisition or scanning.

The screening form for students poses important questions to determine if there are possible problems or issues that should be discussed with the student **before** permitting entry to the MRI environment. Students are screened by an MRI safety trained healthcare worker prior to any clinical experience and will be rescreened prior to the MRI modality rotation. Other than the MRI modality rotation students are **NOT** allowed into the MRI environment. The proper use of the written form along with thorough verbal screening of the student, by an MRI safety trained healthcare worker (Level 2 MRI personnel), is performed to help prevent accidents and injuries in the MRI environment. Students are mandated to notify the program should their MR compliance status change.

The Magnetic Resonance Imaging (MRI) Environment Screening Form for Students was developed from the American College of Radiology (ACR) and International Society for MR Radiographers & Technologists (ISMRM/ISMRT) safety resources.

Mammography/Breast Imaging Policy

The radiography program sponsored by Southwestern Illinois College has revised its policy, regarding the placement of students in clinical breast imaging rotations.

Under the revised policy, all second-year students will be offered the opportunity to participate in clinical breast imaging rotations. A breast imaging clinical rotation is an "observation only" rotation and lasts approximately one day/eight hours. The program will make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, the program will not be expected to attempt to supersede clinical site policies that restrict breast imaging rotations/procedures to students. It is the responsibility of the clinical site to address any legal challenges related to a program's inability to place students in a breast imaging rotation.

The change in the program's policy regarding student clinical rotations in breast imaging is based on the sound rationale presented in a position statement adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its October 2021 meeting. The JRCERT position statement is included below and is also available on the JRCERT Web site, www.jrcert.org, Programs & Faculty, Program Resources.



Joint Review Committee on Education in Radiologic Technology 20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182 312.704.5300 • (Fax) 312.704.5304 www.jrcert.org

Position Statement on Breast Imaging Clinical Rotations

Adopted by the JRCERT Board of Directors (October 2021)

The JRCERT Board of Directors has received numerous inquiries to update and generalize the language in the Position Statement on Breast Imaging Clinical Rotations.

With regard to breast imaging, the JRCERT has determined programs must make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, programs will not be expected to attempt to supersede clinical site policies that restrict breast imaging rotations/procedures to students. Students should be advised that placement in a breast imaging rotation is not guaranteed.

The JRCERT reiterates that it is the responsibility of each clinical site to address any legal challenges related to a program's inability to place students in a breast imaging rotation. All students should be informed and educated about the various employment opportunities and potential barriers that may affect their ability to work in a particular clinical staff position.

College Services

Accommodations: Disability & Access Center

Students with disabilities who believe that they may need accommodations are encouraged to contact the Disability & Access Center at 618-222-5368 or 618-234-3347 (TDD) to ensure that such accommodations are implemented in a timely fashion.

Academic Services: L.A.C.E. (Learning Assistance Center for Excellence) Tutorial Lab

Learning Assistance Center for Excellence (LACE) – provides instructional assistance to develop occupational skills and to improve academic skills at no cost to the student. LACE tutorial lab assistants provide individual, small group or classroom type assistance to radiologic technology students. Students should contact their instructor or the LACE assistants per the RT LACE manual located in the energized lab. No non-RT students or other individuals should be involved in LACE activities for radiologic technology. (LACE is available on a number of academic areas. For more information contact the Success Center.)

SUCCESS Center (services available on most campuses)

Walk-in assistance is available in the Success Center whether you have a quick question or want to meet regularly with a tutor. We have a staff of peer and professional tutors to assist you in over 20 courses. Contact the Success center to find availability of services.

Supplemental Information

College Closing or Snow Schedule due to weather conditions

Closing of the college or use of a "Snow Schedule" will be broadcasted on FOX 2 (KTVI), KMOV-TV 4, KSDK-TV 5, KMOX Radio (AM 1120) and WIL Radio (FM 92.3). In addition, it will also be posted on the home page of the SWIC Website at www.swic.edu, www.ksdk.com, and sent as a SWIC alert message (if signed up for SWIC alerts).

If the college chooses to open on a snow schedule, rather than close, the college will open at 10:00am. Students should report to the class they are normally in at 10:00am for that day if the day is a campus day. Students should report to clinical at 10:00am for the day if the day is a clinical day. If the day is a clinical day, the student should contact their clinical instructor about their delayed arrival if there is a snow schedule, or about their absence if the college is closed.

Advisory Committee

An advisory committee, comprised of persons from the radiologic community and radiologic student(s), serve in an advisory capacity to the program. The advisory committee provides an important link to the community's needs, provide recommendations, and provides assistance to the program. The committee meets every fall and every spring semester.

Student Grievance Procedure

All student grievances involving academic matters, administrative matters or discrimination are addressed per the college catalog under the topic heading "Student Grievance Procedures". The catalog is available on the college website at www.swic.edu/catalog/.

The Complaint Procedure for Student Claim of Discrimination, Policy Statement Code 4002 adopted on October 16, 1991, states: It is the policy of Southwestern Illinois College to grant equal educational opportunity to all qualified persons without regard to race, creed, color, sex, religion, national origin/ancestry, disability, sexual orientation, veteran status or age.

Radiologic Technology student grievances involving allegations that an accredited program may not be in substantial compliance with the relevant accreditation standards or follow accreditation policies, should initially attempt to resolve the matter on an informal basis by consulting with a program faculty member. If necessary, the student should process a grievance through the chief executive officer of the accreditation organization at Joint Review Committee on Education in Radiologic Technology, 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182, or 312-704-5300, or mail@jrcert.org

RT Program Student Medical Exam Form

Return by designated deadline: Southwestern Illinois College – RT Program • 2500 Carlyle Ave • Belleville, IL 62221 • Fax: (618) 235-2052

Return by designated deadline: Southwestern fillnois College - RT Progra	ani - 2500 Carryle Ave - Benevine, 12 02221 - Fax. (010) 255-2052						
Section 1 – Personal Information Student completes this	section.						
Student Name (last, first, middle):							
Street Address:	Phone Number:						
City, State, Zip:	Date of Birth:						
SWIC Student Email							
Address:	@swic.edu						
Emergency Contact:							
Name: Relationship:	Spouse Parent Other:						
Phone:							
Section 2 - Medical History Student completes this section.	Medical examiner is encouraged to discuss with student.						
Check all that apply – use the space below to provide details:							
☐ Heart disease or heart attack	Head injury						
Heart murmur or Arrhythmia	☐ Stroke or paralysis						
☐ Fainting/dizziness	☐ Headaches/migraines						
☐ Diabetes (specify control method)	☐ Neurological disorder						
☐ Thyroid disease	Seizure disorder/Epilepsy						
Eye disorder/vision loss	Depression						
☐ Ear disorder/hearing loss	Shortness of breath, asthma, cough or hoarseness						
GERD, Chron's disease, IBS, etc	☐ Pulmonary disease						
Any allergic reaction (drug, food, product, latex, etc)	☐ Tuberculosis						
Skin disease	Cancer (specify type)						
☐ Back injury, scoliosis or chronic lower back pain	Abnormal bleeding						
Arthritis	Major Surgery						
Orthopedic disorder	Other						
☐ Mental disorder/emotional instability	Other						
Provide details from all boxes checked above (attach addition	nal sheets if more room is needed):						
List any current medications or treatments (attach additional	sheets if more room is needed):						
·							

Revised Spring 2014

Section 3 - Physical E	xaminati	Medical Exam	iner (MD, DO,	ARNP or PA) completes t	his section.	
Height:	Weight			essure:		Pulse:	
System:	Normal	Abnormal/Surg	ery (explain -	attach additi	onal sheets	if more room	m is needed)
Cardiovascular							
Endocrine/Metabolic							
Eyes/Ears/Nose/Throat	\Box						
Gastrointestinal	\Box	<u> </u>					
Genitourinary	\Box	<u> </u>					
Integumentary	\sqcap	<u> </u>					
Musculoskeletal	\Box	<u> </u>					
Neurological	$\overline{\Box}$	<u> </u>					
Respiratory		<u> </u>					
7							
Section 4 - Tests/Imm	unization	S - ALL SECTIONS	S IN WHITE M	IST BECOME	PLETED	dedical Examine	er completes this section.
							, , , , , , , , , , , , , , , , , , , ,
A Two Step Tuberculosi Step 1 date: /	,			date:	/ /	Results	: Neg Pos
Step 1 date:	/ K	suits: Neg	J Pos Step 2	date:	, ,	Results	: Li Neg Li Pos
B Influenza (Flu shot): A	Annual flu s	not is REQUIRED f	or RT program	students after	it becomes	available. Du	e by October 15th.
C Tdap date:	/	/	Td be	oster date:		/	/
Except if Td is less than 2	years old.		(Tetan	us/Diphtheria)	After Tdap, To	l booster within	n 10 years.
(Tetanus/Diphtheria & Per	tussis) One tir	ne dose of Tdap requir	red.				
D							
D Measles, Mumps and		, 1	1	ach lab results		,	Immune:
MMR Vaccine dose 1:		/	1	sles Titer:		/	Yes No
MMR Vaccine dose 2:	/	OR		mps Titer:		/	Yes No
		<u> </u>	Rut	ella Titer:	/		☐ Yes ☐ No
Varicella (Chicken Po	x): Indicate d	sease or vaccine or titer.					Immune:
Disease was contracted.		Vaccine: Dos	e 1: /	/	l □1	liter:	☐Yes ☐No
(If box checked; MD signature	OR		/	/	OR C	h lah assaba)	
below acts as confirmation.)	<u> </u>	Dos	e 2:/	/	(Attaci	h lab results)	
(Optional) Hepatitis	B Vaccin	Series: This serie	s is optional wit	h a student wa	iver.		Immune:
1: / /	2:	/ /	3:	/ /	O	R Titer:	☐ Yes ☐ No
(Dose 1)		(1 month after dose 1)	(5	months after dos		(Attach la	
COVID 10 Vassins	Donator at N		_	Deter			
COVID-19 Vaccine:	Product N	ame/Manufacture	r:	Date:	, ,		
1st Dose					/ /		
2 nd Dose (if applicable)					/ /		
Booster					/ /		Attach lab results
Medical Examiner: Pl	ease compl	ete					
I verify that I have review	ed this com	pleted form with t	he student. I c	onsider this s	tudent:		
 Mentally and physically 	able to und	ertake this program	. Not me	entally and ph	ysically able	to undertake	this program.
Signature:		Printed 1	Name:				
Date:							
Office Name/Address/Phone:					(_)	
Student: Read, Sign and	Date						
The information I have pro-		•		-			
I understand that failure to	complete thi			participation	in the clinic	al portion of	this program.
Signature:		Printed !	Name:				

Revised Spring 2022

MEDICAL INSURANCE VERIFICATION Southwestern Illinois College Radiologic Technology Program

Students are responsible for all personal injury, medical treatment and expense arising out of their own actions during the course of their clinical affiliations. Students should maintain their own medical insurance for this purpose.

own medical insurance for this purpose. Signature on this form verifies the medical insurance card information attached is valid and current for the student Printed Name Date Signature Date Attach copy of medical insurance card below:

HEPATITIS B VACCINE ACCEPTANCE/DECLINATION FORM Southwestern Illinois College Radiologic Technology Program

ACCEPTANCE:

I understand that due to my occupational exposure to blood or other potentially infectious materials that I may be at risk of being infected by bloodborne pathogens, including Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV). This is to certify that I have been informed about the symptoms and the hazards associated with these viruses, as well as the modes of transmission of bloodborne pathogens. I have been given the opportunity to be vaccinated with Hepatitis B vaccine. In addition, I have received information regarding the Hepatitis B (HBV) vaccine. Based on the training I received, I am making an informed decision to accept the Hepatitis B (HBV) vaccine.

DECLINATION:

I understand that due to my occupational exposure to blood or other potentially infectious materials that I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can do so at any time.

CHECK ONE:		
I ACCEPT Hepatitis B vaccine inoculation: OR I DECLINE Hepatitis B vaccine inoculation.		
Student's Name (Print):		
Student's Signature:	Date:	_

PERMISSION TO EMAIL INFORMATION FORM Southwestern Illinois College Radiologic Technology Program

Last Name:		
First Name:	MI:	
Student ID #: _		
	dance of the RT program, I authorize my RT faculty from inois College to send information to me electronically at address:	
E-Mail address:	PLEASE print clearly)	
I understand tha	t there is no guarantee of confidentiality via the Interne	t.
Please note: Ar	y college-initiated emails will be sent via the SWIC stude	nt email.
Printed Name	Date	
Signature	Nate	

COOPERATING AGENCY AGREEMENT STUDENT RESPONSIBILITES SECTION Southwestern Illinois College Radiologic Technology Program

WHEREAS

In accordance with the Cooperating Agency Agreement between the authorities of the Community College District No. 522, St. Clair, Washington, Monroe, Madison, Bond, Montgomery, Perry, and Randolph Counties, Illinois, and the affiliating clinical facilities, the student will acknowledge the following responsibilities:

- A. Has liability to both them self, occupant of their vehicle and to others in their transportation to and from the clinical facility.
- B. Obtains/maintains personal malpractice and professional liability insurance to cover their actions with the patients of the clinical facility.
- C. Maintains personal health/accident insurance.
- D. Maintains professional personal conduct at the Community College, the clinical facility and in transportation between the two institutions.
- E. Attains academic achievement and skill achievement in all educational situations whether in the classroom, laboratory, or in the clinical facility.
- F. Maintains work standards set by the clinical facility's clinical supervisor.
- G. Adheres to the required attendance at work experiences, classes, seminars, recruitments, and individual conferences with the instructor.
- H. Maintains confidentiality: During the term of this Agreement and thereafter, students shall hold information in the strictest confidence except as otherwise required by this Agreement or federal law.

IN WITNESS WHEREOF, this agreement is effective from program entrance to program exit. The parties hereto have caused this agreement to be duly executed by their proper officers. SOUTHWESTERN ILLINOIS COLLEGE

Date:	Ву:
	(Student)
By:	
(Parent/Legal Guardian, If Applicable)	=

STUDENT CONFIDENTIALITY ACKNOWLEDGEMENT AND AGREEMENT Southwestern Illinois College Radiologic Technology Program

As a student, I recognize that through my assignment at a clinical healthcare facility, I will have contact with or be responsible for information that the clinical healthcare facility considers confidential. By definition, confidential information includes but is not limited to patient-related records, access to computerized financial, patient or employee-related data, business activities and civil/legal actions involving the clinical healthcare facilities, its patients and its staff. Southwestern Illinois College classifies the following types of actions as a violation of clinical healthcare facilities' confidentiality policies:

- 1. The sharing or obtaining of specific patient information with anyone or for any reason except as is necessary in observing Radiology procedures.
- 2. The reviewing of patient medical records except as is necessary to complete the observation assignment.
- 3. The discussing of criminal, civil and other legal actions involving the clinical healthcare facilities.
- The releasing of unauthorized business and/or patient-related information to anyone except as authorized by a representative of the clinical healthcare facilities.

I agree to behave professionally and ethically at all times. While at the clinical site, I agree to abide by the facilities policies and procedures. I agree not to directly or indirectly disclose or remove confidential information without proper authority. I understand that if I breach or compromise this agreement, I will subject myself to the immediate termination of my observation assignment at the clinical healthcare facilities and termination from the Radiologic Technology Program.

Printed Name	Date
Signature	Date

LETTERS OF RECOMMENDATION/RELEASE OF INFORMATION (Personal and/or Academic) Southwestern Illinois College Radiologic Technology Program

This section authorizes the faculty of the Southwestern Illinois College program to furnish any and all information (deemed necessary) on academic and/or clinical performance, disciplinary action, attendance, college credit, SSN, date of birth, address, phone, and any other pertinent information regarding enrollment in the Radiologic Technology program to prospective employers.

In the event that I do not wish for a specific piece of information to be furnished to prospective employers, it will be my responsibility to submit a letter to the program coordinator, asking that the specified information not be shared.

Signature _	Date:

Southwestern Illinois College Radiologic Technology Program

Memo for the Record: Occupational Exposure of Fertile Women to Ionizing Radiation Southwestern Illinois College Radiologic Technology Program

I have read and understand the NCRP and NRC recommendations and Southwestern Illinois College's policy on Occupational Exposure of Fertile Women to Ionizing Radiation.

Date	Signature of Student

Supplemented with the following handout:
REGULATORY GUIDE
Office of Nuclear Regulatory Research
Regulatory Guide 8.13
pbadupws.nrc.gov/docs/ML0037/ML003739500.pdf

DECLARATION OF PREGNANCY Southwestern Illinois College Radiologic Technology Program

In accordance with the NRC's regulations at 10 CFR 20.12	.08, "Dose to an
Embryo/Fetus", I,, do he voluntary declaration of pregnancy. My estimated date o, 20 My estimated due date is	f conception was
I agree to obtain a written recommendation from my obsagency that provide my care.	stetrician/prenatal
It has been explained to me that I am making this voluntary pregnancy. I understand that this means that Southwest take measures to ensure that the dose to the embryo/fer mSv (0.03 rem) per month and that the total dose to the the entire pregnancy from occupational exposure does not rem).	ern Illinois College mus tus does not exceed 0.3 embryo/fetus during
If, as of this date, the total dose to the embryo/fetus is 4 greater, the total dose to the embryo/fetus during the repregnancy shall not exceed 0.5 mSv (0.05 rem). Addition readings over the M (minimal) on a monthly fetal dosime prompt a meeting with the program coordinator.	mainder of the ally, I understand, any
I have read the voluntary declaration of pregnancy policy implications of my continuation in a radiology department education. I will not hold Southwestern Illinois College of site liable for abnormalities that may be caused by exposithis pregnancy.	nt as part of my clinical r the clinical education
It has been explained to me that these measures may income of duties to those that will result in lower occupational explacement of certain restrictions on the duties I may perform	xposure or the
It has also been explained to me that I may revoke the deat any time and that the revoking of the declaration must	
Student	Date
Radiation Safety Officer/Program Coordinator	Date

Rotation of Assignment Schedule Southwestern Illinois College Radiologic Technology Program

Objectives: To ensure the student technologist assignment rotation of rooms, procedures, equipment, personnel, and radiologic examinations. To ensure the clinical preceptor an acceptable method in which to schedule students in various radiographic areas.

		KEY:
Affiliate Hospital		SP (IR)Special Procedures
		USSonography
Date From	То	CTComputerized Tomography
Date Holli	10	ER Emergency Room
		Portable
Clinical Preceptor		OROperating Room
		NMNuclear Medicine
		TH (ONC)Radiation Therapy
		MRI Magnetic Resonance Imaging

Student Name	Room Assignments											Time Frame											
	1	2	3	4	5	6	7	8	IR	U S	СТ	ER	Р	OR	N M	тн	M R I	М	Т	W	тн	F	S

RADIOLOGIC TECHNOLOGY PROGRAM CLINICAL ATTENDANCE

NAM	1E			 			
Clini	cal Fac	ility _					
Sem	ester _			 			
						Total <u>Hours</u>	Preceptor <u>Signature</u>
WK. 1	M 	T 	W 	F 	-		
2				 	-		
3				 	-		
4				 	-		
5				 	-		
6				 	-		
7				 	-		
8				 	-		
9				 	-		
10				 	-		
11				 	-		
12				 	-		
13				 	-		
14				 	-		
15				 	-		
16				 	-		
H = H	Holiday	/					

Southwestern Illinois College Radiologic Technology Program Clinical Competency Evaluation

Procedure		Category	<u></u>	
Circle one: Competency / Simul	ation / Re-Compet	ency		
List positions:				
			-	
	Attempt 1	Attempt 2	Attempt 3	
1. Requisition evaluation				
2. Patient assessment				
3. Room preparation				
4. Patient management				
5. Equipment operation				
6. Technique selection				
7. Positioning skills				
8. Radiation safety				
9. Image processing				
10.Image evaluation				
Attempt 1 Evaluator		Date	Grade: F	P / F
Attempt 2 Evaluator		Date	Grade: F	P / F
Attempt 3 Evaluator		Date	Grade: F	P / F
December 191		d		
Comments: Please list commen	its by numbers and	a positions.		

Competency Evaluation Information

- Mark P for pass or F for fail for each examination criteria
- Each examination must be performed according to clinical facility department procedure
- Each exam requested necessitates a separate grade sheet
- Students must pass all ten conditions in all positions required for the examination
- Refer to provided guidelines on reverse side when evaluating student
- Log passing procedures in clinical record book

Evaluation Criteria for Performance in Clinical Facilities

Goal: The student will be evaluated in clinical performance by clinical preceptors. The evaluation will be based on criteria established and approved by the clinical supervisor and the college faculty.

1. Requisition evaluation

Student is able to:

- a. identify procedure to be performed
- b. identify the patient's age and name
- c. identify the mode of travel
- d. check the patient's name on wrist band

2. Patient assessment

Student is able to:

- a.select the correct patient
- b. have the patient gowned properly
- c. assist the patient to the radiographic room
- d. assist the patient to the radiographic table
- e. keep the patient covered for privacy
- f. talk with the patient in a gentle but firm manner
- g. give the patient proper instructions
- h. follow the procedure for isolation patient

3. Room preparation

Student is able to:

- a.keep the radiographic table clean
- b. have cabinets and countertops in order
- c. have appropriate cassettes available
- d. have supplies in room
- e. turn machine "on" and ready for exposure
- f. manipulate tube for examination
- g. locate and resupply linens and supplies

4. Patient management

Student is able to:

- a. identify procedure to be performed
- b. identify the patient's age and name
- c. identify the mode of travel
- d. check the patient's name on wrist band
- e. meet the needs of the patient
- f. make necessary adjustments
- g. efficiently use time

5. Equipment operation

Student is able to:

- a.turn tube from horizontal to vertical and vice-versa
- b. move the bucky tray and utilize lock
- c. correctly identify and utilize tube locks
- d. insert and remove cassettes with bucky tray
- e. select proper cassette size
- f. ID image
- g. measure the patient
- h. use a technique chart
- i. select proper technique factors

- j. adapt for technique changes
- k. use positioning markers
- I. operate mobile unit correctly

6. Technique selection

Student is able to:

- a. use technique correctly
- b. use correct technique to produce image

7. Positioning skills

Student is able to:

- a.position the patient correctly
- b. center part to IR
- c. center CR to IR
- d. angle CR when appropriate
- e. use correct SID

8. Radiation safety

Student is able to:

- a.collimate to part
- b. use patient shielding when appropriate
- c. wear shielding when appropriate
- d. correctly wear dosimeter
- e. select proper exposure factors
- f. use distance as a self-protective measure
- g. visible evidence of collimation
- h. visible evidence of appropriate shielding

9. Image processing

Student is able to:

- a.demonstrate care and correct use of equipment
- b. demonstrate knowledge of equipment
- c. demonstrate knowledge of department protocols
- d. positioning markers are visible
- e. patient ID is visible

10.Image evaluation

Student is able to:

- a.demonstrate part in proper perspective
- b. demonstrate part without motion
- c. demonstrate proper alignment
 - 1. part centered
 - 2. IR centered
 - 3. tube centered

Clinical Site ______ Year _____ Year ____ Clinical Preceptor

Circle one: Midterm Final

Student Name

Mark an 'X' in the box which best describes the person being evaluated. Consistently exceeds expectations (supporting statement required) Meets & sometimes exceeds expectations Meets expectations Sometimes requires improvement	4 points 3 points 2 points 1 point
Rarely achieves expectations (supporting statement required)	0 points
 I. INITIATIVE Confident, self- starter Makes good use of time Accepts responsibility (to seek assistance when an image must be repeated, to move a difficult patient, etc.) 	4 3 2 1 0
 II. ADAPTABILITY & JUDGEMENT Requires minimum guidance in adjusting to new situations Calm and efficient under stress/emergency situations Follows instructions accurately 	4 3 2 1 0
 III. QUALITY OF WORKMANSHIP Knowledgeable of anatomy and physiology Accurately positions patient to obtain diagnostic quality anatomical structure Determines exposure factors to achieve optimum radiographic technique with minimum radiation exposure Evaluates radiographs for appropriate positioning and diagnostic quality Completes a thorough and accurate patient history 	4 3 2 1 0
 IV. QUANTITY OF WORK PERFORMED Consistently produces a volume at a standard acceptable for student status 	4 3 2 1 0
 V. CONSIDERATION OF PATIENT NEEDS Reassuring, kind and considerate to patients 	4 3 2 1 0

• Explains procedures to patients' understanding

• Attends to patient comfort, safety and modesty concerns

VI. RELATIONS WITH CO-WORKERS		4 3 2 1 0			
Offers to help others/is cooperative when asked					
 Accepts suggestions and constructive criticism g 					
Communicates pertinent information					
VII. JOB KNOWLEDGE		4 3 2 1 0			
Thorough grasp of department protocols for rac					
Clear understanding of department technical factorial	ctors/equipment				
Observes policies/rules/regulations					
VIII. RELIABILITY & PROFESSIONAL APPEARANCE		4 3 2 1 0			
Regular attendance and consistently punctual					
Prompt notification of absence or tardiness					
Adheres to dress code and grooming code for harmonic	air and nails				
IX. RADIATION SAFETY		4 3 2 1 0			
Wears ID badge and dosimeter					
Utilizes radiation protection measures for self					
Utilizes radiation protection measures for patier	nt and others				
X. PROFESSIONAL ETHICS (Radiologic Technologist	Code of Ethics)	4 3 2 1 0			
Maintains privacy of patient information					
 Shows respect for radiologist and staff physician 					
Shows respect for radiographers and administra					
on the reason/s for the score should be provided.	Comments on any other scores a	are encouraged.			
Enter # of Consistently exceeds exp	pectations: Multiply by	4 points =			
Enter # of Meets & sometimes exceeds ex	3 points =				
Enter # of Meets exp	Enter # of Meets & sometimes exceeds expectations: Multiply by 3 p Enter # of Meets expectations: Multiply by 2 p				
Enter # of Sometimes requires imp	1 point =				
Enter # of Rarely achieves ex	0 points =				
	Total points:	· ———			
*Total number of boxes marked below a 2:	kt step if there are any boxes ma				
	Student Signature	 Date			
101-118: Consistently Exceeds	<u>-</u>				
80-100: Sometimes Exceeds					
60-79: Meets requirements	Clinical Preceptor Signature	Date			
55-59: Needs improvement					
54 & Below: Not meeting requirements					

RADIATION THERAPY ROTATION

		Begin	End		_
Stuc	lent's Name	Date of Eva	luation Period		
 Affil	iate Hospital	Semester/Y	ear		
	I: To expose the student enrolled in RT 2 Radiation Therapy department during 2	•		_	orocedures
-	ectives: Given a therapy facility, patient, ervision of a certified Radiation Therapy	•			er direct
				PASSED	FAILED
l.	Identify/explain the effects of ionizing ra	adiation on hu	ımans.		
II.	Identify/explain the public right to minir	mal radiation	exposure.		
III.	Identify/explain the goals of medical rac	diobiology.			
IV.	Identify/explain the types of radiation.				
٧.	Identify/explain basic radiation units.				
VI.	Identify/explain patient preparation.				
VII.	Identify/explain basic therapy plans use	ed.			
VIII.	Identify/explain reactions and nursing of	care required			
IX.	Identify/explain the most frequent path treatment.	nology and m	ethods of		
Χ.	Identify/explain patient treatments and	l set-up.			
XI.	Identify/explain the responsibilities and radiation therapy technologist.	I duties of the	e registered		

XII. Identify/ex	plain th	ie impo	rtance o	f accurate	e record	keeping.		
XIII. Identify/ex	plain th	ne need	for patie	ent follow	/-up.			
GRADING: Succ	cessful c	complet	ion of all	l objectiv	es	= A		
Failure to succe during the assig	=	=	_	ectives		= 1		
Failure to succe by the end of ar rotation.	-	-	-			= F		
Student Name:							_	
WEEK OF:	M 	T	W 	TH	F	Hours		
				Radia	ation Th	erapist Signati	ure	
				Stud	lent Sigr	nature		

NUCLEAR MEDICINE ROTATION

	Begin /	End					
Student's Name	Date of Evaluation Period		-				
Affiliate Hospital	Semester/Year	Semester/Year					
GOAL: To expose the student enrolled in RT 2	242 to the operations, equipmen	nt and proced	lures of the				
Nuclear Medicine department during		nt and procee	idics of the				
OBJECTIVES: Given a nuclear medicine facility, pation and the direct supervision of a certification of a certification.							
		PASSED	<u>FAILED</u>				
I. Identify/explain the effects of ioni interactions with matter.	zing radiation and the						
II. Identify/explain basic radiation un	nits.						
III. Identify/explain radiation counting of equipment.	g devices and instrumentation						
IV. Identify/explain biological half-life of the commonly used radiopharm							
V. Identify/explain why radiopharma interest	ceuticals go to organ of						
VI. Identify/NRC Title 10, parts 19, 20, nuclear medicine.	, and 35 as they apply to						
VII. Identify/explain nuclear invivo vs.	invitro procedures.						
VIII. Identify/explain quality control p	rocedures.		·				

IX. Identify	//explain	various	dose ca	lculations	5				
X. Identif	y/explair	n compu	ter uses	.					
XI. Identify represe			=	logies and e imaging		they are			
	y/explair d nuclea			=	oilities	of the registered/			
	III. Identify/explain the basic radiopharmaceutical accountability systems (Unit dose and Hot Lab)								
				n protecti nd ALARA		nin the nuclear			
XV. Identif	y/explair	n the pa	tient-te	chnologis	t relatio	onship.			
durin Failur by th	re to succ g the ass	cessfully igned cl cessfully an addit	comple inical ro comple ionally	ete all obj	ectives	= A = I = F			
Student Na	ime:				_				
Week of:	M	Т	W	ТН	F	Hours			
				Nuclear	Medic	ine Technologist S	Signature		
				Student					

SONOGRAPHY ROTATION

	Begin	/	End	
Student's Name				
Affiliate Hospital	Semester/Ye	ear		
GOAL:				
To expose the student enrolled in RT 247. Ultrasound department during 20 hours	=		and proced	ures of an
OBJECTIVES:				
Given an Ultrasound facility, patient and	•		ation, and u	nder the
direct supervision of a sonographer, the	student must			
			PASSED	<u>FAILED</u>
I. Identify/explain the basic operations	of the sonogra	aphy equipment.		
II. Identify/describe the various ultraso	und examinati	ons performed.		
III. Identify/describe/explain basic cross	s-sectional ana	atomy.		
IV. Identify/explain the correct selectio	n of images.			
V. Identify/explain the basic operation	of the matrix o	camera.		
VI. Identify/explain positions required f	or each exami	nation.		
VII. Identify/explain patient preparation	n required for	various		

GRADING:	Success	ful com	pletion o	f all obje	ctives =	= A
		-	/ comple inical rot	te all obje ation	ectives	= I
	e end of	-		te all objo	clinical	= F
Student Na	ame:				_	
Week of:	M	Т	W	ТН	F	Hours
		Sono	grapher	Signatur	e	
		 Stud	ent			

CT ROTATION

		Begin	<u>End</u>	
Student's Name		Date of E	valuation Perio	d
Affiliate Hospital		Semester	/Year	
Goal: To expose the student enrolled in RT of the Computerized Tomography department	-			
Successfully complete a non-contras	st CT examinat	ion of the h	nead.	
Objectives: Given a CT facility, patient and supervision of a CT Technologist	•		n, and under th	ne direct
			PASSED	<u>FAILED</u>
I. Ability to explain the basic computer s	system.			
II. Ability to explain the functions of the	CT Scanner.			
III. Understand the various CT examination	ons performed	l.		
IV. Identify the CT examinations requirir	ng contrast me	dia.		
V. Understand contrast media, dosage, a	administration	, and reacti	ons.	
VI. Identify basic cross-sectional anatom	ıy.			
VII. Identify/explain the basic operation of	of the PACS.			
VIII. Observe (if available) biopsies perfor	med using CT.			
IX. Understand patient preparation for	CT examinatio	ns.		
X. Complete a non-contrast CT examina	ation of the he	ad		

GRADING: S	uccessful	= A					
Failure to su objectives du rotation	=	=					
Failure to su objectives by assigned clin	the end	= F					
Student Nam	ne:						
Week of	M	Т	W	TH	F	Hours	
CT Technologist Signature							
			. !	Student S	ignature		

MAGNETIC RESONANCE IMAGING ROTATION

	<u>Begin</u>	End_	 		
Student's Name	Date of Evaluation Period				
Affiliate Hospital	Semester/Y	ear			
Note: Students must be screened for possible MRI to ensure a safe environment per hospital policy.	magnetic wa	ve or radio	requency hazards		
This evaluation must accompany the SWIC Magnet Screening Form for Students.	ic Resonance	Imaging (M	IRI) Environment		
Goal: To expose the student enrolled in RT 298 to the of the MRI department during 20 hours of clinical in	•	, equipmen	t and procedures		
Objectives: Given an MRI facility, patient and prescrete the direct supervision of an MRI Technology			nd under		
		PASSED	<u>FAILED</u>		
I. Ability to explain the basic operations of the	MRI system				
II. Identify/describe the various MRI exams per	rformed.				
III. Identify basic cross-sectional anatomy.					
IV. Identify/explain the basic operation of the F	PACS.				
V. Identify/explain the positions required for e examination.	ach MRI				
VI. Understand patient preparation required fo MRI exams.	r various				
VIII. Identify the MRI exams requiring contrast m	nedia.				

IX. Unders reactio		rast media,	dosage	, adminis	tration	n, and ——		
GRADING: Succ	essful co	mpletion of	all obje	ctives =	Α			
Failure to succe objectives during rotation	=	=	al	=	: I			
Failure to succe objectives by th assigned clinica	e end of	an addition	ally	=	F			
Student Name:							-	
Week of:	M	T W	TH	F		Hours		
				MRI Tecl	nnolog	gist Signatur	 re	
				Student :	Signat	ure		

MAGNETIC RESONANCE IMAGING (MRI) ENVIRONMENT SCREENING FORM FOR STUDENTS

Southwestern Illinois College Radiologic Technology Program

The MRI scanner has a very strong magnetic field that may be hazardous to students entering the MRI environment. Students that have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects are not permitted to enter **Zone III** and **Zone IV** of the MRI environment. Therefore, all students are required to fill out this screening form **before** entering **Zone III** of the MRI environment. Be advised, the MRI magnet is <u>always on!</u>

Have you had a surgical operation or procedure of any kind? If Yes, please list any and all surgeries. Any and all surgeries.	Yes or No
2. Have you had an injury to the eye involving a metallic object?	Yes or No
3. Have you ever been injured by a metallic object or foreign body (e.g., bullets, BB, shrapnel)? If yes, please describe.	Yes or No
4. Are you pregnant or suspect that you are pregnant?	Yes or No
5. Do you have any type of electronic, mechanical, or magnetic implants?	Yes or No
6. Do you have a Cardiac Pacemaker?	Yes or No
7. Do you have an Implanted Cardiac Defibrillator?	Yes or No
8. Do you have an Aneurysm Clip?	Yes or No
9. Do you have an implanted Neurostimulator, Biostimulator, or Implanted Drug	Yes or No
Pump?	
7. Do you have any type of ear implant?	Yes or No
8. Do you have any tissue expanders?	Yes or No

Remove <u>all</u> metallic objects before entering **Zone III** of the MRI environment including hearing aids, pager, cell phone, keys, eyeglasses, hair pins, barrettes, jewelry (including body piercing jewelry), watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, and nail clipper. Loose metallic objects are especially prohibited in **Zone III** and **Zone IV** of the MRI environment.

Please indicate if you have any of the following
--

Electronic implant or device	Yes or No
Tattoos or tattooed eyeliner	Yes or No
Wig or hair implants	Yes or No
Body piercings	Yes or No
Cochlear implant or implanted hearing aid	Yes or No
Any type of prosthesis or implant	Yes or No
Any metallic fragment or foreign body	Yes or No
Any external or internal metallic object	Yes or No
Any type of internal electrodes or wires	Yes or No
Hearing aid	Yes or No
Magnetic dentures/false teeth	Yes or No
Other implant	Yes or No
Other device	Yes or No

Other device	Yes or No	
Any 'Yes" answers will need clarification by the studen	t to the MRI Tecl	nnologist and must
be documented on this form.		
I attest that the above information is correct to the best understand the entire contents of this form and have have regarding the information on this form. I understand it is changes in the above screening information to the SWIC Coordinator or Clinical Coordinator.	id the opportunit s my responsibilit	ry to ask questions ty to report any
Student printed name:		
Student signature:		
Form information reviewed by printed name:		
Form information reviewed by signature:		
Date:		

INTERVENTIONAL RADIOLOGY ROTATION

	Begin	/	<u>End</u>
Student's Name	Date of Evaluation P	eriod	
Affiliate Hospital	Semester/Year		
GOAL:			
To expose the student enrolled in RT 298 to the o Interventional department during 20 hours of clin		and procedu	res of an
OBJECTIVES:			
Given an Interventional facility, patient and presc the direct supervision of a Radiographer, the stud		amination, a	ınd under
		PASSED	<u>FAILED</u>
I. Identify/explain the basic operations of the Inte	erventional equipment.	' - 	
II. Identify/describe the various Interventional ex	aminations performed	' - 	
III. Identify/describe/explain basic materials used			
IV. Identify/explain the correct procedure to prep	pare the sterile tray.		
V. Identify/explain the basic operation of prepari	ng an entry site.		
VI. Identify/explain the materials used for emergo	ency situations.		
VII. Identify/explain patient preparation required Interventional examinations.	for various		

GRADIN	G: Success	ful com	oletion o	f all obje	ctives	=	Α
	Failure to objective rotation		•	•		=	I
	Failure to objectives assigned of	by the	end of ar	=	nally	=	F
Week of:	M 	т	w 	TH	F	_	Hours
				1.T		•••	
		Interv —————————Stud		l Technol	ogist S	Sign	ature

Student Name	Year of Gradua	tion			
Clinical Site	Date				
 KEY: A = SA – Strongly Agree B = A – Agree C = C – Acceptable D = D – Disagree E = SD – Strongly Disagree 					
The Clinical Site Staff: 1. Provided an informative orientation to the facility, department & personnel. Explained facility and departmental policies and examination procedures. Provided proper identification badges and storage for personal belongings.		Α	С	D	SD
 Provided direct supervision during the performance of examination procedures at all times until category competency was achieved. 	SA	Α	С	D	SD
3. Provided assistance and instruction upon request.	SA	Α	С	D	SD
 Encouraged me to practice methods of radiation safety for personnel, self, and patients. 	SA	Α	С	D	SD
 Provided sufficient radiographic exami- nation exposure required to perform competency evaluations. 	SA	Α	С	D	SD
6. Abides by the student "repeat image" policy.	SA	Α	С	D	SD
7. Satisfies all program policies.	SA	Α	С	D	SD
8. Provides weekly room rotation schedules and abides by schedules.	SA	Α	С	D	SD
9 Comments:					

SOUTHWESTERN ILLINOIS COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM STUDENT EVALUATION OF CLINICAL PRECEPTOR (CP) (use 1 form per CP)

Student Name	Year of Gradua	tion	1		
Clinical Preceptor	Date				
Clinical Site KEY: A = SA – Strongly Agree B = A – Agree C = C – Acceptable D = D – Disagree E = SD - Strongly Disagree					
The grading system and/or evaluation system was clearly explained at the beginning of the clini	SA ical.	Α	С	D	SD
2. My preceptor is knowledgeable of his/her instructional material.	SA	Α	С	D	SD
3. My preceptor organizes the clinical experience well.	SA	Α	С	D	SD
4. My preceptor supervises the clinical experience effectively.	SA	Α	С	D	SD
5. My preceptor seems to enjoy teaching in the clinical setting.	SA	Α	С	D	SD
 My preceptor encourages questions and discussions during the clinical experience. 	SA	Α	С	D	SD
7. I am encouraged to learn during this clinical experience.	SA	Α	С	D	SD
8. I understand what is expected of me in this clinical experience.	SA	Α	С	D	SD
9. The clinical evaluations are fair.	SA	Α	С	D	SD
10. Clinical started and ended on time.	SA	Α	С	D	SD

- 11. My clinical experiences support the lecture and laboratory preparation of my program.
- SA A C D SD

12. My clinical preceptor effectively matches my clinical experience with the preparation I've received in my program.

- SA A C D SD
- 13. Comments which would aid the clinical preceptor in evaluating his/her performance:

Social Media Policy

Social media is defined as social networking tools and forums such as Facebook, X, Linked-In, You Tube, Tic Tock, Instagram, Snapchat, blogs, wikis, chat rooms, or any other online journals, diaries, or social networks. The purpose of this policy is to explain the use of social media for students in the SWIC Radiologic Technology program.

The ARRT enforces high standards of ethics and professional conduct both among R.T.s and among candidates for ARRT credentials, as outlined in the ARRT Radiology Program Handbook Standards of Radiology. This policy strives for high standards of ethics and professional conduct for students in the SWIC Radiologic Technology program as it relates to social media for the distribution of information and to protect the rights of the organization and its employees.

When one expresses their views in social media, they are responsible for what they post and should always utilize good judgement and common sense. Sometimes social medial can pose risks and create misunderstandings regarding confidential and proprietary information, reputations, brands, and jeopardize compliance with rules and laws.

With that in mind, students should always consider the following guidelines on all social media: Students should avoid disclosing confidential, proprietary, or sensitive information. Students should avoid discussions involving doctors, hospital personnel, other students, faculty, and patients.

Students should avoid all discussions of problems, issues, or experiences encountered that are program-related.

I have read and agree to comply with the terms of this policy outlining my responsibility with regards to social media, which is to utilize good judgement and common sense, as identified in the guidelines.

Student Signature	Date	
Printed Name:		

Photo Consent Form



2500 Carlyle Avenue, Belleville, IL 62221-5899

Consent Form

The undersigned hereby represents that I am 18 years of age, and if applicable, am the parent and/or legal guardian of the person named below (the "Minor"), and authorize Southwestern Illinois College (the "College") to interview me or the Minor, photograph and/or record my image, or the image of the Minor, and/or record the voice of myself, or that of the Minor, and publish my image and/or voice in printed materials, motion pictures, the internet, and media outlets, including but not limited to newspapers, magazines, television, radio, or any other print or electronic/digital medium, for the exclusive purpose of promoting the College and/or all affiliated entities in any medium currently existing or hereafter developed. In addition, I hereby grant the College the right to quote or paraphrase all or any portion of the interview materials.

Furthermore, the undersigned does hereby release and hold harmless Southwestern Illinois College, its Trustees, employees and agents, from any and all claims, demands, actions, complaints, suites or other form of liability for damages, including but not limited to libel, slander, invasion of privacy or any other claim, arising out of or by reason of the aforementioned use of images(s), recording(s) and materials.

Moreover, the undersigned does hereby agree that no monies or other consideration in any form, including reimbursement for any expenses incurred by me (or the Minor), will become due to me (or the Minor), my (our) heirs, agents, or assigns at any time because of participation in any of the above activities or the above-described use of image(s), recording(s) and material(s).

The above consent is given freely and voluntarily without any promises, threats or duress.

Name:		Signature:		
Address:				
City:	State/Zip:	Phone Number:		
Parent or guardian signature if the abo	ve is under 18 yea	rs of age:		
Witnessed by:		Date:		
Don't Name		Droject Numbers		
Dept. Name: Detailed Photo Description:				

Revised 6/13



RADIOLOGIC TECHNOLOGY PROGRAM

Acknowledgement and Acceptance of Policies & Guidelines for Student Performance (Handbook)

I understand that while I am attending the Southwestern Illinois College Radiologic Technology Program, violations of the rules and regulations on my part, may result in disciplinary action up to and including dismissal.

I understand attendance for all classes (lecture and lab) and clinical experience is required. I am expected to arrive on time and be prepared at the starting time. I am expected to remain for the duration of all class sessions and clinical experience sessions.

I understand that any new or changed policies will be made known to me and that the most current policy will apply. Also, I understand that it is my responsibility to ascertain understanding of the current policy.

I have received a copy of the Policies & Guidelines for Student Performance.

	• •		
Signature		Date	
0			