



# **Student Handbook**

Updated Autumn, 2023

## **Introduction**

Students enrolled in the Central Ohio Technical College Radiologic Science Technology program will be responsible for observing college rules and regulations as stated in the current college [Code of Student Conduct](#).

All radiologic science technology students are required to become familiar with the following program policies, procedures, and requirements. Failure to comply with policies will affect student evaluations and may result in dismissal from the Radiologic Science Technology program if the student shows no improvement or makes no attempt to correct errors after counseling with the radiologic faculty.

Questions relative to this content should be directed to the program faculty.

Failure to read the policies does not exempt you from disciplinary action. All students are required to review the content in the handbook and complete an acknowledgement form.

## **Program Mission and Goals**

### **Mission:**

The mission of the Radiologic Science Technology Program at Central Ohio Technical College is to prepare qualified imaging technologists who practice ethically, respond to patient needs with competence and compassion and help fulfill the community's health care needs.

### **Program Goals/Student Outcomes:**

To accomplish this mission, the radiologic science technology program embraces the following goals:

- Perform entry-level radiography skills.
  - Produce acceptable diagnostic images.
  - Evaluate images for quality.
  - Practice radiation safety.
- Demonstrate accepted standards of professional practice and professional development within the healthcare environment.
  - Create a professional development plan.
  - Demonstrate professionalism in the clinical setting.
- Demonstrate effective communication skills.
  - Communicate effectively within the clinical setting.
  - Utilize appropriate medical terminology.
  - demonstrate effective written and oral communication skills.
- Demonstrate effective problem solving and critical thinking skills.
  - Utilize problem solving skills to solve technique challenges.
  - Correct or improve the clinical images.

# Professional Standards

## **American Registry of Radiologic Technologists**

The American Registry of Radiologic Technologists (ARRT) is the world's largest organization offering credentials in medical imaging, interventional procedures, and radiation therapy. We certify and register technologists in a range of disciplines by overseeing and administering education, ethics, and examination requirements ([ARRT About Us](#)).

The purpose of ARRT certification and registration is to recognize individuals qualified to perform a specific role. For example, the purpose of our Radiography certification and registration is to recognize individuals who are qualified to perform the role of a radiographer. Certification and registration require satisfaction of certain professional standards in medical imaging, interventional procedures, or radiation therapy ([ARRT Certification and Registration](#)).

For information regarding examination content specifications please refer to [ARRT Radiography Examination Content Specifications](#).

For complete information regarding education, ethics and examination requirements please refer to the [ARRT Primary Eligibility Pathway Handbook 2023](#).

## **Accreditation of Educational Programs**

The United States Department of Education recognizes the Joint Review Committee on Education in Radiologic Technology (JRCERT), as the agency which awards and maintains accreditation of radiologic technology programs.

The JRCERT has broad responsibilities of consultation and guidance to educational programs in radiography and radiation therapy technology and administration of the voluntary, peer-reviewed accreditation process in radiography and radiation therapy technology. The JRCERT possesses applications for accreditation, coordinates pre-accreditation site visitations and recommends accreditation to the Board.

The standards for accreditation of educational programs in radiologic technology are contained and published in a document called "[Standards for Accredited Educational Program in Radiography](#)". A copy of the most updated standards are posted in the Radiologic Science Technology lab.

### **JRCERT Contact Information**

20 N. Wacker Drive, Suite 2850

Chicago, IL 60606-3182

P: (312)-704-5300

Email: [mail@jrcert.org](mailto:mail@jrcert.org)

[www.jrcert.org](http://www.jrcert.org)

## **Ohio Department of Health (ODH)**

Per [Ohio Revised Code 4773.02](#)

(A) Except as provided in division (B) of this section, no person shall practice or hold self out as a general x-ray machine operator, radiographer, radiation therapy technologist, or nuclear medicine technologist without a valid license issued under this chapter for the person's area of practice.

(B) Division (A) of this section does not apply to any of the following:

(1) A physician, podiatrist, mechanotherapist, or chiropractor;

(2) An individual licensed under Chapter 4715. of the Revised Code to practice dentistry, to practice as a dental hygienist, or to practice as a dental x-ray machine operator;

(3) As specified in 42 C.F.R. 75, radiologic personnel employed by the federal government or serving in a branch of the armed forces of the United States;

(4) Students engaging in any of the activities performed by basic x-ray machine operators, radiographers, radiation therapy technologists, and nuclear medicine technologists as an integral part of a program of study leading to receipt of a license issued under this chapter or Chapter 4715., 4731., or 4734. of the Revised Code.

Per [Rule 3701-72-01 Licensing of Radiation Handlers Operating in Medical Settings](#)

"Radiographer" means an individual who operates ionizing radiation-generating equipment, administers contrast, and determines procedure positioning and the dosage of ionizing radiation in order to perform a comprehensive scope of radiology procedures on human beings.

"General x-ray machine operator" means an individual who operates ionizing radiation-generating equipment in order to perform standard, radiology procedures; whose performance of such procedures is limited to specific body

sites; and who does not, to any significant degree, determine procedure positioning or the dosage of radiation to which a patient is exposed.

### **Professional Organizations**

Professional organizations exist at several levels for Radiologic Technologists. All organizations actively work for the advancement of the profession and for continued recognition of quality patient care and radiation protection. Students are encouraged to become active members in all professional societies. Additional information can be made available upon request.

American Society of Radiologic Technologists (ASRT)

[www.asrt.org](http://www.asrt.org)

[ASRT Practice Standards](#)

The Ohio Society of Radiologic Technologists

[www.osrt.org](http://www.osrt.org)



## **Patient Bill of Rights**

As outlined by the American Patient Rights Association (APRA) for the [American Hospital Association \(AHA\) Bill of Rights](#)

These rights can be exercised on the patient's behalf by a designated surrogate or proxy decision-maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.
3. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.
4. Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees.
5. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.
6. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the hospital provides or transfer to another hospital. The hospital should notify patients of any policy that might affect patient choices within the institution.
7. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision-maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. Health care institutions must advise

patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

8. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.
9. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.
10. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.
11. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.
12. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.
13. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement and to have those studies fully explained prior to consent. A patient who declines to participate in

research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

14. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.
15. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods.

**Radiologic Technology Student Organization**

**Constitution**

ARTICLE I

Name

The name of the organization shall be: COTC Radiographic Technology

ARTICLE II

Purpose

The purpose of the organization shall be: Social/Academic

ARTICLE III

Membership

All students enrolled in the Radiographic Technology program are eligible for membership, and any Newark campus student interested in the field of Radiology.

ARTICLE IV

Officers

The officers of this club shall be a president, vice president, secretary and treasurer and 2 Social Directors.

ARTICLE V

Meetings and Quorum

Section I: Meetings will be held at least once per semester.

Section II: Special meetings shall be called by the president or at the request of 66% of the membership.

Section III: Two thirds of the members shall constitute a quorum.

## ARTICLE VI

### Amendment

This constitution may be amended at any meeting of the organization by a three-fourths vote, a quorum being present.

# **Radiologic Technology Student Organization**

## **BYLAWS**

### ARTICLE I

#### Duties of Officers

Section I: It shall be the duty of the president to preside at all meetings of this club.

Section II: In absence or disability of the President, the Vice-President shall perform all the duties of the president.

Section III: The secretary shall keep the minutes of all proceedings and record the same. They shall give notice of all meetings and perform such other duties as their office may require.

Section IV: The treasurer shall receive and deposit all funds of the club, pay out the same only on the order of the president or by vote of the membership. They shall make an annual report on receipts and disbursements.

### ARTICLE II

#### Election of Officers

Section I: All officers shall be elected by ballot at a meeting and shall assume office at the close of that meeting.

Section II: Should an officer resign during the club year, the president shall appoint some member to assume that office temporarily and order the secretary to send notice of a special election at the next regular meeting, when vacancy can be filled.

### ARTICLE III

## Dues

The annual dues shall be 5.00 per semester, payable at the beginning of the semester.

## ARTICLE IV

### Committees

Section I: The president shall be empowered to appoint such special committees as they deem necessary at any time or on the majority vote of the members at any meeting. They shall appoint committees as they direct.

## ARTICLE V

### Parliamentary Authority

Roberts Rules of Order shall be parliamentary authority on all matters not covered by the Constitution and By-Laws of this club.

## ARTICLE VI

### Order of Business

1. Call to order, by presiding officer
2. Roll call, by Secretary
3. Reading of the minutes of previous meeting, by the Secretary (followed by corrections and vote of acceptance by members)
4. Treasurer's report
5. Reports and committees
6. Unfinished business
7. New business
8. Program of the day
9. Adjournment

# General Policies



## **Student Health General Requirements**

COTC is contractually obligated to affiliated healthcare agencies regarding assured healthcare status of students. Each student is responsible for verifying his/her healthcare status as required by the Radiologic Science Technology (RT) program and our affiliated clinical agencies. The student should be aware that a clinical agency may request copies of health information, such as vaccine records, to verify compliance.

Each student is responsible for any needed emergency care, medical supervision of chronic conditions, and costs involved. When questions or symptoms exist, the faculty may request that a student obtain written verification of his/her health status from their healthcare provider. If a student has experienced a health alteration which has the potential to negatively impact the student's clinical performance, the faculty may request a medical release from the student's physician verifying they may perform without limitations.

Students admitted into the Radiologic Science Technology program must comply with immunization and other health requirements before the first day of clinical. Students are expected to remain in compliance as long as they are actively enrolled in the program and courses.

**The student must inform the Program Director of any disability, change in health status and/or therapy which may affect ability to safely perform the role of an RT student.**

- The student may be required to provide a written release from their physician, verifying that they may perform without limitations.
- The physical exam and immunization form must be completed by a physician or nurse practitioner designee. A physical exam must be completed within the last 12 months. All documentation must be complete BEFORE the first day of clinical.
- All required immunizations should be current. (See Immunization Policies)

- The Program Director or Clinical Coordinator will collect and review the documentation for the student health folder.
- Students must keep a set of all personal health information. **The clinical coordinator retains student health files for one term after graduation. After that date, all health files are destroyed.**
- Students who are identified as having possible latex allergy must be medically evaluated about potential risk and are strongly urged to consider another field since latex is prevalent in the healthcare environment. Students with confirmed latex allergy continue in the program at their own risk. The College assumes no responsibility for exposures and possible resulting student health problems.

**Important notice: Students are not permitted to go to their clinical experience until all required health information is provided and all required immunization and other health requirements are complete. Failure to comply will result in an unexcused absence.** (See attendance policies) OAG Review Nov. 2009 Approved: 08/12

### **Student Health Immunizations**

COTC is contractually obligated to comply with the policies of our partner clinical affiliates. Therefore, to protect students, patients, and colleagues, students are required to provide evidence of adequate immunity to the following diseases. This list is subject to change – students will be promptly notified of any changes. **Failure to comply with this policy will result in the student not being able to attend the required clinical or practicum portion of their program.**

#### **TB: this test is required by the State of Ohio (3701-17-07)**

- If the student has never received a TB skin test, or it has been longer than 12 months since the last test, a 2- step Mantoux test is required.
- If the student has participated in annual TB testing, the most recent results must be within 12 months of admission – otherwise, a 2-step Mantoux is required.

- The student will comply with annual TB testing during the time they are enrolled in RT courses. The test shall be repeated annually within thirty days of the anniversary date of the last testing. Radiologic Science Technology students are expected to complete annual TB testing prior to their anniversary date. Failure to comply will result in disciplinary action.
- Written evidence must be provided. Negative results should be written in mm (e.g., 0 mm)
- If there is a history of a positive TB skin test (conversion), a chest x-ray report showing no evidence of active disease is required. This student will also complete a TB screening questionnaire upon admission, and annually during the time they are enrolled in RT courses. The student is to report promptly any symptoms suggesting tuberculosis.

**Tetanus:**

A tetanus/diphtheria (Td) booster is required if 10 years have elapsed since the last booster.

- The CDC Advisory Committee on Immunization Practices recommends that all healthcare personnel (HCP), regardless of age, should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap and regardless of the time since last Td dose. Tdap is required for the COTC RT Program.

Reference: ACIP Provisional Recommendations for Health Care Personnel on use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine (Tdap) and use of Postexposure Antimicrobial Prophylaxis, posted April 4, 2011

<http://www.cdc.gov/vaccines/recs/provisional/downloads/use-of-Tdap-in-hcp.pdf>

**Measles, Mumps and Rubella:**

- Student must provide written evidence of the required two vaccines; OR
- Provide written documentation of titer results (verbal history of disease is not reliable).

NOTE: Students should review Recommended Adult Immunization Schedule – United States, 2009.

**Varicella:**

- Student must provide self-report of history of varicella disease (chickenpox); OR
- If unknown or no history of disease, student must provide results of varicella titer; OR
- Provide written documentation of two (2) varicella vaccines given no less than one month apart.

**Hepatitis B:**

- Provide written evidence from the healthcare provider indicating the three dates you have received the vaccine series; OR
- Provide evidence the student has started the series and has had at least the first injection in the 39 series by the first day of clinical; OR
- Provide written documentation of titer results

NOTE: Students who are admitted to the Radiologic Science Technology program with only the first of the series of three injections are expected to complete the series as required and are accountable for providing evidence to the clinical coordinator.

**Flu:**

- Student must provide written evidence of having received the seasonal flu vaccine within the past 12 months, AND
- Student will maintain compliance with annual seasonal flu vaccine requirement during the time they are enrolled in RT courses.
- Student must provide written evidence of having received the flu vaccine once it becomes available.
- Effective Autumn semester 2015, students who report an egg allergy are expected to receive FluBlok, which does not use the influenza virus

or chicken eggs in its manufacturing process. (See CDC Media Advisory, released 6/20/13)

**Waivers:**

A student may receive a waiver on health grounds if he or she presents a written statement from a licensed physician indicating that immunization against any or all of the diseases for which immunization is required is medically contraindicated, detrimental to, or not in the best interest of the student. Specific reasons should be noted, such as allergy to components of the vaccine. The physician's statement shall document whether the contraindication is permanent or temporary, and if temporary, provide assurance that the student will receive immunization(s) at the first reasonable opportunity. (For example, rubella vaccine should not be given to pregnant women.) If the student fails to complete the immunizations and provide evidence of same, the student will not be permitted to enter or remain in the program. If the student objects to any immunization due to religious beliefs, he or she must submit a signed written statement stating that they have chosen not to be immunized because he or she is an adherent to a religion the teachings of which are opposed to such immunizations. A signed statement from the student's religious leader should be provided to support the student's legitimate objection. Students who are unwilling or unable to comply with the immunization policy must understand that some clinical agencies prohibit the presence of unvaccinated students at their facility. While COTC will make reasonable efforts to find appropriate alternate clinical rotations for these students, there is always the risk the student will not be permitted to complete clinical or practicum rotations which are a required part of the curriculum. OAG reviewed 11/09 Approved 8/12

## **Communicable Diseases**

Radiology is a health care field and occasional contact with patients having a communicable disease is likely. As stated in the ASRT Code of Ethics, "Radiologic Technologists deliver care unrestricted by concerns for ... nature of disease or illness." Students are expected to become knowledgeable of infection control procedures and take appropriate precautions and follow all recommended steps. Students may at any time, and for any procedure or duty, elect to wear disposable gloves. This is especially recommended if the student has exudative lesions or weeping dermatitis. Gloves must be changed between each patient and hands washed.

Students exposed to a known case of HIV infections through direct contact of infective serum or plasma by: needle stick, cuts or abrasions, mucous membrane exposure, should be evaluated serologically as soon as possible (HIV serology test). Students are expected to contact their personal physician. Neither the college nor the clinical affiliates assume responsibility for the cost of the testing procedures. In the event the student is exposed to any other communicable disease, the protocol of the affiliate institution will be adopted and explained to the student. A record of this consultation will be kept in the program director's office and the clinical affiliate.

## **CPR**

Students will be learning in the clinical environment and radiographing patients who are in critical condition or have sustained life-threatening injuries. Knowledge of resuscitation techniques is imperative. Therefore, Central Ohio Technical College requires that all students be certified at the HealthCare Professional level of CPR (adult, infant and child by the **American Heart Association**) before beginning clinical education.

It is the student's responsibility to keep certification current for the duration of their education. CPR classes are available through the **American Heart Association**. If there is difficulty locating a CPR class, contact the faculty of the Radiologic Technology Program for assistance. Upon completion of the CPR course, present your card to the faculty so it may be entered in your record.

The following guidelines have been adopted by Central Ohio Technical College relative to instituting CPR:

Whenever possible, the agency staff should make the decision to begin Cardiopulmonary Resuscitation (CPR) on a patient. In the event of a cardiac and/or respiratory arrest, the student will be responsible for:

1. Calling for help
2. Placing the patient in a supine position (lowering side rails if in bed)
3. Opening the airway
4. If help does not arrive within one minute, the student will call again for assistance
  - a. CPR may be initiated based upon the student's current knowledge of this patient
5. Students may participate in CPR at any time under the direction of appropriate facility personnel.

### **Professional Liability Insurance**

Due to direct patient contact, the College provides professional liability insurance which provides coverage only while you are assigned to the clinical site in a student capacity. If you wish to carry an individual policy it should be in the category of Student Radiologic Technologist.

### **Health Insurance**

Neither Central Ohio Technical College nor the clinical affiliates assume responsibility for medical expenses that may be charged to you for incidents occurring during your clinical experiences. Therefore, you are urged to purchase and maintain personal health insurance. If you already have a policy you should check the details of coverage. If an injury occurs while the student is participating in clinical education, the emergency room facilities will be made available to the student. However, the student will be billed for services rendered.



## **Radiologic Employment of Students**

1. All students have the privilege to obtain any type of employment while enrolled in the Radiologic Technology Program. It is recommended that students accepting employment allocate adequate time for academic responsibilities.
2. Students who accept employment at an affiliated clinical site **cannot be scheduled** as an employee during the same time as normally scheduled clinical assignments.

It is the responsibility of the student to avoid conflicts in scheduling. A student may NOT be paid or viewed as employee while scheduled in the clinical area as a student. The student is responsible for assuring that this does not happen. If this occurs, the student may be immediately dismissed from the program.

3. A student who is working as an employee is NOT eligible for competencies evaluations. In the event that this occurs, the student may be immediately dismissed from the program.
4. A student who is working as an employee may NOT utilize the Central Ohio Technical College radiation badge. This is to be worn when assigned to the clinical area as a **student only**.

## **Unacceptable Conduct**

The code of student conduct is established to foster and protect the core missions of the college; to foster the scholarly and civic development of the college's students in a safe and secure learning environment, and to protect the people, properties and processes that support the college and its missions.

Central Ohio Technical College welcomes diverse beliefs and values academic freedom and the open exchange and expression of thoughts, opinions and ideas.

Please refer to [The Code of Student Conduct](#) college policy

The following are examples of unacceptable conduct, but is not limited:

- Possessing drugs or liquor or engaging in their use while on a clinical assignment.
- Sleeping on clinical assignments.
- Engaging in theft of any article from the clinical affiliation.
- Engaging in any immoral conduct while on clinical assignments.
- Habitual or excessive tardiness and/or absenteeism from clinical assignments.
- Smoking on college premises or clinical sites.
- Eating in areas not specifically designated for that purpose.
- Loitering in the Radiology Department at times not specific for clinical assignments.
- Completing an attendance record for another student.
- Falsification of timecards/attendance records. This includes falsification of times and signatures.
- Loitering in technologists lounge area.
- Acceptance of any type of gratuity or "tip" from a patient or patient's family.
- Breaching patient confidentiality.

## **Due Process**

Failure to adhere to all college policies, rules and regulation and all clinical affiliation policies, rules and regulations may constitute academic misconduct.

For more information, please refer to the Academic Policies and Procedures [web page](#)

## **Nondiscrimination Policy**

It is the established policy of Central Ohio Technical College not to discriminate against any individual or group of individuals for reasons of race, color, religion, ancestry, national origin, sexual orientation, age, sex, disability, or veteran status. The College is fully committed to providing equal opportunities in all employment-related activities education programs and other activities of the College. Central Ohio Technical College will fully comply with all federal, state, and local laws and regulations to guarantee equal opportunities. The Vice President of Human Resources is responsible for the prompt investigation of matters concerning discrimination.

## **Criminal Records Policy**

Part of the responsibilities of radiographers includes working with the pediatric population. Because of this, all students will be finger-printed and their criminal records checked. Students must have a current criminal background check (current is defined as completed within the previous 12 months) prior to beginning the program. Students having criminal records for anything other than speeding/parking violations might not be eligible to take the national registry exams, be placed in health care facilities. Depending upon the status of the record, the student would be advised to submit an early evaluation from the ARRT to determine their eligibility to set for the ARRT registry. See the Professional Conduct Section of the Handbook for further details.

## **Technical Standards**

All students must be physically, emotionally, and mentally able to perform the duties of a radiographer. Students will be questioned relative to performance of actual radiographer duties. The student must be able to practice safely, and attend to the needs of the patient, to be successful in the field. If the student is unable to meet these standards, possible reasonable accommodations can be investigated. However, the safety of the patient is the foremost responsibility of the professional radiographer. This cannot be jeopardized.

## **Alcohol & Drug Dependency/Abuse Policy**

Central Ohio Technical College, Radiologic Science Technology program policy prohibits all students from unlawful manufacture, distribution, dispensing, possession, or use of alcohol or controlled substance while on the grounds of the clinical affiliates or the college campus. Reporting for class or clinicals while under the influence of alcohol, prescription or illegal drugs, or narcotics, or other chemical, or in a physical condition making it unsafe to practice clinically or participate as a student is unacceptable. This policy is in conjunction with an effort of the affiliates and the college to provide a safe and healthy classroom and clinical work environment. The abuse of drugs or alcohol is unsafe for faculty students, and patients.

The student is required to complete drug screening testing at a facility designated by the College. All test results, positive or negative, will be sent to the appropriate college administrator. In the event of a positive test result, students will not be permitted into clinical settings unless:

1. The student wishes to refute the test results and:
  - a. Provides the appropriate college administrator verification of prescribed medications that would result in a positive screen
  - b. Retests at their own expense
  - c. Provides the results of the second test, whether positive or negative to the appropriate college administrator
  - d. The second test is negative
2. Students testing positive on the second test:
  - a. Should meet with the Newark Campus Counselor
  - b. Will not be permitted into the clinical setting unless both of the following conditions are met:
    - i. The student reapplies for admission as would a new student to the program and is accepted

ii Provides the appropriate administrator with documentation from a certified drug and alcohol counselor indicating readiness to reapply to the educational program and prognosis for a full recovery.

If any student demonstrates an impaired ability to **perform** job duties, is suspected of alcohol or drug abuse, or is suspected of violating this policy, they will be removed from the classroom or clinical area. The student will be immediately required to submit to a medical evaluation and/or a drug or alcohol screening. If any detectable level of alcohol/drugs not accountable for by prescription, is discovered the student will be required to submit to complete a treatment program for rehabilitation to remain in the program. If the student refuses to obtain treatment, they may either withdraw or fail the course. The medical examination may be requested by either program faculty or the affiliate Clinical Preceptor or designated representative.

Medical marijuana cards: Clinical sites do not accept medical marijuana cards and a positive drug screen disqualifies students from being placed clinically. A negative drug screening is required while enrolled in the Radiologic Science Technology program. Students who have a medical marijuana card at New Student Orientation will be provided extra time to take their initial drug screening if needed.

The student is reminded that they are responsible for knowledge about the Newark Campus Policy for Drug Free Schools published on the COTC website.



## **Readmission to the Radiologic Science Technology Program**

Readmission into the Radiologic Science Technology program will be determined by the Radiologic Technology Readmission Committee.

Readmission is not automatic. Students wishing to request readmission must apply in writing before the first day of the fourth week of the semester prior to the one in which the student wishes to enroll. No requests will be taken more than two semesters before the anticipated enrollment.

- The student must submit a letter to the committee addressing the reason for the previous failure or withdrawal. It is the student's responsibility to prove that the reasons(s) for the previous withdrawal/failure have been altered and that the student has a strong probability of successfully completing the program at this time.
- The student must submit two clinical recommendations. One of these must be from the Clinical Preceptor of the assigned clinical facility. The second recommendation must be from a Registered Technologist at the clinical site. These letters must address the students' clinical abilities demonstrated while the student was assigned.
- The student must have a cumulative GPA at COTC of 2.00 or above to request readmission
- The student who has been out for more than one semester must successfully demonstrate proficiency in the clinical skills necessary to meet the prerequisite criteria. This will be done by simulations. Program faculty will be serving as evaluators. All competencies must be completed with an 85% to be acceptable. Examinations will include affective, psychomotor, and cognitive skills and include film/image evaluation. Admission into the program is contingent upon demonstrating all prerequisites and skills for the clinical sequence. All evaluations must be completed prior to the first day of the semester of re-admittance.
- The committee may, at their discretion, request a personal interview with the readmission candidate for clarification.

- If the student has been away from the program for more than 3 semesters, the Committee may recommend retaking previously passed courses for current information.
- Students may apply for one re-admittance only, regardless of the reason. i.e., failure or withdrawal.
- Students will be considered for readmission based on space available, previous demonstrated cognitive, psychomotor, and affective skills. Both didactic and clinical performance will be considered. Unacceptable conduct in any one area may be sufficient to deny re-admittance.
- The decision of the committee will be final. Candidates will be notified by the ninth week of the semester prior to re-admission.

Note: If the students fails/withdraws during the first semester in the program, they must reapply for admission through the normal admissions process.

## **Policy on Complaints of program Non-Compliance**

Central Ohio Technical College Radiologic Technology program maintains accreditation by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The program makes every attempt to be in total compliance with the Standards established by that organization. A copy of the Standards can be found in the Radiologic Science Technology lab and on the JRCERT website <https://www.jrcert.org/>. Should an individual believe that COTC is in violation of the Standards, students should follow COTC's policy and timelines for due process found on the College's website. The student may also contact the JRCERT at:

JRCERT

20 N. Wacker Dr., Suite 2850

Chicago, IL 60606-3182

Phone: (312) 704-5300

Email: [mail@jrcert.org](mailto:mail@jrcert.org)

# **Clinical Practice Policies**

## **Clinical Course Sequence Goals**

Radiologic Science Technology is an applied science and hands on clinical education is an ongoing part of the curriculum. Students will be assigned to various clinical affiliates starting in the autumn semester of their first year. The main goals of clinical education are to:

1. Acquire proficiency in a wide variety of diagnostic radiologic processes by applying classroom theory to the actual practice of technical skills on specified levels of competency.
2. Develop and practice professional work habits and appropriate interpersonal relationships with patients, support personnel and other members of the healthcare team.

## **Clinical Affiliations**

Students enrolled in the Central Ohio Technical College Radiologic Science Technology program will be assigned various clinical rotations by the program faculty in collaboration with student placement coordinators in accordance with the clinical affiliate agreements. COTC maintains affiliate agreements with various healthcare systems to provide diverse clinical education opportunities for students. Students enrolled in the program shall comply with all policies and procedures of the affiliate in which they are assigned. Students are responsible for completing all required pre-clinical orientation education provided by the student coordinators and Clinical Preceptors.

### **COTC maintains the following affiliations:**

Coshocton Regional Medical Center ----- Coshocton

Fairfield Medical Center ----- Lancaster

Fairfield Medical Center River Valley Campus ----- Lancaster

Grant Medical Center ----- Columbus

Knox Community Hospital ----- Mt. Vernon

Licking Memorial Hospital ----- Newark

Licking Memorial Hospital Downtown Urgent Care ----- Newark

Nationwide Children's Main Hospital ----- Columbus

Nationwide Children's Westerville Close to Home ----- Westerville

Mount Carmel East ----- Columbus

Mount Carmel Grove City ----- Grove City

Mount Carmel St. Ann's ----- Westerville

**Clinical rotation schedules will be as follows:**

1<sup>st</sup> rotation ----- Semesters 1 & 2

2<sup>nd</sup> rotation ----- Semester 3

3<sup>rd</sup> rotation ----- Semesters 4 & 5

\*Clinical rotations may vary based upon clinical competency needs to be evaluated and determined by the program faculty.

The clinical affiliates are independent agencies concerned primarily with patient care and therefore, have the right to deny access to any student who they deem unfit to represent them to the public. This may include but is not limited to student actions, skills, attitude, or poor professional appearance and can occur at any time during a semester. It is the students' responsibility to display conduct in a manner appropriate to the professional environment. In the event a student dismissed from a clinical site and cannot be re-assigned a new clinical assignment, an unsatisfactory grade will be given and the student will not be able to continue in the program. This policy is strictly adhered to and there are no exceptions.



## **Contact Information for Clinical Affiliations**

Each clinical affiliate has at least one designated Clinical Preceptor. This is a technologist who is responsible for students during their clinical assignments. Students should report to their Clinical Preceptor regarding problems or questions relative to the program/hospital policies and procedures relating to the clinical environment. Recognized Clinical Preceptors for each site are listed below.

### **Coshocton Regional Medical Center**

1460 Orange Street  
Coshocton, Ohio 43812  
Radiology Department Phone Number: 740-623-4116  
Manager of Diagnostic Imaging: Joanna Moreland, R.T. (R) (CT)  
Clinical Preceptor(s): Joanna Moreland, R.T. (R) (CT)

### **Fairfield Medical Center**

401 N. Ewing Street  
Lancaster, Ohio 43130  
Radiology Department Phone Number: 740-687-8130  
Radiology Manager: Wendel Crosby, R.T. (R) (CT)  
Clinical Preceptor(s): Gene Klinger, R.T. (R)

### **Fairfield Medical Center – River Valley Campus**

2384 N. Memorial Drive  
Lancaster, Ohio 43130  
Radiology Department Phone Number: 740-681-7473  
Radiology Manager: Christopher Snider, R.T. (R) (MR)  
Clinical Preceptor(s): Hannah Shaw, R.T. (R)

### **Grant Medical Center**

111 S. Grant Avenue  
Columbus, Ohio 43215  
Radiology Department Phone Number: 614-566-7049  
Manager of Imaging Services: Susan Felty, MBA, R.T. (R) & Jessica Hartinger, MBA (Ohio Health Physician Group, Orthopedic Surgeons)  
Clinical Preceptor(s):

Michi Fletcher, R.T. (R)  
Barbara Stewart, R.T. (R)

**Knox Community Hospital**

1330 Coshocton Avenue  
Mount Vernon, Ohio 43050  
Radiology Department Phone Number: 740-393-9040  
Chief Technologist: Andrea Nyhart, R.T. (R) (CT)  
Clinical Preceptor(s):  
Jacqueline Ferguson, R.T. (R)  
Brad Sharp, R.T. (R)

**Licking Memorial Hospital & Licking Memorial Downtown Urgent Care**

1320 W. Main Street  
Newark, Ohio 43055  
Radiology Department Phone Number: 220-564-4710  
Radiology Manager: Debora Briggs, R.T. (R) (T)  
Clinical Preceptor(s): Devin Fazakas, R.T. (R)

**Nationwide Children's Main Hospital**

700 Children's Drive  
Columbus, Ohio 43205  
Radiology Department Phone Number: 614-722-9228  
Radiology Clinical Manager: Sarah Cline, CRA, R.T. (R)  
Clinical Preceptor(s):  
Rebecca Tumblin, B.S., R.T. (R)  
Kylie Marinacci, R.T. (R)

**Nationwide Children's Westerville Close to Home**

433 N. Cleveland Avenue  
Westerville, Ohio 43082  
Radiology Department Phone Number: 614-355-8340  
Radiology Manager: Becky Shaffer, B.S. R.T. (R)  
Clinical Preceptor(s):  
Jean Merecicky, R.T. (R)

**Mount Carmel East**

6001 Broad Street

Columbus, Ohio 43213

Radiology Department Phone Number: 614-234-6770

Operations Manager, Imaging: Mark Aitken, R.T. (R)

Clinical Preceptor(s):

Shane Hoskins, R.T. (R)

David Kirk, MSRS, R.T. (R)

**Mount Carmel Grove City**

5300 N. Meadows Drive

Grove City, Ohio 43123

Radiology Department Phone Number: 614-663-5600

Operations Manager, Imaging: Lisa Noble, BA-HCM, R.T. (R)(MR)

Clinical Preceptor(s):

Barbara Manu, R.T. (R)

Steven Parks, B.S., R.T. (R)

**Mount Carmel St. Ann's**

500 S. Cleveland Avenue

Westerville, Ohio 43081

Radiology Department Phone Number: 380-898-4025

Operations Manager, Imaging: Timothy Coffman, R.T. (R)

Clinical Preceptor(s):

Toyia Hall, R.T. (R)

Luke Peterson, R.T. (R)

## **Travel Expenses**

Travel to the clinical locations is the responsibility of the student. Every attempt will be made to schedule students at a facility in close proximity to their residence or arrange carpooling for at least one rotation, if possible. However, clinical assignments are not prioritized based on geographical needs as much as educational needs. The program strives to assign each student to clinical facilities that best meet the learning styles and professional growth for the student. Access to a personal mode of transportation is the students' responsibility.

## **Lunch/Breaks**

Students may pack their lunch or purchase meals in the hospital cafeteria. Some facilities extend their employee discount to students but to receive this benefit you must ensure you are in uniform with an appropriate ID badge displayed. Coffee breaks, lunch or dinner schedules will be assigned at the discretion of the Clinical Preceptor/supervisor. Students are permitted to take one 15 minute break for each 4 hour block of time in which they are scheduled. Students are also permitted to take one 30 minute meal break. Since clinical hours are calculated from arrival in the department to departure and include all breaks, **students are not permitted to leave the affiliate for breaks**. If a student leaves the premises for any reason, this must be documented on their timecard with appropriate signatures and clinical points will be assigned. If the student chooses not to take lunch/breaks, **he/she cannot deduct this from the scheduled assigned time**.

## **Clinical Attendance**

Radiology is an applied science and clinical education provides the opportunity to become proficient. You cannot perfect your skills if you are not present in the clinical environment. If unavoidable circumstances result in tardiness or absence the student is required to notify their designated Clinical Preceptor, by calling the Radiology department number, **prior** to the start of their scheduled shift. Do not ask your classmates to “pass the information” along to your Clinical Preceptor. Clinical points will be assigned for tardiness and absence according to the clinical grade policy. Habitual tardiness and/or absenteeism may result in an unsatisfactory grade in the clinical course and result in dismissal from the program. Any absence of **three or more consecutive days** for reason relating to illness will require a physician statement releasing the student to resume normal clinical assignments.

## **Clinical Attendance Policies**

1. Students must complete 90% of the scheduled clinical education days to receive a satisfactory “S”, passing grade.
2. These hours must be completed prior to the end of the scheduled semester for grade submission.
3. If the student misses more than the hours allows (16 hours in the autumn/spring semesters and 24 hours in the summer semester).

### **Makeup time**

- a. Students may elect to makeup the time with a maximum number of makeup hours not to exceed 16 hours.
- b. Makeup time will be scheduled for the same clinical hours and rotations originally missed and must be completed during finals week.
- c. Final exams will NOT be re-arranged to accommodate makeup time.
- d. Makeup time will erase the original number of points assigned for clinical absence (16 hours maximum), all other points will remain.
- e. Scheduling of makeup time is to be coordinated ahead of time with the Clinical Preceptor and Clinical Coordinator.

4. Long term medical problems (i.e., pregnancy, surgery) will be addressed on an individual basis. Students may elect to take a medical leave for a set period of time in the event a long-term medical problem occurs. Students must discuss this with the faculty.

### **Clinical Attendance Documentation**

Each student will be required to maintain a timecard for documentation of clinical attendance. The student is responsible for ensuring and maintaining accurate records. Timecards must include the date, time of arrival/departure and initials of the Clinical Preceptor or technologist. If the card is not filled out completed, the student will be considered absent for the day regardless of the circumstances.

Falsification of timecards, relating to date, time or the signature is deemed as unprofessional and unethical behavior. This is a direct violation of program policies and procedures and the ethical responsibilities of a radiographer. A student suspected of falsification will be reported for **academic misconduct, receive a “0” for that assignment which may ultimately result in dismissal from the program.**

### **Maximum Weekly Time Commitment**

Based on JRCERT Standards, students enrolled in the Central Ohio Technical College Radiologic Science Technology program will not be in the classroom and clinical for more than 40 hours per week. This refers to actual scheduled commitments and does not include homework or outside assignments.

Central Ohio Technical College  
Radiologic Science Technology  
**Winter Weather Policy**

1. In the event the Newark Campus is **officially closed**, there will be no classes and no clinical education. This time will not be rescheduled or made up.
2. In the event the Newark Campus **is not closed**, but severe weather prohibits students from attending clinical, students have options:
  - a. Be assessed the points assigned to an absence. Each day missed will be the full number of points.
  - b. Make the time up (arranged with the Clinical Coordinator) and no points will be assigned.

If the student selects option b, they must contact the Clinical Coordinator personally or by phone for approval. The make-up time will be scheduled by the Clinical Coordinator regarding affiliate availability. This time should be made up completely within 2 weeks of the snow day, if possible. Failure to follow these guidelines will negate this option.

- c. In the event the weather is bad (snowy, icy) the student may decide to come in late to allow time for the roads to clear. The student has 2 options available:
  1. Take the points for being late

OR

2. Stay the complete number of hours scheduled for clinical. (i.e., if the student is scheduled from 7:30 - 3:30 and arrives at 9:00, they may elect to stay until 5:00 to complete the clinical assignment)

**Students are reminded that they MUST call the Clinical Preceptor if they are going to be absent or significantly late. Failure to do this will result in assignment of points.**



3. If the student arrives at the clinical site and subsequently the College cancels classes, the student may:
  1. Elect to leave- inform Clinical Preceptor appropriately
  2. Stay the full day and take professional time off later

This policy only applies to **winter related weather** problems, usually encountered in Spring semester. It cannot be utilized in any other circumstances.

The Clinical Coordinator will make the determination if the student is abusing this policy and may deny its use.

## **Clinical Room Schedules/Assignments**

Prior to the start of each clinical rotation students and Clinical Preceptors will be provided with a clinical room/area schedule. These assignments are scheduled by the program faculty in collaboration with Clinical Preceptors. Students are permitted to work in different areas at the clinical site but the following guidelines must be met:

1. Prior approval from designated Clinical Preceptor
2. Ensure no infringement upon another student's opportunity to learn with all students given equal learning opportunity
3. The student is switching to another area with the intent to learn or have more opportunity for gaining competency evaluations

At the beginning of each clinical day the student should:

1. Report to their assigned area by the beginning of their scheduled shift.
2. Identify the radiographer assigned to the area.
3. Introduce themselves to the radiographer.
4. Discuss with the radiographer a plan for the day in that room/area.

As the student, if you do not know what to do then ask. Do not stand idly and observe someone else working. There are many duties associated with each individual exam and you should begin to anticipate them and work with the technologist to get them completed. The technologist is responsible for your work and will determine when you are capable and ready to assume new responsibilities. They are the authority in the radiography room and therefore should provide supervision for the student. You must communicate with the technologist in your area regarding your location throughout the day. Failure to do this is an assessable violation.

## Clinical Point System

The grade you earn in the clinical courses will reflect your knowledge and skill. However, numerous repeated policy violations will result in an unsatisfactory grade “U” in the clinical component. Your conduct in the clinical component will be calculated into your assigned course grade. If all the clinical policies are abided by and the competencies are met, your grade in this course will be Satisfactory “S”. However, when your clinical performance is not in accordance with the handbook, you will receive points for each violation. When **more than 21 points** are accumulated, the student will be counseled by program faculty, which may result in dismissal from the program. The students are reminded to familiarize themselves with all program policies and maintain their own records of clinical points. If the student is unsure of how many points were accumulated they can check with the faculty to confirm the number of points accumulated to date.

### Journals and Timecards

2 points ---- Late journal

2 points ---- Late timecard

2 points ---- Incomplete/illegible timecard

22 points ---- Failure to turn in timecard by last scheduled class (unless prior arrangements have been made and approved with faculty)

### Clinical Attendance

Semesters with clinical 2 days/week = 8 points/day or 1 point per hour missed.

Semesters with clinical 3 days/week = 5.28 points/day or .66 points per hour missed.

\*These points are assigned based upon requirements for students to complete 90% of the scheduled clinical education days to receive a passing grade.

1 point ---- Late for clinical (1/2 hour or less)

\*Special arrangements made with Clinical Preceptor and faculty prior to date of clinical are exempt.

1+ points ---- Late for clinical (more than ½ hour) ---- points awarded per hour missed (see policy above) + 1 additional point for being late.

2 points ---- Leaving assigned area without notification to Clinical Preceptor or technologist.

4 points ---- Failure to notify Clinical Preceptor & faculty prior to absence.

22 points ---- Falsification of attendance records. This includes anything that would lead the faculty to believe you were in your assigned area (or alternative assignment as directed by the Clinical Preceptor) when you were not. At any time the technologist assigned to your area or Clinical Preceptor should know your location. It is your responsibility to keep them informed.

22 points ---- Scheduling employment concurrent with clinical experience.

### Clinical Evaluations

1-3 points ---- Unprepared for competency evaluations or non-pass

2 points ---- Missed clinical evaluations (Level I, II or III)

22 points ---- Receiving clinical evaluations while working as an employee

### Other

2 points ---- Dress code violation

2 points ---- Studying in patient care or work areas (See General Policies)

4 points ---- Refusing to accept authority and assignments by Clinical Preceptor or Supervisors

5 points ---- Documented violation of radiology department policy (i.e. smoking, parking, etc.)

5 points ---- Documented violation of radiology student handbook policy

22 points ---- Possessing drugs, liquor or engaging in their use or being under any remaining effects of such during clinical education. The student is referred to the policy on substance abuse for further details.

22 points ---- Breaching patient confidentiality

22 points ---- Theft of any article while at the clinical affiliate.

### **Personal Laterality Markers**

Students will be required to use their own laterality (left and right) lead markers to properly identify every radiologic procedure they perform. The COTC Radiology program will provide each student with one set of markers at the beginning of the program. All subsequent sets of markers will be ordered and paid for by the student. Students are encouraged to purchase an extra set of markers. NO evaluations will be accepted without appropriate student markers exposed on the image.

### **Clinical Notepad**

Each student must carry a small notepad in their scrub pocket while at clinical. This should be used to write down important information such as department phone numbers, door codes, techniques, and other clinical related information.

## **Dress Code: Uniforms and Appearance**

The personal appearance and demeanor of radiologic science technology students from Central Ohio Technical College will reflect both the college and professional standards and are indicative of the students' interest and pride in their profession.

While in the clinical setting, routine, royal blue uniforms must be clean and presentable without wrinkles or stains. Surgery uniforms will be provided by the facility and worn only during surgery assignments. Any students reporting to the clinical site in uniforms violating the uniforms and appearance guidelines may be sent home by the Clinical Preceptor. If the student does not have transportation home, he or she will be removed from the floor and not be permitted to practice in a student capacity. The student will be considered absent for the hours missed and clinical points will be assigned accordingly. (See clinical points policy)

When in the clinical areas, all students shall observe the following uniform guidelines:

1. Wear the appropriate royal blue scrub uniforms as designated by the College. Students may wear either a short or long sleeve white tee-shirt under the scrub shirt.
2. All white, black, or blue tennis shoes or healthcare, professional shoes must be worn. Shoes must be without holes and cannot be mesh material. They must be maintained in a manner that would reflect a professional appearance.
3. All students will wear their official COTC student ID badge or hospital provided badge if applicable.
4. All students will wear the official COTC Radiology student patch affixed to the uniform. This should be in the upper left bodice slightly above the

pocket area. These can be purchased at the bookstore.

5. Hair must be neat at all times. Students with long hair at or past the shoulders must pull their hair up and away from the face. Facial hair must be neatly groomed and reflect a professional appearance.
6. Make-up must be used discreetly.
7. Body fragrances must be used in moderation.
8. Students are permitted to wear wedding or engagement rings ONLY. Small earrings may be worn. No costume or oversized jewelry will be worn. The college and/or clinical affiliates are not liable for any lost jewelry.
9. Body Piercings: The only piercings allowed to be visible are ear piercings. This is limited to a maximum of 3 piercings/ear unless the clinical affiliate follows a more stringent policy. Tongue rings must be clear or “tongue colored” and not noticeable when talking. If the clinical facility objects to any piercing, the rings/ jewelry must be removed while in the clinical area.
10. Tattoos must not be visible. They may be covered by clothes or bandages.
11. Artificial nails are not permitted at the clinical sites. These have been proven to harbor and transmit bacteria which may be harmful to patients.

## **Parking**

Parking is available for all students while assigned to the clinical setting. Students will be notified of parking guidelines for specific clinical affiliates as a part of their hospital pre-clinical orientation.



## **General Policies**

1. Students are permitted to take textbooks to clinical, however, all books must remain in non-patient care/working areas. Students are only permitted to use textbooks for reference or studying when there are no exams to be completed. As a student, you cannot gain the hands-on practice and experience needed unless you are an active participant in the clinical examination process.
2. Students are not permitted to congregate in another person's work area or in view of patients. Students are also required to use professional language and tone in the clinical setting. This makes it very difficult for staff members to perform their work and appears unprofessional to patients.
3. Students function as a member of the team in the imaging departments. It is everyone's responsibility to maintain a professional and efficient department by keeping areas clean and reporting any deterioration, breakages, malfunction of equipment or depletion of supplies that come to your notice. This will facilitate prompt repair and re-stocking.
4. Students are not permitted to handle difficult situations without first seeking advice from a technologist or member of the management team at the site.
5. The technologist assigned to your area will assist and direct you with procedures, positioning, techniques, etc. This provides you with an excellent one-on-one learning experience. If you need guidance or assistance, always ask! This is your opportunity to become proficient and learn to produce quality radiographs. Do not be afraid to attempt exams. All personnel recognize that you are learning and no one expects you to be perfect the first time, but you must be assertive and take control of your education. It is not the radiographer's responsibility to convince you to want to learn or try an examination. The radiographer serves a role to help

guide you and provide supervision. Please take advantage of all clinical experiences and try to learn something new from each technologist.

## **Patient Identification**

Students must practice appropriate patient identification using 2 or more approved identifiers as required by the facility and per accreditation standards. Appropriate patient identification should be completed before performing any patient care related tasks or imaging procedures. The technologist or student performing the procedure is responsible for ensuring this is met.

Upon the first interaction with the patient the student should ask the patient to state their name. Do not say, "Are you Mrs. Smith?" A second identifier must be used which could include confirming date of birth or other specific information about the patient. Always ensure to correlate both first and last name and second identifier with the examination orders.

## **Patient Confidentiality**

All hospital and patient records are confidential in nature. You are not permitted to discuss a patient, their illness or their private affairs with anyone publicly or privately. Students are expected to maintain confidentiality in a professional manner. Breach of confidentiality will put the student in disciplinary action, possible dismissal from the program and may result in legal action by the patient Health Insurance Portability and Accountability Act (HIPAA). ALL information that leaves the clinical site must be appropriately anonymized without any patient identifiers. This may include images, patient forms, etc. Students are **not** permitted to take photos of images in the clinical setting. Failure to comply with these policies will result in disciplinary action that may include dismissal from the program and legal action.

## **Patient Modesty**

The modesty of the patient must be maintained and respected at all times. Patients should be given a gown, robe or blanket to cover their body. Assistance should be offered if the patient is exposed.

## **Social Media and Technology Use**

The program recognizes that social networking websites and applications or individual blogs are important means of communication. The use of technology can be a valuable research tool when used appropriately. Unfortunately, the use of technology has been shown to create potential liability for the student and college. Posting certain information is illegal and violates existing statutes and administration regulations may expose the offender to criminal and civil liability. The following actions are **strictly forbidden**.

- You cannot post or communicate any patient related information or information that may potentially identify a particular patient. Removal of the patient`s name does not solve this problem- inclusion of gender, age, race diagnosis, etc may still allow the reader to recognize the individual. Violation of this requirement **may result in dismissal** from the program.
- You may not post or communicate private academic information about another student, including but not limited to grades, evaluations, or any adverse academic actions.

In addition to the absolute prohibitions listed above, the following actions are strongly **discouraged**.

Violations of these guidelines are considered unprofessional and may be the basis for disciplinary action:

- Display of vulgar language
- Display of language or visuals that imply disrespect for any individual or groups because of age, gender, ethnicity, religion, or sexual orientation
- Posting of potentially inflammatory or unflattering material regarding a fellow student, college faculty or administration.

Any student or faculty member who is aware of the use of social networking sites with any of the above prohibitions is required to report.

Failure to report is a violation of the college's *Code of Student Conduct, item O* and may result in disciplinary action to and including dismissal from the program.

Faculty are discouraged from connecting with students on social media and networking sites while the student is actively enrolled in the program.

### Use of mobile devices

It is expected that mobile devices always remain on silent and kept out of view while at the clinical facilities. The use of all mobile devices is prohibited in patient care and technologist work areas. Students are permitted to use mobile devices only during scheduled breaks and lunches. If the student is expecting an emergency notification, they need to notify the technologist in their assigned

area. Students are **not** permitted to take photos of images in the clinical setting. Disciplinary action may be taken for students who violate these policies.



# Safety

## **Radiation Monitor Dosimeters**

Students must always wear their personal radiation monitoring device (provided by the COTC) while participating in all lab activities and at all times in the clinical setting. The objective is to record the accumulated radiation dose each student obtains in the energized radiology lab and clinical setting. In addition, it allows program faculty to monitor student radiation safety habits. Radiation monitors should be worn at the collar level at all times. When performing fluoroscopy, trauma imaging, portable imaging or other procedures where a lead apron is worn, the monitor should be placed outside of the apron at the same level. When not being used, radiation monitors should be stored in a safe, dry, temperature-controlled area where they are not exposed to other radiation sources. Radiation monitors should never be worn when not performing lab or clinical activities. The student is responsible for returning their monitors to the program director by the 25<sup>th</sup> of each month. If the student fails to turn in the badge, or turns it in late this may result in inaccurate readings. Individual radiation reports are available by request and will be posted in Radiology lab identified only by the monitor numbers.

## **Policy on Excess Radiation Exposure**

COTC strives to maintain all student exposures at or below 120 mrem per year. Monitor readings of over 60 mrem per month will be considered excessive and require a meeting between the student and program faculty with a written warning. The student will be questioned relating to possible reasons for excessive readings. Faculty will counsel the student on safe radiation protection practices and appropriate care of radiation monitors. If there is subsequent excessive exposure, the clinical preceptor will be consulted, and the following may be initiated:

- The student will be assigned to a technologist under direct supervision 100% of the clinical time.
- The student will be required to complete a radiation safety refresher course and pass a test with a 75% or higher.

All parties involved will be required to sign documentation acknowledging the discussion and performance improvement plan.

### **Repeat Imaging**

It is expected that students will make mistakes during the learning process. However, because of the potential hazards of radiation, repeat imaging must be minimal. Therefore, all repeat radiographs must be performed under direct supervision with the presence and instruction from a registered radiographer. This allows radiation protection standards to be withheld and provides instruction to the student relative to their errors. This is a critical policy, and any violation will may result dismissal from the program.

### **Final Acceptance of Images**

Students will not assume the responsibility for final passage or acceptance of patient images. This is the responsibility of the facility employee and technologist supervising the student. All images taken by students must be checked with the technologist prior to passage.

### **Policy on Holding During Exposures**

It is the policy for COTC students that they are NEVER permitted to hold a patient or image receptor during an exposure. Failure to comply with this policy will result in disciplinary action. Repeat occurrences may lead to dismissal from the program.

## **Pregnancy Policy**

Student radiographers may elect to continue in the Radiologic Science Technology program during pregnancy. It is the student's responsibility to follow the procedures listed below for protection of the student and fetus.

1. Any student who suspects she may be pregnant or knows that she is pregnant has the option of informing program officials of this condition.
2. If the student chooses to voluntarily inform program officials, this must be in writing and indicate the date of notification and date of expected delivery. If the program does not have this written notification, the student will not be considered pregnant, regardless of verbal communications or physical appearance. Additionally, a student may revoke her declaration in writing at any time.
3. The student who voluntarily discloses pregnancy will have the option of continuing in the program without modification or interruption unless State statutes related to fetal dose limits are violated or close to be violated. Should the student choose to withdraw from the program, she must re-apply following the admission requirements for readmittance as outlined in the Student Handbook.
4. Pregnancy students continuing in the program will meet with the program director to review effects of irradiation in utero, inclusive of acceptable radiation protection practices as stated in the NRC Regulatory Guide 8.13 (Revision 3, 1999). The session will provide the student an opportunity for questions and answers. The student will acknowledge by completing and signing a Declaration of Pregnancy Form.
5. Upon request, by the student, they may be assigned areas of low exposure.
6. A second radiation monitoring device will be provided to be worn at the waist level and will be identified as exposure to the fetus. This radiation monitor must be returned by the 25<sup>th</sup> of each month and monthly readings will be available for the student to review.
7. Before students are permitted to return to the clinical setting after delivery, they must provide a release to work statement from their physician.

8. In accordance with the Ohio Administrative Code (3701:1-38-12) the college must ensure that the fetal dose does not exceed .5 rem or 5 millisievert. In the event this exposure limit is close to being exceeded, the college has a legal obligation to make appropriate changes and modifications. This will be done collaboratively between the program faculty and student with the least impact on student learning opportunities.

## Declaration of Pregnancy Form

Directions: Please initial each box, sign and date and identify estimated conception date (Month/Year).

By completing this form, I am declaring myself to be a pregnant, monitored worker and subject to the exposure restrictions of no more than .5 rem or 5 millisieverts during gestation.

I understand that I have the option of requesting an alteration of my clinical assignments to ensure that my exposure to radiation is kept as low as reasonably achievable. In all circumstances, no more than .5 rem or 5 millisieverts (fetal exposure), may be received during the course of my pregnancy.

I understand that Ohio Administrative Code (3701:1-38-12) requires the college to ensure that the fetal dose does not exceed .5 rem or 500 millisieverts does equivalent. If the radiation monitor readings demonstrate that the fetal dose may reach that limit, the college has a legal obligation to take action and this may require modifications.

During the period of my pregnancy, I understand that my radiation exposure will be monitored monthly, and I am aware of my rights to be informed of my exposure history.

I have received instructions on ways to minimize my exposure during pregnancy. (If you feel concerns about continued radiation exposure during your pregnancy, you should discuss these concerns with your physician to determine if any additional restrictions may be needed.)

I understand that I may revoke this declaration of pregnancy in writing at any time. If I chose to revoke this declaration of pregnancy, I understand that the program is obligated to return me to standard exposure monitoring.

To my knowledge, I have not received any radiation doses from radioactive materials ingested or inhaled.

Signature on this form acknowledges that:

- a. The U.S. NRC Regulatory Guide 8.13 (Revision 3, 1999) prenatal radiation exposure both oral and written form.
- b. The program faculty provided a question-and-answer period following the above discussion during which my questions were satisfactorily answered.
- c. I understand the information and guidelines contained in the NRC Regulatory Guide.

Estimated conception date: \_\_\_\_\_ (Month/Year)

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

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



## **MRI Safety Policy**

Upon admission into the Radiologic Science Technology program and prior to the first day of clinical, the student will participate in an MRI Safety training. Following the training each student will be given the MRI Screening Form. They will complete the form by self-identifying any conditions or past medical history that could interfere or be considered hazardous upon entering the magnetic field. The program faculty will first review the form, provide appropriate counseling to students who may have contraindications and then sign the form prior to the student entering the clinical setting.

All students will comply with specific hospital policies relating to MRI screening and safety. In addition to COTC program specific safety training, students will complete hospital required educational protocols regarding MRI safety prior to or on the first day of their scheduled MRI specialty modality rotation. Students are responsible for submitting completed documentation with satisfactory compliance to the clinical coordinator within the first week of their modality rotation.

## **Occurrence/Incident Reporting**

An occurrence is a variance in events not consistent with desired operation or care of a patient. All occurrences/incidents which occur during clinical assignment resulting in patient, hospital personnel or personal injury and/or damage to equipment must be reported immediately to the clinical preceptor and/or program faculty. In addition, a hospital occurrence/incident report must be filed with program and hospital officials. Students are responsible for complying with all safety procedures. Incidents will be reviewed, and appropriate action will be determined by program faculty.

# **Clinical Supervision and Evaluations**

## **Evaluations and Grading**

The student must maintain a passing grade (Satisfactory "S") in the clinical courses to continue in the program. Failure to achieve an "S" for the clinical education courses is grounds for dismissal from the Radiologic Technology Program regardless of the any other grades or the students GPA.

You will receive a syllabus for each clinical course detailing the requirements and objectives which must be met to pass. Some general reasons for failure in these courses include but are not limited to:

1. Accumulation of **more than 21 points** as outlined in the clinical points policy.
2. Failure to complete the minimum number of category competencies for a given semester.
3. Failure to maintain and submit weekly journals and timecards as designated at the beginning of the semester.
4. Receive more than two negative anecdotal notes relating to the same type of conduct and/or personal appearance for a given semester.
5. Failure to adhere to published college and/or program policies.
6. Display unprofessional conduct as identified in the handbook.
7. Display practices which are unsafe to patients, personnel, and other students or self.

These habits must be documented by program faculty and facility radiographers. When this professional judgment is made, the student involved will be removed from the patient contact area and counseled relative to future options.

Students are reminded that in order to advance within the Central Ohio Technical College Radiologic Science Technology Program, a grade of "C" or better must be maintained in all courses on the official plan of study.

## **Semester Evaluations**

Each semester you will meet with your Clinical Preceptor to assess your progress. There are mid and end semester evaluations required for each clinical course. Using the semester evaluation forms, areas of strengths and weaknesses will be discussed. Suggestions for improvement or individual guidance will be given as needed. This information will be submitted to the program faculty for guidance and counseling. In addition, bi-weekly evaluations may be requested at the discretion of the Clinical Preceptor. All semester evaluation forms are included on the following pages.

CENTRAL OHIO TECHNICAL COLLEGE  
Radiologic Science Technology Program

**Student Mid Semester Evaluation**

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

Clinical Preceptor Name: \_\_\_\_\_

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

**Directions:** Please answer the following questions as they pertain to the student listed above. Please be honest and objective. This process is intended to be informative and will be utilized to help the student improve their clinical skills. Please consider the students' level of experience and knowledge and evaluate the student relative to expectations at their educational level.

**The students' STRONGEST abilities or characteristics in the following areas:**

1. Technical ability:

2. Interpersonal skills:

3. Professional conduct:

**Potential areas for IMPROVEMENT:**

1. Technical ability:

2. Interpersonal skills:

3. Professional conduct:

General comments:

Clinical Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CENTRAL OHIO TECHNICAL COLLEGE  
Radiologic Science Technology Program

**Student End Semester Evaluation**

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

Clinical Preceptor Name: \_\_\_\_\_

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

**Directions:** Please rate the students' performance in the following categories, using the following guidelines. Please consider the students' level of experience and knowledge and evaluate the student relative to expectations at their educational level. Circle the appropriate performance level for each section.

1. Indicates that the performance level standards are NOT met and the student is NOT competent in that area (Please comment).
2. Indicates the performance level standards are inconsistently met, indicating below average competency (Please comment).
3. Indicates the performance level standards are generally met, indicating average competency.
4. Indicates the performance level standards are substantially surpassed, student is reasonably capable.
5. Indicates the performance level standards are substantially surpassed, student is very competent.

**Technical Skills:** Ability to perform the procedure, which includes positioning, control panel settings/technique selections.

1                      2                      3                      4                      5

Comments:



**Interpersonal Skills:** Ability to work with staff harmoniously.

1                      2                      3                      4                      5

Comments:

**Non-Technical Skills:** Room prep, care of equipment, room clean-up, etc.

1                      2                      3                      4                      5

Comments:

**Patient Safety:** Radiation protection, physical safety of patients, staff members and others.

1                      2                      3                      4                      5

Comments:

**Professional Conduct:** Work ethic, appearance and attendance

1                      2                      3                      4                      5

Comments:

**Customer Service Skills:** Friendliness and approach to patients.

1                      2                      3                      4                      5

Comments:

The students' strong areas:

The students' potential areas of improvement:

General comments:

Clinical Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CENTRAL OHIO TECHNICAL COLLEGE  
Radiologic Science Technology Program

**Student Bi-Weekly Evaluation**

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

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

Week of: \_\_\_\_\_

**Directions:** Please evaluate the performance the student listed above based on your observations within the past week. Please consider the students' level of experience and knowledge and evaluate the student relative to expectations at their educational level. When completed, please give this form to the designated Clinical Preceptor and not back to the student. This information will be compiled and used to complete student mid and end semester evaluations.

1. Performance level not met. Student incompetent for expected skill level.
2. Performance level inconsistent. Occasionally met, student minimally competent.
3. Performance level consistently met. Student at average competency level.
4. Performance level surpassed. Student exceeds competency in areas observed.

Please circle not observed "N/O" if appropriate.

**Positioning Skills:**

Routine Radiography:     1                    2                    3                    4                    N/O

Contrast Studies:            1                    2                    3                    4                    N/O

Mobile:                            1                    2                    3                    4                    N/O

Surgical: 1 2 3 4 N/O

**Patient Care:**

Professional Conduct: 1 2 3 4 N/O

Interpersonal Skills: 1 2 3 4 N/O

Documentation: 1 2 3 4 N/O

Equipment Manipulation: 1 2 3 4 N/O

Radiation Protection: 1 2 3 4 N/O

General Comments:

Observing Technologist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Anecdotal Record**

The college faculty or clinical preceptors will complete anecdotal records when they deem necessary. This is a record of an event involving a student. Comments may be positive or negative. The objective is to provide the faculty and student with insight into a students' clinical habits. The student will receive assistance or counseling if indicated.

CENTRAL OHIO TECHNICAL COLLEGE

Radiologic Science Technology Program

**Anecdotal Record of Verbal Counseling/Commendation**

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

Date of incident: \_\_\_\_\_

Clinical Preceptor or Faculty Name: \_\_\_\_\_

Clinical Affiliate: \_\_\_\_\_

Description of incident:

Specific topics addressed with student:

Plan of Action (if applicable):

Date of Counseling/Commendation: \_\_\_\_\_

Students' response as described by Clinical Preceptor or Faculty:

Clinical Preceptor or Faculty Signature: \_\_\_\_\_

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

Student Section: By signing here this indicates that you as the student have read and understand the above report and the event has been discussed with your Clinical Preceptor or Faculty.

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

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



## **Clinical Supervision of Students**

### **Direct Supervision**

Until a student achieves and documents competency for a given procedure, all clinical assignments shall be carried out under direct supervision of a qualified radiographer. The parameters of direct supervision, as defined by the JRCERT are listed below.

The qualified radiographer:

1. Reviews the procedure in relation to the students' achievement.
2. Evaluates the condition of the patient in relation to the students' knowledge.
3. Is physically present during the conduct of the procedure.
4. Reviews and approves the procedure and/or images.

**Repeat Imaging:** In support of professional responsibility for provision of quality patient care and radiation protection, unsatisfactory images must be repeated only in the presence of a qualified radiographer, regardless of the students' level of competency.

**Surgical and Mobile Imaging:** Students must be directly supervised during surgical and all mobile fluoroscopy procedures regardless of level of competency.

### **Indirect Supervision:**

After demonstrating competency at a Level II evaluation standard, students may perform procedures with indirect supervision. The JRCERT defines indirect supervision as "student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement."

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

## **Clinical Competency Evaluation System**

The Radiologic Science Technology program of Central Ohio Technical College and its affiliates comply with the Clinical Competency Requirements as outlined by the American Registry of Radiologic Technologists (ARRT). The intent of this system is to provide a standardized format for evaluation of clinical performance.

The didactic component provides the student with the necessary information to develop skills for successful performance. The clinical education component requires successful integration of cognitive, psychomotor, and affective skills. The student progresses from the role of observer to performer during this process.

To ensure appropriate learning, the student is evaluated at three levels of their education (Level I, II and III). Successful completion of all three steps indicates the attainment of adequate competency.

The evaluation tool utilizes established criteria for affective and psychomotor skills. This portion of the evaluation is to be completed by the registered technologist with who the student is assigned. The program faculty will evaluate the student radiographs and conduct an in-depth critique to discern the students' cognitive skills relative to the examination.

Competency evaluation forms are available on campus.

### **Level I: Initial Instruction and Lab Simulation Evaluation**

The student will receive instruction in the classroom and laboratory components of the curriculum. The student will perform each exam discussed under simulated conditions in the campus lab setting. At this time the student will be evaluated by college faculty. Successful performance by the student is mandatory to earn a satisfactory grade in the clinical course and continue in the program.

Concurrent with Level I is the observe and assist phase of the clinical component. The student will be scheduled in a series of planned clinical rotations at affiliate hospitals. The student will observe each radiologic procedure performed in the

assigned area. Whenever possible, the student will assist the practicing radiographer in performing the procedure.

### Level II: Participate and Perform Patient Exams in the clinical setting

The student moves to an active participation role in the clinical setting. As the student gains experience in various procedures, they gradually move into a supervised clinical performance stage. At this point, the student must perform each exam in a given category under the direct supervision of a registered radiographer. The rate at which the student progresses is dependent upon their ability to perform the radiologic procedure and attain the objectives as assigned. Upon performing an exam under direct supervision, the student may request a Level II competency evaluation for the examination.

**PASS:** Upon successful completion of the competency evaluation the student will be allowed to perform that examination under indirect supervision. Attainment of a competency evaluation Level II does not excuse the student from performing that examination in the future. The student is expected to remain proficient and skillful by repetition of performance.

**NON-PASS:** If the student is unsuccessful at a competency examination, they are instructed to review the appropriate text to correct the errors. They are then eligible to request another competency evaluation. If the student fails to pass the required number of Level II competencies for a given semester, they will earn an unsatisfactory grade in the clinical course which results in dismissal from the program.

### Level III: Perform Patient Exams without assistance in the clinical setting

Upon successful completion of all required competency evaluations in all categories at the Level II standard, the student shall request a final competency evaluation in each category. To successfully complete a Level III, competency evaluation the student must perform one exam from each category. This exam is representative of the student's best work and must be as close to the perfect

image as possible. During the cognitive phase of the evaluation, the faculty will ask the students questions covering all exams found in that category.

**PASS:** Upon successful completion of a competency evaluation at the Level III standard, the student will have demonstrated adequate attainment of competency of all exams within that category and be considered an entry level technologist.

**NON-PASS:** If the student fails to pass the required number of Level III competencies for a given semester, they will earn an unsatisfactory grade in the clinical course which results in dismissal from the program.

## **Schedule of Minimum Competencies Per Semester**

The following is a minimum number of clinical competency requirements which must be completed each semester to receive a satisfactory grade in the clinical component and continue in the program.

### **1<sup>st</sup> Semester:**

10-12 Level I Competencies in college lab setting

4 Level II Competencies in clinical setting with evaluation by faculty

### **2<sup>nd</sup> Semester:**

10-12 Level I Competencies in college lab setting

13 Level II Competencies in clinical setting with evaluation by faculty

### **3<sup>rd</sup> Semester:**

19 Level II Competencies in clinical setting with evaluation by faculty

### **4<sup>th</sup> Semester:**

15 Level II Competencies in clinical setting with evaluation by faculty

### **5<sup>th</sup> Semester:**

8 Level III Competencies in clinical setting with evaluation by faculty

Students are encouraged to work ahead and not wait too close to the evaluation deadlines. Faculty will not be held responsible for students who wait and then

appropriate exams are not available to achieve competency. Students are permitted to work ahead a maximum of 5 Level II competencies per semester. All required competency evaluations must be completed passing grade. In addition, the student must complete the optional asterisk evaluations of their choosing. See details regarding this on the Level II clinical competency requirements.

## CLINICAL COMPETENCY REQUIREMENTS

RADIOLOGIC PROCEDURES			
		Simulate	Semester of eligibility
<b>THORAX</b>			
Chest, routine	PA & Lateral (AP Lordotic, AP Supine, Decubitus)	No	Autumn
Chest, wheelchair or stretcher	AP/PA & Lateral	No	Autumn
Ribs	AP/PA & Anterior/Posterior obliques of affected side to include all ribs	No	Spring
Upper Airway*/Soft Tissue Neck*	AP & Lateral	Yes	Autumn
Chest, lateral decubitus*	1 view	Yes	Autumn
Sternum*	RAO/LPO & Lateral	Yes	Spring
Sternoclavicular Joints*	PA, RAO & LAO	Yes	Spring
<b>UPPER EXTREMITY</b>			
Thumb or Finger	3 views (AP thumb)	No	Autumn
Hand	3 views	No	Autumn
Wrist	3 views (PA ulnar deviation, Gaynor Hart, PA Axial/Modified Stecher)	No	Autumn
Forearm	2 views	No	Autumn
Elbow	2 views (Obliques, Coyle methods, AP partial flexion)	No	Autumn
Humerus	2 views (Neutral, Transthoracic)	Yes	Autumn
Shoulder	AP internal & external (AP neutral, PA oblique (Scapular Y), Supraspinatus outlet/Neer, Grashey, Lawrence/infero-superior axial)	No	Autumn
Trauma Upper Extremity (Non-shoulder)	2 views minimum (with non-routine positioning)	No	Spring

**\* Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part.**

Trauma Shoulder/Humerus	2 views minimum Neutral & Y or transthoracic	No	Autumn
Clavicle	2 views (PA, PA Axial)	Yes	Autumn
Scapula*	AP & Lateral	Yes	Autumn
Acromioclavicular joints*	AP bilateral with & without weights	Yes	Autumn
<b>LOWER EXTREMITY</b>			
Foot	3 views (AP axial & lateral weight bearing, obliques)	No	Autumn
Ankle	3 views (Obliques (medial vs. mortise), AP stress, AP & lateral weight bearing)	No	Autumn
Tibia/Fibula	2 views (to include knee and ankle joints)	No	Autumn
Knee	2 views (AP weight bearing, obliques, holmblad, camp coventry, beclere)	No	Autumn
Femur	2 views (to include hip & knee joints)	Yes	Autumn
Trauma Lower Extremity	2 views minimum (With non-routine positioning)	No	Spring
Patella*	PA/AP, lat & axial (inferosuperior, merchant, settegast)	Yes	Autumn
Toes*	3 views (tangential/sesamoid)	Yes	Autumn
Calcaneus*	2 views (Plantodorsal vs. Dorsoplantar)	Yes	Autumn
<b>HEAD</b> Students must select at least one elective procedure from this section. This cannot be simulated.			
Skull*	AP/PA & lateral (PA Axial Caldwell, AP Axial Towne, SMV (Full basal), trauma views)	No	Spring
Paranasal Sinuses*	Caldwell, waters & lateral (SMV (full basal), trauma views)	No	Spring
Nasal Bones*	Waters & laterals (PA Axial Caldwell)	No	Spring



Facial Bones*	PA Axial Caldwell, waters & lateral (Modified waters)	No	Spring
Orbits*	PA Axial Caldwell, waters, lateral (Modified waters)	No	Spring

Temporomandibular Joints (TMJ)*	AP axial modified Towne, axiolateral/Modified Schuller or axiolateral obliques/Modified Law	No	Spring
Mandible*	PA, bilateral axiolateral obliques, AP Axial Towne (PA axial, Modified waters, SMV (full basal))	No	Spring

## SPINE AND PELVIS

Cervical Spine	AP Axial, lateral (must include 1 – 7 OR swimmers view) & AP open mouth (odontoid) (Obliques (AP axial and PA axial), lateral flexion, lateral extension, fuchs, swimmers, trauma views)	No	Spring
Thoracic Spine	AP & lateral (breathing or expiration & must include 1 – 12 on each OR swimmers view) (Swimmers)	No	Spring
Lumbosacral Spine	AP, lateral & lateral L5-S1 spot (PA, Obliques, AP L5-S1 axial spot, lateral flexion and extension, AP right and left bending)	No	Spring
Trauma Cross Table Lateral Spine (1 view)	Lateral 1 view minimum	Yes	Spring
Pelvis	AP (Inlet/outlet, Judet, Bilateral frog leg)	No	Autumn
Hip	AP unilateral (or bilateral pelvis) & unilateral frog leg	No	Autumn
Trauma Hip (cross table lateral)	AP unilateral (or pelvis) & x-table lateral (Danelius miller, clements-nakayama)	No	Spring
Scoliosis Series*	PA/AP (Include C-7 to S-2) (Lateral)	Yes	Spring
Sacrum and/or Coccyx*	AP Axial Sacrum/coccyx & lateral (Must include 2 images per exam) (Lateral sacrum only, lateral coccyx only)	Yes	Spring
Sacroiliac joints*	AP axial + bilateral obliques (posterior and anterior obliques)	Yes	Spring

## ABDOMEN

Supine Abdomen	AP	No	Autumn
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Upright Abdomen	AP	No	Autumn
Decubitus Abdomen*	Any decubitus (Lateral, dorsal)	Yes	Autumn
Intravenous Urography (IVU)*	AP scout & series of images based on site protocol (Obliques, post void)	No	Spring
<b>FLUOROSCOPY</b> (Students must select either Upper GI or Barium enema PLUS one other elective procedure from this section. Images are to be done per site protocol. No exams from this category can be simulated)			
Esophagus Study (No modified swallowing tests)*	Images are to be done per site protocol. (AP, PA, RAO, LAO, lateral, swallowing dysfunction study)	No	Summer
Upper GI Series (Single or double contrast)*	Images are to be done per site protocol. (AP/PA Scout, AP, PA, RAO, LPO, lateral)	No	Summer
Small Bowel Series*	Images are to be done per site protocol. (AP/PA Scout, AP/PA follow through images, ileocecal spot imaging) <i>NOTE: The student must begin the procedure, do at least 50% of the after images including the prelim/scout image.</i>	No	Summer
Contrast Enema (Single or double contrast)*	Images are to be done per site protocol. (AP, PA, anterior and posterior obliques, AP and PA axial sigmoid, lateral rectum, Decubitus (right and left lateral), AP/PA post evacuation)	No	Summer
Cystography or Cystourethrography*	Images are to be done per site protocol. Cystography: (AP, AP Axial, LPO, RPO, lateral) Cystourethrography: (AP voiding female, RPO voiding male)	No	Summer
ERCP*	Images are to be done per site protocol. Must present at least 1 image for evaluation	No	Summer
Arthrography*	Images are to be done per site protocol. Must present at least 1 image for evaluation	No	Summer
Myelography*	Images are to be done per site protocol. Must present at least 1 image for evaluation	No	Summer
Hysterosalpingography*	Images are to be done per site protocol. Must present at least 1 image for evaluation	No	Summer
<b>SURGERY &amp; MOBILE</b>			
Mobile Chest	AP – 1 view	No	Summer

Mobile Abdomen	AP – 1 view	No	Summer
Mobile Orthopedic (Upper or Lower Extremity)	2 view minimum	No	Summer
C-Arm Procedure (Sterile)	1 view minimum – New evaluation form	No	Summer
Chest, Abdomen or Neuro			
C-Arm – Orthopedic	2 view minimum – New evaluation form	No	Summer

<b>GERIATRIC</b> (At least 65 & physically or cognitively impaired as a result of aging)			
Routine Chest	PA/AP & Lateral	No	Summer
Upper OR Lower Extremity	2 view minimum	No	Summer
Hip or Spine*	2 view minimum	No	Summer
<b>PEDIATRIC</b> (Age 6 years or younger. Students must perform either an upper or lower extremity. If a student performs both upper and lower extremity, one would be counted as an elective. This cannot be simulated)			
Routine Chest	PA/AP & Lateral	No	Autumn 2 <sup>nd</sup> year
Upper OR Lower Extremity (See note in header)	2 view minimum	No	Autumn 2 <sup>nd</sup> year
Abdomen*	1 view	No	Autumn 2 <sup>nd</sup> year
Mobile*	1 view	No	Autumn 2 <sup>nd</sup> year

- Each student must demonstrate clinical competency on all 37 mandatory procedures (non-asterisk) at the Level II standard. Only 4 mandatory procedures may be simulated – Humerus, Clavicle, Femur and Cross table lateral spine.
- Each student must demonstrate clinical competency in at least 14 of the elective procedures (asterisk) at the Level II standard. All electives are eligible for simulation, but the **total** number of simulations (mandatory and elective) cannot exceed 8.
  - In the fluoroscopy category, one elective must be either UGI or a Contrast Enema **AND** there must be one additional elective procedure from this category (No simulations) In the head category, one elective must be selected (No simulations)
  - Simulations – to optimize clinical student learning opportunities, evaluation through simulation should be limited. Students are permitted to perform a maximum of 3 simulations not earlier than summer semester. All simulations are to be performed with the designated clinical preceptor with a total of 8 simulations for the entire program.
  - Each student must demonstrate clinical competency on 1 procedure from each category at the Level III standard with the exception of pediatrics and geriatrics. This would total 8 level III competencies.

RADIOLOGIC PROCEDURES			
	Level I	Level II	Level III
<b>Thorax</b>			
Chest, routine			
Chest, wheelchair or stretcher			
Ribs			
Upper Airway*/Soft Tissue Neck*			
Chest, lateral decubitus*			
Sternum*			
Sternoclavicular Joints*			
<b>Upper Extremity</b>			
Thumb or Finger			
Hand			
Wrist			
Forearm			
Elbow			
Humerus			
Shoulder			
Trauma Upper Extremity (Non-shoulder)			
Trauma Shoulder/Humerus			
Clavicle			
Scapula*			
Acromioclavicular joints*			
<b>Lower Extremity</b>			
Foot			
Ankle			

Tibia/Fibula			
Knee			
Femur			
Trauma Lower Extremity			
Patella*			
Toes*			
Calcaneus*			
<b>Head</b> Students must select at least one elective procedure from this section. This cannot be simulated.			
Skull*			
Paranasal sinuses*			
Nasal bones*			
Facial bones*			
Orbits*			
Temporomandibular Joints (TMJ)*			
Mandible*			

<b>Spine and Pelvis</b>			
Cervical Spine			
Thoracic Spine			
Lumbosacral Spine			
Cross Table Lateral Spine (1 view)			
Pelvis			
Hip			
Trauma Hip (AP with Cross table lateral)			
Scoliosis Series*			
Sacrum and/or Coccyx*			

Sacroiliac joints*			
<b>Abdomen</b>			
Supine Abdomen			
Upright Abdomen			
Decubitus Abdomen*			
Intravenous Urography (IVU)*			
<p><b>Fluoroscopy</b> Students must select either Upper GI or Barium enema PLUS one other elective procedure from this section. Images should be done <b>per site protocol</b>. No exams from this section can be simulated.</p>			
Esophagus Study (No modified swallowing tests)*			
Upper G.I. Series (Single or double contrast)*			
Small Bowel Series*			
Contrast Enema (Single or double contrast)*			
Cystography or Cystourethrography*			
ERCP*			
Arthrography*			
Myelography*			
Hysterosalpingography*			
<b>Surgery &amp; Mobile</b>			
Mobile Chest			
Mobile Abdomen			
Mobile Orthopedic (Upper or Lower Extremity)			

C-Arm Procedure (Sterile) 1 view Abdomen, Chest or Neuro			
C-Arm – Orthopedic (2 views)			
<b>Geriatric</b> At least 65 years old and physically or cognitively impaired as a result of aging			
Routine Chest			
Upper OR Lower Extremity – 2 view minimum			
Hip or Spine*			

<b>Pediatric</b> Age 6 years or younger. Students must perform either an upper or lower 2 view extremity. If a student performs both upper and lower extremity, one would be counted as an elective. This cannot be simulated.		
Chest – PA/AP & Lateral		
Upper OR Lower extremity - 2 view minimum (See note in header)		
Abdomen* - 1 view		
Mobile*		

- Each student must demonstrate clinical competency on all 37 mandatory procedures (non-asterisk) at the Level II standard. Only 4 mandatory procedures may be simulated – Humerus, Clavicle, Femur and Cross table lateral spine.
- Each student must demonstrate clinical competency in at least 14 of the elective procedures (asterisk) at the Level II standard. All electives are eligible for simulation, but the **total** number of simulations (mandatory and elective) cannot exceed 8.
  - In the fluoroscopy category, one elective must be either UGI or a Contrast Enema **AND** there must be one additional elective procedure from this category (No simulations)
  - In the head category, one elective must be selected (No simulations)
  - Each student must demonstrate clinical competency on 1 procedure from each category at the Level III standard except for pediatrics and geriatrics.

Semester 1:	Semester 2:	Semester 3:	Semester 4:	Semester 5:
Required: 2 Completed:	Required: 14 Completed:	Required: 20 Completed:	Required: 15 Completed:	Required: 8 (L3) Completed:
Total: /2	Total: /16	Total: /36	Total: /51	Total: /59

### **Final Note**

Central Ohio Technical College reserves the right to make changes without notice in the Radiologic Science Technology curriculum, scheduling, policies, and procedures to preserve the high standards for approval and accreditation of the Radiologic Science Technology Program.



**Signature Page**

I, \_\_\_\_\_ (Printed name), have read the Radiologic Science Technology student handbook and have been given the opportunity to ask all questions relating to the material. I hereby agree to follow the policies as outlined in this student handbook.

Signature: \_\_\_\_\_

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