



Radiography Program

Student Handbook A Policy & Procedural Manual 2024-2025

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I. INTRODUCTION

Welcome Radiography Students!

I want to take this opportunity to welcome you to the Edgecombe Community College Radiography Program. The radiography program at Edgecombe Community College began in 1972, graduating the first class in 1974. It started with an affiliation with Edgecombe General Hospital in Tarboro, a student capacity of eight and two part-time instructors. There have been many changes since its inception. Currently, the program provides two twelve-month (program chair and clinical coordinator), two nine-month and three adjunct faculty positions.

In 2012, a completely renovated energized lab with state-of-the-art digital and computerized imaging equipment was installed, replacing the analog film and chemical system.

In January 2016, the radiography program moved into the Biotechnology and Medical Simulation Center (now known as the Lamm Building) with entirely new supplies, new learning tools, and the current state-of-the-art equipment. The cornerstone of the new center is a simulated hospital, where students will work in teams to assess and treat simulated patients. In addition, in the summer of 2016, the program incepted the continuing education mammography course in the Biotechnology and Medical Simulation Center on the Rocky Mount campus with an online component.

The most recent equipment facelifts occurred in May of 2022, with the replacement of the Sedecal Radiographic Unit (2011) to the interphase Del Medical Radiographic Unit and Canon CXDI-710C Detector (2022). Additions occurred in 2021 with a new Canon Sedecal Soltus 450 Digital Radiography (DR) interphase portable. In 2020 radiography program received an upgraded DR plate (Canon DR with grid cabinets) and the Paxera PACS system. In 2018, the program purchased a refurbished OE Series 9600 C-arm. The newly purchased C-arm equipment will allow radiography students to become more acclimated to the C-arm manipulation before operating room (OR) rotations.

The radiography program is pleased to report on the program accreditation status. June 3rd, 2016, the program's eight-year self-study was submitted to the Joint Review Committee on Education in Radiologic Technology (JRCERT). April 6th and 7th of 2017, two JRCERT professional auditors conducted a formal site visit. Upon conclusion of the site visit, there were no program citations or recommendations made by the visiting team. On July 27th, 2017, the program was awarded the maximum re-accreditation status of eight years. July 20th, 2021, through the interim report, the program received maintenance of accreditation for eight years, with a site visit tentatively scheduled for April of 2025. Maintaining accreditation is an outstanding award for the program and special gratitude to the GREAT radiography faculty team for making this happen.

You have chosen a very fulfilling profession and one that continues to grow in digital imaging. The program handbook serves as a guide and reference.

Students should read the information contained within every semester as a reminder of their rights and responsibilities. Questions should be directed to the student's advisor or the Program Chair.

The purpose of the Radiography program is to produce competent, responsible health science professionals through a competency-based educational system (CBE). This CBE system lets the students know what is to be expected of them, evaluated, and the level of achievement that is indicative of success.

Part of this educational process is developing and refining a sense of responsibility. Students in the radiography program are considered adults and are responsible for their actions just as they were employees in a health care facility. While in the clinical education center (CEC), the student must conduct himself as if employed by that clinical facility. The impressions made on hospital staff members will follow the students after graduation as they seek employment. The students' reputation will precede them and maybe help or hindrance in securing a job.

In the areas where program policy varies from the general college policy as listed in the "College Student Handbook," the student must adhere to the procedure outlined in the "Radiography Program Student Handbook." When in the CEC, the institution's policies take precedence as they relate to patient care and procedure protocol.

Students are encouraged to read and understand this document and the College's Student Handbook, which can be found in the student services office or online. If the publication is available, the Student Handbook will be offered to radiography students during the program orientation.

Sincerely,

Desiree A. Duncan

ECC Program Faculty (full-time)

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Disclaimer

Information in this handbook describes the Radiography Program policies at the time of publication. However, changes may be made in policies, the calendar, curriculum or costs, etc. Such changes will be distributed to the students prior to the effective date.

Introduction

The material in this handbook supplements the Edgecombe Community College catalog and student handbook. The Radiography Program Student Handbook presents detailed and explicit requirements and program policies. The Radiography Program reserves the right to make policy and procedure changes at any time if the changes are necessary and benefit the educational process. Any such changes will be distributed for inclusion in the orientation handbook and/or course syllabi. Students enrolled in the radiography program classes must comply with all changes as identified and disseminated.

The policies within the **Radiography Program Student Handbook and Policy Manual** have been developed by the radiography faculty and approved by the college administration. The purpose of the handbook is to provide specific program policies and procedures to acclimate the student to a regimented program and clinical system required for program accreditation. The handbook will serve as a guide for the radiography students in the development of professional behaviors, attitudes, and competencies as outlined by the Joint Review Committee on the Education in Radiologic Technology (JRCERT), the national accrediting body for radiography programs and the American Society of Radiologic Technology (ASRT), American Registry of Radiologic Technology (ARRT).

Statement of Student Accountability

Radiography students are responsible for reviewing the handbook independently and referencing it each semester during the enrollment period. The radiography faculty reviews the handbook with the students during first (initial) semester during clinical orientation and hot topics are reviewed with quizzes throughout the program. Faculty will advise students if there are questions about the handbook or policies throughout the program. **Failure to read or comply with the policies for any reason will not exempt the student from being accountable for the policies.** The student is responsible and held accountable for all information contained in the handbook as evidenced by the signed statement of acknowledgement provided to the students.

All students are accountable for complying with policies and information in the **Edgecombe Community College (ECC) Student Handbook**, which is updated annually. Some radiography program policies are more stringent than college policies. In those cases, the policies in the Radiography Student Handbook will supersede those of the ECC Student Handbook or College Catalog as indicated within this document.

American Registry of Radiologic Technologists' (ARRT) Standards of Ethics

ARRT promotes high standards of patient care by recognizing qualified individuals in medical imaging, interventional procedures, and radiation therapy and provides a primary category of certification in five disciplines of radiologic technology. ARRT's Radiography certification programs have earned accreditation by the National Commission for Certifying Agencies (NCCA), the accrediting body of the Institute for Credentialing Excellence (ICE). ARRT demonstrated that its certification program met strict standards in accordance with ICE's mission

to promote excellence in competency assurance for practitioners in all occupations and professions.

Students are accountable to know and demonstrate an understanding of the ARRT *Standards of Ethics and Rules of Ethics* contained within the standards. The *Rules of Ethics* are standards of minimally acceptable professional conduct for all candidates for the ARRT as well as Registered Technologists. The standards and rules are covered in pre-orientation, orientation, and first semester of RAD 110 class.

ARRT Legal Implications

All prospective applicants to the Radiography Program are cautioned that the ARRT has the right to deny any application for certification based on the applicant's prior legal convictions to include misdemeanors and felonies. Because the application for the Registry Certification Exam asks the question, "Have you ever been convicted of a felony or misdemeanor?" the prospective applicant is strongly advised to contact the ARRT regarding any prior legal convictions to determine eligibility for registry certification following the completion of the radiography program. See the *ARRT Standards of Ethics (Appendix 1)*. Radiography students are required to sign a statement acknowledging they have received the ARRT Standards of Ethics.

The standards are located online at:

<https://www.arrt.org/pdfs/Governing-Documents/Standards-of-Ethics.pdf>

Disability Services

ECC recognizes its responsibilities under Section 504 of the Rehabilitation Act of 1973 to provide equal access to education for students with disabilities. Please refer to the current ECC Student Handbook for policies related to *Americans with Disabilities Act* and disability services.

Program Eligibility Requirements (Performance Standards/Technical Standards)

Reasonable accommodations will be provided to students who self-advocate and identify their disability to the student support specialist. Program and professional eligibility requirements necessary to meet the demands of the profession may hinder one from program completion and/or job attainment. To the Radiography Program faculty, "a qualified individual with a disability is one who, with or without reasonable accommodation or modification, meets the essential eligibility requirements for participation in the program."

Radiography is a practice discipline with cognitive, sensory, affective, and psychomotor performance requirements. Based on the requirements, the *Eligibility Requirements and Performance Standards (Technical Standards)* identify skills, standards and examples of required activities needed to perform the job. Potential students will be required to perform the skills and activities while enrolled in the radiography program. The standards and indicators are expected as part of the professional role of a radiographer.

The *Eligibility Requirements and Performance Standards* should be used to assist students in determining whether accommodations or modifications are necessary. Students who identify potential difficulties in meeting the expectations must communicate concerns to the college

counseling/advising staff and program director. The student has the right to identify and document the disabling condition and to ask for appropriate accommodations.

Edgecombe Community College makes no pre-admission inquiries concerning an applicant's disabling condition. Federal law prohibits the collection of disability information during the admission's process. Therefore, it is the student's responsibility to identify them and request services.

Technical Performance Standards

These standards are capabilities associated with the successful practice of radiography. Under no circumstances are they considered conditions for admission to the Radiography Program. In order to perform the tasks required of radiographers, certain physical capabilities are required. Students must demonstrate the ability to perform required functions as a routine part of classroom, laboratory or clinical education. Students should be aware that successful completion of the Radiography Program will depend upon the ability to meet the following technical standards.

A reasonable amount of strength and mobility are required for the following reasons:

1. Radiographers must be able to lift, move or push heavy equipment, specifically image plates (image receptors), mobile x-ray equipment, stretchers and/or wheelchairs with patients in them.
2. Radiographers must be able to help in lifting patients who may be paralyzed, comatose or otherwise incapacitated, from stretchers or wheelchairs to x-ray tables and back.
3. Radiographers must be able to provide physical assistance and care for patients in a timely manner in all circumstances.
4. Radiographers must be able to reach 5' overhead in order to manipulate an x-ray tube that hangs from the ceiling.

Manual dexterity, good motor skills and eye-hand coordination are necessary in order to:

5. Manipulate locks on equipment
6. Don surgical gloves
7. Fill syringes
8. Palpate and locate veins for injection
9. Align patient, image receptor and x-ray tube

Sensory function in at least one upper limb is necessary in order to palpate bony prominences.

The ability to hear faint or muffled sounds is necessary in order to:

10. Respond to patient needs since operator control areas are distant (out of area) from the x-ray tube and table, where patients are placed.
11. Monitor equipment operation or dysfunction which may be indicated by low-sounding bells or buzzers.
12. Function while wearing surgical masks for protection of the patient or hospital personnel.
13. Respond to pages from the hospital public address system.

Visual acuity (the ability to see fine lines) and intensity discrimination (the ability to distinguish gradual changes in blacks, grays and whites) are necessary in order to evaluate radiographs for technical quality.

The ability to communicate orally and in writing is a requirement for radiographers in order to:

14. Ascertain and record patient histories.
15. Explain and complete patient consent forms.
16. Provide clear and audible directions to patients face-to-face and from the radiography control area, which may be 15 feet away from the patient.

Examples of Required Activities within the Radiography Program

Skill	Standard	Activities (Not all inclusive)
Critical Thinking	<i>Critical Thinking Ability is sufficient for safe, clinical judgment.</i>	<ul style="list-style-type: none"> *Identify cause-effect relationships in clinical situations. * Evaluate radiographs to ascertain they contain proper identification and are of diagnostic value. * Select exposure factors & accessory devices for all radiographic procedures with consideration of patient size, age, and extent of disease. * Assess patient's condition & needs from a distance of at least 15 feet. * Initiate proper emergency care protocols, including CPR, based on assessment data.
Interpersonal Behavioral & Soft Skills (Social ability)	<i>Interpersonal abilities sufficient to interact with individuals, families, & groups from a variety of social, emotional, cultural, & intellectual backgrounds.</i>	<ul style="list-style-type: none"> * Establish rapport with patients, families, & colleagues. * Allow mature, sensitive & effective relationships with patients and fellow workers (interpersonal skills). * Tolerate physically taxing workload. * Function effectively under stress/duress. * Adapt to changing environments, flexible schedules, and emergency conditions. * Display compassion, professionalism, empathy, integrity, concern for others, interest and motivation.
Communication	<i>Communication abilities sufficient for interaction with others in verbal and written form.</i>	<ul style="list-style-type: none"> *Effectively communicate to the patient in order to converse, instruct, relieve anxiety, gain cooperation during procedures, and understand the patient when they are communicating symptoms of a medical emergency. * Read the patient's chart and/or physician's orders * Legibly write patient history or other information * Document own actions and patient responses as indicated.
Clinical Competence	<i>Clinical Competence requires the ability to position patient, set technical factors, manipulate equipment to obtain quality images</i>	<ul style="list-style-type: none"> *Able to position patient into the correct body positions for the required radiographic projections. * Mobile and able to perform quickly * Able to maneuver equipment vertically and horizontally in order to obtain appropriate distance and obtain images. * Able to effectively maneuver equipment at any required angle from the vertical and horizontal position *Understands and routinely restricts field of radiation as closely as possible without cutting off required anatomy. * Able to determine correct exposure factors *Able to modify positioning for alternate views *Able to identify needed anatomy and determine if it is included or how to correct the image *Demonstrates an understanding of image artifacts and how to avoid obtaining artifacts on images. * Has a thorough understanding of radiation protection for the patient, self and others.
Professionalism	<i>Professional behaviors are sufficient as stated within the ARRT standards/rules of ethics.</i>	<ul style="list-style-type: none"> *Accountable for own work * Uses appropriate lines of communication * Complies with established college, program and affiliate policies *Identifies and evaluates own strengths and weaknesses, and seeks to work with these appropriately *Recognizes, evaluates, and assumes responsibility for self-development and continued learning * Coordinates with others to provide quality care * Respects the confidentiality of professional relationships * Serves as a role model within the professional team.

Skills	Standard	Activities (Not all inclusive)
Mobility	<i>Physical abilities sufficient to move from room to room, maneuver in small spaces and independently position patients for exams.</i>	<ul style="list-style-type: none"> * Assist all patients, according to individual needs and abilities, in moving, turning, transferring from transportation devices to the X-ray table, etc. * Be able to push, pull and lift 50 lbs. * Push a stretcher and/or wheelchair without injury to self, patient or others. * Push a mobile x-ray machine from one location to another, including turning corners, getting on and off an elevator, and manipulating it in a patient's room over carpeting and in surgery.
Motor Skills	<i>Gross and fine motor abilities sufficient to provide safe and effective care.</i>	<ul style="list-style-type: none"> * Manually move the x-ray tube and position the tube at various angles at heights up to 5 ft. * Accurately draw up sterile contrast media and other solutions without contaminating the syringe and/or needles, etc. * Place IR in Bucky correctly and manipulate all parts of control panels for diagnostic and fluoroscopy imaging. * Be able to physically administer emergency care including CPR. * Be able to stand for periods as long as 2 hours wearing lead aprons and to walk a distance of 5 miles during a normal work day without having to stop and catch your breath. * Have dexterity and able to work with fingers and hands.
Hearing	<i>Auditory abilities sufficient to monitor and assess patient needs, & to provide a safe environment.</i>	<ul style="list-style-type: none"> * Able to hear a patient talk in a normal tone from a distance of 15 ft. * Able to hear monitor alarm, emergency signals, cries for help, etc. * Able to hear and verify exposure on x-ray equipment
Visual	<i>Visual ability sufficient for observation & assessment necessary in the operation of equipment & care of patients.</i>	<ul style="list-style-type: none"> * Visualize x-ray collimator centering light & identify its center. * Observe the patient in order to assess the patient's condition and/or needs from a distance of at least 15 ft. * Able to see numbers, letters, calibrations, etc., of varying sizes located on equipment used by radiographers. * Able to determine greens, reds, blacks and shades of grey
Tactile	<i>Tactile ability sufficient for patient assessment & operation of equipment.</i>	<ul style="list-style-type: none"> * Perform palpation, tactile assessment, and manipulation of body parts to insure proper body placement and alignment. * Manipulates dials, buttons, switches of various sizes and shapes.
Mental	<i>Mental ability sufficient for patient assessment & operation of equipment & care of patients.</i>	<ul style="list-style-type: none"> * Be able to visually concentrate & focus attention, thoughts and efforts on patients & equipment for varying periods of time. * Be able to respond to patients' changing physical conditions. * Be able to ascertain effective variations from routine positions and adapt them to trauma.
Environmental Requirements	<i>Physical health sufficient enough to tolerate certain conditions present in the critical setting.</i>	<ul style="list-style-type: none"> * Be able to tolerate risks or discomforts in the clinical setting that require special safety precautions, additional safety education & health risk monitoring (ionizing radiation, chemicals,) working with sharps, & infectious diseases. Willing to wear protective clothing or gear such as masks, goggles, gloves and lead accessories, as required.

II. GENERAL PROGRAM INFORMATION

Edgecombe Community College (ECC) Vision, Mission and Goals

Vision

We aspire to be an exemplary leader and training partner fostering student success and community prosperity for all.

Values

Integrity

The college fosters responsible, accountable, and ethical behavior and encourages an environment of honesty, tolerance, and civility.

Quality

The college provides relevant, quality educational and training programs and services.

Opportunity

The college provides educational, global, and cultural programming that enable students and the community to achieve their goals.

Student Success

The college provides learning opportunities and support services to help students succeed.

Diversity and Equity

The college embraces differences and nurtures a culture of honor and respect.

Collaboration

The college promotes enriching partnerships and cooperative teamwork.

Mission

ECC's mission is to strengthen and enrich the educational, training, and lifelong learning opportunities for our community.

College Goals

Goal 1: To provide quality education and training programs

Goal 2: To elevate the profile and prominence of the college

Goal 3: To maximize college partnerships and collaborations in order to provide relevant training and workforce development opportunities

Goal 4: To demonstrate fiscal responsibility and create educational opportunities through grants and private donations

Goal 5: To encourage student engagement and success through innovative programs and services

Goal 6: To promote an atmosphere of diversity, equity, and inclusion

Radiography Program Vision Mission, Goals and Student Learning Outcomes

Vision

The vision of the Radiography program is to achieve in excellence through outcome assessment and continuous improvement, providing students with marketable skills and learning opportunities to foster critical thinking and problem-solving delivered through quality instruction.

Mission

The mission of the radiography program is to prepare students to become competent, entry-level radiographers whose expertise will meet the community they serve by providing patient-centered care in a professional, compassionate and responsible manner.

Program Goals and Student Learning Outcomes

The Radiography Program has three major program goals. Each program goal identifies specific Student Learning Outcomes (SLOs).

Goal 1: Students will be clinically competent.

Student Learning Outcomes (SLOs)

- 1.1 Students will demonstrate clinical proficiency in positioning.
- 1.2 Students will demonstrate clinical proficiency in technical factors.

Goal 2: Students will demonstrate communication skills.

Student Learning Outcomes (SLOs)

- 2.1.1 Students will demonstrate effective written communication skills.
- 2.1.2 Students will demonstrate effective oral communication skills.

Goal 3: Students will develop critical thinking skills.

Student Learning Outcomes (SLOs)

- 3.1.1 Students will adapt standard procedures for non-routine patients.
- 3.1.2 Students will critique images to determine diagnostic quality.

Program Graduate Outcomes

Upon completion of the Radiography Program, the graduate will have the opportunity and potential to:

- a. apply for, take, and pass the American Registry of Radiologic Technologists (ARRT) national certification examination within six months after graduation.
- b. apply for part-time or full-time employment in the field and/or within one year after graduation.
- c. apply for and be accepted into an advanced program of study within one year after graduation.

Program History

Clinical Affiliations

The Radiography Program at ECC started in 1972 with an affiliation with Edgecombe General Hospital in Tarboro. At the time, the program had a student capacity of eight and two part-time instructors. In 1974, the campus was moved to the Rocky Mount Center, now known as the RM campus, to accommodate program expansions and an increase in the number of students.

Over the years, the program has grown and added more major clinical affiliates to provide students with enhanced learning opportunities. Currently, the radiography program has clinical contractual agreements with three major facilities: Wilson Medical Center (a Duke LifePoint Hospital), ECU Health North Hospital in Roanoke Rapids, and Nash UNC Health Care in Rocky Mount. Additionally, the program has agreements with six minor facilities, including Wilson Imaging Center, Emerge Orthopedics in Wilson, ECU Health Orthopedics in Roanoke Rapids, Boice Willis Clinic in Rocky Mount, ECU Healthplex in Wilson, and ECU Health Edgecombe Hospital. The radiography program now has a student capacity of 15 seats for one cohort.

Program Accreditation

The program received initial accreditation in 1983 for a full four-year status, which was renewed in 1998. Following five site visits and ongoing renewal of accredited status, the program was awarded a maximum status of eight years in 2008, with renewal due in 2016. An interim report was completed in 2012, and the program's self-study was submitted on June 3rd, 2016. The JRCERT site visit took place on April 6th and 7th of 2017, and no program citations or recommendations were made by the visiting team. On July 27th, 2017, the program was granted the maximum re-accreditation status of eight years, with an interim report due in the Second Quarter of 2021. After reviewing the interim report submitted in March 2021, the JRCERT Board of Trustees awarded the program with maintenance of accreditation for eight years on July 20, 2021. The self-study will be completed by October 3, 2024, and the next site visit is tentatively scheduled for April of 2025. This is an outstanding achievement, and great appreciation goes to the exceptional radiography faculty and the communities of interest team for their dedication and efforts.

Addition of Imaging Modalities

In 1990, Computerized Tomography (CT) and Magnetic Resonance Imaging (MRI) were added to the imaging program. This allowed graduates and registered technologists to pursue further education in a certified area. In 1998, when the NC Community College System converted to semesters, the radiography programs in the state decided to standardize the radiography curriculum. The program length was reduced to twenty-one months and 76 semester credit hours. (Starting in the fall of 2018, the program's most recent curriculum changes in the NC Community College Systems were revised to a 64-76 semester credit curriculum.)

In January 2016, the imaging programs, including radiography and mammography, moved into the new Biotechnology and Medical Simulation Building - (AA). In 2018, the building was renamed the "Lamm Building" after the former president, Dr. Deborah Lamm. The new building provides state-of-the-art technology and effective learning tools, allowing professional programs to integrate and use collaborative learning. In May 2018, the imaging program added mammography as a continuing education course, and Ms. Donna Sullivan was appointed as the mammography course creator and instructor.

Program Chair History

After the retirement of the program chair, Fonda Worthington, in 2006, a new program chair, Deborah Rossi, was selected and approved by the college president, Debra Lamm, and the Joint Review Commission on Education in Radiologic Technology (JRCERT). Ms. Rossi held the position until her unexpected passing in 2011. Following Ms. Rossi's passing in April 2011, Rick Mastman, the director of the consortium CT/MRI program, became the Director of Imaging, overseeing the merger of the radiography program under the Imaging umbrella. During this transition, several changes to policies and procedures were implemented to ensure consistency throughout the department.

In October 2011, Debra Hall-Griffin was selected as the new program chair and approved by the president of the college, Debra Lamm, and the JRCERT. Ms. Hall-Griffin collaborated with the Director of Imaging to make necessary improvements in policies and procedures to align the curriculum with the 2013 standards set forth by the accrediting body, JRCERT.

In September 2012, the program director fell ill suddenly. During the program chair's absence due to illness, the Director of Imaging was approved by the college president and the JRCERT to serve as the Interim Program Director until the position was filled. Unfortunately, due to unforeseen health issues, the program chair resigned from her position at the college in December 2015.

In September 2014, Desiree Duncan was assigned as the new acting program director, approved by the college president and the JRCERT.

In January 2016, after Ms. Duncan completed her master's degree, her title was changed from 'acting' to program chair/director, which was acknowledged and approved by the president of the college and the JRCERT.

Faculty History

In 2022, Debra K. Hornbacher officially ended her employment at ECC and her role as Clinical Coordinator due to health reasons. In January 2023, Kristian Paige House was added as a 9-month full-time faculty member. Also, in January 2023, Deanne Hope Swartout advanced to the position of Clinical Coordinator from a 9-month full-time clinical instructor.

Equipment History

The history of the program's equipment began in 1972 with the installation of a single-phase analog x-ray machine. This floor model had limited mobility and was compatible with a darkroom and film/screen, wet, automatic processor that took 90 seconds to develop a single radiograph.

In 2010, the analog x-ray equipment and wet processor were replaced with new x-ray equipment that was compatible with computed radiography (CR) imaging. The new x-ray equipment was a ceiling tracking system, providing enhanced mobility similar to hospital equipment. A new CR scanner/reader was used to extract the image, which was then printed using a Dry 771 laser printer or viewed from the Pictures Archiving and Communication System (PACS) on eight

newly added computers to the lab. Additionally, in the same year, a refurbished portable x-ray machine and a mammography machine were purchased for the program.

In 2012, the stationary X-ray machine was upgraded to a new CR system and integrated with digital radiography (DR). This integrated x-ray equipment is capable of performing CR or DR imaging, mimicking the capabilities found in hospitals. The CR/DR x-ray stationary equipment consisted of a Sedecal Radiographic Unit, Sedecal Generator (30kW), Sedecal Overhead Tube Stand, Wall Stand, and Table.

In January 2016, the x-ray equipment and accessories were relocated from the Barnes building to the AA-Biotechnology and Simulation Building [Lamm building], rooms 215 and 224. To enhance student learning, the x-ray lab was equipped with twelve computers and an automatic pulldown Starboard screen projector. During the spring of 2016, new imaging phantoms, lead aprons, positioning sponges, and shielding devices were added to the X-ray program.

On June 5, 2018, a refurbished Fluoroscopy C-arm was added to the program to strengthen student education in clinical education centers (CECs).

On June 1, 2020, a DR plate (Wireless Canon DR with grid cabinets) and Paxera PACS system were upgraded. The DR plate, from Philips and purchased through RADON Medical, LLC, was added as well.

On November 17, 2020, a fully refurbished Stryker 735 Stretcher with a brand-new mattress was added to the x-ray program.

On February 22, 2021, a new Canon Sedecal Soltus 450 DR portable was purchased through RADON Medical, LLC and added to the x-ray program.

On May 9th, 2022, the stationary Radiographic unit was replaced with a Del Medical Radiographic Unit, and a Canon CXDI-70C detector was added (May 12, 2022).

In April 2024, the CR reader, CR equipment, and Dry 771 laser printer were removed from the x-ray lab. Additionally, PACS (Paxera) was updated to the latest version during this month.

Professional Responsibilities

The radiography student should use the following guidelines to assist them in attaining the goal of becoming a professional radiographer. The student radiographer will:

1. Attend all classes, labs, and clinical rotations as scheduled or notify instructor prior to a class or clinical if an absence is expected.
2. Be punctual (10 minutes early) for class, lab, and clinical or notify the instructor when delayed.
3. Be organized, prioritize educational obligations and develop good study habits.
4. Come to class, lab, and clinical prepared and with all assignments completed.
5. Bring all necessary books and equipment to class, lab, and clinical.
6. Prepare for and take tests at the scheduled time.
7. Make appointments with instructors to discuss grades, questions, or any information that you do not understand. Do not hesitate to request help.
8. Actively participate in class, learning activities and group projects in an appropriate and respectful manner.
9. Submit work in a neat and legible manner following grammatical, spelling and college level writing protocols.
10. Adhere to all Radiography Program and Clinical Affiliate policies and procedures.
11. Create and participate in study groups.
12. Maintain patient confidentiality and patient safety.
13. Report to assigned area room rotations and follow the rules of exam performance under 'direct' and 'indirect' supervision.
14. Prepare for and request to perform competencies when available.
15. Show enthusiasm and initiative in clinic. Show an interest in learning and a willingness to try.
16. Accept and utilize constructive feedback.
17. Uphold a positive attitude and professional demeanor.

Curriculum Philosophy

The Radiography Program is devoted to the education of entry-level radiographers. Both students and faculty share in the learning process. The student is ultimately responsible for meeting goals through acquisition of knowledge and skills that demonstrate specific radiography competencies. The radiography faculties are the primary resource, facilitate the learning process by serving as role models, coordinating learning activities and opportunities, and providing quality instruction.

Evaluation of learner achievement is shared by the student and the faculty consistent with specific objectives and competencies. Performance of skill and technical competencies are validated through evaluation. Opportunities to demonstrate achievement of competencies are sufficient in number to develop the mastery of stated objectives.

The curriculum is designed and organized to provide a broad base of practice through general education, radiography classes, lab practice, lab and clinical proficiency, and clinical courses. The program utilizes beginning competencies, knowledge, and skills to build a base that is strengthened and enhanced each successive semester. The components of clinical competence, critical-thinking, oral and written communication, professionalism, and skill development are basic to radiography competency. Since each learner has different goals, learning styles and progression rates, it is necessary for the program to offer a variety of teaching/learning methods to ensure progress.

The radiography faculty believes that teaching and learning are interactive processes and expect the student to assume an active role in their education. The radiography faculty facilitates the learning process by explaining radiography theory, concepts and practices and providing opportunities for the student to apply these concepts through quality laboratory and clinical experiences. The student is responsible for meeting the goals of radiography education through the acquisition of knowledge and demonstration of radiography competencies.

Curriculum Sequencing Policy

The radiography curriculum is a step-lock curriculum. This means that courses are available only at determined times within the five semesters. In a step-lock curriculum, the courses build on one another. Students in the Radiography program must take and pass courses in sequence as defined on the Radiography Advising Guide or prior to the required semester. The courses cannot be taken after the required semester as indicated on the Advising Guide. If a student gets off course during the semester resulting in a grade of 'D or F', the student will be terminated from the program. Students are expected to make a 'C' or better in all RAD prefix courses and ALL General Education courses in order to progress to the next semester in the program. Student must maintain a minimum of a 2.5 overall GPA while in the radiography program to progress. The student may reapply for admission to the radiography program the following year (see readmission policy). [Students are given ONE opportunity for re-admission into the radiography program, as long as there is adequate space. The JRCERT requirements of 1:1 tech to student ratio must be maintained.] (Clause: In the event of a mass crisis such as a pandemic, some of the RAD pre-fix courses are eligible for taking out of sequence so students may graduate on time.)

ECC RADIOGRAPHY ADVISING GUIDE

Fall - 1st Semester

BIO 168 - Anatomy & Physiology I Credit: 4*	
ENG 111 - Writing & Inquiry Credit: 3*	
MAT 143 - Quantitative Literacy Credit: 3*	
RAD 110 - Radiography Introduction & Patient Care Credit: 3	
RAD 111 - Radiography Procedures I Credit: 4	
RAD 113 - RAD Lab Elective Credit: 1	
RAD 151 - Radiography Clinical Ed I Credit: 2	20 credits

Spring - 2nd Semester

BIO 169 - Anatomy & Physiology II Credit: 4*	
PSY 150 - General Psychology Credit: 3*	
RAD 112 - Radiography Procedures II Credit: 4	
RAD 121 - Radiographic Imaging I Credit: 3	
RAD 161 - Radiography Clinical Ed II Credit: 5	19 credits

Summer - 3rd Semester

RAD 122 - Radiographic Imaging II Credit: 2	
RAD 141 - Radiation Safety Credit: 2*	
RAD 171 - Radiography Clinical Ed III Credit: 3	8 credits

Fall - 4th Semester

COM 231 - Public Speaking Credit: 3*	
Or	
ENG 112 Writing/Research in the Discipline Credit: 3*	
Or	
ENG 114 - Prof Research & Reporting Credit: 3*	
RAD 211 - Radiography Procedures III Credit: 3	
RAD 231 - Image Production III Credit: 2	
RAD 251 - Radiography Clinical Ed IV Credit: 7	15 credits

Spring - 5th Semester

RAD 261 - Radiography Clinical Ed V Credit: 7	
RAD 271 - Radiography Capstone Credit: 3	
Humanities/Fine Arts Elective Credits: 3 (see directly below)	13 credits

Elective Courses

Humanities/Fine Arts Elective

Select 3 SHC from the following list of courses.

HUM 115 - Critical Thinking Credit: 3*
PHI 240 - Introduction to Ethics Credit: 3*

Total Program Credits 74

* Classes marked with an asterisk * may be taken prior to acceptance into the Radiography program.

***Any grade of 'D' or lower in Rad prefix or general education prefix will result in program termination.

Student Signature

Date

Advisor Signature

Date

Academic Advisement and Registration

The ECC Student Handbook includes information about the roles and responsibilities of academic advisors. The primary radiography program advisor is the program chair. The program advisor will register ‘on track’ students for classes during Early Registration. If, for some reason your curriculum is off-track, you will need to schedule a time to meet with the program chair immediately. All program students are required to take and pass the courses as indicated on the Advising Guide. **The courses can be taken prior to or during the required semester but cannot be taken after the required semester.** Program Chair will meet with students on an individual basis as needed for advising and registration during the program.

Student Conferences

A student may request a conference with the program chair or another faculty member of the program at any time that is convenient for both parties. Students will be apprised of issues as they arise and will be counseled academically, as necessary regarding all RAD courses.

Clinical Professional Evaluation (PE) conferences, Mid-semester/term student Professional Self-Assessments (PSAs) and didactic mid-semester/term grade conference will be conducted each semester with every student. These conferences will be scheduled by and with a faculty member of the program. The purpose of the conference is to discuss student progress in clinical and academic performance. If there are problem areas, they will be discussed and remedial action planned and implemented as necessary.

Program Expenses

The expenditures associated with completion of the Radiography Program come from tuition, student fees, books, uniforms, medical equipment, supplies, costs associated with meeting health requirements of clinical facilities, fees specific to health science programs and association fees, and liability malpractice insurance. Refer to the *Estimated Cost* handout that was provided during the program information session or new student orientation session. Refer to the ECC Student Handbook for an explanation of tuition, fees, tuition refunds, and financial aid.

Radiography Textbooks

Each course syllabus includes a list of required textbooks and resources from which readings and assignments will be made. The current edition of each textbook is required, as indicated on the syllabus. Computer access is required as ancillary resources for several of the radiography texts. The student is required to purchase the access card and to maintain integrity of the user name and password once received.

TEXTBOOK LIST

FALL SEMESTER

JUNIOR LEVEL				
	COURSE	TEXTBOOK TITLE	AUTHOR/Publisher	YEAR
Bundle code by publisher	RAD 110: Med Term Online	Online: Medical Terminology Quick & Easy, 10 th ed. with adaptive learning	Leonard/Elsevier	2024
Bundle code by publisher	RAD 110: Med Term Book Spiral bk	Medical Terminology Quick & Easy, 10 th ed	Leonard/Elsevier	2024
Bundle code by publisher	RAD 110: Patient Care	Introduction to Radiologic & Imaging Sciences & Patient Care, 8 th edition	Adler, Carlton&Stewart /Elsevier	2023
Bundle code by publisher	RAD 110: Science	Essentials of Radiographic Physics and Imaging, 3 rd ed. 4 th edition to be released 2/1/2025	Johnston&Fauber	2021 2026
978-1-337-71106-7 (not part of the bundle)	RAD 110: Science	Principles of Radiographic Imaging, An Art and Science, 6 th Edition	Richard R. Carlton and Arlene McKenna Adler/Cengage Learning	2020
Bundle code by publisher	RAD 111: Procedures I Online	Mosby's Radiography Online: Anatomy and Positioning for Merrill's Atlas of Radiographic Positioning and Procedures, 15th Edition	Rollins, Long & Curtis/Elsevier	2023
Bundle code by publisher	RAD 111: Procedures I Workbook	Workbook for Merrill's Atlas of Radiographic Positioning and Procedures, 15th Edition	Rollins, Long & Curtis/Elsevier	2023
Bundle code by publisher	RAD 111: Procedures I 3-volume set Hardcover	Merrill's Atlas of Radiographic Positioning and Procedures, 15th Edition	Rollins, Long & Curtis/Elsevier	2023
Bundle code by publisher	RAD 151: Clinical Ed I Spiral Bound	Merrill's Pocket Guide to Radiography	Rollins, Long & Curtis/Elsevier	2023

FALL SEMESTER

SENIOR LEVEL	FALL SEMESTER			
	COURSE	TEXTBOOK TITLE	AUTHOR/Publisher	YEAR
	RAD 211: Procedures	<i>(same as RAD 111 and 112 textbook requirements)</i>		FALL
	RAD 211: Pathology	Radiographic Pathology, 2 nd Edition	TerriAnn Linn-Watson/ Wolters Kluwer/Lippincott Williams & Wilkins (health)	2014
	RAD 211: Pathology Workbook	Radiographic Pathology Workbook, 2 nd Edition, Workbook	TerriAnn Linn-Watson/ Wolters Kluwer/Lippincott Williams & Wilkins (health)	2014
	RAD 231	<i>(same as RAD 110,121 textbook requirements)</i>		FALL
	RAD 251	<i>(same as RAD 151 textbook requirements)</i>		FALL

SPRING SEMESTER

JUNIOR LEVEL				
ISBN	COURSE	TEXTBOOK TITLE	AUTHOR/Publisher	YEAR
	RAD 112: Procedures I Online	<i>(same as RAD 111 textbook requirements)</i>		
	RAD 112: Procedures I Workbook	<i>(same as RAD 111 textbook requirements)</i>		
	RAD 161: Clinical Ed II Procedures I 3-volume set Hardcover	<i>(same as RAD 111 textbook requirements)</i>		
	RAD 161: Clinical Ed II Spiral Bound	<i>(same as RAD 111 textbook requirements)</i>		
978-1-337-71106-7 <i>(purchased in Fall)</i>	RAD 121: Imaging I	Principles of Radiographic Imaging, An Art and Science, 6 th Edition	Richard R. Carlton and Arlene McKenna Adler/Cengage Learning	2020
<i>(purchased in Fall)</i>	RAD 121: Imaging I	Essentials of Radiographic Physics and Imaging, 3 rd ed	Johnston	2021

SENIOR LEVEL		SPRING SEMESTER		
ISBN	COURSE	TEXTBOOK TITLE	AUTHOR/Publisher	YEAR
	RAD 261: Clinical Ed V	<i>(same textbooks for RAD 151)</i>		Spring
	RAD 271: Capstone	ALL required textbooks from previous courses and RAD Boot Camp.	RAD bootcamp	Spring

SUMMER SEMESTER

JUNIOR LEVEL				
ISBN	COURSE	TEXTBOOK TITLE	AUTHOR/Publisher	YEAR
9780323825030	RAD 141: Textbook	Radiation Protection in Medical Radiography, 9 th ed.	Mary Alice Statkiewicz, Paula J. Visconti, E. Russell Ritenour/Elsevier	2022
9780323825085	RAD 141: Workbook	Radiation Protection in Medical Radiography, 9 th ed., workbook	Mary Alice Statkiewicz, Paula J. Visconti, E. Russell Ritenour/Elsevier	2022
9781264692538 9781260460445	RAD 171: Jr Seminar Review Textbook	Radiography PREP (Program Review and Examination Preparation) 10 th ed. Lange Q & A, Radiography Examination, 12 th edition <i>Same textbooks for RAD 111/112/151/161</i>	D. A. Saia/McGrawHill Same	2024 2021
9780323826983 <i>(Purchased in Fall)</i>	RAD 122	Digital Radiography & PACS, 4th Edition Essentials of Radiographic Physics and Imaging, 3 rd ed. <i>4th edition to be released 2/1/2025</i>	Euclid Seeram/ Delmar Cengage Learning Johnston	2023 2026

Computer Access

Moodle is used as a supplement and valuable class resource. In addition, **software and internet programs are used to supplement class, clinical, lab and capstone.** Computer access is necessary for progression in the program. If you do not have personal access to a computer, you are not excused from the assignments. You may schedule times in the public or ECC libraries if you do not own a computer. **Computer access is required as ancillary resources for several of the radiography textbooks.** The student is required to purchase the access card and to maintain integrity of the user name and password once received. **Do NOT wait until the last day and hours to take any online assignments, tests, or quizzes due to unforeseen circumstances!!!**

Semester Breaks

The academic calendar of Edgecombe Community College provides student breaks between and during semesters. The calendars are published far enough in advance that students are able to make plans for personal time. **Every effort should be made to schedule personal time during college breaks to avoid missing classroom and/or clinical instruction. Personal time includes dental and routine medical appointments.** Attendance is expected for all classes and all clinical dates. **Personal use of time is not excused and the student will be penalized if absences exceed the allowable hours /days as indicated on course syllabi.**

Student calendars can be printed off the ECC home page under www.edgecombe.edu/Eventscalendar.

ECC Commencement Exercises

A commencement exercise to award degrees and diplomas is held at the end of the spring term. All radiography students receiving graduation diplomas are **highly expected to attend.** Diplomas, caps, and gowns are ordered yearly. Prospective graduates must file their application by early January (Program Chair will guide students in the process).

Radiography Pinning Ceremony

All senior radiography students are expected to attend the annual Radiography Pinning Ceremony. It is a distinguished recognition service held to acknowledge the senior students for completion of a rigorous clinical and didactic education. Junior marshals are required to attend in support and participation of the senior students and to observe the celebration.

Student awards are presented to include the *Academic Excellence Award* for the student with the highest-grade point average and *The Lynwood D. Twisdale Award* for the student who has demonstrated proficiency in all areas of radiology (best all around). Other awards may include the *Rising Star Award* for the student who has gone beyond the call of duty to improve his/her grade point average and/or clinical proficiency and the *Leadership Award* for the student that has demonstrated excellent leadership skills in leading the class in the RAD Club activities, lab and classroom group activities and in clinical guidance and peer leadership ingenuity. Additional awards may be presented if faculty see other areas to reward a student. Program faculty reserves the right to deny presentation of student awards, if the criterion for such an award has not been satisfied by any candidate within the graduating class.

For a formal pinning ceremony, pinning attire is to be professional. Ladies are required to wear a black (with very little amount of white) dress. Black dress slacks with a white blouse are acceptable if a dress is not desired. Gentlemen are required to wear black dress slacks with button down white dress shirt. Gentlemen are required to wear a tie. Gentlemen are required to wear dress shoes!

Refreshments consist of a graduation cake and bottled water. (Simple and sweet)

Surveys and Evaluations

In a continuous effort to improve clinical aspects of the program, evaluations of the clinical affiliates are conducted by the Office of Institutional Effectiveness and the Radiography Program. Each student writes an evaluation for each clinical affiliate attended. The evaluations are done at the end of the summer (3rd) semester during the first year and at the end of spring (5th) semester during the second year. The results of the evaluations are shared with the faculty, communities of interest, radiography administrators and ECC administration in order to continuously improve our practices. The data is assessed, analyzed and used to support the program effectiveness plan for JRCERT accreditation.

Evaluations of the faculty are conducted by the Office of Institutional Effectiveness at the end of each semester in order to continuously improve the teaching and learning process. Each student is requested to write an evaluation of each didactic and clinical preceptor. The results are shared with the faculty the following semester and faculty are encouraged to make positive curricular changes based on the results.

Graduation surveys are conducted by the Office of Institutional Effectiveness and the Radiography Program in a continuous effort to improve services offered to students. The surveys are filed and used for statistical reports and studies as well as serving as a tool to identify problem areas in the departments. These surveys are assessed, analyzed and used to support the program effectiveness plan for JRCERT accreditation.

Employer Surveys are conducted by the Office of Institutional Effectiveness and the Radiography Program in a continuous effort to improve graduate outcomes. The information is used to assess and evaluate whether the graduate is able to perform employer expectations. The results are shared with the faculty, administration, radiology managers and advisory committee in order to make positive improvements within the program. These surveys are assessed, analyzed and used to support the program effectiveness plan for JRCERT accreditation.

Exit Interviews

Prior to exiting the radiography program, students are required to participate in an exit interview with the Program Chair. The conference allows the faculty to collect data related to program effectiveness and provides an opportunity for students to complete program and clinical surveys. The information will be collected and sent to the Office of Institutional Effectiveness for assessment and analysis. The results are used to assess, analyze and support the program effectiveness plan for JRCERT accreditation. Exit interviews results are shared with faculty and the advisory board during specified meetings.

Professional Development Opportunities

To appreciate the value of independent learning through professional activities, it is required for students to become a member of the ECC RAD Club, North Carolina Society of Radiologic Technologist (NCSRT) and/or by participating in continuing education activities while in the program. The radiography professional societies periodically sponsor educational seminars. Students are required to join the American Society of Radiologic Technologist (ASRT) at the discounted student rate.

Senior students are required to attend the NCSRT annual conference (Spring semester). Prior planning on the part of each student individually and each class collectively is essential. Prior to the NCSRT annual conference, the students will be given an agenda for the presentations and guidance in which ones to attend. The conference includes lectures, workshops, a 'mock registry exam', and a student quiz bowl. Students are required to participate as representatives of the college. **Those who do not attend required sessions at the NCSRT conference will be required to write a paper on the missed topic.** The costs for attending conferences are estimated around \$300 per person, including transportation, rooms, registration, and meals. Students are notified of more precise costs as they become available.

RAD Club

Students are required to join the RAD Club, student professional organization. The RAD Club provides radiography students an opportunity to pursue leadership abilities and to experience philanthropic and professional obligations. The student organization participates in philanthropic activities within the local community and college sponsored activities. The RAD Club is self-supported by approved fund raisers as well as college disseminated funds under the student government association, as allowed. **Monies are used to support the annual Pinning Ceremony that is held in honor of the senior students and is used to assist with registration fee for the annual professional meeting (NCSRT), and/or educational field trips, i.e.,**

ALL monies collected will remain in the RAD Club account until funds are exhausted!

STUDENT MEMBERSHIPS

Membership is open to all students and is an expectation for progression and participation in program activities to include the professional meetings and the annual pinning.

Students are required to pay for individual membership to the ASRT by November 15 of the first semester and by May 1st of the second semester to the NCSRT organization.

RAD STUDENT DUES

Student dues will total the amount of \$30 collected by October 15th of the first semester. The organizational dues are placed in the RAD Club account and used for future events.

DUTIES OF THE OFFICERS

Officers lead by example. Officers must represent and possess excellent character and leadership qualities.

Officer(s) must attend ALL SGA meetings. (rotation of the officers is acceptable).

President: The President shall

Be the chief representative and spokesperson for the RAD Club and its constituency to ECC students, faculty, administration, and to the general public.

Prepare in consultation with the advisor and fellow officers, the Tentative Agenda for all Meetings.

A minimum of one meeting shall be dedicated to the annual conference.

A minimum of one meeting shall be dedicated to annual fund-raising plans.

A minimum of one meeting shall be dedicated to planning of the Pinning Ceremony.

Activities within the years shall include:

Two ECC fundraisers (1 fall; 1 spring)

One community service activity

One philanthropic/charity activity (summer)

Co-chairs and organize all fund-raising activities

Oversee internal affairs and business within the RAD Club, including officers, attendance, obligations, participation, and conduct of its Members.

Convene and preside over officer meetings and meetings of the RAD Club constituency.

Report to the Program Director and/or Advisor all action(s) and meetings taken by him/her in the discharge of his/her duties and responsibilities and in the implementation of its policies and decisions.

Provide a written narrative at the end of his/her term (prior to graduation) stating the initiatives undertaken by the RAD Club during his/her term and the status of those initiatives at the end of his/her term, which will serve as governing guidelines for the newly elected, incoming RAD Club body.

Vice President: The Vice-President shall

Oversee internal affairs and business within the RAD Club, including officers, attendance, obligations, participation, and conduct of its Members.

Assist the President in meeting plans, making agenda, other duties.

Prepare and preside over officer meetings and meetings of the RAD Club constituency, in the absence of the President.

Co-chairs and organize all fund-raising activities.

Treasurer: The Treasurer shall

Serve as permanent Chairperson of the Finance.

Enforce those regulations concerning the general financial aspects of the campus organization as prescribed by ECC administration.

Keep all financial records of the RAD Club, and in this capacity, shall:

- a) Collect, accurately, record, and submit all fund monies and receipts to the Advisor or Program Chair to be forwarded to the college's financial officer to deposit into the RAD Club account.
- b) Submit budget at Officer Meetings, as needed.
- c) At each meeting provide continuous review of the funds, expenditures, and budget of the RAD Club.

Record and process all the RAD Club purchase orders, check requests, and invoices within 48 hours at the guidance of club advisor.

Submit typed financial record at end of term and prior to graduation.

Secretary: The Secretary shall

Attend the RAD Club and Officer Meetings and be responsible for composing minutes and ensuring that all relevant data is recorded at each.

Transmit these minutes within forty-eight (48) hours after each meeting in electronic format to all members of the RAD Club, Advisor, Faculty and Program Director.

Keep non-financial records of the RAD Club.

Accept proposed meeting agenda items from a RAD Club member for placement on the Meeting Agenda. Transmit the requests to the VP and/or President.

Assume other responsibilities as the RAD Club may require.

Email decisions made in the meeting to the Advisory and Program Director.

Assume other responsibilities as the RAD Club may require.

All fundraiser profits will be used toward, pinning items such as cake, drinks, pins, awards, etc. The fundraiser profits will also help offset the cost of the student annual conference registration fee and/or field trips.

**Students cannot be on academic or behavioral probation/PIP and serve as an officer!
Students on academic and/or behavioral probation will be removed from office and faculty will vote on a new officer to serve the open position.**

(RAD Club Revised 7/23, 6/22; 8/2021;7/2018; 8/2016 ;7/2016; 6/2015)

Parking Regulations (ECC)

Parking areas are available to ECC students. Arrive early enough to get a parking space. If you wait until the last minute to arrive before class starts, this may leave you walking some distance. Students may **not** park in reserved spaces (handicap or veteran parking unless you have a handicap or veteran plaque displayed in your vehicle) or loading zones. Students are **not** to park on South Washington Street! (this is the street between Larema Coffee House and the ECC College). All cars must display an ECC parking permit (sticker), which can be obtained in the bookstore. Violators' cars may be towed away.

Tobacco Free Campus/Alcohol/Drugs/Weapons (ECC)

Edgecombe Community College is a tobacco/alcohol/drugs/weapon-free campus. Please refer to the college's student handbook.

Eating and Drinking in Classroom and Labs (ECC)

No food or beverage is allowed in laboratories without special permission.

Eating and drinking are permitted in authorized 'food' areas only. On the RM campus, in the Barnes building, the student lounge on first floor and is the designated area for food consumption. In the Biotechnology and Simulation Building, student seating areas located on all three floors are the designated area for food consumption.

Progression Policy

In order for the student to progress to the next semester in the radiography program, the student is required to:

- Attain a 'C' (77%) or better in all core radiography and general education courses.
- Maintain cumulative grade point average (GPA) of 2.0 or above each semester.
- Maintain cumulative grade point average (GPA) overall 2.5
- Remove an incomplete in a radiography (RAD) course before the first day of class of the next semester.
- Satisfactorily complete Capstone section tests with an '85%' or better average score and Capstone final exam with a '85%' or higher prior to graduation.
- Maintain sequence of radiography and general education courses. General education courses may be taken prior to enrollment in radiography or in curriculum sequence.

Readmission Policy (ECC student)

If a student receives a 'D' or lower in any course during the semester as indicated on the Advising Guide, the student will be terminated from the radiography program. Any such student may apply for *readmission* for the following school year by adhering to all steps of the Radiography Admissions' policy guidelines, and the (5) criteria indicated below. If accepted, the student may repeat the course to remove the deficiency.

Students will not be readmitted during the same school year due to limited clinical space and faculty requirements. Students shall be limited to two opportunities (initial and re-entry) for successful completion of the Radiography program.

1. Applicants must apply to the program and claim status as a "readmit student" if previously enrolled in **ANY** radiography program (ECC or other).
2. Applicants must meet ALL current admission requirements of the program, to include ranking, to be readmitted to the program. The applicant will be considered with the applicant pool of the next class to be accepted.
3. Transcripts of readmit applicants are evaluated by the ECC counselor in consultation with the Program Director.
4. Requirements of readmission **will** include challenge exams and/or retesting of competencies. Students are encouraged to audit previously passed classes in order to improve the chances of success on challenge exams and competency requirements. Once readmitted, the student will receive a letter from the Program Chair detailing requirements of readmission. Readmission is allowed once and must occur within one year of exiting the program.
5. Acceptance into the program is **not** guaranteed and is based on JRCERT requirements regarding clinical assignment ratio; 1:1 student to technologist ratio for clinical.

Transfer Policy (Currently enrolled in radiography program other than ECC)

1. Applicants must apply to the program as a “transfer” student if they are **currently enrolled** in a radiography program and are **in good standing** in their current program. **In good standing** means that the student dropped the program due to hardship but was passing all classes.
2. The ECC counselor in consultation with the Program Director and Dean of Health Sciences will evaluate the radiography core courses for equivalency to determine if transfer credit will be granted.
3. The Registrar will evaluate general education courses for credit. The student will receive a letter from the Program Director summarizing the results of the transcript evaluation including core courses that were accepted for transfer credit and any additional requirements which may include challenge exams and/or competency check-offs.
4. Applicants must meet ALL current admission requirements of the program.
5. Acceptance into the program is NOT guaranteed and is based on JRCERT requirements regarding clinical assignment ratio; 1:1 student to technologist ratio for clinical.
6. Transfers will be allowed only once and must be requested during the first three semesters of the five-semester program.

For Withdrawal Policy, Withdrawal by Students from Courses or College, and Withdrawal by Faculty or Administration from Courses (refer to the ECC Student Handbook)

Change of Address (Postal and Physical), Name, Phone

The student **must contact the Student Services Office** immediately after a change of name, address (postal and physical), insurance, and/or phone, etc. The student is responsible for all correspondence mailed by the college to ‘said’ address. In addition, assignment to clinical affiliates is based on ‘said’ address as viewed by faculty in Datatel. If changes are made to personal address, telephone and email the student must make the change in student services and advise the clinical coordinator of such change immediately. Students are required to use the college’s ‘**my.edgcombe.edu**’ email address for communication with radiography faculty. **NO personal outside emails will be acknowledged or used for communication!**

Student ID Badge Policy (ECC & Program)

ECC students are required to visibly wear the ECC student identification badge at all times while on campus and at the clinical education center (CEC). The ID is also required to use library services, computers, printing, and book check-out.

Inclement Weather Policy Regarding Clinical

Please see the ECC Student Handbook for the complete policy. Note that announcements to close or delay campus classes will be made by 5am for day classes and by 4:00pm for evening classes. **If the college closes due to inclement weather, clinical will be automatically cancelled.** If the college is on a delay, clinical will begin at the time the school opens. **For example, for a two-hour college delay, clinical will be delayed until the same time the college opens, not two hours after clinical was scheduled to begin.**

Example: Clinical starts at 7am for OR and college opens at 10am due to delay, student will report to clinical at 10am.

Example: Clinical starts at 8am for normal shift and college opens at 10am due to delay, student will report to clinical at 10am.

Example: If the college is on a 2-hour delay, evening student will meet at normal scheduled time with no delay.

JRCERT and Program Standards: If college is closed, no student will be present or assigned to clinical! On approved college holidays, no student will be present or assigned to clinical, not even for make up time! In the event of a college weather closing, no student will be allowed to stay or report to clinical during the ‘closing time’.

In the event of inclement weather, students should check the website (www.edgecombe.edu), call the switchboard at (252) 823-5166 or watch local television stations to determine if class will be held. The decision to delay classes or close the college during inclement weather is the responsibility of the President or his/her designated representative. The decision is made by 6:30 a.m. if a situation arises. Further information can be found in the ECC Student Handbook.

The college administration recognizes that under certain extreme weather conditions, students cannot and should not attempt to come to campus or clinical sites. However, if classes are not officially cancelled, it is the responsibility of each student to decide if he/she would be safe driving in the inclement weather. This is a decision that must ultimately be made by each individual. Students must assume responsibility for deciding if weather conditions are too hazardous to permit safe driving, regardless of college announcements. Safety and personal judgment are required in each individual case. Caution is urged! Even though safety is the first concern, students must avoid any abuse, or potential abuse, of this situation.

Early Closing

If ECC closes early after the start of clinical, the Program Director or Clinical Coordinator will notify the Clinical Preceptor or technologists to dismiss the students from the clinical education center at the time of the college closing.

- **Weekend Clinical Closing**

Saturdays will follow the college’s closing announcement

Sundays – Up to student’s personal judgement (time may be allowed to be made up)

Reporting Absences When the College Does Not Close

Even though the inclement weather policy has not been invoked and the college is open, but road conditions where the students live preclude safe travel and the students elect not to report to clinical at an assigned clinical facility in Edgecombe County, the students must follow the program policy for reporting the absence. The absence will be documented.

If the student’s clinical assignment is **outside of Edgecombe County**, and the public county school (Halifax, Nash, Wilson County Schools) located in the county of the clinical site is closed or has an alternate schedule due to inclement weather, the students **will be excused** from clinical and allowed to make up the time missed. The Program Director is responsible for determining if the public county school located in the county of the clinical site is closed or has an alternate schedule due to inclement weather and will document approval of the absence. The students

must follow the program policy for reporting the absence. If the students adhere to policy, the absence will be eligible for makeup and will not count against the clinical absence policy.

Make-up Schedule

In the event of delays or closings due to inclement weather or scheduled holidays, make-up time will be added to the course schedule to ensure students receive the full hours of classroom and clinical instruction that are required for the course. The instructor of record will determine the dates and times that make-up time will be scheduled and students will be notified of those dates and times prior to the day/time or an outside assignment will be submitted by the clinical coordinator. This is required by the state auditor and ECC administration.

Working While in the Program

The Radiography program is physically, emotionally, academically and financially demanding. Students are encouraged to visit the financial aid office to determine eligibility for financial assistance. If employment interferes with ability to meet program objectives, faculty may recommend that a student with a heavy work schedule modify their working commitments. **The student is responsible for ensuring that their individual work schedule does not conflict with clinical and didactic commitments. The program will NOT adjust the clinical or didactic schedules to accommodate the student's work or personal commitments. Working FULL-TIME (40 hours a week) is highly discouraged for patient safety and YOUR safety.**

Student Employment Policy

Students may find themselves in a position of being offered part-time employment in the radiology department as hospital personnel become aware of the abilities of each student.

Students working as hospital/clinic/Dr. office employees are not permitted to supervise peers or other students or complete evaluations. In addition, employee-time may NOT count as clinical time in the program, nor can the student employee earn clinical competencies during work time. Educational credit cannot be obtained for time for which a student was paid as an employee.

Students should be aware that the accidental insurance coverage purchased through the College **will not** cover them when working in the role as hospital employees. They should, therefore, take a very serious look at the employment situation offered to them.

ECC Radiography Program Contingency Plan

“A crisis is an excellent predecessor to prepare for the next crisis.”

“The foremost of our decision making is always the safety and well-being of our students and program faculty”

This plan will address any catastrophic event that would have the potential to disrupt normal operations of the radiography program yet ensure quality education. Four goals of the contingency plan:

- 1. Appropriate technological tools for remote work**

- Hardware, software, internet capabilities, and the ability to access accreditation files and data and college files.
 - Faculty and students are to have access to a dependable computer or laptop with internet capabilities.
 - Faculty and students are to have access to a webcam for virtual meetings and course deliverance
 - Program Chair is to have access to Datatel (student records) on laptop for advising purposes, if needed.
 - Through virtual office, the RAD faculty is to have access to radiography files and master plan of education (R drive) while teleworking

II. Communication strategies

- Virtual meetings (daily, weekly, monthly – to assure continuity and inspire connection on a personal basis)
 - Faculty are to meet daily as needed – (time & day to be announced)
 - Faculty are to meet weekly as needed – (time & day to be announced)
 - Faculty are to meet monthly as needed – (time & day to be announced)
- Use of Google Meets, Zoom, Microsoft Teams, Moodle Collaborate etc., are identified as communication methods
 - Radiography program is to use Google Meets as needed for virtual meetings and student course content deliverance as preferred virtual platform
 - If virtual deliverance method is used, it will be recorded and shared with all radiography students for future review(s)
 - Radiography program uses GroupMe phone application for student communication
 - identifiable group name is by cohort, example, **ECC-RAD-2024-2026**.
 - identifiable private faculty group name, is **RAD Faculty**
 - Students are encouraged to hold virtual study groups with the DUO application or other platform on their personal phone or through Google Meets, Zoom, Microsoft Teams, etc.

III. Course Deliverance and Safety Measures

- Radiography program is to use synchronous face-to-face (f2f) deliverance of material companioned with web-enhanced content (asynchronous). [IF a class cannot meet through the synchronous f2f method, an asynchronous deliverance of material will be conducted by the instructor and notification will be sent in the application GroupMe student/faculty chat, email, and by personal phone call.]
 - The college and the program are to use Moodle companion for all courses
 - Each RAD prefix course is to use Moodle companion for upload of all course documents.
 - Testing and quizzes are to be held in Moodle using Respondus lockdown browser.

- Assignments are to be uploaded into Moodle through the Drop Box
- All clinical education is to be face-to-face (synchronous) and conducted in the clinical agencies or the lab on campus through simulation by approval of the program chair and the clinical coordinator.
 - Plan for potentially delayed clinical experiences
 - In the event of clinical cessation of students due to a pandemic, there may be a delay in clinical requirements and experiences (this could delay graduation)
- Competency Simulations will be conducted on campus in the x-ray lab as a last resort.
- Didactic deliverance of lectures will be:
 - delivered on campus face-to-face.
 - if virtual methods are required by the college, or the program, Google Meets will be the preferred tool platform
- All labs are to be hands-on, face-to-face instruction and demonstration
 - Small groups of no more than 8 students per lab session
 - Active labs less than the suggested six feet physical distance, faculty and students are to wear a mask, and/or face shield along with the use of hand sanitation. Gloves are to be donned at the digression of the situation by the radiography faculty.

IV. Ongoing Support with creativity and flexibility in sound decisions that will provide positive outcomes for students

- Faculty are to revisit the contingency plan periodically during the handbook revisions in the month of June.

Pandemic Related Outbreaks – Mask Policy as of Fall 2024. Masks are optional; however, they are required if a student is having symptoms of sneezing, coughing, or not feeling well. If student has a temperature above 100.9°F, stay home. The student may remote in with Google Meets during the class lecture (instructor’s prior approval needed) until reading temperature is at least 98.6°F.

Edgecombe Community College (ECC) general Coronavirus Response

<https://www.edgecombe.edu/coronavirus-response/#top>

ECC Radiography Program Mask Policy (Enforce only as needed)

(Program Mask Policy implemented late spring of 2020 due to Covid-19)

Fall 2024 – Masks are optional on campus. (not required)

The health and safety of students is our highest priority. During a respiratory and/or droplet pandemic outbreak, all students are required to wear a face covering of a mask and/or face-shield that covers his or her mouth and nose at all times* while on campus.

All masks are to conform to the program uniform. Acceptable colors of cloth masks are royal blue, white, navy, or black. Disposable masks, N95, K95, or partial breathers are alternatives to cloth masks and completely acceptable. Disposable masks are preferred.

Restricted written verbiage on the cloth mask is to include "ECC" and/or the college logo or program-specific writing and/or logo, or theme related to radiology. If a student needs a disposable mask, the instructor will provide one. If a student is unsure if the mask will meet program requirements, please reach out to the program faculty for approval.

During active labs, students will be required to wear a face shield and mask.

***Please note the following exceptions:**

* Students whose health or safety is put at risk by wearing a mask or face covering are not required to do so. If this applies to you, please contact the program chair.

* Students who wish to eat or drink may remove their mask to do so, provided they are situated six feet away from others, perform the necessary hand hygiene.

III. STUDENT RIGHTS AND REGULATION POLICY AND PROCEDURES

Student Rights and Regulations (*refer to ECC Student Handbook for college policies*)

Family Educational Rights and Privacy Act (FERPA)

Under FERPA, once a student reaches 18 years of age or attends a postsecondary institution, he or she becomes an "eligible student," and all rights formerly given to parents under FERPA transfer to the student. FERPA seeks to protect student information (Appendix 2).

Student Records

Student records are governed by the same policies as the student's permanent record on file in the Student Services Department. Records follow FERPA.

All records are maintained in a secure manner and are accessible only to individuals who should have access under the guidelines of the *Family Educational Right to Privacy Act Buckley Amendment*.

A master file is maintained for each student in a secured location on ECC campus. Items on file include, but are not necessarily limited to:

- A. Student grade reports (stored in Easy Grade Pro or in Moodle)
- B. Conference records
- C. Handbook/syllabi/policy addendums (signature pages)
- D. Record of accomplishments or disciplinary actions
- E. Clinical Records
 1. Repeat Sheets
 2. Competency Evaluations
 3. ARRT Completion of Competency Record
 4. Clinical Evaluations
- F. Graduation Readiness Report (Final Advising Guide)
- G. Radiation Exposure Records (housed in office of acting RSO)
- H. Medical Records/Reports (housed in office of the program chair until graduation)

Program Probation

A student may be placed on probation for any infraction of the program policies. Written documentation will be provided to the student outlining appropriate means to correct the situation and an opportunity to return to 'good standing' in the program. Clinical issues or problems may result in clinical probation. Please see *clinical probation policy* for further information referencing probation for clinical infractions. Academic probation is addressed in the ECC College Catalog and Student Handbook. If placed on (college) *academic probation*, the student will not qualify to remain in the radiography program.

Student Disciplinary System

(Refer to the *Student Disciplinary System* in the *ECC Student Handbook*)

Latest edition located in the Master Plan of Education, Volume I.

Due Process for Students and Student Appeals

The ECC Board of Trustees officially declares that all students have the right to due process of law as supported by the Fourteenth Amendment to the *Constitution of the United States of America*.

When a student has a concern in regards to grades or disciplinary actions, the student has a right to due process. Students who feel they have a grievance should first seek to resolve the complaint by discussion with the specific faculty, staff, or administrative member involved (within 72-hours). Please refer to the detailed policy located in the *ECC Student Handbook*. (Latest edition of the ECC Student Handbook is located in the Master Plan of Education, Volume I and in the Student Portal on the main website (<https://catalog.edgecombe.edu/content.php?catoid=20&navoid=592>))

Program Chain of Command:

Chain of Command in reporting any issues, concerns, or complaints.

1. Instructor of course if didactic; clinical preceptor if clinical education
2. Clinical Coordinator if a clinical issue is not resolved
3. Program Director for an unresolved complaint (1st person in appeal process unless the problem is with the PD) (72-hour response from report)
4. Dean of Health Sciences (2nd person in appeal process, if unresolved) (72-hour response)
5. Vice President of Instruction (final person in appeal process, if unresolved) (72-hour response). **Final Decision** stands with V.P. of Instruction and no more appeals.

College Grievance Policy/Student Complaints (Refer to the ECC Student Handbook)

Radiography Program Complaint Resolution Policy

The Radiography program is accredited by the *Joint Review Committee on Education in Radiologic Technology* (JRCERT). Students can be assured that the program follows the guidelines for, and is in compliance with the JRCERT ‘*Standards for an Accredited Educational Program in Radiography*’.

If a student feels that the program is not in compliance with the standards, the student should follow *Due Process for Students* as outlined in the ECC Student Handbook **FIRST!**

Prior to any contact with the JRCERT, it is expected that the student has made **good faith efforts** to resolve the conflict with the program officials and/or ECC administration. This is simply good policy and the expectation of JRCERT and ECC officials. Students should voice complaints to appropriate personnel in the following order:

1. Instructor of course if didactic; clinical preceptor if clinical education
2. Clinical Coordinator if a clinical issue or
3. Program Director for an unresolved complaint (1st person in appeal process unless the problem is with the PD)
4. Dean of Health Sciences (2nd person in appeal process)
5. Vice President of Instruction (final person in appeal process)

In the event that the JRCERT finds the program to be in non-compliance with the Standards, the program will make every effort to immediately resolve the situation.

A copy of the JRCERT **Standards** for an Accredited Educational Program in Radiologic Sciences are located in the Program Director's office, the RAD faculty's office, the lab 215-AA on education cart, and on the JRCERT website (www.jrcert.org).

Contact address:

The Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
Email: mail@jrcert.org

Program Didactic Class Attendance Policy (more stringent than the college's policy)

ECC is an attendance taking school. The state of NC requires educational institutions to meet or account for every contact hour. JRCERT standards state that class, lab and clinical hours cannot exceed 40 hours per week. Student attendance in class, laboratory and clinical is the expectation of the Radiography Program faculty. Presence is essential to learning the art and science of radiography. The student is expected to arrive promptly and remain the stated times for class, lab, and clinical. Only in the event of an emergency, such as serious illness, death in the immediate family, court orders, i.e., should class, lab and/or the clinical experience be missed. (Please reference Clinical Attendance Policy for clinical education).

When a student's absences reach 10% of the total class hours, they will be counseled and sign an acknowledgement form provided by the course instructor. This action is an attempt to rectify the behavior. Each absence occurring after the 10% will result in five (5) percentage points being deducted from their final course grade and a Professional Improvement Plan (PIP) will be completed to rectify the behavior.

Radiography students who miss twenty percent (20%) of the scheduled class hours will be terminated and dismissed from the program. Once twenty percent has been reached, the student will be dropped from the course by the instructor. A student has the right to appeal to the attendance committee if withdrawn or terminated due to excessive absences. Students have the right to due process as outlined in the ECC Student Handbook under Attendance Appeal Process. If a student incurs absences that occur due to extreme circumstances, the student can request the Radiography Program Director to evaluate the absences. The Radiography Program Director has the right to amend the attendance policy when there is just cause; this can occur ONE time during the program enrollment!

A student should make every effort to attend all (100%) didactic scheduled hours. Students are expected to attend all (100%) radiography didactic classes for effective learning of material. Classes are step-lock and fast paced. It is imperative that the student attend each class session in order to successfully grasp the concepts, assimilate the information, maintain passing grades and ultimately to pass the ARRT registry exam. Class lectures and demonstrations are not repeated for absent students.

Classroom/Laboratory Attendance Procedure

Attendance begins with the first day of class regardless of the date of registration. In an unavoidable situation, when a student must be absent from class, the procedure is as follows:

- Contact the instructor before class meets when possible or as soon as possible in an emergency situation. Make-up work is at the discretion of the instructor.
- Be accountable for determining missed class work, lab work, and assignments. Absence from class does **not excuse** you from the work nor does it alter the due date. Choose a trust-worthy peer and keep their phone number in your phone.
- The student is responsible for taking all tests and exams. The student must notify the faculty **prior** to missing a test or exam or a grade of '0%' will be recorded. The instructor will determine the method by which they choose to be contacted and will include the information on the course syllabus.
- All labs and assignments must be submitted as scheduled or as indicated by the instructor. Failure to submit work as scheduled will result in a grade of '0%'. The student should refer to the course syllabus, Moodle, eVolve, etc. for scheduled due dates.
- Quizzes (announced and unannounced) promote daily attendance and reinforcement of student learning. A student must be in his/her seat and ready to begin the quiz when it is distributed or a grade of '0%' will be recorded. Latecomers will not be allowed to take the quiz. Makeup quizzes will **NOT** be given.

Classroom/Laboratory Tardy Policy

Being on time to class is expected of all students. Tardiness disrupts the educational process and impacts other students and the instructor. Please refer to the course syllabi for specific rules and policies related to tardiness in didactic classes and labs. **Tardy to clinical is a separate policy, addressed with clinical policies. If a student is tardy more than (3) times, each subsequent tardy will result in a deduction of (5) percentage point off the final course grade.**

Test Make-up Policy

1. The student is responsible for taking all tests and exams on the assigned day/date. The student must notify the faculty **prior** to missing a test or exam. The instructor will determine the method by which they choose to be contacted and will include the information on the course syllabus.
2. The student must make arrangements with the instructor to make-up the test or exam **prior** to the next scheduled class or lab date. This can be done via email or personal contact.
3. Tests and exams should be **made up within two instructional days** whenever possible. If, after the one-week period, the test has not been made-up, and the student has not made arrangements for make-up with the instructor, the student will receive a grade of '0%'. This time limit will be waived only under extremely unusual conditions by the instructor.

4. Penalties for make-up tests and/ or lab proficiency exams per semester:

- 1st make-up test, extra credit will be forfeited
- 2nd make-up test, 10 percentage points will be deducted and extra credit will be forfeited
- 3rd make-up test and more will result in recorded grade of **ZERO '0%'** for the test grade.

Testing and Examination Procedures

It is up to the discretion of the instructor to perform Scantron testing and Scantron assignments. Students should come prepared with two (2) sharpened #2 pencils and a (2) Scantron answer sheets. Scantrons can be purchased from the book store in **advance**. The unprinted area of the Scantron can be used for scrap paper or extra credit when noted by instructor. Nothing else (other than blank cover sheet) is allowed in the testing area. **Cell phones are to be 'off' and out of sight.** At the instructor's discretion, books, backpacks, notebooks, papers, may be requested to be placed in a designated area in the classroom during testing. Restroom needs must be taken care of **prior** to testing. **Once testing begins, there should be no interruptions.** Once a student has completed the test/exam and turned it in to the instructor, they may leave the room quietly for a break. **DO NOT** stand in hallway. Please go to student lounge or outside and wait for instructor's okay. No student will be allowed back into the classroom until all tests and answer sheets are handed in unless the instructor has given alternate instructions. This process will help to keep distractions to a minimum.

Test Review Policy

Any test/exam taken may be reviewed once in class with a copy of the Scantron answer sheet (if applicable) and immediately returned to the instructor. Students will not be allowed to review any tests/exams after this time. **However, it is instructor discretion if future review of tests may be allowed.**

No marks in pen, pencil, or marker are permitted on any test/exam or answer sheet during the test review unless instructor grants permission. If any marks are discovered, it will result in a grade of a **ZERO (0)** will be given for the test/exam. Absolutely **NO cell phone pictures** may be taken of any test/exams! If instructor finds out a picture has been taken, a grade of a ZERO (0) will be given for the test/exam.

The instructor of the course will determine the best method of test review. **The instructor has 48 hours to grade tests.** Once graded, tests will be distributed to students for review in class. If there are any questions or disagreements to an answer of a test question, the student has 24 hours to present it to the instructor with written documentation. The instructor will consider the student's opinion and perception; however, the final decision will stand with the instructor. All students are encouraged to respect instructors' knowledge and reason for their answer.

Social Media Awareness and Policy

The radiography faculty of Edgecombe Community College recognizes that social media can benefit health care in a variety of ways, including fostering professional connections, promoting timely communication with patients/clients, family members, and educating and informing consumers and health care professionals. The use of social media and other electronic communication is increasing exponentially with growing numbers of social media outlets, platforms and applications including blogs, video site and online chats.

However, there are increasing instances of inappropriate use of electronic media by professional health care providers as reported in literature and news. In some cases, the inappropriate use causes licensure and certification regulatory boards (for example, ARRT) to issue disciplinary action. Students should be aware that as providers of patient care, you have an obligation to understand the nature, benefits and consequences of participating in social networking of all types. Online content and behavior have the potential to either enhance or undermine not only your particular career, but the profession for which you belong.

The radiography faculty requires enrolled radiography students to abide by the following principles in regards to social media:

- When joining social media sites, you should join using your personal (not school or work) email account, or create separate accounts for personal and professional use.
- Use COMMON SENSE when posting information, comments, photos, etc. Everything you post reflects on you both as an individual, and in many cases as an associate of the College and Professional. Use the same amount of restraint as you would use if you were posting the information on a bulletin board in a public space.
- Do not transmit or place online individually identifiable patient/client information; identity of the clinical education facility; any negative comments about the clinical education facility.
- Do not post photographs, videos or information obtained in clinical or school related activities without appropriate permission from radiography manager or program director. This includes any photos or videos that can reveal the clinical education facility, **such as an ID badge.**
- Do not make disparaging comments or remarks about patients, employers, clinical facilities, faculty, or peers even if not identified
- Always observe ethically prescribed professional patient/client-professional boundaries
- Understand that patients/clients, colleagues, institutions, and employers may view postings
- Use privacy settings and seek to separate personal and professional information online
- Report content that could harm a patient’s privacy, rights or welfare to the attention of the appropriate authorities
- Do not post content/photographs regarding faculty or clinical education centers that may deface personal or institutional value.
- Disregard for any of the above behaviors will be grounds for disciplinary action and possible termination from the course and radiography program.
- Students should refrain from ‘friending’ faculty and technologists, as it is a conflict of interest for equitable grading. It is a conflict of interest to become ‘friends’ with faculty, radiology supervisors, radiology managers, doctors, physician assistants/radiologist assistants, technologists, radiography faculty and clinical instructors!!!! **Do NOT do it!**
- If you are a ‘friend’ of a faculty member or technologist prior to entering the program, please ‘unfriend’ until the last two weeks of the final semester of the program.

Disregard for any of the above behaviors will be grounds for disciplinary action and possible termination from the course and radiography program.

IV. SAFETY INFORMATION POLICY & PROCEDURES

Clinical Facility Requirements for Student Acceptance

All students will be required to complete orientation requirements prior to acceptance to the clinical education facilities. The orientation may be paper/pencil, reading assignment with a signed acknowledgement or online program (type of orientation is determined by each clinical facility).

The Radiography Program shall assure that each radiography student and faculty has received up-to-date in-service education regarding Occupational Health and Safety Administration (OSHA) regulations and, upon request, provides satisfactory evidence of such.

ALL radiography students are to have active medical (health) insurance coverage OR accidental insurance purchased in the bookstore to attend clinical education. The clinical agencies contracted with the college (and the program) require students to obtain medical insurance (health insurance) or accidental insurance for approval to perform clinical education within their facility. Proof of medical insurance or accidental insurance must be provided and uploaded in Rotation Manager portal along with required medical form and proof of vaccinations, CPR, and additional documents upon acceptance into the program. The student must maintain medical coverage until graduation from the program.

Other requirements that students must provide within a defined time period include:

(3) DTP's, T-dap within the last 10 years, (2) MMR's, 2-step PPD, Positive varicella titer (or the two vaccines), clear criminal background check, negative drug screen, influenza vaccine (flu vaccine performed during the program in the Month of October), Hepatitis B vaccine or positive HBSAg titer and current AHA/BLS Healthcare Provider CPR. These services are required prior to clinical and if not satisfied, the student **will be terminated** from the radiography program. The costs involved are the sole responsibility of the student.

Again, initial two-step PPD(TST)(TB Skin Test) and biannual CPR is required. It is the responsibility of the student to retain renewal dates and biannual CPR renewed prior to due date. A copy must be provided to the clinical coordinator for documentation. The original copy goes into the student's clinical notebook (binder) with sensitive information blocked from view. Any lapse in dates will require the student to be absent from their clinical site (due to site requirements) and the student may not be allowed make up the time. This could result in program termination if the time missed exceeds the clinical absences allowed.

Occupational Exposure Control

Upon a blood or body fluid exposure, the student should take the following steps with assistance and supervision by your clinical staff radiographer or clinical preceptor:

1. Post-Exposure

Immediately after the exposure,

Skin exposure:	Thoroughly wash the area with soap and water.
Eye exposure:	Rinse thoroughly with sterile saline, eye irrigant, or clean water flush (at least 1000cc over 15 minutes)
Mouth exposure:	Rinse/flush with clean water

- Percutaneous injury: Thoroughly wash area with soap and water.
2. Report the exposure to the clinical preceptor on duty immediately after taking the above preventative measures. Determine nature of body fluid (type of body fluid and whether bloody) and source patient of body fluid. Inspect exposed skin for nicks, abrasions, hangnails, or chapped areas.
 3. Report this information to the CEC Occupational Health Nurse (OHN) or Supervisor if this person is unavailable. The integrity of the area exposed to the body fluids, the presence of blood in the source fluids, and the risk profile of the source patient will be the determining factors in the decision to recommend PEP (Post-Exposure Prophylaxis). For example, no PEP is needed if there is no blood in the source fluids or if there was brief contact of bloody fluids with intact skin. However, it is best to allow the OHN to assess all factors involved by reporting to the OHN or supervisor.
 4. If PEP is recommended, the CEC in which the occupational exposure occurred will advise the student of the proper steps for follow-up to the incident.

Criminal Background Check and Drug Screen

All students must clear both of these by each CEC prior to clinical placement. As of summer, 2020, Rotation Manager is the chosen company of choice by most clinical agencies and therefore the agency used for all. All health records need to be uploaded (by the student) into the Rotation Manager portal for approval. ALL required rotation manager uploads need to meet EACH clinical agency requirements to continue in the program and/or to attend clinical education.

EACH STUDENT MUST BE APPROVED BY **ALL** CONTRACTUAL CLINICAL AGENCIES IN ORDER TO REMAIN IN THE PROGRAM.

Nepotism Policy

Nepotism in the learning environment can create conflicts of interest and an atmosphere of inequity. Nepotism is defined as the appearance of favoritism shown by persons, in a supervisory role or by a teacher in assessing academic or clinical work who are relatives of the student.

For the purpose of this policy, “relative” means a connection between persons by blood, marriage, adoption, domestic partnership, or co-habitation. Relatives include, but are not limited to, spouses, significant others, boy friend/girl friend, parents, children, adopted children, brothers, sisters, brothers-in-law, sisters-in-law, father-in-law, mother-in-law, stepparents, stepsiblings, stepchildren, aunts, uncles, nieces, nephews, cousins, grandchildren, and grandparents, or any other person living in the immediate household.

A student **may or may not** be assigned to a clinical facility that employs a relative. The radiography program director and clinical coordinator will review each situation independently. The decision regarding placement will be based upon the position the *relative* holds in the clinical affiliate and the likelihood of student/relative interaction.

If a student is placed in a clinical facility that employs a *relative*, the radiography faculty will not permit the student to be supervised or assessed by the *relative* at anytime. It is the student’s responsibility to immediately notify the clinical preceptor and clinical coordinator if a situation arises conflicting with this policy. Student performance is appraised under direct and/or indirect supervision of a registered radiographer. The radiographers have the authority to make decisions about, give orders to and evaluate the performance of the radiography students. The radiographers

are responsible for assessing clinical skills and providing evaluative documentation of student performance. The evaluations are a part of the student's clinical grade, therefore working *under the direction of a "relative"* constitutes nepotism. It is in the best interest of the student and the radiography program that all steps be taken to prevent a situation of nepotism.

When nepotism develops through promotion, transfer, marriage or enrollment in courses, action will be taken as soon as possible to remedy the situation. It is the **responsibility of the student** to disclose whether any *"relative"* as defined in paragraph two above, is employed by any of the program's clinical affiliates and to inform the Program Chair of any situational changes throughout the course of the program.

Safety Procedures Manual

Edgecombe Community College Radiography Program supports safe and quality imaging. Students are provided instruction over, and given a hard copy of the *Safety Procedures Manual* prior to clinical attendance during clinical orientation. The manual is to be housed inside the student's clinical notebook for inquiry and review. Students must use equipment and accessories, employ techniques, and perform procedures to minimize radiation exposure to patients, selves, and others. Additional principles of radiation protection are taught in subsequent courses.

Personal Dosimeter Policy (OSL blister package type)

Students are provided one personalized radiation monitoring badge to wear at collar (thyroid) level and ATTACHED to uniform top, outside of the protective apron that will monitor the amount of exposure received.

Personal Dosimeter Procedure

1. Students **are required to wear** the dosimeter badge daily when assigned in lab and clinical.
2. Failure to wear the dosimeter badge as required will result **in dismissal** from lab or clinical. This will result in an absence.

Dosimeter Report Policy

Starting Fall of 2024, the clinical instructor/preceptor will meet with each student during the PSA conferences to review the dosimeter readings. Dosimeter reports will be kept on file in the office of the acting RSO for inspection at any time.

Dosimeter Report Procedure

1. Starting fall of 2024, on the PSA form, the student will initial next to their dosimeter reading for acknowledgement. (Prior to fall of 2024, the student initialed the quarterly dosimeter report and/or monthly report for pregnancy badge indicating knowledge of personal exposure and verifying exchange of his/her dosimeter badge. Other student's privilege information was not viewable at the time of signing!)
2. **Failure to exchange the dosimeter badge** within two weeks of notification will result **in dismissal** from lab or clinical. This will result in an absence/s and make up time will not be allowed.

Exceeding Dose Limit Procedure

1. If the dosimeter reading indicates that a student's (≥ 18 years of age) personal dose exceeds the minimal limit (125 mrem per quarter), the student will meet with the acting RSO for consultation. The student will be required to review the basic principles of radiation

protection. If student is less than 18 years of age, a dose of 10 mrem or higher will follow the same guidelines for counseling. If a student is pregnant, the fetal monthly exposure above 5 mrem will follow the same guidelines for counseling.

2. If the reported exposure is **above the program guidelines indicated in number 1**, the acting RSO will investigate and review the situation. A Plan of Action (POA) will be devised and implemented as appropriate.

Loss of Dosimeter Badge Procedure

1. The student must **immediately** report loss of dosimeter badge to the acting RSO.
2. The acting RSO will immediately order a replacement badge to be sent by fed-ex.
3. The student **is required** to pay the cost of the replacement badge and overnight federal express charges.
4. Students **cannot attend clinical** until the replacement badge arrives. This will result in absence(s) which the student will not be allowed to make up.
5. Clinical assignments will **not** be switched to non-radiating areas within the department.

**The only make up time allowable for a student not having a personal dosimeter will be when the dosimeter badge has been stolen from their personal property and a police report has been filed and obtained for documentation.*

Pregnancy Policy

Edgecombe Community College radiography program has a published pregnancy policy that is consistent with JRCERT standards, applicable federal regulations and state laws, made known to accepted and enrolled students, and contains the following elements. In accordance with NRC's regulations at 10 CFR 20.1208, "Dose to an Embryo/Fetus,"

The student has the right to make written voluntary declaration of pregnancy. (See Safety Procedures Manual)

If student chooses to make written voluntary declaration of pregnancy, her options include:

Option I:

The student has the right to make written voluntary declaration of pregnancy.

Option II:

Continue with the clinical components without modifications, until pregnancy is terminated. I understand that I am expected to fulfill all work requirements and adhere to all radiation guidelines and recommendations as follows:

- a) The student will be provided an additional dosimeter badge to monitor exposure to the fetus.
- b) The student will be required to adhere to the provisions of ALARA.
- c) No more than 10% of the allowable monthly fetal dose will be tolerated without a conference with the acting RSO and a Plan of Action (POA) will be enforced. Ten percent of the monthly fetal dose is 5mrem.

The radiography program will not be responsible for any injuries to the embryo/fetus should the employee or student decide to remain working or in the program during the entire gestational period. All students must meet the same clinical requirements for graduation.

Option III:

The student may request a leave of absence from work or the program and return after pregnancy or maternity leave with a doctor's clearance note.

The student must inform the program chair of her scheduled return. All students must meet the same clinical requirements for graduation.

The student may request a leave of absence when she, the physician, or the Program Chair believes that it is no longer viable for her to function in a manner conducive to learning. All students must meet the same clinical requirements for graduation.

Option IV:

The student may request a leave of absence from the program and return within 1 year after re-admission and not lose her status in the program, contingent upon JRCERT standard of 1:1 student to tech ratio (meaning if there is clinical space). The student **MUST** inform the Program Chair of her intent to return 3- months prior to ensure the program remains in compliance with JRCERT student supervision requirements. All students must meet the same clinical requirements for graduation.

Option V:

Written withdrawal of declaration. I understand I have the right to withdraw this declaration.

Following pregnancy delivery; the student must submit a written statement from the attending physician indicating the date she is able to return without limitations to the clinical and classroom setting. This statement is required prior to return of clinical/classroom. The student is required to make an appointment to meet with the Program Director before returning to the scheduled clinical site.

Operating and Safety Procedures

These instructions are provided to comply with the state rules for radiation control. The North Carolina Division of Radiation Protection (NCDRP) enforces the radiation rules in North Carolina. These rules require that radiation-producing equipment meet specific standards. The rules also require that certain procedures are followed and certain records are kept. The intent of this is to establish procedures to minimize radiation exposure of personnel and patients, while maintaining diagnostic quality.

The rules require that each clinical education center (CEC) register with the state. The 'Notification of Registration' is located in the program's master file. All operators of x-ray equipment are responsible for following the radiation safety procedures. The ECC Radiography Program acting RSOs has the responsibility for overseeing matters related to radiation protection. The acting RSOs confirms radiation safety training and is the program contact person with the state of NC. All questions and concerns about radiation safety should be submitted to the acting RSOs.

The program's radiation safety policy to include documentation that addresses students not to hold patients or image receptors during any radiography procedure is located in the program's Safety Procedures Manual and added to the Safety Guidelines for the Generated Radiography Lab (posted in the x-ray lab). The Safety Procedure Manual and Safety Guidelines for the Generated Radiography Lab are presented to the students and a copy has been placed in the student's clinical note book and the x-ray lab for ease of access.

MRI Procedures Safety *(to include magnetic waves and radiofrequency hazards)*

The program has established a safety screening protocol for students having potential access to the magnetic resonance environment. ALL students are required to complete the MRI safety training. MRI safety topics are presented as part of the clinical orientation before entering the clinical setting. The session is to provide early MRI safety education to the students.

The program prepares students for magnetic resonance safe practices. MRI training and education are conducted in the first semester during the clinical orientation (prior to the entry of clinical) and in an annual session by the end of the semester (summer) before entering specialty rotations. Both juniors and seniors are provided an hour MRI safety training session with the college's Imaging/MRI/CT Consortium Director, Rick Mastman or Amie Sasser (both MR certified). The MRI safety training contains four components; the effects of the static magnetic field, MRI personnel, MRI facility safety zones, and MRI safety screening forms. Students are provided a copy of the PowerPoint, MRI safety zone sheet, and a screening form to be placed in their clinical notebook for record-keeping.

During the MRI safety screening, Mr. Mastman or Mrs. Sasser has the students' role play and fill out a practice screening form with a partner. At the end of the safety training performed on campus, the students sign an MRI Safety Training Verification form. The student receives a copy to place in their clinical notebook and a copy is placed in the student's clinical files.

Senior students requesting a rotation through MRI must complete an MRI Safety Screening Sheet and be reviewed by the MRI supervisor/technologist. This is to assure the student is appropriately screened for magnetic waves or radiofrequency hazards. In addition to this training, the senior students are required to meet with the clinical education center's MRI safety technologist to verify the safety measures before their MRI rotation in the fourth and fifth semesters. The students complete a Zone 3/4 Screening form before attending MRI rotations at the clinical education centers. This form is to be placed in the student's clinical notebook.

Students are mandated to notify the program should their status change at any point during their enrollment.

V. CLINICAL EDUCATION GENERAL INFORMATION AND POLICIES

Professional Ethics and Conduct Policies

Purpose

The student radiographer has a unique position in the health care field, in the Imaging Department and in the Radiography Program. Medical ethics; those rules that govern the conduct of physicians and the health professions are sometimes written and more often **unwritten**. To introduce the radiography students to professional ethics, the faculty of the Radiography Program of Edgecombe Community College adheres to the *ARRT Standards of Ethics and Rules and the ASRT Practice Standards*. (See Appendix I) Appendix 1 is presented to students in pre-orientation and 1st semester course RAD 110: RAD Intro & Patient Care.

Note: These are guidelines for the professional career for Radiologic Technologists and by no means should they be considered applicable in every student situation.

Health Insurance Portability and Accountability Act (HIPAA)-Patient Privacy

The HIPAA Privacy Rule provides federal protections for individually identifiable health information held by covered entities and their business associates and gives patients an array of rights with respect to that information. A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well being. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing. Given that the healthcare marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosures that need to be addressed. HIPAA is discussed with students initially in clinical orientation and during 1st semester course RAD 110: RAD Intro & Patient Care, RAD 113: Lab Elective, RAD 151: Clinical Education I during orientation.

Security Rule specifies a series of administrative, physical, and technical safeguards for covered entities and their business associates to use to assure the confidentiality, integrity, and availability of electronic protected health information. (<http://www.hhs.gov/ocr/privacy/hipaa/understanding/>)

Oral and Written Patient Consultations

The radiographer and/or student radiographer is the primary contact with a patient or his/her physician during a radiographic examination. The radiographer and/or student are expected to communicate with the patient or physician in an effort to ascertain the exact nature of the illness, trauma, etc. as related to the exam being performed. The information will be passed on to the radiologist to aid him/her during his/her interpretation of the radiographic images and consultation with the attending physician. This information is **confidential** and student radiographers are required to treat this information as such.

During the examination, patients will often talk to the radiographers or students about his/her medical history and prognosis. The student should never provide imaging results, condition, or prognosis to the patient (out of scope of practice). This information is **confidential** in the imaging department, even to the patient. The attending physician is the only one who should discuss the imaging results, patient's history, and prognosis with the patient.

Privacy Policy

1. At no time will a radiography student release or discuss in public any information contained in a patient's medical record. (included in Social Media Policy)
2. IF a student has been reported in violation of the privacy policy, the student will be removed from the clinical agency bringing forth the allegation and transferred to another contractual agency (where there is room for the student) until the investigation is completed.
3. A student found in violation of this policy from the investigation, will be terminated from the program immediately and may face legal action.
4. IF the student is not found in violation, they may continue in the program.

Student Conduct in Clinical Affiliate

Students are expected to maintain high standards of conduct while enrolled in the radiography program. The student is representing Edgecombe Community College and the radiography program in their interactions at the clinical affiliate. All students are considered to be mature adults and should act and be treated as such. Compliance with the college, program and affiliate policies, including **professional conduct, is required at all times**. The student radiographer is expected to follow the *ARRT Standard of Ethics and Rules and ASRT Practice Standards* as presented in pre-orientation and RAD 110, and policies as stated in the ECC and Radiography Student Handbooks.

Student radiographers are required to utilize proper titles when addressing all personnel in the radiology department; they are Mr., Ms., or Dr. Student radiographers are required to address patients in a like manner. With the exception of children, never address a patient by their first name only, or nicknames. If a clinical agency has a different approach to addressing patients, the student is to follow the clinical agency's policy. ECC and the radiography program maintain a culture of diversity, equity, and inclusion through transparency with our communities of interest.

The imaging department is a very busy area and sometimes the activities become rather hectic. Even when the clinical area is busy, students are expected to maintain professional conduct. All aspects of the clinical environment provide learning experiences for the student. Students are required to be: respectful, professional, courteous, and conscientious while in the clinical setting. Any deviation from the aforesaid may result in student discipline and/or program termination.

Student Clinical Rules for Computer Console, Viewing and Patient Care Areas

1. Professional conduct is required at all times while in clinic.
2. Conversations should be limited to professional and quiet conversations **only**.
3. Food or beverages are **NOT allowed** in any of these areas. Food and beverages can be kept in the non-patient area (as identified by clinical supervisor/clinical preceptor) for break and lunch time only.
4. Chewing gum is **NOT allowed** in patient care areas, during procedures or while on clinical assignment.
5. Tobacco products/e-cigs of any kind are prohibited! **All clinical sites are non-smoking/e-cigarette facilities.**
6. Personal visitors are not permitted. Please discourage friends or relatives from visiting during assigned clinical hours.
7. **No** cellphones or electronic devices are permitted within any of the contractual CECs.
8. **No** use of CEC's computers for personal use without permission from the clinical staff radiographer or clinical preceptor at the agency.

9. Approval is required by the clinical staff radiographer or clinical preceptor for students to check college email or college related items using a CEC computer.
10. Personal phone calls are not permitted, except in case of emergency!

Textbook/any book use in the Clinical Education Center

No personal textbooks/books or any electronic devices are to be permitted in the CEC. If this policy is violated, the student may be sent home and missed time will be counted as an absence. **The ONLY APPROVED textbooks during clinical are: Prep text book, Prep. Examination textbook, and flashcards). Patient care is ALWAYS FIRST!**

Violation of Professional Ethics, Soft Skills and Work Ethics

Students must learn the value of proper professional conduct as well as clinical competence. A professional realizes the value of being in proper attire, being on time, and dealing with patients and staff in a courteous, professional manner. These standards are designed to guide the students toward attaining a sense of professionalism. Students are expected to present themselves as professional mature adults, exhibiting empathy for others.

In actual practice, violation of these standards could result in legal complications. While in this program, violations result in points being deducted from the student's Professional Evaluations (PE) and mid and final Professional Skills Assessment (PSA) and could result in student discipline, clinical probation and/or program termination. Rudeness, arrogance, and disrespect are not employable traits and do not demonstrate professional conduct.

Clinical Probation

Clinical probation is a radiography program action, not to be confused with the college academic probation policy as found in the ECC Student handbook.

Clinical Education is a major component of the radiography program curriculum. Clinical competence is necessary for efficient and effective patient care. Repeated occurrences and disregard for radiography program and/or affiliate policies will result in programmatic probation. In addition, a critical incident, although a one-time occurrence, could result in clinical probation or immediate termination from the program. When a critical issue occurs, the CP and/or program faculty will complete the appropriate evaluation form/s, document specific unsatisfactory behaviors and specifically describe the critical incident that occurred. **The evaluation and all documented information should be faxed, emailed, or delivered immediately to the Clinical Coordinator (CC) (24-72hrs, whichever comes first). The expediency of occurrence and timeliness in reporting the incident is crucial to the outcome. (24-72hrs, whichever comes first)**

1. The CP will immediately notify the CC of the incident/s resulting in student unsatisfactory performance.
2. The CC will immediately contact the student to inform them that a confidential conference is needed.
3. The CC will compile the data/information, complete a PIP (Professional Improvement Plan) form, review it with the program chair, and present it to the student during a formal conference.
4. During the conference, the student will be informed of the issue(s) and will be provided an opportunity to discuss, ask questions, read and sign the PIP form. The PIP will be provided to the student outlining probation if necessary and the appropriate means to correct the

situation and return to good standing in the program. Specific deadlines will be determined including a time frame for removing the probationary status.

Removal of Probationary Status is based on the following criteria:

1. Improvement in the behaviors or skills that resulted in clinical probation.
2. A clear violation record illustrating no program policy violations.
3. Compliance with the PIP and consistent satisfactory performance in the clinical setting.
4. All conditions and deadline dates met within the semester in which the infractions occur unless the infractions occur at the end of the semester. In this case, the probation status would go into and through the next semester.
5. A conference with the CC will be conducted to review the criteria as stated on the action plan. If, in the opinion of the CC, all criteria are satisfied, the student will be removed from probation.
6. The student may request a second review of probationary status when the criteria on the plan of action have been satisfactorily completed.
7. Students on probation should be aware that non-compliance with plan of action could lead to the possibility of the PD rendering the student *ineligible to graduate and ineligible to take the ARRT exam*.

Program Termination Policy

The recommendation to dismiss a student is made by the radiography program didactic and/or clinical faculty. The radiography PD reserves the right to terminate a radiography student for reasons that demonstrate *unacceptable professional, ethical and/or incompetent practices or health problems* which interfere with the attainment of program goals. Academic failure is a reason for program termination and will fall under academic policies.

If dismissed for any reason other than academic failure, the student will not be eligible for re-admission into the Radiography Program. The student has the right to appeal the decision by following the *Due Process for Students and Student Appeals* as outlined in the *ECC Student handbook*.

Program Termination due to Disregard for Clinical Probation

The student will be terminated from the program if:

1. The student does not comply with the PIP to remove the probationary status.
2. If the student is not consistently performing satisfactorily and/or does not provide appropriate patient care in the clinical setting while on probation.
3. Once probationary status is removed, continued demonstration of the same behavior that resulted in probation (during same semester or succeeding semesters), after **two** attempts to correct the ‘same’ behavior will result in the student being terminated from the radiography program. (includes attendance probation)
4. Students on probation should be aware that non-compliance with PIP could lead to the possibility of the PD rendering the student *ineligible to graduate and ineligible to take the ARRT exam*.

Inability to Meet Program Objectives will lead to **clinical unsatisfactory performance** and could lead to clinical probation and/or termination from the program. Factors that contribute to a student failing to meet course objectives which may result in probation and/or termination from the program include but are not limited to failure to:

1. Follow the Advising Guide due to lack of prerequisite, co-requisite content and/or course unsatisfactory course grades
2. Follow attendance, tardy policies and/or call-in procedures
3. Apply theory and principles learned to clinical performance.
4. Plan, organize and fulfill the tasks assigned by the faculty, Clinical Staff Radiographer (CSR), Clinical Preceptor (CP) or Clinical Coordinator (CC).
5. Effectively communicate with patients, faculty, CSR, CP, CC and/or peers.
6. Demonstrate an understanding of verbal and non-verbal communications.
7. Attain minimal (90%) competency in the skills required for safe clinical performance.
8. Successfully (90%) complete competencies, as required. Unsuccessful attempts on more than **‘5’ different** exams/procedures in any semester. **Competency should not be requested until you have practiced and are ready!**
9. Successfully complete competencies, as required. Reaching **remediation** state on **‘3’** or more exams/procedures during a semester and the inability to remediate and master those exams within the semester.
10. Respond appropriately to instruction and constructive criticism made by those in authority.
11. Perform efficiently in a safe and dexterous manner in relation to self and patients.
12. Demonstrate ability to assume responsibility in preparation and completion of clinical assignments made by the faculty, CSR, CP, and/or CC.
13. Demonstrate a calm, dependable and professional manner when dealing with emotions and stressful situations in the clinical environment.
14. Demonstrate improvement in clinical skill performance and soft skills.
15. Attain a passing grade as stated in the course syllabus. Scoring below **85%** average on the Capstone Section Tests and/or below **85%** on Capstone Final Exam will result in a **failing grade** for the course grade.
16. Maintain a grade point average below required 2.5 GPA on ‘RAD’ prefix courses and an overall 2.0 GPA for semester. All RAD and general education courses require a grade of ‘C’ or better to progress to the next semester in the radiography program.

Health status - The health status of the student may be considered as a basis for termination and/or prolonged time in the program when it involves:

1. Frequent absences due to illness when the absences affect clinical and didactic performance, and/or when the absences result in a lack of prerequisite content.
2. Problems which hinder student's performance in clinical situations.
3. Elective surgery when the recuperation time may lead to absences or limited mobility. Due to technical standards required for clinical practice, the student is required to notify the PD of the surgery and to present documentation upon return. **
4. Long-term injury or illness that limits required clinical attendance. **

***Faculty reserves the right to request physician's documentation of illness and/or statement to return to clinical without any modifications/accommodations.*

Professional Skills – Behaviors in the affective domain may be considered as a basis for program termination when the behaviors, **after two attempts to correct**, are not corrected or **immediately*** when behaviors are considered unsafe and result in discharge from a clinical affiliate. Behaviors include, but are not limited to:

1. Behaviors, either physical or emotional, that conflict with the safety of the patient, peers, radiographers or others within or on the grounds of the healthcare facility.
2. Negligent acts and/or continued clinical incompetence that could result in harm to the patient, peers, radiographers or others.
3. Breach of patient rights, patient confidentiality and/or HIPAA* violations.
4. Unprofessional attitude and/or conduct (verbal or nonverbal).
5. Inappropriate conduct (not in accordance with/or violation of policy/s in the ECC College Catalog, Radiography Student Handbook, and/or affiliate handbook).
6. Falsification of records to include documentation and/or verification of clinical time, clinical evaluations, and other clinical documentation and/or assignments.
7. Unsatisfactory criminal record as determined by the clinical facility.
8. Use of illicit drugs* as determined by the CC/CP/staff or evidence of impairment within the CEC or on the facility grounds.
9. Refusal of Drug Screen*.
10. Possession or evidence of use of alcohol or drugs during clinical time*.
11. Immediate discharge from a clinical facility by the supervising radiographer due to an ethical violation*.
12. Failure to follow professional appearance and dress code policies.
13. Failure to obtain biannual CPR certification prior to expiration date and updated required vaccines.
14. Failure to follow radiography program policies and procedures.

*This list is **not all inclusive** of behaviors that could result in clinical probation and/or termination. If a student is terminated from a clinical course, a failing grade will be given for the course, regardless of when it occurred in the semester. If the student wishes to appeal any decision made under this system, he/she may do so following the *Due Process for Students and Student Appeals* located in the *ECC college handbook*. During an appeal process, pending the decision by the appeal committee, the student will be allowed to continue in other RAD co-requisite course/s.

Clinical Professional Appearance Policy

Edgecombe Community College encourages neatness, cleanliness, and appropriate attire for professional men and women at all times. In the interest of health and safety, students are required to abide by prescribed dress code during all clinical hours, whether on campus or in the clinical education facility.

During clinical and on campus classes assignments, there are certain requirements regarding the type of uniform the student is expected wear. The uniform dress code for student radiographers has been designed with little flexibility; and requires the following regulations by all students when in clinical, and/or in class/lab on campus.

1. Personal hygiene is required at all times. The student is to bathe daily, use antiperspirant/deodorant and wash hair as needed. No greasy or unkempt hair in uniform!
2. **Wear clean and pressed uniforms that do not have a foul odor and free of wrinkles.** Shoes are to be kept clean (polished) at all times.
3. Underwear/garments are to be worn! White cotton is preferred to eliminate infections.
4. Uniform shoes/sneakers **MUST** be all black or with a small amount of gray or white. Prefer shoe lace color is black or white
5. Appropriate dental hygiene must be observable and maintained.
6. Hair must be neat, clean, and styled at all times. Hair must not saturate with the smell of cigarette smoke. Hair must be secured away from the face, so that it does not fall forward in eyes or over the shoulders. Bangs must be secured back from the face. Longer than collar length hair must be pulled up or back and fastened with a barrette or neutral colored ponytail holder (both male and female). **NO** trendy/fad shave hair styles are permitted for both males and females. Example, shaved hair with designs, symbols, monogramming or shaved under hair.
7. Unnatural hair colors (pink, purple, blue, etc.), or paint hair spray, hair glitter, of natural or unnatural hair color is **not** allowed. Any non-conforming and/or unkempt extensions, hair style, up-do, mohawk and skin head cuts, etc. are **not** permitted.
8. No hats, do rags, or head wraps are permitted in class or clinical.
9. **Beards must be clean, trimmed, and groomed well.**
10. Jewelry is limited to a (black, white, silver or gold) watch (Smart watches are allowed however, students are **NOT allowed to text, make phone calls, or excessive use (surfing) during clinical time.** One simple ring or wedding band per hand (diamonds should not be worn for safety) and no more than two pair of small stud/post earrings.
11. Hoops, gauges, plugs, large balls, ear cuffs, barbells, etc. are **not** allowed! Necklaces, bracelets, nose rings, lip rings, tongue rings, eyebrow rings, etc. are **not** allowed.
12. Body piercings, and /or facial piercings such as ‘snake bites’ are **not** allowed.
13. No body piercing ‘retainers’ are allowed.
14. Tattoos of the neck, face, ear(s) must be covered **completely** by a makeup. The tattoos cannot be visible through the makeup.
15. Tattoos that are excessive or offensive must be covered securely by a long sleeve undershirt, or warm up jacket. Long sleeves pushed up allowing visibility of excessive or offensive tattoo(s) is not permitted.
16. No love bites (hickies) will be tolerated or allowed!
17. Fingernails are to be kept clean and closely trimmed (no nail length above finger pad). Clear finger nail polish is acceptable. **Students are not allowed to wear artificial/acrylic/gel/shellac/vinyl or Jamberry nails or colored polish.**
18. Make-up is to be kept to a **minimum**; **NO** bright or deep lipstick or gloss color allowed.

19. Body fragrances/perfumes/lotions are **not** allowed in the CECs. (Hospital approved lotions are available at most CECs).
20. Lanyards are **not** allowed for safety reasons.
21. Uniforms need to fit loosely and comfortably. **NO tight uniforms! NO** short, tight tops that show backside or belly skin. Pants should fit to length of leg; **NO** sagging or tight fitness to the body.
22. NO Joggers uniform pants will be approved!
23. **NO** unapproved scrub warm up jacket/lab coat is to be worn during clinical. This is to include NO sweaters, coats, sweatshirts, hoodies, jackets of normal wear. Must be a hospital approved lab coat/warm up jacket!

If a student violates or breaches #1-23, they will face disciplinary action and uniform infraction.

Uniform Dress Code Policy

The uniform dress code is mutually agreed upon by the Edgecombe Community College Radiography faculty. Dress code information is presented during the student orientation session. The student must purchase the **designated** uniform and it must be worn during clinical hours and as required at school. Uniforms must be **clean, neat, and pressed (free of wrinkles and odors)**. A black, short or long sleeve tee shirt can be worn under the uniform top. (If clinical preceptor feels an undershirt is needed to cover skin, she will alert student.) A black lab coat/uniform warm up jacket may be worn over uniform. **NO UNAPPROVED SCRUB COATS/JACKETS OR SWEATERS ARE TO BE WORN DURING CLINICAL.** Uniforms must fully cover undergarments; revealing underwear or skin is not acceptable and will lead to student being sent home. In addition to appropriate uniform and shoes, there are several accessory items that must be on the student's body during clinic.

Students will be allowed to wear a uniform that is made of stretchy material as LONG as the uniform is NOT short or fits TIGHT! Royal Blue tops (allowed some black coloring) and black bottoms with cargo pockets and elastic style waist (ladies may have a drawstring waist as long as the waist is elastic/men are approved for drawstring waist cargo style bottoms) are the standard approved color combination. Uniforms should not fit short and excessively tight or excessively loose or long. ALL uniform tops must buy tops at the Uniform House because of the required monogramming.

*Scrubs are to be initially purchased through The Uniform House in Rocky Mount. They are very reasonably priced. The Uniform House has the uniform requirements under ECC Radiography. The program requires professional monogramming on the front pocket of the uniform tops. Monogramming the warm-up jacket/lab coat is optional. The professional monogramming is to be done by the Uniform House.

*Black socks (no colored bands). **NO** hide away socks or “**No show**” socks will be permitted due to safety and professional appearance reasons!

*Black sneakers or a professional clinical shoe are to be approved. ***Small** amount of gray or white color may be approved. **NO** open heel clogs or Crocs with holes! ***If you question approval of shoes, please see the clinical coordinator or the program chair.**

Uniform Required Accessories

Approved black lab coat/warm up jacket

School ID or affiliate hospital badge

Student ID Markers (L/R with student and college initials)-(Program Approved ID markers ONLY)

Merrills' Pocket Guide or Made Technique book

Watch (black, gold, white, silver watch (NO rhinestones) Smart Watch is acceptable.

Clinical notebook

Competency Forms & Competency Record Form

Repeat Sheet

BERT Card (*presented in RAD 141 summer semester*)

*Radiation monitoring badge/dosimeter badge (see below)

*Failure to wear radiation monitoring badge will result in ***immediate dismissal*** from clinical on 1st offense and any offense thereafter, an absence and no choice of make-up.

ECC RADIOLOGY PROGRAM

Uniform House (Rocky Mount and Wilson locations)

2024 – approved uniforms and price list

Radiology students receive a 15% discount with student ID or Driver's License

Tops need Radiology logo on left chest @ \$8 each. Please allow two weeks for monogramming.

MALES:

Male Tops sizes: XS-XL, 2XL-5XL
Style/color/price: Wink 103 ROYAL Blue \$25-\$28
(No tops with zippers!)

Male Pant: NO JOGGERS!

Can be any black pant as long as it has a cargo pocket. Cherokee is preferred, but not necessary.

Male Coat:

Black warm up jacket of any style. Logo on jackets is optional.
Zippered warm-up jacket is most comfortable from feedback from males.

FEMALES:

Female Tops: Size: XXS--5XL
Style/color/price: Med Couture 2411 ROYAL Blue \$24.25-\$28.25

Female Pant:

NO JOGGERS!!!

Can be any black pant as long as it has a cargo pocket and elastic waist only (no drawstring or drawstring/elastic combo unless the Med Couture 2702 is chosen)

Style/color/price: Med Couture 2702 BLK \$28.25-32.25

Female Coat:

Black jacket of any style. Logo on jackets is optional.
Med Couture coats to match the Med Couture scrub option:

Style/color/price: Med Couture 2660 BLK \$34.25-\$42.25
XS-XL 2XL-3XL 4XL-5XL

Style/color/price: Med Couture 8684 BLK \$45-\$48
XS-XL 2XL-3XL

Cell Phones

Students are **not allowed** to have cell phones when at their clinical site. They may not have their phone on their body, inside clinical notebook, in coat, in backpack etc. while on scheduled clinical time. Students should leave cell phones in the car or at home. Students should provide parents, spouse, significant others, boy/girlfriend, children, babysitters or other important persons with the phone number to the imaging department in case of an **emergency situation**. Phone calls to a student should be limited to **emergency situations**.

Students are **NOT allowed** to use their cell phones during their 30 min. meal break. If a student is found to be carrying a cell phone or having it at the clinical site, the student will face disciplinary action and uniform infraction.

Dress Code Violation Policy

The aforementioned guidelines are subject to faculty discretion. **Any** violation of the dress code policy will result in student disciplinary action.

First Offense: Student will receive a write-up and verbal warning (may be sent home, based on infraction)

Second Offense: Student will receive a write-up and will be dismissed from clinic. The time will count as an unexcused absence and will not be allowed for make-up. **Third**

Offense: Student will receive a write-up and will be dismissed from clinic. The time will count as an absence and will not be allowed for make-up. Student's clinical grade will drop one letter grade and student will be placed on clinical probation.

Fourth Offense: Student will be terminated from the program.

Surgical Attire

When scheduled to surgery, the student must report in 'approved dress code' as stated above. The student will clock in and report to surgery dressing room to change into the surgical scrubs provided by the CEC. Surgical scrubs are not to be worn outside of the clinical agency! Surgical scrub jackets may only be worn during surgical rotations.

Transportation

It is the student's responsibility to report to school and clinical assignments on time. Dependable transportation is required. Excuses of **not having** transportation to school/clinic will not be permitted. Car-pooling will probably **not** be an option due to the placement of clinical assignments. Clinical travel per day can average 200 miles.

Meal Break

Students are not provided regularly scheduled breaks. Breaks may be taken at the discretion of the clinical staff radiographer (CSR) or clinical preceptor. The supervising CSR will assign meal breaks. **Meal breaks are limited to 30 minutes** when in the clinic for six or more hours and restricted to within the facility. Meal breaks are required between 11:30am and 12:30pm for normal day time rotation. **Students cannot leave the facility for meal breaks.**

If prolonged meals occur, write-ups will be reflected on the PE and PSA.

Student Phone Calls

If it is necessary for a student to make a personal phone call while on clinical time, the student must ask permission from the CP or radiology supervisor. The CP or supervisor will grant permission and instruct the student to an appropriate area and phone. This should be a rare, not regular occurrence.

VI. CLINICAL PLACEMENT and FACILITY ASSIGNMENTS

Clinical placement must be non-discriminatory in nature and solely determined by the program (JRCERT, Standard 4.4).

Student placement to clinical facilities is based on the mailing address in Datatel and determined by the mileage to the CEC from the student's written physical address. The program chair has the capability of overriding the mileage determination for special considerations if deemed necessary. The clinical coordinator pulls the student addresses and places students accordingly, taking special precautions to schedule equitably. This procedure is followed for initial clinical placement and again for the second clinical placement. (The program's goal is to provide student rotation to the closest two major clinical agencies to Datatel address providing placement availability). It is the **student's responsibility** to ensure that mailing addresses are correct in student services. If the mailing address is a PO box number, the student must provide the CC with an active street address.

Equitable Clinical Assignments

During the clinical education courses, students are assigned to various clinical education centers. Clinical education centers (CEC) provide a wide range of procedures for competency achievement including routine, fluoroscopy, mobile, surgical and trauma examinations. The CECs include hospitals, clinics, specialty/imaging centers, orthopedic centers and other approved centers. It is the responsibility of the program to provide all admitted students with timely, appropriate and educationally valid clinical experiences.

Students are assigned to specific areas within the imaging department and the assignment periods vary, based on the volume and variety of radiographic examinations, the area rotation and the semester. Student progress is assessed and evaluated by the clinical coordinator (CC), clinical preceptor, clinical staff radiographers (CSR) or other program faculty on specific evaluation tools throughout each semester. Description of all evaluation tools and procedures are included within the handbook. CPs have the prerogative to move students to other areas within the CEC based on student needs and availability, while maintaining the 1:1 tech to student ratio.

The CECs provide an adequate volume and variety of radiographic examinations during normal operating hours. Affiliate hours may vary based on type of facility. Student schedules will include day, evening and weekend rotations and will be determined by the program.

Students will have one opportunity per academic semester to request one calendar change in their weekend or evening schedule. The request must be in writing to the CC and must be submitted to her at least 2 weeks prior to the requested change. When a student is scheduled weekend or evening hours, the time will not conflict with staff schedules nor will the students be considered as a replacement for staff. At no time will a student schedule exceed 40 hours per week.

Total Hours Policy

Clinical hours cannot exceed 10 hours per day, unless written approval/request by student and CC. Total hours of scheduled didactic and clinical instruction will not exceed forty hours per week as outlined by JRCERT. If a radiography student voluntarily remains in the clinical area to assist a staff radiographer after his/her scheduled time off, he/she should report the additional time to the CP with verification from the CSR. Compensatory time equal to the additional time spent in the clinical setting will be granted to the student upon request and must be taken within one week. All clinical rotation assignments are included in the total number of clinical hours. Schedules are subject to change, if and when necessary; however, the student will be notified in a timely manner.

A copy of the schedule is posted in the radiology departments and disseminated to each CP and student.

Equitable Learning Opportunities

Every effort is made to afford students equitable learning opportunities. The CC and CP closely monitor student progression through the competency system. The CC gathers procedure and exam data from the radiography manager to assist in the evaluation of the variety and number of examinations performed at each facility. If the CC determines that there is an inadequate mix and/or volume of examinations, the student may be temporarily reassigned to a facility that offers the required learning opportunities. Any student may be required to temporarily change clinical facilities within a semester to ensure equitable learning opportunities for all students. The number of students assigned to each facility will at no time exceed the allowed number according to JRCERT Standard 4.4. The student to radiography clinical staff ratio must be a 1:1 ratio; however, it is acceptable that more than one student may be temporarily assigned to one radiographer during uncommonly performed procedures.

The radiography program sponsored by ECC has revised its policy, effective June 2017, regarding placement of students in mammography clinical rotations to observe and/or perform breast imaging. Additionally, the policy may be implied to imaging procedures performed by professionals who are of the opposite gender of the patient, such as hysterosalpingography.

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

The change in the program's policy regarding student clinical rotations in mammography is based on the sound rationale presented in a position statement on student mammography clinical rotations adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its April 2016 meeting. The JRCERT position statement is available on the JRCERT website, <http://www.jrcert.org>, Programs & Faculty, Program Resources.

Wilson Medical Center a DukeLife Point Hospital, will allow active student observations through mammography and hysterosalpingography studies, depending approval from each patient. ECU Health North Hospital and ECU Health Edgecombe will allow active student observations through mammography, depending approval from each patient.

CLINICAL ASSIGNMENTS

Weekly or Daily Assignments

Clinical education is broken down into five separate courses within the radiography curriculum. Clinical assignments are correlated to academic didactic courses. The radiography students are assigned on a weekly or daily rotational basis through imaging areas to include R & F room (radiographic/fluoroscopic), routine, OR (operating room), ER (emergency room), mobile, weekend and evening rotations as well as other areas of specialized imaging when available. These assignments are based on correlation between academic and clinical courses. During these assignments, the student will be evaluated on different levels of competency throughout the program.

A copy of the semester schedule will be posted in the radiology department. All students will be supervised by a qualified registered radiographer during the weekend and weeknight assignments.

During the assignments, the students are expected to maintain continual contact with the CP and/or CSR. The students are assigned to specific rooms and should be in those rooms **with the assigned registered radiographer**. The students should show initiative and willingness to learn the equipment and the procedures done in each room assignment. When not on break or lunch, the student should remain in the assigned area, unless pulled by the CC, CP or CSR for other assignments. Generally, lunch and break times are assigned by the supervising radiographer.

Evening and Weekend Assignments

Part of each clinical education course is devoted to student assignments on evenings and weekends. Evening and weekend rotations of the total clinical clock hours and are correlated to didactic and clinical courses. It is our belief that in order to be competent as entry level radiographers, students are expected to complete the assigned number of evening and weekend assignments (hours).

Students are scheduled off during the weekdays to compensate for the weekend clinical hours. All off days do not conflict with didactic classes. All students are supervised and evaluated by registered clinical staff radiographers during evening and weekend assignments. The CSR 'daily' evaluation tool is used to assess performance.

1st Semester the student will have 2-Evenings and 1-Weekend rotation (either a Sat. or Sun) with 1-clinical weekday off so as not to exceed 40 hours per week.

All remaining semesters, students will be assigned one full weekend day rotation and one full weekend evening rotation per semester (not to exceed 40 hours per week). Student will be assigned two full weeks of evening rotational assignments per semester.

Clinical Transfer Request from Students

Clinical transfers to another agency are not likely to be possible, due to JRCERT restrictions on student capacity. We must always maintain a 1:1 student to staff radiographer ratio. Therefore, clinical transfers will be considered for legitimate **emergency/reasons** or **Title IX** situations and **only** if the transfer would not cause the clinical site to exceed the 1:1 ratio. Any student wishing to transfer from one clinical agency to another must request this in writing, including reasons, to the clinical coordinator. The PD and CC will require supporting documentation from the student to determine whether the change is warranted and possible.

VII. CLINICAL ATTENDANCE POLICY & PROCEDURES

Clinical Attendance Procedure

The clinical attendance policy for the radiography program is very strict and rigorous compared to the college policy. Radiography students who miss more than their allowed acceptable days for the semester of the scheduled clinical hours, will be terminated from the program. A student has the right to appeal to the attendance committee if withdrawn or terminated due to excessive absences. Students have the right to due process as outlined in the *ECC Student Handbook*.

Allowed Clinical Absence(s) by number of days per semester:

- Semester 1: 1 day of clinical absence (clinical meets 1 day a week)
- Semester 2: 2 days of clinical absences (clinical meets 2 days a week)
- Semester 3: 2 days of clinical absences (clinical meets 2 days a week)
- Semester 4: 3 days of clinical absences (clinical meets 3 days a week)
- Semester 5: 3 days of clinical absences (clinical meets 3 days a week)

Every Offense: The student will receive a written warning on the PE/PSA evaluation from the CP. When a student reaches their last allowed absence, the student will sign an Attendance Acknowledgement Form provided by the CC. This action is an attempt to rectify the behavior. If a student exceeds the allotted number of absences for the semester, termination from the program will be enforced.

If a student incurs absences that occur due to extreme circumstances, the student can request the Radiography Program Chair to evaluate the absences (**only AFTER allowed number of absences have been exceeded**). The Radiography Program Chair has the right to amend the attendance policy when there is just cause.

A student should make every effort to attend all clinical scheduled hours. Students are expected to attend all clinical assignments and are responsible for informing the CEC and the CC of all scheduled and unscheduled absences. All absences are reflected on the PE and PSA evaluation at mid-term and end of semester. Due to limited exposure to surgery, weekends and evening shifts, attendance in these areas is critical to the success of the student.

Only full day absences are allowed. Half-days are NOT allowed. If you are more than 15 minutes late, that counts as a full day absence.

Clinical Absence Procedure

Students are required to complete an absence form in its entirety, when absent, and turn it in to Clinical Preceptor **immediately** upon return to clinic. All requested information on the absence form must be completed.

Protocol for Reporting Clinical Absences (All shifts, Sunday – Saturday)

When absent the student must call the clinical site that they are assigned to that day, and email the Clinical Coordinator, and cc: your ECC clinical preceptor a minimum of 30 minutes prior to the scheduled arrival time. All communication must take place on the day/date of the occurrence.

Deanne Swartout email address: swartoutd@edgecombe.edu

Donna Sullivan's email address: sullivand@edgecombe.edu

Paige House's email address: housep@edgecombe.edu

Kim Brayboy's email address: brayboyk@edgecombe.edu

Failure to Follow the Protocol for Reporting Clinical Absences

First Offense: The student will receive a written warning on the PE evaluation from the CP.

Second Offense: The CC will document counseling the student regarding failure to follow policy.

Third Offense: The CC will place student on clinical probation.

Fourth Offense: The student will be terminated.

Clinical Tardy Policy

Managers expect employees and students to be on time for work/assignments, to produce efficiently while there and to stay until the shift ends or the patient procedures are completed.

Students should be at their assigned clinical site at least ten minutes prior to their scheduled start time.

Any student arriving one to fifteen minutes after their scheduled start time will be considered tardy. Each tardy exceeding the third tardy will result in a five (5) point deduction of their final clinical grade.

Students arriving **sixteen minutes after their scheduled start time** will receive a full day absence. The Student will have the option to stay and complete their assignment. This option is to facilitate an opportunity to complete competencies.

Students arriving 16 minutes or later to clinical must call the clinical site, and, email the Clinical Coordinator, and cc: your ECC clinical preceptor, as soon as you are aware that you will be late beyond the 15 minutes. Depending on the circumstance, you will be guided by CP or CC, if this is a full day absence, in which you will need to leave the facility; or if it is an extenuating circumstance, the CC or the program chair will guide the student to the appropriate plan of action.

Deanne Swartout email address: swartoutd@edgecombe.edu

Donna Sullivan's email address: sullivand@edgecombe.edu

Paige House's email address: housep@edgecombe.edu

Kim Brayboy's email address: brayboyk@edgecombe.edu

Tardiness impacts the **Performance Evaluation** and **Professional Skills Assessment Evaluation** at mid-term, end of semester as well as the **final clinical grade**. Tardiness can lead to program termination.

Clinical Schedule Change Request Policy

Students are allowed to request a clinical shift rotation change one time per semester. Student may only request a clinical shift rotation change for the same type. Example: Evening rotation for an evening rotation, weekend day rotation for a weekend day rotation, weekend evening rotation for a weekend evening rotation.

Protocol for student to request a clinical shift rotation change:

The request must be made in advance for final approval. Protocol **MUST** be followed in order to be approved. If the protocol is not followed, approval will be denied by the CC. (Request(s) will only be approved pending student to tech ratio availability).

The **Clinical Schedule Change Request** form must be submitted to the CC prior to the date(s) of change. Upon receipt of this form, the CC will initiate approval or denial of the request in three working days. The student **MUST** meet with the CC to review the form. Upon approval, the CC will email the CP and the student with the attached scanned form.

The **Clinical Schedule Change Request** form will be completed and a copy provided to the students for placement in their clinical notebook and a copy is provided to the CP for the attainment of records.

A sample form is located in the appendix of the Radiography Student Handbook.

Clock In/Out Procedure

Students are required to clock in/out upon arrival to the CEC and upon exiting the CEC. Students are to **clock in/out using the CEC specified computer ONLY**. If a student clocks in or out from a device other than the specified computer at their clinical site, it will be considered falsification of documentation/cheating. The student will be considered absent and the act is grounds for dismissal from the program. **Students are able to clock in NO more than 7 minutes prior to the start of their shift. Students are NOT allowed to clock out early;** for example, clocking out at 3:59p and shift ends at 4p.

CPs should have a hard copy sign in/out sheet in case the facility computers are down. Failure to clock in/out or clocking out early will result in the following consequences:

First Offense: The student will receive a written warning on the PE evaluation.

Second Offense: The student will lose 1 day of clinical time though the student will remain in clinic. Make-up of lost time will NOT be allowed.

Third Offense: The student will lose 1 day of clinical time though the student will remain in clinic. Make-up of lost time will NOT be allowed. The student will be placed on clinical probation.

Fourth Offense: The student will be terminated from the program.

*All occurrences will be reflected on the PE and PSA evaluation.

VIII. Clinical Supervision

Purpose

Clinical supervision of students is provided by the college faculty, clinical coordinator (CC), clinical preceptors, clinical preceptors (CP), and clinical staff radiographers (CSR) at the clinical education centers (CEC). Edgecombe Community College has provisions for the supervision of students by CSRs. The following guidelines outline the responsibilities of CSRs, CPs, CC and students.

Clinical Staff Radiographer (CSR)

Edgecombe Community College requires that student radiographers be supervised during all aspects of clinical education courses. It is the responsibility of the college to provide the CSRs with appropriate staff development to include overview of program policies and procedures, and consistency in assessment and evaluation of students. The student is assigned to specific room/area rotations in the imaging department of the CECs. During assignments within the imaging department, students are **directly or indirectly supervised, dependant on student competency level** by clinical staff radiographers employed by the clinical facility.

CSRs are recognized as primary clinical educators. CSRs are required to be ARRT 'registered technologists' that have maintained adequate competencies in diagnostic radiography. Edgecombe Community college recognizes the expertise of these individuals and expects students to acknowledge and respect their professional skills and knowledge of the field.

Supervision

To follow the Joint Review Committee on Education in Radiologic Technology (JRCERT), all ECC radiography students, regardless of level, must be directly or indirectly supervised by a registered technologist that has earned the credentials of R.T.(R)(ARRT). ECC radiography students are not to be directly or indirectly supervised by a non-registered x-ray machine operator. In addition, students are not to perform any procedural competencies under the supervision of a non-registered x-ray machine operator. The program Competency Procedure will continue to uphold the JRCERT standards of direct supervision by a registered technologist, R.T.(R)(ARRT). Once the students have achieved procedural competency, indirect supervision by a registered technologist is acceptable.

Direct Supervision

All clinical assignments and procedures are to be performed under the **direct supervision** of ARRT radiographers until a student achieves competency. **Direct Supervision** assures patient safety and proper educational practices. The JRCERT defines **direct supervision** as student supervision by a qualified radiographer who:

1. Reviews the request for examination (procedure) in relation to the student's level of achievement.
2. Evaluates the condition of the patient in relation to the student's knowledge.
3. Is **physically present** in the radiography room during the entire procedure and
4. Reviews and approves the procedure and image(s).
5. Is **physically present** in the radiography room for all '**repeat**' projections and approves the positioning and associated factors prior to re-exposure.

Mobile and/or Surgical Radiography

Although a student achieves competency on mobile or surgical radiography; all mobile and surgical radiography performed by a student must be performed under **direct supervision**. Students are NOT allowed to do mobile or surgical radiography unless a CSR, CP, or CC is physically supervising the performance.

Indirect Supervision

Indirect supervision is defined as supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. Immediately available is defined as the qualified radiographer being physically present adjacent to the room where a radiographic procedure is being performed. Once a student has successfully passed a competency requirement, the student is allowed to perform those procedures under **indirect supervision**.

Indirect Supervision Clarity from JRCERT

Q. What is the definition of a qualified radiographer?

Answer:

Standard 3.2 Documents that all faculty and staff possess academic and professional qualifications appropriate for their assignments.

Educators and Clinical staff will hold American Registry of Radiologic Technologists current registration in radiography or equivalent unrestricted state license for the state in which the clinical setting is located.

Standard 5.4 Assures that medical imaging procedures are performed under appropriate supervision of a qualified radiographer (see above for definition) after a student achieves competency.

Explanation:

Indirect supervision promotes patient safety and proper educational goals. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer (see above for definition) immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified radiographer (see above definition) **adjacent/directly next to the room or location** where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Explanation of ‘regardless of level of student achievement’: It does not matter where the student is in the program as long as they have successfully achieved competency of the procedure they are performing under indirect supervision.

Further Clarification:

- **A student may assist an unqualified nonregistered technologist as long as a qualified registered radiographer is physically next to or adjacent to the room.**
- **Under no circumstances can an unqualified nonregistered technologist directly or indirectly be left to ‘supervise’ students. The supervision will always be from a qualified registered radiographer.**

- **Under no circumstances can an unqualified nonregistered technologist be included in the 1:1 tech to student ratio.**
- **Under no circumstances can an unqualified nonregistered technologist perform procedure competencies, supervise, or sign any student documentation!**

Students can find the Published Supervision Flyer posted for clinical acknowledgement in the Radiation Safety Manual

Repeat Image Policy

After a student passes a competency evaluation, they may perform the exam with "indirect supervision." When a student is working with this "indirect supervision," there will be times when an image needs to be repeated. Regardless of the student's level of competency, these unsatisfactory images shall only be repeated in the presence (direct supervision) of a registered radiographer.

Students **MUST** record all repeats on the REPEAT SHEET and hand it in to the CP at the end of the semester. Because of the importance of documenting repeats, any student not handing in his/her **Repeat Sheets will have their overall course grade lowered 5 percentage points.**

The Repeat Sheet must be kept with the student and not in the notebook, locker, etc. The reason is that students are less likely to document repeats if they have to go and get the form.

Once a student passes a competency evaluation, the student may perform the exam under **indirect supervision**. When an image needs to be repeated, regardless of the student's level of competency, **a repeat exposure** shall only be repeated under **direct supervision** by a registered radiographer.

It is **not acceptable** for a radiographer to *provide the student with a different technique or to say move up or down so many inches from where you were* and not go into the radiographic room to be physically present during the repeat exposure. This violates JRCERT standards.

It is the **student's responsibility to politely remind and refuse to perform ANY repeat image** without **direct supervision**, regardless of who may have given the directive. This rule will remain in effect the entire length of the program. Students who do not remind clinical staff radiographers or clinical preceptors of the policy and continue to perform repeat exposures without **direct supervision** will be disciplined to include clinical probation and possible termination from the radiography program.

CLINICAL POSITION DUTIES

Purpose

Edgecombe Community College has provided for the supervision of students by staff radiographers. The following guidelines outline the responsibilities of the supervising radiographer, the student, the clinical preceptor, and the clinical coordinator.

CLINICAL STAFF RADIOGRAPHERS (CSR)

Edgecombe Community College requires that the student radiographer be supervised during all aspects of the clinical education courses. The student will be assigned to specific areas in the hospital or radiology department. While assigned to the Radiology department, students will be supervised by a qualified radiographer.

The clinical preceptor is recognized as the primary clinical educator. The supervising clinical staff will be an ARRT registered radiographer.

Until students achieve the program's required competency in a given procedure, all clinical assignments should be carried out under the direct supervision of qualified radiographers. Some clinical affiliates require students to have direct supervision for all procedures, even after clinical competency has been demonstrated.

Students should present an attitude of willingness and effectively communicate with the healthcare team, patients and peers. Students are in clinic to observe, assist and learn radiography and should take every opportunity to do so. Students should not be subjected to, nor expected to tolerate harassment or discriminatory practices while in the CEC. Students are instructed to report such treatment to the CP, CC and/or the PD. It is the responsibility of the CP to report inappropriate conduct of staff to the Radiology Department Manager, PD or CC. **Students are NOT to be used to replace paid staff or technologists.**

Clinical Staff Radiographer Responsibilities:

- Understands the clinical competency system;
- Understands requirements for student supervision;
- Evaluates students' clinical competence, as appropriate;
- Supports the educational process;
- Maintains current knowledge of program clinical

CLINICAL PRECEPTOR (CP)

The clinical preceptor is a radiographer appointed by Edgecombe Community College to assist the clinical coordinator in the supervision, education, counseling, and evaluation of students in the clinical setting. This individual will also function as a liaison between the radiography program and the radiology department. Specific duties are listed below:

Supervision of Students: Clinical Preceptor will:

- a. Monitor student attendance and report all deficiencies to the CC.
- b. Monitor student compliance of school and affiliate policies and report all deficiencies to the CC.
- c. Make independent judgments concerning disciplinary and other student related problems.

Evaluation of Students: Clinical Preceptor will:

- a. Accept responsibility for proper and timely distribution, collection and grade input of competencies, and clinical evaluations.
- b. Maintain an ongoing line of communication with the CSR and the CC concerning student progress.
- c. Assess and effectively evaluate clinical performance of students.
- d. Provide students with timely and effective feedback in order for student to have time to improve.
- e. Assist CSRs with appropriate assessment and evaluations of student performance.

Professional Development and Teaching Skills: Clinical Preceptor will:

- a. Maintain continuing education units (CEUs) to satisfy ARRT and JRCERT requirements.
- b. Show initiative in learning teaching modalities and evaluative strategies to positively impact self and students.
- c. Attend varied educational and learning opportunities to enhance and promote skills as a clinical educator as required by JRCERT.
- d. Attend required staff development on consistency, assessment and evaluation provided by ECC faculty.

Education of Students: Clinical Preceptor will:

- a. Recommend and/or provide instruction to students in areas of deficiencies.
- b. Engage students in active learning activities related to clinical skills during down times.

Counseling of Students: Clinical Preceptor will:

- a. Counsel students as necessary.
- b. Serve as an advocate for students when possible.
- c. Refer students to CC when necessary.

Acts as a Liaison: Clinical Preceptor will:

- a. Act as a liaison between the radiography program and imaging departments.
- b. Serve as program spokesperson in the absence of other program faculty.
- c. Promote good will between radiography program and the CECs.
- d. Inform the students and ECC faculty of changes in the imaging departments and/or protocol.
- e. Work closely with CSRs in order for them to understand their role as educators

CP minimum responsibilities include:

- a. Maintain knowledge of program mission and goals,
- b. Understand the clinical objectives and clinical evaluation system and evaluating students' clinical competence
- c. Provide students with clinical instruction and supervision
- d. Participate in the assessment process
- e. Maintain current knowledge of program policies, procedures, and student progress and monitoring and enforcing program policies and procedures.

Affiliate Clinical Preceptor

*In the event that an ECC appointed CP is not present due to sickness or an ECC required meeting; there are named **Affiliate Clinical Preceptors** that have agreed to assume the responsibility of students for the required time. The ACP will assume the duties as agreed above, as a CP. The ACP is not a daily occurrence and is meant to be a temporary replacement in the event the ECC CP is not available or present.

A minimum of one clinical preceptor must be designated at each recognized clinical education setting. The same clinical preceptor may be identified at more than one site as long as a ratio of one full-time equivalent clinical preceptor for every ten (10) students is maintained (JRCERT 3.1). Full-time and part-time faculty members are assigned to CECs for the purpose of providing clinical instructions are ARRT radiographers employed by Edgecombe Community College (ECC) to assist the CC in the supervision, education, counseling, assessment and evaluation of students in the clinical setting. These individuals may be full-time or part-time college employees that function as the liaison between the ECC radiography program and the imaging department. In addition, the CP should serve as an advocate for the student.

ACP minimum responsibilities include:

- Understand the clinical competency system;
- Understand requirements for student supervision;
- Evaluates students' clinical competence, as appropriate;
- Support the educational process;
- Maintain current knowledge of program clinical

Clinical Coordinator (CC)

The CC is a full-time employee appointed by ECC and serves as the overseer and coordinator of all clinical courses, schedules, policies, and maintenance of the clinical evaluation and competency systems. The CC is proficient in curriculum development, supervision, instruction, evaluation, and academic advising. The CC is responsible for developing and presenting staff development to the CPs and the CEC to include all CSR. The CC serves as the major liaison between the CEC and the radiography faculty. The program director (PD), faculty and CPs assist the CC with student placement, assessment, supervision and evaluation on a regular basis.

Clinical Coordinator delineation of responsibilities facilitates accountability. The CC will serve to support the program's mission policy and ensure she:

- a. Correlates and coordinates clinical education with didactic education and evaluating its effectiveness
- b. Participates in didactic and/or clinical instruction,
- c. Supports the program director to help assure effective program operation,
- d. Coordinates clinical education and evaluates its effectiveness,
- e. Participates in the accreditation and assessment process,
- f. Maintains current knowledge of the professional discipline and educational methodologies through continuing professional development, and
- g. Maintains current knowledge of program policies, procedures, and student progress.

IX. CLINICAL EVALUATION SYSTEM

Rationale

The goal of the clinical component of the Radiography Program is to produce graduates with entry level radiography skills. Clinical education is an integral part of the program, which provides an opportunity for students to apply knowledge gained didactically to a clinical setting. The student will develop positioning skills, professional ethics, and technical skills as well as learn to participate as a team member, develop good work habits, problem solving skills, critical thinking, and strive to deliver optimum patient care at all times. It is essential that the college, clinical education centers, and students work together for the best possible clinical experience.

The responsibilities of the radiographer have grown in complexity with the development of more sophisticated procedures in the medical sciences. Along with the growth, efforts have been made to develop a clinical evaluation system whereby student strengths and weaknesses are identified. Competency based evaluation is a means of checking the progression rate of students.

The natural progression of learning is as follows:

1. The student's cognitive (didactic) and affective (soft) skills are evaluated in the classroom, laboratory and throughout the clinical education experiences.
2. The psychomotor skills are first demonstrated in the college-energized laboratory and again during the clinical education experience.
3. The crucial evaluation, that of tying cognitive, psychomotor, and affective together, is during the clinical experience in the clinical education centers.

It is the role of the clinical education center to provide clinical experiences designed to bridge the gap between theory and application. It is very important that all knowledge and skills be reinforced and evaluated in the clinical setting in order to maximize the student's clinical effectiveness. This makes the clinical portion of the program an integral part of the total curriculum. Success in the clinical aspect of the radiography program depends upon the ability to perform the required radiographic examinations.

Clinical Evaluation System

The evaluation system includes a competency-based evaluation system that appraises the student's clinical abilities and skills and the measurement of growth in the affective domain, professional skills development. The system includes two major components:

1. The Clinical Competency Evaluation System is comprised of multiple skill-sets, procedural competencies and patient care.
2. Area rotation evaluations, Clinical Staff Radiographer Evaluations (CSE), PE and Professional Skills Assessment (PSA) Evaluations.

There are criteria and objectives associated with both major components which are specifically identified on each clinical course syllabi. The assignments coincide with knowledge attained in the didactic courses. The system is designed to increase a student's self-confidence, the radiographer's confidence in the student's ability, the student's responsibility, and to provide a measure of student progress in the clinical area.

Clinical Grading System

The clinical grade calculation will remain consistent according to semester; however, the contents within each sub-category will vary based on clinical semester and level of competency expected. The course syllabi will define specific details for the semester.

See Example below: **This is just an example and not concrete.**

<u>Sub-Category</u>	<u>Weighting Scale</u>
Professional Skills Assessment (PSA) x 2/Performance Evaluations (PEs)	35%
Competency (CE) & Spontaneous Competency Evals (SCE).....	35%
Test & Assignments	25%
(CSE) Evaluations/Notebooks/Uniforms.....	5%
TOTAL	100%

Assessment and Evaluation

The Program Director (PD), Clinical Coordinator (CC), Clinical Preceptors (CP) and clinical staff radiographers (CSR) are held accountable to prepare safe, competent radiographers through a course of study that adheres to standards set forth by the Joint Review Committee on the Education of Radiologic Technologists (JRCERT). The faculty will provide learning opportunities in the classroom, lab, and the CECs to develop the competencies for safe practice. The CC and CPs are required to evaluate the student's ability to meet the clinical objectives. When a student is unable to meet clinical objectives, the ECC faculty has a legal and ethical obligation to either place the student on probation or terminate the student. All incidents requiring clinical probation must go through the CC and/or PD.

The Program Faculty (PD, CC, CPs) and CSRs evaluate the student's performance to ensure that the student:

1. Demonstrates performance on the clinical objectives as indicated by the radiography program and stated on the course syllabi.
 - A. Students are assigned a specific number of Competency Evaluations (CEs) and Spontaneous Competency Evaluations (SCEs) to successfully complete each semester. It is the student's responsibility to request to complete the CE and the CP's responsibility to complete the SCE, and the student is to maintain an accurate record of all completed CEs.
 - B. The student must provide the CE form to the CSR/CP at the time they request to perform the procedure as a competency. If the form is NOT given to the CSR/CP prior to beginning the procedure, it will NOT count as a competency, but a practice.
 - C. **All attempted competencies** for the semester are to be recorded in MOODLE, until the student has attained **90% or higher** on the required number of competencies for that semester.
 - D. Any student that does not have the **required number of successful competencies** (regardless of grade recorded) will receive a **0%** for each of the missing competencies.
 - E. **Successfully completed competencies** beyond the required number for the semester (referred to as carry-overs) will be kept by the ECC CP until the next semester, when credit will be recorded. If a student does not maintain the additional attempts or competencies, the student will be required to repeat the competencies. **(Copies are**

strongly encouraged to be made for all competencies by the student for their clinical notebook for accurate record keeping!)

- F. It is the responsibility of the CP to document all attempts and successfully completed competencies into MOODLE as soon as possible when the procedure was completed. Each entry must include exam type, date and earned grade (unless a carry-over). (Failed attempts will be documented and part of the clinical grade for the semester they occurred).
 - G. If a student fails a competency (**89-0%**), it is referenced as an 'attempt'. If a student attains **5 unsuccessful attempts in a semester**, it is the responsibility of the CP to notify the CC immediately. This could indicate 'incompetence' and requires immediate action.
 - H. A student cannot remediate any one procedure more than twice. Again, if this occurs, the CP should immediately notify the CC. CC will place student on program probation.
 - I. It is the responsibility of the CSR to complete the competency evaluation. However, if the CSR chooses not to complete the image analysis portion of the procedure, the CP is required to complete it in a timely manner.
 - J. It is the responsibility of the CP/CC to complete the required number of SCEs on all assigned students prior to the end of the semester. This includes completion of image analysis on the SCE, as well. (The CC/CP may on occasion designate a CSR to complete SCE with the student).
2. Complies with the rules, regulations and policies of the radiography program and the clinical education centers. The radiography faculty uses professional expertise and judgment to determine if the student is or is not performing to the expected level, in performance of procedures, in providing appropriate patient care and in interactions with others.

CC, CPs and CSRs should use the following criteria as guidelines when assessing student performance.

A. Student mistakes are

- 1. Usually isolated occurrences (not the routine).
- 2. Often errors that a reasonable, prudent radiographer might make in a similar situation.
- 3. Uncommon and unusual as prior, the student consistently demonstrated knowledge and skills.
- 4. Readily acknowledged and is accountable for the occurrence and correction of the mistake.

B. Unsafe Clinical Practice: The student

- 1. Frequently performs multiple errors or occurrences
- 2. Makes an error that a reasonable, prudent radiographer would usually **not make** in a similar situation.
- 3. Action reveals an inability to consistently apply previous learned knowledge or skills.
- 4. Demonstrates a lack of accountability for the action and fails to take responsibility for correction of the error.
- 5. Fails to follow protocol as defined by clinical affiliate.

C. **Unprofessional Behavior/Conduct: The student**

1. Is disrespectful to the patient, family, radiographers, CC, CPs, program faculty, staff or other healthcare professional.
2. Fails to adhere to the legal and ethical standards as outlined by the JRCERT, ARRT and/or ASRT.
3. Fails to adhere to program and/or affiliate policies, patient rights and/or HIPAA policies.

Description of Competency Evaluation Forms

Pre-Clinical Lab Evaluations (PCLE)

Academic knowledge and skills are assessed and evaluated during procedures' classes. After acquiring the knowledge, the students test on the didactic material. After completing the didactic test, the student practices the positioning and technique skills in the ECC laboratory/affiliate and are tested on adequate performance of the skills required to successfully complete the projections at a novice level. Lab testing is a clinical simulation test and requires a **77% or higher** in order to progress to performing competency in clinical. The student is then allowed to observe, practice and perform practice on patients in the clinical environment in order to prepare for the competency evaluation.

Practice Competency (PC)

Students are required to successfully practice each of the (36) *ARRT mandated imaging procedures* at least two times prior to requesting to perform a competency on the procedure (exception to Geriatric and Cross-table spine). The practice procedures are to be performed on a patient. The first Practice Competency (PC) needs to be documented and signed by the CSR, CP, or CC on the student's tracking sheet. The second practice is documented on a Clinical Education (CE) form [90% or higher is passing; 89% - 0% is failing].

Competency Evaluations (CE)

Students are assigned a specific number of procedure competency evaluations (CE) to be mastered each semester. CEs are comprised of patient care, positioning skills, radiographic anatomy, technical requirements and image analysis and evaluation. It is the student's responsibility to request to complete the competency and to maintain an accurate record of all competencies successfully completed (**90% or higher**) and those that are completed unsuccessfully (**89 - 0%**). There are a scheduled number of competencies due by each PE and a total number due by the end of the semester.

Failure to perform the required number by the assigned due date will result in a 0% recorded for each non-performed competency. (This grade can be rectified by completion of competency).

Failing one competency procedure twice requires intervention and remediation over that procedure/exam.

1. **After two unsuccessful attempts to pass a procedure competency evaluation, the student is required to remediate before seeking to be re-evaluated a 3rd time on the exam/procedure.**
2. Intervention and remediation can be completed a **maximum of twice for any one procedure.**

3. If a student attains the **5th unsuccessful attempt** on a competency exam/procedure, the CP is required to notify the CC immediately.
4. The CC will place the student on clinical probation, devise and implement a plan of action for improved performance.
5. All criteria must be completed successfully by due dates as stated on the conference documentation or the student will be terminated from the radiography program and will receive a failing clinical course grade.

Competency Evaluations (CE) can be assessed and evaluated by a CSR, CP or CC. Each competency must be met with a score of **90% or higher** in order to pass the competency and before a student is allowed to perform radiographic examinations under 'Indirect Supervision'. However, regardless of competency level, the student **MUST ALWAYS** have a radiographer physically present in room (Direct Supervision), while performing repeat exams, portable exams, operating room procedures, and computed tomography (CT) examinations.

ARRT requires students to demonstrate competence in the following areas:

- 10 mandatory patient care activities
- 36 mandatory imaging procedures
- 15 elective imaging procedures
 - 1 elective imaging procedure from 'head' category
 - 2 elective imaging procedures from 'fluoroscopy' category
- 10 total ARRT approved imaging simulations - (options are only granted permission by the program chair when the last resort is presented)

Competency evaluations are limited to procedures completed and tested on in procedures' class and deemed satisfactory on pre-clinical lab evaluations. Competencies may be performed during scheduled clinical education time only. **Students employed by affiliate clinical centers are not allowed to complete competency evaluations during work time, nor clock out to perform a competency evaluation.**

Spontaneous Competency Evaluations (SCE) Pink

Students are assigned a specific number of SCEs to be mastered each semester. Spontaneous competencies are those competencies that a student previously mastered and are now being performed to demonstrate continued proficiency over the procedure. The procedures are chosen randomly by the evaluator and presented to the student in a spontaneous manner. This allows the CC, CP and faculty to determine whether the student is maintaining clinical competence after initial competence has been achieved. **SEs are assessed and evaluated by the CC, CP or faculty ONLY unless otherwise communicated by the CC/CP.** Each competency must be met with **a score of 90% or higher** in order to pass the SE.

Patient Care Competency Evaluations (PCCE)

Students must demonstrate competence in all identified patient care skills. The skills/activities may be performed on patients or as simulations in the ECC lab or CEC and are scheduled throughout patient care and clinical courses. The completed evaluation is to be turned in to the CC/CP for record of completion.

The skills/activities include:

1. CPR/BLS Certified

2. Vital Signs: Blood Pressure (BP), Pulse (P), Temperature (T), Respiration (R), and Pulse Oximetry
3. Sterile and Medical Aseptic Techniques
4. Assisted Patient Transport and Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)
5. Care of Patient Medical Equipment (e.g., oxygen tank, IV tubing)
6. Venipuncture (can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm/arm/or suitable device.

Description of Clinical Evaluation Tools

Students receive a packet containing a copy of each evaluation tool.

Development of Affective Domain (Soft Skills)

Professional Skills Assessment Evaluation (PSA) - Blue

Academic excellence is important but no more important than acceptable interactions with others. One of the four goals required by the JRCERT is the development of the professional skills domain. Professional soft skill development is evaluated on each competency exam/procedure and twice per semester on the PSA evaluative tool. At mid-semester and prior to the end of the semester, the CP will complete a PSA on each assigned student. PSA days are scheduled to review the evaluation with each student in order for the student to recognize personal strengths and weaknesses. This evaluation serves as a major component of the clinical course grade. The score is adversely affected by tardiness and absences. Please review often in order to familiarize yourself with expectations.

Performance Evaluation (PE) - Yellow

As students rotate throughout the different areas of the imaging department, ER, OR, specialty areas, orthopedic offices and imaging centers, they will work to continually improve and perform to the program's level of expectation. Every 2-4 weeks, the CP will evaluate the student on traits relative to skill and ethical work performance. This evaluation serves as a major component of the clinical course grade. CSR evaluations will be reflected upon to assist in assessing the student. The score is adversely affected by tardiness and absences. Please review often in order to familiarize yourself with expectations.

Clinical Staff Radiographer Evaluation (CSE) - White

This is a daily clinical evaluation that **is required**. **Any clinical staff radiographer working with a student at any time may request to complete this evaluation when working one on one with a student.** Due to daily student interactions with the clinical staff radiographers and the need to maintain objective discretion within the clinical affiliate, these evaluations are provided to the students for review. These evaluations are given to the CP once completed and the results of this evaluation are reflected on the professional evaluation (PE) and the PSA as indicated by area of needed performance. This evaluation will be calculated as part of the clinical grade.

Special Imaging CSE – Gold

This is an evaluation required when rotating through special imaging.

Area Room Evaluation (ARE) - Green

This is a specific evaluation to assess the student's competence on **equipment manipulation and room preparation**. These evaluations are performed each semester at specific intervals for specific rotations and as initial and continued proficiency over equipment manipulation. These evaluations will be calculated as part of the clinical grade. Rotations include: Diagnostic, C-Arm and Fluoroscopy AREs are completed in semesters 1, 2 and 4.

Repeat Sheet - White

Students are required to record all repeats on the **Repeat Sheet** and to be turned in at all PE conferences. It is imperative that repeats are documented appropriately and signed by the radiographer directly supervising the repeat exam/procedure. The **Repeat Sheet** must be kept in the pocket on the student's uniform while in clinic. It is considered a part of the **required dress code**. This is required to remind and encourage students to document repeats. If it is necessary to leave the room to locate the sheet, documentation is less likely to become a habit.

Failure for student to turn in the Repeat Sheet at the PE conference will result in a deduction of **five percentage points** from the final clinical course grade.

Clinical Notebook

Students are required to have the clinical notebook with them every day while at clinic. The clinical notebook contains the Radiography Program Student Handbook Policy Manual, Radiation Safety Manual, copies of clinical forms and evaluations. In addition, the notebook serves to house forms, practice sheets, daily records, repeat sheets, competency evaluations, copies of TB skin test (PPD), Flu vaccine, CPR and other assignments until the due date. Student copies should have **sensitive information blacked out**, such as, student social security number, student address, student DOB, etc. The clinical notebooks are graded at the end of each semester.

Clinical Competency Evaluation System

Clinical Competency Evaluation Procedure

Evaluation of the student's clinical performance is necessary in order to assume meaningful participation, to assess the acquisition of skills and knowledge, and to identify areas for further growth. A specified level of competence is required each semester for progression within and graduation from the Edgecombe Community College Radiography Program.

The student is **NOT allowed** to assess patient condition prior to introduction to patient. During 1st, 2nd, and 3rd semester, students are allowed to ask a peer or staff radiographer for exposure factors. During 4th and 5th semester, students are required to have mastered exposure factors, however, they may give suggested exposure factors to technologist or CPs for approval prior to making the exposure. This is considered a safety precaution method in lowering patient radiation exposure by decreasing repeat-based exposure factors. If, the

exposure factors are **not close** to what the CEC suggests for the patient variables, student will fail the competency. For reference of exposure factors, it is expected and required for all students to record exposure factors in their pocket manuals. If, in the instructor's opinion, a patient's condition would adversely affect the learning and testing situation, the instructor may stop the evaluation. The evaluation form will be kept in the student's clinical records documenting that the student attempted the exam.

Step-by-Step Competency Procedure

*Prior to requesting competency on the **36 mandated procedures, (exception of Geriatric and Cross table spine)** a student must have practiced the procedure at least two times and it must be documented on the appropriate form.*

Requesting Competency

1. The student informs the CSR and CP of procedures needed and is observant of the types of procedures coming through the requisition system. Requesting competency should **not** be based upon prior knowledge of patient condition.
2. Inform CSR or CP that you would like to perform exam/procedure competency on 'said' exam/procedure (only one student per patient). **Other students are not allowed in the radiographic room when a peer is performing competency testing.**

Student is to provide the Competency Evaluation (CE) Form to the observing CSR or CP PRIOR to the exam. If this procedure is not followed, the competency evaluation will not be counted.

The CSR/CP **MUST directly supervise** the examination until the images are accepted and electronic documentation by the technologist is completed. The evaluator must be present during the entire competency exam.

1. Locate patient in waiting area, introduce self and check patient identifiers in presence of evaluator.
2. The **evaluator will assess** patient's condition and determine if the patient and exam/procedure are appropriate for student's level of competence. This information must be documented on the CE form.
3. The student will continue with the CE if the CSR/CP deems the exam/procedure is appropriate for student's level of participation.
 - a. If the evaluator documented that patient condition may be inappropriate for CE, the CP/CC will review the examination to determine if the exam/procedure is considered unsuccessful and therefore an 'attempt' or if the examination is not to be evaluated.
 - b. **All** attempts for CE must be entered onto CE form, assessed, evaluated, graded and filed into student's file even if attempted unsuccessfully. If using the electronic management system, all CEs must be verified or non-verified by the CP.

The Student will:

1. Prepare room for the exam/procedure. At all clinical facilities the room is prepared prior to locating patient).
2. Ask two patient identifiers, ask patient appropriate questions regarding history related to exam, LMP, possibility of pregnancy, etc.
3. Give instructions for donning/doffing gowns, removal of jewelry, etc. If the facility provides a dressing room, student will have ALL out patients undress in the dressing room NOT in the x-ray lab. This is for modesty and respect reasons.

4. Complete the exam/procedure **without any assistance** but under ‘**direct supervision**’ of CSR/CP/CC.

The Evaluator (CSR/CP/CC) will:

1. Directly observe the student performing the competency examination without any assistance.
2. Prior to exposure, ask the student if they have done everything they need to do (encourages critical thinking abilities)
3. Evaluator intervenes only if a repeat image will result or if the patient is in jeopardy of injury.
4. Evaluator elects to terminate the competency if extreme extenuating circumstances occur during the examination and it is apparent that the student **is not prepared** for the competency or situation. This situation is more valid for 1st year students than 2nd year students. The CE form must include written comments explaining the termination.

Automatic Failure or Termination of Competency

The CSR/CP/CC may terminate an evaluation at any time during the procedure. **A grade of ‘0%’ is the result of an automatic failure. Automatic failure occurs when:**

1. Student actions placed, or had potential to place, patient’s safety in serious jeopardy.
2. Student did not use radiation protection practices appropriately (no shielding). Note: 1st semester-RAD 151 no shielding results in a less severe penalty of minus 5 percentage points off the final course grade. (Exam still needs repeated – is not entered as a physical grade in the gradebook)
3. Student did not question female patient of child-bearing age regarding LMP and possibility of pregnancy.
4. Failure to apply or utilize infection control, standard precautions, proper body mechanics &/or radiation safety measures for self & others.
5. Mismarked any image. (wrong side marked)
6. More than one image is unmarked with a lead marker.
7. Failure to gain confidence from evaluator causing evaluator to step in due to overall incompetence.
8. Student did not give the competency form to the CSR PRIOR to the exam.

If for any reason the radiographer who started the exam does not remain in the room to directly observe the complete exam/procedure, the competency will not be graded.

Additional personnel (not another student) may assist the student under the student’s direction, such as helping hold a patient or obtaining positioning aids at the student’s request, assisting a patient on or off the radiographic table, etc. The additional personnel may not provide hints or guidance to the student performing the CE.

After the images are reviewed by the CSR, the patient discharged and the electronic requisition completed, the evaluator is required to evaluate the student’s performance on image analysis. For quality learning, Image Critique and Evaluation is performed with the student regardless of (P/F). If the facility is busy and there is a lapse in time between the procedural performance and image evaluation; the student is **NOT** allowed to review resources or discuss with staff or peers. If there are any discrepancies on the CE, the final grade will be determined by the assigned CP and/or CC.

Anatomy, Image Analysis, Image Critique and Evaluation

Based on level of competency, the student is able to:

1. Identify all visible radiographic anatomy
2. Analyzed the positioning criteria to include body positioned to visualize injury/ anatomy correctly.
3. Identified alignment/adjustment of CR to mid-IR and part center.
4. Identified evidence of collimation and shielding.
5. Identified quality of exposure technique to include over-all brightness, dynamic range, resolution, and proper exposure index range (EI).
6. Identified artifacts (wanted and/or unwanted).
7. Recorded EI/DAP.

Completing of CE by student

1. All required pertinent information is included on CE.
2. The CP/CC will grade, sign and date the competency evaluation form and enter the grade in Moodle. The CP/CC must ensure all blanks on form are completed.
3. The student signature acknowledges the information and grade contained is accurate and complete to the best of their knowledge.
4. It is the student's responsibility to notify the CP/CC if they feel errors have occurred in the competency process. Not notifying program officials of improprieties on competencies could be considered falsification of information and grounds for program termination

Terms Related to Clinical Competency Evaluation

Approval of Images - Students may not approve radiographic images or dismiss patients prior to approval of images by the CSR. Students are not permitted to send images to PAC systems without CSR direction to do so. **ECC CPs are NOT allowed to approve images because they are serving as employees of the college, not the CEC.**

Merrill's Pocket Guide/Technique Book - It is the student's responsibility to enter exposure factors, EI/DAP readings into the pocket guide when observing, practicing and performing exams/procedures. Students should use the technique book as a guide for suggested exposure factors and when appropriate, use calipers to measure the patient. The student should be confident about the radiographic exposure technique before asking to be evaluated for a competency. **To assist in knowledge and skill, ALL students should obtain appropriate techniques when practicing procedures or during 'down' times, prior to performing a competency.**

Radiographic Markers - Left and right markers are required to legally identify the anatomical side of the patient as well as the radiographer or student who makes the radiograph. Students **are NOT** to loan markers to another student or staff radiographer. The radiographer or student positioning the patient for the procedure should use **personal** identifiable markers. Generic markers are NOT allowed. The following guidelines are required when evaluating student performance on competency evaluations.

1. If an image is *mismarked* it is an automatic failure (0) on the CE

2. If the procedure is a one view exam and it is unmarked, it is an automatic failure (0) on the CE.
3. If the procedure is a multiple image exam and some images are marked and some are not, a '1' should be recorded in that category on the CE.

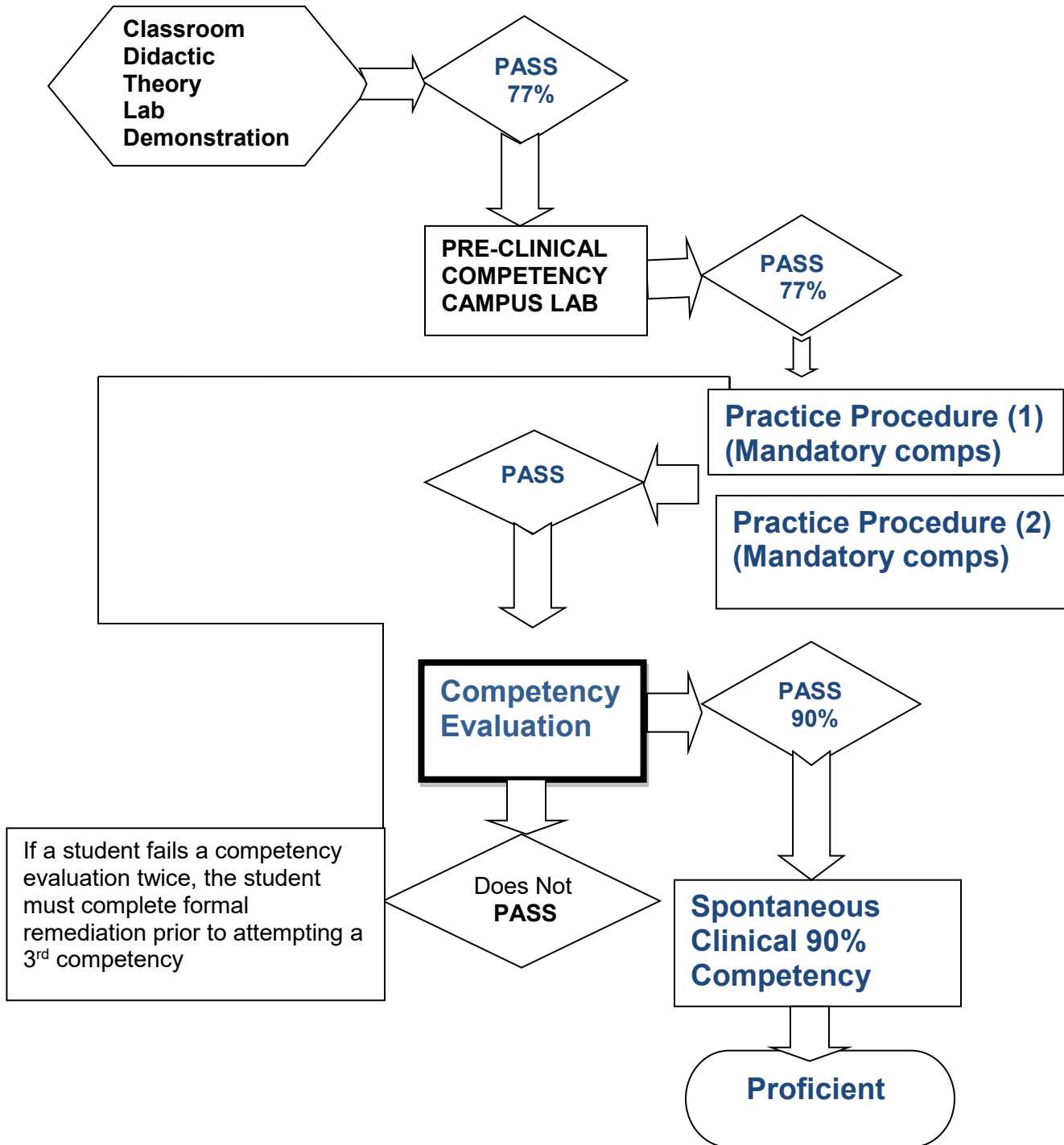
If in doubt as to whether the marker is on the image, open the mask to view.

Based on information from Mayo and Duke, this is best practice in radiography.

Progression of Clinical Component

<u>Area</u>	<u>Activities</u>
RAD Lab	The competency concept is introduced in the laboratory setting as well as the first weeks of clinical. This enhances the student's comprehension of the multitude of sub-topics that encompass each major area of the evaluative tools. Pre-clinical lab evaluations (PCLE) are performed over each unit of procedures as well as patient care skills. Students must successfully complete (77% or higher) the PCLE prior to performing the procedures in clinic.
Clinical Participation	Clinical participation consists of observation, assisting, performing procedures under direct supervision (practice and competency) and performing procedures under indirect supervision. The student is perfecting and expanding all aspects of their clinical performance.
Procedure Competencies	Once the student has completed the didactic, lab, PCLEs and clinical practice aspects of the required objectives, the student is eligible to begin procedure competency testing (per each clinical syllabus). The student will inform the CSR/CP/CC of his/her intention to perform competency on a particular procedure prior to the start of the exam. The CSR/CP/CC will select the patient for the competency evaluation. The procedures to be performed are divided into mandatory and elective competency examination categories.
Spontaneous Continued Competencies	Upon successful completion of the procedure competencies, the student will perform and demonstrate continued proficiency over the procedures selected by the CP/CC or other approved personnel. Successful completion (90% or higher) of Spontaneous Competencies is the final component in the progression of exams/procedures proficiency.

CLINICAL PROGRESSION



X. APPENDICES

XI. SIGNATURE ACKNOWLEDGEMENT FORMS

The Radiographer's Pledge

I solemnly pledge that I will cheerfully and willingly assist the Radiologist in all diagnostic and therapeutic radiology procedures to the best of my ability.

I will procure the best quality images in all examinations.

I will treat every patient with courtesy, consideration, and excellent patient care.

I will take care to maintain a professional attitude in my relationship with all patients, families, peers and supervisors.

I will regard as strictly confidential all information regarding each patient coming for examination or treatment.

I will not discuss patients nor their affairs outside of the radiology department. I will not divulge to the patient the results of any examination.

I will follow ALARA to practice highest radiation protection standards.

I will do all in my power to live up to and improve the highest traditions of my profession.

So help me, God!