

AUSTIN PEAY STATE UNIVERSITY RADIOLOGIC TECHNOLOGY PROGRAM

RADIOGRAPHY STUDENT HANDBOOK

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This handbook details the Radiography Program operational framework, which allows the Radiography students and faculty in the Radiography Program to work together with harmony and mutual understanding. The Program along with JRCERT requires rules and regulations to establish the rights and responsibilities of all parties. The policies contained within are intended to ensure that department operations will be consistent with its goals and responsibilities as a professional group.

The faculty of the Radiologic Technology Program (Radiography) is dedicated to assisting each student in Radiography in achieving the goals of the educational program and to the development of their full potential. The faculty is also obligated to prepare radiographers who meet safe standards of practice and are skilled in the science of radiography.

The Radiologic Technology Program (Radiography) faculty adheres to the policies and information in this handbook and reserves the right to make changes through committee action. Please keep abreast of any policy updates.

The accrediting agency for Austin Peay State University is the Southern Association of Colleges and Schools (SACS).

COMMISSION ON COLLEGES
SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS (SACS)
1866 Southern Lane
Decatur, Georgia 30033
Phone # (404) 679-4500

**JOINT REVIEW COMMITTEE ON EDUCATION IN RADIOLOGIC
TECHNOLOGY (JRCERT)
Complaint and Resolution Policy**

The Austin Peay State University Radiologic Technology Program is accredited by
the Joint Review Committee on Education in Radiologic Technology
(JRCERT)

20 North Wacker Drive, Suite 2850

Chicago, IL 60606-2850

Ph# (312) 704-5300

e-mail: mail@jrcert.org

If a student finds the program is **NOT IN COMPLIANCE** with any of the Standards,
they can contact the JRCERT.

Upon receipt of written notification of a complaint, the APSU Radiologic Technology
Program will address the complaint immediately. A letter with a statement addressing how
the complaint was resolved will be mailed to the JRCERT within 10 working days.

MISSION

The mission of the Radiologic Science Program is to graduate competent, entry-level radiographers who are prepared to function within the scope of practice of radiography.

The program's overarching goal is to fulfill the needs of healthcare providers in the community and surrounding regions. Serving people as a provider requires critical thinking and technical skills to offer the best care. To prepare the students to meet these requirements, they are provided with various levels of training. This training includes theory, clinical practice, didactic learning, laboratory testing, and competency testing in the clinical setting. Upon successfully completing the program, graduating students will be prepared to meet the requirements for an entry-level position in radiology.

GOALS

Goal # 1: Student(s) will demonstrate Clinical Competence.

Outcomes:

- A. The student will demonstrate proper positioning skills.
- B. The student will produce diagnostic quality images.

Goal #2: Student(s) will develop communication skills.

Outcomes:

- A. Students will have effective oral communication in the clinical setting.
- B. The student will demonstrate the ability to write a research paper by using appropriate citations and synthesis of ideas.

Goal #3: Student(s) will demonstrate Critical Thinking Skills.

Outcomes:

- A. Students will perform non-routine exams and demonstrate the ability to modify routine protocols.
- B. Students will have the ability to critique exams for image quality (positioning and technique)

Goal # 4: Student(s) will participate in interprofessional activities

Outcomes:

- A. Students will complete simulations with other professions
- B. Students will educate other professions about radiologic technology

Goal #5: Students will demonstrate leadership through professional development

Goal #6: Student(s) will be retained

Goal #7: Student(s) will pass the ARRT registry on the first attempt

Goal #8: Student(s) will become employed in the Radiologic Sciences

OBJECTIVES

APSU's objective for the Radiography Program is to provide a sound foundation for the development of knowledge and skills pertinent to the radiographer as a practitioner. The Radiography Program hopes to promote effective communication between its students and the personnel they will encounter. This communication will increase the ability of the program to satisfy its' prime objective of educating radiographers. Duties of the graduate radiographer include but are not limited to:

- Provide patient services using imaging modalities as prescribed by a physician.
- Perform radiographic and other related imaging procedures, producing quality images for interpretation by a physician.
- Apply the principles of radiation protection.
- Evaluate images for technical quality.
- Exercise professional judgment in the performance of procedures.
- Provide patient care essential to radiographic procedures.
- Recognize patient conditions requiring immediate action and initiate basic life-support procedures.
- Perform diagnostic radiographic services.
- Maintain patient records.
- Assume responsibility for the assigned area.
- Provide input for equipment and supply decisions.
- Instruct specific units of didactic and/or clinical education in the Radiography Program, if applicable.
- In the absence of a supervisor, may assume acting supervisory responsibility.
- May be responsible for participating in the quality assurance program.
- May be responsible for the control of inventory and purchase of supplies for the assigned area.
- Pursues continuing education.
- Participates in advocacy for the profession

Admission Requirements

1. Be admitted to the university
2. Complete all core requirements with a 2.5 GPA and all courses with a “c” or better unless specified in the 4-year plan: B or better in physics and chemistry
3. Download the Radiography application from the program’s website
4. Complete 12 hours of observations at 3 different RADIOGRAPHY locations. One hospital, one clinic, and one type of applicant’s choosing. Use observation evaluation forms included in the application. Forms must be sealed by clinic location, sealed with tape, and signed by observer over the seal.
5. Official transcripts from transfer school send to Allied Health: Radiography
6. Applications must arrive no later than February 28th
7. Students will receive notification of acceptance or interview by email
8. Acceptance emails will include a contract and list of health requirements.
9. Applicants must be able to physically manipulate and operate equipment, manipulate patients, and visually assess patients, test results, and the working environment. They must be able to clearly communicate, both verbally and in writing, make appropriate judgment decisions in emergency or other situations, and demonstrate emotional stability and psychological health in day-to-day interaction with patients, their family members, and personnel.
10. All radiologic technology students must submit evidence of good health by returning a completed Physical Examination form.
11. All students must have TB skin test annually.
12. Medical documented of immunity for:
 - a. Measles, Mumps, Rubella (MMR)
 - b. Varicella Zoster (chicken pox)
 - c. Tetanus/diphtheria booster within the past ten years
 - d. Hepatitis B vaccine
 - e. Influenza vaccine
 - f. Other clinically mandated vaccinations
13. All students must submit evidence of current AHA Basic Life Support (BLS).
14. Malpractice insurance-paid by the student to the university as a program
15. Health insurance is required. Students must provide evidence of health insurance coverage before clinical assignments may begin
16. Annual criminal background check
17. Annual 10-panel drug screen
18. Based on the results of these tests, any affiliated clinical site may determine to not allow your presence at their facility. Denial of clinical access could result in your inability to successfully complete the clinical requirements of a specific course and the program.
19. Students may be required to obtain additional vaccinations as clinical agencies adopt and implement new requirements, respond to periodic recommendations from the Centers for Disease Control or area health departments, etc. All such vaccinations will be at the expense of the individual student. Any student who refuses to be immunized will have the option of following the alternative processes allowed for agency employees, if available (i.e. wearing protective masks 100% of the time while at a clinical facility).
20. In compliance with the Americans with Disabilities Act, students are encouraged to

register with the counseling/disability services office for possible assistance with accommodations. It is the student's responsibility to voluntarily and confidentially provide appropriate documentation regarding the nature and extent of a disability. Students requesting special accommodation are (strongly) encouraged to contact the counseling/disability services office at the beginning of the semester.

21. Students will take all program courses offered for each cohort semester.

Admission by transfer

A student may be admitted by transfer in accordance with the regular college policy. If credit is to be allowed for radiography courses from other programs, this is accomplished through radiography faculty action. Courses in radiography completed more than two (2) years prior to application for transfer are generally not acceptable. Students who have been out of a Radiography Program for more than one year will be required to complete competency testing, and challenge or retake the applicable radiography courses.

TECHNICAL STANDARDS /WORKER CHARACTERISTICS OF A RADIOGRAPHER

The following are essential characteristics for any Radiologic Technologist (Radiographer as compiled from observations of a wide variety of job experiences.

VISUAL ACUITY:

- Distinguish whether the beam is perpendicular, horizontal or angled through the center of anatomical area being x-rayed to center of field of view.
- Perform necessary radiography procedures that involve placement of needles, catheters, etc. into proper anatomical structures of the patient.
- Read protocol for radiography procedures in the department.
- Perform data entry tasks using digital and computer terminals.
- Near-visual acuity and depth perception to examine the image for pertinent detail, and to take patient vital signs using devices such as: thermometer, sphygmomanometer, etc.
- Must be able to read units on a syringe.
- Must be able to work in dimly lit areas such as darkrooms and fluoroscopic rooms.

HEARING ACUITY:

- Hearing must be sufficient to communicate with others.
- Distinguish phonetic sounds either mechanically transmitted or from conversation in order to perform image processing tasks and fluoroscopic procedures in light- controlled areas.
- Hear and retain pertinent information to relay instructions.
- Hear and respond to patient questions and clinical history while processing a request.

SPEAKING ABILITY:

- Speak clearly and loudly enough to be understood by a person in the radiology department, in surgery or on the phone.
- Good communication skills are also necessary to maintain good interpersonal relationships with patients and peers.

DIGITAL DEXTERITY:

- Grasp and manipulate small objects required to perform job functions.
- Perceiving such attributes of objects/materials as size, shape, temperature, texture, movement or pulsation by receptors in the skin, particularly those of the finger tips.
- Operate a variety of x-ray equipment.
- Arms and hands or functional artificial limbs are essential to perform radiographic procedures and transfer

patients.

- Legs and feet or functional artificial limbs are essential to maintain balance to accomplish required duties and transport patients.

PHYSICAL ABILITY:

- Walk or stand for about 80% of a normal workday.
- Maneuver through congested area(s) or unit(s) to perform positioning procedures and transport patients.
- Raise arm(s) while maintaining balance when positioning a patient, reaching over table, adjusting x-ray tube.
- Maneuver in stairways, hallways, control booths, and various inclines.
- Push/pull medical equipment and adjust x-ray tubes to standard source to image distance; transfer of patients to and from units.
- Weight must allow free movement within a small control booth, move quickly during patient emergencies; squeeze in small areas while performing portable radiographic procedures.

ADAPTIVE ABILITY:

- Complete tasks or job functions within deadlines.
- Complete required tasks/functions under stressful conditions.
- Track and complete multiple tasks at the same time.
- Perform independently with minimal supervision.
- Interact appropriately with diverse personalities.

Notice of Felony or Misdemeanor Convictions

The American Registry of Radiologic Technologists (ARRT) has stringent rules regarding misconduct and eligibility for the national registry exam. The ARRT offers an Ethics Review Pre-Application as an early ethics review of violations that would otherwise need to be reported on the Application for Certification and Registration upon completing an ARRT-recognized education program. The Ethics Review Pre-Application may be used to report criminal proceedings, including misdemeanor charges and convictions, felony charges, and convictions, military court-martials, and/or disciplinary actions taken by a state or federal regulatory authority or certification board, and/or honor code violations. Program candidates may complete the pre-application review process with the ARRT before program enrollment to avoid delays and uncertainty regarding certification eligibility. The Ethics Review Pre-Pre-Application is downloadable from the Ethics section of ARRT's website at www.arrt.org or by calling ARRT. If a student or graduate of the Radiologic Technology Program is concerned about ARRT eligibility, it is the sole responsibility of the student or graduate to certify eligibility with the

Student Estimated Costs

University tuition and fees may be found at
https://www.apsu.edu/student-account-services/tuition_and_fees/index.php

The program is not liable for tuition and fee increases for current students. Other fees may be incurred if clinical site requirements change.

JUNIOR YEAR

Urinalysis testing	\$50
Background Investigation	\$50
Dosimeters	\$150
Clover Learning	\$265
Malpractice Insurance	\$20
Uniforms for class and clinic	\$200-500
Trajecsys Clinical portal	\$150
Lambda Nu	\$60
ASRT membership	\$35
TSRT membership	\$15
Markers	\$150
TSRT Annual Meeting	\$200-500
Medical requirements	Varies and may be covered by insurance

SENIOR YEAR

Urinalysis testing	\$50		
Background Investigation	\$50	ASRT membership	\$35
Dosimeters	\$150	TSRT membership	\$15
Registry Review Materials	\$100 - \$300	ARRT Exam Fee	\$250
Malpractice Insurance	\$20	TSRT Annual Meeting	\$200-500
Uniforms for class and clinic	\$200-500	Medical requirements	Varies and may be covered by insurance

AUSTIN PEAY STATE UNIVERSITY RADIOLOGIC TECHNOLOGY PROGRAM GENERAL POLICIES

INTRODUCTION:

University policies for retention and progression at Austin Peay State University are applicable to radiography students **except in those instances where specific standards of the Radiologic Technology Program take precedence over university standards.**

The Program Director and the faculty of the Radiography Program have the authority and responsibility to refuse admission or to separate any student from the Radiologic Technology Program if unusual circumstances of a legal, moral, health, emotional, or academic nature indicate that the student is not qualified for radiography.

GENERAL EDUCATION:

After a student has been accepted into the Austin Peay State University Radiography Program, only college work earned at APSU may be applied toward the Bachelor of Science in Radiologic Science (Radiography).

FERPA:

The program ensures each student's confidentiality <https://www.apsu.edu/registrar/ferpa/>

PROGRESSION IN RADIOGRAPHY:

Students must successfully complete the radiography courses in sequence. Students shall pass exams. During the preclinical summer semester if a student fails one exam they will be placed on academic probation. Subsequently, a student who fails two didactic exams must meet with the program director to discuss remediation or possible dismissal. If the student does not participate in the remedial activities, the director may dismiss the student from the program. A student who fails three didactic exams will be immediately dismissed from the program. A student whose lab average is less than 90% after one lab exam is placed on clinical probation; failure of two lab examinations will lead to immediate dismissal from the program.

Academic Requirements:

A minimum grade of C is required in each didactic radiography course. Lab courses require >90%.

All requirements listed within the course syllabus must be met before a final grade will be given. Any midterm grade less than a "C" places the student on academic probation

Didactic Courses scoring range for the APSU Radiography Program is:

90 - 100% = A

80 - 89% = B

75 - 79% = C

60 - 74% = D—Immediate dismissal

Below 59 = F Immediate dismissal

Lab scoring range for the APSU Radiography Program is:

90 - 100% = A

80 - 60% = D - Immediate dismissal

Below 59 = F - Immediate dismissal

Exams

The exam grade recorded and calculated into your course grade is the score received the first time the examination is given. Make-up tests WILL NOT be given unless approved by the instructor in advance. Students must score a *Minimum Of 75% On Each Exam And A Minimum Of 90% On Each Imaging Laboratory Test.*

A grade below 75% or 90% respectively is cause for concern. You must Re-Test until the required 75%, Or 90% is achieved, up to a maximum of two (2) Re-Tests. If 75% or 90% is not achieved by the third test (2nd re-test), this will result in DISMISSAL from the Radiography Program. The re-test must be scheduled with your instructor and completed within SEVEN CONSECUTIVE DAYS. Failure to re-test in the allotted amount of time will result in DISMISSAL from the Radiography Program.

Probation

Students may only be placed on academic probation twice in their academic program. If a student meets the requirements for probation for a third time, they will be immediately dismissed.

WITHDRAWAL:

If the student must withdraw from a course or the university before completing the semester, the student should officially withdraw by participating in an exit interview and withdraw on OneStop to receive a GRADE OF "W". If the student stops attending a class without officially withdrawing from the university or class, the student will receive a GRADE OF "FA" in the course(s) in which they were enrolled. Any student who withdraws from the radiography program must apply for readmission and is subject to review by the Admissions Committee.

ATTENDANCE:

Attendance is important to the success of the radiography student. Students are expected to attend all classes, scheduled labs, and assigned clinical sessions. Students are expected to be available until the date of graduation of each semester. If an absence is going to occur, the course instructor must be notified prior to the beginning of the class/lab session.

TELEPHONE NUMBERS FOR CONTACTING FACULTY:

Program Director: Jennifer Thompson (931) 221-6516

Clinical Coordinator: Samantha Robinson (931) 221-7240

Faculty: Terri Crutcher (931) 221-6443

The instructor will make the decision to designate the absence excused or unexcused. If notification is not received, then the absence is automatically unexcused.

During inclement weather School closings are posted to the university website. APSU also offers optional text message alerts. Inclement weather closings are not the decision of the Program Director or the Clinical Coordinator. Students may use their best judgement in

traveling to the clinic during inclement weather, however, they **must notify** their assigned clinical site and the Clinical Coordinator and/or the Program Director. These days must be made up. If all classes at Austin Peay State University are canceled, the students are not required to attend clinical for that day. If APSU opens late, the student will report to the clinic at the time of campus opening. If a clinical site dismisses a student due to incoming weather, the student must call the clinical coordinator and the remainder of the day is excused.

Didactic Course Attendance:

2 unexcused absences= grade lowered by one letter grade, student placed on probation
>2 unexcused absences= failure of the course

4 excused absences=grade lowered by one letter grade, student placed on probation
>4 excused absences=failure of the course
3 tardies = 1 absence (tardy is anytime after the start of the class period)

*In the instances for abbreviated courses, ie summer (excluding clinical education) and courses that are one day per week the attendance policy is:

1 unexcused absences= grade lowered by one letter grade, student placed on probation
>1 unexcused absences= failure of the course

2 excused absences=grade lowered by one letter grade, student placed on probation
>2 excused absences=failure of the course
3 tardies = 1 absence (tardy is anytime after the start of the class period)

In the last semester, senior year, students may be given time for interviews. One class period and one clinic day may be granted with proof of the time of the interview. Students are strongly encouraged to schedule interviews outside of class time. A maximum of three earned clinic days may be given for ARRT exam review rewards. A week's notification of their use is required.

Clinical Missed Time and Tardies

It is the student's responsibility to inform the clinical site to which the student is assigned if they are to miss any time. The student must also inform the Clinical Coordinator of any time missed by email with a subject line "Absent from RLTN ####" Information regarding any missed clinical time is kept in the student's file. Missed clinical days **MUST BE MADE UP ON A DAY FOR DAY BASIS**. Clinical time required to be made up **must** be completed within the first week after the semester ends at the clinical site where the absence occurred.

	3082	3083	4030	4084	4085
NUMBER OF ABSENCES COURSE GRADE NOT EFFECTED	2	2	3	3	3

NUMBER OF ABSENCES CLINICAL GRADE LOWERED ONE GRADE	3	3	4	4	4
NUMBER OF ABSCENCES COURSE GRADE WILL BE LOWERED 2ND LETTER GRADE STUDENT WILL BE PLACED ON CLINICAL PROBATION	4	4	5	5	5
NUMBER OF ABSENCES WHICH WOULD RESULT IN AN AUTOMATIC COURSE FAILURE	5	5	6	6	6

3 tardies = 1 absence (tardy is anytime after the start of the shift)

Although clinical time is made-up, the grading policy for absences will still count towards the original missed clinical days.

Students who miss a clinical day or expect to be tardy must call the appropriate clinical site and the Clinical Coordinator no less than thirty (30) minutes before the beginning of the clinical time. The clinical coordinator must also be email with a subject line “Absent from RLTN #####” Tardy is any time after the start of the shift. If a student fails to follow the proper call-in procedure, the clinical grade will be lowered according to the clinical call in policy.

If a student fails to follow the proper “Call In Procedure”, the clinical grade will be lowered as follows:

FIRST NO CALL – Fifteen (15) point deduction from the clinical course grade and placed on clinical probation.

SECOND NO CALL –The student will be dismissed from the Radiography Program.

LEAVE OF ABSENCE:

If unforeseen circumstances in a student’s life situation interfere with the student’s academic or clinical progress, the student may request a Leave of Absence in writing from the program and to resolve the problem before applying to re-enter the program. **A Leave of Absence shall not be for longer than one year.**

BEREAVEMENT TIME will be allowed for the immediate family (Examples: spouse, child, parent, or sibling.) The student requesting bereavement time should discuss the parameters with the Program Director.

REPORTING ILLNESS

For the protection of each student as well as the patients, the Austin Peay State University population and its affiliates, the program requires students who have or suspect they have a contagious illness to notify the Program Faculty and not attend clinical or didactic courses. In cases where the university is collecting self-reported cases, the student must report to the university as well.

Any student who has a fever of greater than 100.4 degrees Fahrenheit, a known contagious illness, or suspects that the student has a contagious illness cannot attend clinical or didactic courses. Students who knowingly attend clinical education or classes with a contagious illness will have consequences determined by the program director. Students missing multiple days may be required to submit a physician's clearance to return to the clinic or classroom

Disciplinary Actions

PROBATION: (this list is not all-inclusive)

- Unprofessional behavior/performance, in the opinion of the clinical preceptor, clinical coordinator or program director
- Attendance (including absences, tardiness and make-up time)
- Didactic grade less than "C."
- Lab grade less than "A."
- Lack of organization
- Unprofessional appearance
- Personal problems that interfere with classroom or clinical performance
- Clinical and class absences without notification
- Failure to submit to the Program Director/Clinical Coordinator, the required number of competency examinations during your end of semester scheduled meeting
- Other (as specified in APSU student handbook and undergraduate bulletin).

A probationary period of 8 weeks will be allowed for the student to demonstrate improvement. The exact terms of the probation will be specified on the Radiologic Technology Program Student Contact form. The terms will include the behaviors required to remove the probationary status. If the terms of the probation are not met the student may be dismissed from the program.

DISMISSAL: (this list is not all-inclusive) CAUSES

FOR IMMEDIATE DISMISSAL:

1. If the student is found to be unsafe in the clinical setting or found unsuited to the profession of Radiography according to the evaluation method.
2. Dishonesty.
3. Possession, use of, or distribution of mind-altering substances in university or clinical areas or while attending meetings, seminars or conventions as representatives of Austin Peay State University.
4. Use of abusive or profane language.
5. Disclosure of confidential patient information.
6. Assault and/or battery while acting as representative of Austin Peay in any way.
7. If the student fails to complete any course criteria as specified in the course syllabus.

8. Failure to achieve the required 75%/90% grade after the 2nd re-test attempt.
9. Failure to achieve the required 75% overall course grade.
10. Plagiarism.
11. Any other reason as stated in the APSU Student Handbook or undergraduate bulletin.

RE-ADMISSION:

Any student who withdraws or is dismissed from the Program must reapply for admission and be accepted before being permitted to continue. A student may be readmitted to the Radiography Program one time only. **NO ONE WILL BE READMITTED A SECOND TIME.** INDIVIDUALS DISMISSED FOR LACK OF CLINICAL SAFETY WILL NOT BE READMITTED.

TECHNOLOGY POLICY:

Cell phones or smart watches will not be used during class or clinic. If the instructor sees the technology in use, the student will be dismissed from the class and be subject to probation/dismissal. Laptops and tablets may be used at the instructor's discretion.

SEXUAL HARASSMENT POLICY

Sexual harassment is a form of misconduct that undermines the integrity of relationships. It undermines morale and interferes with the productivity of its victims and their peers. All students must be allowed to learn in an environment free from unsolicited and unwelcome sexual overtures. Sexual harassment takes various forms. It is defined as deliberate or repeated unsolicited verbal comments, questions, representations or physical contacts of an intimate nature that are unwelcome to the recipient. It may include actions such as:

- Sex-oriented verbal "kidding" or abuse
- Subtle pressure for sexual activity
- Physical contacts such as patting, pinching or constant brushing against another's body
- Demands for sexual favors, accompanied by implied or overt promises of preferential treatment or threats concerning the student's status

Sexual harassment is a prohibited practice when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of a student's appraisal
- Submission to or rejection of such conduct by an individual is used as the basis for clinical assignments and grading criteria
- Such conduct has the purpose or effect of unreasonably interfering with an individual's learning or creating an intimidating, hostile or offensive educational environment

While it is not the intent of APSU Radiography Program to regulate the student's consensual social interactions, conduct constituting sexual harassment will not be tolerated. Complaints of sexual harassment involving misuse of one's official position should be made orally and followed up in writing to the Department of Allied Health Sciences.

Because of differences in student's values and backgrounds, some individuals may find it difficult to recognize their own behavior as sexual harassment. To create an awareness of conduct which may be construed as sexual harassment, we may incorporate sexual harassment awareness training in radiography classes.

CPR

The student must keep their AHA CPR certification current while enrolled in the Radiography Program and at the time of the ARRT certification exam.

BACKGROUND INVESTIGATION

A background investigation is required annually. The first before classes begin in the junior year and the second during the week of spring conferences.

Drug Analysis

Drug analysis is required annually. The first before classes begin in the junior year and the second before Spring semester finals.

Alcohol and Drug Testing

The Radiologic Technology Program supports a drug and alcohol-free environment during all aspects of the program. Students may be tested based on reasonable causes. If the student is suspected of intoxication with questionable or inappropriate behavior, the student will require immediate alcohol (breath or blood) and/or drug test at the student's expense. Impairment may lead to dismissal from the program.

MALPRACTICE INSURANCE:

Contractual agreements with clinical affiliates require all students to carry malpractice insurance. No student will be allowed in the clinical area without verification of coverage.

HEALTH INSURANCE:

It is required for students to provide their own health insurance coverage as they are responsible for any medical expenses incurred while enrolled in the Radiography Program. Austin Peay State University does not assume the responsibility for student's health, whether through illness or injury nor for medical bills incurred while on clinical duty or on campus.

MENTAL HEALTH SERVICES and MEDICAL SERVICES

Located in the Ard Building, the APSU Health and Counseling Center (HCC) offers integrated primary health care, personal counseling, health education and wellness programs to currently enrolled APSU students.

PROFESSIONAL ORGANIZATIONS:

Students will join professional organizations that represent their prospective future career.

Participation helps prepare students for future growth and development in their profession as well as afford them access to learning experiences through seminars, meetings, and publications. Information and enrollment will be provided during the summer semester. The organizations include:

1. Tennessee Society of Radiologic Technologists (TSRT):

All students will join TSRT and attend the annual Convention/Seminar (3 days) usually held in October. **Attendance at the event is mandatory.**

2. American Society of Radiologic Technologists (ASRT):

All students will join the ASRT and are expected to read the bimonthly journals.

NAME/ADDRESS/PHONE # CHANGE:

A change of name/address/phone number is to be reported **PROMPTLY**

ARRT EXAMINATION CLEARANCE:

Each graduate from the Radiography Program must complete the clearance procedure as defined by the Radiography Program. This clearance includes:

- Fulfillment of degree requirements for the Bachelor of Science in Radiologic Science (Radiography).
- Requirements, including the Competency Program, turning in University and Hospital ID's, Dosimetry badges and Holders, Competency Books and logbooks, and signing off on available dosimetry badge reports.
- Participating in the Pinning Ceremony

Student Outside Employment

Radiography students may choose to maintain outside employment while in the radiography program. Work hours may not interfere with class schedules or clinical schedules and must not put the student in a position where their safety, or patient safety, is compromised. For example, if the student works night shift on the job, then has a clinical day shift to follow, this could put patients in danger, as the student is not at their best. Clinical shifts will not be altered to accommodate a student's outside employment.

Some radiography students may have opportunities to accept student technologist jobs in hospital radiology departments in the region during their senior year. Students are ***prohibited*** from working at the ***same clinical site department*** where they are assigned for program clinical rotations. If a student is considering accepting employment at their currently assigned clinical site, where there is not a separation in departments,, the student should confer with program faculty to see if a clinical reassignment is possible.

In addition, these general principles must be adhered to concerning clinical rotations and employment:

- Students may not receive compensation for their clinical rotations
- Hours worked in a clinical facility for pay may not be considered clinical hours
- No competencies may be obtained while the student is in a clinical facility, but working for pay
- Facilities that employ students must provide the student with a separate ID badge and dosimeter for the time the student is working for pay. Students are not allowed to wear the APSU student ID badge or patches or APSU dosimeter while working for pay

Dress Code for Radiography Students

Hospitals and medical settings require cleanliness, neatness, and the promotion of good health. The student's appearance reflects on the Austin Peay Radiography Program and the medical facility's standard of care for patients, visitors, and the community. Students are expected to display the highest standard of good grooming and dress standards. Student attire and appearance must be clean, tasteful, and convey a seriousness of purpose appropriate to a professional medical setting. Proper attire also contributes to the University's dignity and the student's position as a healthcare team member.

The following general dress code guidelines must be observed:

- The clinical uniform must be worn at all times in the clinical setting.
- On didactic days, students are required to wear clinical scrubs or black, red, white, or gray scrub

- pants with a radiography t-shirt.
- For events (e.g., RUSH, Gobs Preview Day, etc.), students may be authorized to wear t-shirts, sweatshirts, or other APSU radiography apparel. At other events, the dress code is business casual.
 - Individual accessories and/or items of dress are prohibited
 - If an official notes inappropriate attire or hygiene, the student may be asked to leave the class or clinic to return home to correct the infraction, and the time away will be deducted from the student's attendance. Students out of uniform at clinic may either be sent home for the day or make up time that is equivalent to the time out of uniform. Students who violate this policy may be subject to corrective action(s), up to and including dismissal from the program.

The Radiography Program uniform consists a uniform identified in the APSU uniform guide:

https://www.canva.com/design/DAF7NPTOvq8/8Rjafd6O5_zCN3_ITSC-JQ/edit?utm_content=DAF7NPTOvq8&utm_campaign=designshare&utm_medium=link2&utm_source=sharebutton

The specific style of uniforms are given in the student's first semester.

Lanyards, marker parkers, and Id holders should be without ornamentation unless required by the clinical site or approved by the Program Director. Name tags are to be worn and visible with the uniform and medical jacket/lab coat **at all times**. This tag must be returned to APSU faculty at the end of the program or upon demand.

Footwear: Shoes are to be, clean, polished, well-supporting and with clean laces; no open-toed or open heels. Shoes should be a leather material and should not have open holes on the toe (Clogs, thongs, sandals, canvas shoes/tennis shoes/sneakers with color brand logos are not acceptable.) White socks that fit above the ankle are to be worn.

BODY PIERCINGS: Only earrings may be visible. One pair of stud earrings is permitted and must be in the ear lobe while at clinic. Body modifications such as gauging of the ears will not be permitted. Previously gauged ears should be corrected before the start of the program.

TATTOOS: must not be visible while at clinic

HAIR: When in clinic, hair must be clean and well-controlled, so it does not hang in eyes, around the face, or on shoulders while in uniform. Extreme hairstyles or hair colors are to be avoided. Hair accessories must be sized appropriately. Headbands may be black or neutral color and no wider than 1". Beards and mustaches should be trimmed neatly. Students may not begin growing a beard or mustache during a clinical assignment. This growth may be done during a semester break.

PERSONAL GROOMING: Personal cleanliness, including bathing, the use of deodorant & oral hygiene, is essential. Smoke odor is to be avoided. The moderate use of makeup, perfume, mild cologne and/or shaving lotion is acceptable. Nails must be clean, well-trimmed, smooth and fairly short. A natural or clear color nail polish may be worn if not chipped or cracked. ■

NO PROSTHETIC NAILS ALLOWED

JEWELRY: Jewelry could be a safety hazard and might interfere with aseptic techniques while at clinic. No other jewelry is to be worn, except for a wedding band. Neither Austin Peay State University nor Clinical Affiliates are responsible for lost or stolen jewelry, money or other personal items.

TRANSPORTATION:

The radiography student is solely responsible for transportation to and from the university and any facility used for clinical education.

FINANCIAL AID and TUITION: (see APSU undergraduate bulletin) https://www.apsu.edu/student-account-services/tuition_and_fees/index.php

FUND RAISING: Should be coordinated with the radiography faculty.

HEALTH REQUIREMENTS:

Any student whose health changes after entering the program, affecting their ability to meet the physical requirements of the Program will be asked to withdraw from the Program until the problem is corrected. Due to clinical requirements, students may be required to complete a medical physical annually.

HONORS AWARDED ANNUALLY AT PINNING**JRCERT Certificate and TSRT Award:**

These awards are presented to a second-year radiography student in recognition of outstanding clinical performance.. The selection of the recipient(s) is made by the radiography faculty on the basis of clinical/didactic grades, classroom participation, and community service.

Outstanding Student Award:

Senior students select the recipient of this award. Criteria for selection include leadership, cooperation, contribution to the Radiography Program and APSU.

Attendance Award:

Senior student(s) that have perfect attendance for didactic and clinical education will be recognized.

Patient Care Award

This award is presented to the student who demonstrates exceptional patient care throughout their clinical rotations. The award is based on clinical preceptor recommendations and votes.

PINNING CEREMONY

Pinning Ceremony occurs at the **completion of all didactic and clinical work** as required for the Bachelor of Science in Radiologic Science degree. **All senior students are required to participate in the rehearsal and the pinning service.** All junior students are required to assist with the organization (set up/clean up) and attend the pinning reception. The pinning ceremony occurs the Thursday evening before graduation, students should refer to the academic calendar.

GRIEVANCE PROCEDURE AND DUE PROCESS:

A student who is dissatisfied with their grade will utilize the procedures for student grade appeal as outlined in University policy. The policy is located on the University web at <https://apsu.navexone.com/content/dotNet/documents/?docid=99&public=true>. In the event

the Chair and the Program Director is the same person, the grievance will go directly from the Program Director to the Dean of the College of Science, Technology, Engineering and Mathematics.

A brief discussion of the appeal steps are as follows:

Step 1: A student who has an academic grievance must first seek informal resolution with the faculty member. This is to be completed within 7 days of receiving the grade.

Step 2: If the difference cannot be resolved between the student and the faculty, the student may seek informal resolution with the Program Director. This is submitted within 7 days of discussion with the faculty member.

Step 3: If a resolution cannot be accomplished the student must submit a formal appeal (Letter) to the Allied Health Sciences Department Chairperson. This will be submitted within 7 days of the discussion with the Program Director.

Step 4: Once a formal appeal has been submitted to the Department Chairperson, the University procedures will be followed.

A non-academic grievance with program/clinical personnel procedures are as follows:

INVOLVING PROGRAM FACULTY

Step 1: A student that has a non-academic grievance with program faculty will submit the grievance to the Program Director within 3 days of the incident. If the grievance pertains to the Program Director, the grievance will be submitted to the Allied Health Sciences Department Chairperson within 3 days of the incident.

Step 2: The program Director will attempt to resolve the situation with the student and faculty member. If unable to resolve the situation the grievance will be forwarded to the Allied Health Sciences Department Chairperson within 7 days.

Step 3: The Allied Health Sciences Department Chairperson will meet with the student and faculty members. If unable to resolve the situation, statements from the student, faculty and chairperson will be forwarded to the Dean of the College of Science, Technology, Engineering and Mathematics (STEM). This will be completed within 7 days of the meeting.

Step 4: Once the information has been submitted to the Dean of STEM the procedures will follow University Policy 3:002, Student Non-Academic Grievance Committee Guidelines. This policy can be found on the University web at <https://apsu.navexone.com/content/dotNet/documents/?docid=117&public=true>

INVOLVING CLINICAL STAFF

Step 1: A student that has a non-academic grievance with clinical staff will submit the

grievance to the Clinical Preceptor within 3 days of the incident. If the grievance is with the Clinical Preceptor the grievance will be submitted to the Program Director.

Step 2: The Clinical Preceptor will meet with the student and clinical staff member within 7 days of the incident in an attempt to resolve the situation. If unable to resolve the situation the student will submit the grievance in writing to the Program Director within three of the meeting with the Clinical Preceptor.

If the grievance involves the Clinical Preceptor the student will submit the grievance to the Program Director within 3 days of the incident. The Program Director will schedule a meeting with the student and the Clinical Preceptor within 7 days in an attempt to resolve the situation.

Step 3: If unable to resolve the situation, the Program Director will discuss the situation with the Director of Imaging to conclude a resolution.

Step 4: If the Program Director and Director of Imaging cannot come to a resolution within 7 days the grievance will be forwarded to the Dean of the STEM for a final decision.

INVOLVING ANY OTHER UNIVERSITY STAFF OR FACULTY

A student with a non-academic grievance with other university staff or faculty will be handled in accordance with University Policy 3:002. This policy can be found on the <https://apsu.navexone.com/content/dotNet/documents/?docid=117&public=true>

LABORATORY POLICIES, RULES, AND GUIDELINES

Radiation can be both beneficial and harmful. Therefore, it is necessary to establish policies, rules, and guidelines for the APSU energized laboratory to assure that the student, faculty and innocent bystanders are not irradiated. The radiography laboratory is available for use by the APSU Radiography Students and Faculty.

POLICIES, RULES, AND GUIDELINES:

1. Under no circumstance will the student be allowed to image another person in the laboratory. The laboratory is for teaching purposes only and cannot be used for diagnoses.
2. Students who expose another person are subject to immediate dismissal from the radiography program.
3. Exposures are only allowed with permission from Radiography Faculty.
4. When an exposure is made, all students and faculty will remain behind the lead barrier or outside the room.
5. Dosimetry badges must be worn at all times.
6. Each student is expected to replace equipment and other teaching aids in their proper location.
7. Items should not be placed on the floor as they present a tripping hazard.
8. CR printing shall be performed by faculty only.

9. Quality assurance equipment is not to be removed from the laboratory or classroom without faculty approval.
10. Students using the laboratory outside the regular scheduled laboratory times must ask permission. These students are responsible to see that the overhead lights, x-ray machine, and computers are turned off. At no time will students have access to the control panel without faculty supervision.
11. Students are expected to maintain cleanliness of the lab.

RADIATION PROTECTION PRACTICES AND POLICIES:

INTRODUCTION:

Students should practice all Radiation Protection Practices and Policies for themselves, co-workers, members of the Health Care Team, the general public, persons holding patients, and for the Patient. This includes the following: proper use of personnel radiation monitoring devices, closing the door to the radiographic room during radiographic examinations and exposures, proper collimation, using and applying safety devices; using protective apparel as needed, proper safety precautions with respect to mobile and surgical radiography and radioactive materials.

In addition, all appropriate institutional safety, fire and infection control methods should be considered part of the student's responsibility in delivering safe, competent patient care. It is the student radiographer's responsibility to know and understand these practices and policies so they may become instinctive during the student's professional expertise.

Students desiring to observe/rotate through MRI, must be cleared by the facility using their screening questionnaire. Students will follow the MRI Screening Policy Prior to entering the clinical portion of the program

MRI Policy

The radiography student may have the opportunity to enter the MRI suite; whether it be observation, a rotation, or a call for help. In MRI, the magnetic field is ALWAYS on; therefore, entering the MRI suite with ferromagnetic objects or an implanted device poses a threat to the student or anyone in the suite and is strictly prohibited.

The following protocols are in place:

- All students must complete an MRI safety-screening sheet prior to attending clinical to ensure that they are safe to enter the MRI suite.
 - All students must comply with each clinical site's policy and procedures pertaining to ferromagnetic or metallic objects in the MRI suite to avoid ferromagnetic projectiles from entering the MRI suite.
 - All students will have MRI safety lecture that will include videos on MRI safety
- Students must complete an MRI Screening Form prior to beginning their scheduled clinical rotation

MRI Screening Procedure

MR Safety Screening Protocol Information

The following links contain safety screening forms and videos on MRI safety.

<https://www.acr.org/Clinical-Resources/Radiology-Safety/MR-Safety>

<https://www.ismrm.org/smrt/>

To further assist your knowledge of MRI safety, JRCERT has developed a module titled [Guidance for Programs in MR Safety Education](#), which incorporates some of the ACR guidelines. You are encouraged to utilize the ACR *Manual for MR Safety* as well as policies and procedures established by your clinical setting.

Magnetic Resonance Screening Form for Students

Magnetic Resonance (MR) is a medical imaging system in the radiology department that uses a magnetic field and radio waves. The magnetic field could potentially be hazardous to students entering the environment if they have specific metallic, electronic, magnetic, and/or mechanical devices. Because of this, students must be screened to identify any potential hazards of entering the magnetic resonance environment before beginning clinical rotations

Pregnancy Notice: The declared pregnant student who continues to work in an around the MR environment should not remain within the MR scanner room or Zone IV during actual data acquisition or Scanning

Student Name: _____ Date: _____

	Circle Yes or No	
1. Have you had prior surgery or an operation of any kind?	Yes	No
If yes to question 1, please indicate the date and type of surgery: Date: _____ Surgery Type: _____		
2. Have you had an injury to the eye involving a metallic object (e.g. metallic slivers, foreign body)?	Yes	No
If yes to question 2, please describe: _____		
3. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)?	Yes	No
If yes to question 3, please describe: _____		
Please indicate if you have any of the following:		
Aneurysm clip(s)	Yes	No
Cardiac pacemaker	Yes	No
Implanted cardioverter defibrillator (ICD)	Yes	No
Electronic implant or device	Yes	No
Magnetically-activated implant or device	Yes	No
Neurostimulator system	Yes	No
Spinal cord stimulator	Yes	No
Cochlear implant or implanted hearing aid	Yes	No
Insulin or infusion pump	Yes	No
Implanted drug infusion device	Yes	No
Any type of prosthesis or implant	Yes	No
Artificial or prosthetic limb	Yes	No
Any metallic fragment or foreign body	Yes	No
Any external or internal metallic object	Yes	No
Hearing aid	Yes	No
Other device: _____	Yes	No

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 for. Should any of this information change, **I will inform my program director**

Student Signature: _____ Date: ____/____/____

- ☐ The student has not identified any contraindications to entering MR zone III and IV.
- ☐ The Student has identified contraindications to entering MR Zones III and IV. The student has been advised not to progress past MR Zone II unless screened by an MR level II Technologists onsite at each clinical setting

Reviewed By: _____ - _____
Print Name Signature Title Student Initials

Remember: The Magnet is always on!

The Rules of MRI Safety

To ensure student safety and the safety of personnel and patients in the department, it is important that students respect and follow the rules of MRI safety at all times while in the MRI environment.

- The MRI safety policies and screening requirements for each Clinical Education Setting (CES) must be followed.
- Do not enter the MRI suite unless cleared and accompanied by an MRI technologist.
- Assume the magnet is always ON.
- Carrying magnetic items or equipment into the MRI suite is strictly prohibited. These items can become projectiles causing serious injury or death and/or equipment failure. These items include, but not limited to, most metallic items such as: oxygen tanks, wheelchairs, carts, monitors, IV poles, laundry hampers, tools, and/or furniture. MRI compliant medical equipment is available for use in the MRI department.
- Personal magnetic items must be removed prior to entering the MRI suite. These include the following: Purse, wallet, money clip, credit cards or other cards with magnetic strips, electronic devices such as beepers/cell phones, hearing aids, metallic jewelry (including all piercings), watches, pens, paper clips, keys, nail clippers, coins, pocket knives, hair barrettes/hairpins, shoes, belt buckles, safety pins, and any article of clothing that has a metallic zipper, buttons, snaps, hooks or under-wires.
- Disclose or ask the supervising MRI technologist or faculty about all known indwelling metallic device(s) or fragment(s) the student may have prior to entering the MRI suite to prevent internal injury. Injury risks In addition to the personal items listed, students are advised that any metallic implants, bullets, shrapnel, or similar metallic fragments in the body pose a potential health risk in the MRI suite. These items could change position in response to the magnetic field, possibly causing injury. In addition, the magnetic field of the scanner can damage an external hearing aid, or cause a heart pacemaker/defibrillator to malfunction.

Examples of items that may create a health hazard or other problems in the MRI suite include:

- Cardiac pacemaker, wires, heart valve(s) or implanted cardioverter defibrillators (ICD)
- Neurostimulator system
- Aneurysm clip(s)
- Surgical Metal
- Metallic implant(s) or prostheses
- Implanted drug infusion device

- History of welding, grinding or metal injuries of or near the eye • Shrapnel, bullet(s) or pellets
- Permanent cosmetics or tattoos (if being scanned • Dentures/teeth with magnetic keepers)
- Eye, ear/cochlear, or other implants Medication patches that contain metal foil (i.e. transdermal patches)

Items that are allowable in the MRI suite, and that generally do not pose a hazard to the student or other persons include:

- Intrauterine devices (IUD's)
- Gastric bypass devices (lapbands)
- Most cerebrospinal fluid (CSF) shunts

Prior to a special rotation in MRI, each facility may require additional medical screening (such as a radiograph of the orbits), which may require a physician's order.

Please review the American College of Radiology's guidelines for MRI safety: ACR Guidance Document on MR Safe Practices and the American College of Radiology's MR Safety Guidelines available at: <http://www.acr.org/quality-safety/radiology-safety/mr-safety>

Radiation Dosimetry Policy

APSU radiation monitoring for students and faculty is provided through Landauer. A dosimeter will be issued to the students during the first class for the radiography program. It must be worn whenever the student may be exposed to ionizing radiation, whether during scheduled hours in the Clinical Facility or in the APSU radiography laboratory. The dosimeter issued to the student must be worn on the collar and outside the lead apron and is presumed, therefore, to record whole-body exposure.

This badge should not be left in a vehicle, in areas of extreme heat, in direct sunlight, immersed in water, or dropped. Badges will be collected quarterly, at the 1st of the month. Delinquent exchange of badges will result in lowering of the student's clinical grade. The student will acknowledge the radiation dose at the time of exchange by signing their dosimeter report.

Lost and/or damaged dosimeters must be reported in writing immediately to the Clinical Coordinator or Program Director. The damaged badge must be returned to the department of radiography within 2 school days following the notification of the same. Replacement of a lost dosimeter will be \$60.00. A student who has voluntarily informed the Program Director and Clinical Coordinator, in writing, of her pregnancy will be issued a second dosimetry badge to measure fetal dose; this badge is to be worn under the lead apron, at the waist. (See Pregnancy Policy)

DOSIMETRY REPORT: Records of cumulative radiation exposure will be ongoing during the student's lifetime as a radiographer. When technologists and students are employed as radiographers, the employer will keep this record. If the student was previously monitored for occupational radiation exposure the student should inform the Program Director or the Clinical Coordinator. After reviewing their report the student will initial next to their name, indicating that they have reviewed and understood their report.

APSU students will rarely, if ever, obtain levels of exposure that would cause concern. The Radiography Program believes in keeping radiation exposure to the lowest possible level in accordance with ALARA (radiation exposure should be As Low As Reasonably Achievable). Radiation practices and policies are taught via various didactic and clinical courses and laboratory demonstrations. Verification that the student is in accord with ALARA occurs via ongoing review of each student's clinical practices (i.e. use of shielding, collimators, positioning devices, the knowledge and ability to follow the Cardinal Principles of Radiation: time, distance and shielding).

Students may discuss their dose readings or concerns with the Program Director and/or the Clinical Coordinator. The monthly radiation report for a student must not exceed the maximum permissible dosage for occupationally exposed persons as established by state and federal agencies for Radiologic health. However, if the monthly dosimeter reading exceeds 60 mrem, the student will be counseled, and an investigation will be conducted.

Following the investigation, modifications may be made to the student's clinical rotation to prevent further high exposure levels. Students' annual exposure must be limited to .6 mSv; 60 mrem/month. Should the radiation exposure for an individual student exceed this level (60 mrem/0.6 mSv) in any given month, the student will be counseled. Radiation protection practices and the student's clinical schedule will be reviewed to attempt to determine where/how the student received the exposure. A conference form will also be completed and placed in the student's file. Students shall not exceed state and federal guidelines for radiation exposure.

HOLDING OF PATIENTS:

According to the NCRP report #105, individual medical personnel **should not** have the responsibility of routinely holding patients during diagnostic radiology procedures. In particular, this **should not** be a practice routinely demanded of individuals who are designated as radiation workers (e.g., student radiographers and radiologic technologists (radiographers)). Patients **should** be held only after it is determined that available restraining devices are inadequate. Individuals holding patients for x-ray procedures **should** be provided with lead aprons and lead gloves and **should** be positioned so that no part of their body is exposed to the direct radiation beam. To assist in minimizing exposure, it is important for the student radiographer and radiologic technologists (radiographers) to collimate carefully to the area of clinical interest.

Student radiographers **shall not routinely** be permitted to hold patients. When it is the institutional policy to allow the radiologic technologists (radiographers) to hold patients, the student may alternate with the technologist on a case need basis.

Students **must not** hold cassettes at any time. Students must not be within the primary beam.

PREGNANCY POLICY:

The student has the option of whether or not to inform the program faculty of their pregnancy. If the decision is to voluntarily declare their pregnancy, it **must be in writing and include their expected date of delivery. If the voluntary declaration in writing is not submitted a student cannot be considered pregnant.**

- All **declared pregnant women** will be provided with a copy of NRC Regulatory Guide 8.13.
- All **declared pregnant women** will be provided with a second

dosimetry badge, to be worn at waist level.

The declared pregnant student will have several options based on their individual needs and preferences:

- She may continue in the program as is without any changes
 - She may continue in the program with modifications in the Clinical Assignments
 - She may request a leave of absence from Clinical Assignments and/or the Radiography Program's entire curriculum
 - Pregnancy declaration can be withdrawn at any time by submitting a letter rescinding the previous declaration.

Radiation to the abdomen includes probable exposure to the embryo or fetus. The embryo/fetus is more radiosensitive than an adult. This sensitivity is NOT uniform during the entire gestation period. The interval of real consequence extends from 10 to 40 days post-conception. The NCRP (National Council on Radiation Protection and Measurements) has made specific recommendations in keeping with the concept of ALARA.

Dose limits for pregnant students will be monitored according to the guidelines established by the National Council on Radiation Protection and Measurements (NCRP):

- A “During an entire gestation period, the maximum permissible dose equivalent to the fetus from occupational exposure of the expectant mother should not exceed 0.5 rem” (500 mrem or 5 mSv or .005 Sv)
- B The dose limit for the student radiographer is 1 mSv or 100 mrem per year (0.1 rem).
- C The monthly dose limit for the fetus is .5 mSv or 50 mrem (.05 rem).

INCIDENT/ACCIDENT DOCUMENTATION:

In the clinical setting, accidents may occur that involve the student radiographer. Examples of incidents include but are not limited to:

- A patient falling
- A patient lodging a complaint against a student
- A student is exposed to a patient with TB
- Student falls or is injured at the clinical site

The program director and clinical coordinator must have information on any incidents to respond and follow up appropriately. Within 24 hours of an incident/accident occurring, at Austin Peay State University or an affiliated clinical facility, students must submit written documentation to Radiologic Technology Program faculty. If the Radiologic Technology Program faculty are not available, the documentation of the incident/accident should be submitted to the Allied Health Sciences Department Secretary. The information included in this documentation should include: Who, Why, What, Where, When and Witness information as applicable

POLICY CHANGE FORM

All students will **PROMPTLY** be informed of **ANY CHANGES OR NEW RULES** which apply to this section using the **NEW POLICY FORM**.

The students listed below have received a copy of revised policy concerning:

This policy has been explained to students in a meeting held on
_____.

Consequences were also reviewed, where applicable.

Program Director/Clinical Coordinator

RADIOLOGIC TECHNOLOGY PROGRAM (RADIOGRAPHY)

STATEMENT OF CONFIDENTIALITY

As a student of the Austin Peay State University Radiography Program, I will not divulge any information which comes to me through the execution of my duties while at the assigned clinical facilities.

This shall include:

- Not discussing any patient/client or any information pertaining to any patient/client with anyone (even including my own family) who is not directly working with said patient/client.
- Not discussing any patient/client information pertaining to any patient/client in any place where it can be overheard by anyone not directly working with said patient/clients, especially other patients/clients.
- Not describing any behavior which I have observed or learned through my relationship as a radiography student, except to those authorized to have this information.

I will not contact any individual or agency to get personal information about an individual patient/client unless a release of information has been signed by the patient/client or significant other.

SIGNATURE_____

DATE_____

AUSTIN PEAY STATE UNIVERSITY
RADIOLOGIC TECHNOLOGY PROGRAM (RADIOGRAPHY)

I HAVE RECEIVED AND READ THE STUDENT HANDBOOK FOR STUDENT RADIOGRAPHERS.

I AGREE TO ABIDE BY THE CONDITIONS SET FORTH IN THE POLICIES AND
REGULATIONS FOR THE RADIOGRAPHY PROGRAM.

SIGNATURE_____

DATE_____

CLINICAL EDUCATION – COMPETENCY PROGRAM

General policies

PERSONAL BEHAVIOR EXPECTATIONS FOR STUDENTS IN THE CLINICAL AREAS

PROFESSIONAL BEHAVIORS: Students will always conduct themselves in a professional and dignified manner. Students will not congregate in groups in patient areas and will keep noise to a minimum so as not to disturb others. ***Students are not permitted to make or receive personal phone calls except in emergencies.*** Students who arrive in the clinical facilities under the influence of controlled substances including alcohol, will be sent home (This may result in the dismissal from the Program). There is to be no eating, drinking, gum chewing, smoking, or tobacco chewing in patient care areas. Check with the clinical facility for designated areas.

Electronic Device Clinic Policy

Cell phones, smart watches, earbuds, tablets, and other communication devices are NOT to be carried in the clinical area. If there is an emergency, and a student needs to be contacted while in the clinical setting, the phone call must go through the Clinical Preceptor. Students are urged to tell family/friends/employers not to contact the student during clinical hours unless it is an emergency. **Students who violate this policy will be sent home without attendance credit for the day.**

PARKING: Students are to park in designated areas only.

Clinical Evaluations

Clinical evaluations will be conducted by the designated technologists (only Registered Technologists in good standing with the American Registry of Registered Technologists), Clinical Preceptor, clinical coordinator, and program director. These evaluations are conducted on separate forms and carry various weights in the grading process. **Students must meet the minimum level of competency in each section of the clinical evaluative tool to receive a clinical grade of passing.**

After the evaluations have been discussed with the Clinical Preceptor, they must be electronically signed by the student. **It is the responsibility of the student to keep up with their progress and to make appointments with the Clinical Preceptor to review.** When a student fails to electronically sign the evaluation, the student shall receive a zero (0) for that particular evaluation.

Clinical grades will include a 30% competency testing grade for reaching a minimum of 10 clinical competencies per rotation.

Furthermore, students at the end of the two-year program that have not completed the minimum required of competency evaluations will not be permitted to take the American Registry of Radiologic Technologist Certification Examination.

Clinical rotations are assigned by the Program Director/Clinical Coordinator and are not chosen by the student. Students are expected to attend the clinical site assigned by the Clinical Coordinator. Any request for clinical changes must be in writing.

However, the Program Director/Clinical Coordinator will decide what is best for the student and the University according to course objectives and available space.

A. CLINICAL SAFETY:

Clinical safety is defined as the consistent implementation of scientific principles (physical and behavioral) in the care of assigned clients and professional relationships. Clinical safety includes but is not limited to: the administration of contrast media, the application of radiographic procedures with moderate direction from an instructor (the staff technologist, radiologist, Clinical Preceptor, clinical coordinator, and/or program director), being adequately prepared and maintaining professional interpersonal relationships with peers, clients, faculty, and clinical facility staff.

The student who is frequently unprepared, needs frequent correction, and close supervision, or who fails to consult the instructor appropriately is considered unsafe in the clinical area and will be placed on clinical probation or dismissed from the program if conditions warrant. The primary consideration is the **SAFE** application of all aspects of radiography with a moderate amount of guidance and direction.

A student may not be on probation for clinical safety more than one (1) time during the program.

Clinical Requirements and COMMUNICABLE DISEASE AND IMMUNIZATION

POLICY:

All radiography students are required to provide proof of the following:

- a) Tuberculin skin tests with follow up chest x-ray for positive results. An additional skin test will be required one year after the initial testing to meet our clinical partners' policies.
- b) Influenza vaccine documentation is required annually
- c) Nonsusceptible **Mumps, Rubella & Rubeola** titers
- d) Varicella titer
- e) Nonsusceptible **Hepatitis** titer or verification of initiation of Hepatitis immunization series. Or a student can sign a waiver.
- f) Current TDAP vaccination within ten years

Students who are exposed to a communicable disease in the clinical site through any source such as (but not limited to) needle sticks, patient contact, contact with contaminated supplies, must immediately inform their Clinical Preceptor and the clinical coordinator or the program director. The student must complete all paperwork required by the clinical affiliate and inform the Clinical Coordinator or Program Director.

If a student should contract any type of communicable disease while enrolled in the program, the student must inform the Clinical Coordinator or the Program Director. After review by Program Officials, they may be removed from clinical assignments and/or the classroom. This decision will be based on the advice of medical experts. Readmission will not occur until the student provides the Radiography Department with proof that he or she is no longer contagious.

INFECTION CONTROL PRECAUTIONS:

The use of standard precaution for infection control is essential in the health field. Standard precautions must be used with all patients, whether handling blood or body substances, to protect oneself from exposure to all communicable diseases. Any person can be infected with an infectious disease, even though not exhibiting symptoms. For example, it takes five weeks to twelve months after exposure for a person to develop HIV antibodies.

Following these steps could save your life:

1. Handle blood and body substances of all patients as potentially infectious.
2. **Wash hands** before and after all patient or specimen contact, even when gloves are used.
3. Use procedures which minimize spraying, splashing, spattering, and generation of droplets of infectious material.
4. **Gloves should always be worn when there is potential contact with blood and body substances.**
5. Wear a **gown**, an apron, surgical caps or hoods, and or shoe covers when splashing with blood or body substance is expected.
6. Wear protective **eyewear and mask** if splattering with blood or body substance is possible.
7. All garments should be removed as soon as possible if penetrated by potentially infectious material. Do not take them home to wash. Notify your Clinical Preceptor if contamination occurs.
8. Place used syringes immediately in a nearby impermeable container. **NEVER RECAP, REMOVE, OR MANIPULATE NEEDLE IN ANY WAY.**
9. Contaminated sharps should be placed in appropriate containers.
10. Treat all linen soiled with blood or body substance as infectious.
11. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses is prohibited in areas with potential contact with blood and body substances.
12. Food and drink should not be stored where blood or other potentially infectious materials are present.
13. Specimens of infectious materials should be properly labeled and placed in a leak proof container.
14. All equipment and working surfaces should be decontaminated after contact.
15. If an exposure incident occurs, such as a needle stick, or splash of blood or body substance, immediately flush the wound with soap and water; flush mucous membranes with water or normal saline solution. Immediately after washing or flushing notify your Clinical Preceptor and complete an incident report at the clinical facility. Make a copy of this report and bring it to the program director so it may be permanently placed in your records.
16. Only students with a **PROPERLY FITTED TB MASK** are permitted to knowingly perform x-rays or give patient care to **ACTIVE TB PATIENTS** with **PERMISSION OF THE ASSIGNED CLINICAL FACILITY.**

LEAD MARKERS:

Students are required to use personal lead markers on **ALL IMAGES**.

Competency evaluations **are not valid** without the student's personal lead markers on the image. **STUDENTS WORKING WITHOUT THEIR OWN PERSONAL LEAD MARKERS WILL BE CONSIDERED OUT OF UNIFORM AND DISMISSED FROM THE CLINICAL SETTING.** The lead

markers will be distributed by the Clinical Coordinator or Program Director. Students are required to purchase two (2) sets of personal lead markers. One set will be kept in the Clinical faculty office.

If a student needs to replace a right or left marker they must order a new set and get a replacement from the Clinical faculty.

NOTE:

Students who do not follow these rules will be sent home. No credit will be given for any part of that clinical day.

Competency Training

In an effort to help the student gain proficiency as radiographers of the future, a Competency Program has been devised. This 24-month continuous Competency Program is committed to the Mission of the University and to the Radiography Program itself. Its' delivery provides for a meaningful educational experience during the six (6) semesters of both didactic and clinical education. Each semester acts as a building block to the next semester until the successful completion of the Program when the graduate is considered competent as an entry- level Radiographer and is Registry eligible.

All clinical assignments required will be educationally related and valid. NOTE: If students have any questions regarding clinical assignment(s) validity, the students should seek the assistance of the Clinical Preceptor, Clinical Coordinator, or the Program Director.

The clinical experience is structured to allow a systematic approach reflecting the assessment of the affective, cognitive and psychomotor domains from class lecture, laboratory demonstration, and practicum into the practical aspects of radiography. This program involves 75 competencies or test outs. There are sixty-five (56) initial competencies/test outs, (36 mandatories, 16 electives (15 ARRT and Program and 10 general patient care activities), 7 continuing competencies/test outs, and 4 final/ terminal competencies/test outs. Student electives must have 1 from the head section, 2 ARRT fluoroscopy, and 1 general fluoroscopy. Although a student successfully completes an initial competency/test out, the continuing performance of that examination must be demonstrated and tested via continuing competencies/test outs for the student to excel in the final/terminal competency/test out. If a student is unsuccessful in performing any level of competency/test out the student returns to the laboratory for remedial instruction and will be reassigned to the appropriate clinical site and area to practice under "direct supervision."

The student must complete four final/terminal competencies/test outs as required. The Clinical Preceptor, clinical coordinator, or program director will select these.

The four exams will be selected from different categories. Students cannot perform more than one in each category. The categories include:

- upper and lower extremities thorax/abdomen
- pelvis and vertebral column skull radiography
- contrast studies pediatric radiography
- portable radiography

Final competency tests MAY NOT be simulated.

The first semester of clinical experience begins with observing and assisting in the laboratory setting. As the student continues to learn in the classroom and laboratory settings during this period, the cognitive and psychomotor aspects of the student's education continue to develop, enabling the student to move into a more advanced clinical performance stage. This allows the student to complete an introductory overview of the field, as well as the necessary entry-level radiation protection requirements necessary prior to clinical involvement with patients. After this introduction period, the student is ready for initial rotations in actual patient- radiation areas in the Department of Radiology at either Hospital or Clinic settings.

Clinical Education I & II incorporates clinical objectives, which are more complex than Introduction to Clinical Education, the student will be expected to observe and participate in basic patient care procedures, image acquisition, room maintenance, patient processing, and equipment manipulation. The students' exposure time in the clinical settings is two days each week, gradually moving to a more active phase assessing patients, integrating theory with practical experience regarding equipment, patient positioning, and technique. Students must complete didactic instruction and lab testing prior to testing competency on the specific procedure in the clinical setting.

In Clinical Education III there are fewer didactic classes to allow a higher concentration in clinical experience. Students will be at the clinical facility for four days each week.

During the second year, students will continue to develop and enhance their clinical skills. In Clinical Education IV, students attend the clinical facility three days per week. In Clinical Education V, the last clinical education course, the students attend for 3 days per week and must complete four final/terminal competencies. Completion of Clinical V finds the student radiographer with sound foundations to be employed as an entry-level radiographer. The competency forms and the four 4-week clinical performance evaluations provide feedback on the student's affective, cognitive, and psychomotor skills. Students will be introduced to this format during the classroom lectures and tests and again in lab testing. The Competency Program follows five steps of progression:

2. **LECTURE & DIDACTIC TESTING**: classroom instruction is provided, followed by an examination of the material covered
3. **LABORATORY**: Instruction with a demonstration of positioning skills

4. **LABORATORY TESTING:** Students will be graded while simulating the examination **NOTE:** All competencies whether in the laboratory or hospital/clinical settings require a grade of 90% to pass.
5. **Clinical PARTICIPATION:** Students will be expected to work under the direct or indirect supervision of a Registered Radiographer at **ALL** times.
6. **Clinical Competency Evaluations**
 - **Initial, continuing, and final/terminal competencies/test outs**

NOTE: All competency tests and continued competency tests must be completed before final competency tests may be performed.

* **NOTE:** If a student is unsuccessful in obtaining passing grades during the five steps of clinical education, remedial instruction by program faculty will be provided. Failure to complete the required competency evaluations for any given semester results in an incomplete grade. Failure to complete the required competencies by the beginning of the next semester is grounds for dismissal.

The clinical coordinator, in conjunction with the Clinical Preceptors and program director, plans the daily clinical education experiences based upon the abilities of the students. Students will be scheduled for clinicals from two to four days per week. There is daily direct and indirect supervision of students by the clinical coordinator, Clinical Preceptors, program director, and staff radiographers, involving a collaborative effort for the practical aspect of the students' training. The ratio of registered staff radiographers to students prior to achieving competency will be 1:1.

Laboratory sessions are incorporated into Radiographic Procedures, Image Production & Evaluation, Patient Care, Quality Control, and Radiographic Physics. Labs develop and test the skills the students learn in class.

The student's progress is evaluated in many ways. Competency evaluations are used to measure students' skills and competency level. Objective rather than subjective clinical progress can be accomplished using these tools. These are performed at the student's pace, and require certain expectations of achievement (90%) to obtain a satisfactory course grade. During the 4th, 8th, 12th and 16th weeks (i.e., every 4 weeks) performance evaluations completed by the Clinical Preceptors keep students informed of their progress. In addition, conferences are held at the end of each semester to discuss the student's progress and review competency and exam logs.

STUDENT HANDBOOK IS PART OF YOUR CLINICAL UNIFORM AND MUST BE WITH YOU AT THE CLINICAL SITES AT ALL TIMES.

COMPETENCY GUIDELINES

1. Students may not perform a competency until the student has successfully completed didactic and laboratory testing.
2. Students must perform a minimum of one (1) examination alone under

“direct supervision” before challenging the competency/test out. NOTE:
There are exceptions to this requirement listed.

3. Under “direct supervision” the registered radiographer observes the student’s performance. During the competency/testing, the radiographer will critique and approve the radiographs, complete the required forms, and sign the logbook sheet.
4. A student may simulate a competency/test out as per the “simulation policy.”
5. If the student does not achieve a minimum grade of 90%, the student returns to the laboratory for remedial instruction, and will review the procedure in the textbook.
6. The student and/or the registered radiographer performing the failed competency/test out must notify school personnel so remedial instruction can be arranged.
7. Upon successful completion of the competency/test out, the student can perform all examinations of that type with “indirect supervision” while continuing to achieve additional experience and efficiency.
8. The competency/test out will check proficiency in the areas of patient care: room, equipment, and supply readiness; identification of the procedure, patient, pathology, and patient history; equipment operation; positioning skills; evidence of radiation protection; and image evaluation and critique.
9. The competency must be logged in Trajecsyst before the comp is valid. The faculty should be able to access the images to verify the competency/test out. The exam Id number shall be included with the Record of Competency.
10. All images to be considered for competency evaluation **must** have the student’s right or left markers on each of the images.
11. The views for the routine examination at the clinical site when the competency exam is executed will be followed.

DIRECT SUPERVISION

Under direct supervision the registered radiographer is physically present for the total radiographic examination and approves the images. This is the supervision required **BEFORE THE STUDENT HAS SUCCESSFULLY COMPLETED AN INITIAL COMPETENCY/TEST OUT. IF THE STUDENT NEEDS TO REPEAT AN IMAGE, IT IS TO BE DONE UNDER DIRECT SUPERVISION REGARDLESS OF COMPETENCY STATUS. PORTABLE, FLUOROSCOPY, AND SURGICAL PROCEDURES MUST ALWAYS BE COMPLETED UNDER DIRECT SUPERVISION.**

The following parameters constitute direct supervision:

The registered radiographer shall:

- Review the request for examination in relation to the student’s achievement.
- Evaluate the patient’s condition in relation to the student’s knowledge.
- Be physically present during the examination.
- Review and approve the procedure and radiographs.
- **REPEAT RADIOGRAPH POLICY:**

The registered radiographer shall be present during the repetition of any unsatisfactory radiograph regardless of the student’s competency status. The

repeat must be logged in Trajecsyst.

INDIRECT SUPERVISION

Under indirect supervision the registered radiographer is immediately available (adjacent to the room or location) to assist students, as needed, during the radiographic examination regardless of the level of student achievement. This availability of the registered radiographer applies to all areas where ionizing radiation is in use. **Indirect supervision is permitted only after the student has been deemed competent on a particular procedure.**

The following parameters constitute indirect supervision: The registered radiographer shall:

- Review the request for examination in relation to the student's achievement.
- Evaluate the patient's condition in relation to the student's knowledge.
- Be immediately available to assist the student regardless of the level of student achievement.
- Review and approve the procedure and radiographs.
- **REPEAT RADIOGRAPH POLICY:**

The registered radiographer shall be present during the repetition of any unsatisfactory radiograph regardless of the student's competency status. The technologist must sign the repeat sheet in the student's logbook.

All students **must perform a minimum of one** (two recommended) radiographic examinations under direct supervision and have successfully completed didactic testing in the classroom and laboratory before attempting an initial competency/ test out.

Due to the infrequent nature of the following examinations, exceptions may be made. Students may comp these studies without completing any previous solo exams. The student MUST, however, have successfully tested didactically and in the laboratory setting. Students must also be knowledgeable of the department's procedure and routine.

- | | | | |
|--------------------------|-------------|---------|-----------|
| • Humerus | Femur | Sternum | SC Joints |
| • All cranium/facial | Scapula | Sacrum | SI joints |
| • T-tube cholangiography | Cystography | Coccyx | |
| • Esophagography | Venography | ERCP | |

SIMULATION POLICY:

A student may simulate a maximum of four competencies. This competency should be replaced with an actual competency if and when one becomes available. When the competency is replaced, the student may then simulate another exam.

Procedure for a simulated examination:

- The student performs the radiographic examination on a model or phantom (not a patient). If the phantom is used the student may make an exposure. If a model is used a simulated exposure will be used

Trajecsyst Policy

All clinical documentation including clocking in and out at the clinical site on a daily basis will be done through Trajecsyst. All clinical exams, competencies, and evaluations should be logged in Trajecsyst.

Clock In/Out

The student will clock in at the beginning of the clinical day and clock out at the end of the day. The student can clock in/out using a clinical site computer or a personal device with GPS location enabled. The personal device should be locked or kept in a safe place during the clinic rotation and is only to be used to access Trajecsyst.

Time Exception

In the event that the student is unable to clock in or out on Trajecsyst, the student may submit a time exception. It is the student's responsibility to clock in and out and the time exception should only be used in select circumstances. Clinical absences should also be recorded. Clinical Coordinator will investigate the excessive use of the time exception or any entries that appear out of ordinary. Submitting a time exception that is not accurate will constitute falsification of records.

Clocking in after the scheduled clinic start time will constitute a tardy. It is unacceptable for anyone to clock another student in or out. The student must complete a time exception.

Students may have 4 exceptions per rotation. If the student cannot clock in due to technical errors, the student must have the clinic sign them in on the sign in sheet in the handbook. Exceptions after the 4 allowed constitutes a missed clinic day arrangement. **Failure to clock in or out more than 4 times without an exception is a clinical absence. Each instance thereafter is considered an additional absence.**

Daily Log of Exams

The student will record exams of procedures performed to verify the volume and variety of procedures being performed. The student should record each procedure into the Trajecsyst system for a permanent record. Information entered into Trajecsyst includes: date, number of instances, type of procedure, repeats, participation level (observed, assisted, and performed), and any necessary comments. The daily log sheet should be updated daily; however, must be updated at least weekly. Failure to log exams is equivalent to missed clinical. If it is not documented, the student does not get credit for it. The clinical coordinator will determine the number of clinical days to be made up in this circumstance.

Evaluation of Student's Performance

The Clinical Preceptor is responsible for completing the evaluation; however, it is the student's responsibility to ensure the form is completed. After completion, the student can view it in Trajecsyst. Failure to obtain an evaluation will result in a zero for that evaluation period.

Trajecsyst End of Semester Requirements

At the end of each clinical course, students must ensure the following are completed and submitted:

- Clinical Time Approval by Clinical Coordinator
- Clinical Exam Log Approval by Clinical Coordinator
- Clinical site evaluations of Student
- All required clinical competencies for the semester
- Completion of the site orientation checklist

All items listed above must be completed/submitted by the due date listed in the course syllabus. All evaluations must be submitted before grade entry is due or the student will receive a failing grade or Incomplete for the course.

GLOSSARY OF IMPORTANT TERMS

COMPETENT: The ability to function with limited supervision and assume the required duties and responsibilities.

COMPETENCY EVALUATION: The procedure by which a student's performance and knowledge is evaluated. In addition, the resultant radiograph(s) is/are critiqued and evaluated.

INITIAL COMPETENCY: The first competency evaluation of a specific radiographic examination.

CONTINUED COMPETENCY: A competency evaluation which assesses the on-going competence in categories previously completed.

FINAL/TERMINAL COMPETENCY: A series of (4) random competency examinations from various categories used to demonstrate the student's overall competence. After successful completion the student is considered competent as an entry level radiographer and is Registry eligible.

DIRECT SUPERVISION: A registered radiographer physically present for the duration of the entire examination.

INDIRECT SUPERVISION: A registered radiographer is "immediately available"(adjacent to the room or location) to assist students during the radiographic examination.

SIMULATION: The student performs the radiographic examination on a model or phantom (not a patient). If the phantom is used the student may make an exposure. If a model is used a simulated exposure will be used. A radiograph is used for critique and evaluation.

AFFILIATES/ CLINICAL PRECEPTORS:

Jennifer Thompson- (931)221-6516 Samantha Robinson-(931)221-7240
Terri Crutcher-(931) 221-6443

- Blanchfield Army Community Hospital: Berniece Jones RT (R); 650 Joel Drive, Fort Campbell, KY 42223, (270)956-0273
- Bone and Joint Group: Amanda Lowe, RT(R): 980 Professional Park Dr., Clarksville, TN 37043. (931) 905- 1001
- Tennova Healthcare: Jason Gilmore, RT(R)(IV): 651 Dunlop Lane Clarksville, TN, 37040 (931) 502-1570
- NorthCrest Medical Center: Sabrina Hall, RT(R), 100 NorthCrest Drive, Springfield, TN 37172, (615)384-1531
- Houston County Community Hospital: Amy Grice, RT(R): 302 East Main Street, Erin, TN 37061, (931) 289-4211 Ext. 353
- Horizon Medical Center: Dustin Topping, 111 US-70E, Dickson, TN 37055, (615) 446-0446
- Premier Imaging Center: Paige Youll, RT(R)(M): 490 Dunlop Lane, Clarksville, TN

37043 (931) 245-8622 or (931) 245-8623

- Tennessee Orthopedic Alliance: Mary Pat Stephens, RT(R): 141 Hillcrest, Clarksville, TN 37043 (931) 221-4065
- Three Rivers Hospital: Randy Stewart, RT(R); Kendal Dodd RT(R)(M), 451 Hwy 13 South, Waverly, TN 37185, (931) 296-0298
- Centennial Medical Center: 2300 Patterson Street, Nashville, TN 37203, (615) 342-3590
- Skyline Medical: Joshua Gupton RT (R), 3441 Dickerson Pike, Nashville, TN 37207, 615-769-2420
- Tennova Sango Freestanding ER: 1325 TN-76, Clarksville, TN 37043
- Vanderbilt University Medical Center: Kristin Weatherly and Bob Pertuset 1211 Medical Center Drive, Nashville, TN, 37232 615-936-6468

GUIDE TO LOG BOOK USE:

This book **MUST** be with you whenever you are in the CLINICAL SETTING.

This book is to be used to assist in recording radiological examinations in which the student participates. The student should log all radiological examinations on the appropriate page to be used as a guide to fill out Trajecsyst forms and when Trajecsyst is not available. The patient may be listed by medical record number only.

Identification numbers of competency exams must be entered so that the instructor can perform periodic checks. The student will then submit the entire log upon completion of the program. All logbooks are to be kept neat and in good order. If extra pages are needed, they can be obtained online.

For a competency to be counted it must be recorded in Trajecsyst and have a technologist signature in the logbook under "Competence verified by" AUSTIN PEAY STATE UNIVERSITY RADIOLOGIC TECHNOLOGY PROGRAM (RADIOGRAPHY) CLINICAL EXPERIENCE RECORD

There are sixty-five (56) initial competencies/test outs, (36 mandatories, 16 electives (15 ARRT and Program) and 10 general patient care activities), 7 continuing competencies/test outs, and 4 final/ terminal competencies/test outs.