



**ST. CLOUD HOSPITAL  
SCHOOL OF DIAGNOSTIC IMAGING  
HANDBOOK 2024-2025**



## ST. CLOUD HOSPITAL - SCHOOL OF DIAGNOSTIC IMAGING

### Student Handbook

The purpose of this handbook is to inform students and prospective students of their responsibilities and to provide the policies and procedures for the St. Cloud Hospital's School of Diagnostic Imaging program. The understanding of this handbook is the responsibility of the student.

This handbook is not intended to cover all topics and circumstances. We reserve the right to respond to specific situations in a manner that we believe best suits the needs of the Program and the student(s) involved, and most closely follows our stated policies.

This handbook replaces and supersedes all prior student information materials that were provided by St. Cloud Hospital School of Diagnostic Imaging and/or CentraCare St. Cloud Hospital. The school and/or sponsoring institution reserve the right to withdraw or amend the handbook, prospectively or retrospectively, at any time, without notice.

Any amendments and supplements during the academic year shall be disseminated to the student in a paper copy format. A signature page will be maintained by the program director that signifies the student's acknowledgement of any changed policy.

***Enrollment in the School of Diagnostic Imaging implies willingness on part of the student to comply with the rules and regulations printed in the Student Handbook and with official communications from the School of Diagnostic Imaging provided prior to the time of admission.***

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May 2021

May 2020

May 2019

May 2018

# TABLE OF CONTENTS

<b>ADMINISTRATION.....</b>	<b>1</b>
<b>GENERAL INFORMATION</b>	
Program Information .....	3
Accreditation .....	3
Mission.....	4
Goals .....	4
Outcomes .....	4
History of Program .....	4
Skills You Need.....	5
Nature of Work .....	5
Environmental Conditions.....	6
Background Information .....	6
Employment Prospects .....	7
Technical Standards .....	7
<b>CURRICULUM</b>	
Program Courses .....	10
Course Descriptions .....	11
<b>ADMISSIONS</b>	
Admission Requirements/College Affiliations.....	16
Application Process .....	16
Criminal Background Checks .....	17
Drug Screens .....	17
Acceptance Fee.....	18
Advance Standing/Transfer Students.....	18
Non-Discrimination Policy.....	18
Withdrawal/Re-Admission.....	18
<b>ACADEMIC ADMINISTRATIVE POLICIES</b>	
Alcohol, Tobacco, Controlled Substance Usage .....	20
Americans With Disabilities Compliance .....	20
Academic Standards .....	20
Academic Calendar .....	21
Holidays .....	21
Scheduling of Class .....	21
Final Test.....	22
Travel to Clinical Sites .....	22
Student Accommodation-Sleep Rooms.....	22
Travel to School Related Activities .....	22
Assessment Activities .....	22
Attendance .....	23
Lunch Breaks .....	26
Cell Phones.....	26
Social Media .....	26

Conduct.....	27
Clinical Assignments .....	27
Disciplinary .....	28
Dress Code.....	30
Identification .....	32
Ethics .....	32
Tuition.....	33
Refund Policy.....	33
Financial Aid.....	33
Additional Fees.....	33
Grade Reports & Transcripts.....	34
Grading Scale .....	35
Records Release .....	35
Graduation .....	35
Honors .....	36
Housing.....	36
Inclement Weather.....	36
JRCERT Resolution Policy .....	37
Pregnancy Policy.....	37
Program Length.....	38
Contingency Plan.....	38
Radiation Protection Policy .....	38
Student Complaint Policy.....	41
Informal Grievance .....	41
Grievance Policy .....	42

## STUDENT SERVICES

Change of Address & Telephone.....	44
Counseling .....	44
Educational Facilities .....	44
Food Services .....	45
Health Care .....	45
Student Drug and Alcohol Acknowledgement.....	46
Health Insurance.....	46
Student Injury while at School .....	46
In Hospital Educational Programs .....	47
Outside Hospital Educational Programs .....	47
Lockers.....	47
Name Tag/Student ID .....	47
Orientation .....	48
Communicable Diseases Reporting.....	48
Infection Control Guidelines for Students .....	48
Harassment/Sexual Violence .....	49
Safety/Security/Workplace Hazards .....	51
MRI Screening.....	52
Hospital Employment .....	53

Outside Employment .....	53
Student Conferences & Evaluations.....	53
Student Discounts .....	53
Religious Service/Chapel .....	53
Parking .....	53

## **CLINICAL EDUCATION**

Introduction .....	55
Clinical Competency Glossary.....	55
Clinical Competency Process .....	56
Direct/Indirect Supervision.....	57
Repeat Policy .....	57
Student Performed Images .....	57
Student Labs.....	57
Clinical Practicum Schedule .....	57
Clinical Flow Chart.....	58
Simulated Competency Testing .....	59
Clinical Competency Testing .....	59
Recheck Competency Evaluations .....	60
Final Competency Tests.....	61
Competencies Required.....	62
Recheck Competencies Required .....	63
Final Competencies Required .....	64
Student Markers .....	64
Clinical Grading .....	65
Evaluation of Clinical Performance.....	67
Clinical Competency Requirements–ARRT .....	69

## **APPENDIX A**

ARRT Standards of Ethics.....	76
-------------------------------	----

## **APPENDIX B—School Forms**

Student Complaint Form.....	85
Pregnancy Declaration/Undeclaration.....	86
MRI Screening Form.....	87
Letter of Agreement–Student Advisement .....	88
Counseling Report.....	89
Disciplinary Form .....	90
Incident Report.....	91
Specialty Lead Usage Agreement .....	92

## **APPENDIX C**

Housing Expectations .....	94
----------------------------	----

## **APPENDIX D**

Attendance Example.....	97
-------------------------	----

## **APPENDIX E**

Academic Calendar.....	99
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# **Administration: Clinical Preceptors & Supervisors**

## **St. Cloud Hospital (SCH)**

### **Diagnostics**

Jennifer Buennich  
Carmen Lochner  
Kyle Schroeder  
Amy Chapman (Supervisor)  
Charge Technologist

### **Surgical**

Randy Moneyppenny

### **CT -SCH/Plaza**

Cassie Heying (Supervisor)

### **MRI-SCH/Plaza**

Keith Miller (Supervisor)

## **CentraCare-Melrose**

Lacey McGrane (Supervisor)  
Myranda Frericks  
Erik Binsfeld

## **Off Hour Delegates**

SCH: 1-9pm, Weekend Rotations  
Hospital: Evening Preceptor  
Urgency Center: UC Preceptor

## **St. Cloud Orthopedic Associates**

Greta Rademacher  
Hana Cameron  
Barb Rucks (Supervisor)

## **CentraCare Health Plaza**

### **Diagnostics**

Jennifer Buennich  
Carmen Lochner  
Kyle Schroeder  
Amy Chapman (Supervisor)  
Charge Technologist

### **Pediatrics/OB & Women's Clinic**

Kristina Walburn  
Shelby Janson (Supervisor)

## **CentraCare-Paynesville**

Angie Kulzer (Supervisor)  
Lindsey Albright

## **CentraCare-River Campus**

Kristi Curtis (Supervisor)  
Angela Porter

# **GENERAL INFORMATION**

# General Program Information

Radiologic technology is a dynamic field which combines interpersonal and technology skills. The radiographer works with a diverse group of expert professionals all of whom participate in providing care for the patient. The successful radiographer has excellent communication skills, is able to adapt to ever changing employment demands, and recognizes that growth within the profession is achieved through continuing education.

Radiologic technologists, or radiographers, are key members of the healthcare team who create images used to diagnose patient injury or illness. They use sophisticated equipment to produce radiographic images, or x-rays, of the human body at the request of a physician.

St. Cloud Hospital's School of Diagnostic Imaging can provide the education you need to become a RADIOLOGIC TECHNOLOGIST (RADIOGRAPHER).

- Optimal clinical experience in a variety of settings
  - Excellent correlation of didactic and clinical instruction
  - The latest equipment available for clinical experiences
- 
- The School serves as an internship site for completion of a baccalaureate degree for various universities.
  - The Radiologic Technology Program is offered only as a FULL-TIME DAY OPTION.
  - The faculty is highly qualified, is committed to educating future professionals, and is concerned about each student's professional and personal growth.
  - Students are admitted in the fall through a selective admissions process.
  - Graduates are eligible to take the national registry examination administered by the American Registry of Radiologic Technologists (ARRT).
  - The field of radiologic technology offers a challenging and rewarding career opportunity, where excellence produces dynamic results.
  - The School office conducts business typically Monday-Friday from 8:00 am to 4:00 pm. A message may be left on the phone if no one is available to speak with at the time of contact.

## Accreditation



JOINT REVIEW COMMITTEE  
ON EDUCATION IN  
RADIOLOGIC TECHNOLOGY

The certificate radiography program at St. Cloud Hospital is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The program's current length of accreditation is 8 years.(the maximum available) JRCERT contact information is: 20 North Wacker Drive, Suite 2850, Chicago, Illinois, 60606-3182; phone: (312) 704-5300; email: [mail@jrcert.org](mailto:mail@jrcert.org) ; web: [www.jrcert.org](http://www.jrcert.org)

St. Cloud Hospital is accredited by the following:

The Joint Commission <http://www.jointcommission.org>



## Mission

The mission of St. Cloud Hospital's School of Diagnostic Imaging is to offer competent, entry-level radiographers to the community by providing education in the art and science of radiologic technology that promotes and enhances safety and quality care for the patient.

## Goals

To uphold our mission, St. Cloud Hospital's School of Diagnostic Imaging radiology program embraces the following goals. Students will:

1. Integrate clinical and didactic education to provide competent, entry-level radiographers.
2. Facilitate the development of both oral and written communication skills.
3. Demonstrate critical thinking and problem-solving skills in the clinical setting.
4. Facilitate the development of professionalism.

## Outcomes


1. Students will integrate appropriate ALARA concepts.
2. Students will produce diagnostic quality radiographs.
3. Students will provide age-appropriate patient care.
4. Students will effectively explain examination and procedures to patients and/or family members.
5. Students will demonstrate effective written and oral communication in the healthcare environment.
6. The student will be able to revise procedures based on patient condition.
7. The student will be able to differentiate between optimal and suboptimal images.
8. Students will analyze the aspects of the three professional organizations.
9. Students will develop a personal professional development plan.

### **PROGRAM EFFECTIVENESS**

1. Students will complete the program within 24 months.
2. Graduates will express satisfaction with the program and their education.
3. Graduates will be adequately prepared to pass the ARRT certification examination.
4. Graduates actively pursuing employment will be employed within 12 months of graduation.
5. Employers will be satisfied with graduates' knowledge and skills.

## HISTORY

The School of X-Ray Technology was organized in 1938 by the Sisters of the Order of St. Benedicts at the St. Cloud Hospital. In 1942, the school was listed as an approved school for graduates to be tested by the American Registry of X-Ray Technicians. The American Medical Association (AMA) gave full approval to operate a School of X-Ray Technology under a more formal curriculum in September of 1947. The most significant change came in 1965 when only graduates of AMA approved programs were allowed to be tested and registered by the American Registry of Radiologic Technologists.



*“The School of X-ray  
Technology was  
approved in 1942.”*


However, since 1996, the AMA approval has been replaced by the JRCERT (Joint Review Committee on Education in Radiologic Technology). The St. Cloud Hospital is ideally situated in a beautiful residential area of the city bounded on the east by the Mississippi River and on the south by a large, magnificently landscaped park. The city of St. Cloud is a center for a wide variety of cultural, educational, and recreational activities. Numerous lakes and parks as well as enclosed public facilities, make all seasonal sports available. Three institutions of higher education, St. Cloud State University, St. John's University, and the College of St. Benedict are within 12 miles of the School. A phenomenal public library is available in the downtown area as well.

## SKILLS YOU NEED

You will be an excellent candidate for this field if you like to be active and enjoy working with a variety of people. Good communication, problem-solving and analytical skills are also important for radiographers. The profession is a physically demanding one. Tasks on a typical day include assisting with lifting patients, transporting patients on stretchers or in wheelchairs and moving heavy mobile imaging equipment within the hospital. The environment is fast paced and stressful and you will be on your feet for several hours at a time. The radiographer must also respond to audio signals and alarms and be able to differentiate subtle shades of gray on a diagnostic image. Radiologic technologists should be sensitive to patient's physical and psychological needs. They must pay attention to detail and be able to work as part of a team. In addition, operating complicated equipment requires mechanical ability and manual dexterity.

*A prospective student should have:*

- ◆ a desire to work with ill and disabled people, as well as with other health professionals
- ◆ an ability to do precise work accurately
- ◆ an interest in operating equipment and technology
- ◆ an interest in science
- ◆ good physical and mental health



*“Radiologic technologists should be sensitive to patient’s physical and psychological needs.”*

## NATURE OF WORK

Radiologic technologists take x-rays of the human body and may also administer non-radioactive contrast materials into a patient's body for diagnostic purposes. They prepare patients for radiologic examinations by explaining the procedure, assess and assist the patient with removal of items that may create artifacts on images, and position patients so that the parts of the body can be appropriately radiographed.

To prevent unnecessary radiation exposure, they surround the exposed area with radiation protection devices, such as lead shields, or limit the size of the x-ray beam. Radiographers position radiographic equipment at the correct angle and height over the appropriate area of a patient's body. Using instruments similar to a measuring tape; they may measure the thickness of the section to be radiographed and set controls on the x-ray machine to produce radiographs of the appropriate brightness, contrast and spatial resolution.

Experienced radiographers may perform more complex imaging procedures. For fluoroscopy, radiographers prepare a solution of contrast media for the patient to drink or to be given as an enema, allowing the radiologist, a physician who interprets radiographs, to see the soft tissues of the body. Radiologic Technologists must follow physicians' orders precisely and conform to regulations concerning use of radiation to protect themselves, their patients, and coworkers from unnecessary exposure.

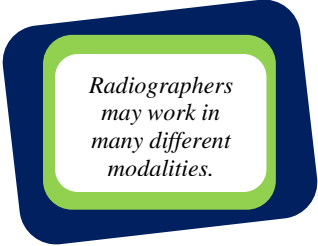
Computed Tomography (CT) technologists, operate specialized radiographic helical scanners to produce cross-sectional images of patients.

Magnetic Resonance Imaging (MRI) technologists operate machines using strong magnets and radiowaves rather than radiation to create cross-sectional images.

Ultrasound technologists (Sonographers) operate machines using sound waves rather than radiation to create images.

Radiation therapy technologists operate large machines delivering precise amounts of radiation to cancer patients.

Nuclear medicine technologists give patients radioactive materials to produce images of physiologic function. Additionally, a radiographer may advance to management, education, or equipment sales.



*Radiographers  
may work in  
many different  
modalities.*

## ENVIRONMENTAL CONDITIONS

As a radiology student, you will be exposed to a variety of substances within the work environment and clinical sites. You can expect exposure to blood, body tissues, and fluids. There is the potential of exposure to electrical hazards, hazardous waste materials, radiation, poisonous substances, chemicals, loud or unpleasant noises and high stress emergency situations. Students are given instruction about OSHA Blood-Borne Pathogens and Universal Precautions prior to starting clinical rotations through computer-based training (CBT) modules.

## BACKGROUND INFORMATION

Prior to enrolling in a radiology program, students are advised to review the applicable licensure/certification procedures and state laws of the profession to ensure that they are eligible to receive a license/certification following completion of the program at St. Cloud Hospital. A conviction of a felony or a misdemeanor is considered to be a violation of the Standards of Ethics. Eligibility for licensure may be limited by the results of a criminal background investigation. Information about this can be obtained from the American Registry of Radiologic Technologists [www.ARRT.org](http://www.ARRT.org).

All healthcare workers and students are required to undergo a criminal background check to work in a clinical setting. A student with a positive background check containing disqualifying conditions as defined by Federal and State law will NOT be allowed to enter the program.

*NOTE: You may have been convicted and not sent to jail. People are often fined or given probation or conditional discharge rather than jail time, but these are still considered convictions. If you are unsure as to whether an arrest resulted in a conviction, contact the county in which you were arrested and speak to a representative in the Circuit Clerk's office, State's Attorney's office or your attorney.*

## EMPLOYMENT PROSPECTS

Employment of radiologic technologists is expected to increase by about 7% from 2019 to 2029, according to the most recent *Occupational Outlook Handbook, 2019-2029 edition*. As the population grows and ages, there will be an increasing demand for diagnostic imaging. In addition to job growth, job openings also will arise from the need to replace technologists who leave the occupation. Those with knowledge of more than one diagnostic imaging procedure—such as CT, MR, and mammography—will have the best employment opportunities as employers seek to control costs by using multi-credentialed employees. Demand for radiologic technologists can tend to be regional with some areas having large demand, while other areas are saturated. Technologists willing to relocate may have better job prospects.

A radiographer may be employed in the radiology departments of hospitals, clinics, imaging centers, urgent care clinics and other health care facilities. There are also opportunities in industry, public health services, college health services, Peace Corps and other international organizations. Salaries may vary nationwide; however, the range is usually reflective of skills, education, and experience.

Although we have exceptional job placement rates, the program does not guarantee graduates employment through CentraCare facilities.

## TECHNICAL STANDARDS

Individuals admitted to St. Cloud Hospital's School of Diagnostic Imaging must possess the capability to complete the entire curriculum and achieve a Baccalaureate of Science degree from their sending institution. The curriculum requires demonstrated proficiency in a variety of cognitive, problem-solving, manipulative, communicative and interpersonal skills. Therefore, applicants must review the following clinical standards to determine their ability and compatibility with the physical requirements of radiographers. Applicants will be required to sign that they do NOT have any physical or mental handicaps that would interfere with the satisfactory performance of the following Technical Standards.

### **Physical Activity Requirements**

#### ***Occasional***

- Grasping: positioning patients for exams and procedures
- Pulling: moving items that can weigh as much as 100 pounds.

#### ***Frequent***

- Pushing/Pulling: transporting patients in wheelchairs or assisting and moving patients on/off carts using 35 pounds of force. Moving portable and C-arm equipment with 35 pounds of force to areas of the hospital.
- Lifting: moving patients (who can weigh more than 35 pounds) from wheelchairs/carts off and onto exam tables.
- Repetitive motions/Typing: entering computer data and setting techniques for exams.
- Carrying: carrying imaging receptors that can weigh as much as 35 pounds.
- Stooping/Crouching: positioning of exams and assisting patients in and out of wheelchairs, stocking supplies.

### ***Routine***

- Reaching: positioning patients and manipulating portable equipment.
- Standing: all clinical assignments require standing.
- Walking: transporting and assisting patients into dressing/exam rooms. Walking to other areas of the department and hospital to do exams or have images interpreted.
- Talking: must be able to communicate verbally in an effective manner with patients, co-workers, and physicians.
- Hearing: perceiving the nature of sounds at normal range; ability to receive detailed information through oral communication, and to make fine discriminations in sound, during auscultation and percussion.
- Feeling: perceiving attributes of patients and objects such as when positioning patients for procedures or palpating veins for IV insertion. Students must be able to make adaptations.
- Visual Acuity: assess patient's condition (color, respiration, motion, etc.). Clinical assignments require working with printed and/or written documentation.

### ***Intellectual and Emotional Requirements***

- Students must be able to assess radiographs and determine diagnostic quality. They must be able to learn to analyze, synthesize, solve problems, and reach evaluative judgment.
- Students should be able to respond with precise, quick, and appropriate action during emergency situations.
- Students must maintain patient confidentiality.
- Students must be able to maintain a high standard of courtesy and cooperation in dealing with co-workers, patients, and visitors and satisfactory performances despite the stress of a hospital work environment.
- Students are expected to learn and accurately perform routine radiographic procedures. In addition, students must have the capacity to calculate and visually select proper exposure factors on the imaging equipment according to the individual patient and protocol with speed and accuracy.
- Students must be able to accept criticism and adopt appropriate modifications in their behavior.
- Students must demonstrate emotional health required for utilization of intellectual abilities and exercise good judgment.

### ***Clinical Situations***

- Students are subject to electrical, radiant energy, and chemical hazards.
- Persons in radiology sciences have been identified as having the likelihood of occupational exposure to blood or other potentially infectious materials, therefore, are included in the OSHA Exposure Control Plan with its specifications to prevent contact with the above materials.

# CURRICULUM

# CURRICULUM 2024-2026

TERM I (16 Weeks) Fall		CREDIT HOURS	TERM IV (16 Weeks) Fall		CREDIT HOURS
RAD 110 Patient Care	2		RAD 213 CT/Cross Sectional Anatomy	2	
RAD 112 Radiographic Procedures I	4		RAD 216 Image Analysis II	2.5	
RAD 113 Intro. To Radiology	1.5		RAD 220 Rad Bio/Protection	3	
RAD 115 Radiologic Physics I	4		RAD 218 Clinical Practicum IV	4.5	
RAD 118 Clinical Practicum I	2		RAD 222 Procedures V	2	
<b>Total</b>	<b>13.5</b>		<b>Total</b>	<b>14</b>	
TERM II (16 Weeks) Spring		CREDIT HOURS	TERM V (16 Weeks) Spring		CREDIT HOURS
RAD 122 Radiographic Procedures II	3.5		RAD 214 Radiographic Pathology	2.5	
RAD 125 Physics II—Digital Imaging	1.5		RAD 224 Quality Assurance	1	
RAD 126 Image Analysis I	3		RAD 226 Image Analysis III	2.5	
RAD 127 Radiographic Imaging	2		RAD 227 Advanced Rad Imaging	1	
RAD 215 Pharmacology	1		RAD 230 Professional Development	0.5	
RAD 128 Clinical Practicum II	2.5		RAD 228 Clinical Practicum V	4.5	
<b>Total</b>	<b>13.5</b>		<b>Total</b>	<b>12</b>	
TERM III (13 Weeks)		CREDIT HOURS	TERM VI (4 Weeks)		CREDIT HOURS
RAD 132 Procedures III	2.5		RAD 232 Seminar	3.5	
RAD 212 Procedures IV	2.5				
RAD 138 Clinical Practicum III	3.5				
<b>Total</b>	<b>8.5</b>		<b>Total</b>	<b>3.5</b>	
<b>Total Credit Hours</b>				<b>65</b>	

# COURSE DESCRIPTIONS

## Term I—13.5 credits

### Rad 110 Patient Care (2 credits)

Content is designed to provide the basic concepts of patient care, including consideration for the physical and psychological needs of the patient and family. Routine patient care procedures are described, as well as infection control procedures using standard precautions under both aseptic and non-aseptic techniques. The role of the radiographer in patient education is identified as well as transfer and immobilization techniques. A venipuncture lab with two successful attempts will be completed. Simulation activities included to reinforce content.  
**NO Repeat Option.**

### RAD 112 Radiographic Procedures I (4 credits) (Lab included)

This course acquaints students with the terminology used in the Radiology Department. It is a lecture/laboratory study of chest radiography, upper and lower extremities, shoulder girdle, and abdominal radiography. Pediatric and geriatric applications will also be included. Radiographic image critique will be integrated throughout the course. Includes a laboratory component.  
**NO Repeat Option.**

### RAD 113 Introduction to Radiology (1.5 credits)

Content is designed to provide a fundamental background in ethics and an overview of the foundations in radiography including the practitioner's role in the health care delivery system. The student will examine a variety of ethical issues and dilemmas found in clinical practice. An introduction to legal terminology, concepts and principles will also be presented. Topics include misconduct, malpractice, legal and professional standards and the ASRT scope of practice. This course will also include a review of medical terminology. A word-building system, abbreviations, and symbols will be discussed. Students will be introduced to the concepts of radiation protection prior to starting any clinical participation. Principles, practices and policies of the health care organization are examined and discussed in addition to the professional responsibilities of the radiographer and the professional organizations. **Repeat Option available.**

### RAD 115 Radiologic Physics I (4 credits)

Content is designed to establish a basic knowledge of atomic structure and terminology. This course explores the physical concepts of energy, the structure of matter, electrostatics, magnetism, electromagnetism, electric generators and motors. The principles of electricity as it relates to x-ray circuits are also studied. and explores the principles of equipment operation and maintenance. Content is designed to establish a knowledge base in radiographic, fluoroscopic, mobile, and tomographic equipment requirements and design. The x-ray circuit and x-ray production are also discussed. X-ray tube rating charts, production of x-rays, image intensification, and x-ray interaction are discussed in detail. Also presented are the nature and characteristics of radiation, x-ray production and the fundamentals of photon interactions with matter. **NO Repeat Option.**

### RAD 118 Clinical Practicum I (2 credits)

The clinical component of the program gives the student the opportunity to apply knowledge and skills learned in the classroom/laboratory setting to actual patients. The radiography student will be thoroughly oriented to the operation of the hospital and radiology department. Students will observe, assist with and gradually perform under direct supervision, procedures learned in Radiographic Procedures I. Students will meet requirements and competencies for chests.  
**NO Repeat Option.**

## Term II—13.5 credits

### RAD 122 Radiographic Procedures II (3.5 credits) (Lab included) **Pre-requisite: RAD 112**

This course continues from Radiographic Procedures I. It is a lecture/laboratory study of upper and lower extremities, pelvic girdle, spine, bony thorax, and skull radiography. Pediatric and geriatric applications will also be included. Radiographic image critique will be integrated throughout the course. Includes a laboratory component.  
**NO Repeat Option.**



RAD 125 Radiologic Physics II (1.5 credit) **Pre-requisite: RAD 115**

This is a continuation of Radiologic Physics I and is concerned with digital imaging and processing. The basic principles including capturing, processing, exposure indicators, image display and imaging exposure techniques are covered. In addition, digital image management is covered. **Repeat Option available.**

RAD 126 Image Analysis I (3 credits) **Pre-requisite: RAD 112**

This course emphasizes the principles of image evaluation as it relates to technique, collimation, and shielding, positioning and radiographic quality. Radiographic images of the chest, abdomen, and upper extremities are studied in detail. Procedures to improve their diagnostic quality are emphasized, including the study of existing diagnostic exams to demonstrate quality images. **Repeat Option available.**

RAD 127 Radiographic Imaging (2 credits)

The factors affecting radiographic quality and the methods for maintaining good radiographic quality are introduced. Content is designed to impart an understanding of the components, principles and operation of digital imaging systems found in diagnostic radiology. Factors that impact image acquisition, display, archiving and retrieval are discussed. Guidelines for selecting exposure factors and evaluating images within a digital system. Principles of digital system quality assurance and maintenance are presented. The principles of automatic processing, image receptor characteristics and composition, screens and grids are also discussed. **Repeat Option available.**

RAD 215 Pharmacology (1 credit)

Content is designed to provide basic concepts of pharmacology. The theory and practice of basic techniques of venipuncture and administration of diagnostic contrast agents and/or intravenous medications is included. The appropriate delivery of patient care during these procedures is emphasized. **Repeat Option available.**

RAD 128 Clinical Practicum II (2.5 credits) **Pre-requisite: RAD 118**

Students will continue to perform radiographic procedures with indirect supervision where competency has been achieved. Students will observe, assist and gradually perform under direct supervision procedures learned in Radiographic Procedures II. Students will meet requirements and competencies for upper and lower limb and abdomen. **NO Repeat Option.**

### **Term III—8.5 credits**

RAD 132 Procedures III (2.5 credits) (Lab included) **Pre-requisite: RAD 112, RAD 122**

This course is a lecture/laboratory study of the urinary tract, gastrointestinal system, and biliary system. Pediatric and geriatric applications will also be included. Emphasis will be given to those procedures most commonly performed in the Radiology Department. Preparation, precautions and administration of contrast media will be explored. Radiographic image critique of these procedures will be integrated throughout the course. Emergency patient care procedures and applications addressed. Includes a laboratory component. **NO Repeat Option available.**

RAD 212 Procedures IV (2.5 credits) (Lab included) **Pre-requisite: RAD 112, RAD 122, RAD 132**

This course is a lecture/laboratory study of trauma, advanced, and surgical procedures. It will also cover additional diagnostic and therapeutic modalities. Informed consent will also be addressed. Radiographic image critique of these procedures will be integrated throughout the course. **NO Repeat Option available.**

RAD 138 Clinical Practicum III (3.5 credits) **Pre-requisite: RAD 128**

Students will continue to perform radiographic procedures with indirect supervision where competency has been achieved. Students will observe, assist and gradually perform under direct supervision procedures learned in Radiographic Procedures III and IV. Students will meet requirements and competencies for spine, bony thorax and skull radiography. **NO Repeat Option.**

## Term IV—14 credits

### RAD 213 Cross Sectional Anatomy/CT (2 credits)

This course emphasizes the principles of sectional anatomy as demonstrated on routine sectional images. CT images are primarily studied in this course but the student is introduced to a comparison of CT and MRI images in the region of the head. Exams included will be thorax, abdomen, pelvis, and head. Content is designed to provide entry-level radiography students with principles related to computed tomography (CT) imaging. **Repeat Option available.**

### RAD 220 Radiation Biology/Protection (3 credits)

This course considers the areas of radiation interactions, radiosensitivity and radiation dose/response relationships. The importance of radiation protection, systems of measurements, and NCRP guidelines are discussed. The responsibilities of the radiographer for patient, personnel and public safety are described. The early and late effects of radiation protection of patient and personnel are thoroughly described. **NO Repeat Option.**

### RAD 216 Image Analysis II (2.5 credits) **Pre-requisite: RAD 122 and RAD 126**

This course emphasizes the principles of image evaluation as it relates to technique, collimation, and shielding, positioning and radiographic quality. Radiographic images of the shoulder, lower extremity, pelvis, and spine are studied in detail. Procedures to improve their diagnostic quality are emphasized, including the study of existing diagnostic exams to demonstrate quality images. **NO Repeat Option.**

### RAD 222 Procedures V (2.0 credits)

This course will explore more specialized radiographic procedures including angiography and interventional procedures. Informed consent will also be addressed. In addition, students will be introduced to procedures relating to the reproductive system, mammography, and bone densitometry. **Repeat Option available.**

### RAD 218 Clinical Practicum IV (4.5 credits) **Pre-requisite: RAD 138**

Students will continue to perform radiographic procedures with indirect supervision where competency has been achieved. Students will meet requirements and competencies for urologic, gastrointestinal, and portable chest and abdomen procedures. **NO Repeat Option.**

## Term V—12 credits

### RAD 214 Radiographic Pathology (2.5 credits)

This course focuses on the common diseases and abnormalities of organs and systems as they relate to radiography. The anatomy and physiology of each system will be reviewed preceding the discussion of that system's diseases. Proper learning and understanding of the material will be facilitated by experience in performing radiographic procedures and by identifying specific pathology on radiographic image receptors. The concept of technique changes required compensating for density differences produced by underlying pathologic conditions. **NO Repeat Option.**

### RAD 224 Quality Assurance (1.0 credit)

This course explores the theory and practice of quality assurance in the diagnostic radiology department. The use of quality assurance test tools, interpretation of results and management of a quality assurance program through record keeping is investigated. **Repeat Option available.**

### RAD 226 Image Analysis III (2.5 credits) **Pre-requisite: RAD 122, RAD 132, RAD 126, RAD 216**

This course emphasizes the principles of image evaluation as it relates to technique, collimation, and shielding, positioning and radiographic quality. Radiographic images of the bony thorax, skull and fluoroscopic studies are studied in detail. Procedures to improve their diagnostic quality are emphasized, including the study of existing diagnostic exams to demonstrate quality images. **NO Repeat Option.**

RAD 227 Advanced Radiographic Imaging (1 credit) **Pre-requisite: RAD 127**

This course will give the student a comprehensive study and correlation of the principles of the prime exposure and technical factors. An in-depth study of the factors that influence image quality and how they influence this quality is investigated. **Repeat Option available.**

RAD 230 Professional Development (0.5 credits)

This course is designed to give an overview of the professional responsibilities of a radiographer including continuing education, certification, scope of practice, and licensure. The course will review the difference between the ARRT and the ASRT. Students will be required to devise an individualized professional development plan with goal setting, a personal resume, reference list, cover letters, and equipment work list. **NO Repeat Option.**

RAD 228 Clinical Practicum V (4.5 credits) **Pre-requisite: RAD 218**

Students will continue to perform radiographic procedures with indirect supervision where competency has been achieved. Students will meet requirements and competencies for trauma, pediatrics, advanced studies, and surgical procedures. Students will completely review all phases of radiology previously learned and put them to practice during the clinical experience. Final competency exams will be performed as a conclusive evaluation of a student's clinical skills. **NO Repeat Option**

### **Term VI—3.5 credits**

RAD 232 Seminar (3.5 credits) **Pre-requisite: All didactic courses**

This course gives the student the opportunity for the re-examination of previously learned material that is pertinent to the registry. Based on pre-assessment, certain topics will be selected for discussion. This will be a comprehensive review of the principles taught in preparation for the registry. Mock registry examinations will be given. **NO Repeat Option.**

# **ADMISSIONS**

# ADMISSION REQUIREMENTS and COLLEGE AFFILIATIONS

**St. Cloud Hospital School of Diagnostic Imaging is open to all candidates who have satisfactorily completed the initial two years of the baccalaureate curriculum established by the campus of attendance.**

The current colleges the program is affiliated with include: Briar Cliff University, St. Cloud State University, North Dakota State University, University of Mary.

This will have included at least 15 college credit hours from the following categories, bolded courses are required program pre-requisites:

- **Natural Sciences—*Anatomy & Physiology I and II***
- **Mathematical/Logical Reasoning—*College Algebra or higher***
- **Written/Oral Communications—*English Composition or Speech***
- **Medical Terminology**
- Information systems—*Computer Science*
- Social/Behavioral Sciences—*General Psychology or Sociology*
- Arts and Humanities—*Ethics*

In order, to apply to the program, applicants must have a cumulative college GPA of 2.5 or higher **and/or** an ACT of 19 or more.

## APPLICATION PROCESS

One class of approximately fourteen students is enrolled each academic year in the fall. St. Cloud Hospital School of Diagnostic Imaging is committed to the policy that all applicants shall have equal access to the program without regard to race, color, national or ethnic origin, gender, age, religion, marital status, disability or any other legally protected class.

1. ***The completed application packet must be received by December 1<sup>st</sup> prior to the year you wish to be considered for enrollment. To apply to the program, submit in ONE envelope with the following documentation which can be found on the program's website under the Application Process Tab.***

[Admission Process | CentraCare, Central Minnesota](#)

- **Application Form**
- **Recommendation Surveys x 2**
- **Job Shadowing and Health Care Experience Form**

*Having a clear understanding of the tasks of a diagnostic technologist is very important for appreciating the career path, therefore, job shadowing is strongly encouraged. Additionally, health care experience is strongly recommended. These experiences offer a means by which the applicant can better understand the patient care role of the Radiologic Technologist and appreciate the relationship between health care providers. Health care experience can be gained through part-time and full-time employment or voluntary service at hospitals, nursing homes, disability camps, and assisted living homes for example.*

- **OFFICIAL Transcripts-** Submit both high school and post-secondary transcripts.
  - Applicants are encouraged to update college transcripts as each term is completed.

Next, The Admission's Committee will review each completed application. All applicable admission requirements must be received before being considered for an interview.

- Points are assigned for the following:
  - i.* High school GPA
  - ii.* College cumulative GPA
  - iii.* College prerequisite courses GPA
  - iv.* Reference evaluations
  - v.* Previous health care experience
  - vi.* If applicable ACT score
- 2. **The top 40 (approximately) will be invited to an interview.** All applicants will be notified by email regarding an interview invite with date, time, and location information.
- 3. After the interview process, the Admission Committee considers all aspects of each applicant's record and offers admission to the best-qualified individuals. (highest point total)
  - Positive applicant attributes include maturity, knowledge of and motivation toward a career in radiologic technology, and an aptitude for academic achievement.
- 4. Emails will be sent to the selected applicants notifying them of their status.
- 5. An applicant must reply to confirm their intention within 7 days of receiving notification and a \$300 non-refundable matriculation fee must also be received within that 7-day time frame.
- 6. **An applicant's status for admission is not finalized until the findings of the pre-entrance physical examination, background check and drug screening.** In the event, that any of these reports identify that the applicant does not meet the standards of CentraCare St. Cloud Hospital, the acceptance decision is rescinded by the committee.
- 7. **An applicant must be on track with their resident college/university to graduate upon completion of the SODI internship.**
- 8. Upon enrollment into the program, the admissions packet (other than school transcripts and application) is destroyed.

## CRIMINAL BACKGROUND CHECKS

It is the policy of the School of Diagnostic Imaging to perform criminal background checks including fingerprints (when applicable), on all selected applicants entering the program. This policy's purpose is to provide a safe environment and allow the school to make sound selection decisions as well as be in compliance with state guidelines. If a selected applicant fails to pass the criminal background check they will be notified that they were not cleared and their application will be withdrawn.

## DRUG SCREENING

St. Cloud Hospital requires all accepted students to undergo a drug screen urinalysis test. A student who tests positive of illegal or non-prescribed drugs will be denied Program admission.

## **ACCEPTANCE FEE**

Each student accepted is expected to pay a **nonrefundable** \$300 matriculation fee within a 7-day time frame of notification of acceptance.

## **ADVANCED STANDING/TRANSFER STUDENTS**

The program does not take advanced placement students.

## **NON-DISCRIMINATION POLICY**

The School of Diagnostic Imaging's academic policies are administered without regard to race, color, national or ethnic origin, gender, age, religion, marital status, disability or any other legally protected class. Any questions about compliance with the above policy may be directed to the Program Director, School of Diagnostic Imaging.

## **WITHDRAWAL/READMISSION**

A student who wishes to leave the school in good standing is asked to submit a written notice to the Program Director stating the date the withdrawal is effective. Failure to report to class or clinical assignment is not an "official" withdrawal.

A student in good standing at the time of withdrawal has the privilege of receiving a tuition refund (if within refund period) and re-admission. (refer to college campus refund policy) Such re-admission is planned at a time when the sequence of the program of study can be resumed, and the number of enrolled student's permits.

# **ACADEMIC ADMINISTRATIVE POLICIES**



*The faculty has established the Academic Administrative policies and regulations primarily to protect, not restrict the individual's rights. It is the student's responsibility to be knowledgeable regarding the contents of the Academic Administrative Policies and to abide by them.*

## **Alcohol, Tobacco, Controlled Substance Usage**

The use of ALL tobacco/nicotine containing products is prohibited in school/clinical facilities or on grounds associated with them. This includes products such as chewing tobacco, tobacco pouches, and smoking. Vaping is also prohibited.

Anyone student reporting for school scheduled class/clinical/functions anywhere on behalf of SCH SODI must be free of the influence of alcohol, edible cannabinoids, and drugs of abuse/illegal drugs.

SCH SODI prohibits the use of, being under the influence of, being impaired by, being in possession of, or acquisition of drugs of abuse/illegal drugs, alcohol, medical cannabis, or edible cannabinoids.

SCH SODI prohibits the use, transfer and/or sale of alcohol, edible cannabinoids, and/or drugs while scheduled as a student.

**In the event a student is suspected of being under the influence on scheduled school time they may be subject to a random drug screen. Pending results may also result in disciplinary action up to and including dismissal.**

## **Americans With Disabilities Compliance**

If you have a documented learning, psychological or physical disability, you may be entitled to **reasonable** academic accommodations or services. To qualify for an Academic Individual Adjustment Plan (IAP), student must have a disability recognized under the Americans with Disabilities Act and provide documentation of disability prior to receiving accommodations. To request accommodations or services please submit the program's *Student Accommodation Request Form* to the Program Director prior to the commencement of **each year** in the internship. All students are expected to fulfill essential course requirements. The Program will **not** waive any essential skill or requirement of a course.

## **Academic Standards**

The Radiologic Technology professional courses follow a progressive intense course of study. Adequate completion of each previous term's professional courses is necessary prior to advancement to the next term. Any student failing a clinical course will be dismissed from the program.

Satisfactory completion of each of the didactic courses requires students to pass at least 50% of the unit tests in the course. A student not meeting this requirement will need to complete remedial work as determined by instructor.

Students must also achieve a GPA each term of **2.25**. Any term that the GPA falls below 2.25 will be cause for the student to be placed on academic probation. A student will be allowed only one (1) term of probation during their tenure.

Students that demonstrate a consistent lack of comprehension will require a mandated conference with the faculty to determine their status in the program. Any grade below "C" will require a repeat of the course to successfully progress through the program. Many courses are identified as pre-requisites and therefore may not qualify as a course that can be repeated.

**Pre-requisite and Repeat Option** courses are identified under course descriptions. In the event a course may be repeated; the cost of repeating the course will be according to the current year's tuition and must be paid prior to the repeat of the course. The time allocated to repeat the course must be done on the student's own time. A student will only be allowed to repeat a course once in their tenure. A student failing a second course will be dismissed from the program.

Six terms of learning are used to identify the student's progress toward attainment of the curriculum objectives. Courses and clinical experience have been carefully selected to assure a systematic progression by completing specific term objectives in an organized, cumulative fashion. Each term builds upon the knowledge and skills of the previous terms, and is to be taken in sequence. Courses are offered only in the appropriate term, as listed on the Curriculum.

## Academic Calendar

The academic calendar provides for two semesters (fall and spring) and two summer terms. If illness or personal crisis requires a student to take additional time off than what is allowed in the calendar, the student and program director will make specific arrangements for program completion for that student. (see Appendix E)

## Holidays

The School of Diagnostic imaging observes the following holidays and no students are scheduled for either class or clinical.

- New Year's Day
- Martin Luther King Day
- Easter
- Memorial Day
- 4<sup>th</sup> of July
- Labor Day
- Thanksgiving
- Christmas Day

## Scheduling of Class

Students will be given a class schedule each semester/term prior to its commencement. Following Orientation, Juniors will be in class for approximately 5 weeks prior to starting clinical rotations. After that Juniors and Seniors rotate complete weeks for clinical and class. This schedule changes for the summer term. Then Seniors will finish their didactic courses in May just prior to graduation. Juniors will have only a clinical course during this time. Juniors will then have summer didactic courses in June and resume clinical in July. Other exceptions may arise during the scheduling of classes making it necessary to change from the above statements.

## **Final Test**

At the end of the first year, all students are required to pass a comprehensive final. This test will be administered on the last day of the semester of the first year. A student will be allowed three attempts to pass this exam. This test must be passed with an 80% or greater. If a student needs to retake the test, scheduled dates will be made available to them. This must be successfully completed prior to commencement of the second year of the program.

## **Travel to Clinical Sites**

Students are required to travel to each of the School of Diagnostic Imaging's clinical sites per assignment. Students must have a valid driver's license and/or provide their own form of transportation. School schedules will not be modified to accommodate for individual transportation needs.

## **Student Accommodations–Sleep Rooms**

Students have an opportunity to utilize sleep rooms at select clinical site locations including Melrose. Students must reserve these rooms in advance and are not always guaranteed. All students are required to review and sign the Student Sleep Room Policy with the Clinical Coordinator prior to utilization. Students must comply with the expectations detailed in the policy. Any violation will result in the student no longer being eligible to utilize these accommodations. Additionally, violations may result in disciplinary action as these areas are an extension of the clinical site.

## **Travel to School Related Events**

Opportunities are available for students to travel to educational and/or other events during the school year. These are OPTIONAL activities and students may elect to attend and travel at their own expense or will attend a regularly scheduled clinical day. If a student chooses not to attend, a written assignment will be given covering topics discussed at the educational events.

## **Assessment Activities**

The School of Diagnostic Imaging is committed to providing high quality education. In order to assure this quality, the ongoing assessment of student learning is a necessity. Throughout the clinical courses, students may be asked to submit copies of evaluations, competencies and other work. The papers and evaluations are utilized for assessment purposes only and will not affect a student's grade.

In addition, the students will be asked to evaluate the course and faculty at the end of each course. Students will submit these assessment forms anonymously which will then be evaluated by the program director.

Students will also evaluate clinical staff members at the end of each clinical rotation. This staff evaluation form must be completed through the Trajecsys Report System documentation system.

# Attendance

All student radiographers are expected to maintain acceptable attendance patterns during scheduled class and clinical rotations. Attendance at all scheduled classes is required unless the student is excused. Students will only be excused for illness or limited amounts of personal time (6 days/year). Regular attendance is a vital component of the learning process. Prospective employers consider attendance records a good indicator of future employee behavior and often inquire about a student's attendance record. We consider attendance important for that reason. Attendance and arrival on time are required for all clinical and didactic courses.

## **Failure to notify the proper authority of an absence will affect the student's grade.**

Clinical experiences offer general and specific applications. Experience in the clinical setting facilitates learning and enhances achievement of clinical outcomes. Completion of assignments due to absence from clinical practicum will be explained in each course syllabus.

The following policies for attendance must be adhered to:

- 1) The Program has defined a week as being from Saturday through Friday. Student's schedules NEVER allow for students to be scheduled for more than 40 hours in a one week period for both clinical and didactic classes.
- 2) Each student will be allotted six (6) days = 48 hours per year of personal time. **These are intended to be used as sick days and NOT additional vacation days. Students are NOT able to bank days to take more than two (2) total days off during each term.**
  - a) Students are allowed 2 calendar days per term (16hrs) without any course deductions.
  - b) Personal time off approval is determined by the number of hours a student has available in their personal time bank.
- 3) **If a student is unable to attend, it is the responsibility of the student to notify all faculty members and clinical site (if applicable) prior to any absence.**
  - a) Class Days:
    - i) It is also the **student's responsibility** to obtain all class notes and assignments upon their return from their fellow students and make arrangements with the instructor. Any classroom work that needs to be completed will be done during the student's scheduled time. A clinical day may be extended to meet the expectations/objectives limited to no more than 10 total hours in one day.
  - b) Clinical Days:
    - i) The student must **also** notify all school faculty via text message within thirty (30) minutes of start time or this will be considered an "unexcused" absence.
- 4) Students MUST utilize the Trajecsyst Report System to clock in and clock out **each** day for class and clinical.
  - a) When a student misuses Trajecsyst properly in any term, a loss of one (1) hour of personal time will be applied. This deduction will be applied when a student has misused in increments of three (3). Multiple deductions may occur.

- i) Misuses include but are not limited to:
  - (1) Clocking in/out at the wrong site.
  - (2) Clocking in/out from anywhere not approved.
  - (3) Forgetting to clock in/out.
  - (4) Clocking out early without approval/staff initials.

- b) If a staff member permits an early dismissal, this must be documented with the staff's initials in the comments field of Trajecsys Report System. If it is more than one (1) hour earlier than normal dismissal time, the student must check with a school faculty member prior to leaving.

#### 5) TARDINESS

- a) Tardiness is defined as one (1) minute past the scheduled start time and is in increments of fifteen (15) minutes (i.e., 7:00 start time, arrives @ 7:18 = 2 tardies).
- b) Each tardy in either class or clinical will result in a loss of one (1) hour of personal time per infraction.
- c) **Any more than 1 tardy in clinical will result in their grade being reduced in the Professionalism category by one point for each infraction.**
- d) **Refer to course syllabi for tardy deductions during didactic education.**
- e) More than three (3) tardies in one term or consecutive terms with tardies will result in a meeting with the Program Director and Clinical Coordinators and the student being placed on probation.

#### 6) EXCESSIVE TIME

Students will only be allowed two excused absences or one "unexcused" absence per term. An "Excused" absence occurs when a student has an illness or a pre-approved absence. "Unexcused" absences occur when a student fails to notify the school of an absence or it has not had prior approval. Extended illnesses and extenuating circumstances will be reviewed on an individual basis. **Excessive absence may lead to disciplinary action up to and including suspension or dismissal.**

- 7) **If a student misses more than 2 calendar days in a term, their grade will be reduced. Refer to the Attendance Rubric for all didactic courses. For clinical courses, the Professionalism category will be reduced by 1 point for each excessive day.** Regular attendance is required in order to acquire the necessary knowledge, skills and experience.

- 8) Any additional time used by the student over the allotted time will be made up in the clinical setting **ONLY** during School breaks (no holidays allowed).

- 9) **Any student suspensions MUST be made up after the student's final day in the same rotation where suspension occurred.**

#### 10) EXTENDED ILLNESS/INJURY

- a). If a student has an extended illness or injury, he/she must present a note from their physician stating that they are capable of returning to the clinical area and school. The student and the physician documentation will be reviewed by the Employee Health Services for approval before the student will be allowed to return.

An extended illness absence is reviewed on an individual basis. Students' name and date must be present on documentation.

a). A student in excess of allotted time will be required to make-up missed time to ensure course objectives are being met.

b). Banking clinical time may be deemed necessary and authorized by the School of Diagnostic Imaging and the Program Director for planned absences of a medical nature. This allowance will be made on an individual basis for such things as maternity leave, surgery, etc. (only medically related reasons). Inform the Program Director of your request to bank time early enough before the event to allow adequate decision-making time.

#### 11) COVID/EXTENDED ABSENCE

If you are experiencing Covid symptoms and will miss class/clinical- you must provide test results prior to resuming courses & to prevent any course deductions. Students name and date must be on test result documentation. Faculty reserves the right to determine whether a student will be required to make up excessive absences. This is to ensure that the desired learning outcomes have been achieved.

A threshold of no more than 5 subsequent missed clinical days due to Covid will require students to make up missed time or if student is unable to finish clinical assignments or ARRT requirements due to an extended absence. Students will make this time up during non-school days as determined by the academic calendar in the clinical rotation that was missed.

#### ELECTIVE PERSONAL TIME

12) A student wishing to take *elective* time must email **ALL SODI FACULTY**. The title of email should state PTO and submitted at least 72 (**business hours, M-F**) in advance of requested time off. The attached request PTO form should include date(s) and scheduled rotation. The Clinical Coordinators will evaluate the request and may or may not approve it. **It will only be approved if adequate notice is given and if a student has that amount of time in their bank.** If approved, the Clinical Coordinator will make the appropriate changes to the clinical schedule, if applicable.

a) Time off must be taken in minimum increments of four (4) hours. If a student calls in sick, it will be for an entire day and not a portion of it.

b) Under NO circumstances will a student be allowed to accumulate time to take off more than 2 consecutive days for *elective* reasons in any term.

c) ATTENDANCE USEAGE EXAMPLE-SEE APPENDIX D

13) Students need to consult the academic calendar to schedule vacations or any other time they need to be absent from school. During this two year internship, students need to be present during regularly scheduled time to complete coursework and clinical objectives.

a) Student should NOT purchase tickets or confirm plans prior to getting approval from school officials.

### BEREAVEMENT

- 14) Following a bereavement event (death), the student should contact the program director. Any student requesting bereavement leave must submit a PTO form. The student must complete all missed assignments upon return to class. Extenuating circumstances will be handled on a case-by-case basis and are at the discretion of the program director. Bereavement time-off follows the same policy as the St. Cloud Hospital for family relationship.

### CLINICAL COUPONS

- 15) Students may be given clinical coupons that can utilize for a one-hour early dismissal.
- (a) Only 1 coupon per calendar day may be used and not consecutively.
  - (b) Must be documented in Trajecsys Report System during the Clock out.
  - (c) All coupons need to have prior approval of faculty.
  - (d) Coupon must be initialed and dated by staff when used.

## Lunch Breaks

Students in attendance for an eight-hour day will receive a 30 minute break for lunch or as designated by the clinical site. There are no additional allotted breaks.

## Cell Phones/Smartwatches

Students shall refrain from utilizing electronic devices for personal use during class and/or clinical; these include but are not limited to tablets, laptops, smartphones, cellular phones, or wearable electronic devices. **This includes NO texting, checking of emails, use as a calculator, or accessing of smart phones/Smartwatches for the clinical documentation site. This is ONLY permissible during the scheduled lunch break or prior to classes.**

Cell phones/Smartwatches must be turned to the **silent mode and** left in their **locker** during clinical rotations. In order to maintain an environment conducive to learning, cell phones/Smartwatches brought into the classroom or lab must be turned to the **silent mode and** placed within the **student's book bag**. Neither of these devices may be accessed in the classroom/clinical setting unless permission is given.

**Violation of this policy will result in disciplinary action.** A student that does this is subject to a written warning. A student who continually (2 or more times) violates this policy may be subject to disciplinary action.

It is expected that personal phone calls be placed or received during non-scheduled hours unless an emergency arises.

## Social Media

Under no circumstances should a clinical site or anything related to a clinical site or clinical course be discussed on any type of social media (Facebook, Twitter, Snapchat, Instagram, TikTok, etc.). Doing so will be considered a breach of confidentiality and will be grounds for dismissal from the School of Diagnostic Imaging.

## Conduct

The student is responsible for obeying the laws governing the community as well as the policies of the SCH School of Diagnostic Imaging and SODI clinical affiliates. Any student who violates rules will be subject to disciplinary action.

## Clinical Assignments

Students are expected to be present for clinical experiences. Students are responsible for all transportation to and from their assigned clinical sites. **Cost of transportation will be the student's responsibility.**

Students do not receive compensation when on clinical rotations. Clinical assignments are a required component of the educational program.

Clinical assignments are scheduled between 6:30 am and 10:00 pm and include weekend schedules. Less than 10% of the student's total clinical clock hours are spent in evening (after 7:00 pm) and weekend assignments.

Students cannot be scheduled as a paid employee of any CentraCare institution during the time they are completing clinical requirements.

Clinical rotations will include the following:

CentraCare—St. Cloud Hospital 1406 6 <sup>th</sup> Ave. N St. Cloud, MN 56303	320-251-2700 Extension <b>DX-</b> 54437	Program Sponsor
CentraCare—River Campus 1200 North 6 <sup>th</sup> Ave. St. Cloud, MN 56303	320-240-2213	On hospital site
CentraCare—Health Plaza 1900 CentraCare Circle Suite 1400 St. Cloud, MN 56303	320-229-4914 Extension 71269	3.1 miles from sponsor
CentraCare—Paynesville Hospital 200 W 1 <sup>st</sup> St. Paynesville, MN 56362	320-243-7711	25 miles from sponsor
CentraCare—Pediatric/OB and Women's Clinic 1900 CentraCare Circle, Suite 1300 St. Cloud, MN 56303	320-654-3609 Extension 73609	3.1 miles from sponsor
CentraCare—Melrose Hospital 525 Main Street W Melrose, MN 56352	320-256-4231 Extension 24143	17 miles from sponsor
St. Cloud Orthopedic Associates 1901 Connecticut Ave. S. Sartell, MN 56377	320-202-5587	3.04 miles from sponsor
Jen Borstad-Program Director	Office: 320-255-5719	
Samantha Metzler/ Clinical Coordinators	Office: 320-251-2700 Extension 54416	

Reference Clinical Education Record for a complete list of Modality Ext. for the SCH and Plaza.



## Disciplinary

Any infraction of the policies of the SCH School of Diagnostic Imaging program and/or any infraction of the policies and regulations of the hospital or clinical site in which the student is assigned will warrant disciplinary action. The type of action taken will depend upon the seriousness of the infraction.

The program faculty shall investigate the situation, decide upon the appropriate disciplinary measure to pursue. The program director will notify the student, their college affiliate, and clinical site (if applicable) of the problem and any circumstances surrounding the infraction.

Disciplinary action shall fall into one of the following categories:

1. *WARNING*—The program faculty will discuss the problem with the student and suggest some remedial action in a disciplinary form. This disciplinary form will be reviewed with the student which they will sign and date. It will be placed in the student's permanent record and a copy will be given to student if desired.
  - a. A student receiving a second written infraction for similar conduct will be automatically placed on probation.
  
2. *PROBATION*—Length of probation will be decided upon by the program director. The problems will be discussed with the student and the conditions of probation specified in a meeting with the student and on the disciplinary form.
  - a. **A student can not be placed on probation more than once during their tenure in the program. If additional disciplinary action is warranted per students conduct, suspension will be the next form of action.**
  
3. *SUSPENSION/DISMISSAL*—The student will be suspended or dismissed from the program for severe infractions of program/hospital policies. Depending upon the seriousness and nature of the conduct, the student may be immediately *suspended or dismissed* (an indefinite or a specified period of time) at the discretion of the program faculty.

This will be indicated to the student by a meeting and also on the written disciplinary form.

- a. **A student who is suspended MUST turn in their name tag, markers, personnel monitor and equipment software badge to the Program Director at the commencement of their suspension.**
- b. **Any student suspensions MUST be made up after the students FINAL day of the internship in the same rotation where suspension occurred.**
- c. **All suspensions must be reported to academic advisors and ARRT examination application.**
- d. **A student can not be suspended more than once during their tenure in the program. If additional disciplinary action is warranted pers student conduct, dismissal will be the next form of action.**
- e. **A substantiated HIPAA violation is grounds for an immediate dismissal.**
  - i. **Pending investigation into a violation will require the student to be placed on probation until the review is complete.**

The following are examples of conduct requiring disciplinary action:

- Falsifying records or dishonest behavior
- Academic Integrity/Plagiarism
- Leaving a work area during clinical hours without permission, loafing or sleeping on the premises or conducting personal business during clinical hours
- Failure to follow instructions or neglect of duties assigned
- Any immoral conduct such as the use of alcohol or illegal drugs
- Fighting, horseplay, disorderly conduct, loud talking or the possession of weapons on health care facility property
- Bullying/ Threatening any person while in the clinical setting
- Discourtesy toward patients, visitors, physicians or fellow workers. This includes the use of vile or abusive language
- Abuse of time spent on breaks or lunch
- Disregard for health care facility safety rules
- Smoking/Vaping in unauthorized areas
- Disclosing information about patients, students, technologists, or physicians and their practices
- Theft, destruction or misuse of hospital property or that of patients
- Repetitive Absenteeism and tardiness
- Violating dress code/Chewing gum while in clinical or lab
- Refusing to provide care to a patient because of patient's race, color, sex, religion, age, beliefs, handicap, or illness
- Academic grades
- Cell phone/Smartwatch use during class and/or clinical
- HIPAA violation
- Inappropriate use of social media
- Failure to utilize Clinical Site Responsibilities as outlined in Clinical Education Record

**This is not an all-inclusive list and the program reserves the right to review student conduct and determine appropriate disciplinary action.**

## Dress Code

As student radiographers, you represent the school, St. Cloud Hospital, and the profession of Radiologic Technology. It is imperative that certain standards are met and a dress code followed. **All students MUST wear the prescribed uniform, including name tag, during ALL scheduled classes and clinical education.** Only approved options will be allowed regarding brand, style, and color.

1. The uniform consists of:
  - a. ID Badge: A picture name tag identifying them as a radiology student must be worn at all times. Must be clearly visible, worn above waist, and unaltered.
  - b. Solid **NAVY** scrub pants (3-5 each year).  
**Approved style options include:**
    - i. Cherokee Infinity Style CK200- Men's Button Front pants
    - ii. Cherokee Infinity Style 1123- Women's Straight Leg Drawstring Cargo
    - iii. Cherokee Infinity Style CK065- Women's Elastic Waist Cargo
  - **All of these pants are available in Short and Tall lengths.**
  - c. Solid LIME GREEN scrub top (3-5 each year)
    - i. Cherokee Workwear Style 4700
      1. a SODI patch must be affixed to the scrub top in the upper left shoulder area on the sleeve-Program faculty will provide 3 initial patches to students during Orientation Day- (expense will listed on student's Fall Book/Activity Invoice). Additional patches may be purchased at anytime throughout the internship.
  - d. Solid NAVY long sleeve moisture wicking undershirt:
    - i. **The bottom of the shirt must be tucked in and NOT be visible below the scrub top.**
2. Uniforms MAY be purchased from the retailer below at a discounted (10%) rate:  
**Scrubs & Beyond**  
**107 Second Street South, Suite B**  
**Waite Park, MN 56387**  
**Ph: 320-253-4414**
3. The cost of the uniforms is the student's responsibility.
4. Uniforms must be clean, wrinkle free, and free of odor at all times. Uniforms, including undershirts, must not be faded or in dis-repair. **(Will need to purchase additional scrubs for the second year due to fading)**
5. Uniforms should be well-fitting –loose or baggy fitting uniforms are dangerous in the clinical area. Pant legs must be worn full length and not rolled up. They should not drag on the floor or be frayed. They must have a straight leg.

6. When scheduled in the surgery and interventional rotations as well as designated sites, students will wear hospital issued scrubs.
7. Students are required to have the department supplied individualized lead markers with them during scheduled clinical rotations. The first set is given to the student to use during their educational tenure, but must be returned prior to graduation. **If markers are lost, the student MUST notify the clinical coordinator for replacement. A replacement fee will be charged. If lost more than once students will not only pay the replacement fee, but will also lose a professionalism point in their clinical grade.**
8. Students must be clean, free of body odor, and have well-trimmed fingernails. **ARTIFICIAL NAILS ARE PROHIBITED.** Clear or natural colored polish is permitted (no patterns).
9. Visible tattoos are not permitted. All tattoos must be covered during all clinical.
10. Appropriate undergarments must be worn and not showing.
11. Shoes must be **entirely black leather** athletic or uniform style (Clove, Cherokee Infinity). No colored logos or symbols or mesh material are allowed. Clogs or shoes without backs or open holes on top are unacceptable.
  - a. These shoes **MUST** be worn anytime student is in the clinical area (lab included). Shoes must be worn at all times.
  - b. **Will need to purchase additional shoes for the second year due to wear and tear. Shoes should not appear dirty or worn out.**
12. **Socks must be of solid color (black, navy, or white). Students must wear either crew length or compression socks.**
13. Professional appearance is defined as being well groomed. **UNACCEPTABLE** appearance includes unkempt (hair covering eyes or “shaggy”), unnatural colored hair, unshaven (except for those areas of the face that sport a neatly trimmed mustache or short beard).
  - a. **Hair must be clean and neatly pulled back if at or below shoulder length.** No **extreme** hair styles or colors (i.e. Mohawks, dreadlocks, shaved designs) are allowed.
  - b. Students may wear a hairband.
    - i. Hairband must be of a solid color (navy or black) and not exceed 0.5 inches band thickness.
14. Make-up must be conservative in nature while in uniform. **Use of fragrance, except for deodorant, is not allowed in the clinical setting.**
15. Jewelry must be kept to a minimum. “Minimal” is defined as no more than 2 rings per finger and hand. No facial rings (includes tragus, nose, eyebrow or lip). Earring of no more than 2 post style per ear (NO HOOPS OR LOBE STRETCHERS ARE ALLOWED).
  - a. **No bracelets, other than approved wrist watches or medical alert ones are allowed.** No utility bars or other visible piercings. Jewelry of any kind must not pose a safety concern (physical, infectious, or otherwise).

16. Face coverings are NOT allowed. Head coverings on top of head that are part of a religious/cultural dress are appropriate. Other hats/head scarves may not be worn while in clinical (exception: headgear in required areas).
17. Personnel monitors must be worn at all times at the clinical sites.
18. Gum chewing is NOT ACCEPTED AT ANYTIME while in clinical settings.

***Any student who chooses to disregard the dress code will have a deduction from the clinical grade in the Professionalism category. The student will continue to have the clinical grade lowered for each infraction of the rules. Infractions will be discussed with the student at the time of the occurrence. This will be considered a written warning. Corrective measures will be left up to faculty discretion. Repetitive abusers will be subject to disciplinary action.***

## Identification

Upon enrollment, you will be issued a hospital identification (ID) badge. You are required to wear your ID badge at all times while in the hospital. The badge must be worn on the outer layer of clothing, on the upper chest area. The badge may be clipped to a collar, lapel, pocket, or pinned to the garment. It is not acceptable to wear the badge at or below waist level. This is an electronic key for entering restricted areas. **You must immediately report a missing ID to the program director. A student is responsible for the cost to replace a lost badge.** You are required to return your ID badge to the Program Director prior to graduation.

## Ethics

The faculty has established a code of ethical practices and policies pertaining to student behavior. Enrollment in the SCH School of Diagnostic Imaging constitutes an agreement to comply with the policies of the school and of the hospital (or other clinical site). If a student is arrested during their tenure, for any reason, this must be reported to the program director.

Regulations affecting admission, promotion, and other policies may be changed at any time by the faculty and will apply to all students. Students will be notified in writing and required to sign acknowledgement of any policy changes.

The School adheres to the Family Education Rights and Privacy Act of 1974. The school does not release any student information to parents or any agency without a signed release of information from the student or a court subpoena for the information. Family Education Rights and Privacy Act (FERPA) and Federal trade commission guidelines are followed.

Students are also bound by the ASRT Code of Ethics and the ARRT Standard of Ethics. (found in Appendix A)

## Tuition

The program is sponsored by the hospital, but all students enrolled in our program will pay tuition to the affiliated college of enrollment. The radiologic technology program has a total of 65 term credits through the hospital. For current cost for the program, you may go to [www.briarcliff.edu](http://www.briarcliff.edu) , [www.stcloudstate.edu](http://www.stcloudstate.edu), [www.umary.edu](http://www.umary.edu), or [www.ndsu.edu](http://www.ndsu.edu). The amount next to undergraduate resident “off-campus tuition” is the base amount charged per credit. Registration policies are to be followed in accordance to their schedules. **All students must be in compliance with registration and tuition each term of the internship.** Registration must be completed prior to the first day of the affiliated colleges term start date. It is up to you to contact your campus advisor to determine if you are in compliance with the campus registration and fee payment. Non-compliance may cause the student’s participation in the internship to cease.

## Refund Policy

Students will follow the refund policy from their affiliated college of enrollment.

## Financial Aid

The St. Cloud Hospital School of Diagnostic Imaging does NOT offer financial aid to students. It is available to those who qualify through the financial aid office from their specific campus of enrollment. It is up to each student to complete the necessary forms required by their college. Summer term may not be eligible for financial aid it is recommended to review this with your campus advisor.

## Additional Fees

In addition to tuition, the student is responsible for a matriculation fee, textbooks, uniforms, replacement fees(markers/badges), memberships and convention expenses, electronic educational programs, graduation expenses, and registry (ARRT) examination fee.

Textbooks will be purchased by the program for each student for each term and will be available on the first day of attendance. These additional fees are the responsibility of the student and are non-refundable. Students will receive an Invoice at the beginning of each term with itemized expenses.

**Students are responsible for these expenses directly to St. Cloud Hospital School of Diagnostic Imaging. Invoices MUST be paid prior to a student beginning the next term.** The **approximate** breakdown of these costs is as follows:

<b>APPROXIMATE ADDITIONAL FEES</b>		
<b>Matriculation Fee</b>		
<b>Applied to Initial Term</b>		
<b>Fall Invoice-Credit</b>	<b>\$300.00</b>	
<b>Textbooks-</b>		
<b>Varying Amounts each Term (6)</b>	<b>1500.00 Total</b>	
<b>Uniforms (3-5 sets) Annually</b>	<b>\$200.00</b>	
<b>Uniform Shoes Annually</b>	<b>\$75.00</b>	
<b>School Patches x3</b>	<b>\$15.00</b>	
<b>Replacement Markers/Dosimeter</b>	<b>\$20.00 per set</b>	
<b>Replacement ID badge</b>	<b>\$10.00</b>	
<b>Activity Fee per Term</b>		
<b>Membership Expenses</b>		
<b>Convention Expenses</b>		
<b>Graduation Expenses</b>		
<b>Electronic Education Programs</b>	<b>\$100.00</b>	
<b>Approximate Total Program Costs</b>		<b>\$2,690.00</b>
<b>ARRT registry examination fee</b>	<b>\$225.00</b>	
<b>ALL COSTS SUBJECT TO CHANGE</b>		

## Grade Reports and Transcripts

Students record-keeping and disclosure regulations are designed to comply with the Family Educational Rights and Privacy Law (PL93-380, as amended).

Students receive a formal grade report at the end of each completed term.

Students at St. Cloud Hospital School of Diagnostic Imaging are entitled to:

1. Inspect and review their own educational records.
2. Request in writing their own educational records.
3. Request the amending of their own records; this includes the opportunity for a hearing when indicated.
4. Submit statements commenting on the information contained in the record. Access and review of records is subject to the following conditions:
  - a. The School has seven working days to comply with a student's written request to review his/her records.
  - b. All information declared confidential by the Law or excluded from the definition of "education records"
  - c. Access to student records is limited to School Program Director, the individual student, faculty members, and agencies approved by individual student to have access to specific materials.

## Grading Scale

The Radiologic Technology professional courses require a higher level of minimum achievement than most other college courses. The standardized grading scale for all Radiologic Technology professional courses is as follows:

	<u>Grade</u>	<u>Honor Points</u>
94-100	A	4.00
92-93	A-	3.87
90-91	B+	3.50
86-89	B	3.00
85	B-	2.87
83-84	C+	2.50
80-82	C	2.00
Below 80	Failing	0.00
Incomplete	I*	

\*A grade of Incomplete (noted "I" on the transcript) may be assigned when a student has completed and passed a majority of the work required for a course but, for reasons beyond the student's control, cannot complete the entire course. Incomplete grades are contingent upon instructor approval, and instructors are under no obligation to grant them. In cases where an instructor agrees to assign an "I" grade, it is important to arrive at an agreement about exactly what is required in order to finish the course and within what time frame.

## Records Release

The program abides by the *Family Educational Rights and Privacy Act* (Buckley Amendment). All transcripts and student records are maintained in locked storage (electronically) and their content is kept under utmost confidence. Only school faculty have access to these records.

Students and/or Alumni who request official transcripts must submit a written request before a transcript will be issued. (form is found <https://www.centracare.com/professionals/school-of-diagnostic-imaging/transcript-request-form/> )

## Graduation

To qualify for graduation the student must have:

1. Consistently demonstrated personal characteristics appropriate for the professional medical radiographer.
2. Presented evidence of satisfactory completion of the total requirements of the curriculum.
3. Fulfilled all financial obligations to the School of Diagnostic Imaging.
4. Returned radiation monitoring device, name badge and lead markers to the Clinical Coordinator.
5. Successful submission of the Graduation Completion record.

Students who successfully complete the program receive a certificate from St. Cloud Hospital School of Diagnostic Imaging. The degree is granted by the campus of attendance following the completion of their requirements for graduation.



Students are permitted to pre-register for the American Registry of Radiologic Technologists (ARRT) exam during their 5<sup>th</sup> semester during Professional Development. The ARRT will verify the student's program completion with the Program Director. The student is not eligible to sit for the certification examination until all the program requirements have been met. Students have the option to receive preapproval if they wish or if there is some doubt they would not be approved prior to graduation. Please see the Program Director for additional information.

## Honors

Students who complete the program will be graduated with honors in accordance with the following:

- 3.65-3.79: Cum Laude
- 3.80-3.89: Magna Cum Laude
- 3.90 or higher: Summa Cum Laude

Graduation Honors are determined by the cumulative grade point average at the end of the fifth semester.

## Housing

Students are responsible for providing their own housing. Students have an opportunity to utilize Sleep rooms while rotating to clinical sites such as Melrose. To request utilization of these offerings; students will email all program faculty and include arrival and departure dates they would like to stay. Program faculty will then reach out to site contacts of desired location to reserve. These accommodations are not guaranteed; therefore, students should have an alternate plan. Students must present a form of identification prior to accessing these housing options.

Students are expected to review and sign the Student Accommodations policy prior to utilizing. All school policies are applicable while using these rooms/housing unit.

**For further information on housing expectations and utilization please reference Appendix C.**

## Inclement Weather Policy

Being an educational facility focused on health care, it is very rare for the School of Diagnostic Imaging to close due to inclement weather.

Program faculty will make a decision regarding cancellation of all classes by 6:00 am. Students will be notified by faculty. An email will be sent to all Clinical Instructors regarding cancellation.

Regardless of the School's decision during inclement weather, the student must consider the situation in their own location with their ability to drive and arrive at their destination safely. The **ultimate decision concerning personal safety** in the event of severe weather or any emergency is the responsibility of the individual. Should a student not be able to get to school during inclement weather, there will be no penalty for this. **You may be required to make up missed clinical time at the discretion of program faculty.** A student not reporting to clinical must notify program faculty and the clinical site.

## JRCERT Resolution Policy

Upon notification from the JRCERT (Joint Review Committee on Education in Radiologic Technology) of a complaint concerning noncompliance of the Standards, the St. Cloud Hospital School of Diagnostic Imaging will respond to the JRCERT within a one (1) month time frame. The response will include:

1. An acknowledgement of the complaint by the School of Diagnostic Imaging and the date received.
2. Investigation of the specific issue related to the complaint including meetings with any personnel involved. (completed within 2 weeks of receipt)
3. A report of the final outcome of resolution of the complaint with an action plan if applicable.

A permanent written record of all complaints and subsequent resolutions will be kept on file in the Program Director's office. Any complaints and/or resolution of complaints of noncompliance with the Standards will be conveyed in the Annual Assessment Outcomes Report.

## Pregnancy Policy

During school orientation, each student is given instruction in the U.S. Nuclear Regulatory Commission, Regulatory guide 8.13. This guide describes the necessary instructions for the female student concerning prenatal radiation exposure. (Form found in Appendix A) In order to protect the student and the unborn baby, the following is a policy relating to pregnant students enrolled in the radiologic technology program. A student enrolled in the program who is pregnant has the option to declare their pregnancy or not to declare it. If the student should choose to declare their pregnancy, it must be in writing to the program director. Once a student declares a pregnancy, they may also withdraw their declaration if they so desire. This, also, must be done in writing. Disclosure will not affect the student's continued participation in the program. The student will be given two personnel monitors and instructions on how to use them to best monitor any exposure to radiation during the pregnancy. A review of the individual's radiation exposure history, by the radiation safety officer, can be used to advise the student in their choice.

1. **The student may choose to continue with the program, if so, the student will be expected to participate in the same classroom, clinical, and demonstration activities as the other students.**
2. **The student may choose to withdraw from the program, and apply for re-admission on a space available basis only.**
3. **The student may choose to withdraw their declaration of pregnancy. This must be done in writing.**

The student must have a written physician release to return to the classroom and clinical rotations, upon termination of the pregnancy.

Failure on the part of a student to notify the program director or clinical coordinator of an existing pregnancy shall absolve the school of any responsibility from an assignment to a radiation area.

## Program Length

The course of study consists of four terms of sixteen weeks and two summer terms. The school admits one class of fourteen students annually in the fall. The length of the program is approximately 21 calendar months.

## Contingency Plan

In a case of a pandemic or other catastrophic incident, the St. Cloud Hospital School of Diagnostic Imaging will take their direction from CentraCare St Cloud Hospital's Incident Command. In the case that students are not allowed to attend either clinical or class, classes will be held virtually via the Teams format that is supported by the organization's IS department. We will utilize any supportive resources provided by ASRT, ARRT or JRCERT. This may include learning videos or lectures. This will be looked at weekly and plans adjusted as needed. Program length and new student enrollment may be affected by the event. Therefore, the program strives to remain flexible during a fluid situation such as a pandemic or other catastrophic incident. Communication to staff, faculty and students will include emails, Teams conferring and text messages. Clinical scheduling will be altered to make certain that we are still following the JRCERT Standards and meeting student completion requirements.

## Radiation Protection Policy

It is the policy of SCH School of Diagnostic Imaging to comply with all institution, state and federal radiation safety guidelines and policies. Student radiographers will be operating radiation-producing equipment only as part of their education program under the supervision of a qualified general radiographer during regularly scheduled clinical rotation hours.

No patient shall be exposed to ionizing radiation except for those procedures authorized by a physician. Exposure of any individual to ionizing radiation solely for educational purposes will NOT be permitted, and will result in immediate dismissal for unsafe radiation practices.

**All students complete computer-based training (CBT) modules on Radiation Safety created by the organization's Radiation Safety Officer during orientation and annually.**

### A. Shielding

1. Protective garments of at least 0.5-mm lead equivalent MUST be worn when in the room during fluoroscopy with stationary or mobile units. Thyroid shields and leaded goggles shall be used as appropriate.
2. Stand behind protective barriers and close doors when making x-ray exposures.
3. No unnecessary personnel in rooms where x-rays or fluoroscopy is being utilized.
4. **When performing portable examinations, students should stand behind the portable radiographic unit or as far away from the primary beam as possible (minimum 6 feet).** Ancillary staff/Visitors will be asked to leave the room or stand as far away from the primary beam as possible.
5. Aprons, gloves, thyroid and gonadal shields will be checked within 24 months by technologists and are recorded in the Inspection Data Documentation binder.

6. Shielding patients scheduled for non-abdominal radiographs may be done at the request of patients or guardian providing it does not interfere with the diagnostic procedure.
7. Portable C-arm unit is to be operated by a Staff Radiographer when used by non-radiology medical staff. A Physician must be physically present in the room during c-arm exposures.
8. **In the event a student has a personal diabetic device they are required to inform faculty to ensure the proper radiation protection is provided. Students will be required to review and comply with the Specialty Lead Usage Agreement. (See Appendix B)**

### B. Radiation Monitoring

1. Radiation monitors are to be worn by all personnel who may be potentially exposed to more than one tenth of the prospective maximum permissible radiation dose equivalent.
2. Personnel supplied with an individual monitoring device are required to wear it. (Ref MDH ionizing Radiation Rules Chapter 4732.0440 Subpart 1)
3. A whole-body badge is to be worn at collar level, outside protective lead clothing.
4. Dose reports can also be run at any time via the Instadose website or app by the individual student and faculty.
5. Personnel monitor can not be exposed to extreme heat or cold. Nor can it be immersed in water. If badge has experienced any of these conditions: **DO NOT THROW IT AWAY. BRING IT TO THE CLINICAL COORDINATOR for evaluation and possible replacement.**
6. The monitor cannot be worn while receiving medical or dental x-rays. The monitor is for OCCUPATIONAL dose only.
7. Each student will be given the information on how to access their radiation dose reports. It is the student's responsibility to review this.

### C. Overexposure

1. Students should not receive more than 125 mrem/quarter.
2. The Radiation Safety Committee (RSC) will perform a review of occupational radiation exposure with particular attention to instances in which the investigational levels in Table 1 are exceeded. The principle purpose of this review is to assess trends in occupational exposure as an index of the ALARA program quality and to decide if action is warranted when investigational levels are exceeded.

<b>TABLE 1 - ALARA Investigational Levels (Mrems per calendar quarter)</b>		
	Level I	Level II
1. Whole body; EDE	125	375
<b>2. Eye</b>	375	<b>125</b>
<b>3. Skin; shallow</b>	<b>250</b>	<b>3750</b>

3. Establish of Investigational Levels in Order to Monitor Individual Occupational External Radiation Doses.
  - i. This institution hereby establishes investigational levels for occupational external radiation doses which, when exceeded, will initiate review or investigation by the RSC and/or the RSO. The investigational levels that we

have adopted are listed in Table 1. These levels apply to the exposure of individual workers.

a. Personnel dose equal to or greater than Investigational Level I, but less than Investigational Level II.

(1) The RSO or his designee will review the dose of each individual dose equals or exceeds Investigational Level I and will report the results. If the dose does not equal or exceed Investigational Level II, no action related specifically to the exposure is required unless deemed appropriate by the committee. The committee will review each dose in comparison with those of others performing similar tasks as an index of ALARA program quality and will record the review in the committee minutes.

b. Personnel dose equal to or greater than Investigational Level II.

(1) The RSO or his designee will investigate in a timely manner, the causes of all personnel doses equaling or exceeding Investigational Level II and, if warranted, will take action. A report of the investigation, any action taken, and a copy of the individual's Form NRC-5 or its equivalent will be presented to the RSC at its first meeting following completion of the investigation. The details of these reports will be included in the RSC minutes.

c. Current Permissible Radiation Levels

Annual limits of Exposure:

1. General Public: 100 mrem/yr

2. Radiation Workers: 5000 mrem/yr

3. Pregnant Rad. Workers: 500 mrem/entire gestation & no more than 50 mrem/month

4. If the student continues to receive over the recommended dose limits, removal from the clinical area will occur.

#### D. Technique

a. Take time to position the patient properly

b. Choose exposure factors based on the patient's body habitus.

c. Collimation

d. Limit the size of the beam to include only the area of interest.

e. There is NEVER justification for a beam larger than the image receptor

f. Collimation improves image quality

g. Collimation may be the single most vital thing the technologist can do to protect the patient

#### E. Protecting Yourself

a. **You can be protected by the same techniques used to protect the patient.**

b. **Always wear lead apron and gloves when appropriate.**

c. **NEVER STAND IN THE PRIMARY BEAM!**

d. **Students should NOT hold patients during radiography exams.**

St. Cloud Hospital School of Diagnostic Imaging is committed to respecting all members of our campus community and providing a quality educational experience for all students. The objective of the Student Complaint Policy and Procedure is to ensure that the concerns and complaints of students are addressed fairly and are resolved promptly. Complaints related to this policy are student complaints apart from those requiring invoking the grievance procedure. Students may file complaints if they believe a problem is not governed by other complaint or appeal procedures.

## **Student Complaint Policy**

Whenever possible, students are encouraged to seek an informal resolution of the matter directly with the faculty or individual(s) involved. Often a complaint can be resolved in this way. However, if an informal approach is neither successful nor advisable, the student should use the following procedure:

- A student complaint form should be submitted to the SCH SODI Program Director (PD).
  - It should contain (at a minimum) the date and time of the alleged conflict or action, the reason(s) for the complaint, a summary of the complaint, a list of other persons who may provide information and any appropriate documentation. The student must also include the resolution or outcome he or she is seeking. The complaint should be submitted within ten (10) business days of the alleged conflict or action.
- The PD will review the information provided, meet with you within 10 business days, and initiate an investigation if needed.
  - Every effort will be made to resolve your complaint; however, do understand that the resolution of all complaints may not be possible at the department level.
  - Serious complaints may need to be forwarded to the appropriate personnel or department.
- The PD may attempt to resolve the complaint by encouraging discussion between the student(s) and the faculty member/student or by taking the appropriate action to resolve complaint.
- If, after your complaint has been reviewed and investigated by the PD, you are not satisfied with the outcome of the complaint, you may continue to pursue filing of a formal grievance.

A record of all complaints and their resolution will be documented, and the records will be kept in the PD office.

## **Informal Grievance**

Students are encouraged to speak up regarding their educational experience. In the event, concerns arise regarding current school policies or procedures students may express themselves through a written informal grievance. Students must send concern/suggestions to ALL faculty via an email. Faculty will review and respond as deemed necessary and/or appropriate.

# Grievance Policy

The St. Cloud Hospital School of Diagnostic Imaging strives to maintain good student relations and assure equal treatment of all students. If a current student believes an action affecting them is unjust or inequitable, the student is able to bring forward the issue for review and consideration without fear of retaliation. As a result, an open door policy in the form of the following procedure has been established. This due process, as outline below, must be followed as written.

## **PURPOSE:**

To provide an effective and acceptable means for current students to bring problems and complaints concerning their education (including grade appeals) to the attention of program officials.

## **PROCEDURES AND GUIDELINES:**

- I. As a first step with any type of dissatisfaction, the student should discuss the matter with the involved person, faculty member, clinical instructor or program director.
- II. If the issue cannot be resolved in the initial discussion, the student shall state the complaint in writing. The written grievance must be delivered to the Clinical Coordinator within five (5) days from the time of the occurrence of the problem. The Clinical Coordinator will investigate the allegations with the appropriate persons involved. The Clinical Coordinator, then, shall reply in writing to the student within five (5) school days of the receipt of the document. If the grievance is resolved at this step, the documentation will be filed in the school files. If the complaint is directly related to the Clinical Coordinator, the student may follow the above process with the Program Director.
- III. If the Clinical Coordinator's reply is not acceptable to the student, he/she may submit a written grievance to the Program Director student within five (5) school days. The Program Director shall reply in writing to the student within five (5) school days of the receipt of the document. If the grievance is resolved at this step, the documentation will be filed in the school files.
- IV. If the grievance is not resolved through the preceding steps, the student may request a meeting with an Appeals Committee. A written request for a meeting should be submitted, by the student, to the Program Director within five (5) school days.
  - a. The Appeals Committee shall consist of the Program Director and/or Clinical Coordinator, one clinical instructor, and a department supervisor chosen by the Program Director. The student may also select two employees to serve on the Appeals Committee.
  - b. The Program Director will schedule a meeting within five (5) school days.
  - c. At the scheduled meeting, the student will be given an opportunity to present relevant information concerning the issue/problem as well as call witnesses, if necessary.
  - d. The student will be informed by the program director, in writing, of the Committee's decision within five (5) school days.
- V. The student may accept the decision of the Appeals Committee or request a final appeal to the Employee Relations Department from Human Resources of the hospital.
  - a. The student will forward a written request within five (5) school days after receiving the decision of the Appeals Committee.
  - b. A meeting will be scheduled with the Employee Relations Department within five (5) school days of receipt of the written request to hear the appeal.
  - c. After meeting with the Employee Relations Department, a final decision will be rendered within five (5) school days.
  - d. This Employee Relations decision will be final and binding. A copy of the decision will be given to the student and program director. No decision shall be made that conflicts with any laws or which is not in compliance with the organization's policies.
- VI. A permanent written record of all complaints and subsequent resolutions will be kept on file in the Program Director's office.

# **STUDENT SERVICES**



## Change of Address and Telephone Number

It is the responsibility of the student to provide any change of address or telephone number from the one listed at the time of registration. All changes must be submitted in writing with the effective date.

## Counseling Program

An important objective of the school is to help the student to become more self-directing. The program director, clinical coordinator or clinical instructors are available for academic, behavioral and clinical counseling. For other personal matters, professional counseling is available through the Spiritual Care Department. Students are provided clinical counseling at the midterm **and/or** end of each term and as needed at other times. This will allow the student to improve upon any deficiencies before grades are final.

## Educational Facilities

1. The classroom is located in the lower level of the CentraCare Sartell. Each student is provided a desk and ample storage space for books and personal items. A/V equipment is available to instructors and students for classroom presentation. The classroom has Internet and EPIC access. In addition, CentraCare has designated a room for program use located at the St. Cloud Hospital in the Conference Center (Pine Room); where the Anatomage Table is located.
2. Health Science library (Center lobby, St. Cloud Hospital, First Floor)  
To check out books in Health Science library, see hospital medical librarian. Internet access is also available in the library for educational research projects, as well as, several computer kiosks throughout the CentraCare Health System affiliates.
3. Simulation Center: Faculty incorporate numerous labs and learning activities conducted in this location. There are full body high fidelity mannequins as well as full body(skeleton) trauma mannequin.
4. Computer Lab: Student may utilize the Cedar room at the St. Cloud Hospital which contains 22 computers with internet and EPIC access.
5. Additional educational resources are available in the SODI classroom or from the offices of the Program Director and Clinical Coordinators.
6. College Database: Students still have access to all of the educational databases from their college of enrollment.

## Food Service

Meals may be purchased in the Riverfront Dining Room, or the South Bistro at the St. Cloud Hospital or food may be purchased from the vending area in the Employee Breakroom at CentraCare Sartell.

## Health Care

**The following immunizations and healthcare screenings are required.**

1. A 2-step Tuberculin Skin or Single Quantiferon Gold Test, is required upon admission and annually. If a positive reaction occurs, the student must present a chest x-ray result which has been taken within the previous 12 months.
2. Documentation of two doses of vaccine against Measles, Mumps, & Rubella (MMR), at least 28 days apart, or one of the following:
  - a) Blood drawn to prove immunity to all 3 diseases (MMR titer)
3. Documentation of two doses of vaccine against Varicella (chicken pox), at least 28 days apart, or one of the following:
  - a) Blood drawn for Varicella titer proving immunity
  - b) Medical statement or dictation note from healthcare provider of clinic visit when student/faculty was seen and diagnosed with Varicella or Zoster (Shingles)
4. Hepatitis B (3-series) vaccine.
5. Tetanus, Diphtheria, Acellular Pertussis (Tdap) vaccine after age 11.
6. COVID-19 vaccine and boosters when eligible.
  - a) Verification of vaccine must be submitted to PD.
7. Influenza Vaccine- annually during flu season
  - a) Verification of vaccine must be submitted to PD.
  - b) If the vaccine is either declined or contraindicated for medical reasons – students may be required to following additional protective measures regarding the use of PPE.
8. Signed Drug & Alcohol Acknowledgement & Confidentiality Agreement
9. Negative Urine drug and alcohol test results within 3 months prior to internship commencement.
10. Proof of American Heart Association Basic Life Support (BLS) card at the BLS Provider level
11. Proof of medical insurance

A nurse practitioner from Employee Health Services will review the results of these tests and make recommendations when indicated. The students will have available to them the services of the Employee Health Service for advice and/or referral assistance only. There may be some immunizations required or recommended before clinical experience takes place. A complete list of childhood immunizations must be submitted. Students may receive free Influenza and Covid vaccines from the Employee Health Services department.

## Student Drug & Alcohol Acknowledgment—St. Cloud Hospital

CentraCare St. Cloud Hospital is committed to maintaining a work environment which is free from the influence of alcohol and/or drugs to protect the health, safety and well-being of our students and patients.

Therefore, the possession, use, transfer and sale of alcohol or drugs by all students or interns is prohibited on all premises owned, or otherwise controlled by CentraCare, and while operating any CentraCare equipment, machinery, or vehicle. **It also prohibits reporting for learning experience(s) under the influence of alcohol and/or drugs. This includes prescription medication that alters one's cognitive function.**

This policy does not apply to students who are solely on the premises for receiving medical treatment or visiting a person who is receiving medical treatment.

Tobacco use of any form is NOT allowed on while on school/organization's premises. Additionally, vaping is not acceptable.

If St. Cloud Hospital forms a reasonable suspicion that a student has/is using, possessing, transferring or selling alcohol or illegal drugs in violation of the above-stated policy, the student may be tested, at St. Cloud Hospital's expense, pursuant to St. Cloud Hospital's drug and alcohol testing policy. If the test results are confirmed positive, the student will be subject to appropriate disciplinary action, up to and including termination from St. Cloud Hospital's student program.

Any cost of confirmatory re-testing shall be paid by the student. The student is also responsible for cost associated with any follow up treatment, including chemical dependency evaluation or treatment.

## Health Insurance

The student is required to have health insurance and is responsible for his/her own health insurance upon commencement and for the duration of the internship.

Documentation of current policy should remain on file with the program director.

## Student Injury while at school

Students are responsible for their own medical care and health insurance. Emergency medical care is available for students if it relates to injuries and exposures during the performance of assigned activities. However, all students receiving medical care on hospital premises shall be responsible for the cost unless the law or hospital policies indicate otherwise.

Prior to and during program enrollment, the student is required to notify the program director of any illness or condition which may prevent him/her from performing the clinical objectives, duties and assignments. Requirement of a physician's signature to return to the clinical area will be at the discretion of the program director and will be based on its implication to the student, patient, and staff. In some cases, hospital policy will determine the process for the returning student. Non-compliance could result in suspension or dismissal from the program.

**All students are required to maintain medical insurance coverage throughout the duration of program enrollment.**

A student that experiences an injury, during scheduled school activities, must immediately report the incident to a supervising faculty member.

An incident report must be filed which will then be reviewed by the Clinical Coordinators and Program Director. This report will be kept in the student's permanent record. The student must receive immediate care at the site, and the student is responsible for follow-up care. The student is responsible for all expenses related to the incident.

## **In Hospital Educational Programs**

The hospital conducts in-hospital educational programs to provide a higher quality of medical care to patients through continuing education. If programs are offered which provide a benefit to the student during the course of the program, arrangements will be made by the Program Director or Clinical Coordinator when attendance of the program is required during clinical hours in the Imaging Services Department.

## **Outside Hospital Educational Programs**

The St. Cloud Hospital and School of Diagnostic Imaging encourages the participation in outside educational programs which are designed to enhance the knowledge and skills of the student.

Travel allowances and other expenses incurred for outside education programs are the responsibility of the student attending, and are not reimbursed by the School.

Programs sponsored by professional affiliations in Radiologic Technology, attended by students may count as regular school attendance. This must be arranged prior to the student attending. No credit will be given retroactively. The student must provide evidence of attendance.

## **Lockers**

All students are provided a locker or designated space to store books and personal items while in the clinical setting. For purposes of security, all personal items must be kept in lockers. Students must provide their own pad lock.

## **Name Tag and/or Student Identification Card**

All students, upon commencement of the program will receive a picture name I.D. card. The I.D. **MUST** be worn at all times during assigned hours with the name and picture visible at all times. The picture I.D. also allows access to designated locked areas after hours and access to the vehicle parking ramps. If the picture I.D. is lost or damaged, it must be replaced. Lost identification badge replacement charge is \$10.00. The \$10.00 fee is refundable upon the return of the lost identification badge.

There is no charge to replace a damaged badge, when the old badge is turned into the Security/Safety Department.

## Orientation

Each student will have access to the school handbook prior to admission. It is available on the website <http://www.centracare.com/app/files/public/392/Student-Handbook.pdf>

Once enrolled students will complete computer-based training (CBT) modules per organizational onboarding requirements to be abreast of policies and procedures during their orientation week. Additionally, students will be complete EMR training and clinical validations prior to the commencement of clinical.

**\*Students will be required to maintain their computer-based training (CBT) modules regarding safety practices and patient care policies while enrolled in the program. Each student will have access to their personal account through Oracle. This is an ongoing requirement that students must check regularly and complete assigned modules.**

All students attend the hospital's General Orientation prior to being scheduled in the clinical area. This orientation address all the hazards that a student may come into contact with including emergency preparedness, harassment, communicable disease and substance abuse, medical emergencies, standard precautions and HIPAA. Students have access to much of this information in their Clinical Education Record as a reference. Additionally, students are assessed on their understanding of this content via course assignments.

### ***Communicable Diseases Reporting***

Guidelines for reporting suspected contact with communicable disease.

*All students working with high risk patients must report:*

- a. EXPOSURE: Report exposure to blood, body fluid, or tissue specimen of a patient known or suspected of communicable diseases to Employee Health Services (EHS) no later than 48 hours after exposure. Follow up health work and testing will be conducted by EHS.

### ***Infection Control Guidelines for student:***

- b. NEEDLE PUNCTURE: All needle punctures will be reported to Employee Health Services (EHS) by filing an incident report no later than 48 hours after the puncture.
- c. EXPOSURE TO SUSPECTED AND ACTIVE TB:
  - i. In suspected & active cases: Students having direct contact with the patient initiate respiratory precautions (N95 mask) to protect himself/herself.
  - ii. An RL Solutions report is initiated if student is not properly informed of patient condition and precautions taken.
  - iii. The EHS will continue the follow-up services that are necessary.
- d. MANAGEMENT OF STUDENTS WITH INFECTIOUS DISEASES:

Students with infectious diseases shall not be permitted to attend class or clinical assignments until written approval is given physician. (Refer to EHS)

  - Hospital Policy found in PolicyStat under Infectious or Exposed

# Harassment– Offensive Behavior on Campus

## **Harassment:**

It is our desire to provide an educational environment free from all forms of discrimination. We wish to maintain an environment free from offensive or degrading remarks or conduct, including sexual harassment. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, sexually abusive or threatening comments and language, the display of sexually suggestive art or objects, or retaliation against you for having complained about any such behaviors in addition, harassment can be unwelcome sexual conduct that unreasonably interferes with your performance or conduct which creates an intimidating, hostile, or offensive educational environment. If you feel that another person is harassing you, call the matter to the person's attention in a direct way. If you do not wish to do this, or if the offending person does not change as a result of your communication, you should contact your clinical instructor, the Clinical Coordinators, or the Program Director. You will be assisted in completing a record of the incident(s), and the facts will be investigated. For your comfort, and at your choice, a student may attend with you. A decision regarding the incident(s) will be made after a complete and impartial review of the situation. All students are to follow this practice. Sexual harassment can be grounds for termination.

## **Policy:**

It is the policy of St. Cloud Hospital as the sponsoring body of the School of Diagnostic Imaging to provide a student with an educational environment free from discrimination, including freedom from sexual harassment in the institution. It is prohibited and will not be tolerated by this hospital. The hospital believes that sexual harassment presents an obstruction to the orderly rendering of services to the patient, the employee, and the student.

## **Authority and Responsibility:**

All students: All hospital students are responsible for complying with the provisions of this policy.

## **Supervisory Staff:**

All members of the hospital supervisory staff have the authority to enforce and the responsibility to comply with the provisions of this policy.

## **Employee Relations Department:**

The Employee Relations Department has the authority and responsibility for advising on this policy and its interpretation.

## **Definitions:**

- A. **Sexual Harassment:** Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature including, but not limited to the following actions:
- Abusing the dignity of a student through insulting or degrading sexual remarks or conduct.
  - Threats, demands, or suggestions that a student's educational status is contingent upon the student's toleration of or acquiescence to sexual advances;
  - Displaying in the classroom/clinical areas suggestive objects or pictures;  
or
  - Retaliation against students for complaining about the behavior cited above or similar behavior.

- B. Offensive Behavior: Unwelcome and inappropriate behavior or conduct directed toward an employee, volunteer or those we serve because of their age, sex, race, religion, color, national origin, sexual orientation, marital status, disability status, creed, status as a recipient of public assistance, genetic information, **military service**, **veteran status** or any other protected status.
- C. Threats: They may be real or implied. Harassment is considered a form of a threat. Threats or harassing incidents can take on many forms including but not limited to:
  - \*Telephone Calls
  - \* Letters
  - \* Following/Stalking
  - \* Physical Altercations
  - \* Assault on Employees or Family
  - \*Face to Face Confrontations
  - \* Vandalism
- D. Aggressive/Violent Behavior: It is usually acted out physically. Aggressive behavior is more threatening in nature than threats. For example: an individual displaying violent behavior may throw objects, hit someone or something or commit some other physical act. Violence is any verbal or physical acting out that may harm or threaten harm to others.

***Behavior Code of Conduct:***

1. We ensure optimum patient/resident care and a respectful workplace by promoting a safe, cooperative, and professional healthcare environment, with a goal to prevent or eliminate, conduct that:
  - a. Disrupts the operation of the organization
  - b. Affects the ability of others to do their jobs
  - c. Creates a “hostile work environment”
  - d. Adversely affects or impacts the community’s confidence in the organization’s and the Medical Staff’s ability to provide quality patient/resident care.
2. We refrain from disruptive behavior, which includes, but is not limited to, behavior such as:
  - a. Losing one’s composure/temper.
  - b. Engaging in intimidating or abusive behavior of any sort, physical or verbal.
  - c. Using profanity or similarly offensive language.
  - d. Making degrading or demeaning or offensive comments regarding patients, residents, employees, physicians, volunteers or the organization.
  - e. Making derogatory comments regarding the quality of care provided by the organization, any physicians on the Medical Staff, nurses, or any other personnel.
  - f. Engaging in any retaliatory or abusive conduct with respect to any individual who has filed in the past, or may file in the future, a complaint or concern.
  - g. Using non-constructive criticism that is addressed to its recipient in such a way as to intimidate, undermine confidence, belittle, or imply stupidity or incompetence.
  - h. Unwillingness to work cooperatively and harmoniously with other personnel, volunteers or members of the medical staff. This includes silence/non- communication as a means of retaliation, such as refusing to answer questions, calls, answer pages, walking away from someone talking to you or otherwise using silence as an avoidance tactic.

## **Guidelines**

- A. All employees, volunteers, vendors, residents, patients, interns, and students are prohibited from engaging in any form of harassment, including sexual harassment, threats, aggressive, violent or offensive behavior and must follow the Behavioral Code of Conduct.
- B. No hardship, no loss of benefits, and no penalty will be imposed on an employee as punishment for: filing or responding to a bona fide complaint of harassment, sexual harassment or offensive behavior; appearing as a witness in the investigation of a complaint or allegation; or serving as an investigator.
- C. Retaliation or attempted retaliation is a violation of this policy and anyone who does so will be subject to severe sanctions up to and including termination.
- D. Managerial/supervisory staff will be subject to disciplinary action should they fail to strictly and promptly enforce the policy.

## **PROCEDURE:**

### **Complaint Procedure:**

If a student feels that another person has harassed him/her, he/she should directly inform the person engaging in such conduct that the harassment is offensive, against Hospital policy and must cease.

If an aggrieved student does not wish to communicate directly or if direct communication with the offending party has proven unsuccessful, the aggrieved student should immediately contact a clinical instructor, the Clinical Coordinator or Program Director.

The facts surrounding the incident or incidents must be documented in writing by the aggrieved student and submitted to the Clinical Coordinator or Program Director; thus, providing a basis for a complete and impartial investigation of the allegations. The final disposition of the complaint will be brought to the alleged offender's supervisor, who will take the appropriate action and will notify the charging party of the decision. If the charging party is dissatisfied with the decision, he/she may utilize the due process procedure.

### **B. Informing students of rights:**

The policy will be reviewed with all students in their initial program orientation which takes place during the first week of the new school year.

## **Safety and Security—Workplace Hazards**

We take every reasonable precaution to assure that the Hospital grounds are safe for employee, patients, visitors, (students) and others. We ask you to do the same. Your cooperation is essential in this effort. If you spot any action or any condition that appears unsafe, please report it to a supervisor immediately. If your supervisor does not take corrective action, call the situation to the attention of the Safety and Security personnel.

In the course of your clinical practice, use safety devices and wear protective apparel such as goggles, gloves or gowns when appropriate. Read operating manuals thoroughly before you use any equipment. Failure to do so could cause accident, injury, or disaster. Students who disregard hospital safety regulations are subject to disciplinary measures.



If you are involved in a clinical related accident, injury, or illness; report it immediately to your designated program supervisor. An RL Solutions form found on the CentraNet must be completed within 48 hours.

The following numbers can assist you:

**Emergency:**

**3333 - to report codes, and immediate help**

**1234 - to contact Security personnel**

**Safety programs:**

The St. Cloud Hospital and Department of Imaging Services have a department manual that cover the proper procedures required to provide the safest possible environment to patients, visitors, employee, and students.

The student has the authority and responsibility to work safely, to report unsafe conditions or equipment to his/her clinical instructor, and to know the safety procedures such as fire and disaster for assigned clinical sites as required.

**Patient medical record security:**

All entries to the medical record of a patient while in any clinical site must be done in accordance with that clinical site's policy. There shall be no circumstances under which a student is permitted to make entries into the medical record of a patient without direct supervision of a registered technologist or registered nurse.

**MRI Screening for Students**

The purpose of this policy is to ensure the safety of the Radiologic Technology students before entering a Magnetic Resonance Imaging scanning room/field. It assures appropriate MRI Safety screening has been completed on each student.

Magnetic Resonance Imaging (MRI) scanners generate a very strong magnetic field within and surrounding the MR scanner. As this field is always on, unsecured magnetically susceptible (ferromagnetic) materials, even at a distance, can accelerate into the bore of the magnet with a force significant enough to cause severe injury or damage to the equipment, patient, and/or any personnel in its path.

All students in the Radiologic Technology program will be instructed in MRI Safety basics in the first semester of the program prior to entering clinical rotations during General Orientation. In addition, all students will be screened in this semester to ensure continued safety. Anyone entering the MR environment without being thoroughly screened by qualified MR personnel may potentially compromise his/her safety and/or the safety of everyone in the MR environment. It is the MRI technologist's responsibility to control all access to the scan room. As a student, you too become part of this safety team adhering to all MRI safety policies and procedures. At any point a student has doubt, an MRI Technologist or Radiologist should be consulted.

Students will be responsible for reporting any changes which impact this screening and may thus compromise safety.

## Hospital Employment

The Imaging Department will periodically offer students employment as Imaging Assistants or Radiographer Assistants. The Imaging Specialist will have information concerning positions available for students.

Please note that any hours as an employee are not part of the program and cannot be used to satisfy required clinical courses. Also, students who are working in an Imaging Department and come in contact with radiation **MUST** wear a different badge than their student radiation badge during that time.

## Outside Employment

Employment outside the school is permitted as long as school scheduling takes priority. The school will not alter students' schedules to accommodate outside work schedules. Students are expected to regard their radiology internship as a top priority and to be present for assigned schedules regardless of outside employment.

## Student Counseling Reports

Student Counseling Reports will be prepared each term (more often if situation warrants). These may be at mid-term **and/or** at the end of the term. It is at this time the student will receive feedback regarding their performance for each course. Areas of improvement as well as strengths will be identified. Students will also have an opportunity to identify goals or areas they would like additional support to achieve success. Weekly evaluations are completed as an ongoing process as part of each clinical courses. The student selects the Clinical Preceptor they have worked closely with throughout the week. These evaluations are accessible for the student to review through the Trajecsys Report System at any time.

## Student Discounts

CentraCare Health System has negotiated discount rates for various activities and services throughout the central Minnesota area. CentraCare Health System is a member of *MERSC* (Minnesota Employee Recreation and Services Council). Discount listings can be obtained by accessing the website [www.mersc.org](http://www.mersc.org).

## Religious Services/Chapel

Catholic Mass services are offered daily at 10:30am in the chapel at the St. Cloud Hospital. Student attendance at religious services is voluntary. Students that wish to attend religious services during scheduled clinical time must get approval prior to attendance from the program faculty. Prayer and Meditation rooms are also available at the St. Cloud Hospital on Level 1 and the CentraCare Health Plaza in the Woodlands. This time for attendance would be added on to the end of that scheduled day.

## Parking

**Free parking** is provided for all authorized student cars. To obtain authorization, the student completes an application form and is issued a vehicle parking access card. Students **MUST** park in designated areas. Failure to do so may result in a lose of Professionalism from the clinical grade.

# **CLINICAL EDUCATION**

## INTRODUCTION

In order to insure effective clinical education for students enrolled in St. Cloud Hospital School of Diagnostic Imaging, each student must possess a full understanding of the competency based system of evaluation that is employed. It is the intent of the competency-based system to provide an objective and uniform method of evaluation of the clinical performance of the students in the program.

In an attempt to develop a sound clinical education program and to meet the criteria in the **STANDARDS** (Standards for an Accredited Educational Program in Radiologic Sciences, this program has been developed. This information has been designed as a guide to provide you with the necessary specific information regarding your clinical education experience and evaluations.

St. Cloud Hospital School of Diagnostic Imaging provides adequate clinical experience to ensure that all students become candidates for certification by meeting the didactic and clinical competency requirements specified in *ARRT Rules and Regulations*.

Ethical professional conduct is expected of every student enrolled in the St. Cloud Hospital School of Diagnostic Imaging. As a guide for students, we have included a copy of the ARRT Standards of Ethics as well as a copy of the ASRT Code of Ethics in the Appendices.

Under the revised policy, all students, male and female, will be offered the opportunity to participate in mammography clinical rotations. The program will make every effort to place a male student in a mammography clinical rotation if requested; however, the program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to female students. Male students are advised that placement in a mammography rotation is not guaranteed and is subject to the availability of a clinical setting that allows males to participate in mammographic imaging procedures. The program will not deny female students the opportunity to participate in mammography rotations if clinical settings are not available to provide the same opportunity to male students.

## CLINICAL COMPETENCY PROGRAM GLOSSARY

**Clinical Competency Evaluation System**- A standardized method of evaluating the performance of students by integrating the clinical education with the didactic portion of the program.

**Clinical Competency**- Exams performed by the student with direct supervision of the registered technologist with minimal assistance. These exams must be exams that have been mastered in the didactic portion of the student's education.

**Direct Supervision**- The student is performing the procedure with a registered technologist present in the room during the procedure.

**Indirect Supervision**- Supervision provided by a qualified technologist immediately available (presence adjacent to the room or location where the procedure is being performed) to assist the students.

**Simulated Competency**- Test exams that students perform (except for the actual exposure) on another student in the clinical area. The clinical instructor or clinical preceptor monitors these test exams.

**Recheck Competency**- Test exams monitored by the clinical instructor or clinical preceptor and performed by the student on an actual patient on areas that competency has previously been mastered.

**Final Competency**- Test exams monitored by the clinical instructor or clinical preceptor and performed by the student on an actual patient during the student's final term.

## **Clinical Competency Process**

Upon completion of a procedures unit, the student is expected to transfer the cognitive information presented in the classroom to psychomotor and affective skills used in the clinical setting. A laboratory demonstration is used to facilitate this transfer of information. Following the laboratory demonstration, students will observe and participate in patient exams under direct supervision of a registered radiographer. After this, the student must pass a simulation examination and then may present for competency.

Extensive performance of actual patient exams is encouraged and will facilitate in successful completion of the competency evaluation. Successful completion is defined as a passing score of 80% or higher on any clinical competency. The student is expected to successfully complete the competency evaluation with a maximum of two attempts. Failure to obtain a passing score within two attempts will result in counseling and disciplinary action if needed.

The minimum required competency exams needed are outlined in the ARRT Clinical Competency Requirements. The program's requirements exceed the ARRT minimum and are outlined on the Graduate Clinical Competency Form.

## **Direct/Indirect Supervision and Repeat Policy**

**In accordance with the Joint Review Commission on Education in Radiologic Technology Standards 4.4: The student to clinical staff ratio must be 1:1; however, it is acceptable that more than one student may be temporarily assigned to one technologist during infrequently performed procedures.**

The policies for direct and indirect supervision and their relation to image repeats is as follows:

### **Direct Supervision**

Direct supervision exists when a technologist is working with a student in the radiographic room or is observing the student perform a radiographic exam from the control panel area. A qualified radiographer reviews the procedure, evaluates the condition of the patient, is present during the performance of the procedure, and reviews and approves the procedure in relation to the student's knowledge and achievement.

***Direct supervision*** is utilized whenever:

1. The student has not yet successfully passed competency testing on that particular exam.
2. The student is repeating the radiograph.
3. The student is in the operating room or performing portable procedures.

## **Indirect Supervision**

Indirect supervision exists when a staff technologist is in the general vicinity of the room where a radiographic/fluoroscopic exam is being performed. Students may perform examinations under indirect supervision **only** after successfully completing clinical competency testing on that particular exam.

## **Repeat Radiographs**

All images performed by students of radiographic exams will be checked and evaluated by a Registered Radiographer. The Registered Radiographer will evaluate the student's finished images as satisfactory or unsatisfactory. The radiographer will discuss the reason causing the unsatisfactory radiograph and the corrective measures that will be taken to obtain good image quality.

***Repeats of unsatisfactory images will only be performed in the presence of a Registered Radiographer to assure the corrective measures are performed accurately. (Direct supervision)***

## **Student Performed Images**

A registered technologist **must** review and approve **ALL** student performed images before sending to PACS. Failure to follow this policy will result in disciplinary action.

## **Student Labs**

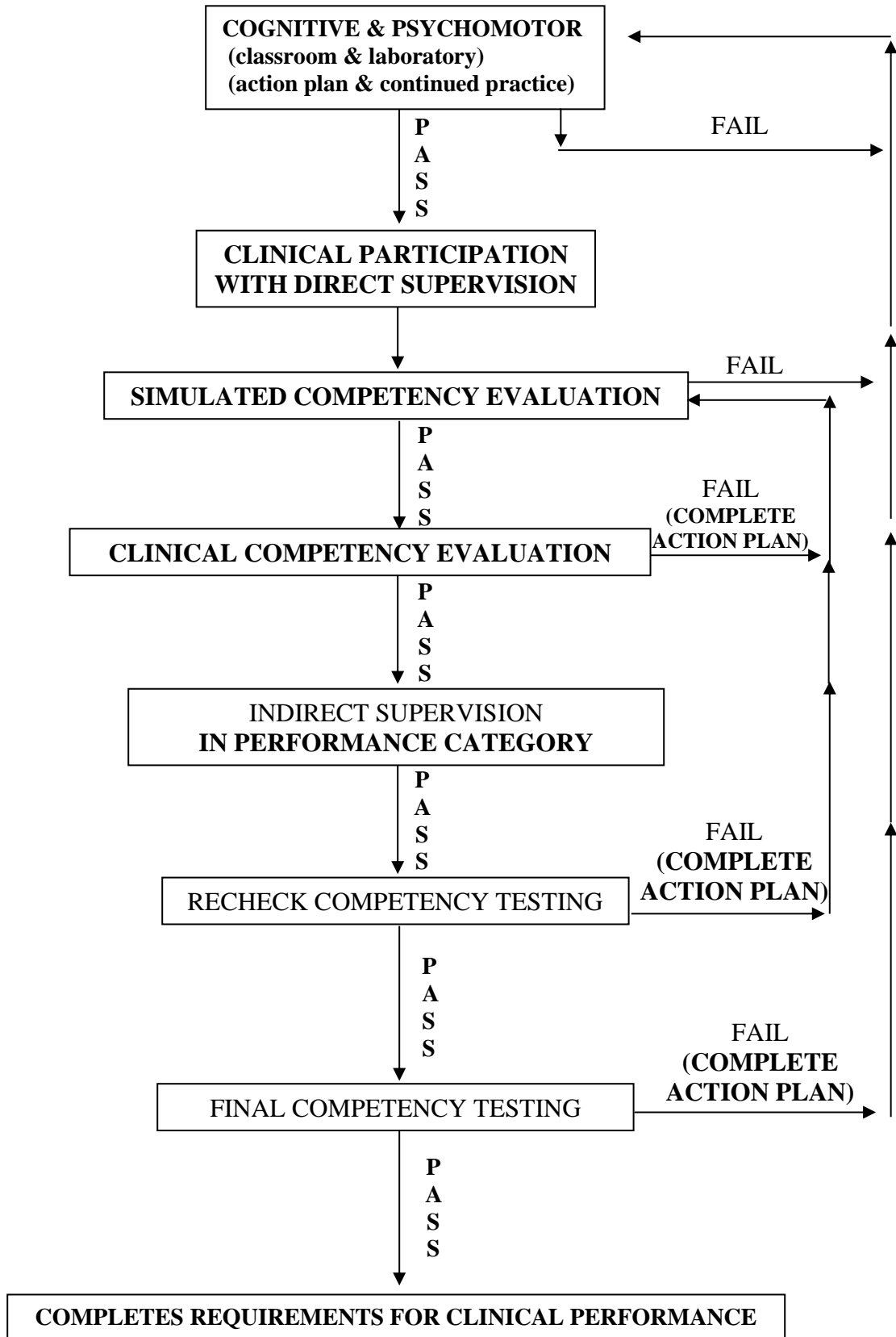
Labs are associated with each Procedures course and are correlated with the didactic material covered in each course. Labs are held in a diagnostic x-ray room and are part of the didactic schedule. On some occasions, the lab may need to be delayed due to patient flow, but will be completed on the same day as it was originally scheduled.

## **Clinical Practicum Schedules**

Students are scheduled in a variety of clinical rotations and shifts throughout the internship to include diagnostic radiology, surgical, orthopedic, computed tomography, mammography, magnetic resonance imaging, and interventional radiology to meet program and ARRT requirements.

Students may have an opportunity to submit an application to be scheduled in a specific modality during their final term of the internship. Eligible students must meet specific criteria to be considered which includes completion of all program competency exams and clinical assignments. Students interested in gaining more clinical experience in a particular rotation that the program currently offers are required to submit an "Clinical Assignment Application". This application can be accessed via Documents on Trajecsys. Program faculty will evaluate students' application and determine appropriate clinical rotation placement.

**CLINICAL COMPETENCY PROGRAM FLOW CHART**



# **SIMULATED COMPETENCY TESTING**

## **EXPLANATION**

Simulated competency tests are a method of verification of accuracy in positioning skills routinely performed during radiologic exams for all parts of the human anatomy. These tests are performed by students on a non-patient model in a diagnostic room. The method of verification is the simulated competency form. This form can be found on the online student documentation program, Trajecsys Report System.

These exams are performed just like any department routine exam. The exposure **WILL NOT** be taken. Simulations will be scheduled as assignments during each clinical course.

The student will be given a Master Simulation Completion Record which has a complete list of all simulations required. Each semester, simulation assignments will be made. The student is expected to acquire the number of simulations required each semester. It is the student's responsibility to ensure that all simulations have been passed and completed

## **INSTRUCTIONS**

Prior to a student attempting a simulated competency test, the following must be met:

1. Passed the didactic portion of the procedure.
2. Received laboratory instruction and practiced the procedure.
3. Generate the simulated competency form from Trajecsys Report System when the supervising technologist feels the student has passed the procedure.
4. This must be passed prior to a student advancing in the clinical competency program.

If the above are met, the supervising technologist will complete the competency test form following the grading guidelines for competency examinations.

A student who makes any positioning errors that would result in a repeat exposure being taken to provide diagnostic images will result in an automatic failure. Improperly marking the images or failure to shield the patient will result in automatic failure. The supervising technologist's discretion will be the deciding factor. These errors will be discussed with the student at the time of the attempted simulation. Further practicing will be required before attempting an additional simulation on a **future date**.

## **GRADING GUIDELINES FOR SIMULATED COMPETENCY EXAMS**

The evaluator will rate the student's competency based on the following scale:

3 = Acceptable, no correction needed

2 = Acceptable, minor correction needed

1 = Unacceptable, had to be repeated or corrected to complete study

# **CLINICAL COMPETENCY TESTING**

## **EXPLANATION**

Check-off competency tests are a method of verification of accuracy in positioning skills routinely performed during radiologic exams for all parts of the human anatomy. These tests are performed on patients in the radiology department. The method of verification is the competency form. This form can be found on the online student documentation program, Trajecsys Report System.



## **INSTRUCTIONS**

Prior to a student attempting a check-off competency test, the following conditions must be met:

1. Passed the didactic portion of the procedure.
2. Received laboratory instruction and practiced the procedure.
3. Passed the simulated examination.
4. Have observed and progressively participated in performing the procedure during their clinical rotations.
5. This must be passed prior to a student advancing in the clinical competency program.

If all of the above is met, the student may perform the procedure on the actual patient. The supervising technologist will monitor the entire procedure and complete the competency test form through Trajecsys Report System. The supervising technologist will follow the grading guidelines for competency examinations. **The student will record the grade on their Clinical Master Competency Record.**

**A student who needs to repeat any images due to his/her error will result in an automatic failure. Any time that the supervising technologist feels that the positioning or technical factors are incorrect and would result in a repeat image, the procedure should be stopped and immediately corrected by the technologist prior to an exposure being made. This will result in a failure of the check off competency exam. Radiographs that are improperly marked or failure to shield will also result in an automatic failure.**

A student must obtain an 80% or higher to achieve a passing score on a check off competency form. A student failing a check-off competency would need to review the procedure and complete an action plan via Trajecsys Report System before attempting a repeat of the check-off competency on a **FUTURE** date.

## **GRADING GUIDELINES FOR COMPETENCY CHECK OFF EXAMS**

The evaluator will rate the student's competency based on the following scale:

3 = Acceptable, no correction needed

2 = Acceptable, minor correction needed

1 = Unacceptable, had to be repeated or corrected to complete study

## **RECHECK COMPETENCY EVALUATIONS**

### **EXPLANATION**

Recheck competency tests are a method of verification of continued accuracy in positioning skills routinely performed during radiologic exams for all parts of the human anatomy. These tests include the regular Rechecks that are performed on patients in the radiology department and the Random Rechecks which are performed on a non-patient model in a diagnostic room by the clinical coordinator or clinical instructor. The method of verification is the Recheck competency form. This form can be found on the online student documentation program, Trajecsys Report System.

Recheck competency tests will be scheduled as assignments during the clinical courses.

Prior to a student attempting these tests, the following conditions must be met:

1. Completed all the school requirements for a competency in that particular category.
2. This must be passed prior to a student advancing in the clinical competency program.

If all of the above is met, the student may perform the procedure on the actual patient. The supervising technologist will monitor the entire procedure and complete the recheck competency testing form. The supervising technologist will follow the grading guidelines for competency examinations. The student will record the grade for the recheck competency on the student's clinical syllabus.

**A student who needs to repeat any images due to his/her error will result in an automatic failure. Any time that the supervising technologist feels that the positioning or technical factors are incorrect and would result in a repeat image, the procedure should be stopped and immediately corrected by the technologist prior to an exposure being made. This will result in a failure of the recheck competency exam. Radiographs that are improperly marked or failure to shield will also result in an automatic failure.**

A student must obtain a 90% or higher to achieve a passing score on a random recheck competency form. A student failing any type of recheck competency would need to review the procedure and complete an action plan via Trajecsys Report System before attempting a repeat of the random recheck competency.

### **GRADING GUIDELINES FOR RECHECK COMPETENCY EXAMS**

The evaluator will rate the student's competency based on the following scale:

- 3 = Acceptable, no correction needed
- 2 = Acceptable, minor correction needed
- 1 = Unacceptable, had to be repeated or corrected to complete study

## **FINAL COMPETENCY TESTS**

### **EXPLANATION**

Final competency tests are a method of verification of continued accuracy and competence in positioning skills routinely performed during radiologic exams for all parts of the human anatomy. These tests are performed in the radiology department. The method of verification is the competency form. This form can be found on the online student documentation program, Trajecsys Report System.

Prior to a student attempting a final competency in a particular category, the following conditions must be met:

1. Completed all the mandatory competency exams in that particular category.
2. Be enrolled in Clinical 228

If all of the above is met, the student may perform the procedure on the actual patient. The supervising technologist will monitor the entire procedure and complete the recheck competency test form. The supervising technologist will follow the grading guidelines for final competency examinations.

The student will record the grade for the final competency on the student's clinical syllabus.

**A student who needs to repeat any images due to his/her error will result in an automatic failure. Any time that the supervising technologist feels that the positioning or technical factors are incorrect and would result in a repeat image, the procedure should be stopped and immediately corrected by the supervising technologist prior to an exposure being made. This will result in a failure of the final competency exam. Radiographs that are improperly marked or failure to shield will also result in an automatic failure.**

A student failing a final competency would need to review the procedure with the clinical coordinator and complete an assignment on that particular area. They would also need to complete an additional final competency on that same particular exam.

53

A student must obtain a 90% or higher to achieve a passing score on a recheck competency form for their final competency.

### **GRADING GUIDELINES FOR FINAL COMPETENCY EXAMS**

The evaluator will rate the student's competency based on the following scale:

3 = Acceptable, no correction needed

2 = Acceptable, minor correction needed

1 = Unacceptable, had to be repeated or corrected to complete study

## **COMPETENCIES REQUIRED**

The student will be given a Master Competency Completion Record which has a complete list of all exams required. Each semester, competency assignments will be made. The assignments will emphasize the current procedure's units covered in the classroom. The student is expected to acquire the number of competencies required each semester.

It is the student's responsibility to ensure that all competency and elective requirements have been passed and completed. (Reference Master Simulation and Master Competency Forms)

### **TERM I (6 Weeks) RAD 118 Clinical Practicum I**

Competency: Chest Routine

Simulations: Routine and Non-routine Chests  
Abdomen, supine, upright, & decubitus  
Upper Extremity  
Lower Extremity

### **TERM II (7 Weeks) RAD 128 Clinical Practicum II**

Competency: Non-Routine Chest  
Abdomen, supine and upright  
Upper extremities- minimum 5  
Lower extremities—minimum 5  
2 Age Specific competencies

Simulations: Pelvis, routine & cross table hip, femur  
Spine

**TERM III (8 Weeks) RAD 138, CLINICAL PRACTICUM III**

Competency: Remaining Upper extremity comps not previously completed  
Remaining Lower extremity comps not previously completed  
Bony Thorax (ribs)  
Spine(Mandatory)  
Headwork(minimum 1)  
3 Age Specific competencies

Simulations: Bony Thorax  
Headwork  
Fluoroscopy Exams

**TERM IV (10 Weeks) or TERM V (10 Weeks)**

**RAD 218, CLINICAL PRACTICUM IV or RAD 228, CLINICAL PRACTICUM**

Trauma radiography	Geriatrics
GI tract	Advanced Procedures
Urological	Surgical Studies
Mobile Exams	Orthopedic
Pediatric	CT
	Final competencies-5 total

4 Age Specific Competencies (complete Checklist)(must complete 2 each term)

*Elective studies (minimum of 15)*

Simulation Lab—Venipuncture competency

**Simulations:**

Please refer to the Master Simulation Completion for the list of simulations due each term.

**Competencies:**

Please refer to the Master Competency Completion Record for the list of competencies due each term.

## **RECHECK COMPETENCIES REQUIRED**

The following recheck competencies are required as outlined in each clinical syllabus:

**RAD 118, CLINICAL PRACTICUM I**

Recheck competency: None required

**RAD 128, CLINICAL PRACTICUM II**

Recheck competency: Chest Routine

**RAD 138, CLINICAL PRACTICUM III**

Recheck competency: Upper limb  
(1 from each) Lower Limb  
Abdomen Upright & Supine

## RAD 218, CLINICAL PRACTICUM IV

Recheck Competency: Spine

## RAD 228, CLINICAL PRACTICUM V

Recheck Competency: Randomized from any of the categories (2) with CC.

# FINAL COMPETENCIES REQUIRED:

To ensure students maintain proficiency final competency exams are a program requirement. Students may perform these competency level exams in the fifth term only after successful completion of initial and recheck category competency. A minimum of 5 competency exams must be completed; one from each category. Final competency exams are **required to be completed prior to the last clinical day** from the following competency categories:

*Thorax- One routine OR one non-routine*

*Abdomen – Supine & upright*

*Extremities - One upper OR one lower*

*Spine OR Hip & Pelvis*

*Cranium - One*

- Students are only allowed **one** simulated final competency.
- Students must also demonstrate competency in general patient care. Students are required to complete the Age-Specific Competency Checklist by **Term V**.
- CPR must be completed prior to commencement of the clinical component of the program.
- During RAD 110, patient transfer, care of sterile and aseptic technique, vital signs (BP, pulse, respiration, temperature) and O<sub>2</sub> administration will be demonstrated to students in the skills lab. In addition, care of patient medical equipment will be covered. Students will demonstrate these competency skills as part of their assigned objectives and clinical assignments.
- During RAD 228, students will again demonstrate competency in vital signs assessment. Students must also complete two successful venipunctures prior to graduation.

## STUDENT MARKERS

All students are provided with one set of radiographic identification markers at the beginning of the program. Each student is required to keep these markers on their person. Failure to have the markers in your possession will result in a loss of professionalism points. If lost, they must be replaced immediately by the Program Director, Clinical Coordinator or Diagnostic Imaging Supervisor. The student will be responsible for any replacement marker costs.

**Additionally, students will be issued an equipment operation access badge (Canon). You are responsible for these items, and they must be returned prior to graduation.**

# GRADING CLINICAL PRACTICUM

At the beginning of each clinical practicum, the students will be given a course syllabus. Each syllabus will outline the assignments for the course. An assignment completion record will be given to each student. The student will record scores on the assignment completion record.

The following is a description of the methods used to determine clinical grades:

I. Method for Evaluating Clinical Education

A. The Clinical Practicum grade will be based on four parts:

1. Clinical competency tests (affective, psychomotor and cognitive domains)	25%
2. Performance appraisal (affective domain)	30%
3. Professionalism (affective domain)	30%
4. Quizzes, written assignments, and lab assignments (affective, psychomotor and cognitive domains)	<u>15%</u> 100%

B. Grade of "F" in any one of the above five categories will lead to clinical probation status for the student for the rest of the program. (While on probation an "F" grade in any of the categories will be cause for disciplinary action).

C. A Clinical Practicum grade will be determined for each student at the end of each term. (Total of 5 clinical practicum grades for the program.) These grades will be recorded on the student's permanent grade transcript.

D. The grading scale for the clinical practicum grade is as follows:

96	-	100	=	A
95	-		=	A-
94	-		=	B+
91	-	93	=	B
90	-		=	B-
89	-		=	C+
85	-	88	=	C
Below 85				F

II. Determining the grade for CLINICAL COMPETENCY

A. Check-off, recheck and final competency examinations are graded on performance. Scores are determined by the student's performance of each specific task according to the following scale:

3= Acceptable, no correction needed

2= Acceptable, minor correction needed

1= Unacceptable, had to be repeated or corrected to complete study

- Percentage is determined by points scored divided by the number of points possible.
- Any student that receives a grade less than 80% would need to repeat the competency.
- The grade given for any failed competency will be 60%.
- The grade from the second attempt will be averaged with the first attempt to determine the grade for the competency.

**A student who needs to repeat any images due to his/her error will result in an automatic failure. Any time that the supervising technologist feels that the positioning or technical factors are incorrect and would result in a repeat image, the procedure should be stopped and immediately corrected by the supervising technologist prior to an exposure being made. This will result in a failure of the final competency exam. Radiographs that are improperly marked or failure to shield will also result in an automatic failure.**

- B. The Clinical Competency score is weighted as 25% of the clinical grade.
  - C. All incomplete exams will receive a score of zero (0).
  - D. A student will not graduate until 100% of the required program competencies are completed.
- III. Determining grade for evaluation of PERFORMANCE APPRAISAL
- A. The student will select a staff technologist to complete the *Clinical Evaluation & Performance Appraisal* at the end of each clinical rotation. Additionally, the student will complete:
    - a. Clinical Preceptor Evaluations
    - b. Clinical Education Evaluation (Site)
    - c. Confirmation Email to Staff with a cc (duplicate) to the Clinical Coordinator
  - B. Students must submit all of the completed clinical rotation evaluation forms within one (1) week of completion of the rotation. Failure to do so will result in five (5) points deducted from the average score.
  - C. The Performance Appraisal score is weighted as 30% of the clinical grade.
- IV. Determining the grade for PROFESSIONALISM:
- A. At the beginning of each clinical course, the student will be given 20 points for professionalism. Disregard for clinical regulations (aspects of dress code, unexcused tardiness to clinical, gum chewing, cell phone usage, failure to have clinical documents available/prepared, not changing personnel monitor, not following supervision policy, etc.) or negative evaluation comments will result in the student losing one (1) point for **each** incident. Each will be discussed with the student at the time of occurrence.
  - B. Any student losing the required **Clinical Education Record** will be deducted 5 points from the Professionalism score and must redo the documentation.
  - C. The Professionalism score is weighted as 30% of the clinical grade.
- V. Determining the grade for QUIZZES, WRITTEN and LAB ASSIGNMENTS:
- A. During clinical practicum, the students will be given two (2) written quizzes. Quizzes may not be made up if a student misses because of an absence.
  - B. During each clinical practicum, students will be given written and lab assignments to be completed by the assigned dates. Each late assignment will result in a grade of zero (0), but still must be completed in a designated timeframe.
  - C. **All** objectives must be completed prior to graduation.
  - D. This score is weighted as 15% of the clinical grade.

# EVALUATION OF CLINICAL PERFORMANCE

In an effort to guide the student as well as the clinical evaluators, we have compiled the following list. Listed under each category are points that may be considered when the evaluation is completed. This list should guide the student in establishing good clinical skills and help you to understand how you are being evaluated.

This list will help the staff radiographers categorize student behaviors (both positive and negative) they wish to comment on.

## **Technical Skills Positioning, Technique, and Speed:**

- estimate own abilities
- seek assistance appropriately
- manipulate equipment correctly
- set exposure factors
- properly position patient
- critique radiographs correctly
- increase speed with practice
- maintain skills over time

## **Organization and Adaptability**

- apply knowledge to clinical setting
- transfer knowledge from one area to the next
- anticipate the next step
- strive to organize the various complexity-level exams
- adjust exam for patient variations and conditions
- know and perform correct exam protocol

## **Maintenance of Work Area**

- keep assigned area neat, clean and orderly
- maintain supplies
- perform weekly and daily aseptic cleaning
- clean image receptors as necessary

## **Patient Care**

- exhibit patient, empathy, and compassion in working with patients
- refer to patient using last name
- introduce self to patient
- carefully explain procedure using language the patient can understand to put patient at ease
- provide for patient comfort and safety while waiting and during exam
- maintain patient modesty
- inform the patient of each step of the process
- recognize and meet patient needs
- demonstrate correct hand washing technique
- assist patient to designated area and/or clinic
- handle the patient gently while manipulating a position

## **Communication and Appropriateness of Conversation**

- discuss appropriate topics with and in front of patient using appropriate language
- initiate therapeutic communication
- maintain confidentiality
- give clear directions to move the patient
- allow opportunity for questions
- explain the length of time of procedure

## **Communication & Work Relationships with Staff and Fellow Students**

- interact in a courteous and tactful manner
- show respect for others
- seek constructive methods of handling work relationship dilemmas



- maintain confidentiality of communication as needed
- **talk and ask questions when needed**

#### **Flexibility and Response to Faculty Suggestions**

- listen to suggestions
- respond positively to constructive suggestions
- follow directions
- retain and integrate suggestions/instructions
- **communicate questions or concerns of particular interactions to those involved**

#### **Attitude and Self-confidence**

- show interest and enthusiasm in the profession
- show interest in continuing to learn and improve in didactic and clinical areas
- be positive and teach others when appropriate
- accept responsibility for mistakes and take immediate steps to correct
- accept new challenges
- confront inappropriate behaviors in a tactful, constructive, and therapeutic communication style
- **maintain a positive work environment**
- possess confidence appropriate for ability level

#### **Motivation and Initiative**

- seek and recognize work to be done
- use free time constructively
- show enthusiasm for learning
- assume responsibility for self
- demonstrate self-direction in utilizing opportunities to increase knowledge
- come prepared every day to demonstrate and acquire new competencies

#### **Accountability & Adherence to Hospital and Program Policy & Procedures**

- show economy of supplies
- maintain confidentiality of patient information
- report absences to the program before time specified
- arrive at assigned area, ready to participate at the specified time
- show concern for safety by utilizing standard precautions for each patient as well as proper lifting techniques
- correctly use gonadal shielding when appropriate
- collimate accurately
- stay in assigned area
- follows the direct and indirect supervision policy
- always have a registered radiographer present and in the room when repeating a radiograph

#### **Personal Appearance**

- wear clean and wrinkle free uniforms
- wear clean, leather shoes
- refrain from chewing gum and tobacco
- wear nametags and monitoring badges
- keep hair tied back if long (below shoulders)
- demonstrate personal hygiene
- wear no more jewelry than allowed by program policy

#### **Teamwork**

- promote an atmosphere of teamwork within the department
- accept others' opinions and actions in a non-judgmental way
- take an active role in the delivery of patient care
- motivate team members to work toward common goals
- understand strength and weaknesses of team members and use strengths to build team development
- have a good working relationship with staff and peers



## **1. Introduction**

Candidates applying for certification and registration under the primary eligibility pathway are required to meet the Professional Education Requirements specified in the *ARRT Rules and Regulations*. *ARRT's Radiography Didactic and Clinical Competency Requirements* are one component of the Professional Education Requirements.

The requirements are periodically updated based upon a [practice analysis](#) which is a systematic process to delineate the job responsibilities typically required of radiographers. The result of this process is a [task inventory](#) which is used to develop the clinical competency requirements (see section 4 below) and the content specifications which serve as the foundation for the didactic competency requirements (see section 3 below) and the examination.

## **2. Documentation of Compliance**

Verification of program completion, including Didactic and Clinical Competency Requirements and all degree-related requirements including conferment of the degree, will be completed on the Program Completion Verification Form on the ARRT Educator Website after the student has completed the Application for Certification and Registration.

Candidates who complete their educational program during 2022 or 2023 may use either the 2017 Didactic and Clinical Competency Requirements or the 2022 requirements. Candidates who complete their educational program after December 31, 2023 must use the 2022 requirements.

## **3. Didactic Competency Requirements**

The purpose of the didactic competency requirements is to verify that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice and hone affective and critical thinking skills required to demonstrate professional competence. Candidates must successfully complete coursework addressing the topics listed in the [ARRT Content Specifications](#) for the Radiography Examination. These topics would typically be covered in a nationally-recognized curriculum such as the ASRT Radiography Curriculum. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified in the content specifications and clinical competency documents.

## **4. Clinical Competency Requirements**

The purpose of the clinical competency requirements is to verify that individuals certified by the ARRT have demonstrated competence performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the certification examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.

## 4.1 General Performance Considerations

### 4.1.1 Patient Diversity

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

### 4.1.2 Elements of Competence

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the course of the candidate's formal educational program.

### 4.1.3 Simulated Performance

ARRT defines simulation of a clinical procedure routinely performed on a patient as the candidate completing all possible hands-on tasks of the procedure on a live human being using the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient.

ARRT requires that competencies performed as a simulation must meet the same criteria as competencies demonstrated on patients. For example, the competency must be performed under the direct observation of the program director or program director's designee and be performed independently, consistently, and effectively.

Simulated performance must meet the following criteria:

- Simulation of imaging procedures requires the use of proper radiographic equipment without activating the x-ray beam.
- A total of ten imaging procedures may be simulated. Imaging procedures eligible for simulation are noted within the chart (see section 4.2.2).
- If applicable, the candidate must evaluate related images.
- Some simulations are acceptable for General Patient Care (see section 4.2.1). These do not count toward the ten imaging procedures that can be simulated.

## 4.2 Radiography-Specific Requirements

As part of the education program, candidates must demonstrate competence in the clinical procedures identified below. These clinical procedures are listed in more detail in the following sections:

- Ten mandatory general patient care procedures;
- 36 mandatory imaging procedures;
- 15 elective imaging procedures selected from a list of 34 procedures;
- One of the 15 elective imaging procedures must be selected from the head section; and
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.

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

### 4.2.1 General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

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

\*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

### 4.2.2 Imaging Procedures

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:

- patient identity verification;
- examination order verification;
- patient assessment;
- room preparation;
- patient management;
- equipment operation;
- technique selection;
- patient positioning;
- radiation safety;
- image processing; and
- image evaluation.

### 4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Chest and Thorax</b>					
Chest Routine					
Chest AP (Wheelchair or Stretcher)					
Ribs					
Chest Lateral Decubitus					
Sternum					
Upper Airway (Soft-Tissue Neck)					
Sternoclavicular Joints					
<b>Upper Extremity</b>					
Thumb or Finger					
Hand					
Wrist					
Forearm					
Elbow					
Humerus					
Shoulder					
Clavicle					
Scapula					
AC Joints					
<b>Trauma:</b> Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*					
<b>Trauma:</b> Upper Extremity (Non-Shoulder)*					
<b>Lower Extremity</b>					
Toes					
Foot					
Ankle					
Knee					
Tibia-Fibula					
Femur					
Patella					
Calcaneus					
<b>Trauma:</b> Lower Extremity*					

\*Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.

### 4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Head</b> – Candidates must select at least one elective procedure from this section.					
Skull					
Facial Bones					
Mandible					
Temporomandibular Joints					
Nasal Bones					
Orbits					
Paranasal Sinuses					
<b>Spine and Pelvis</b>					
Cervical Spine					
Thoracic Spine					
Lumbar Spine					
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)					
Pelvis					
Hip					
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)					
Sacrum and/or Coccyx					
Scoliosis Series					
Sacroiliac Joints					
<b>Abdomen</b>					
Abdomen Supine					
Abdomen Upright					
Abdomen Decubitus					
Intravenous Urography					
<b>Mobile Radiographic Studies</b>					
Chest					
Abdomen					
Upper or Lower Extremity					

## 4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Fluoroscopy Studies</b> – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast					
Contrast Enema, Single or Double Contrast					
Small Bowel Series					
Esophagus ( <i>NOT</i> Swallowing Dysfunction Study)					
Cystography/Cystourethrography					
ERCP					
Myelography					
Arthrography					
Hysterosalpingography					
<b>Mobile C-Arm Studies</b>					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)					
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)					
<b>Pediatric Patient</b> (Age 6 or Younger)					
Chest Routine					
Upper or Lower Extremity					
Abdomen					
Mobile Study					
<b>Geriatric Patient</b> (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine					
Upper or Lower Extremity					
Hip or Spine					
<b>Subtotal</b>					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		

BOARD APPROVED: **JANUARY 2021** DIDACTIC AND CLINICAL COMPETENCY REQUIREMENTS EFFECTIVE: **JANUARY 2022**

# APPENDICES





THE AMERICAN REGISTRY  
OF RADIOLOGIC  
TECHNOLOGISTS®

# APPENDIX A

## ARRT STANDARDS OF ETHICS

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### PREAMBLE

The *Standards of Ethics* of The American Registry of Radiologic Technologists (ARRT) shall apply solely to persons holding certificates from ARRT that are either currently certified and registered by ARRT or that were formerly certified and registered by ARRT (collectively, "Certificate Holders"), and to persons applying for certification and registration by ARRT in order to become Certificate Holders ("Candidates"). Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular-interventional radiography, breast sonography, and radiologist assistant. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

### STATEMENT OF PURPOSE

The purpose of the ethics requirements is to identify individuals who have internalized a set of professional values that cause one to act in the best interests of patients. This internalization of professional values and the resulting behavior is one element of ARRT's definition of what it means to be qualified. Exhibiting certain behaviors as documented in the *Standards of Ethics* is evidence of the possible lack of appropriate professional values.

The *Standards of Ethics* provides proactive guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. The ethics requirements support ARRT's mission of promoting high standards of patient care by removing or restricting the use of the credential by those who exhibit behavior inconsistent with the requirements.

### A. CODE OF ETHICS

The Code of Ethics forms the first part of the *Standards of Ethics*. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. 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 on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.
5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. 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 of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. 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.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.
11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

## **B. RULES OF ETHICS**

The Rules of Ethics form the second part of the *Standards of Ethics*. They are mandatory standards of minimally acceptable professional conduct for all Certificate Holders and Candidates. Certification and registration are methods of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates and registrations issued by ARRT, it is essential that Certificate Holders and Candidates act consistently with these Rules of Ethics. These Rules of Ethics are intended to promote the protection, safety, and comfort of patients.

The Rules of Ethics are enforceable. R.T.s are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence or during their annual renewal of certification and registration, whichever comes first. Applicants for certification and registration are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence.

Certificate Holders and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

*The titles and headings are for convenience only, and shall not be used to limit, alter or interpret the language of any Rule.*

### **Fraud or Deceptive Practices**

#### **Fraud Involving Certification and Registration**

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain or reinstate certification and registration as issued by ARRT; employment in radiologic technology; or a state permit, license, or registration certificate to practice radiologic technology. This includes altering in any respect any document issued by ARRT or any state or federal agency, or by indicating in writing certification and registration with ARRT when that is not the case.

#### **Fraudulent Communication Regarding Credentials**

2. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding any individual's education, training, credentials, experience, or qualifications, or the status of any individual's state permit, license, or registration certificate in radiologic technology or certificate of registration with ARRT.

#### **Fraudulent Billing Practices**

3. Knowingly engaging or assisting any person to engage in, or otherwise participating in, abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws.

### **Subversion**

#### **Examination / CQR Subversion**

4. Subverting or attempting to subvert ARRT's examination process, and/or the Structured Self-Assessments (SSA) that are part of the *Continuing Qualifications Requirements* (CQR) process. Conduct that subverts or attempts to subvert ARRT's examination and/or CQR SSA process includes, but is not limited to:
  - (i) disclosing examination and/or CQR SSA information using language that is substantially similar to that used in questions and/or answers from ARRT examinations and/or CQR SSA when such information is gained as a direct result of having been an examinee or a participant in a CQR SSA or having communicated with an examinee or a CQR participant; this includes, but is not limited to, disclosures to students in educational programs, graduates of educational programs, educators, anyone else involved in the preparation of Candidates to sit for the examinations, or CQR participants; and/or
  - (ii) soliciting and/or receiving examination and/or CQR SSA information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations or CQR SSA from an examinee, or a CQR participant, whether requested or not; and/or

- (iii) copying, publishing, reconstructing (whether by memory or otherwise), reproducing or transmitting any portion of examination and/or CQR SSA materials by any means, verbal or written, electronic or mechanical, without the prior express written permission of ARRT or using professional, paid or repeat examination takers and/or CQR SSA participants, or any other individual for the purpose of reconstructing any portion of examination and/or CQR SSA materials; and/or
- (iv) using or purporting to use any portion of examination and/or CQR SSA materials that were obtained improperly or without authorization for the purpose of instructing or preparing any Candidate for examination or participant for CQR SSA; and/or
- (v) selling or offering to sell, buying or offering to buy, or distributing or offering to distribute any portion of examination and/or CQR SSA materials without authorization; and/or
- (vi) removing or attempting to remove examination and/or CQR SSA materials from an examination or SSA room; and/or
- (vii) having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination or CQR SSA of ARRT; and/or
- (viii) disclosing what purports to be, or what you claim to be, or under all circumstances is likely to be understood by the recipient as, any portion of or "inside" information concerning any portion of a future, current, or previously administered examination or CQR SSA of ARRT; and/or
- (ix) communicating with another individual during administration of the examination or CQR SSA for the purpose of giving or receiving help in answering examination or CQR SSA questions, copying another Candidate's or CQR participant's answers, permitting another Candidate or a CQR participant to copy one's answers, or possessing or otherwise having access to unauthorized materials including, but not limited to, notes, books, mobile devices, computers and/or tablets during administration of the examination or CQR SSA; and/or
- (x) impersonating a Candidate, or a CQR participant, or permitting an impersonator to take or attempt to take the examination or CQR SSA on one's own behalf; and/or
- (xi) using any other means that potentially alters the results of the examination or CQR SSA such that the results may not accurately represent the professional knowledge base of a Candidate, or a CQR participant.

#### **Education Subversion**

5. Subverting, attempting to subvert, or aiding others to subvert or attempt to subvert ARRT's education requirements, including but not limited to, *Continuing Education Requirements (CE)*, clinical experience and competency requirements, structured education activities, and/or ARRT's *Continuing Qualifications Requirements (CQR)*. Conduct that subverts or attempts to subvert ARRT's education or CQR Requirements includes, but is not limited to:

- (i) providing false, inaccurate, altered, or deceptive information related to CE, clinical experience or competency requirements, structured education or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or
- (ii) assisting others to provide false, inaccurate, altered, or deceptive information related to education requirements or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or
- (iii) conduct that results or could result in a false or deceptive report of CE, clinical experience or competency requirements, structured education activities or CQR completion; and/or
- (iv) conduct that in any way compromises the integrity of ARRT's education requirements, including, but not limited to, CE, clinical experience and competency requirements, structured education activities, or CQR Requirements such as sharing answers to the post-tests or self-learning activities, providing or using false certificates of participation, or verifying credits that were not earned or clinical procedures that were not performed.

#### **Failure to Cooperate with ARRT Investigation**

6. Subverting or attempting to subvert ARRT's certification and registration processes by:

- (i) making a false statement or knowingly providing false information to ARRT; or
- (ii) failing to cooperate with any investigation by ARRT.

#### **Unprofessional Conduct**

##### **Failure to Conform to Minimal Acceptable Standards**

7. Engaging in unprofessional conduct, including, but not limited to:

- (i) a departure from or failure to conform to applicable federal, state, or local governmental rules regarding radiologic technology practice or scope of practice; or, if no such rule exists, to the minimal standards of acceptable and prevailing radiologic technology practice;
- (ii) any radiologic technology practice that may create unnecessary danger to a patient's life, health, or safety. Actual injury to a patient or the public need not be established under this clause.

#### **Sexual Misconduct**

8. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to any unwanted sexual behavior, verbal or otherwise.

### **Unethical Conduct**

9. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm the public; or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established under this clause.

### **Scope of Practice**

#### **Technical Incompetence**

10. Performing procedures which the individual is not competent to perform through appropriate training and/or education or experience unless assisted or personally supervised by someone who is competent (through training and/or education or experience).

#### **Improper Supervision in Practice**

11. Knowingly assisting, advising, or allowing a person without a current and appropriate state permit, license, registration, or an ARRT registered certificate to engage in the practice of radiologic technology, in a jurisdiction that mandates such requirements.

#### **Improper Delegation or Acceptance of a Function**

12. Delegating or accepting the delegation of a radiologic technology function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not be established under this clause.

### **Fitness to Practice**

#### **Actual or Potential Inability to Practice**

13. Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material; or as a result of any mental or physical condition.

#### **Inability to Practice by Judicial Determination**

14. Adjudication as mentally incompetent, mentally ill, chemically dependent, or dangerous to the public, by a court of competent jurisdiction.

### **Improper Management of Patient Records**

#### **False or Deceptive Entries**

15. Improper management of patient records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing, or permitting anyone to make false, deceptive, or misleading entry in any patient record.

#### **Failure to Protect Confidential Patient Information**

9. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law, or viewing, using, releasing, or otherwise failing to adequately protect the security or privacy of confidential patient information.

#### **Knowingly Providing False Information**

17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.

### **Violation of State or Federal Law or Regulatory Rule**

#### **Narcotics or Controlled Substances Law**

18. Violating a state or federal narcotics or controlled substance law, even if not charged or convicted of a violation of law.

#### **Regulatory Authority or Certification Board Rule**

19. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual's professional license, permit, registration or certification being denied, revoked, suspended, placed on probation or a consent agreement or order, voluntarily surrendered, subjected to any conditions, or failing to report to ARRT any of the violations or actions identified in this Rule.

### **Criminal Proceedings**

20. Convictions, criminal proceedings, or military courts-martial as described below:

- (i) conviction of a crime, including, but not limited to, a felony, a gross misdemeanor, or a misdemeanor. All alcohol and/or drug related violations must be reported; and/or
- (ii) criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld, deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters an Alford plea, a plea of guilty or nolo contendere (no contest); or where the individual enters into a pre-trial diversion activity; and/or
- (iii) military courts-martial related to any offense identified in these Rules of Ethics; and/or (iv) required sex offender registration.

### **Duty to Report**

#### **Failure to Report Violation**

21. Knowing of a violation or a probable violation of any Rule of Ethics by any Certificate Holder or Candidate and failing to promptly report in writing the same to ARRT.

## **Failure to Report Error**

22. Failing to immediately report to the Certificate Holder's or Candidate's supervisor information concerning an error made in connection with imaging, treating, or caring for a patient. For purposes of this rule, errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper (commission). Errors also include behavior that is negligent or should have occurred in connection with a patient's care, but did not (omission). The duty to report under this rule exists whether or not the patient suffered any injury.

## **C. ADMINISTRATIVE PROCEDURES**

These Administrative Procedures provide for the structure and operation of the Ethics Committee; they detail procedures followed by the Ethics Committee and by the Board of Trustees of ARRT in handling challenges raised under the Rules of Ethics, and in handling matters relating to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *Rules and Regulations* of ARRT, in which case, there is no right to a hearing) or the denial of renewal or reinstatement of certification and registration. All Certificate Holders and Candidates are required to comply with these Administrative Procedures. All Certificate Holders and Candidates are expected to conduct themselves in a professional and respectful manner in their interactions with the ARRT Board of Trustees, Ethics Committee and/or staff. Failure to cooperate with the Ethics Committee or the Board of Trustees in a proceeding involving a challenge or ethics review may be considered by the Ethics Committee and by the Board of Trustees according to the same procedures and with the same sanctions as failure to observe the Rules of Ethics.

### **1. Ethics Committee**

#### **(a) Membership and Responsibilities of the Ethics Committee**

The President, with the approval of the Board of Trustees, appoints at least three Trustees to serve as members of the Ethics Committee, each such person to serve on the Committee until removed and replaced by the President, with the approval of the Board of Trustees, at any time, with or without cause. The President, with the approval of the Board of Trustees, will also appoint a fourth, alternate member to the Committee. The alternate member will participate on the Committee in the event that one of the members of the Ethics Committee is unable to participate. The Ethics Committee is responsible for: (1) investigating each alleged breach of the Rules of Ethics and determining whether a Certificate Holder or Candidate has failed to observe the Rules of Ethics and determining an appropriate sanction; and (2) periodically assessing the Code of Ethics, Rules of Ethics, and Administrative Procedures and recommending any amendments to the Board of Trustees.

#### **(b) The Chair of the Ethics Committee**

The President, with the approval of the Board of Trustees, appoints one member of the Ethics Committee as the Committee's Chair to serve for a term of two years as the principal administrative officer responsible for management of the promulgation, interpretation, and enforcement of the *Standards of Ethics*. The President may remove and replace the Chair of the Committee, with the approval of the Board of Trustees, at any time, with or without cause. The Chair presides at and participates in meetings of the Ethics Committee and is responsible directly and exclusively to the Board of Trustees, using staff, legal counsel, and other resources necessary to fulfill the responsibilities of administering the *Standards of Ethics*.

#### **(c) Preliminary Screening of Potential Violations of the Rules of Ethics**

The Chair of the Ethics Committee shall review each alleged violation of the Rules of Ethics that is brought to the attention of the Ethics Committee. If, in the sole discretion of the Chair: (1) there is insufficient information upon which to base a charge of a violation of the Rules of Ethics; or (2) the allegations against the Certificate Holder or Candidate are patently frivolous or inconsequential; or (3) the allegations, if true, would not constitute a violation of the Rules of Ethics, the Chair may summarily dismiss the matter. The Chair may be assisted by staff and/or legal counsel of ARRT. The Chair shall report each such summary dismissal to the Ethics Committee.

At the Chair's direction and upon request, the Chief Executive Officer of ARRT shall have the power to investigate allegations regarding the possible settlement of an alleged violation of the Rules of Ethics. The Chief Executive Officer may be assisted by staff members and/or legal counsel of ARRT. The Chief Executive Officer is not empowered to enter into a binding settlement, but rather may convey and/or recommend proposed settlements to the Ethics Committee. The Ethics Committee may accept the proposed settlement, make a counterproposal to the Certificate Holder or Candidate, or reject the proposed settlement and proceed under these Administrative Procedures.

### **2. Hearings**

Whenever ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *Rules and Regulations* of ARRT, in which case there is no right to a hearing) or of an application for renewal or reinstatement of certification and registration, or in connection with the revocation or suspension of certification and registration, or the censure of a Certificate Holder or Candidate for an alleged violation of the Rules of Ethics, it shall give written notice thereof to such person, specifying the reasons for such proposed action. A Certificate Holder or Candidate to whom such notice is given shall have 30 days from the date the notice of such proposed action is mailed to make a written request for a hearing. The written request for a hearing must be accompanied by a nonrefundable hearing fee in the amount of \$100. In rare cases, the hearing fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee.

Failure to make a written request for a hearing and to remit the hearing fee (unless the hearing fee is waived in writing by ARRT) within such period or submission of a properly executed Hearing Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or the Board of Trustees pursuant to such notice. A Certificate Holder or Candidate who requests a hearing in the manner prescribed above shall advise the Ethics Committee of the intention to appear at the hearing. A Certificate Holder or Candidate who requests a hearing may elect to appear in person, via teleconference, or by a written submission which shall be verified or acknowledged under oath.

A Certificate Holder or Candidate may waive the 30 day timeframe to request a hearing. To request a waiver of the 30 day timeframe, the Certificate Holder or Candidate must complete a Hearing Waiver form that is available on the ARRT website at [www.arrt.org](http://www.arrt.org). The Hearing Waiver form must be signed by the Certificate Holder or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Hearing Waiver form and may be assisted by staff members and/or legal counsel of ARRT.

Failure to appear at the hearing in person or via teleconference, or to supply a written submission in response to the charges shall be deemed a default on the merits and shall be deemed consent to whatever action or disciplinary measures that the Ethics Committee determines to take. Hearings shall be held at such date, time, and place as shall be designated by the Ethics Committee or the Chief Executive Officer. The Certificate Holder or Candidate shall be given at least 30 days notice of the date, time, and place of the hearing. The hearing is conducted by the Ethics Committee with any three or more of its members participating, other than any member of the Ethics Committee whose professional activities are conducted at a location in the approximate area of the Certificate Holder or Candidate in question. In the event of such disqualification, the President may appoint a Trustee to serve on the Ethics Committee for the sole purpose of participating in the hearing and rendering a decision. At the hearing, ARRT shall present the charges against the Certificate Holder or Candidate in question, and the facts and evidence of ARRT in respect to the basis or bases for the proposed action or disciplinary measure. The Ethics Committee may be assisted by legal counsel. The Certificate Holder or Candidate in question, by legal counsel or other representative (at the sole expense of the Certificate Holder or Candidate in question), shall have the right to call witnesses, present testimony, and be heard in the Certificate Holder's or Candidate's own defense; to hear the testimony of and to cross-examine any witnesses appearing at such hearing; and to present such other evidence or testimony as the Ethics Committee shall deem appropriate to do substantial justice. Any information may be considered that is relevant or potentially relevant. The Ethics Committee shall not be bound by any state or federal rules of evidence. The Certificate Holder or Candidate in question shall have the right to submit a written statement at the close of the hearing. A transcript or an audio recording of the hearing testimony is made for in person and teleconference hearings only. Ethics Committee deliberations are not recorded. In the case where ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *Rules and Regulations* of ARRT) or the denial of renewal or reinstatement of certification and registration, the Ethics Committee shall assess the evidence presented at the hearing and make its decision accordingly, and shall prepare written findings of fact and its determination as to whether grounds exist for the denial of an application for certification and registration or renewal or reinstatement of certification and registration, and shall promptly transmit the same to the Board of Trustees and to the Certificate Holder or Candidate in question. In the case of alleged violations of the Rules of Ethics by a Certificate Holder or Candidate, the Ethics Committee shall assess the evidence presented at the hearing and make its decision accordingly, and shall prepare written findings of fact and its determination as to whether there has been a violation of the Rules of Ethics and, if so, the appropriate sanction, and shall promptly transmit the same to the Board of Trustees and to the Certificate Holder or Candidate in question. Potential sanctions include denial of renewal or reinstatement of certification and registration with ARRT, revocation or suspension of certification and registration with ARRT, or the public or private reprimand of a Certificate Holder or Candidate. Unless a timely appeal from any findings of fact and determination by the Ethics Committee is taken to the Board of Trustees in accordance with Section 3 below (Appeals), the Ethics Committee's findings of fact and determination in any matter (including the specified sanction) shall be final and binding upon the Certificate Holder or Candidate in question.

### **3. Appeals**

Except as otherwise noted in these Administrative Procedures, the Certificate Holder or Candidate may appeal any decision of the Ethics Committee to the Board of Trustees by submitting a written request for an appeal within 30 days after the decision of the Ethics Committee is mailed. The written request for an appeal must be accompanied by a nonrefundable appeal fee in the amount of \$250. In rare cases, the appeal fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee.

Failure to make a written request for an appeal and to remit the appeal fee (unless the appeal fee is waived in writing by ARRT) within such period or submission of a properly executed Appeal Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or Board of Trustees pursuant to such notice. A Certificate Holder or Candidate may waive the 30 day timeframe to request an appeal. To request a waiver of the 30 day timeframe, the Certificate Holder or Candidate must complete an Appeal Waiver form that is available on the ARRT website at [www.arrt.org](http://www.arrt.org). The Appeal Waiver form must be signed by the Certificate Holder or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Appeal Waiver form and may be assisted by staff members and/or legal counsel of ARRT.

In the event of an appeal, those Trustees who participated in the hearing of the Ethics Committee shall not participate in the appeal. The remaining members of the Board of Trustees shall consider the decision of the Ethics Committee, the files and records of ARRT applicable to the case at issue, and any written appellate submission of the Certificate Holder or Candidate in question, and shall determine whether to affirm or to modify the decision of the Ethics Committee or to remand the matter to the Ethics Committee for further consideration. In making such determination to affirm or to modify, findings of fact made by the Ethics Committee shall be conclusive if supported by any evidence. The Board of Trustees may grant re-hearings, hear additional evidence, or request that ARRT or the Certificate Holder or Candidate in question provide additional information in such manner, on such issues, and within such time as it may prescribe. All hearings and appeals provided for herein shall be private at all stages. It shall be considered an act of professional misconduct for any Certificate Holder or Candidate to make an unauthorized publication or revelation of the same, except to the Certificate Holder's or Candidate's attorney or other representative, immediate superior, or employer.

#### **4. Adverse Decisions**

##### **(a) Private Reprimands**

A private reprimand is a reprimand that is between the individual and ARRT and is not reported to the public. Private reprimands allow for continued certification and registration.

##### **(b) Public Reprimands**

A public reprimand is a sanction that is published on ARRT's website for a period of one year. Public reprimands allow for continued certification and registration.

##### **(c) Conditional**

Conditional status may be given for continued certification and registration in those cases where there are additional requirements that need to be met before the ethics file can be closed (e.g., court, regulatory authority and/or Ethics Committee conditions).

##### **(d) Suspensions**

Suspension is the temporary removal of an individual's certification and registration in all categories for up to one year.

##### **(e) Summary Suspensions**

Summary suspension is an immediate suspension of an individual's certification and registration in all categories. If an alleged violation of the Rules of Ethics involves the occurrence, with respect to a Certificate Holder, of an event described in the Rules of Ethics, or any other event that the Ethics Committee determines would, if true, potentially pose harm to the health, safety, or well being of any patient or the public, then, notwithstanding anything apparently or expressly to the contrary contained in these Administrative Procedures, the Ethics Committee may, without prior notice to the Certificate Holder and without a prior hearing, summarily suspend the certification and registration of the Certificate Holder pending a final determination under these

Administrative Procedures with respect to whether the alleged violation of the Rules of Ethics in fact occurred. Within five working days after the Ethics Committee summarily suspends the certification and registration of a Certificate Holder in accordance with this provision, the Ethics Committee shall, by certified mail, return receipt requested, give to the Certificate Holder written notice that describes: (1) the summary suspension; (2) the reason or reasons for it; and (3) the right of the Certificate Holder to request a hearing with respect to the summary suspension by written notice to the Ethics Committee, which written notice must be received by the Ethics Committee not later than 15 days after the date of the written notice of summary suspension by the Ethics Committee to the Certificate Holder. If the Certificate Holder requests a hearing in a timely manner with respect to the summary suspension, the hearing shall be held before the Ethics Committee or a panel comprised of no fewer than three members of the Ethics Committee as promptly as practicable, but in any event within 30 days after the Ethics Committee's receipt of the Certificate Holder's request for the hearing, unless both the individual and the Ethics Committee agree to a postponement beyond the 30 day period. The Ethics Committee has the absolute discretion to deny any request for a postponement and to proceed to a hearing with or without the participation of the individual. The applicable provisions of Section 2 (Hearings) of these Administrative Procedures shall govern all hearings with respect to summary suspensions, except that neither a determination of the Ethics Committee, in the absence of a timely request for a hearing by the affected Certificate Holder, nor a determination by the Ethics Committee or a panel, following a timely requested hearing, is appealable to the Board of Trustees.

##### **(f) Ineligible**

An individual may be determined ineligible for certification and registration or ineligible for reinstatement of certification and registration. The time frame may be time limited or permanent.

##### **(g) Revocation**

Revocation removes the individual's certification and registration in all categories. The time frame may be time limited or permanent.

##### **(h) Alternative Dispositions**

An Alternative Disposition ("AD") is a contract between an individual and the ARRT Ethics Committee that allows for continued certification and registration in lieu of revocation, provided the individual performs certain requirements, including, but not limited to, providing documentation, attending counseling and/or submitting to random drug and/or alcohol screening. A Certificate Holder or Candidate who voluntarily enters into an Alternative Disposition Agreement agrees to waive all rights set forth in these Administrative Procedures.

##### **(i) Civil or Criminal Penalties**

Conduct that violates ARRT's Rules of Ethics may also violate applicable state or federal law. In addition to the potential sanctions under the *Standards of Ethics*, ARRT may, without giving prior notice, pursue civil and/or criminal penalties against the Certificate Holder or Candidate.

## 5. Publication of Adverse Decisions

Summary suspensions and final decisions (other than private reprimands) that are adverse to the Certificate Holder or Candidate will be communicated to the appropriate authorities of certification organizations and state licensing agencies and provided in response to written inquiries into an individual's certification and registration status. The ARRT shall also have the right to publish any final adverse decisions and summary suspensions and the reasons therefore. For purposes of this paragraph, a "final decision" means and includes: a determination of the Ethics Committee relating to an adverse decision if the affected Certificate Holder or Candidate does not request a hearing in a timely manner; a non-appealable decision of the Ethics Committee; an appealable decision of the Ethics Committee from which no timely appeal is taken; and, the decision of the Board of Trustees in a case involving an appeal of an appealable decision of the Ethics Committee.

## 6. Procedure to Request Removal of a Sanction

A sanction imposed by ARRT, including a sanction specified in a Settlement Agreement, specifically provides a sanction time frame and it shall be presumed that a sanction may only be reconsidered after the time frame has elapsed. At any point after a sanction first becomes eligible for reconsideration, the individual may submit a written request ("Request") to ARRT asking the Ethics Committee to remove the sanction. The Request must be accompanied by a nonrefundable fee in the amount of \$250. A Request that is not accompanied by the fee will be returned to the individual and will not be considered. In rare cases, the fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee. The individual is not entitled to make a personal appearance before the Ethics Committee in connection with a Request to remove a sanction or to modify a Settlement Agreement.

Although there is no required format, Requests for both sanction removal and Settlement Agreement modification must include compelling reasons justifying the removal of the sanction or modification of the Settlement Agreement. It is recommended that the individual demonstrate at least the following: (1) an understanding of the reasons for the sanction; (2) an understanding of why the action leading to the sanction was felt to warrant the sanction imposed; and (3) detailed information demonstrating that the Certificate Holder's or Candidate's behavior has improved and similar activities will not be repeated. Letters of recommendation from individuals, who are knowledgeable about the person's sanction imposed; and current character and behavior, including efforts at rehabilitation, are advised. If a letter of recommendation is not on original letterhead or is not duly notarized, the Ethics Committee shall have the discretion to ignore that letter of recommendation.

Removal of the sanction is a prerequisite to apply for certification and registration. If, at the sole discretion of the Ethics Committee, the sanction is removed, the individual will be allowed to pursue certification and registration via the policies and procedures in place at that time as stated in Section 6.05 of the *ARRT Rules and Regulations*.

If the Ethics Committee denies a Request for removal of the sanction or modification of a Settlement Agreement, the decision is not subject to a hearing or to an appeal, and the Committee will not reconsider removal of the sanction or modification of the Settlement Agreement for as long as is directed by the Committee.

## 7. Amendments to the *Standards of Ethics*

The ARRT reserves the right to amend the *Standards of Ethics* following the procedures under Article XI, Section 11.02 of the *ARRT Rules and Regulations*.

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GOLD STANDARD  
PATIENT CARE



1255 NORTHLAND DRIVE, ST. PAUL, MN 55120  
651.687.0048 MAIN PHONE | WWW.ARRT.ORG



# **APPENDIX B**

# **SCHOOL FORMS**

**Student Complaint Form**

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Clinical Education Facility \_\_\_\_\_

Date of occurrence \_\_\_\_\_ Time of occurrence \_\_\_\_\_

*DESCRIPTION OF COMPLAINT:*

Names of others who can provide information:

Resolution Seeking:

To be completed by Program Director/Clinical Coordinator (attach written response)

\_\_\_\_\_

*Date complaint received      Date of investigation meeting(s)      Date of meeting with student*

\_\_\_\_\_

*Program Director Signature      Student Signature*

*Complaint Resolved*

**YES      NO**

**ST. CLOUD HOSPITAL /CENTRACARE HEALTH**

**Imaging Services  
Declaration of Pregnancy**

**Name: (Print):** \_\_\_\_\_

**Date of Conception:** \_\_\_\_\_

**Social Security #:** **XXX-XX-**\_\_\_\_\_

By providing this information to the Radiation Safety Officer, in writing, I am declaring myself to be pregnant as of the date shown above. I understand that my exposure will not be allowed to exceed 5.0 mSv (500mrem) during my entire pregnancy, from occupational exposure to radiation. I understand that this limit includes exposure I have already received. If my estimated exposure since the above date of conception has already exceeded 4.5mSv (450mrem) I understand that I will be limited to no more than 0.5mSv (50 mrem) for the remainder of my pregnancy. If I find out that I am not pregnant, or if my pregnancy is terminated, I will inform my immediate supervisor as soon as practical.

\_\_\_\_\_  
Employee signature

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

\_\_\_\_\_  
Department

\_\_\_\_\_  
Immediate Supervisor

---

**Receipt of Declaration of Pregnancy  
(To be completed by Radiation Safety Officer)**

The dose to the embryo/fetus during the entire pregnancy is limited to: 500 mrem

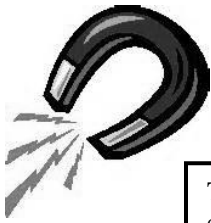
Estimated dose from time of conception to date of declaration: \_\_\_\_\_mrem

Remaining dose to embryo/fetus for the remainder of pregnancy: \_\_\_\_\_mrem

\_\_\_\_\_  
Signature of Radiation Safety officer

\_\_\_\_\_  
Date

Radiation Safety Officer Recommendations:



**ST. CLOUD HOSPITAL  
SCHOOL OF DIAGNOSTIC IMAGING**

**MRI Screening Form for Students**

The MR system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, devices or objects. Therefore, ALL students are required to fill out this form BEFORE beginning their clinical rotations. Be advised, the MR system magnet is ALWAYS on.

(PRINT CLEARLY) \_\_\_\_\_

Last Name                      First Name                      Middle Initial                      Date

---

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

Address                                      City, State                      Zip                                      Phone Number

1. Have you had prior surgery or an operation (arthroscopy, endoscopy, etc) of any kind? No  Yes 
  - a. If yes, please indicate date and type of surgery: Date: \_\_\_/\_\_\_/\_\_\_ Type of surgery \_\_\_\_\_
2. Have you had an injury to the eye involving a metallic object (e.g. metallic slivers, foreign body)? No  Yes 
  - a. If yes, please describe: \_\_\_\_\_
3. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc)? No  Yes 
  - a. If yes, please describe: \_\_\_\_\_



**WARNING:** Certain implants, devices or objects may be hazardous to you in the MR environment or MR system room. Do NOT enter the MR environment or MR system room if you have any question or concern regarding an implant, device or object.

Please indicate if you have any of the following:

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Aneurysm clip(s)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Any type of prosthesis or implant
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Cardiac pacemaker	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Artificial or prosthetic limb
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Implanted cardioverter defibrillator (ICD)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Any metallic fragment or foreign body
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Electronic implant or device	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Welder/Grinder or metal in eye
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Magnetically – activated implant or device	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Shunt (spinal or intraventricular)
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Neuro/bone stimulation system	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Any internal or external metallic object
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Cochlear implant or implanted hearing aid	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	IUD
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Insulin or infusion pump	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Hearing Aid
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Implanted drug infusion device	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Other implant or device _____

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Form Information Reviewed by: \_\_\_\_\_  
MRI Specialist (Print Name)

\_\_\_\_\_  
MRI Specialist Signature

**ST. CLOUD HOSPITAL  
SCHOOL OF DIAGNOSTIC IMAGING**  
Letter of Agreement-Student Advisement

In consideration of commencement into the School of Diagnostic Imaging (SODI) at St. Cloud Hospital (SCH), I, the undersigned, agree to comply with the rules, regulations and policies of School of Diagnostic Imaging, the Imaging Department and CentraCare St. Cloud Hospital and associated facilities, as outlined in the Student Handbook.

1. I understand that the school reserves the right to dismiss me at any time during my tenure due to:
  - a. Breach of Patient Confidentiality (HIPAA)
  - b. Unsatisfactory academic performance, clinical performance and/or professional performance
  - c. Breach of the Program and/or Organizations rules, regulations and policies
  - d. Insubordination
  - e. Disregard for the welfare of the patient
2. I understand that I am responsible for the cost of all textbooks and associated fees as stated on my personal invoice. Should I withdraw or be dismissed prior to the end of any term, none of these will be refunded. Late payments will result in the student not being able to progress into the next term and/or graduate from the program. Transcripts will not be sent out unless invoices are paid.
3. I have read and understand all the requirements, policies/procedures outlined in the student handbook and commit myself to abide by all of these requirements.

\_\_\_\_\_  
Printed Name

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Reviewed 6/2024  
Revised 5/2021  
Reviewed 5/2019  
Revised 6/2017  
Developed 6/2015

# SCHOOL OF DIAGNOSTIC IMAGING

## Counseling Report

STUDENT NAME \_\_\_\_\_ Term: \_\_\_\_\_ Date: \_\_\_\_\_

COURSE	GRADE	COMMENTS

S = Satisfactory      N = Needs Improvement

CLINICAL EVALUATION	COMMENTS
<b>Clinical Performance Appraisal Average</b>	
<b>Number of Completed Competency Exams/Number ARRT M- Remaining, Elective</b>	
<b>Pending Assignments/Objectives/Age Specific Competency</b>	

**STUDENT'S GOALS FOR IMPROVEMENT/COMMENTS**

**FACULTY COMMENTS**

\_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
 STUDENT SIGNATURE      DATE      FACULTY SIGNATURE      DATE

**ST. CLOUD HOSPITAL - SCHOOL OF DIAGNOSTIC IMAGING**

**Written Warning Disciplinary Form**

**Student Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Evaluator/Observer** \_\_\_\_\_

**Behavior Observed:**

**Action Taken:**

**Professionalism Deducted:**    Y    N    Points \_\_\_\_\_ Class \_\_\_\_\_

**Probation:**                    Y    N    Days/Rotations \_\_\_\_\_

**Suspended:**                 Y    N    Days/Rotations \_\_\_\_\_

**Comments:**

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

\_\_\_\_\_  
**Faculty Signature**

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

Reviewed June 2024  
Revised June 2023  
Reviewed May 2020  
Revised 2017

**ST. CLOUD HOSPITAL**  
**SCHOOL OF DIAGNOSTIC IMAGING**  
**INCIDENT REPORT**

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

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

**REPORT:**

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**Student Seen by Healthcare Provider:**      **YES** \_\_\_\_\_      **NO** \_\_\_\_\_

**Injury:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reviewed with:**

**Clinical Coordinator:** \_\_\_\_\_

**Student:** \_\_\_\_\_

Reviewed June 2024  
Revised March 2021



## St. Cloud Hospital School of Diagnostic Imaging Specialty Lead Usage Agreement

The St. Cloud Hospital School of Diagnostic Imaging will provide the student with one specialty lead apron/shield to be used for the purposes of shielding medical implants (diabetic) for their tenure in the program. In the event, the shield is lost or damaged the student will be responsible for the replacement cost of the shield at that time (approximately \$225.00).

Student will agree to the following usage guidelines:

- Lead apron/shield will be stored on a flat surface when not in use.
- To prevent creases and cracks do not fold the lead apron/shield.
- Lead apron/shield should be stored in a locked-locker while at SCH clinical rotations.
- Lead apron/shield should not be shoved into backpack and will be transported from one clinical site to another in individual cloth bag.
- If soiled clean immediately with warm water & non-bleach cleaning solution.
- Lead should not be submerged in water.
- Do not expose the lead apron/shield to extreme temperatures.
- If lost or damaged student will pay for replacement.
- Lead will be tested for integrity upon arrival/before initial use.
  - Lead will be re-evaluated each year in August for integrity. Therefore, student will have to schedule this test with CC.
- Lead apron/shield will be returned at the end of student's tenure.

Signing this document, you agree to the above terms regarding the use of the issued lead shield.

Student Name (Print): \_\_\_\_\_

Student Name (Signature): \_\_\_\_\_

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

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

Reviewed June 2024  
November 2022

# APPENDIX C

## Housing Expectations

## **CentraCare Melrose Hospital Housing Expectations**

Students visiting Melrose for their clinical rotation have the opportunity to stay at the Call House during their clinical rotation. Only students that have Melrose as a clinical site will be allowed to use this housing option. The Call House is located across the parking lot from the Melrose Hospital. The address is 703 Main St. West Melrose, MN 56352.

### **Reserving a Sleep Room**

Students will email all 3 SCH SODI program faculty and include arrival and departure dates they would like to stay in the housing unit. Program Faculty will reach out to Clinical Instructors at Melrose to ensure there will be availability at the housing unit on those dates.

### **Arrival Information**

Students can get the keys from the Imaging staff at the Melrose Imaging Department. Pickup times will be prearranged with the student and staff.

### **Payment**

Housing is free of charge to students. If housing keys are lost, a replacement cost of \$20.00 will be charged to the student.

### **Parking**

Students will be allowed to park in the Call House driveway parking. Please be considerate about parking so all other parties can come and go at their convenience.

### **Housing Amenities**

There is a designated room for Imaging Staff at the Melrose Call House. Amenities include a bed, bed linens, pillows and towels, refrigerator, kitchenware, TV with cable access and wireless internet. There are a handful of things you will need to bring along such as toiletries and desired personal items for your stay. CentraCare will not be responsible for lost or stolen items.

### **Kitchen**

1. Make sure all kitchen counters/sinks are clean, wash all dishes and put away.
2. All food/beverages you place in the refrigerator/freezer/cupboards are to be removed before checking out of the Call House. If not, they will be discarded.
3. Rags and dish soap are supplied by housekeeping and kept under the sink area.
4. Please take out garbage, if needed. Extra bags are supplied by housekeeping under the sink area. Please place the garbage bag by the garage door (just past Room 4) and housekeeping will take care of it.
5. Please place recyclable plastics, glass and cans on the counter near the garbage can.

### **Bedroom/House Setting:**

The bedroom (Room 4) is a personal space with a safety lock. The living room, kitchen, dining area and bathroom are all common areas.

### **Checkout**

There is a door tag system to be utilized during your stay at the Call House. Housekeeping comes each evening to check supplies and to see if rooms need to be cleaned. If you are staying the night, place the "DO NOT DISTURB" side on the room doorknob. When you check out, please place the other side of the door tag out that says, "MAID SERVICE PLEASE."

PLEASE NOTE: *Students must clear out all their personal belongings before returning the key to the Melrose Imaging technologists. The cleaning crew will clean the rooms that morning and personal items left behind will be discarded.*

### **Important Contact Numbers**

For housing questions or concerns, please contact Melrose Imaging Staff.

**Imaging Department Number: 320-256-4231 ext. 24221 (M-F 8:00am-5:00pm)**

**For housing related emergencies after business hours please call ER nurse at 24162 and ask for maintenance on call.**

For medical and other emergencies where immediate assistance is needed, Call 911.

### **Other**

1. Christmas trees/decorations, electric heaters, fans, etc. cannot be brought into the Call House due to fire/safety regulations.
2. Guests are not allowed to stay overnight, except a spouse who will require **prior approval** from Program Faculty.
3. There are absolutely **no pets** allowed in the building at any time. Any evidence of a pet being brought into the building is an automatic \$500.00 fine to the owner.
4. **The use of tobacco, drugs and alcohol are not permitted on the CentraCare –Melrose Campus as well as the Call House. Vaping is not allowed.**
5. Please keep all personal belongings in the assigned room. Ensure the room is locked when you leave. CentraCare – Melrose is not responsible for missing or lost items.
6. In the event of a spill, call the Melrose clinical instructors and they can coordinate with Environmental Services.
7. Immediately report any theft, damage or needed repair to Clinical Coordinators.
8. In the event that there is damage to the Call House room or Call House, they will be charged a \$250.00 fee due at the time of check out.
9. For your personal safety and that of your peers, do **NOT** give out the room key to anyone. Ensure that your assigned room is locked at night and locked when you leave for your clinical rotation. Ensure exterior doors are locked for the safety of other staying in the Call House.
10. In the event you leave your key in your room and are locked out, **do not attempt** to get into the room by other means. Please contact Melrose clinical instructors for a replacement.
11. Individual rooms are professionally cleaned only between student occupants. Sheets and towels are changed at that time.
12. CentraCare shall not be liable to student, its agents or invitees for any damage to person or property caused by any act, omission, or neglect of individual or for any claim, damages, or action related to this arrangement.
13. Should CentraCare be required to pursue an action at law or in equity to enforce or interpret the terms of this arrangement, CentraCare shall be entitled to reasonable attorneys' fees, costs and necessary disbursements, in addition to any other relief to which such CentraCare may be entitled.

# APPENDIX D

## Attendance Example

ATTENDANCE-ALLOWABLE PERSONAL TIME

Students will only be allowed two "excused" OR one "unexcused" absence per term.

**EXAMPLE**

<b>Junior Year</b>			<b>Senior Year</b>		
48 hours per year (6 days)			48 hours per year (6 days)		
<b>Semester 1</b>		48 hrs	<b>Semester 4</b>		59 hrs
Day 1	9/1/23 PTO -8.0 hrs	40 hrs	Day 1	9/1/24 PTO -8.0 hrs	51 hrs
Day 2	10/1/23 PTO -4.0 hrs	36 hrs	Day 2	9/22/24 PTO -8.0 hrs	43 hrs
			Day 3	10/1/24 PTO SICK -8.0 hrs	35 hrs -1 professionalism point
<b>Semester 2</b>			<b>Semester 5</b>		35 hrs
Day 1	3/16/24 PTO -8.0 hrs	28 hrs	Day 1	4/1/25 PTO SICK -8.0 hrs	27 hrs
Day 2			Day 2		
Tardy	8:25 Clock in for 8:00 shift (-2 hrs PTO)	26 hrs	Tardy	8:10 clock in for 8:00 shift (-1 hr PTO)	26 hrs
<b>Semester 3</b>		26 hrs	<b>Semester 6</b>		
Day 1	6/22/24 PTO -4.0 hrs	20 hrs	Day 1	4/5/25 PTO -4 hrs	22 hrs
Day 2	7/3/24 PTO -8.0 hrs	12 hrs	Day 2	4/10/25, PTO -8.0 hrs	14 hrs
	7/5/24 - 3rd misuse of Trajecsys (-1 hr of PTO)	11 hrs	Day 3	5/12/25 PTO SICK -8.0 hrs	6 hrs -1 professionalism point
			Day 4	5/15/25 PTO -4 hrs	2 hrs -1 professionalism point

ANY ADDITIONAL TIME UTILIZED BEYOND 48 HOURS IS REQUIRED TO MAKE UP.  
(During School Breaks-NO Holidays Allowed OR After Graduation)

EXTENDED ILLNESS-REQUIREMENTS TO RETURN

PHYSICIAN NOTE

EHS CLEARANCE

REVIEWED ON AN INDIVIDUAL BASIS

# APPENDIX E

## Academic Calendar

# APPENDIX E 2024-2026 ACADEMIC CALENDAR

## Fall Semester 2024

July	10	Summer Orientation Day New Students
		All Student Orientation
August	26	Handbook Review Fall Semester Begins
August	27	Seniors Begin Clinical
	27	Juniors Begin Class
September	2	Labor Day Observed
September	30	Juniors Begin Clinical
	30	Seniors Begin Class
September	27-29	MSRT Conference (Seniors)
October	18-20	Fall Break
November	27-Dec. 1	Thanksgiving Break
December	17	Last day of Semester
December	19-20	Finals
December	21-Jan. 5	Winter Break

## Fall Semester 2025

July	9	Summer Orientation Day New Students
		All Student Orientation
August	25	Handbook Review Fall Semester Begins
August	26	Seniors Begin Clinical
	26	Juniors Begin Class
September	1	Labor Day Observed
September	29	Juniors Begin Clinical
	29	Seniors Begin Class
October	TBD	MSRT Conference (Seniors)
October	17-19	Fall Break
November	26-30	Thanksgiving Break
December	16	Last day of Semester
December	18-19	Finals
December	20-Jan.4	Winter Break

## Spring Semester 2025

January	6	All students return
January	8-9	Interviews
January	20	MLK Day--no classes
March	15-23	SPRING BREAK
April	18-21	Easter Break
April	25	Last day of Semester
April	28-29	Finals
April	30- May 4	Semester Break

## Spring Semester 2026

January	5	All students return
January	TBD	Interviews
January	19	MLK Day--no classes
March	14-22	SPRING BREAK
April	3-6	Easter Break
April	24	Last day of Semester
April	27-28	Finals
April	29-May 3	Semester Break

## Summer Term 2025

	5	First day of classes Seniors
May	5	Juniors Clinical begins
May	26	Memorial Day Observed
May	27	Seniors Last day
May	29	GRADUATION
June	2	First day of classes Juniors
July	4	Independence Day
July	31	Last day of Term
		Juniors Comprehensive
August	1	Test

## Summer Term 2026

	4	First day of classes Seniors
May	4	Juniors Clinical begins
May	25	Memorial Day Observed
May	26	Seniors Last day
May	28	GRADUATION
June	1	First day of classes Juniors
July	4	Independence Day
July	30	Last day of Term
		Juniors Comprehensive
July	31	Test



# St. Cloud Hospital School of Diagnostic Imaging

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