

Avila University
Radiologic Science

Handbook
2024-2025



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SECTION I

PROGRAM DESCRIPTION

STATEMENT OF POLICY CHANGES

Because of constantly changing conditions, the University reserves the right to make such changes in policy as may be deemed necessary upon approval of the Radiologic Science Program officials and/or Advisory Committee, as appropriate.

Students will be informed immediately of any changes in policies and are, therefore, responsible for compliance upon receiving this information.

NON-DISCRIMINATORY POLICY

Avila University, Saint Joseph Medical Center, Centerpoint Medical Center, Lee's Summit Medical Center, Liberty Hospital, Overland Park Regional Medical Center, North Kansas City Hospital, Belton Regional Medical Center, St. Mary's Medical Center, Advent Health – Shawnee Mission, Cass Regional Medical Center, and all clinical rotation facilities do not discriminate on the basis of sex, race, age, color, handicap, national origin, etc. in the administration of educational and admission policies, employment policies, or patient services.

PHILOSOPHY OF AVILA UNIVERSITY

Avila University, sponsored by the Sisters of St. Joseph of Carondelet, is an academic community dedicated to education in the liberal arts and the professional areas.

Avila is a Catholic university that seeks to foster the intellectual, spiritual and social growth of its members. The university community includes men and women with a diversity of religious convictions.

The administration, faculty, staff, and students work together to create an environment wherein the quality of Christian hope permeates and enlivens an objective search for truth.

Avila students are encouraged to develop values that enable them to grow in freedom and responsibility as they respond to contemporary social and moral issues.

The Avila community provides an atmosphere of faith and support in which members may gain insight into themselves, their relationship with God, and their place in service in the world community.

RADIOLOGIC SCIENCE PROGRAM MISSION STATEMENT

The mission of the Avila University Radiologic Science Program is to provide quality curriculum and experiences that graduate students who possess competent skills for successful employment as registered technologists, aspire for continued growth in their knowledge and are prepared to be future leaders in the field of radiology.

ACCREDITATION

The Avila University Radiologic Science Program is accredited by the Joint Review Committee on Education in Radiologic Technology and by the Higher Learning Commission.

The Program follows the Standards of an Accredited Educational Program for the Radiographer as specified by the Joint Review Committee on Education in Radiologic Technology. Students may review the standards, along with the Master Plan, in the Program Director's office. The standards are also available for viewing on the JRCERT website. Information regarding the program's effectiveness (registry pass rate, job placement rate, program completion rate) can be found at www.jrcert.org and on the Avila University website.

If the student has a grievance with the program they must first attempt to resolve the complaint directly with institutional/program officials by following the grievance policy/procedures provided by the institution/program. If the individual is unable to resolve the complaint with institutional/program officials or believes that the concerns have not been properly addressed, the individual may submit allegations of noncompliance directly to the JRCERT.

Additionally, any individual associated with the program has the right to submit allegations against a JRCERT accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards and/or JRCERT policies.

STUDENT JRCERT NONCOMPLIANCE GRIEVANCE PROCEDURE

Any student who feels there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation may file a grievance. The student must follow the Student JRCERT Noncompliance Grievance Procedure.

1. The student must inform the Program Director, in writing, of the alleged noncompliance issue
2. The Program Director will schedule a meeting with the Radiologic Science Grievance Committee within five clinical days. The student will present their grievance of noncompliance to this committee, including sufficient documentation.
3. After hearing all evidence, the committee will make the appropriate resolution of the complaint within 24 hours. All information pertaining to the complaint will be recorded and maintained for inspection in the JRCERT Complaint File. (USDE regulations require a record of such complaints.)
4. The Radiologic Science Grievance Committee will reconvene and announce the resolution. If the student is not satisfied with the resolution the student may contact the Office of the University Vice President of Academic Affairs (VPAA).

The Radiologic Science Grievance Committee will be comprised of:

- Program Director
- Clinical Coordinator
- Radiologic Science Faculty
- On-Site Clinical Preceptor
- Student Representative
- College of Arts and Sciences (non-Radiologic Science) Faculty Member

Additionally, students are encouraged to address any complaints apart from those that require invoking the grievance procedure. Students can do so by submitting a grievance form through the University website, notifying the Radiologic Science Program Director, Radiologic Science faculty, and/or the Dean of the College of Arts and Sciences.

[Grievance Form - Avila University](#)

FACULTY/CLINICAL SITE PERSONNEL

Avila University

Sarah Sanford, M.S., Ed., RT (R)(CT)
Dana Adler, M.S., Ed., RT (R)(M)
Sara Moriarty, M.S., Ed., B.S., RT (R)

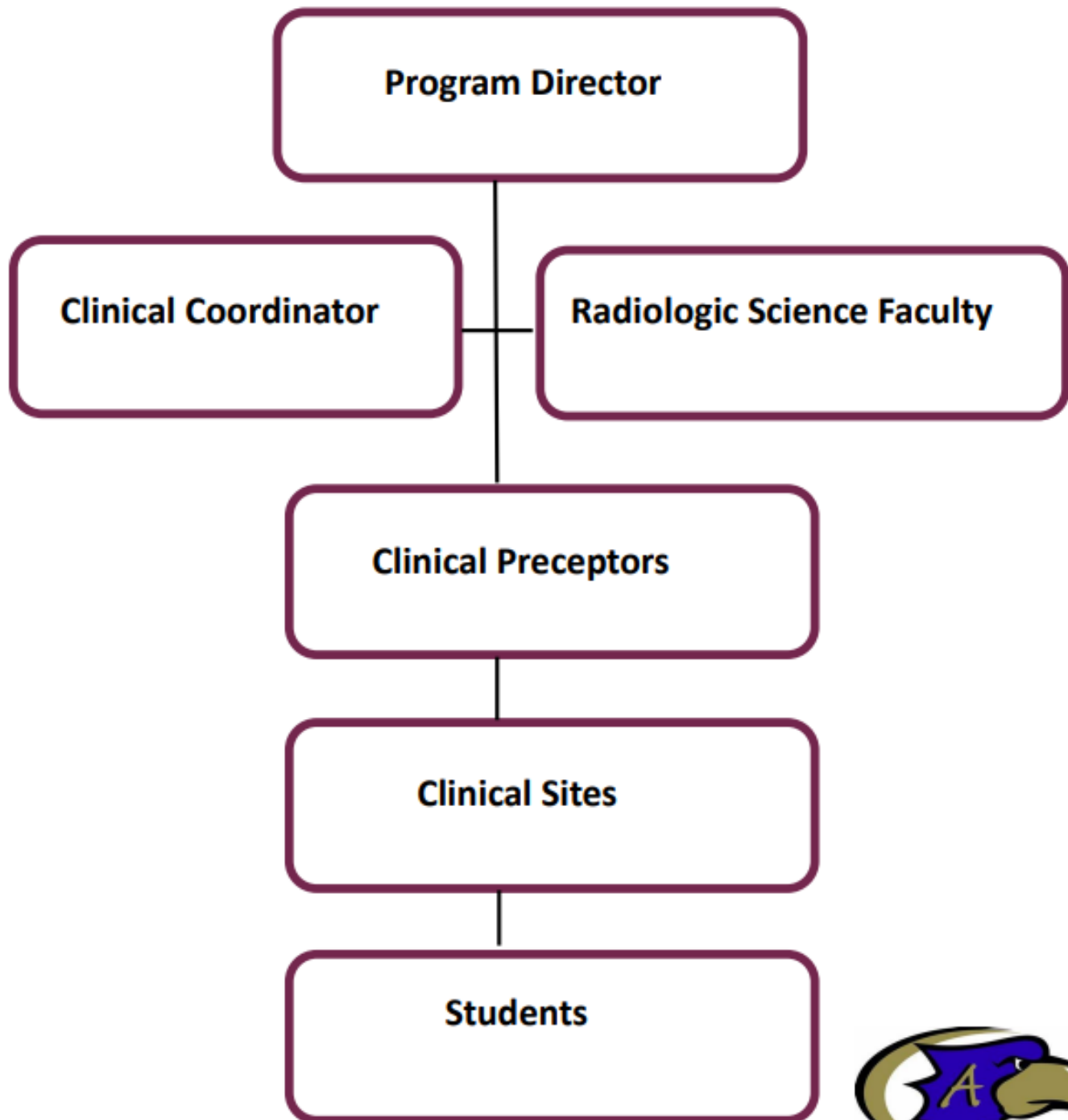
Program Director
Radiologic Science Faculty
Clinical Coordinator

Primary Clinical Affiliates

Primary Clinical Site	Director/Manager	Clinical Preceptor
Centerpoint MC	Tanya Dodge	Crystal Schoenberger
Lee's Summit MC	Jeff Hasty	Lauren Lindsey
North Kansas City Hospital	Ashlyn Hull	Kellie Niemann
Overland Park Regional MC	Julie Gosnell	
Belton Regional MC	Janie Staley	Mercedes Bosley
St. Mary's MC	Melissa Shobe	Allison Carmazzi
Liberty Hospital	Julie Osbahr	Allyssa Grizzle
Advent Health, Shawnee Mission	Krista Kanies	Miranda Harwood
The University of Kansas Hospital	Susan Williams	Shelby Mitchell
St. Joseph Medical Center		Jennifer Ward

RADIOLOGIC SCIENCE PROGRAM

ORGANIZATIONAL PLAN



PROGRAM DESCRIPTION

The Avila University Radiologic Science Program is forty months in length, consisting of four academic years and two summer sessions. Upon completion of program requirements, the graduate will be eligible to complete the American Registry of Radiologic Technologists (ARRT) examination.

The professional curriculum is designed to provide graduates with the knowledge, skills, and attitudes necessary for entry-level professionals in Radiography, and to encourage their personal and professional growth. Courses offer an articulated progression from the basic concepts of Radiography to the more advanced and specialized classes with optimum correlation of the didactic and clinical education courses. Students are expected to adhere to the Code of Conduct found in the Avila Student Handbook.

PROGRAM GOALS

The goals of the Avila University Radiologic Science Program are:

1. Students will master clinical competency.
2. Students will apply appropriate critical-thinking skills.
3. Students will demonstrate professionalism.
4. Students will demonstrate effective communication skills.

ACADEMIC GUIDELINES

This handbook is a guideline for the clinical portion of the program. All academic requirements and procedures of the university must be followed. For information, see the university catalog or your academic advisor. Students must earn a "C" or better in all Sciences, Mathematics, and Radiologic Science courses. A course may be repeated only once to improve the grade.

ADVISORY COMMITTEE

There is a program advisory committee composed of representatives from the university, the clinical sites, and the student body. There is one voluntary representative from each class. If there is more than one volunteer from a given class, one student will be chosen by random selection.

PROGRAM OUTCOMES

Student Learning:

Goal 1: Students will master clinical competency.

Outcomes:

1. Students will demonstrate appropriate understanding and use of radiation protection.
2. Students will demonstrate proficiency in positioning skills

Goal 2: Students will apply appropriate critical-thinking skills.

Outcomes:

1. Students will modify all necessary elements to adapt to non-routine procedures.
2. Students will use critical thinking skills to provide optimal patient care at all times.

Goal 3: Students will demonstrate professionalism.

Outcomes:

1. Students will demonstrate professional and ethical behaviors in the clinical and didactic setting.
2. Students will live out the Avila value of service to the Dear Neighbor.

Goal 4: Students will demonstrate effective communication skills.

Outcomes:

1. Students will demonstrate effective communication skills through writing.
2. Students will demonstrate effective communication skills in the clinical setting with patients, peers, staff, etc.

Program Effectiveness:

Goal: The program will effectively meet the needs of the students and community.

Outcomes:

1. Students who enroll in the program will successfully complete it.
2. Graduates will be satisfied with their education.
3. Employers will be satisfied with educational and clinical experience of Avila graduates.
4. Graduates will pass the registry on the first attempt.
5. Graduates who desire to will find employment in the radiology field.

PROGRAM ACCEPTANCE REQUIREMENTS

GENERAL CRITERIA

- ❖ Cumulative minimum college GPA of 2.5
- ❖ A “C” or above in all courses for the major
- ❖ No course repeated more than once
- ❖ All prerequisites must be completed and student have a sophomore standing
- ❖ Interview with Radiologic Science Faculty
- ❖ Acceptance to the University

For complete admission criteria see the Avila University Undergraduate Catalog

DRUG/ALCOHOL SCREENING

All students accepted into the Radiologic Science Program are required to pass a drug and alcohol screening prior to beginning the clinical portion of the program. Any clinical site can, at any time, require a student to submit to a random test if the student exhibits suspicious behavior, or there is other legitimate cause. Screenings are performed at students’ expense and arranged by Radiologic Science Faculty. Inappropriate positive screening results may cause the student to be dismissed from the program.

Avila will provide to each clinical site a verification of compliance for each student at that facility for their clinical file.

CRIMINAL BACKGROUND CHECKS

All students accepted into the Radiologic Science Program will undergo an extensive national background check. This check will be in compliance with those required by the clinical sites, and according to guidelines set forth by the Missouri Hospital Association. Any inappropriate or unlawful activities and/or felony indicated on the background check may result in dismissal from the program. Students will sign a disclosure for consent to the background check. The original Certification of Completion will be kept in the student’s electronic file at Avila. Avila will provide to each clinical site a verification of compliance for each student at that facility for their clinical file.

Avila University – Radiologic Science Program Contingency Plan

PURPOSE: This contingency plan will provide continuity of student learning outcomes and goals while adhering to the mission and values of the Radiologic Science program and Avila University during a catastrophic event. The plan provides procedures necessary for proper communication to students, faculty, staff and clinical preceptors/affiliates. Resources that are available to students, faculty and staff during a catastrophic event are listed below. Also, the plan lists responsibilities for program leadership and University administration to allow for a smooth transition. The plan also gives information and instructions for resuming normal procedures.

The Radiologic Science Program will ensure that all graduates are given opportunities to meet graduation requirements, including ARRT required competencies and successful completion of all coursework with a “C” or better.

COMMUNICATION: In the case of a catastrophic event, Avila University will communicate to all faculty, staff and students by sending a message through our text messaging system and our online learning management system, Canvas. The Radiologic Science Program Director and faculty will work together with University administration to assess the situation and determine if any areas of the program will be affected and initiate a contingency plan accordingly. The Program Director will be responsible for communicating the plan to faculty, students and all clinical preceptors/affiliates. Any clinical course schedule disruptions or adjustments required will be communicated by the Clinical Coordinator to the affected students and clinical affiliates by University email and Canvas.

ADJUSTMENTS & RESOURCES:

Didactic: If students cannot remain on campus for didactic courses due to the catastrophic event, all courses will be moved to the University online learning management system, Canvas and delivered through Zoom. Students are expected to access their accounts regularly and are given information for IT access if in need of support.

Didactic Resources: All students in the Radiologic Science program are required to have and maintain a personal laptop/computer throughout the program. Students will also require Wi-Fi to complete didactic requirements.

Clinical: If students cannot attend clinical due to catastrophic event, schedules may be altered. Students will return to clinical courses when program faculty and clinical affiliates deem it safe. If deemed necessary, students will also be provided with alternate learning options (i.e. completing virtual simulations, case study analysis and virtual tours of clinical affiliates).

Clinical Resources: Necessary equipment (i.e. PPE) will be determined, obtained and distributed by program faculty.

Faculty: Faculty offices if required, will be given an alternative location on campus or faculty may be allowed to work remotely with dedicated office hours to ensure availability for students. Didactic and clinical faculty will be trained in maintaining FERPA in a virtual environment.

If additional/more thorough training is requested for our online learning management system, please contact Sima.Tarokh@avila.edu.

Enrollment/Advising & Financial Aid Resources

Enrollment management is available on the Avila University website. If students need to meet with faculty or staff regarding student service or financial information, communication can be conducted by phone, email or virtual conferencing.

Please reference the following for more specific requests:

RESPONSIBILITIES:

Program Leadership and/or administration is responsible for:

- Maintain communication with University, state and regulatory agencies, and accreditors during the catastrophic event.
- Maintain regular communication with faculty and students regarding the status of the catastrophic event.
- Communicate any deviations with faculty and students regarding the status of the catastrophic event.
- Adjust the contingency plan, as needed, to assure appropriate program operations.
- Provide faculty and students with state/federal emergency websites and hotlines as appropriate to the catastrophic event.
- Provide updates to students if success and/or location of resources and student services have changed.
- Provide alternate innovative learning options for students as appropriate to the catastrophic event.

The sponsoring institution is responsible for:

- Determine financial aid requirements if didactic and/or clinical courses are disrupted.
- Determine if course grading will change in response to the catastrophic event.
- Provide guidance for temporary alterations to the curricular sequence.
- Maintain student support and safety during the catastrophic event.
- Provide faculty support for resources not typically utilized by the program.
- Assure that student support services are not disrupted.
- Provide wellness support services for students and faculty.

RESUME NORMAL OPERATIONS

All program faculty, students and administration will follow the Contingency Plan until it is determined that normal program operations can be resumed.

Procedure:

- Administration/Leadership will communicate with the Program Director when normal program operations can be resumed.
- The Program Director will communicate with all program faculty and students when the program will begin to transition back into normal operation procedures. All program faculty will work together to determine the best plan of action to make the transition seamless for all faculty and students.
- The Clinical Coordinator will communicate with all clinical settings/preceptors and students regarding any adjustments that will be made to the clinical course schedules.
- Each course instructor will communicate with their students on how the transition will occur for each individual course.
- The Program Director will oversee the transition back to normal operations and will communicate regularly as needed.

The Contingency Plan will be reviewed and program faculty will implement improvements based on experience.

SECTION II
CLINICAL PROGRAM
POLICIES

CLINICAL DISCIPLINE

It is recognized that a critical function of a program charged with preparing individuals for service in a health care profession is to assure that all graduates meet an entry-level of knowledge and performance required for the profession and adhere to a standard code of professional conduct. A progressive disciplinary process will address student actions and performances that do not meet this standard.

Any student who infringes on the rules or regulations as stated in this policy manual or a hospital policy manual, or who does not conduct himself/herself according to the guidelines given in the code of professional conduct, is subject to progressive disciplinary action.

- a. **Verbal Warning** - Warnings can be given by the Clinical Preceptor or Radiologic Science Faculty to any student who is performing at less than expected level, or to one who is not acting appropriately. Reasons for the warning and expected changes will be discussed with the student. The warning is verbal and is frequently an initial notification. It will be documented in the student's clinical folder.
- b. **Written Warning** - Written warnings can be given by the Clinical Preceptor or Radiologic Science Faculty for continued unacceptable behavior after a verbal warning has been given or for a serious initial action. This warning will include reasons for the warning and expected changes. This will be documented in the student's permanent folder. A conference with the student, Clinical Preceptor, and Radiologic Science Faculty will be held.
- c. **Probation/Suspension** - A clinical probationary period or suspension can be given for continued unacceptable behavior after a verbal and/or written warning has been given, or for a serious initial action. The length may vary depending on the circumstances. The student will be required to make up any time missed prior to the end of the semester.
- d. **Dismissal** - Dismissal from the clinical program can result from a student's failure to modify his/her behavior after a suspension has been given, or as an initial action that warrants dismissal. Following are examples of such misconduct (these are only examples and do not represent all actions of misconduct):
 - Possession or distribution of illegal drugs or alcohol at the hospital or university
 - Repeating a radiograph without a qualified technologist present
 - Abusive behavior towards, patients, staff, faculty or other students
 - Fighting on hospital premises
 - Theft of hospital property
 - Dangerous action that could result in injury to patients or hospital personnel
 - Unethical behavior, inappropriate communication toward patients, staff, faculty or other hospital personnel
 - Repeated clinical suspensions
 - Timing another student in or out
 - Having another student time you in or out.
 - Sexual harassment
 - Breach of confidentiality
 - **This is not a comprehensive list**, issues requiring disciplinary action can extend beyond and will be handled according to severity on a case-by-case basis.

The Clinical Preceptor or on-site supervisors can ask a student to leave the clinical area at any time due to inappropriate behavior. A formal suspension decision will be made by the Program Director in consultation with the Radiologic Science Faculty and on-site Clinical Preceptor.

Any student who is asked by hospital or department administration to be removed from their clinical site, whether their actions were related to student clinical assignments or other situations, will not be allowed to continue at that site. Based on an investigation and meeting with Radiologic Science Faculty, the student may be dismissed from the program. All cases will be evaluated on an individual basis, and standing in the program may be affected by the availability of a clinical opening.

The student has the right to appeal any step of the above progressive disciplinary process (see Student Clinical Grievance Procedure). If a student is dismissed from the clinical portion of the curriculum, he/she can no longer continue in the Radiologic Science Program. The Radiologic Science Faculty will evaluate the seriousness of the offense in determining student eligibility for possible reentry into the program at a later time.

The following Disciplinary Action grid is a guideline of disciplinary procedure.

This is a guideline and is not intended to be completely inclusive.

Radiologic Science Program Disciplinary Action

Counseling

	Verbal	Written	w/CC, CP, PD	Probation	Suspension	Dismissal
Unexcused Absence (no call/no show)		1	2	2	3	3+
Unscheduled Absence	3	4	5	6	7+	7+
Tardiness	3	4	5	6	7+	7+
Repeating radiographs w/o radiographer present		1	1	2	2	2+
Performing exams w/o appropriate supervision		1	1	2	2	2+
Repeated failure to time in/out of clinical site	2	3	4	4+	4+	4+
Inappropriate/unprofessional behavior for clinical setting	1	1	1	1	1	1
Abusive behavior towards pts, staff, faculty, or other students		1	1	1	1	1
Fighting on clinical site premises		1	1	1	1	1
Theft of hospital property (including removing scrubs from hospital)				1	1	1
Dangerous action that could result in injury to pts or clinical site personnel		1	1	1	1	1
Forging and/or altering clinical documents				1	1	1
Unauthorized/Unethical use of imaging equipment				1	1	1
Imaging without student markers	1	2	3	4	5	5+

	Verbal	Written	w/CC, CP, PD	Probation	Suspension	Dismissal
Unethical behavior, inappropriate communication toward pts, staff, faculty, or clinical site personnel	1	1	1	1	2+	2+
Repeated clinical written warnings, probations, or suspensions						X*+
Timing another student in/out of clinical site		1	1	1	1	2
Sexual harassment		1	1	1	1	1
Possession/distribution of illegal drugs/alcohol at clinical site or university						1
Any action which results in removal of student from site						1
Violation of confidentiality		1	1	1	1	1
Timing in/out inappropriately Leaving site w/o timing In/out (tardy)	1	1	2	3	4+	4+
PMD over-exposure/ Holding IR		1	1	1	2	2
Lost PMD/Failure to wear PMD at clinical site		1	2	2	3	4+
Having cellphone / smart watch / laptop in clinical area		1	2	2	3	4+

Numbers indicate number of incidents/occurrences

*suspension for the same offense more than once

+ suspensions for different offenses will require individual assessment by Radiologic Science Faculty

This is not a comprehensive list. Actions not listed in this grid may still warrant disciplinary action.

10a

**Avila University
Radiologic Science
Written Warning**

DATE: _____

STUDENT NAME:

Document the reason for the disciplinary action:

[illegible]

I understand that this written warning will allow me to correct my behavior. Further incidents of this behavior will result in additional disciplinary action.

Student signature

Date _____

Clinical Preceptor

Date _____

Radiologic Science Faculty

Date _____

DATE: _____

Document the reason for the disciplinary action:

[illegible]

Date _____

Date _____

Date _____

Date _____

Date _____

SEXUAL HARASSMENT

Sexual harassment of any form will not be tolerated. Any report of harassment of any kind will be taken seriously. Any complaint of harassment involving a hospital/clinical site employee will be referred to and handled by the Department Director and/or Human Resource Department of that site. Any complaint involving a student or students will be handled by the Program Director as directed by the University guidelines.

Any Clinical Preceptor who receives a complaint of this nature should report it ***immediately*** to the Radiologic Science Faculty. Proper follow-up procedure will be determined and implemented at that time.

Sexual harassment by any student towards another student, coworker, patient, or any other person will be grounds for immediate disciplinary action and may result in dismissal from the program.

CONFIDENTIALITY

The issue of confidentiality is of critical concern in the healthcare setting. Students must understand that all information relating to patients, including name, diagnosis, history, exam, etc., is confidential and not to be discussed outside a professional situation. Students will adhere to all HIPAA (Health Insurance Portability and Accountability Act) guidelines as stated by each clinical site. Students must be aware that any inappropriate information posted on social networks could be cause for immediate disciplinary action.

Students receive information regarding confidentiality in RT 451 Introduction to Radiologic Science. They also receive information during the Radiologic Science Program Orientation prior to beginning the clinical portion of the program. All students are scheduled to attend hospital orientation, or its equivalent, either prior to or in the first week of the clinical portion of the program.

Any student who violates the confidentiality of patients, hospital, etc., will be subject to disciplinary action as outlined in the Disciplinary Grid.

TECHNOLOGY POLICY (CELL PHONES / SMART WATCHES / LAPTOP)

Most clinical settings have a policy limiting cell phone use in their facility. Regardless of the policy of the facility, cell phone and/or smart watch use at any of the clinical sites is prohibited except on student break, or lunch away from the department. *Under no circumstances should cell phones/smart watches/laptops be used in patient care areas.* The student should give the main department phone number to anyone who may need to contact them, and ask to be paged.

Avila University
Radiologic Science Program

Acknowledgement of Confidentiality Policies

During the RT 451 Introduction to Radiologic Science course, I received information regarding:

--HIPAA Privacy Policies and Procedures

--Confidentiality policies found in Radiologic Science Clinical Handbook

I understand the importance of my adherence to the confidentiality policies presented. I also understand that I may be expected to attend additional confidentiality policy instruction at my clinical site, and periodically throughout my clinical training.

I acknowledge that I must maintain patient and hospital confidentiality at all times. Failure to do so may result in disciplinary action against me.

Student signature

Date

Witness signature

Date

STUDENT SUPERVISION

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

1. The qualified radiographer reviews the procedure in relation to the student's achievement,
2. The qualified radiographer evaluates the condition of the patient in relation to the student's knowledge,
3. The qualified radiographer is physically present during the conduct of the procedure;
4. The qualified radiographer reviews and approves the procedure and/or image.

Direct supervision is defined as "student supervision by a qualified practitioner" being present during the procedure.

After students have completed the required Procedure Competency Evaluation for a particular exam the student may perform that exam under indirect supervision.

*Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures *regardless* of the level of competency.

Indirect supervision is defined as "student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement." This does not include pager or phone availability.

Qualified practitioner is defined as a radiographer who "holds current American Registry of Radiologic Technologists (ARRT) certification and registration, or equivalent, in radiography".

(All definitions are from the JRCERT Standards Glossary.)

In accordance with professional responsibility for provision of quality patient care and radiation protection, all unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer.

To ensure that each student receives educationally valid clinical experiences, *no two students will be allowed to work together at any time*, regardless of their competency level or status. Two students may work with the same technologist only during an uncommonly performed procedure. An uncommonly performed procedure would include an unusually difficult trauma, or procedures rarely performed, such as SC joints or a full skull series. Otherwise, technologists will work with only one student at a time.

UNAUTHORIZED / UNETHICAL USE OF IMAGING EQUIPMENT

Under **no** circumstance is a student allowed to perform any imaging without a physician order. Also, no student is allowed to have imaging performed on them without a physician order. Unauthorized imaging is considered unethical and will result in immediate suspension with probable dismissal from the program.

STUDENT CLINICAL GRIEVANCE PROCEDURE

Students in the Radiologic Science Program have rights and obligations at the clinical facilities. In order to serve the needs of the students, clearly defined policies and procedures have been instituted. In the case where a student does not follow the prescribed procedures of the program, a plan of action is followed. A student who is appealing a verbal warning, written warning, or has complaints about the program will follow this procedure.

1. The student must inform the Program Director in writing, within 24 hours of the clinical disciplinary action or complaint, and specify what he/she is appealing.
2. The Program Director will schedule a meeting with the Clinical Grievance Committee within five clinical days. The student will present their grievance and must provide sufficient documentation at this time relative to the grievance.
3. After hearing the evidence, the committee will make a recommendation. If the student is not satisfied with the recommendation they may contact the Office of the University Vice President of Academic Affairs (VPAA).

The Clinical Grievance Committee will consist of the following:

- Program Director
- Clinical Coordinator
- Radiologic Science Faculty
- On-site Clinical Preceptor
- Student Representative
- College of Arts and Sciences (non-Radiologic Science) Faculty member

PROCEDURE FOR GRADE APPEAL

Students have recourse to an appeals procedure for the review of student course grades received at Avila University. Guidelines and Request Forms are available in the Office of the Academic Dean. The deadline for appealing grades is published in the course schedule.

DRESS CODE

Students of the Avila University Radiologic Science Program represent the Radiology Department throughout their hospital and are expected to maintain a professional image, manner, and appearance. Students will be neat, clean, well groomed, and will not radically depart from conventional grooming attire.

Following are the guidelines to help students accomplish this task:

- Students may wear burgundy scrubs **only**. They must be neatly pressed. **No print scrubs or jackets**. Only white, black or burgundy jackets are allowed. A solid, complimentary-color shirt may be worn under the scrub top. No low-neck scrub tops. *Hospital scrubs are to worn only when the student is scheduled in surgery or a specialty area that requires such attire. No student is allowed to wear hospital scrubs out of the hospital.* In order to assure consistent identification of our students, each scrub top must be embroidered with the Avila University name.
- **All white or black** leather rubber sole shoes must be worn. Shoes must be in good repair and clean. No open toes. Uniform-type clogs may be worn.
- Socks will be worn. **No colored or print socks are permitted.**
- Hair shall be neat and well-groomed with no excessive hair decorations. If hair is shoulder length or longer, it must be pulled back out of patient contact. Hair should not be colored in radical tones such as blue, green, pink, etc.
- Mustache and beard shall be neat and well groomed.
- Minimal jewelry is acceptable-no dangling or excessive earrings; simple necklaces are permitted. Please be aware that jewelry can be distracting and dangerous around equipment.
- No excessive body piercing which is visible to patients. This includes tongue (spacers are acceptable but no studs), nose, eyebrow rings, or studs. Maximum **two** earrings in each ear.
- Excessive use of perfume or cologne is not permitted.
- **No chewing gum** in patient contact areas.
- Fingernails must be of moderate, professional-looking length. ***Shellac, gel, dip or acrylic nails are not allowed to be worn at any clinical site.*** Due to CDC recommendations concerning the spread of diseases, ***NO artificial nails of any kind may be worn.***
- Tattoos must be covered if considered offensive by clinical affiliate.

Dress codes are subject to change based on hospital preference and protocol.

Off-site Facilities

Students are expected to maintain a professional image when completing off-site rotations. The dress code remains the same when completing off-site rotations as during regular clinical rotations.

ATTENDANCE

Habits formed as a student are often carried over into the work world upon graduation. Prompt attendance is important for health-care professionals and is an important aspect of clinical education. Regular, consistent attendance is essential in developing and ascertaining clinical competency. In observing the regular Avila University academic calendar, students have approximately 13 weeks of vacation per year. Therefore, clinical assignments missed for any reason must be made up in like times and assignments prior to the end of the course. University break times, and vacations will be used for make-up time. If a student fails to make up the time missed before the end of the semester, the student will receive a grade of Incomplete (I) and the procedure outlined in the Avila University Handbook for Incomplete grades will be observed.

Attendance: For each **unexcused absence** the final clinical grade will be reduced by 5%. An unexcused absence is defined as failing to call and report the absence directly to the on-site Clinical Preceptor and the Clinical Coordinator on the morning of the absence. If a student does not call **PRIOR** to the beginning of their clinical shift to report the absence it will be unexcused. The student may leave a message for the Clinical Coordinator. Each **unscheduled** absence will result in a 0.5 (out of 4) reduction in the attendance portion of their final performance evaluation. If the unscheduled absence is unexcused they will also receive the 5% off of the total grade.

Students will receive 3 days per semester to be used if needed. These days may be used without disciplinary action but will impact their grade. Any time used must be made up prior to the end of the semester. After three days have been used additional absences will result in the following actions:

- 3th day-verbal warning

- 4th day- written warning

- 5th day-5% reduction in final grade, counsel with Clinical Coordinator,
Radiologic Science faculty

- 6th day-10% reduction in final grade, counsel with Program Director, Clinical Coordinator/RS
Faculty, probation

- 7th day+- 15% reduction, suspension/dismissal

Days that are not used during the semester may not be carried over into the next semester.

Illness lasting over three days requires a doctor's release for the student to return to clinicals. The Radiologic Science Faculty will review cases of serious illness on an individual basis.

Any student having a chronic health problem or situation that may affect their attendance should meet with the Clinical Coordinator and/or RS Faculty as soon as possible. Each case will be handled on an individual basis.

Students who work at least ½ of their scheduled clinical shift and leave due to illness will not be counted absent for that day, but will be required to make up the missed time. Students who do not work at least ½ of the scheduled clinical shift will be counted as absent for the day.

If a student calls in sick on a scheduled make-up day it will be counted as an absence.

Students must time in and out appropriately. Timing another student in or out is fraudulent behavior and will result in immediate disciplinary action. Students are required to time out when leaving the clinical site premises. Failure to time in or out appropriately may result in disciplinary action.

Tardiness: Students must time in **at or before** the assigned clinical start time. Any student timing in after the scheduled clinical start time will be considered tardy. (Example: Clinical start time is 7:30. Students timing in at 7:31 or later are tardy.) Unusual circumstances will be considered on an individual basis (i.e., blizzard conditions, ice, etc.). If you are unable to report for clinicals as scheduled, you must notify your Clinical Preceptor prior to the start of your scheduled shift (see Courtesy Calls below).

Procedure for tardiness is as follows:

3th day-verbal warning

4th day- written warning

5th day-5% reduction in final grade, counsel with Clinical Coordinator,
Radiologic Science faculty

6th day-10% reduction in final grade, counsel with Program Director, Clinical Coordinator/RS
Faculty, probation

7th day+- 15% reduction, suspension/dismissal

Each tardy will result in a 0.25 (out of 4) reduction in the attendance portion of the final performance evaluation.

The length of probation/suspension may vary depending on the circumstances and that time will be required to be made up during the student's off time.

Students who are more than 15 minutes tardy are required to make that time up.

If a student is late to clinicals on a scheduled make-up day it will be counted as a tardy.

Students must time in and out appropriately. Timing another student in or out is fraudulent behavior and will result in immediate disciplinary action. Students are required to time out when leaving the clinical site premises. Failure to time in or out appropriately may result in disciplinary action.

Forgetting to clock in or out of your clinical shift will result in a tardy.

Courtesy Calls: Students who expect to be absent must contact the Clinical Preceptor **and** Clinical Coordinator **prior to** the time the student is expected to attend clinical activities. Students will be required to make up all missed time. If you do not speak personally to the Clinical Preceptor and/or Clinical Coordinator when you call to report the absence you must leave a message. Give your name, nature of the illness, and a telephone number where you can be reached during your scheduled shift. If a student is going to be late they will be expected to call the Clinical Preceptor only and give a reason and estimated time of arrival. Students should NOT call a Clinical Preceptor on the CP's day off. If a student is leaving early from an off-site rotation facility they must first contact the Clinical Coordinator.

Excused Absences: In extreme circumstances excused absences may be arranged with the Clinical Preceptor and Clinical Coordinator's permission, but all time and/or assignments missed during the absence must be made up in like times prior to end of the semester for clinical credit. Doctor appointments, etc., should be made off clinical time if at all possible. More than 2 scheduled absences per semester may have an impact on the students' final attendance grade.

Plans must be submitted in writing and the clinical preceptor must approve all make-up time and assignments at least 1 week in advance, except in extreme situations which will be determined by the Radiologic Science Faculty.

Students requesting a change in their clinical schedule must fill out the **Change Request Form** and turn it in to their clinical preceptor prior to the date of the requested change. This form will be reviewed by the clinical preceptor and Avila Radiologic Science Faculty, and must be approved. The clinical preceptor will notify the student as to whether the change was approved. *Students in their first clinical session may not change their schedule outside of the set beginning and ending dates for that semester.*

Extreme circumstances will be reviewed by the Radiologic Science Faculty on an individual basis. If a student happens to accrue overtime during the semester they may have that amount of time off at a later date. They must have the approval of the Clinical Preceptor as to when they can use that extra time. Extra time *may not* be taken while at an off-site facility or be carried over into future semesters.

Changes in Clinical Schedule: There are times when a student must enroll in a course which conflicts with the set clinical schedule. In those instances, the student must complete the **Clinical Semester Change Form** prior to the beginning of the semester. This completed form will be signed by the Radiologic Science Faculty and the student's clinical preceptor to ensure accurate communication between the university and the clinical site.

Jury Duty: Any student receiving a summons for jury duty will be excused from clinicals during their service. Students must bring their receipt at the end of their service. Students are not required to make up time missed during jury duty service of one week or less. In order to ensure clinical competence for all students, any jury duty service that exceeds one week will be subject to make-up time after consultation with the Program Director, Clinical Coordinator, and/or Radiologic Science Faculty.

Make-Up Time: Students must arrange make-up assignments with the Clinical Preceptor who will ensure that assignments are made up in "like time". Scheduled make-up days are considered as regular clinical time and all attendance rules will apply. All clinical time missed prior to mid-semester will be made up during mid-semester break. Any time missed after mid-semester break will be made up prior to final week.

Breaks and days off must be used to make up time.
Students need to fill out a **Make-Up Time Plan** form.

Students' clinical assignments do not exceed 8 hours per day. Students may not exceed their assigned clinical time for make-up time beyond a total of 10 hours per day, or past 6:00pm unless preapproved by Avila Radiologic Science faculty.

Student Banking Time

Students will not be allowed to use time between semesters to "bank" time, that is, make up time to use in the future, unless they have an "I"ncomplete grade for the previous course. Students must be enrolled in an RT course in order to use breaks in between semesters to make up time. Extreme cases or issues will be handled on an individual basis.

Inclement Weather: When Avila University classes are cancelled due to inclement weather, students **will not** attend scheduled clinical courses. It is the student's responsibility to contact Avila University or listen to the news media for cancellations. **Do not** contact the Clinical Preceptors, Program Director, or any other Radiologic Science faculty.

If Avila University holds classes and students **do not** attend or arrive on time to clinicals, arrangements will be made with the clinical preceptor to make-up "like time".

Student Hours:

Student hours will vary depending on clinical courses taken each semester. Students are advised that clinical education hours do not include didactic courses. Some didactic classes may be held on weekends and evenings.

EXPENSES

There is no gratuity or pay to students. Students are expected to pay all tuition, academic fees, graduation fees, activity fees, etc., of the University. All traveling expenses between facilities are to be paid by the student. However, university financial aid program will be available for eligible students during their clinical course work.

All students will receive one set of lead markers, at no charge, from their clinical facility. In the event that a student loses one or both markers, the student must replace them immediately ***at their own expense***. Markers must meet the clinical requirements at the designated facility.

Students who lose their radiation monitoring badge must replace it immediately ***at their own expense***

Avila University

Radiologic Science

Clinical Semester Change Form

This form is to be completed by any student who has a class time that conflicts with the current clinical schedule.

Student Name: _____

Date: _____

Course Title: _____

Course Time/Days: _____

	Current Clinical Schedule	Proposed Clinical Schedule
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		

Approved by:

Radiologic Science Faculty

Date

Clinical Preceptor

Date

Avila University
Radiologic Science
Make-Up Time
Plan

(Student name)

(Date)

As of this date you have _____ hours to make-up prior to the end of the semester. Please indicate your plan to make this time up and return this form to me as soon as possible.

Make-up Time Criteria:

- No more than 10 clinical hours can be completed in one day-may not be past 6:00 pm.
- Should be at least 4 hour blocks of time; other arrangements can be made if needed
- 5 hour day = 1-15 minute break.
- 6 hour day = 30 minute uncompensated lunch.
- May **NOT** skip lunch or break to make-up time.
- 8 hour day = 1-15 minute break + 1-30 minute lunch.

Make-up plan (include specific dates and hours):

(Remember that if you are late or call in sick on a scheduled make-up day, you will be counted as tardy or absent.)

Student signature

Date

Clinical preceptor signature

Date

Radiologic Science Faculty

Date

All students are required to successfully complete the BLS Healthcare Provider Course. This course must be completed prior to beginning the clinical portion of the program. Any fee for the course is the student's responsibility.

STUDENT HEALTH/ILLNESS

Students should recognize that there are certain health risks inherent in working in a hospital setting. All students enrolled in the Radiologic Science Program ***must have*** health insurance coverage prior to clinical rotations. ***Students must obtain their own health insurance and provide proof of insurance to the Program Director prior to starting at the clinical site.*** There are no free health services for students at any of the clinical facilities. ***Any medical attention necessary for a student, regardless of cause, will be at the students' expense.*** We would encourage all students to voluntarily disclose to their clinical facility any information pertinent in the event of a possible cross-contamination issue.

Students who become ill while on duty must immediately report to the clinical preceptor or department supervisor. The clinical preceptor or department supervisor will assist the student in any appropriate action needed. ***If medical attention is required, the student is responsible for medical expenses.*** Occupational exposure to a communicable disease will be handled according to hospital policy ***but any expenses incurred are the student's responsibility.***

Out of respect and concern for patients and coworkers, any student who is currently affected with a communicable (contagious) disease may not attend clinical. (e.g. H1N1 virus, Tuberculosis, Chicken Pox and COVID) The Clinical Preceptor, department supervisor and/or nurse, will assess students who report to their clinical facility with obvious signs/symptoms of a communicable disease. If it is determined that the student, in his/her current condition, poses a health risk to others, the student will be sent home and the Clinical Preceptor will notify the Radiologic Science Faculty.

Students who have an extended illness and/or surgery that requires them to miss three or more days of clinical must have a physician's release in order to return. The release must allow the student to return to "full duty"- ***there is no "light duty."***

Any student with appropriate medical documentation that prevents them from performing full duties at clinicals may take an "Incomplete", or sit out that clinical semester, while continuing with the didactic courses. Because learning in the Radiologic Science Program is sequential and progressive, any student who must sit out two or more consecutive clinical semesters must repeat all didactic courses associated with that semester.

Prior to entrance into the clinical facility, the student is required to have a physical examination by a physician. The student's personal physician may perform the physical examination but a report must be submitted to the University. Students will obtain the physical examination form from the Program Director.

Occupational Safety and Health Administration recommends that all health care workers that have a possibility of coming into contact with blood at least two times a week should receive the Hepatitis B Vaccine (Recombivax). This vaccine can be obtained through the affiliate hospitals or your family physician ***at the student's expense.***

Students beginning their second year of clinical education must provide proof of a recent (3 months) tuberculosis skin test. A copy of the results must be available to the students' clinical sites no later than April 1.

Students will receive Infection Control instruction prior to entering clinical education. The instructor will follow the guidelines established by OSHA.

PROFESSIONAL INSURANCE

Students are covered under the comprehensive liability insurance program* at the University. Cost of the insurance will be assessed to the student through laboratory fees for clinical courses.

(*Students working at the clinical education center in non-curriculum related activities are not covered under this policy).

Students may carry additional professional liability insurance when enrolled in the clinical courses. The application for this insurance will be available through the professional society (ASRT).

MRI Safety Policy

Students complete MRI orientation and screening which reflect current American College of Radiology (ACR) MR safety guidelines **prior** to the clinical experience.

If a student declares that they have a condition which could be considered a potential contradiction to entering MRI Zone III and/or Zone IV, the program will consult with a Level II MR technologist, MRSO, or MRMD to determine subsequent action.

All students, regardless of prescreening status, will be rescreened by an MR Level II Technologist before proceeding beyond MR Zone II once onsite.

Additionally, any student who has declared pregnancy should not remain within the MR scanner room or Zone IV during actual data acquisition or scanning.

Students will be rescreened by program faculty on an annual basis and are required to notify Radiologic Science faculty immediately should their screening status change at any point throughout the program. Failure to notify program faculty immediately will potentially prohibit the student from interacting in the MR environment.

RADIATION PROTECTION

Students will receive an orientation in radiation protection before entering the clinical facility, and they must adhere to the policies discussed in the orientation. Topics will include methods of protection for the student, the patients, and other hospital personnel. After the orientation, students must sign the **Acknowledgement of Potential Hazards of Exposure to X-ray, Fluoroscopy, and Radioactive Materials** form.

Students in the Avila University Radiologic Science Program will be given a personal radiation-monitoring badge. They will be expected to use this badge at all times when they are assigned to the clinical facility.

Badge reports will be distributed to students on campus during class. Students are required to review and initial their exposure record.

A final permanent exposure record for each student will be maintained at the University in the student's personal file.

Badges should not be laundered. Badges must not be exchanged among students or other radiology workers. Students should not wear badges when undergoing diagnostic x-ray examinations, either medical or dental. If a student has a badge from an employer, this badge must not be worn during clinical time. The student badge must not be worn during a student's work shift. These badges must be kept separate at all times.

Students will be responsible for maintaining possession of their PMD for the duration of their clinical experience. Any student who loses their badge will be required to purchase another one immediately (at their cost), and will be subject to disciplinary action. Any time missed due to lack of a monitoring badge must be made up by the student prior to the end of the semester.

Upon graduation or withdrawal from the program, students may receive a written summary of their occupational radiation exposure by requesting this information, in writing, from the Program Director.

Radiation monitoring badges must be worn on the collar of your lab coat or shirt, and on the outside of the lead apron during fluoroscopic procedures.

PERSONAL MONITORING DEVICE OVEREXPOSURE

In the event a student receives an excessive exposure report from his/her personal monitoring device of 10 mrem or above in a single month, the Radiologic Science (RS) faculty will adhere to the following procedure:

1. The student will meet as soon as possible with the Program Director, Clinical Coordinator (CC), and/or other RS faculty to discuss the excessive reading and the circumstances under which it was received. Together, the student and faculty will fill out the **High Dosage Query Form**. The RS faculty will investigate the radiation protection habits of the student to determine if this over-exposure was caused by lack of adherence to protection standards or to lack of discretion in leaving the monitor in a radiation area.
2. If the investigation shows that the monitor received the over-exposure due to the student leaving it in a radiation area when the student was not wearing it, the student will receive a written warning. Students are required to wear their PMD at all times during clinicals, and to leave them in a designated, non-radiation area when they leave. Additional incidents of leaving the monitor in an inappropriate place will result in progressive disciplinary measures.
3. If the investigation shows that the student is or has been using unacceptable radiation protection habits, the student will receive a written warning and a probationary period of one full semester. (It may be necessary to extend the probation to the following semester.) The RS faculty will counsel the student as to appropriate radiation protection methods. The RS faculty will meet with the student's CP to discuss the supervision of the student during the probationary period. The student will be closely monitored by the CP, CC and/or other RS faculty, and using the monthly exposure records.
4. Any additional incident of over-exposure could result in dismissal from the program.

Holding Policy

Students are never allowed to hold an image receptor during an exposure. Failure to adhere to this policy will result in disciplinary action.

In extreme circumstances, after maximizing all other patient immobilizing options, the student may need to hold a patient.

Each case of patient holding needs to be documented on the Patient Hold Log kept by the Clinical Preceptor.

BREAKS AND LUNCHES

Breaks and lunches are as follows:

- 8 hour day-one 30 minute uncompensated lunch and one 15 minute break
- 6 hour day-30 minute uncompensated lunch
- 5 hour day-one 15 minute break
- 4 hours or less-no break or lunch

Break times must be approved by the CP. Students ***must take their lunch break*** as assigned. Students **may not** forfeit lunch or breaks to make up time.

Students can combine their break and their lunch time (45 minutes total) if preferred and acceptable by the department. Lunches must be initiated between 1100 and 1300 pending extenuating circumstances. Students must also stagger lunch times pending extenuating circumstances.

POLICY FOR NURSING MOTHERS

Mothers of newborns to infants of up to one year will be allowed reasonable breaks in a private and secure area to pump breast milk. Breaks should be no more than 20 minutes in length, and no more frequently than every 2 hours. Should a mother need more time for some reason, or need to continue longer than one year, she will need to make arrangements with the Clinical Preceptor and Clinical Coordinator, and may have to make up extra time used.

VACATIONS AND HOLIDAYS

Vacation and holiday breaks will be observed according to the regular Avila University academic calendar.

BEREAVEMENT POLICY

The Radiologic Science Program recognizes the importance of the special family support needed during periods of bereavement. Students are provided with excused time off from clinical education courses when there is a death in the immediate family. Immediate family is defined as:

Spouse, daughter, son, miscarriage/infant loss, stepdaughter, stepson, father, mother, stepfather, stepmother, grandfather, grandmother, sister, brother, son-in-law, daughter-in-law, grandchildren, mother-in-law, or father-in-law.

Students are allowed three absences from clinical for each death without being required to make up the time.

Time used for bereavement other than those listed above may be granted, but the student will be required to make up this time.

PREGNANCY POLICY

Although students are strongly encouraged to inform the program faculty of pregnancy, disclosure is completely voluntary. Declaring a pregnancy will in no way jeopardize the participation of the student in the program. Decisions regarding continuance in the program during pregnancy will depend on the general health of the student and her ability to perform safely and adequately.

If the student informs the Program Director of her pregnancy the following steps will be taken:

1. The student is asked to submit, in writing, the estimated day of conception to the Program Director.
2. Students will continue in the clinical courses as usual unless they submit, to the Program Director, a written statement from their obstetrician preventing them from doing so.
3. The NRC guidelines on radiation protection for the pregnant worker will be strictly enforced.
 - Student will be provided with a second monitor to be worn at waist level under the lead apron. This monitor will be identified as the fetal dose monitor.
 - The Program Director and the Clinical Coordinator will continuously monitor the radiation exposure to ensure that exposure of the pregnant student does not exceed the recommended dose limit of 0.1 rem (100 mrem) during the entire pregnancy (USNRC Regulatory Guide 8.29).
 - Student will be informed of the radiation exposure reports on a monthly basis.
4. The student shall not be relieved of any radiographic or fluoroscopic assignments because of pregnancy. If the student is unable/unwilling to continue with the prescribed clinical plan she may take an incomplete for the semester. This will allow the student to continue with the didactic portion of the program and will delay completion of the clinical portion until the student is able/willing to continue. If the student chooses to postpone the clinical portion before the semester begins she may continue with the didactic portion for that semester and will be able to complete the clinical portion at a later time. The student will set up an individual plan with the Program Director for clinical completion.
5. Following delivery readmission to the clinical course will be permitted with written approval of the student's physician.
6. The university policy for incomplete grades will be followed.
7. All time and assignments missed must be made up prior to completion of the clinical course.
8. The student may submit a written withdrawal of her disclosure at any time without fear of penalty. Withdrawal of disclosure will in no way jeopardize the student's standing in the program.

For additional information regarding radiation protection during pregnancy, refer to the U. S. Nuclear Regulatory Commission Regulatory Guide 8.29 (copy available in university library). For additional information regarding federal guidelines regarding pregnancy and discrimination, see www.eeoc.gov and/or www.osha.gov.

I, _____, have voluntarily disclosed my pregnancy to the Program Director. I have read the above pregnancy policy for the Avila University Radiologic Science Program and understand that my pregnancy does not jeopardize my participation in the program.

Student Signature

Date

Date of Conception: _____

Estimated Due Date: _____

CLINICAL-RELATED INJURY

- A. Any student who is injured while at the clinical site must immediately notify the clinical preceptor or department supervisor. The clinical preceptor or department supervisor will call the Avila University Clinical Coordinator or Radiologic Science Faculty as soon as possible. The clinical preceptor or department supervisor will complete a **Student Injury Form**.
- B. If the student's injury requires medical attention they may be seen in the appropriate department at their clinical site, or by their own physician. **Any medical treatment is at the student's expense.**
- C. Students requiring medical attention must adhere to the physician's orders. Any physician's restrictions limiting student's ability to perform their expected duties excludes the student from the clinical portion. **There is no "light duty"**. Changes in the prescribed rotation schedule may be considered if possible to accommodate short-term restrictions, but the student must be able to perform all expected duties. Any time missed due to restrictions must be made up after release from the physician.
- D. Student must be rechecked and receive a physician's release prior to returning to clinical activities, if not returned immediately to the clinic for assigned activities. **(Students are responsible for all medical expenses.)**

NEEDLE STICKS

Any student who receives a needle stick, clean or contaminated, must **immediately** report this to the clinical preceptor or department supervisor. The clinical preceptor or department supervisor will contact the Avila University Clinical Coordinator or RS Faculty. The clinical preceptor or department supervisor will complete the **Student Needle Stick Form**. **Any medical follow-up necessary for the student will be at the student's expense.** In the case of a contaminated needle, the clinical site will be responsible for patient follow-up.

STUDENT VENIPUNCTURE

In order to ensure patient and student safety in the clinical setting, Avila Radiologic Science students will **not** be allowed to perform venipuncture of any kind while in a student capacity. This includes practicing on willing volunteers, starting IVs, or any other situation that requires inserting a needle. Violation of this policy will result in immediate disciplinary action with probable dismissal from the program.

PARKING

Students must park in the appropriate place at their clinical site. Parking availability will be discussed with students prior to beginning the clinical program. Students must adhere to any parking regulations put forth by the clinical site, including the use of parking stickers.

DISASTER AND FIRE

Students must participate in all disaster and fire drills. They will be informed of their duties relevant to these drills.

**Avila University
Radiologic Science
Student Injury Form**

Student Name: _____ Date: _____

Clinical Site: _____

Description of injury:

Briefly describe how and when injury occurred:

Person notified at clinical site: _____
Date and Time

Avila person notified: _____
Date and Time

Was medical treatment required? Yes No

If yes, what treatment was provided?

Follow-up:

**Avila University
Radiologic Science
Student Needle Stick Injury Form**

Student Name: _____ Date: _____

Clinical Site: _____

Description of injury:

Briefly describe how and when injury occurred:

Person notified at clinical site: _____
Date and Time

Avila person notified: _____
Date and Time

Was the needle contaminated? Yes No

If yes, what treatment was provided?

Follow-up:

CODE OF ETHICS

This Code shall serve as a guide by that Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, other members of the medical care team, health-care consumers, and employers. The Code is intended to assist radiologic technologists in maintaining a high level of ethical conduct.

- The Radiologic Technologist conducts himself/herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.
- The Radiologic Technologist acts to advance the principle objective of the profession to provide services to humanity with full respect for the dignity of mankind.
- The Radiologic Technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination regardless of sex, race, creed, religion, or socioeconomic status.
- The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purposes for which they have been designed, and employs procedures and techniques appropriately.
- The Radiologic Technologist assesses situations, exercises care, discretion and judgement, assumes responsibility for professional decisions, and acts in the best interest of the patient.
- The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
- The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self and other members of the health care team.
- The Radiologic Technologist practices ethical conduct appropriate to the profession, and protects the patient's right to quality radiologic technology care.
- The Radiologic Technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
- The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skill is through professional continuing education

STANDARD PRECAUTIONS

FOR INFECTION CONTROL

Assume that every person is potentially infected or colonized with an organism that could be transmitted in the healthcare setting.

Hand Hygiene

Avoid unnecessary touching of surfaces in close proximity to the patient.

When hands are visibly dirty, contaminated with proteinaceous material, or visibly soiled with blood or body fluids, wash hands with soap and water.

If hands are not visibly soiled, or after removing visible material with soap and water, decontaminate hands with an alcohol-based hand rub. Alternatively, hands may be washed with an antimicrobial soap and water.

Perform hand hygiene:

Before having direct contact with patients.

After contact with blood, body fluids or excretions, mucous membranes, nonintact skin, or wound dressings.

After contact with a patient's intact skin (e.g., when taking a pulse or blood pressure or lifting a patient).

If hands will be moving from a contaminated body site to a clean body site during patient care.

After contact with inanimate objects (including medical equipment) in the immediate vicinity of the patient.

After removing gloves.



Personal protective equipment (PPE)

Wear PPE when the nature of the anticipated patient interaction indicates that contact with blood or body fluids may occur.

Before leaving the patient's room or cubicle, remove and discard PPE.

Gloves

Wear gloves when contact with blood or other potentially infectious materials, mucous membranes, nonintact skin, or potentially contaminated intact skin (e.g., of a patient incontinent of stool or urine) could occur.

Remove gloves after contact with a patient and/or the surrounding environment using proper technique to prevent hand contamination. Do not wear the same pair of gloves for the care of more than one patient.

Change gloves during patient care if the hands will move from a contaminated body site (e.g., perineal area) to a clean body site (e.g., face).



Gowns

Wear a gown to protect skin and prevent soiling or contamination of clothing during procedures and patient-care activities when contact with blood, body fluids, secretions, or excretions is anticipated.

Wear a gown for direct patient contact if the patient has uncontained secretions or excretions.

Remove gown and perform hand hygiene before leaving patient's environment.



Mouth, nose, eye protection

Use PPE to protect the mucous membranes of the eyes, nose and mouth during procedures and patient-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions and excretions.

During aerosol-generating procedures wear one of the following: a face shield that fully covers the front and sides of the face, a mask with attached shield, or a mask and goggles.



Respiratory Hygiene/Cough Etiquette

Educate healthcare personnel to contain respiratory secretions to prevent droplet and fomite transmission of respiratory pathogens, especially during seasonal outbreaks of viral respiratory tract infections.

Offer masks to coughing patients and other symptomatic persons (e.g., persons who accompany ill patients) upon entry into the facility.



Patient-Care equipment and instruments/devices

Wear PPE (e.g., gloves, gown), according to the level of anticipated contamination, when handling patient-care equipment and instruments/devices that are visibly soiled or may have been in contact with blood or body fluids.



Care of the environment

Include multi-use electronic equipment in policies and procedures for preventing contamination and for cleaning and disinfection, especially those items that are used by patients, those used during delivery of patient care, and mobile devices that are moved in and out of patient rooms frequently (e.g., daily).



Textiles and laundry

Handle used textiles and fabrics with minimum agitation to avoid contamination of air, surfaces and persons.

SECTION III

CLINICAL PROGRAM

CLINICAL DESCRIPTION AND GRADING

During the semester the student will be evaluated in three ways:

Procedure Competency Evaluation (PCE) - PCE provides an objective standardized assessment format for clinical competency of a single procedure. The Clinical Preceptor should perform the majority of PCEs completed.

Final Procedure Competency Evaluation (FPCE) - FPCE provides a standardized assessment format for clinical competency at the end of each semester. One or more procedures may be selected to evaluate a category at the end of each semester. The Clinical Preceptor performs all FPCEs.

Performance Evaluation - A general evaluation that addresses the following areas: attendance, appearance, communication skills, patient care/concern, student initiative, ability to follow direction/instruction, knowledge of routines/department computer, time management, application of didactic to clinical experience, student judgement, basic equipment, student professionalism. The Clinical Preceptor completes the Performance Evaluation.

GRADING

RT 460, 463

40% A combination of the PCE's and FPCE's.

40% Performance Evaluation

20% Online Assignments

RT 461, 462, 464

40% A combination of the PCE's and FPCE's.

50% Performance Evaluation

10% Online Assignments

RT 465

40% A combination of the PCE's and FPCE's.

40% Performance Evaluation

10% Case Studies/Article Reflection

10% Online Assignments

All clinical grades are subject to overview and/or change by the Radiologic Science Faculty.

Detail analysis of the clinical program:

Radiographic Procedures lecture objectives:

1. Discuss the basic anatomy relative to the procedure
2. Describe the specific positioning necessary for the procedures
3. Understand the principles of the radiographic procedures

Procedure Competency Evaluation:

The student must be evaluated while performing each procedure as outlined below:

1. Following the completion of the positioning laboratory a procedure competency evaluation may be performed with observation from a qualified radiographer or Clinical Preceptor. Students are expected to have performed or simulated the exam with the Clinical Preceptor prior to testing on an exam.
2. Students are required to successfully complete a certain number of PCEs prior to the completion of the semester (see Clinical Requirements). A student may request a PCE any time after the procedure laboratory activity. **The completion of the PCE is the student's responsibility.** They must be completed prior to the last week of clinicals. The Clinical Preceptor will perform the final PCE.
3. While PCE completion is intended to be left to the discretion of the student, sometimes it is necessary for the CP to initiate a PCE if the student is completing them at an inadequate pace. **Students are expected to complete their cross-table spine, and ALL**

fluoroscopy PCEs prior to their final semester. Therefore, if these PCEs are not completed by the end of RT 464, the student will receive a grade of "I" incomplete for that semester, until they are successfully completed. This will also be reflected in the final performance grade.

4. Students are required to complete a specific number of PCEs each clinical semester (see Clinical Requirements). In all clinical courses **except RT 465** (see above exception concerning RT 464), students will receive a "0" for any number of PCEs not completed. For example, if four PCEs are required and the student only completes two, that student will receive two scores of "0" for the remaining grades. Students in RT 465 will receive a grade of "I" (incomplete) until all required PCEs are completed. Medical issues or extenuating circumstances which adversely affect a student's performance and/or ability will be evaluated on an individual basis.
5. Students may only simulate exams in the final semester (RT 465) if an actual patient exam does not present itself during that semester. In a simulation, 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" (ARRT). *Fluoroscopic, surgery, contrast exams, trauma, elective and routine radiographic exams **may NOT** be simulated.* Routine radiographic exams may vary among clinical sites, so each case will be considered on an individual basis. A student may simulate only 5 total exams. If a student completes a simulation and then the exam presents itself on a patient, the student is expected to complete the PCE on the patient, replacing the simulation grade. Because digital imaging technology has changed the routine post-image requirement, students may simulate post-GI images if the radiologist does not authorize them for that patient. These simulated images will be counted as part of the routine PCE. These simulations must be completed with the CP on a 'practice person'. If a future GI study allows for post-images, the student should perform these to demonstrate competency on an actual patient.

Grading: All student grades are kept on the Avila University campus.

Percentages for PCE's are broken down into the following categories:

Performance

Technical Performance

Image Evaluation

Reduction of 5% for each repeated radiograph - more than 2 repeats of a view results in failure of PCE.

Letter Grade	%	Grade Point	Performance Description
A	95-100	4.0	Excellent
B	85-94	3.0	Above Average
C	75-84	2.0	Average
F	Below 75	0.0	Repeat Course

Re-evaluation - If a student fails a PCE the following scale will be used during repeat attempts:

1. Second trial - a reduction of 10% of PCE final grade
2. Third trial - a reduction of 20% of PCE final grade

If a student fails to successfully complete the same PCE on the third trial, the student will be required to:

1. complete a written didactic review over the exam;
2. perform a minimum of 4 of those exams with the CP (this may include simulations, depending on the exam);
3. complete the PCE for the exam with the CP with 20% off;

4. If the student does not pass the PCE after these steps, the Radiologic Science Faculty will evaluate the total competency of the student to determine possible disciplinary action and/or standing in the program.

Students requiring more than two re-evaluations of four or more procedures will be required to repeat the course.

- FPCEs will be given at the end of the semester. The Clinical Preceptor will determine the type of final and when it is performed. FPCEs will be progressive in difficulty level.
- The same evaluation instrument and grading scale used for the PCEs will be used on the FPCE.
- If the student fails a FPCE that grade will be figured into the final grade for the semester.
- If a student fails a PCE on an elective examination, the student **MUST** repeat that test-out with the appropriate grade reduction (see above).

Privilege of Indirect Supervision at Clinical Site- Students who successfully complete a PCE should have proven competency for that procedure, and be able to work under indirect supervision from that point. If, however, the Clinical Preceptor should observe skills and/or behaviors that questions the students' ability to safely perform exams under indirect supervision, she/he may, after consultation with the Clinical Coordinator, indefinitely revoke the privilege of indirect supervision. At that time, a remediation plan will be put into place to assess the student's overall competency.

Remediation- The Program Director must sign the ARRT registry applications for all graduates verifying successful completion of "all didactic and clinical competency requirements..." In order to ensure student competency and patient safety, the Radiologic Science Faculty reserves the right to individually assess the overall competency of any student who must repeat **three** or more PCEs during their entire clinical assignment.

A student can also be placed on a remediation plan if there are *any* concerns regarding clinical performance.

Students who find themselves in these situations will create a customized remediation plan with the Radiologic Science Faculty. If the student does not achieve competency as dictated in their remediation plan, the student will not be able to continue in, or reenter, the program.

The Radiologic Science Faculty encourages Clinical Preceptors to review the remediation plan with students following each failed PCE. However, it is the students' responsibility to understand the policy. Following three failed PCEs, a remediation plan will begin regardless of whether or not a policy review has taken place.

Performance Evaluations - Staff technologists will complete attitudinal evaluations on every student. The Clinical Preceptor will use these forms, input from other technologists, and knowledge based on their observations and work with the student to complete a comprehensive performance evaluation form at the end of the semester. Juniors and seniors have identical forms but the expectations for each class are different, therefore the grades are calculated using a weighting system. Each factor of the grade is given a multiplication factor based on the weight given that particular criterion for that class. The criteria are evaluated using the following scale:

4 Superior 3 Above Average 2 Average 1 Below Average 0 Failing

The CP assigns a number to each criteria based on the student's performance. That number is multiplied by the factor assigned to the criteria for that class. Each criterion is evaluated in this manner. The points are totaled to determine the grade. If a student has not completed the semester requirements, they will receive a grade of Incomplete "I" or "F".

The weighting factors are determined by the RS Faculty and clinical preceptors. They are evaluated annually prior to the start of the summer semester.

RT 460, 461, 462
PROCEDURE COMPETENCY EVALUATION (PCE)

PATIENT NAME: _____
PATIENT ID: _____

STUDENT: _____ DATE: _____ SEMESTER: _____

EVALUATOR: _____ SCORE: _____ ROOM: _____

EXAM: _____

REPEAT EXAM: 1ST ATTEMPT 10% OFF

2ND ATTEMPT 20% OFF

A. EXAM PREP: (5%) SCORE _____

1. SET UP ROOM
2. CHECK THE ORDER
3. VERIFY PATIENT W PROPER IDENTIFIERS
4. PROPERLY DRESS PATIENT
5. DOCUMENT APPROPRIATE AND THOROUGH HISTORY
6. EXPLAIN PROCEDURE TO PATIENT BEFORE STARTING EXAM

YES	NO	N/A

B. PATIENT CARE/RADIATION SAFETY: (10%) SCORE _____

1. ASSIST PATIENT TO AND FROM TABLE/BUCKY
 2. ESTABLISH AGE-APPROPRIATE RAPPORT WITH PATIENT
 3. TREAT PT WITH RESPECT FOR CULTURAL DIFFERENCES AND/OR SPECIAL NEEDS
 4. ESTABLISH NON-PREGNANCY*
 5. MOVE PATIENT AS MINIMALLY AS POSSIBLE
 6. WEAR PROTECTIVE DEVICES
 7. WEAR RADIATION MONITORING BADGE PROPERLY
 8. TAKE FILMS IN LOGICAL SEQUENCE
 9. USE AGE-APPROPRIATE COMMUNICATION, VERBAL AND NON-VERBAL
- * MUST FOLLOW DEPARTMENT POLICY; FAILURE REQUIRES RETESTING

YES	NO	N/A

C. POST EXAM: (5%) SCORE _____

1. COMPLETE PAPERWORK
2. COMPLETE COMPUTER WORK
3. ROOM READY FOR NEXT PATIENT
4. WASH HANDS
5. CORRECT ROUTINE/PROCEDURE
6. PROPER USE OF EQUIPMENT
7. EXAM COMPLETED IN TIMELY MANNER

YES	NO	N/A

TECHNICAL PERFORMANCE (45%) SCORE _
X=ACCEPTABLE 0= UNACCEPTABLE

**REPEAT VIEWS
 ½ POINTS ONLY
 5% REDUCTION
 OVERALL FOR
 EACH IMAGE**

VIEWS							
Set correct technique before positioning							
Use appropriate film size							
Center part to film appropriately							
Correct landmarks							
Correct tube angulation							
Correct SID							
Correct positioning							
Cassette/bucky/table aligned							
Assess/record exposure index							
Proper CR processing							
Collimation							
Proper breathing instructions							

Technique Used kVp _____ mAs _____

IMAGE EVALUATION (35%) SCORE _
To be completed by Clinical Preceptor

**REPEAT VIEWS
 ½ POINTS ONLY
 5% REDUCTION
 OVERALL FOR
 EACH IMAGE**

VIEWS							
Student marker visible							
Correct student marker (R/L)							
Marker in appropriate position							
Part in the proper perspective							
Correct technique							
Collimation							
Free from artifacts, motion, etc.							

STUDENT SIGNATURE: _____

DATE: _____

STUDENT: _____

DATE: _____

SEMESTER: _____

EVALUATOR: _____

SCORE: _____

ROOM: _____

EXAM: _____

REPEAT EXAM: 1ST ATTEMPT 10% OFF2ND ATTEMPT 20% OFF**A. EXAM PREP: (5%) SCORE _____**

1. SET UP ROOM
2. CHECK THE ORDER
3. VERIFY PATIENT W PROPER IDENTIFIERS
4. PROPERLY DRESS PATIENT
5. DOCUMENT APPROPRIATE AND THOROUGH HISTORY
6. EXPLAIN PROCEDURE TO PATIENT BEFORE STARTING EXAM

YES	NO	N/A

B. PATIENT CARE/RADIATION SAFETY: (10%) SCORE _____

1. ASSIST PATIENT TO AND FROM TABLE/BUCKY
2. ESTABLISH AGE-APPROPRIATE RAPPORT WITH PATIENT
3. TREAT PT WITH RESPECT FOR CULTURAL DIFFERENCES AND/OR SPECIAL NEEDS
4. ESTABLISH NON-PREGNANCY*
5. MOVE PATIENT AS MINIMALLY AS POSSIBLE
6. WEAR PROTECTIVE DEVICES
7. WEAR RADIATION MONITORING BADGE PROPERLY
8. TAKE FILMS IN LOGICAL SEQUENCE
9. USE AGE-APPROPRIATE COMMUNICATION, VERBAL AND NON-VERBAL
10. MONITOR PATIENT'S IV, O2, ETC.

* MUST FOLLOW DEPARTMENT POLICY; FAILURE REQUIRES RETESTING

YES	NO	N/A

C. POST EXAM: (5%) SCORE _____

1. COMPLETE PAPERWORK/COMPUTER WORK
2. ROOM READY FOR NEXT PATIENT
3. CORRECT ROUTINE/PROCEDURE
4. IMPROVISE FOR NON-ROUTINE SITUATIONS
5. SPECIAL NEEDS OF PATIENT RECOGNIZED/MET
6. EXAM COMPLETED IN TIMELY MANNER

YES	NO	N/A

TECHNICAL PERFORMANCE (45%) SCORE
X=ACCEPTABLE 0= UNACCEPTABLE

**REPEAT VIEWS
 $\frac{1}{2}$ POINTS ONLY
 5% REDUCTION
 OVERALL FOR
 EACH IMAGE**

VIEWES											
Set correct technique before positioning											
Use appropriate film size											
Center part to film appropriately											
Correct tube angulation											
Correct SID											
Correct positioning											
Cassette/bucky/table aligned											
Assess/record exposure index											
Proper CR processing											
Collimation											
Proper breathing instructions											

Technique Used kVp _____ mAs _____

IMAGE EVALUATION (35%) SCORE __
To be completed by Clinical Preceptor

**REPEAT VIEWS
 $\frac{1}{2}$ POINTS ONLY
 5% REDUCTION
 OVERALL FOR
 EACH IMAGE**

VIEWES											
Student marker visible											
Correct student marker (R/L)											
Marker in appropriate position											
Part in the proper perspective											
Correct technique											
Patient information											

STUDENT SIGNATURE: _____

DATE: _____

**C-ARM
PROCEDURE COMPETENCY EVALUATION (PCE)**

Semester: _____

STUDENT: _____ DATE: _____

EVALUATOR: _____ SCORE: _____

Repeat exam:
1st attempt 10% off
2nd attempt 20% off

EXAM: _____

I. Performance

A. Exam Prep: (25%) SCORE _____

1. Comes properly dressed in surgery scrubs, hat, mask, etc
2. Knows which surgery suite doors to come into
3. Verifies patient with proper identifiers
4. Maintains sterile field
5. C-arm set up properly
6. Patient information entered correctly

Yes	No	N/A

Pt. Name: _____

MRN: _____

B. Radiation Safety: (15%) SCORE _____

1. Wears radiation monitoring badge properly
2. Wears proper personal protective equipment
3. Verifies that all other personnel are wearing proper equipment
4. other

Yes	No	N/A

C. Technical Performance (35%) SCORE _____

1. Able to manipulate C-arm to get images requested by surgeon
2. Able to easily manipulate from an AP to a lateral
3. Understands how to use all locks
4. Knows how to adjust technique to get a good image
5. Able to use all control buttons (collimators, magnification, etc)
6. Records fluoro time in the appropriate area
7. other

Yes	No	N/A

C. Post Exam: (25%) SCORE _____

1. Knows how to properly unhook equipment
2. Knows how to send images to PACS
3. Knows how to annotate images before sending-if necessary
4. Complete paper/ computer work
5. Exam completed in timely manner
6. Knows how to print images- if necessary
7. other

Yes	No	N/A

STUDENT SIGNATURE: _____ DATE: _____

EXCEL-GRADES-PCEFORM 5/12

FLUOROSCOPY w/wo Images

PATIENT NAME: _____

PROCEDURE COMPETENCY EVALUATION (PCE) PATIENT ID: _____

STUDENT: _____

DATE: _____

SEMESTER: _____

EVALUATOR: _____

SCORE: _____

ROOM: _____

EXAM: _____

REPEAT EXAM: 1ST ATTEMPT 10% OFF2ND ATTEMPT 20% OFF

D. EXAM PREP: (20%) (35%) SCORE _____

1. CHECK THE ORDER
2. APPROPRIATE PAPERWORK FILLED OUT
3. PUT INFO INTO THE COMPUTER
4. PULLED APPROPRIATE MEDICATIONS
5. SET UP STERILE TRAY
6. LABELED SYRINGES
7. MOVED BUCKY/PEDAL FOR RAD
8. GLOVES, HAT, MASK AVAILABLE FOR RAD
9. DOCUMENT APPROPRIATE AND THOROUGH HISTORY
10. EXPLAIN PROCEDURE TO PATIENT BEFORE STARTING EXAM

YES	NO	N/A

E. TECHNICAL PERFORMANCE: (30%) (45%) SCORE _____

11. ASSIST PATIENT TO AND FROM TABLE/BUCKY
12. SHIELDED PATIENT
13. POSITIONED PART APPROPRIATELY
14. CLEANED PART WITH APPROPRIATE STERILE TECHNIQUE
15. COLLIMATED PART
16. TIMEOUT COMPLETED WHEN RAD ENTERS ROOM
17. RAN FLUORO TOWER APPROPRIATELY
18. CLEAN PATIENT'S PART AND APPLY BANDAID

YES	NO	N/A

F. POST EXAM: (10%) (20%) SCORE _____

1. INFORMED PATIENT OF POST PROCEDURE INSTRUCTIONS
2. SCANNED MED LIST TO PACS W/ FLUORO TIME
3. SENT FILMS TO PACS
4. LOCKED FLUORO CABINETS
5. CLEANED ROOM/READY FOR NEXT PATIENT

YES	NO	N/A

STUDENT SIGNATURE: _____

DATE: _____

X=ACCEPTABLE 0= UNACCEPTABLE

[illegible]

To be completed by Clinical Preceptor

[illegible]

DATE: _____

Avila University
Radiologic Science
Student Performance / Attitudinal Evaluation

STUDENT : _____

Room/Area: _____

Place an "X" on the line where you feel the student falls. Please write comments below each category. These comments will remain confidential.

9-10 - Excellent

7-8 - Very Good

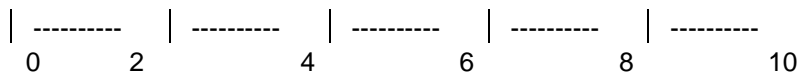
5-6 - Good

3-4- Below avg.

0-2- Unacceptable

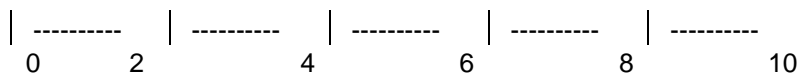
A. Student/Patient Relationship

Attitude, age-appropriate
communication, awareness



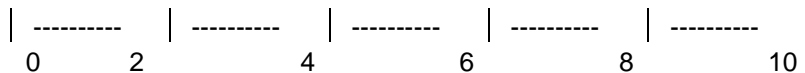
B. Interpersonal relationships

Cooperation, age-appropriate
communication, attitude



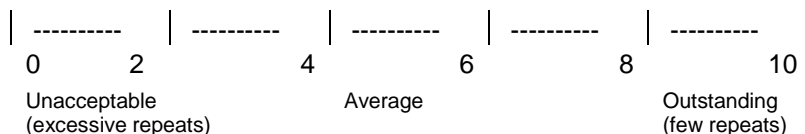
C. Dependability/Responsibility

Punctuality, conscientiousness,
availability



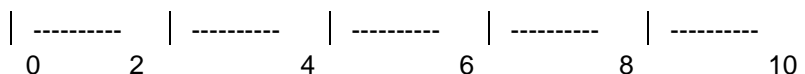
D. Student Repeat Rate

How often must student repeat
films? Are they similar mistakes?



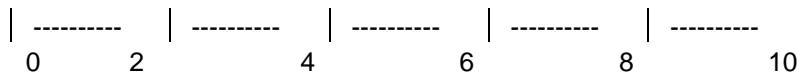
**E. Professional attitude/
behavior**

Courtesy, tact,
positive & helpful attitude



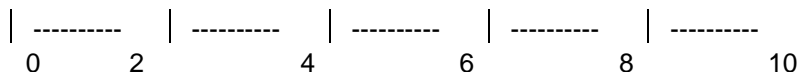
**F. Response to authority/
direction**

Integrity, response to criticism
& suggestions, implementation



G. Initiative

Interest in procedures,
performance of routine &
unfamiliar exams, helpfulness
in other areas



H. **Procedure knowledge/ability**
Knowledge of routine procedures,
views, technical factors, positioning
abilities, equipment manipulation,
confidence, ability to modify exam

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

I. **Organization/efficiency**
Applies organizational skills,
utilizes foresight, completes exams
in a timely manner

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

J. **Paperwork**
Completes in accurate, legible, &
timely manner, consistent in
follow-through

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

K. **Radiation Protection**
Utilizes appropriate technical
factors, collimation, shielding,
use of cones

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

L. **Patient Care**
Practices age-appropriate care,
safety skills, recognizes & responds
to unique situations

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

M. **Infection Control**
Utilizes knowledge of
appropriate infection control
policies and procedures

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

N. **Equipment/Supplies**
Uses equipment properly,
room supplies kept current,
rooms/areas cleaned

| ----- | ----- | ----- | ----- | ----- |
0 2 4 6 8 10

Additional comments:

Technologist signature

Date

**Avila University
Radiologic Science
Progress Evaluation
Advanced Modality**

Student Name: _____ **Date:** _____

Hospital/Site: _____

Circle the number that indicates your evaluation of the student's abilities and performance.

- 5 = Superior; no infractions of the performance standard
- 4 = Above average; one or two infractions of the standard
- 3 = Average; a few infractions of the standard
- 2 = Below average; several infractions of the standard
- 1 = Unacceptable; multiple infractions of the standard

1. Attendance 5 4 3 2 1
The student reports to clinical on assigned days at the assigned time.
2. Dependability 5 4 3 2 1
The student follows through with clinical responsibilities and rotations. The student calls the clinical site when he/she will be late or absent.
3. Dress Code/Personal Hygiene 5 4 3 2 1
The student reports to the clinical site dressed in appropriate attire. The student is well-groomed and clean in appearance.
4. Initiative 5 4 3 2 1
The student expresses interest in procedures, is eager to learn and performs duties without being asked.
5. Organization 5 4 3 2 1
The student performs duties in a logical fashion, utilizes foresight and adapts to situations as needed.
6. Acceptance of Helpful Criticism 5 4 3 2 1
The student accepts constructive criticism and shows willingness to comply with suggestions.
7. Self Confidence 5 4 3 2 1
The student displays maturity and confidence while recognizing his/her limitations.

8. Attitude 5 4 3 2 1
The student maintains a positive outlook about the clinical experience.
9. Patient Care 5 4 3 2 1
The student perceives patient's age-appropriate needs and creates a safe, friendly, and comfortable atmosphere.
10. Communication 5 4 3 2 1
The student speaks clearly, explains procedures to patient using age-appropriate language and skills.
11. Interpersonal Relationships 5 4 3 2 1
The student displays respect for and exhibits positive verbal and non-verbal interactions and communication toward patients, physicians, and other personnel.
12. Progress 5 4 3 2 1
The student shows improvement and growth in specialty area.

Total Score _____

Comments:

Evaluator's Signature Date

Student Signature Date

PERFORMANCE EVALUATION

WEIGHTING FACTORS

Juniors

Seniors

Weighted factor

Weighted factor

Attendance		4
Appearance		3
Communication Skills		2
Patient Care/Concern		2
Student Initiative		4
Ability to Follow Direction/Instruction		2
Knowledge of Routines/Department Computer		1
Time Management		
Application of Didactic to Clinical Experience		1
Student Judgment		4
Basic Equipment		1
Student Professionalism		1
		1

4
1
2
4
3
2
1
1
1
2
1
4

PERFORMANCE EVALUATION

RT 460 461 462

NAME	DATE	TERM	Total Points
A. Attendance_____ x 4:			_____
B. Appearance_____ x 3:			_____
C. Communication Skills _____ x 2:			_____
D. Patient Care/Concern_____ x 2:			_____
E. Student Initiative_____ x 4:			_____
F. Ability to Follow Direction/Instruction_____ x 2:			_____
G. Knowledge of Routines/Department Computer_____ x 1:			_____
H. Time Management_____ x 1:			_____
I. Application of Didactic to Clinical Experience_____ x 4:			_____
J. Student Judgment _____ x 1:			_____
K. Basic Equipment_____ x 1:			_____
L. Student Professionalism_____ x 1:			_____

Overall Comments:

PCE Completion	Days	Tardies	Raw	%	Grade
Rate	Absent		Score		

Student Signature	Date
-------------------	------

Clinical Preceptor Signature	Date
------------------------------	------

A. Attendance

- Arrives and times in to department before scheduled time (no incidents)
- Consistently times in and out of department as required
- notifies clinical instructor/supervisor when late or absent.
- attends clinical with no unscheduled absences during the semester.
- asks permission from clinical instructor/supervisor when leaving department.
- schedules personal appointments on days other than clinical time.
- returns from break and lunches in time allotted.
- leaves clinical at scheduled time unless prior arrangements made with clinical instructor to leave early.
- makes up time in a willing and timely manner.

B. Appearance

- Follows dress code guidelines printed in the clinical handbook, **including no gum**
- Follows surgical dress code according to the assigned clinical site.
- Is meticulous in dress and grooming.
- Has a professional appearance.
- Has appropriate hygiene at all times

C. Communication Skills

- Uses appropriate manners in communicating with others.
- Demonstrates respect for the rights, privacy, and diversity of others.
- Uses proper grammar and correct titles when addressing others.
- Demonstrates awareness of age-appropriate communication, both verbal and non-verbal
- Communicates with instructor when late, ill, or when leaving clinical area
- Responds courteously and maturely to questions, criticisms, and requests
- Expresses thoughts, questions, and ideas in a positive, courteous, and respectful manner
- Reports unresolved issues to instructor/supervisor.

D. Patient Care/Concern

- Maintains patient modesty and safety
- Provides patient comfort, as possible
- Uses age-appropriate skills of awareness concerning patients' needs and abilities
- Assists patient to table, bucky, wheelchair, etc.
- Locks wheelchairs and carts when patients are not being transported
- Assists in monitoring patient and relaying accurate information to RN, technologist, physician, etc.
- Shields all patients whenever possible
- Checks room for readiness prior to bringing in patient
- Verifies patient's order from chart/script
- Obtains and records accurate and thorough history
- Shows respect for the cultural differences and/or special needs of all patients

E. Student Initiative

- Arrives to department ready to work in the mornings
- Stays busy in department regardless of supervision.
- Anticipates scheduled exams and is in assigned area, ready to do them.
- Recognizes when others might need assistance and volunteers to help.
- Is ready and enthusiastic about routine, familiar exams
- Is able to modify procedures in certain cases and use problem-solving skills to complete exams
- Is eager to assist others in procedures not yet experienced.
- Keeps work areas cleaned, stocked and organized.

- Checks with clinical instructor during slow times for assignments
- Completes PCEs when possible, in a timely manner, during the semester

F. Ability to Follow Direction/Instruction

- Actively seeks constructive criticism.
- Receives constructive criticism graciously.
- Accepts full responsibility for his/her actions without placing blame elsewhere.
- Accepts directions/suggestions without challenge or complaints.
- Implements direction and suggestions.
- Stays in assigned area when there are patients/exams to be done.
- Turns in completed Attitudinal Evaluations as determined by clinical instructor
- Completes any documentation requested by clinical instructor
- Repeats radiographs only in the presence of a qualified radiographer

G. Knowledge of Routines/Department/Computer

- Carries and uses pocket notebook
- Demonstrates ability to perform exams with improving confidence, accuracy, and speed
- Demonstrates knowledge of department computer and uses
- Knowledgeable of most routine procedures, views, film type/size, positioning, centering, and orientation, specifically extremities, chest exams, abdomen exams, routine fluoroscopy
- Verifies patient order from chart or physician's script

H. Time Management

- Utilizes clinical time to the fullest.
- Works at an even pace
- Completes PCEs throughout the semester to avoid a rush at semester's end
- Anticipates exams to come.
- Restocks rooms between patients.
- Uses breaks and/or lunch times to make personal phone calls.
- Plans ahead to minimize inconvenience to patients.
- Sets a positive example to others by planning and follow-up, and encourages others to do the same.
- Participates in exams not yet competent to perform

I. Application of Didactic to Clinical Experience

- Well informed about most protocols, specifically extremities, chest exams, abdomen exams, routine fluoroscopy
- Follows radiation protection guidelines by using shielding and collimation on all patients possible, and documenting LMP when appropriate
- Uses proper techniques to produce a high-quality image with technologist supervision
- Repeats images only in the presence of a qualified radiographer
- Has all images approved by a registered technologist
- Always wears monitoring badge
- Always wears appropriate lead shielding when needed
- Checks patient information on images/computer screen to ensure accuracy
- Personal markers are visible and appropriately placed on all images

- Performs exams according to didactic radiographic procedures taught at Avila University, in conjunction with department policy

J. Student Judgment

- Monitors patient during exam, keeping focus on the patient's safety, comfort, and needs
- Assesses needs of department when considering breaks and lunches.
- Is able to use critical-thinking skills to recognize and adjust for non-routine situations.
- Uses appropriate skills to assess a situation/problem and provide follow-through
- Maintains appropriate and professional behavior in the clinical setting
- Is able to assess situations in the department in which others might need assistance, and provides assistance without being asked
- Knows and implements Standard Precautions as appropriate

K. Basic Equipment

- Uses equipment properly, including locks and settings.
- Is able to manipulate department radiographic/fluoroscopic equipment for routine exams
- Is able to recognize how equipment must be manipulated for non-routine procedures
- Is able to determine situations that require additional equipment, i.e. grids, cassette holders, aprons, etc., and to provide that equipment
- Cleans and properly stores accessory equipment
- Recognizes when personal protective equipment is needed, and uses it appropriately
- Checks rooms each morning for stock supplies, restocking when necessary, so that rooms are ready for exams

L. Professionalism

- Focuses on patient and their needs during an exam
- Works well with all co-workers, regardless of personality. Accepts individual differences in a mature manner.
- Displays a high degree of integrity when dealing with confidential information
- Maintains a caring, confident, and polished demeanor for the patient
- Uses appropriate titles when addressing patients, co-workers, and physicians
- Practices ethical, professional behavior at all times
- Is able to rise above negative departmental attitudes/comments
- Takes problems/frustrations to the appropriate person (clinical instructor, supervisor, Avila Radiologic Science faculty) when a situation warrants such action

PERFORMANCE EVALUATION

RT 463 464 465

NAME _____ DATE _____ TERM _____

Total Points

- A. Attendance _____ x 4: _____
- B. Appearance _____ x 1: _____
- C. Communication Skills _____ x 2: _____
- D. Patient Care/Concern _____ x 4: _____
- E. Student Initiative _____ x 3: _____
- F. Ability to Follow Direction/Instruction _____ x 2: _____
- G. Knowledge of Routines/Department Computer _____ x 1: _____
- H. Time Management _____ x 1: _____
- I. Application of Didactic to Clinical Experience _____ x 1: _____
- J. Student Judgment _____ x 2: _____
- K. Basic Equipment _____ x 1: _____
- L. Student Professionalism _____ x 4: _____

Overall Comments:

PCE Completion _____ Days _____ Tardies _____ Raw _____ % _____ Grade _____
Rate Absent Score

Student Signature _____ Date _____

Clinical Preceptor Signature _____ Date _____

A. Attendance

- arrives and times in to department before schedule time (no incidents).
- notifies clinical instructor/supervisor that they will be late or absent.
- attends clinical with no unscheduled absences during the semester.
- asks permission from clinical instructor/supervisor when leaving department.
- schedules personal appointments on days other than clinical time.
- returns from break and lunches in time allotted.
- leaves clinical at scheduled time unless prior arrangements made with clinical instructor to leave early.
- makes up time in a willing and timely manner.
- Consistently times in and out of department as required

B. Appearance

- follows dress code guidelines printed in the handbook, including no gum.
- follows surgical dress code according to the assigned clinical site requirements
- Is meticulous in dress and grooming.
- has a professional appearance.
- Has appropriate hygiene at all times

C. Communication Skills

- uses appropriate manners in communicating with others.
- demonstrates a high level of professionalism and respect for the rights, privacy, and diversity of others.
- uses proper grammar and correct titles when addressing others.
- presents a polished, professional image to patients, coworkers, and clinical instructor
- Demonstrates awareness of age-appropriate communication, both verbal and non-verbal
- communicates with instructor when late or ill.
- informs instructor or technologist of their whereabouts during clinical time.
- responds courteously to questions.
- keeps patient informed
- explains clearly and completely what is to be expected.
- listens well, gives and receives feedback.
- attempts to resolve problems in a professional manner
- reports unresolved issues to instructor/supervisor.
- shares thoughts and ideas in a positive, kind, and courteous manner

D. Patient Care/Concern

- maintains patient modesty and safety.
- provides for patient comfort whenever possible
- Uses age-appropriate skills of awareness concerning patients' needs and abilities
- Recognizes conditions or situations which might adversely affect the quality of patient care (oxygen tanks, IV's, etc.), and accurately assesses patient's condition
- never leaves the patient unattended when their condition warrants otherwise.
- Remains conscious of patient's mobility and properly assists the patient when necessary.
- Locks wheelchairs and carts when patients are not being transported.
- Recognizes signs of patient distress, acts promptly in notifying the appropriate person, and displays the appropriate judgment in emergency situations.

- Demonstrates ability to problem-solve and adjust skills when situation warrants
- Verifies patient's order from chart or physician's script
- Shows respect for the cultural differences and/or special needs of all patients

E. Student Initiative

- stays busy according to patient load, regardless of supervision.
- anticipates scheduled exams and is in assigned area, ready to do them.
- anticipates when others might need assistance and volunteers to help.
- is enthusiastic about performing routine, familiar exams as well as more challenging, less familiar exams.
- is eager to assist others in procedures not yet experienced.
- keeps work areas cleaned, stocked and organized.

F. Ability To Follow Direction/Instruction

- actively seeks constructive criticism.
- receives constructive criticism graciously.
- accepts full responsibility for his/her actions without placing blame elsewhere.
- accepts directions/suggestions without challenge or complaints.
- implements direction and suggestions.
- stays in assigned area when there are patients/exams to be done.
- Repeats radiographs only in the presence of a qualified radiographer

G. Knowledge of Routines/Department Computer

- knowledgeable of all routine procedures, views, positioning and centering; does not require direct instruction from instructor or technologist. Carries and utilizes pocket notebook.
- demonstrates the ability to perform exams with confidence, accuracy, and speed.
- demonstrates independent thinking in modifying exams, with little or no guidance.
- demonstrates knowledge of and ease in using the department computer for creating, canceling, or charging an exam.
- Verifies patient order from chart of physician's script

H. Time Management

- utilizes clinical time to the fullest.
- works at an even pace at all times
- completes PCEs throughout the semester to avoid a rush at semester's end.
- recognizes when others need assistance and willingly helps without being asked.
- Recognizes when tasks in the department need to be done without being asked
- anticipates exams to come.
- restocks rooms between patients.
- makes telephone calls at breaks or at lunch.
- plans ahead to minimize inconvenience to patients.
- sets a positive example to others by planning and follow-up and encourages others to do the same.

I. Application of Didactic to Clinical Experience

- well informed on all protocols of the clinical site.
- follows radiation protection guidelines by using shielding and collimation on all patients possible, and documenting LMP when appropriate
- wears monitoring badge and appropriate lead shields when needed.
- uses image evaluation techniques to produce a high-quality image, and has all images approved by a qualified technologist
- Repeats radiographs only in the presence of a qualified radiographer.
- obtains appropriate information from patient to document for radiologist.
- Checks patient information on images/computer screen to ensure accuracy
- Personal markers are visible and appropriately placed on all radiographs
- Performs exams according to didactic radiographic procedures taught at Avila University, in conjunction with department policy

J. Student Judgment

- assesses patient condition and makes appropriate decisions regarding handling of the patient.
- evaluates a situation and requests help when appropriate to ensure quality and patient safety.
- Uses critical-thinking skills to recognize and adjust for non-routine situations
- uses effective and appropriate skills when dealing with problems.
- assesses the patient load and needs of the department when considering breaks and lunchtime.
- Knows and implements Standard Precautions as appropriate

K. Basic Equipment

- uses equipment appropriately, including locks and settings.
- Is able to manipulate and operate all portable equipment without difficulty, including C-arms and surgery/portable equipment.
- Uses problem-solving skills to manipulate equipment to adapt to non-routine situations
- uses cassettes, grids, calipers, cassette holders, protective apparel, immobilization devices, and other accessory equipment appropriately, including storage and cleaning when necessary.
- checks rooms each morning for stock supplies, replacing items when necessary, so that rooms are ready for exams.
- able to connect, change and/or operate wall and portable suction and oxygen.

L. Professionalism

- focuses on patient and their needs during an exam.
- works well with all coworkers, regardless of personality. Accepts individual differences in a mature manner.
- displays a high degree of integrity when dealing with confidential information.
- maintains a confident, caring and polished demeanor for the patient.
- dependable in practicing ethical, professional behavior, regardless of supervision.
- uses appropriate titles when addressing patients, coworkers, or physicians.
- Is able to rise above negative departmental attitudes/comments

Performance Evaluation Grading Scale

	Total Points	Percentage
A	104	100
	102-103	99
	100-101	98
	98-99	97
	96-97	96
	94-95	95

	Total Points	Percentage
B	93	94
	92	93
	91	92
	89-90	91
	87-88	90
	86	89
	85	88
	84	87
	83	86
	82	85

C	81	84
	80	83
	78-79	82
	75-77	81
	72-74	80
	69-71	79
	66-68	78
	63-65	77
	60-62	76
	57-59	75

D	54-56	74
	53	73
	52	72
	49-51	71
	46-48	70
	43-45	69
	40-42	68
	37-39	67
	34-36	66
	31-33	65

Grading Scale:

A 95-100

B 85-94

C 75-84

D 65-74

F Below 65

CLINICAL SEMESTER REQUIREMENTS

The student will progress through the levels of clinical education on the basis of competency. Competency is determined by means of appropriate clinical evaluation tools.

RT 460 CLINICAL EDUCATION I 3 Credit Hours

A clinical course focusing on policies, procedures and functions of the radiology clinical setting. With direct supervision, the student will develop clinical skills through observation and assistance in routine general radiographic studies

8 weeks of up to 32 hours per week at the clinical site.

A total of 4 Procedure Competency Evaluations must be successfully passed prior to completion of this course.

*These PCEs must be completed by your Clinical Preceptor.

RT 461 CLINICAL EDUCATION II 5 Credit Hours

A clinical course with emphasis on supervised application and evaluation of procedures in routine general radiographic studies and fluoroscopic and genitourinary procedures. Students will assist in these areas as directed by the supervising technologist. 16 weeks of up to 32 hours at the clinical site.

A total of 9 PCE's must be successfully passed prior to the completion of this course.

RT 462 CLINICAL EDUCATION III 5 Credit Hours

A clinical course with emphasis on supervised application and evaluation of procedures using contrast media, basic mobile radiography, tomography and continued supervised practice in application and evaluation of procedures in general radiographic studies.

16 weeks of up to 32 hours per week at the clinical site.

A total of 9 PCE's must be successfully passed prior to the completion of this course.

RT 463 CLINICAL EDUCATION IV 3 Credit Hours

A clinical course with emphasis on supervised application and evaluation of procedures involving the skeletal system, advanced mobile radiography, trauma radiography and continued practice with limited supervision in application and evaluation of procedures in general radiography, basic mobile radiography and routine procedures using contrast media. Students will be assigned to a **two week** evening shift with limited supervision for continued emphasis on emergency radiology.

8 weeks of up to 32 hours per week at the clinical site.

A total of 9 PCE's must be successfully passed prior to the completion of this course.

RT 464 CLINICAL EDUCATION V 5 Credit Hours

A clinical course emphasizing the development of expertise in all radiographic procedures with indirect supervision in proven competency areas and direct supervision in other areas. Observation and limited participation with direct supervision in supplementary imaging modalities.

16 weeks of up to 32 hours per week at the clinical site.

A total of 9 PCE's must be successfully passed prior to the completion of this course.

CLINICAL SEMESTER REQUIREMENTS (con't)

RT 465 CLINICAL EDUCATION VI 3 Credit Hours

A clinical course in which, through case studies, students will follow and contribute to the care of patients from diverse backgrounds. This course will emphasize the development of expertise in all radiographic procedures and patient care, with indirect supervision in proven competency areas and direct supervision in other areas. Observation and limited participation with direct supervision in supplementary imaging modalities. Course is 16 weeks of up to 32 hours per week.

All remaining required PCE's must be successfully passed prior to the completion of this course. Special Evaluations from each of the specialty areas must be completed before the completion of the course.

Advanced Clinical Option

During the student's final clinical semester, students who qualify will be given the opportunity to train in an advanced modality of their choosing for the final 7 weeks of the semester. Qualifying students will be determined as follows:

- Students who have completed all required competencies by the given deadline.
 - o Deadline will vary year to year but given to students the first day of spring class.
 - o Carry a maximum of 2 simulated exam.
- Students who are in good standing across all classes without current disciplinary actions.

If you meet the above criteria you will qualify to apply to be placed in an advanced modality of your choice. It is then up to the clinical site to approve/deny your request based on department availability/staffing.

All clinical grades will be kept at the university. It is the responsibility of the clinical preceptors to bring the completed PCE forms to the Clinical Coordinator or supervisor.

Clinical Preceptors will hold a mid-term conference with each student to discuss the student's progress and areas of possible improvement.

The Clinical Preceptor will complete Performance Evaluations during the final week. The Performance Evaluation reflects students' performance within the clinical site. Clinical Preceptors will turn in Performance Evaluations to the clinical coordinator or supervisor for the processing of grades.

(In all clinical courses except RT 465 students will receive a "0" for any number of PCEs not completed. Students in RT 465 will receive a grade of "I" (incomplete) until all required PCEs are completed. Extenuating circumstances that adversely affect a student's performance and/or ability will be evaluated on an individual basis.)

CRITERIA FOR CLINICAL PERFORMANCE AND EVALUATION

I. SKILL ANALYSIS

A. Patient/Technologist Relationship

Student was able to:

1. Introduce self to patient.
2. Assist patient to radiographic room, on and off the x-ray table, into and out of mode of travel.
3. Demonstrate consideration for patient's condition and needs.
4. Give proper instructions for moving and breathing.
5. Observe patient during exposure.
6. Perform immediate and accurate nursing procedures when indicated (vomiting, fainting, enema tip insertion, etc.)
7. Utilize Standard Precautions at all times.
8. Use proper technique to fill syringe with contrast media.
9. Save and show empty vial or ampule to doctor PRIOR to injection.
10. Complete all necessary paperwork.

B. Positioning Skills

Student was able to:

1. Position the patient correctly on table.
2. Align center of part to be demonstrated to the middle of or section of image receptor as appropriate.
3. Center CR to the center of or section of image receptor as appropriate.
4. Oblique patient correctly if required.
5. Angle the CR to center of IR as appropriate.
6. Remove unnecessary anatomical parts and artifacts from the radiograph area.
7. Utilize proper topographical landmarks to establish position.
8. Improvise for other than routine projections as indicated.
9. Perform routine examinations according to departmental procedure manual unless otherwise indicated.

C. Equipment Manipulation

Student was able to:

1. Turn tube from horizontal to vertical (and vice versa).
2. Move the bucky tray and utilize lock.
3. Correctly identify and utilize tube locks and other accessory equipment.
4. Insert and remove cassettes from bucky tray.
5. Set unit controls carefully and accurately PRIOR to positioning patient.
6. Perform procedures within limitations of equipment.
7. Use a technique chart or established method of technique formulation.
8. Measure the patient.
9. Identify the image correctly with "R" or "L" marker and personal initials according to departmental procedure.
10. Direct mobile unit, if applicable.
11. Operate controls and locks for mobile unit.

12. Select proper cassette size, alignment, and placement.
13. Adapt for technique changes in SID, grid ratio, and collimation.

D. Evidence of Radiation Protection/Safety

Student was able to:

1. Collimate to part and demonstrate collimation on each view.
2. Use gonadal shields, if appropriate.
3. Wear lead apron and gloves, if appropriate.
4. Wear personal monitoring badge consistently and appropriately.
5. Select proper exposure factors.
6. Adjust exposure techniques for motion.
7. Employ necessary immobilization devices as indicated.
8. Assess patient's condition and stay in attendance of patient as indicated.
9. Document female patient's LMP and pregnancy prior to exposure.

II. IMAGE EVALUATION

E. Anatomical Part(s)

1. Part is shown in its proper perspective.
2. No motion present.

F. Proper Alignment

1. Image receptor centered.
2. Part centered.
3. Tube centered.
4. Patient obliqued or rotated correctly.
5. Tube angulation.

G. Technique Manipulation

1. Chart or method of technique formulation was used correctly (proper contrast and density).
2. Factors manipulated for pathology, age, etc.
3. Appropriate exposure used to produce image.

H. Film Identification

1. "R" or "L" marker and personal initials in correct place.
2. Minute or hour markers visible.
3. Name, number, date, etc., can be identified.
4. Tomographic thickness identified.

I. Radiation Protection

1. Collimation marks visible.
2. No repeats.
3. Gonadal shields in place (if appropriate).

ACKNOWLEDGMENT OF POTENTIAL HAZARDS OF EXPOSURE TO X-RAY, FLUOROSCOPY AND RADIOACTIVE MATERIALS

I have received instruction in the potential hazards of exposure of x-ray, fluoroscopy and radioactive materials.

I have also received instruction in the proper methods for working in this environment.

I have been introduced to the information found in the United States Nuclear Regulatory Commission Regulatory Guide 8.29. I understand that a copy of this guide is available in the university library for review at any time.

(Females): I understand the possible hazards involved in working in this department while pregnant and the procedures to follow if I become pregnant.

I have received my personal radiation-monitoring device (#_____) and understand that I am required to wear it **at all times** when working in a clinical rotation. I understand that if my monitoring device is lost I am to report it to my Clinical Coordinator. I understand that I may not remain at a clinical site without my monitoring badge, so I may be sent home and will have to make up that time. Requests for replacement of a lost monitoring device must be directed to the Radiologic Science Program Director or Clinical Coordinator as soon as possible. I understand that I will be responsible for any costs in acquiring a new monitoring device.

(Student)

Date

(Witness)

Date

***RADIOLOGIC SCIENCE PROGRAM
HEPATITIS B VACCINE FORM***

I have received information concerning the Hepatitis B vaccine. I understand the benefits and risks of Hepatitis B vaccination.

I have already started and/or completed the Hepatitis B vaccination regiment and will provide Avila University with a record of the dates of those immunizations.

Student Name

Date

I have requested the Hepatitis B vaccination from my personal physician and will provide Avila University with a record of immunization.

Student Name

Date

Avila University
Radiologic Science Program
Acknowledgment of Handbook Policies

I have received a copy of the policies of the Avila University Radiologic Science Program. The policies have been reviewed and clarified. I understand these and agree to abide by the dictates of these policies. I also understand that if any changes are made to alter the policies I will be notified and will be responsible for immediate compliance to any additions or deletions to the policies.

Student Signature

Date

Witness

Date

Avila University
Radiologic Science Program

Acknowledgment of Handbook Policy Changes

I have received a copy of all policy changes of the Avila University Radiologic Science Program Handbook that affect me. The policies have been reviewed and clarified. I understand these and agree to abide by the dictates of these policies.

I understand that it is my responsibility to bring any questions or concerns regarding these changes to the Radiologic Science Faculty.

Student Signature

Date

Witness

Date

Examinations for Clinical Competencies
(PCE)

NAME: _____

	DATE		DATE
UPPER EXTREMITY		LOWER EXTREMITY	
Clavicle		Ankle	
Elbow		Femur	
Thumb or Finger		Foot	
Forearm		Hip	
Hand		Knee	
Humerus		Pelvis	
Shoulder		Tib/Fib	
Wrist		CRANIUM - ONE of these	
CHEST		Sinuses	
Chest Wheelchair/Stretcher		Skull	
Lat. Decub		SURGERY	
PA & LAT		Non-orthopedic C-arm: around sterile field	
Ribs		Orthopedic C-arm: two opposing views	
SPINES		TRAUMA	
Cervical		Spine (cross-table)	
Lumbar		Hip (cross-table)	
Thoracic		Lower extremity	
GI		Shoulder (Y or transthoracic)	
Esophagram		Upper extremity (non-shoulder)	
BE (dbl or single)		ELECTIVES	
Small Bowel		AC Joints	
UGI		SC Joints	
PEDIATRIC		Sternum	
Chest (6yrs/younger)		Scapula	
Pediatric Portable (6/younger)		Calcaneus	
"GRAMS" - ONE of these:		Toes	
Arthrogram		Patella	
Cystogram/Cystourethrogram		Soft Tissue Neck	
Hysterosalpingogram		Scoliosis Series	
Myelogram		Sacrum and or/Coccyx	
PORTABLE		SI Jts	
Abdomen		Pediatric Extremity (6/younger)	
Chest		Pediatric Abd (6/younger)	
Orthopedic		TMJ	
ABDOMEN		Facial Bones	
Abd Series (must include upright)		Mandible	
Decub		Nasal Bones	
KUB		Orbits/Eye for Foreign Body	
GERIATRIC		ERCP	
Geriatric Extremity		IVU	
Chest PA & LAT Geriatric			
Geriatric Hip or Spine			

- Students must complete all exams listed except those under electives.
- Students must complete at least 5 electives during the entire program.
- Additional procedures under cranium or "grams" can be counted as electives.
- Students must demonstrate competency (75% or higher) in all procedures. Only 5 of these may be simulated.
- Esophagram cannot be a swallowing study
- Geriatric must be at least 65 years old and physically or cognitively impaired as a result of aging.

RADIOGRAPHY PROGRAM

SEMESTER RT	460	461	462	463	464	465	TOTAL
ROTATION (weeks)	8	16	15	8	16	15	78
General Radiography	4	7	6	1	4	5	21
Fluoroscopy	2	5	5	2	3	3	18
Portable and Surgery	1	4	3	2	3	3	15
Evening Rotation				2			2
Optional*					1	4	5
Support Services							
Transportation	1						1
Office			1				1
CT					1		1
Ultrasound					1		1
MRI					1		1
Special Procedures/ Cardiovascular Lab					1		1
Nuclear Medicine					1		1
Radiation Therapy				1			1

JR JR JR SR SR SR

* Optional rotations may be taken **only** if the student is in good standing with their PCEs. If they are lacking in their PCEs numbers, the student must spend the optional time in diagnostic or fluoroscopy. Optional rotations may be: CT, Ultrasound, MRI, CV/Special Procedures, Nuclear Medicine, Radiation Therapy, Mammography, or any other imaging area the student selects with approval of the Clinical Preceptor and/or Clinical Coordinator.