

*Northampton Community College
Radiography Program
Student Handbook*



Case courtesy of Assoc Prof Frank Gaillard, Radiopaedia.org, rID: 7511

**“Education is the passport to the future, for tomorrow
belongs to those who prepare for it today.”
– Malcolm X**

Reviewed/revised 11/17/21

Cover picture: Osgood-Schlatter disease, see next-to-last page of handbook.

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Introduction

The Northampton Community College (NCC) "Radiography Program Student Handbook" is intended to be used as an information source and a reference for the program's policies and procedures.

In order to keep abreast with changes in the College's policies and procedures, the reader is referenced to either the College Catalog or the NCC Student Handbook for the most current information.

All the items listed in the "Radiography Program Student Handbook" are to be adhered to by each student during their radiography education. For this reason, each student is required to read and understand the contents of the document. If something is not understood, it is the **student's responsibility** to ask for clarification. A signed paper verifying that the student has read and understands the contents of the "Radiography Program Student Handbook" will be placed in their program file.

In a dynamic academic environment, the policies, procedures, and college/program information are subject to review and revision on a regular basis. The program's timeline for revising the "Radiography Program Student Handbook" is yearly. However, if there is a change in any information prior to the online posting or paper distribution of a new edition, you will receive a memorandum, addendum and/or new handbook describing the revisions.

The "Radiography Program Student Handbook" is endorsed by the Radiography Program Advisory Committee.

Accreditations

- **JRCERT:**

The Radiography Program at Northampton Community College is accredited, and has been awarded the maximum accreditation term of 8 years, by the:

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

The JRCERT Accreditation Standards for Radiography and the Program's Effectiveness Data may be found online at www.jrcert.org.

- **MSCHE :**

Northampton Community College is accredited by the Middle States Commission on Higher Education (MSCHE), 3624 Market Street, Philadelphia, PA 19104, 267.284.5000. The Commission on Higher Education is an institutional accrediting agency recognized by the U.S. Secretary of Education and the Commission on Recognition of Postsecondary Accreditation.

- **Pennsylvania Department of Education**

Note: The NCC web site is www.northampton.edu.

State Licensing & SARA (State Authorization Reciprocity Agreement)

If you are a Northampton Community College [student living outside of Pennsylvania](#) or intending to complete an internship or clinical placement outside of the state in a NCC program leading to professional licensure, you should review requirements on the state board website to make sure that the program qualifies.

Licensure requirements vary from state to state and you may require additional authorization from the professional licensing agency in that state. Participating in a program from outside of Pennsylvania, if not properly authorized by that state's professional licensing board, could result in loss of licensing eligibility. If you need help or have questions, please contact the Radiography Program Director for more information.

Most states accept American Registry of Radiologic Technologists (ARRT) Certification and Registration for licensure purposes. Some states have additional exams for particular procedures e.g. fluoroscopy in California. View state licensure information here: <https://www.asrt.org/main/standards-regulations/state-legislative-affairs/individual-state-licensure-info>

Northampton's Mission

Recognizing that students are the primary reason that Northampton Community College exists, we seek to provide excellent, accessible and comprehensive learning experiences in partnership with the dynamic, diverse communities we serve.

Northampton's Statement of Values

We believe that learning thrives when there is a sense of curiosity and excitement about the world in which we live. As such, we value:

Excellence:

Quality in the educational and training experiences that we provide, which is based on our dedication to teaching and learning

Innovation:

Creative problem solving, responsiveness, entrepreneurship and our ability to adapt quickly to a changing world

Sustainability:

Commitment to the long term health of the institution, the community, the economy and the environment

Accountability:

Institutional and individual responsibility for our actions, growth and development

Integrity:

Academic and personal honesty, fairness, ethical conduct and respect for others in our learning and working environments

Engagement:

Involvement in and collaboration with the college, local and global communities

Northampton's Vision

As one of the leading community colleges in the nation, we will:

- Promote the highest level of student success in achieving academic, personal and professional goals
- Provide state-of-the-art education and training in every community we serve
- Be the college of choice for innovative programming
- Encourage every member of our community to have a lifelong connection to the college

Mission Statement of the Radiography Program

Our mission is to provide student radiographers with an innovative and educationally sound program that will enable them to deliver quality patient-centered care, use radiation judiciously and display professionalism throughout their career.

Mission Statement between the Program and the Clinical Education Settings

Through mutual respect, in a learner-centered environment, we will collectively educate students to embrace the following components of the profession:

- Effective communication
- Problem solving
- Professionalism
- Radiation safety
- Technical competency and proficiency

Goals of the Radiography Program

To graduate students who:

- are clinically competent.
- communicate effectively through word choice, level of explanation, and method of delivery.
- analyze situations using critical thinking to foster better patient care.
- employ the five components of being a true professional: character, attitude, excellence, competency, and conduct.

Absence (Excessive)

See attendance policy in the course syllabi and the *College Catalog*.

Absence (Leave of)

Reapplication to the program is made through the Admissions office and is on a space available basis.

If the withdrawal was due to medical reasons, a note from the physician needs to be sent to the NCC Health Center for clearance prior to the return to classes and clinical education.

If at all possible and educationally sound, the student will be placed in courses from the semester that was interrupted. Placement in clinical practice, depending on the time lapse and the professional judgment of the Radiography Department, may not coincide with the beginning of the semester in which the student departed. In clinical education, skills quickly deteriorate when not reinforced through continual practice.

Departmentally we have found that creating special schedules out of sync with the cohort and the semester system tends to be very disruptive for all concerned. Special schedules are developed only when deemed educationally sound for the student.

Academic Dishonesty, Cheating, and Plagiarism

See the current *College Catalog* or *NCC Student Handbook* for overall details.

By being accepted into this program, you have demonstrated the skills that you need to be successful. Working diligently on the coursework and minimizing outside distractions will get you to your goal of completing the program and passing the Registry Examination. Learning the theory and developing the clinical skills required of the profession is how you pass the examination and earn your Radiologic Technology credential. Taking shortcuts, whether they be cheating, plagiarizing or other forms of clinical or academic dishonesty does not demonstrate professional behavior and will not be tolerated. Getting something "wrong" is part of how we learn and being a student is all about learning. Ultimately we need to know the material that is being taught so we can provide great patient care. If a mistake happens in a clinical situation, whether you're a student or seasoned technologist, professional behavior requires that you take responsibility. Procedures and protocols are frequently revised when an error occurs in order to prevent a recurrence that could impact patient safety. Covering up errors in clinical practice defeats this continuous improvement process.

A grade of "F" resulting from an academic dishonesty issue, would require a favorable ARRT ethics review in order to continue in the program. Due to the sequential nature of the coursework, a minimum of a one year delay in program completion would also be a consequence.

Note:

The ARRT application asks if the student has ever been subjected to a sanction as a result of a violation of an academic honor code, or suspended or dismissed by an educational program that you attended in order to meet ARRT certification requirements. An affirmative response may result in the ARRT determining that the student is ineligible to take the registry examination.

Academic Probation

To remain in good academic standing, a student must maintain a minimum grade point average of 2.0 for all work attempted for graduation. See the *NCC Student Handbook* for details.

Academic Progression within the Radiography Program

Students are required to show both didactic and clinical progression each consecutive semester. This means you need to pass each academic course and clinical practice course with at least a grade of "C-" to show academic progression.

Any student who does not successfully complete two (2) courses (either two different courses or the same course twice), regardless of when in the program curriculum the unsuccessful attempt occurs, will be dismissed from the Radiography Program. An unsuccessful course completion is defined as a final course grade of an "F," "W", or being withdrawn for excessive absences, for which a "W" will be issued.

Academic Recognition

Students who complete a minimum of six credits in the semester and who achieve a grade point average for the semester of not less than 3.50 will be carried on the Dean's Honor List, a mark of academic distinction.

See the *NCC Student Handbook* for details.

Academic Support

In order to help you make the most of your education, NCC has established a Learning Center (LC). The Center can provide you with academic support in a variety of ways.

- Tutors:** The LC can assign a tutor to work with you for a specific period of time. Or you can work with a professional assistant on a drop-in basis.
- Computers:** The LC houses computers with academic tutorial software which allow you to do additional work. You can also work individually with on-line tutorial programs. In addition, computers are located at various locations on campus.

Call or visit the LC in College Center 315, 610-861-5517, to find out more. The Center is open Monday-Thursday 8:00 a.m. to 6:00 p.m. Additional hours may be scheduled on an as-needed basis. An additional dedicated space for science tutoring-the Science Resource Center-is in room 211 of Penn Hall for students taking chemistry and biology courses.

Note:

- The program usually has second-year students who have been trained through the Learning Center **as tutors specifically for the Radiography Program.**
- The Radiography Program has purchased CD-ROM programs, and the programs are available in the Wogenrich Laboratory of the Radiography Department. Ask your Preceptor, Clinical Education Coordinator or Program Director for the exact location of tutorial aids.

Accidental Exposure to Infectious Materials

In the event of accidental exposure to infectious materials, the clinical site's protocol designed to protect Health Agency personnel shall be utilized to protect the College's students.

It shall be the responsibility of the student to promptly report any suspected or actual exposure to a representative of the Health Agency and to the College faculty or staff person in charge.

In the event that an incident occurs on site in clinical practice, the clinical site will:

1. Complete an incident report for an invasive injury and forward a copy of the incident report to the Clinical Preceptor, Clinical Education Coordinator, and radiology administrator.

2. Ensure follow-up, per the clinical site's employee exposure protocols.
3. Ensure that students adhere to the clinical site's policies regarding personal protective equipment and universal precautions.
4. Send initial and follow up reports to the NCC Health Center.

Accidents Occurring in Lab or at the Clinical Practice Setting

All student related accidents that occur during laboratory sessions on campus or clinical education that result in patient injury, personal injury, personnel injury, or equipment damage, must be immediately reported to the lab instructor or Clinical Preceptor and Clinical Education Coordinator.

For injuries or potentially infectious exposures at the clinical site, the hospital's emergency room will treat the student. Students should have their health insurance information available at all times.

It is important to document the incident stating the facts as soon as possible. If an incident report is completed at the clinical site, a copy of that incident report must be forwarded to both the Clinical Education Coordinator and the NCC Health Center. Incidents on the college campus are documented by Public Safety which can always be reached on the phone to radio link by calling 610-861-5588.

Infectious Disease Precautions

Clinical rotations may bring you into contact with infectious patients or patients with compromised immune systems. For this reason students must stay up to date with their immunizations and follow established infection control protocols. Protect yourself and protect your patients! Infectious diseases (airborne) include, but are not limited to, chickenpox, diphtheria, influenza (flu), measles, mumps, rubella, tuberculosis (TB), whooping cough (pertussis), coronavirus and COVID-19.

Depending on the clinical rotation, students will be required to wear personal protective equipment (PPE) appropriate for the rotation, environment, and/or patient condition. Students will follow the protocols established by their clinical site. In the event that the PPE required by the clinical site is deemed inadequate by the School of Health Science and Education's Program, the Program's guidance will take precedence. In the case of the **Covid-19** pandemic, in addition to the standard PPE (gloves etc.), NCC Radiography students **MUST** wear eye protection and an N95 respirator covered with a surgical mask for all patients. The program will work with the clinical sites to ensure that students have the required PPE needed for safe clinical practice rotations and will fit test and supply all students with N95 respirators.

NCC Procedures for Communicable Diseases

Tuberculosis:

Allied health students will be need to be tested annually for TB. If any employee/student contracts active tuberculosis (not latent/inactive tuberculosis), they shall be removed from their job/classroom/dorm setting until medical documentation and laboratory results have been received at the Health and Wellness Center to confirm diagnosis and mode of treatment. Signed documentation from a licensed physician must state that they are not in an infectious state. These forms are available at the Health Center. Thereafter, a progressive note must be submitted annually by the treating physician and/or a tuberculosis screening questionnaire done at the Health Center.

Blood borne pathogens:

If any employee/student has an exposure incident, (exposure incident as defined by OSHA is defined as a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of a duty), the following procedure should be observed.

The individual should immediately inform their instructor or immediate supervisor, wash the exposed area with water thoroughly and report to NCC's Health and Wellness Center. For off campus or clinical site, staff/student should inform their supervisor/instructor of the exposure. Hospital protocol should be followed and communicated to the Health and Wellness Center in the case of a clinical exposure. An Incident or Exposure form must be completed. The staff/student will be counseled at the Health and Wellness Center and if appropriate, will undergo base line testing for HBV and HIV. All confidential documentation will be held at the Health Center. The staff/student is to be followed by the Health and Wellness Center for re-evaluation and assessment while being treated.

Required vaccinations:

Allied Health students are required to be immunized, and/or document immunity against varicella (chickenpox), hepatitis B, tetanus, diphtheria, pertussis (whooping cough), influenza (flu), measles, mumps, rubella, and Covid-19.

Meningococcal vaccination:

Students living in campus housing must receive the meningococcal vaccination unless religious beliefs prohibit the student from obtaining the vaccine, in which case a waiver will need to be signed.

Other exposures, or possible exposures:

Communicate with the Health and Wellness Center for consultation and follow-up.

COVID 19 –NCC is closely monitoring the COVID-19 pandemic with the first priority being the health, safety and security of students, faculty, and staff. Students should monitor their health and follow the guidance posted on the college website. Guidance is continually under review and is subject to change. Facial PPE is currently required while on the NCC campus. Up to date information can be found linked to the College's main webpage: <https://www.northampton.edu/>

Students found to be out of compliance with PPE guidelines will be removed from their clinical site for the remainder of that day and the hours will need to be made up. Any continuing infractions will result in escalating corrective action. Students who have had high risk exposure to a Covid positive person may be required to be tested and self-quarantine. Students should contact the Nurse at NCC's Health and Wellness Center at 610-861-5365 and also consult with their health care provider.

Public Health Emergency

In the event of a public health emergency, follow the guidelines detailed on the College's website.

Address, E-mail, and Telephone Number Changes

All changes to your mailing address, e-mail address, or telephone number must be immediately forwarded to:

- Radiography Program Director
- Radiography Secretary
- Records Office

Admission's Policies and Procedures

Transferring In:

Northampton Community College will accept credits when transferring from another institution when the following criteria are met:

1. Credits earned from:

- U.S. colleges and universities that are regionally accredited. (Coursework from other institutions not regionally accredited will be reviewed on a case by case basis).
- foreign institutions that are evaluated by a member of a recognized evaluation agency like World Education Services Inc. or Educational Credential Evaluators Inc. and a copy of the evaluation sent directly to NCC. (For more information concerning an evaluation service provider, please contact the NCC Admissions Office).
- the military provided to the College on the official DD295 form, AARTS, or Joint Services transcript.

2. The course grade is C or better. Courses taken on a pass/fail basis may be accepted only if the official transcript states that a "pass" grade is equivalent to a C or above.

3. The course content is equivalent to a Northampton course.

4. The course is applicable to the student's Northampton program.

5. Official transcripts are mailed or sent electronically to the Admissions Office directly from the student's previous college, university, or other post-secondary educational institution.

Admissions determines transferability of credits for new students and change of majors into the allied health majors; the Registrar determines all other transferability of credits.

See the *College Catalog* for current details.

Radiography coursework from other programs:

Radiography specific coursework (courses coded RADT) must be completed in the program. Clinical, lab and lecture coursework is synchronized throughout the duration of the program. This ensures that our graduates have satisfied all the components required in order to take the Registry examination.

Advanced Skills Internship (ASI)

When students have successfully completed all of their program requirements, they have the option to voluntarily complete six (6) weeks in an Advanced Skills Internship in one of the following specialties:

- | | |
|---------------------------------|----------------------------------|
| Bone Densitometry (BD) | Computed Tomography (CT) |
| Interventional Radiography (IR) | Magnetic Resonance Imaging (MRI) |
| Mammography (M) | Surgery (OR) |

The Advanced Skills Internship (ASI) is offered through the College's Center for Business & Industry, non-credit course offerings and is only available to current year, May, graduates on a space available basis.

The intent of the ASI is to provide the graduate with a more comprehensive experience in a particular modality. This is an excellent opportunity for graduates to evaluate their suitability with a modality they are considering for employment. It is not meant to satisfy the competency requirements for registry eligibility. Evaluation of competencies during the internship will be at the discretion of the mentor.

The decision to accept, approve and verify the competency so that it can be entered into the ARRT registry application process will be determined by the mentor.

Continuation of clinical hours for cross training and logging of competencies after the internship is at the discretion of the clinical site. There is no guarantee of employment after completing the internship.

Fees:

The ASI is offered at the same cost as two (2) credit hours (Northampton County resident rate) plus \$50. Current credit hour rates are published on the College website (enter "tuition" in the search box on the home page).

Refund Policy:

Students who wish to withdraw must formally request withdrawal and will be eligible for a refund as described by the College's Center for Business & Industry policy:

100% Refund - Withdraw 5 business days prior to the first day of class

50% Refund - Withdraw 3-4 business days prior to the first day of class

0% Refund - Withdraw less than 3 business days prior to the first day of class

Application procedure:

Students who are interested should complete an application which is provided by the Clinical Education Coordinator in the last semester of study.

Selective internship:

Due to the limited number of clinical openings, selection is determined based upon the following criteria which were demonstrated throughout the duration of the Radiography Program:

- Eligibility for May graduation.
- Minimum program GPA of 3.0
- Excellent clinical performance as determined by the selection committee
- Attitude
- Professional behavior
- Dependability/reliability
- Initiative
- Communication skills
- Attendance

Internship sites:

Each year, clinical sites are polled in order to compile the list of offerings. The availability of internships varies from year to year due to normal staffing fluctuations, the availability of mentors and changes in physical resources at the clinical facilities. The intern is usually placed with a clinical education site (network) where they trained. This avoids the processing delays and additional intern expenses involved

in going to a new site/network. Timeliness in completion of entrance requirements and submitting application paperwork is a very important factor in the placement process.

Length of the program:

The internship runs for six (6)-weeks starting the day after Memorial Day.

Assessment:

Assessment will be done through satisfactory completion of the following:

- Competency evaluations
- One (1) image critique session
- Minimum of three (3) "Technologist Evaluation of Student Performance and Professionalism"
- Clinical Preceptor's (C.I.) Evaluation of Student Performance and Professionalism"
- "Summary Sheet--Professional Evaluation of Student Performance" completed by the mentor

Grading:

Grading is on a Pass/Fail basis. The grade from the internship is not considered in determining any Radiography Program grade. The ASI is not considered part of the requirements to take the ARRT Registry examination. Taking the Registry exam is not contingent upon completion of the ASI.

A pattern (2 to 3) of unsatisfactory assessments will result in the withdrawal of the intern from the experience.

Call:

Since call is often an integral component in some of the specialty areas, the student may anticipate call rotations depending on the modality and the facility. If applicable, the mentor and the student will work out the call schedule.

Note: The student cannot do clinical practice for more than 40 hours in any one week.

Personal day:

One (1) personal day is available and requires makeup if no advance notification was communicated to the mentor at least 1 hour in advance. If two (2) absences occur during the internship, the program reserves the option to withdraw the student from the internship. If not withdrawn, make up time is required. When there are three (3) absences during the internship, the student will be withdrawn from the internship.

Note: A personal day cannot be used for call time.

Involuntary withdrawal from the internship:

If a conferencing/disciplinary session occurs during the internship, the student will be withdrawn from the internship.

Mentor:

The mentor is your immediate supervisor/preceptor in the specialty area. There may be more than one mentor depending on the circumstances.

Policies/procedures:

Unless specifically stated, the student will follow the policies and procedures of the "Radiography Program Student Handbook."

Certificate of completion:

A certificate will be received by the student upon completion of the requirements for the ASI.

Advisors (Academic)

Your academic advisor will help you coordinate your learning experiences and assist you in your progress toward your educational goals. As a Radiography Program major, your advisor will be either the Program Director or the Clinical Education Coordinator

Radiography Program Advisory Committee

The Radiography Program Advisory Committee reviews and evaluates the program's assessment plan and outcomes. In addition to academic matters, the committee advises the director on matters of interest regarding the program e.g. student and staffing issues, clinical site technology changes etc.

The committee is composed of the Program Director, Program Faculty, the Program's Medical Advisor, Radiologists, Radiology Administrators, Clinical Preceptors, the current CHARTS President (or a representative CHARTS' officer) and an Alumnus of the program.

One meetings is held each Fall semester and a program update is sent electronically in the Spring semester.

Student input to the Advisory Committee is welcomed and is directed through the student's CHARTS organization via the current CHARTS President of each class (or a representative CHARTS' officer). As stated in the CHARTS' by-laws, student issues should be submitted in writing to the Program Director two weeks prior to the meeting in order to place the item(s) on the agenda for distribution to the members.

Alcohol and Drug/Substance Abuse

A drug screen for each student is required by the Radiography Program and the clinical affiliates prior to clinical rotations in both the first and second year's Fall semesters.

The Program's clinical sites, and as a partner, NCC, is entrusted with the responsibility of providing high quality patient care and a safe educational and work environment. The unauthorized use or trafficking in alcohol or drugs is a significant hazard to patients, visitors and employees. Students who are found to have drugs or alcohol on their person or in their system are subject to serious discipline, up to and including termination of their experience.

In accordance with Northampton Community College's (NCC) policy governing the use of alcohol and other drugs, the Allied Health and Science Division has adopted procedural steps pertaining to the suspicion of student substance abuse or impairment at the clinical site. The clinical settings are an educational extension of the College and as such, the policies of the College, as stated in the *NCC Student Handbook*, apply to students when participating in clinical education.

In accordance with clinical site practice, students may be subjected to random drug screens.

If a student, while at clinical, is suspected of substance abuse or being under the influence, the student will be:

- Immediately removed from all patient/work areas by the Clinical Preceptor or immediate supervisor.
- Immediately referred to a drug screening facility or the clinical site's testing area and will need to follow up with drug and alcohol counseling in the event of a positive result.
- Arrangements for safe transportation of the student will be secured by the preceptor/supervisor after coordinating with the Clinical Education Coordinator.
- Refusing to submit to drug/alcohol testing is grounds for banning the student from any further activities and withdrawing them from the program.
- The student is responsible for paying the drug screen fee.

Be advised that as a matter of protocol, many clinical sites require drug and alcohol screening in the event of any accidental incident involving a patient, employee or student. If substance abuse is confirmed, and the clinical site agrees, the student will be permitted to return to the clinical education setting if they complies with the prescribed plan of action. Failure to comply with the individualized plan of action, or repeat incidents will result in withdrawal from the program.

Medical Marijuana Policy

In order to be transparent regarding the entire drug screening process and the use of Medical Marijuana, Northampton Community College recognizes our responsibility to fully inform students of NCC's policy at the time of acceptance. This policy is included with the acceptance documents and must be read carefully. The signed acknowledgement form is uploaded to MyRecordTracker as part of onboarding process.

The Pennsylvania Department of Health is currently implementing the Pennsylvania Medical Marijuana Program, a component of the Medical Marijuana Act (MMA) that was signed as law on April 17, 2016. This program provides access to medical marijuana for patients with serious medical conditions as defined by the Pennsylvania Department of Health.

At this time, the Federal government regulates drugs through the Controlled Substances Act, which does not recognize the difference between medical and recreational use of marijuana. Under Federal law, marijuana is a Schedule 1 controlled substance, meaning that it is considered to have no medical value. Medical practitioners may not prescribe marijuana for medical use under Federal law.

Students entering any Health Science Careers Program are required to have urine drug screenings upon admission to the clinical phase of the program and on a yearly basis while participating in clinical experiences. As per current policy, if the results are positive, the student will be dismissed from the program immediately and referred for appropriate counseling.

Students using medical marijuana will not be eligible for clinical, internship, or externship placement in any NCC health science career program, due to the current discrepancy between State and Federal law regarding Drug Free Work Place Act and the MMA. Businesses who are not in compliance with Federal law are at risk for criminal or civil charges; and additionally, may find issue with eligibility for Federal contracts and grants. Additionally, Pennsylvania's Medical Marijuana statute specifically provides that an employer does not have to accommodate an individual in a safety sensitive position if that person is under the

influence of medical marijuana. Most positions involving direct patient care are considered safety sensitive positions.

Students should also understand that under current Pennsylvania State Board law, many health career licensing boards require drug screening at the time of application for licensure. Similarly, most health care employers will perform routine drug screening as a condition for employment, as these positions involve direct patient care, and are considered safety sensitive positions.

Despite having a medical marijuana card, a positive drug screen for marijuana, THC, cannabinoids etc. will result in revocation of program acceptance or other actions including withdrawal from the program.

Appeals (Academic)

See the current *College Catalog* or *NCC Student Handbook*.

Appeals (Grades)

See the current *College Catalog* or *NCC Student Handbook*.

Appeals / Due Process Procedure

If the student wishes to appeal the decision, they will need to follow the appeals procedure as stated in the *College Catalog* or *NCC Student Handbook*.

Appeals Not Covered Under Other Policies

Note: The following is a generic policy for appeals not stipulated in the *College Catalog* or *NCC Student Handbook*.

Students may appeal a decision made by the Program Director to the Dean, School of Health Sciences & Education. Students who do not agree with the recommendation of the Dean, School of Health Sciences & Education may appeal in writing within three working days either to the Vice President for Academic Affairs or Vice President, Enrollment & Student Affairs (appeal route determined by the Dean, School of Health Sciences & Education). The Vice President's decision will be final unless stated otherwise in a specific College policy.

Note: Working day is defined as any day when a full schedule of classes are in session (this excludes Saturdays and Sundays).

Assignment of Students to Clinical Practice Settings

Clinical education setting assignments are made by the Program Director in consultation with the Clinical Preceptors, and the Clinical Education Coordinator. Clinical education setting assignments are based on:

- student preference, stated during interview session or the 2nd clinical site selection survey. Let the Program Director know if you plan on using public transportation.
- distance the student lives from the clinical education settings.
- equivalence of commuting distance and time for all students is an important goal in the assignment process.

- clinical education setting student capacity, as determined by the policies of the Joint Review Committee on Education in Radiologic Technology (JRCERT).

Note: If there are too many applicants for one clinical setting, the student with the highest application score or program GPA will be considered first.

Attendance

Philosophy:

Clinical attendance is critically important. Students are expected to attend all assigned clinical rotations with no absences. Students are expected to be on-time to the clinical site and to remain in the clinical facility for the entire clinical experience. A good "rule-of-thumb" is to arrive at your assigned rotational area ten (10) minutes before your shift begins, so that you are prepared and ready to begin on time.

Prompt daily attendance is an important aspect of PROFESSIONALISM. Quality patient care requires that radiographers be present as scheduled to perform examinations. As future employees, students must develop appropriate work habits to not only obtain but maintain employment.

To meet the educational outcomes for the Radiography Program, students are required to complete their clinical rotations at their designated clinical sites as scheduled by the Clinical Education Coordinator and the Clinical Preceptor.

Attendance at all clinical education assignments is the RESPONSIBILITY OF EACH STUDENT.

Students must assure that all clinical hours are completed as assigned. Daily arrival and departure times are recorded in an online clinical management system (Trajecsys). Each student is responsible for clocking in **using the assigned computers at their clinical site. There will be point deductions in the clinical course grade for repeatedly not clocking in or out at the clinical site.** Students may not clock-in other students. Every day of attendance must be documented with arrival and departure entries. If there is a late arrival/departure during assigned clinical education, or any other deviation from routine hours, a **time exception** must be filed through Trajecsys and validated by the Clinical Preceptor. Failure to comply with any attendance policy may result in repeating clinical day(s). Falsifying attendance records is cause for dismissal from the program.

Didactic attendance is equally important and an enforced withdrawal policy is in place for cases of non-attendance in classes. The attendance policy is described in the College Catalog and is detailed in the specific course syllabus.

Staying late for a case:

If a rare or interesting case presents when you are scheduled to leave clinical and you would like to take advantage of the educational opportunity it provides. Please ask the Clinical Preceptor or the supervising technologist if you can stay. When you clock out, file a **time exception** with a comment. There is no comp time adjustment and the time cannot be used for make-up time.

Personal Days

Definition:

A personal day is a day off from clinical education.

Recording of Personal Days:

If personal time is being used, the Clinical Preceptor, or designee, must be notified at least ten (10) minutes prior to the scheduled start time AND the Clinical Education Coordinator must be notified via email. The student must file a time exception and include comments.

Partial Use of Personal Days:

Personal days must be used in either full or ½ day (4 hour) increments.

Making Up Personal Days:

General Rules:

Time exceptions **with a comment** must be filed with Trajecsys for days off **and** for make-up days.

Make-up time is required in the same rotation that was missed.

The Clinical Preceptor must be given 24 hours' notice for requested make-up time. No last minute scheduling. All make-up time must be coordinated and agreed upon with the Clinical Preceptor and followed through by the student. Failure to follow through with scheduled make-up time will result in having to make-up a 2nd day (the original day + the missed make-up day).

Make-up time needs to be scheduled in 4 hour blocks. Time cannot be made-up in shorter time periods in order to optimize educational efficiency.

Scheduled make-up time will follow the same policies as regularly scheduled clinical days. **Students may not be scheduled for more than 10 hours of clinical in any one day or more than 40 hours of clinical plus didactic instruction in a week.**

All make-up time should be completed prior to the start of the next semester. In the event that is not possible the Clinical Preceptor and Clinical Education Coordinator will coordinate the make-up time. Any outstanding make-up time at the end of Clinical Practice V will result in utilizing the 6 week extension.

The Program Director and Clinical Education Coordinator will review all made-up times at the end of the semester.

Scheduling Make-Up Days:

Within 3 clinical days of returning to clinical rotations, a schedule of your make-up time must be given to your Clinical Preceptor. **Failure to provide a schedule** will result in the addition of another make-up day. The Clinical Preceptor(s) will determine when make-up time may be scheduled. This determination is based on various factors e.g. staff availability to adequately supervise students. In general, students may request to schedule themselves during NCC breaks (Fall, Spring and between semesters) or afternoons when classes are finished (half days). Since some Clinical Preceptors rotate to cover weekends, some sites may allow students to make-up time on weekends coordinated with the Clinical Preceptor's schedule. The make-up day scheduling form (on Trajecsys) is to be used to document scheduled make-up time. A copy will be retained by the Clinical Preceptor for reference.

Students may not schedule their make-up time when the College is closed for a holiday.

Banking of Make-Up Days:

The banking of up to 24 hours, to be used for future sick/personal day make-up, is permitted. When these banked days are used they **may not be replenished**. Subsequent personal days must be made-up after they occur. The scheduling of banked days must be coordinated with the Clinical Preceptor in the same manner (including rotation assignment) as make-up days. The make-up day scheduling form (on Trajecs) is to be used to document banked time. A copy will be retained by the Clinical Preceptor for reference.

Bereavement Leave

Bereavement applies to both didactic (classroom) and clinical education as follows:

- Up to a maximum of 3 days
- For a death in the student's immediate family (i.e., parent, spouse, brothers, sisters, children, grandparents, mother or father-in-law, or additional persons as stated in the most current College Catalog).
- These days are **not to be counted as personal days** for clinical education.
- A copy of the obituary may be requested.

Lateness

Professional behavior dictates punctuality, particularly in a clinical setting where shift relief is required. If you expect to be hired by any of the facilities in which you are training, you need to show them that you are dependable and can be on time.

You are allowed a maximum of two (2) late incidents per semester/summer clinical course. If you exceed two lateness's, the following deductions apply:

- 1st time – oral warning issued and three (3) points deducted from the overall clinical practice course grade.
- 2nd time – written warning given and an additional three (3) points deducted from the overall clinical practice course grade.
- 3rd time – corrective action will be taken, total points deducted will be determined by the Clinical Preceptor, Clinical Education Coordinator, and the Program Director with possible withdrawal from the program.

Make-up Time when Late:

Make-up time is required when you are over 15 minutes late to clinical. The time required is rounded up to the next whole hour e.g. if someone is 1:20 minutes late they need to make-up 2 hours.

Procedure to Follow when Absent or Late:

If a student is absent or late on an assigned clinical practice day, they must notify the Clinical Preceptor, or designee, at least ten (10) minutes before the assigned starting time AND the Clinical Education Coordinator must be notified via email. The student must file a **time exception** and include comments.

Failure to Notify the Clinical Preceptor or Designee When Late or Absent:

The following will apply if a student does not notify their Clinical Preceptor or designee when late or absent:

- 1st occurrence – an oral warning will be given and two (2) points deducted from the overall course grade.

- 2nd occurrence – a written warning will be issued and two (2) points deducted from the course grade.

Note:

Corrective action, such as withdrawal from the Radiography Program, may occur if the pattern continues.

Absent from Didactic and/or Clinical Practice for More than 2 Consecutive Days

For each absence from didactic and/or clinical education due to illness for more than 2 consecutive days, the student needs to present a physician's note to the Clinical Coordinator or the Program Director stating the following:

1. Diagnosis
2. Dates of treatment
3. Release date to return to clinical education either with or without restrictions.
4. Statement to the effect that you are **Permitted to Return to Patient Care Activities**.

Rationale: To protect the welfare of the patient, hospital personnel, and your classmates.

Notes:

- If the student is unable to see a physician, he/she can make an appointment to be evaluated by the college nurse—call 610-861-5365.
The hours of the Health Center (located in College Center 120) are as follows:
Normal operations: 8:30 a.m. to 4:30 p.m.
Summer only: 9:00 a.m. to 1:00 p.m. Mon-Thurs (or as designated by the Health Center)
- If your class and/or clinical education begins before the Clinical Coordinator or Program Director is in their office, you may enclose your physician's release documentation in a sealed envelope and slide the envelope under the office door.
- **Keep a copy for your personal files!**

Medical and /or Pregnancy Leave of Absence

If a student needs to take a medical and /or leave for pregnancy (voluntary disclosure and in writing), the following guidelines will be followed:

- Rotations missed must be made-up.
- The remainder of the program would need to be completed.
- If necessary, the student will be placed in the six (6)-week extension at the end of Clinical Practice V. Depending on the circumstance(s), the student may be required to do the entire six (6)-week extension.
- The Clinical Preceptor and Clinical Education Coordinator will work out a rotation schedule for the rotation(s) missed.
- No more than forty (40) hours of clinical and didactic classes can be scheduled in any one week.

Missing in Action — Student Cannot be Located during Clinical Practice

The following are consequences:

- Four (4) hours of make-up time necessary
- Continued abuse would mean suspension or withdrawal from the program

Leaving Clinical Practice without Permission

Either ½ or a full make-up day will be required depending on the time leaving the clinical site. A two (2) point grade deduction will be assessed for failure to notify the Clinical Preceptor, or designated staff, of the absence. Continued abuse would mean suspension or withdrawal from the program.

Big Brother/Sister

The first-year radiography students are assigned to a second-year radiography student in their respective clinical education setting. The assignment of the big brother/sister is emailed during the summer. It is expected that the big brother/sister will call their little brother/sister during the summer at least one time. The big brother/sister should act as a peer mentor to help answer your initial questions, and to make the transition into the clinical practice setting a more comfortable and enjoyable one.

Cancellation of Classes and/or Clinical Practice due to Inclement Weather

Decision for day classes:

By 6:00 a.m.

Decision for evening classes:

By 3:00 p.m.

Method of Communication:

- NCC Alert system
 - Select notification preferences when signing up (text, phone etc.)
 - Select all College campuses
- Radio
- Television
- Web site (www.northampton.edu)
- Weather closing information line (24 hours a day) as follows:
 - Lehigh Valley and surrounding areas 610-861-4595 (Main Campus)
 - Monroe County residents 570-620-2149 (Monroe Campus)

Note: Cancellation of day classes does not imply cancellation of evening classes.

Cancellation of classes (Monroe and Bethlehem):

If either the Monroe or Bethlehem College campus is closed, ***all*** students are excused from clinical education. This policy does not apply to closures due to localized site/campus events such as a closure due to a water main break. **Make-up time is required after 3 days (24 hours) of the Clinical Practice course has been missed in the semester.** Weather related make-up for the second year students may be assigned on Tuesdays in the final semester of the program if there are no clinical capacity issues at their site. Please refer to the personal day make-up policy for scheduling information.

Delayed start of classes (Monroe and Bethlehem):

If the College delays the start of classes, at either campus, all students are to start at that designated time. Make-up time is only required for full day closures.

Example: Delayed start at 10:00 a.m. – normal schedule will be maintained after that starting time for both didactic and clinical education – in other words no 8:00 or

9:00 a.m. classes that day. Clinical rotations would start at 10:00. This is effectively a two (2) hour delay.

Early closing (Monroe and Bethlehem):

If the College releases students early at either campus, all students are to go home at that designated time. Make-up time is only required for full day closures.

Exception: It is permissible to stay at the clinical site if it is safer to wait for conditions to improve before traveling. Example: if a student left for, or arrived at, their clinical site before a closure was announced it is up to the student's best judgement to remain or go home. Time spent at clinical during a delay/closure counts as clinical time and is credited toward their total clinical time requirements. It cannot be used as banked time if weather related makeup is not needed.

Localized Inclement Weather Situations:

If the student experiences dangerous local weather conditions that prevents them from safely getting to their clinical site (and the College has not suspended classes):

- Notify the Clinical Preceptor, or designee, per clinical site protocol.
- Make-up time is required.

Cardiopulmonary Resuscitation (CPR) (Mandatory General Patient Care Simulation for ARRT)

The Radiography Program, American Registry of Radiologic Technologists (ARRT), and the affiliation agreement with the clinical education sites require that each student maintains CPR certification during their training. A copy of the student's certification (AHA: BLS Provider, ARC: BLS Healthcare Provider) will be placed in their respective program file.

The student should obtain the **two-year certification**. If the certification expires while enrolled in the program, renewal is required on, or before, the expiration date. CPR certification is verified prior to the start of clinical rotations and expiration dates are monitored. Failure to provide documentation will result in suspension from the clinical education setting until the certification is received. Make-up time will be required.

Notes: It is the student's responsibility to know, and renew prior to, the expiration date deadline.

Career (Placement) Services

The Career Services Office, located in College Center, is an employment resource for Radiography Program graduates and is provided at no charge to the student. The Career Services Office is contacted by employers concerning job postings. Call 610-861-5346 for details. Although the Career Services Office cannot guarantee placement, it will inform you of employment possibilities and will assist you in resume writing and perfecting your interviewing skills.

The Radiography Program Staff are often notified directly about job openings. Please report any change of address (or phone) to the Program Director and the Records Office so you can be informed promptly about these opportunities.

Cell Phones

Turned off during sessions:

Cell phones are to be turned off in the classroom, lab, and clinical education setting.

Evaluations:

Cell phones are prohibited as aids during graded evaluations. Usage during an evaluation will be perceived as academic dishonesty and will be dealt with as an academic dishonesty issue.

Note: Academic dishonesty issues need to be reviewed by the ARRT prior to taking the registry exam.

Consequence for use during class, lab, or clinical education:

The student will be asked to leave, and will be counted as absent for that day. Repeated infractions will be addressed via the Corrective Action Plan.

Certified and Registered Radiographer

The use of the term "Certified" in this handbook denotes that the individual has satisfied The American Registry of Radiologic Technologists (ARRT) standards for initial certification (met the education, ethics, and exam standards) as well as the standards for continued registration.

College and Hospital Association of Radiologic Technology Students (CHARTS)

Each Radiography Program student is automatically a member of CHARTS (College and Hospital Association of Radiologic Technology Students).

The objectives and purposes of this club are to:

- improve and enhance the radiography student's college and clinical education
- develop a cooperative relationship between CHARTS, NCC, and the affiliate hospitals
- advance the Allied Health profession of radiography.

CHARTS can be used by the student as a vehicle to affect change in both the didactic and clinical components of the Radiography Program.

CHARTS performs both campus and community service activities through either fundraisers or volunteer service.

CHARTS' sponsors a trip to a student/educator seminar each academic year.

We have been named and nominated more than once for club of the year.

We look forward to your involvement.

COLLEGE AND HOSPITAL ASSOCIATION OF RADIOLOGIC TECHNOLOGY STUDENTS (CHARTS) CONSTITUTION AND BY-LAWS

ARTICLE I

Name

The name of this organization shall be the "College and Hospital Association of Radiologic Technology Students," also referred to as "CHARTS."

ARTICLE II

Objectives and Purposes of Organization

1. To improve and enhance Radiography Students' College, and Clinical Education;
2. To develop a cooperative relationship between CHARTS, NCC, and Affiliate Hospitals;
3. To advance the Allied Health Profession of Radiologic Technology; and,
4. To provide philanthropic assistance and community services.

ARTICLE III

Requirements for Membership

- CHARTS membership is open to all students currently enrolled in the Radiography Program.
- Each active member shall be entitled to voting privileges.
- Radiography Program graduates shall be associate members and shall not be entitled to voting privileges.
- Both active and associate members shall be encouraged to attend all meetings and organizational functions.

ARTICLE IV

Officers

Section 1 – List of Officers First and Second Year Students

- a. President
- b. Vice President
- c. Secretary
- d. Treasurer

Section 2 – Requirements of Officers

Only active members in good academic standing are eligible to hold office. A cumulative GPA of 3.0 or better is considered good academic standing for the purpose of holding office.

Section 3 – Time and Procedure of Election Officers

First year officers shall be elected in November of each Fall Semester. The Second Year President shall open the floor for nominations, which shall be limited to three per office. Prior to placing the nominee's name on the ballot, the nomination must be accepted, either written or verbally. Voting by only active members to be affected by the elections, not outgoing members, shall be on

paper ballots, and tabulated immediately by the current officers. Additional ballots shall be used to determine the outcome of ties.

Section 4 – Tenure of Officers

Officer's, shall serve for the duration of their academic standing or upon completion of the Radiography Program.

Section 5 – Removal of Officers

Officers may be removed from office by a two-thirds (2/3) majority vote of the members present during a regular or emergency meeting. The officer and all the membership shall be notified of such an intended action three (3) days prior to the meeting. Reasons for removal include, but not limited to: 1) mishandling of organizational funds, 2) misrepresentation of the organization, and 3) dissatisfaction with any officer's action by the membership.

Section 6 – Filling of Vacancies

Officer vacancies shall be filled during a regularly scheduled or emergency meeting. The highest remaining officer shall conduct the procedure as outlined in Article IV, Section 3.

Section 7 – Commitment of Officers:

Officers shall not hold official titles and not be required to perform duties in any other organizations or committees within the Radiography Program while holding the title of Officer. Officers can elect to vacate their position in C.H.A.R.T.S. and run for office in another organization if they so desire.

ARTICLE V Faculty Advisor

The Radiography Program Director/Faculty shall serve as CHARTS Advisor.

ARTICLE VI Duties and Election of Officers

1. The President shall:
 - a. compose an agenda and preside at all meetings.
 - b. establish committees subject to approval of the membership.
 - c. call additional meetings as prescribed.
 - d. be responsible for presenting complete and balanced information concerning any business to the membership.
 - e. delegate according to the needs of the organization.
 - f. deliver a short speech during their class's pinning ceremony.

2. The Vice-President shall:
 - a. preside over meetings in the absence of the President and assume all appropriate responsibilities.
 - b. secure information concerning committee actions for presentation

- to the membership.
 - c. aid in meeting preparation and business.
 - d. assume all other duties as delegated by the President or a vote of the membership.
 - e. have the responsibility of social activities (i.e., class, picnic, pinning ceremony, etc.) but has the option of delegating responsibility to another student when necessary.
3. The Secretary shall:
- a. take minutes of all official meetings.
 - b. be responsible for the reproduction and distribution of all pertinent information.
 - c. preserve and maintain all current and past CHARTS records.
 - d. be responsible for appropriate correspondence.
4. The Treasurer shall:
- a. keep a record of all expenditures.
 - b. aid in the development of a yearly budget, in conjunction with other officers and membership.
 - c. present a detailed income and expenditure report at each meeting.
5. Elections:
The officers shall be elected in November of their first Fall Semester. This will enable the 1st year officers to work closely with the 2nd year officers in order to learn the details of their respective offices.

The CHARTS Advisor and Treasurer shall have joint responsibility for all organization funds. Signatures of both shall be required for any transaction involving the expenditures of organizational funds.

ARTICLE VII Committees

Committees shall be instituted as the need arises and are open to active or associate members of the organization. The President, Vice-President, Secretary, and Treasurer shall work together in the appointment of committees. The committee may be dissolved if its purpose has been fulfilled. A chairperson shall be appointed by mutual agreement of the members of a particular committee and is responsible for reporting relevant information to the general membership at regularly scheduled meetings.

ARTICLE VIII

Membership attendance at CHARTS' funded, or partially funded educational activities, will be based upon:

- 1. Academic standing,
- 2. CHARTS participation, and
- 3. Participation in student competition.

ARTICLE IX Amendments to the Constitution

Amendments may be initiated by a two-thirds (2/3) vote of the membership present at that scheduled meeting.

Any amendments to the constitution, passed by the organization, are subject to approval of the Office of Student Activities, and must be presented immediately after acceptance by the membership.

ARTICLE X
Ratification

This constitution shall go into effect after ratification by a two-thirds (2/3) majority vote of the quorum of eighty (80) percent of the students currently enrolled in the Northampton Community College Radiography Program and after approval of the Office of Student Activities and Student Senate.

ARTICLE XI
INDIVIDUAL MEMBERSHIP ACCOUNTS

Monies accrued in individual accounts from fundraising activities can only be redeemed for CHARTS activities, Pinning Ceremony and Lambda Nu regalia. No monies can be used to fund outside needs. Any money left in the individual accounts upon graduation from their program shall be forfeited and returned to the general account.

Clep and Challenge Exams

See the *NCC Student Handbook* for details.

Clinical Education Coordinator's Job Description

The Clinical Education Coordinator will:

- correlate clinical education with didactic education.
- coordinate clinical education and evaluate its effectiveness.
- evaluate, supervise, and assure clinical education effectiveness through regularly scheduled visits to the clinical education settings.
- instruct and evaluate students.
- develop and revise the curriculum as needed.
- advise students.
- give in-services.
- support the Program Director to help assure effective program operation.
- participate in the assessment process.
- cooperate with the Program Director in periodic review and revision of clinical course materials.
- maintain current knowledge of the discipline through continuing professional development and the pursuit of scholarly activities.
- maintain current knowledge of program policies, procedures, and student progress.

Clinical Preceptor's Job Description

The Clinical Preceptor will:

- be knowledgeable of program goals.
- understand the clinical objectives and clinical evaluation system.
- understand the sequencing of didactic instruction and clinical education.
- provide the student with clinical instruction and supervision.
- evaluate students' clinical competence.
- serve as a student advocate to the clinical staff.
- maintain competency in the professional discipline, instructional, and evaluative techniques through continuing professional development.
- maintain current knowledge of program policies, procedures, and student progress.
- directly inform students when they may accept, or delete, patient images for which the Clinical Preceptor is responsible.

Clinical Staffs' Job Description

The clinical staff will:

- understand the clinical competency system.
- understand requirements for student supervision.
- support the educational process.
- maintain current knowledge of the program policies/procedures and student progress.
- directly inform students when they may accept, or delete, patient images for which the Technologist is responsible.

Sequencing of Clinical Education Courses

First-year, Fall Semester:

Clinical Practice I:

Two (2) days per week (Tuesday and Thursday) of clinical education

First, three weeks of clinical education:

During the first, three-weeks of the first-fall semester, the first-year students remain on the NCC (Bethlehem) campus to do a pre-clinical orientation program in:

- Radiation protection
- Emergency situations and responses
- Ethical behavior
- Interacting with patients
- Isolation procedures
- Use of universal precautions
- Lifting and moving techniques.

The assessment tools (practical examination) for the first, three-weeks are:

- Lifting and moving procedures
- Equipment operation
- Patient handling
- Radiation protection

Pre-clinical orientation labs are a critical component of Clinical Practice I. Successful completion of the practical examinations associated with the pre-clinical labs is required before progressing to the hospital assignments. Failure of the pre-clinical portion of Clinical Practice I will result in failure of the course and requires restarting the program from the beginning. Because the end of the pre-clinical component of the course corresponds with the end of the Add/Drop period, the student will need to drop all radiography courses immediately in order to avoid "W" grades. Reapplication to the program is required and is made through the Admissions office.

Orientation topics on the first day of clinical education:

- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions

During the remainder of the semester, six (6) competency evaluations on the following:

- Equipment operation
- Patient handling
- Radiation protection
- Routine Chest
- 2 extremity—either upper or lower

Clinical Practice IB (First-year, Winter Session): Effective in Fall 2022

When the session begins, around December 13th, the students continue clinical rotations for a total of 14 days (112 hours) before the session ends around January 8th. Rotations are limited to a maximum of forty (40) hours in any one week and 10 hours per day. There are no clinical competencies required in this session and it allows the students the opportunity to gain experience and perform the range of exams they have learned to date.

First-year, Spring Semester:

Clinical Practice II:

Two (2) days (Tuesday and Thursday) of clinical education.

Competency evaluations:

KUB plus 4 competency evaluations (either mandatory or elective) are required.

First-Year, Summer Sessions:

Clinical Practice III:

The course begins with the opening of Summer Session I and ends with the conclusion of Summer Session II. There is a one-week intensive seminar during the first-week of the summer sessions concluding with online testing the same week. The student returns to clinical education during the second-week of the (first) summer session where they participate in the clinical setting Monday-Thursday for 10 hours per day for a maximum of forty (40) hours in any one week. Each day consists of not more than 9.5 hours of clinical with a 30 minute lunch break. If the normal break time at a site is longer, the clinical practice time must be reduced in order to maintain the 10 hour per day limit. When the student has reached 360 hours (336 after Fall 2023) of clinical time (38 days at 9.5 hrs, 39 days at 9.25 hrs etc.), which should occur after

approximately the first week in August, they may utilize the time remaining until the official end of the Summer II Session for any needed make-up time. Clinical sites may require Monday-Friday rotations of 8 hours (plus lunch) due to supervisory staffing requirements. There is one (1) week of middle shift (approx. 2:00 p.m. – 12:00 a.m.) rotation. There is no clinical practice on Memorial Day or the July 4th holidays. Vacation time must be scheduled with the Clinical Preceptor so that rotations can be scheduled appropriately.

20 competency (either mandatory or elective) evaluations are required.

CT rotations:

There is a two (2) day rotation through CT.

Note: Both didactic and clinical education will not exceed forty hours in any one week.

Second-year, Fall Semester:***Clinical Practice IV:***

The students are assigned to another clinical site for this semester. Assignments are made as described in "Assignment of Students to Clinical Practice Settings" with the focus on switching students between sites with larger patient volumes and those assigned to smaller facilities. This will provide students a more comprehensive insight into different clinical environments and cultures. It will also give the student more networking opportunities and increase their visibility to potential hiring managers and staff.

The student is in the clinical education setting on Monday, Wednesday, and Friday. When the first year students have begun reporting to their clinical site, second year students will, on a rotational basis, exchange their assigned Friday for half day Tuesday & Thursday afternoon. This allows the second year student easier access to exams needed for competencies as well as providing mentoring access to the first year students. This is only put into practice at clinical sites with adequate staff to student ratios and clinical capacity. This mentoring scheduling is only in effect for this clinical course which corresponds to the first year's initial clinical assignment.

Ten (10) competency (either mandatory or elective) and three (3) proficiency evaluations are required.

Second-year, Spring Semester:***Clinical Practice V:***

Students continue rotations at their second clinical site for three (3) days per week (Monday, Wednesday, and Friday) of clinical education.

Three (3) proficiency exams and fourteen (14) competency (either mandatory or elective) evaluations are required (or simply any remaining competency evaluations needed to complete the program).

Student choice:

There are three (3) days of **student choice** which allows the students to go into any specialty area of interest. The intent is to see if the student has an interest in pursuing further education in any one of these specialty areas. Male students may not be able to rotate through mammography based on the policy at their clinical site. The student can also select a diagnostic rotation where they feel they need more time to reinforce skills.

The students can select from:

- Interventional Radiology
- Mammography
- MRI
- Nuclear Medicine
- Radiation Therapy
- Sonography

These rotations should be scheduled early in the semester so that students can make an informed decision regarding their participation in the advanced skills internship.

Note: For all semesters, both didactic and clinical education may not total more than forty (40) hours in any one week.

At the conclusion of Clinical Practice V, if all program requirements have been met, the student is eligible for May graduation.

Six-week extension:

The six week extension for Clinical Practice V is used in one of the following ways:

- For those students who could not complete all the program requirements, the time can be used to complete competencies, proficiencies, or rotations in order to meet all program requirements.
- For students who need to make-up missed days/rotations from any clinical education course.

Code of Conduct

See the *NCC Student Handbook* and the sections titled "Professional Conduct Policy" and "Withdrawal of Students from the Clinical Education Setting" in this handbook.

Number of Competency and Proficiency Evaluations Required for Graduation

Overall number of competency and proficiency evaluations required for program completion:

- Prerequisite knowledge competency evaluations – 3 (first semester)
- Room competency evaluation at 2nd clinical site
- General patient care activities – 10 mandatory
- Mandatory competency evaluations – 37
No more than **eight (8)** of these mandatory competency evaluations may be simulated.
- Elective competency evaluations – 15
Stipulations for elective competency evaluations:
 - ✓ 1 elective must be from the head section
 - ✓ 2 electives must be from the fluoro section, 1 of which must be either an UGI or BE
- Mandatory proficiency evaluations – 6 in the second-year (3 in the fall and 3 in the spring semesters)

Number of Competency Evaluations Required per Clinical Practice Course

Clinical Practice I (fall semester first year):

3 mandatory prerequisite knowledge evaluations:

- Equipment Operation

- Patient Care and Handling
- Radiation Protection

3 competency evaluations:

- Routine chest
- 2 Extremity (either upper or lower)

Clinical Practice II (spring semester first year):

- Abdomen
- 4 competency evaluations on anything

Clinical Practice III (summer sessions first year):

- 20 competency evaluations

Clinical Practice IV (fall semester second year):

- 10 competency evaluations
- 3 *mandatory* proficiency evaluations
- Room competency evaluation at 2nd clinical site

Clinical Practice V (spring semester second year):

- 14 competency evaluations – if the student banked competency evaluations ahead, then whatever number is remaining.
- 3 *mandatory* proficiency evaluations

The ten (10) General Patient Care Procedures are not assigned to a specific clinical practice course.

Communicable Diseases

During the first, three-weeks on campus, the students are given instruction on communicable diseases, how to protect both themselves and immunocompromised patients.

Competency Evaluations

Eligibility to do a competency evaluation:

You are eligible to do a competency evaluation after you have been taught the exam in Procedures and have **passed your lab practical**. In general, the studies are to have been observed, assisted, and performed. **Competency exams may only be performed during student clinical rotations, not while working as an employee.**

Evaluators for competency evaluations:

Any of the following certified radiographers may do the competency evaluations:

- Radiographer designated by the Clinical Preceptor
- Clinical Preceptor
- Clinical Education Coordinator
- Program Director

Number of competency exams permitted on a single patient:

One competency exam per patient. Every patient presents differently and affords a distinct learning experience. Multiple competencies on a single patient would duplicate graded evaluation items such as history taking, room readiness, etcetera.

Single view competency exams listed as one view on the ARRT competency requirements sheet:

Students need to be able to perform the entire exam's protocol that may include additional views. The additional views will be included/graded on the comp sheet and the single view being comped must be done correctly. In the situation where one of the additional views needs to be repeated, a zero is entered in the appropriate row but the comp will be marked as approved in Trajecsys since the required view was satisfactory. E.g., Chest AP (Wheelchair or Stretcher) perform entire study but it is not graded as a failure if the lateral needed to be repeated.

Volunteering to do a competency evaluation:

You may do a competency evaluation under the following conditions:

- You have stated **prior** to beginning the examination that you want the procedure to be graded and you have **given the evaluator a properly filled out comp form**. Failure to do so will mean that the examination will not count towards the completion of the program requirements. The Category and Procedure/Exam fields are particularly important for accurate record keeping.
- You may not, in any way, prescreen or evaluate the patient before declaring that you would like to be graded on the exam.

Random selection:

If you are ready to do a competency evaluation, but you do not volunteer to perform the exam, you may be selected to perform the competency evaluation.

The patient is in "poor condition" and the radiographer will not permit you to do the competency evaluation on that patient:

If the radiographer feels that the patient is in such poor condition that it would not be safe for a student to attempt a competency evaluation, they have the right to prohibit the attempt for both the patient's and student's welfare. The student should then team up with the radiographer to gain valuable experience and safely manage and image the patient.

Failure of a competency evaluation:

The Clinical Preceptor will ensure that the failed competency is entered into Trajecsys. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the comp "Not Approved" so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

Remediating a failed competency evaluation:

When a competency evaluation has been failed, the following is required:

- Remediation (do another competency evaluation on the procedure)
- The C.I. will record the remediated procedure in Trajecsys ("other evaluations" tab) as either a pass or fail.
- After the pass/fail has been entered by the C.I. and approved by the Clinical Education Coordinator, the student is eligible to do a repeat competency evaluation for a "letter" grade.

- All failed competencies need to be remediated successfully before the students transfer to their second rotational site to simplify record keeping. This way CIs know that incomplete comps can be performed without having to investigate that a remediation was completed. Simulation is allowed for this purpose.
- All failed competencies require remediation and subsequently need to be successfully performed before the end of the program.

4th repeat of the same competency (includes failed remediations) evaluation:

- Students are withdrawn from the program.

Repeating unsatisfactory images-Direct Supervision:

During **EVERY** repeat, it is mandated that a certified radiographer must:

- Be physically present during the conduct of the repeat image
- Approve the student's procedure prior to re-exposure.
- Directly inform students when they may accept, or delete, patient images for which the Technologist is responsible.
- Sign the Repeat Exposure Supervision Verification form

Consequences for doing a repeat exam without a radiographer present:

- Utilization of the Corrective Action Plan (CAP) Written Warning Step 2
- 5 points deducted from the overall grade for the clinical education course
- Suspension or withdrawal from the Radiography Program if a recurring issue.

Progress report time:

Approximately one third (1/3) of the required number of competency evaluations required for the semester are to be completed by the progress report time. Check the syllabus for due dates.

Refusing to do a competency evaluation when a student has indicated that they are ready to do that evaluation or has thoroughly logged/performed the study:

The C.I. is to record the following in Trajecsys:

- Grade of zero (0)
- Date & name of the study refused
- Write that the *student refused to do the examination*.
- The Corrective Action Plan will be utilized.
- If the procedure does not become available again on a "live" patient, you **will not be permitted to simulate** that examination. If a "live" patient does not come in before the end of Clinical Practice V, you will go into the six (6)-week extension.

Rationale: The competency evaluations are performed on a random basis. Just as a radiographer is not permitted to pick or choose an examination, the student is not allowed to pick or choose patients.

Refusal to do a "live" patient:

If a "live" patient comes in before the start of Clinical Practice V, you are expected to do the competency on that patient and not simulate the exam. If a "live" patient was available but the student chose not to do a competency on the patient, the student will not be permitted to simulate that same procedure. Instead, the student will have to wait for the next live patient even if it places them in the 6-week extension

Simulation Guidelines:

If needed, simulation may begin at the start of the last clinical practice course at the discretion of your Clinical Preceptor. See refusal to do a "live" patient above.

The following guidelines apply:

- Procedure must be rarely done as determined by the Clinical Preceptor.
- At the discretion of the Clinical Preceptor, beginning at the start of Clinical Practice V, you may simulate a procedure that is delaying your progression provided there was no avoidance/procrastination on your part.
- **No more than eight (8) mandatory** competency evaluations can be simulated.
- Simulations must be performed on a human being without making exposures.
- Obtain images of the procedure and utilize these images for the "*Image Analysis*" section of the Student Competency/Proficiency Evaluation Form.
- Use the competency or proficiency evaluation sheet in Trajecsys.

Simulated exams remain as a procedure that requires **Direct Supervision**. If a patient presents at a later date, the exam can be comped at that time so that images can be evaluated and Indirect Supervision verified.

"Already Did That"

If you say, something like "I already did that procedure" or "I already comped that".

That kind of statement displays an attitude that will initiate the Corrective Action Plan (CAP). Students, like Radiographer's, cannot refuse to do examinations. There is something to be learned from every patient interaction.

Proficiency Evaluations

Philosophy for proficiency evaluations:

The Radiography Program expects that its students and its graduates will not only be competent but proficient in performing procedures. In other words, you are expected to maintain your proficiency through constant repetition once a competency procedure has been passed.

Proficiency evaluation procedure:

The protocol:

- Only the Clinical Preceptor or Clinical Education Coordinator may do the proficiency evaluations.
- Procedures are picked on a random basis.
- The evaluator may tell the student that the next "study" that comes through the door is theirs to do as a proficiency.

Number of proficiency evaluations required:

During the second year, the student will have completed proficiency evaluations in each of the following areas:

- Category 1: Chest and Thorax
- Category 2: Upper Extremity
- Category 3: Lower Extremity

- Category 4: Head
- Category 5: Spine and Pelvis
- Category 6: Fluoroscopy Studies

Three (3) proficiency evaluations are to be completed in the second-fall semester and three (3) in the second-spring semester.

Grade earned for failure of a proficiency evaluation:

The Clinical Preceptor will ensure that the failed proficiency is entered into Trajecsys. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the proficiency "Not Approved" so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

Remediating a failed proficiency evaluation:

When a proficiency evaluation has been failed, the following is required:

- Remediation (do another proficiency evaluation on the procedure)
- The C.I. will record the remediated procedure in Trajecsys ("other evaluations" tab) as either a pass or fail.
- After remediation of a proficiency evaluation, if it is difficult to repeat the same procedure due to the infrequency of that procedure, the Clinical Preceptor may have the student simulate the procedure or request that the student do any other procedure within that same category.

4th repeat of the same proficiency (includes failed remediations)

Student will be withdrawn from the program.

Direct and Indirect Supervision

Until competency is achieved by a student in any given procedure, all clinical assignments shall be carried out under the direct supervision of a qualified (ARRT certified and registered) radiographer.

Simulated exams remain as a procedure that requires **direct supervision**. If a patient presents at a later date, the exam can be completed at that time so that images can be evaluated and indirect supervision verified.

Direct supervision:

The parameters of **direct supervision** are as follows:

A qualified (**ARRT certified and registered**) radiographer:

1. Is physically present during the performance of the procedure
2. Reviews the procedure in relation to the student's achievement
3. Evaluates the condition of the patient in relation to the student's knowledge
4. Reviews and approves the procedure and images

After demonstrating competency through a competency evaluation on a procedure, the student may perform that procedure under indirect supervision.

Indirect supervision:

Indirect supervision is defined as follows: provided by a qualified (**ARRT certified and registered**) radiographer who is immediately available to assist students regardless of the level of student achievement.

Immediately available – defined:

Immediately available is interpreted as the **physical presence** of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This applies to all areas where ionizing radiation equipment is in use on patients.

Transmission of Images:

Whether directly or indirectly supervised, the Radiographer must directly inform students when they may accept, or delete, patient images for which the Technologist is responsible. Students may not send (or delete) images without approval.

Student responsibility for appropriate supervision:

The student knows what competencies they have completed and must remain aware of their supervising technologist's presence when performing/practicing exams they have not yet comped. Effective communication with your technologist is vital. It is just as appropriate to remind a tech that you've passed a comp on a procedure and you'd like to work independently as it is to say that you haven't comped a procedure and need them to observe. Ultimately it is the student's responsibility to ensure the proper level of supervision.

Repeated Views/Exams and Mobile Radiographic/Fluoroscopic Procedures

Repeats and all mobile radiographic/fluoroscopic procedures **must** be done under the **direct supervision** of a qualified (**ARRT certified and registered**) radiographer who is **physically present** during the performance of the procedure.

During **EVERY** repeat, a certified radiographer must:

- Be physically present during the conduct of the repeat image
- Approve the student's procedure prior to re-exposure.
- Directly inform students when they may accept, or delete, patient images for which the Technologist is responsible.
- Sign the Repeat Exposure Supervision Verification form

Consequences for noncompliance of supervision, transmission, repeats or mobile policy:

- Utilization of the Corrective Action Plan (CAP) Written Warning Step 2
- 5 points deducted from the overall grade for the clinical education course
- Suspension or withdrawal from the Radiography Program if a recurring issue.

Clinical Preceptor's Evaluation by the Students

With the idea of continuous improvement in mind, the Clinical Preceptors are evaluated by the students at the end of each semester and given a synopsis prepared by the Clinical Education Coordinator. The Clinical Education Coordinator and/or Program Director reviews and discusses the evaluation with the C.I.

ARRT Standards of Ethics (American Registry of Radiologic Technologists)

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

For the ARRT Code of Ethics, see the [ARRT Standards of Ethics webpage](#)

Conferencing

Conferencing will be used on an as needed basis for any or all of the following: inappropriate behavior, problems, and inadequate performance standards.

If warranted, an action plan for behavioral improvement will be developed by the student.

Confidentiality of Educational Records Family Educational Rights and Privacy Act of 1974 (FERPA)

As outlined in the Family Educational Rights and Privacy Act of 1974, a student has the right to have their educational records remain confidential. The student's education records will be maintained in a secure and confidential manner.

No one outside the institution will have access to, nor will the institution disclose, any information from a student's educational record without the written consent of the student, except to personnel within the institution, to persons or organizations providing the student financial aid, to accrediting agencies carrying out their accreditation functions, to persons involved with institutional research, or to persons in an emergency in order to protect the health or safety of the student or other person. All these exceptions are permitted under the act.

See the *NCC Student Handbook* for more details.

Continuing Education (Hospital In-services and Students)

The clinical education setting allows the program's students and College staff to observe and/or participate in selected conferences and educational programs held for the staff for continuing education purposes.

Continuing Education Requirements & Continuing Qualifications Requirements for Registered Radiographers (Life-long Learning)

See the ARRT *Certification Handbook and Application Materials for Exams Administered* in your testing year. This booklet is available from the ARRT.org website.

Corrective Action Plan (CAP) for Behavioral Issues / Concerns

Location of forms:

The Clinical Preceptor(s) will have copies of the forms at each clinical site and available on Trajecsys.

Completed forms:

The signed forms are to be faxed (610-861-4581) or scanned and emailed to the Program Director or Clinical Education Coordinator. At the end of each semester/summer session, the forms are to be returned to the Radiography Program for placement in the student's program file.

1st Step – (Documented) Oral Warning:

- The Clinical Preceptor(s) document the issue or concern.
- The Clinical Preceptor will conference with the student about the issue / concern at hand.
- During the conference, the student will be given an opportunity for rebuttal.
- The student and Clinical Preceptor will sign the paperwork.
- A copy of the paperwork is transmitted to the Radiography Program.
- The completed form will be returned to the College at the end of each semester/summer session for inclusion in the student's file.

Note: Some issues or concerns are so serious that the procedure will bypass the oral and written warning steps in the corrective action plan resulting in immediate suspension or withdrawal from the Radiography Program.

2nd Step – Written Warning with the Creation of an Action Plan by the Student:

- The Clinical Preceptor(s) document the issue or concern.
- The Clinical Preceptor and at least one witness will conference with the student about the issue / concern at hand.
- During the conference, the student will be given an opportunity for rebuttal.
- If the written warning is upheld, after conferencing with the student, they will write an action plan for improvement on the form.
- The student, Clinical Preceptor, and the witness(es) will sign the form.
- After conferencing with the student, if the decision is corrective action, a point value (1 – 5) is determined (in collaboration with either the Clinical Education Coordinator or the Program Director) and deducted from the student's score for the clinical practice course.
- A copy of the paperwork is transmitted to the Radiography Program.
- The completed form will be returned to the College at the end of each semester/summer session for inclusion in the student's file.

3rd Step – Corrective Action (2nd Written Warning):

- The Clinical Preceptor(s) document the issue or concern.
- The Clinical Preceptor and at least one witness will conference with the student about the issue / concern at hand.
- During the conference, the student will be given an opportunity for rebuttal.
- After conferencing with the student, if the decision is corrective action, a point value (1 – 5) is determined (in collaboration with either the Clinical Education Coordinator or the Program Director) and deducted from the student's score for the clinical practice course.
- Additionally, depending on the severity of the issue or concern, the student may be suspended or withdrawn from the Radiography Program by the Program Director.

- If the student is not withdrawn from the Radiography Program, they will need to describe, in writing, their revised action plan for improvement.
- The student and those present sign the paperwork.
- All paperwork is to be transmitted to the Radiography Program.
- The Program Director will report the incident to the Dean, School of Health Sciences & Education.

Note: If there is a suspension from the Radiography Program, the student will be withdrawn from clinical practice and the days missed will be made-up during the six-week extension of the last clinical education course. However, if the decision is rescinded, the student will be given, if reasonable, an opportunity to make-up the missed clinical practice time prior to the six-week extension.

4th Step – Withdrawal from the Radiography Program:

- Document the issue or concern.
- The Program Faculty and at least one witness will conference with the student about the issue / concern at hand.
- During the conference, the student will be given an opportunity for rebuttal.
- The student and those present sign the form.
- The Program Director will report the incident to the Dean, School of Health Sciences & Education.

Note: If the withdrawal is rescinded, the student will be given, if reasonable, an opportunity to make-up the missed clinical practice time prior to the six-week extension of the last clinical education course.

Counseling Services

A staff of professional counselors is available to help you with your educational and personal counseling. The office is located in the College Center CC 341. Call 861-5346 for more information and see the *NCC Student Handbook* for more details.

Criminal Background Check

A criminal background check (State, Child Abuse and FBI) for each student is required by the Radiography Program and the clinical affiliates upon acceptance into the Radiography Program and prior to clinical rotations in the second year.

Acceptance into the program is considered conditional until the criminal background check requirement has been fulfilled.

Applicants with reports reflecting “no record” (no convictions) can consider themselves fully accepted. Applicants currently on probation, work release, parole or haven’t yet had their case adjudicated cannot be accepted and are encouraged to reapply when those conditions have been satisfied.

If there is a criminal record, entry into the program will be dependent on the decision of the Allied Health Review Committee after a written, detailed explanation is received from the student. Upon receipt of the statement, the Allied Health Review Committee will review the report and make a recommendation to

the Program Director regarding the student's acceptance into the program. Students will be notified of their status within 3 days following the committee's review. The student may appeal the decision in writing within 5 working days of the decision to the Vice President for Academic Affairs whose decision is final.

The records related to the criminal background process for students will be secured in the Deans' office.

Clinical agencies have the right to deny access to any student with a criminal record based on that site's own criteria. In the event that a student is denied clinical placement based on their criminal record, their acceptance into the Radiography Program will be rescinded.

If the student with a positive criminal background check is accepted into the program and clinical site, it would be prudent for the student to complete the ARRT pre-certification application in order to verify that they will be able to take the certification examination upon graduation from the Radiography Program.

Disabilities (Disclosure)

After acceptance into the Radiography Program, a disclosure sheet is signed by the student. If there is a written documented disability, reasonable services and accommodations are offered to the student to facilitate accessibility to both the Radiography Program and the clinical facilities.

Services provided to students with disabilities are based upon each student's individual needs. These accommodations can include but are not limited to:

- Academic support
- Extended time for tests
- Recording lectures
- Oral tests
- Note-takers

Disciplinary Actions / Procedures

See the *NCC Student Handbook*, *College Catalog* and other applicable policies listed in this handbook.

Diversity

We encourage and support equity in our educational programs, policies, campus life, employment, extra-curricular activities and community involvement.

In our efforts to value diverse voices and perspectives, we strive to:

- Provide equal opportunity and equal access to education.
- Recruit and retain a diverse student body, faculty and staff.
- Promote a campus climate where respect for and appreciation of differences are priorities, and where individuals co-exist without prejudice or bigotry.
- Integrate multicultural perspectives throughout the curricula.
- Analyze the diverse needs of our constituents and ensure that our services, organizational structures and institutional priorities address them.

Discrimination and Harassment Position Statement

Every student has the right to be protected from any form of harassment or discrimination which is based on race, color, religion, age, gender, gender identity, national origin, ancestry, sex, sexual orientation, citizenship, marital status, or based on an individual's actual or perceived disability, or on a person's association with a person with a disability, or any other legally recognized protected basis under federal, state, or local laws, regulations or ordinances). A student has the responsibility to avoid participation in any situation that results in such harassment or discrimination.

See the *NCC Student Handbook* for the procedure for discrimination complaints.

Dosimeter Service

A dosimeter based radiation monitoring service shall be arranged by the College. The fee is included in the clinical courses that are scheduled in both of the Fall semesters. For questions concerning the dosimetry service at the College, the students are to see the Program Director. The Radiation Dosimetry Report (RDR) is posted (without the individual's Social Security number and date of birth) in the Gary Wogenrich laboratory after being reviewed by the Program Director, within two weeks after receipt of the report. **Student's will put their initials after their name to document that they reviewed their exposure.** The clinical site's Radiation Safety Officer and/or the Clinical Preceptors will receive a copy of the RDR for the students assigned to their clinical site.

Students shall wear their dosimeters when doing laboratory exercises in the Gary Wogenrich laboratory on the NCC campus and while at the clinical facility. Any student not wearing their dosimeter during clinical education shall be sent home. The missed time will need to be made up in the same clinical rotation that was missed. The first offense shall be an oral warning under the Corrective Action Plan. Any additional offenses shall warrant a written warning.

The Program Director will meet with the student whenever the RDR indicates a suspicious and/or "high" reading, (approaching or exceeding 125 mrem (1.25mSv)/quarter). The Clinical Preceptors will be involved in the review and plan for improvement.

Additionally, each student shall:

1. understand and read each dosimetry report (taught how to read in class).
2. Put their initials after their name to document that they have reviewed the report.
3. exchange the old dosimeter for a new one when scheduled.
4. never expose the dosimeter to extreme environmental conditions such as excessive heat.
5. immediately report the loss of a dosimeter to the Clinical Preceptor or Lab Instructor **and** the Program Director. A lost dosimeter will need to be replaced before clinical rotations can resume. Replacement typically takes five to seven business days. Additional costs incurred for replacement is at the expense of the student.

In the event of pregnancy, a student who voluntarily declares her pregnancy in writing will be provided with a (baby) dosimeter to be worn at waist level for fetal monitoring.

Radiation Dosimetry Guidelines

Proper Use of Dosimeters:

- Only the person who is assigned a dosimeter shall wear it. Do not loan a dosimeter or use it for monitoring an area.
- The dosimeter should be worn such that monitoring is optimized (usually on the collar) when working with ionizing radiation. Detectors should always be turned to face the source of radiation.
- The dosimeter should always be worn whenever there is a possibility of being exposed to ionizing radiation during the work day. The dosimeter should be stored in a safe, radiation-free location when not in use. It should not be stored at high temperatures. The radiation dosimeter shall not be worn when receiving a medical radiation exposure.
- If the dosimeter is damaged, return it for a replacement.
- When wearing a lead apron, the dosimeter should be placed on the collar or belt outside the apron. For individuals monitored using two dosimeters, one should be worn on the collar (outside the apron) and the other (fetal) should be worn at the waist level under the apron.
- The dosimeter must be promptly returned for processing. Delay in returning the dosimeter results in considerable extra work and delays in obtaining dosimetry reports. A dosimeter which is returned late cannot be processed with the control dosimeter supplied with the shipment. Dosimeters not processed during the proper time period may have their results impaired by degradation.
- On an annual basis, and following the completion of, or withdrawal from, the Program, all students will receive a copy of NRC Form 5 Equivalent Occupational Exposure Record for a Monitoring Period under the Provisions of NRC 10CFR 19 and Title 25 of the Pennsylvania Code.
- If a student has a prior dose history, those reports are to be submitted to the Program Director to ensure an accurate record so that annual exposure limits are not exceeded.

Employment in a Radiology Clinical Setting:

If NCC students are currently employed, or are hired, by a clinical facility they are to wear the NCC provided dosimeters if a dosimeter is not issued by the employer. If the facility provides a dosimeter for the students employed at their site, the student must provide, or arrange to provide, the Program Director a copy of their dosimetry report. The Program Director will monitor the student's cumulative exposure and communicate with the facility RSO when necessary. The facility's clinical employment orientation process will cover topics such as:

- Storage of dosimeters prior to leaving the clinical site
- Radiation dosimetry reports – location
- Review of radiation dosimetry reports (RDR) – Radiation Safety Officer(RSO)

Voluntary, Written Declaration of Pregnancy and Dosimeters:

If you are pregnant and decide to voluntarily disclose your pregnancy (must be in writing) to the Program and clinical site, you will receive, in addition to your regular dosimeter, a "baby" dosimeter. You will also need to:

- Have a consultation with the program director and the hospital's physicist (radiation safety officer)
- Submit your individualized plan to complete the program's requirements to NCC

NCC will make reasonable accommodations for you and your unborn child. At any time, you have the right to rescind your declaration of pregnancy, which must be done in writing.

From NCRP Report No. 116, Embryo and Fetus Exposures:

Monthly Equivalent Dose Limit: 50 mrem (.5mSv)

Equivalent Dose Limit for Entire Gestation: 500 mrem (5mSv)

Radiation Dosimetry Guideline – No More than 125 mrem (1.25mSv)/quarter:

An exposure below the limits defined above in each individual category (shallow, deep, eye) will be considered as reasonable. The limit is set as 10% of the NRC annual total effective dose equivalent (TEDE) for the whole body (5,000 mrem/50mSv).

If exposures exceed the guideline, the following protocol is to be followed:

The student will be notified and counseled appropriately by the Program Director and the clinical site's Radiation Safety Officer. The student will provide the Program Director with a copy of any documentation provided to them by the RSO. The Program Director will discuss the RDR with the student, Clinical Preceptor and/or RSO to investigate the possible contributing factors for the increased exposure to ionizing radiation. After the inquiry, ways to improve radiation safety will be discussed with the student.

Wogenrich Radiographic Laboratory (On-campus):

The dosimeters provided to the students are to be used in the radiographic labs on campus during the first, fall and spring semesters for lab courses. The dosimeters are to be worn at all times during the clinical course work which spans the entire duration of the program.

In the first, three-weeks of RADT 107 Clinical Practice I, there is an orientation session that prepares the students to safely use ionizing radiation. Application of radiation safety is assessed through a practical evaluation. In RADT 102 Fundamentals of Radiologic Sciences, the students are shown where the Radiation Dosimetry Report (RDR) is posted (next to the dosimeter holder board). The students are given instructions on how to read a RDR. The RDR is reviewed by the Program Director. If there is a higher than expected reading, the Program Director and/or Clinical Education Coordinator will have a conference with the student. An investigation will be conducted as to what may have contributed to the reading. Guidelines for improvement in radiation safety practices will be discussed with the student.

Notations for the Clinical Sites and NCC Campus Wogenrich Laboratory:

- In order to be in compliance with the JRCERT guidelines, the RDR's must be made available to the students within 30 days following receipt of the data.
- Per the U.S. Nuclear Regulatory Guidelines, workers (students) under the age of 18 are limited to 1/10 of the (yearly) adult effective dose limit of 5000 mrem. It is anticipated that the dose limits for NCC students who may be under the age of 18 will be in compliance.

Dress Code / Personal Hygiene

- The "Clinical Education Dress Code" reflects the appropriate dress code for the clinical education setting and will be distributed to students at the program orientation meeting.
- Wearing the uniform of a radiographer is both a privilege and a responsibility. When in uniform, the student represents not only themselves but also the Radiography Program, the Clinical Education Facility, and the College.

- Radiography Program students are expected to report to clinical practice in the appropriate uniform and demonstrate a neat and clean appearance or they will be dismissed from the clinical education setting for the day. The student will be allowed to return when they are no longer in violation of the dress code and make-up time will be required.
- Repetitive failure to comply with the dress code will be addressed through the action plan procedure.
- Dosimeters and name (ID) tags are part of the dress code and must be worn at all times while at the clinical education site.
- All students are to wear black scrubs with identifying embroidery above the left chest pocket which includes the college logo, "Northampton Community College" and "STUDENT RADIOGRAPHER"
- No stretch pants or leggings

Adherence to the dress code includes, but is not limited to, the following:

- Hair must be of a naturally occurring color and should be worn in good taste, out of the face, and tied back to prevent it from coming in contact with the patient.
- No facial hair to ensure a secure fit of the face mask used for patients on airborne precautions.
- Deodorant should be worn.
- It is preferred that you refrain from using perfume, cologne, after shave or scented lotions. If permitted to be worn at the clinical site, the scent must be minimal and non-offensive.
- Use breath freshener after eating onions, garlic etc.
- No chewing gum
- No eating/drinking around patients
- No sandals
- **Black** shoes/sneakers must be non-porous, clean and remain clean.
- Jewelry-smooth rings (limit 2), one watch/fitbit etc. is acceptable. No necklaces or bracelets (jewelry may harbor bacteria, tear gloves or pose a scratch risk to patients).
- No loops or dangling earrings both for your safety and that of the patient (patients may grab and pull). Plugs (gauges) must be solid and match skin color.
- Fingernail length should not exceed 1/4" due to hygienic and patient safety considerations.
- Only clear fingernail polish may be used for the clinical education setting.
- **No** artificial finger nails.
- Tattoos must be covered.
- Tongue piercings must be tongue colored.
- Piercings-no exposed piercings (e.g. eyebrow, lip, nose rings), they can present a risk of infection if grabbed by a patient. Low profile nose studs may be permissible-check with your Clinical Preceptor.
- Smelling of smoke is not permitted. All clinical sites are smoke free campuses.

Emergency Medical Care at the Clinical Education Setting

The Health Agency shall provide emergency medical care for injury or illness of students, using the student's health insurance, in the Health Agency until provisions can be made for continued care. The student maintains the responsibility for payment of the medical expenses.

Emergencies NCC Campus Medical, Fire, and Police

Three emergency phones are located in the parking lots and are for use if an emergency arises. Simply press the button and a connection to Public Safety will be made. When Public Safety answers please indicate the nature of your emergency and your location (use the number on the pole). Additional phones are located throughout the facilities for emergency use. Contact campus Public Safety by dialing 5588 on a regular campus phone or 610-861-5588. Oxygen, on campus, is available through Public Safety.

See the printed posters displayed on campus for more details.

Emergency Response Guidelines (NCC)

Fire and/or Explosion

1. In the event of a fire or explosion:
 - A. Sound any available fire alarms.
 - B. Immediately call 911, then campus safety at 5588 (610-861-5588). Give your name, location, and the extent of the problem.
 - C. If the fire is small, attempt to extinguish it with a fire extinguisher.
 - D. If the fire is large, evacuate the building via the nearest fire exit*
2. Additional suggestions:
 - A. Do not panic.
 - B. Do not run or use excited motions.
 - C. Use stairways. Do not attempt to use elevators; they will shut down during a fire.
 - D. Know in advance the location of fire extinguishers and how to use them.
 - E. Prevent fires through good housekeeping habits.
 - F. Know the appropriate evacuation protocol if assisting individuals with disabilities*.

* All College Center exit corridors and smoke tower stairwells are marked with exit signs and are protected with self-closing fire rated doors. Tower exits stairs are marked with "area of refuge" signs. These are the safest areas during an emergency. Rescue personnel (Fire Department) will first check all exit corridors and exit stairwells for any trapped persons.

Crime in Progress/Civil Disturbance

1. Do not attempt to apprehend or interfere with the criminal except for self-protection
2. Call Public Safety at 5588 (610-861-5588). Give your name and location. Advise them of the situation and, if you are safe, remain where you are until contacted by Public Safety.
3. If safe, attempt to get a good description of the criminal. Note height, weight, sex, ethnicity, approximate age, clothing, method and direction of travel, and name if known. All of this takes only a few seconds to notice and is of utmost help to the investigating officers. If the individual enters a vehicle, note the license number, make and model, color and any other noticeable characteristics.

4. In the event of civil disturbance, continue with your routine as much as possible. If the disturbance is outside, stay away from doors and windows. Unless threatened with physical harm, do not leave your location until verifying that it is safe to do so.
5. Do not interfere with those creating the disturbance or with law enforcement authorities on the scene.

Injury or Illness

1. Do not move an injured or ill person unless it appears to be a life-threatening situation.
2. Call or, if possible, have another person call first 911, then Campus Public Safety at 5588 (610-861-5588). Provide the dispatcher with as much information as possible regarding the nature of the injury or illness, and state whether or not the victim is conscious, etc. Public Safety will meet the ambulance if required and will also notify the Student Health Center.
3. Return or stay with the victim. Administer first aid or CPR if you are trained to do so. Keep the patient as comfortable as possible.
4. Remain with the individual until Emergency Services arrives.

Note:

The nearest first aid kit is located in the Wogenrich Lab viewing area.

Bomb Threat

1. Whenever a bomb threat is received over the phone, remain calm and write down as much of the following information as possible:
 - A. The exact words of the caller
 - B. Location of the bomb
 - C. When the bomb is supposed to go off
 - D. Type of bomb and who placed it, if stated
2. Write down a description of the caller's voice:
 - A. Male, female, child or adult?
 - B. Any background noise?
 - C. Particular accent or inflection in the caller's voice
 - D. Your mental picture of the caller.
3. Notify Campus Public Safety at 5588 (610-861-5588)
4. Evacuation procedure:
 - A. Unless you perceive the situation as life threatening, in which case you should evacuate immediately, wait for Campus Public Safety to arrive at the building.
 - B. If an entire building is to be evacuated, Campus Public Safety and the appropriate crisis team staff normally will enter each classroom, lab, or work area and verbally inform occupants of the situation and ask them to evacuate in an orderly fashion.
 - C. Assemble in a location outside your building as assigned by Campus Public Safety Officers.
5. Responsibility of faculty or staff members in classroom or lab:
 - A. If directed by Campus Public Safety, ask students to pick up all of their belongings and leave in an orderly fashion
 - B. Make a survey of the room before leaving to identify any piece of equipment, article or object which is not ordinarily there, making certain not to touch the unknown object
 - C. Relay this information to Campus Public Safety after leaving the building

Chemical or Radiation Spill

1. Inform a faculty or staff member if available. You or the faculty/staff will call Campus Public Safety at 5588 (610-861-5588) and give the following information:
 - A. Type of incident (chemical spill, radiation hazard, etc.)
 - B. Type of chemical, if known
 - C. Whether or not students are injured.
 - D. Extent of injuries
 - E. Location of incident
 - F. Name and title of caller (student, technician, professor, etc.)
2. Pull the alarm and evacuate the building.
3. Should the spill occur outside your building:
 - A. Notify Campus Public Safety at 5588 (610-861-5588)
 - B. Remain in your building unless ordered by Campus Public Safety to evacuate
 - C. Close all windows and turn off all outside air intake vents or fans
 - D. Leave your building only when told to do so, and travel away from the spill and in an upwind direction, if possible

Earthquake/Other Natural Disaster

1. If you are in a building, move away from windows and try to position yourself in a doorway or under a desk or table.
2. When the tremors cease, or they are very slight, evacuate the building in an orderly fashion.
3. Use stairways – not elevators – during evacuation.
4. If possible, instructors should take attendance to assure that all personnel are accounted for outside of the facility. Report anyone missing to Public Safety or campus official.
5. Should you require evacuation assistance, please telephone Campus Public Safety, 5588 (610-861-5588).

Shooting Protocol

1. If you witness any armed individual on campus at any time, immediately contact Public Safety at 5588 (610-861-5588). If the individual is acting in a hostile or belligerent manner, contact 911 and then call Public Safety at 5588. There are no easy answers for what to do if confronted by a shooter. However it is suggested that you do not provoke the individual, avoid making eye contact with them, avoid making any sudden movements or gestures, and create space between you and them but don't just turn and run. If you find yourself confronted by the shooter, remain calm and talk in a low tone of voice.
2. If the shooter is outside the building:
 - A. Move to a room inside of the building if safe to do so and remain there until an "all clear" instruction is given by an authorized known voice.
 - B. Turn off all the lights and close and lock all windows and doors. If the door does not have a lock, attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows.
 - C. If you can do so safely, get everyone present on the floor and out of the line of fire.

- D. If the staff or students do not recognize the voice that is giving instruction, they should not change their status.
 - E. Unknown or unfamiliar voices may be false and designed to give false assurances.
3. If the shooter is inside the building:
- A. If it is possible to flee the area safely and avoid danger, do so.
 - B. Contact 911 and Public Safety at 5588 (610-861-5588) with your location if possible.
 - C. If flight is impossible, lock all doors and secure yourself in your space. If the door does not have a lock, attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows.
 - D. Get down on the floor or under a desk and remain silent.
 - E. Get everyone on the floor and out of the line of fire.
 - F. Wait for the "all clear" instruction.
4. If the shooter comes into your class or office:
- A. There is no one procedure the authorities can recommend in this situation.
 - B. If you are seated, remain seated as standing may be perceived as a threat.
 - C. Attempt to get the word out to others if possible, and call 911 if that seems practical.
 - D. Use common sense. If hiding or flight is impossible, attempt to negotiate with the individual.
 - E. Attempting to overcome the individual with force is a last resort that should only be initiated in the most extreme circumstances.
 - F. Remember, there may be more than one active shooter.
 - G. Wait for the "all clear" instruction.
 - H. In shooting situation, the Bethlehem Township Police are in charge once they arrive on the scene.
 - I. Be careful not to make any changes to the scene of the incident since law enforcement authorities will investigate the area later.
 - J. In case you must flee, do not go to the normal first evacuation sites for your building. Get as far away from the shooting scene as possible and then contact authorities.

Regardless of location of a shooter incident, response personnel (i.e. Campus Public Safety and other law enforcement agencies) will be charged with neutralizing the situation. This means that the response personnel must bypass anyone who is not the shooter. If you encounter response personnel, do not approach them, engage in physical contact or request assistance in providing aid. This will slow the response of law enforcements actions to neutralize the situation so that aid can be rendered to all. It creates more stress to the responders and it could cause an accidental discharge. When you see law enforcement responding to a shooter situation move to the side, if in a hall get close to the walls, and put your hands where they can be seen. If you have information about the shooter (e.g. description, identity, location, and number of shooters) advise the responding officers that you have information and provide it to the police as quickly and accurately as possible.

Medical Emergencies in the Classroom or on Campus

- Remain calm-dial 9-1-1.
- When the dispatcher answers, make a simple statement of what you need...ex: I need an ambulance.
- Dispatcher will then ask for the address and location of the emergency.
- Main campus address is 3835 Green Pond Road, Bethlehem 18020
- then your- "Building name" and "room number"

Dispatcher will ask you exactly what is wrong...or for more details. Answer as best you can and do not become annoyed that it appears to be taking too long. They are asking you this info and another dispatcher is contacting emergency medical personnel with the information. The dispatcher will ask for your name and phone number. Do not hang up until dispatcher says it is ok to do so.

Ask another person in the room to call Public Safety after you have called 9-1-1 (Public Safety: 610-861-5588 or 5588 from a campus phone). Notify them of the emergency and that 911 has been contacted. Public Safety has a protocol to follow once they receive a call – including communicating with emergency personnel to meet them when they arrive on campus and contacting the college's health center.

Employer Survey

In an effort to assess and continually improve the Radiography Program effectiveness, as a graduate radiographer your employer will be contacted and asked to complete a questionnaire concerning both your professional and technical skills.

Employment in Radiology at the Clinical Site

Students may be employed at the clinical education setting while they are in the Radiography Program, but only when they are not functioning in the "student capacity." In other words these are two separate and distinct roles, and under no circumstances are the students to use time as an employee to complete clinical education requirements such as logging or performing competency evaluations. **To undertake clinical education activities while functioning as an employee is considered academic dishonesty and will be handled under the cheating and plagiarism policy.**

Consequences:

- Grade of "F" assigned for the course
- Suspension and/or withdrawal from the program
- Suspensions and withdrawals need to be reported to, and evaluated by, the ARRT. This may prevent the student from being able to take the registry exam in the future.

Endowments / Scholarships

To be considered for an endowment or scholarship, the student needs to file for **financial aid** (including a FAFSA filing). Even if not eligible for financial aid, you must file in order to be entered into the candidate pool. Please contact the Financial Aid Office, on campus, for filing information.

As of August, 2018 there are six endowed radiography scholarships available for students. Eligibility requirements vary and may include financial need, GPA, county of residence, clinical site rotations, military service, and other criteria. Typically awards are granted for the student's second Fall semester.

"Essential Functions of a Radiographer" (Technical Standards)

The following is a list of the everyday functions that a radiographer needs to be able to perform at the hospital or outpatient facility. The inability to perform these skills at a competent level may require withdrawal from the program to protect the patient population.

1. Observational skills:

- Assess the patient's needs.
- Able to discern the information that is needed for the procedure at hand.
- Recognize the need for prompt medical attention in a variety of settings and locations.
- Discern the details, density, and contrast of a radiographic image in order to determine if it is optimal for the radiologist's interpretation.
- Distinguish among the chromatic colors.
- Be able to use peripheral vision.
- Judge the distance of objects and the spatial relationship of objects at different distances.
- Detect changes in equipment operation (i.e., overheating, incorrect meter readings).
- Secure the correct chemical container and/or medication.

2. Communication skills:

- Communicate with other health care providers.
- Perceive the patient's oral communication with the ear
- Be able to hear sounds of a high pitch (e.g., patient's monitoring equipment).
- Be able to hear sounds of a low pitch (e.g., patient's breathing patterns).
- Perceive the patient's nonverbal communication.
- Secure information (i.e., questioning of the patient).
- Communicate promptly and effectively in English both verbally and in writing.
- Communicate with the patient and the public on a level that they are able to comprehend.
- Communicate effectively, using medical terminology, with the physician and other health personnel.
- Respond to directives from others related to patient care and emergency situations.
- Display compassion, empathy, integrity, concern for others, interest, and motivation.
- Obtain pertinent information from the patient's chart.
- Obtain information that is requested by the physician in order to make a diagnosis.
- Document in writing, through knowledge of the medical terms, good grammar, and spelling, information needed on the patient's requisition for an optimum diagnosis by the radiologist.
- Document the vital sign findings for the use of other health care personnel.
- Interact with others in a respectful, professional manner especially in stressful situations

3. Motor skills:

- Tolerate physically taxing workloads.
- Safely lift from a lower to a higher position a minimum of 50 pounds and occasionally as much as 75 pounds.
- Be able to carry an object weighing as much as 25 pounds in order to transport it from one place to another.
- Be able to draw, drag, haul, or tug an object(s) weighing more than 100 pounds or the patient's weight.
- Be able to push an object(s) with steady force in order to thrust forward, downward, or outward weighing more than 100 pounds or the patient's weight.
- Be able to stoop/bend, squat, crouch, kneel, crawl, climb, and reach above shoulder level.
- Sufficient gross and fine motor coordination to respond promptly, manipulate equipment, and ensure patient safety.
- Perceive the attributes of an object(s) such as size, shape, temperature, or texture by touching with the skin, particularly that of the fingertips.

- Elicit information from a patient by diagnostic maneuvers (i.e., palpation).
 - Safely manipulate and use controls (i.e., the x-ray tube that is located up to six feet from the radiographic/fluoroscopic room floor).
 - Be able to use the fingers/hands in repetitive actions such as picking, pinching, writing, firm grasping, and twisting/turning.
 - Skillfully use precision instruments.
 - Maintain an upright, erect position with the entire body supported by the feet for as long as 7 hours during the work day.
 - Function efficiently while wearing lead protective apparel.
 - Safely perform procedures.
 - Utilize the equipment needed to obtain temperature, pulse, respiration, and blood pressure.
 - Enter data into the computer.
4. Cognitive functions:
- Ability to adapt to a crisis situation, flexible schedules, and/or change in environment.
 - Function effectively under stressful conditions.
 - Concentrate on the task at hand.
 - Visually concentrate and/or focus thoughts or efforts for long periods of time.
 - Exercise independent judgment and discretion in the safe technical performance of medical imaging procedures.

Evaluations of Faculty by Students

Faculty evaluations are administered towards the end of each semester in both the didactic and clinical education settings. This is the student's opportunity to suggest changes in the way that a course is facilitated by an instructor.

Evaluations of Students by Clinical Education Staff

The "Technologist's Evaluation of Student Performance and Professionalism," is used by the staff to assess the performance of the student in the affective domain. A minimum of five (5) evaluations are required for each clinical education course and are used by the Clinical Preceptors to help determine the clinical education grade for that course. A modified "Technologist's Evaluation of Student Performance and Professionalism" is used for the first Clinical Practice and a minimum of five (5) are required.

Evaluations of Students by the Clinical Preceptors

The "Clinical Preceptor's (C.I.) Evaluation of Student Performance and Professionalism," is used by the Clinical Preceptors to assess the student's performance in the affective domain.

Exit Interview of Students That Withdraw from the Program

For assessment purposes, each student withdrawing from the Radiography Program is asked to speak with either a program representative or the Admission's liaison in order to find out the reasons for leaving for our continuous improvement initiative. An email to the Program Director or Clinical Education Coordinator addressing the reasons for withdrawal is required.

Facebook, Twitter, Instagram etc. (Also see Social Networking)

As part of the screening process for potential employees, Human Resource departments often have individuals who screen media postings to review the candidates seeking employment. If inappropriate comments or images are found it could prevent the hiring of that candidate. Keep in mind that despite personal privacy settings, media is not as private and secure as perceived. If a social networking issue were to arise the consequence could be withdrawal from the Radiography Program. A HIPAA violation will result in withdrawal from the program.

Full-Time Didactic Program Faculty Responsibilities

The full-time didactic faculty will:

- prepare and maintain course syllabi/outlines and objectives, instruct and evaluate students, and report progress
- participate in the assessment process
- cooperate with the Program Director in periodic review and revision of course materials
- support the Program Director to help assure effective program operation
- maintain appropriate expertise and competence through continuing professional development
- attend scheduled divisional, departmental, program, advisory, and college meetings.
- do academic advising and counseling.
- do student advising for registration.
- perform College service activities either on or off campus.
- maintain appropriate expertise and competencies through continuing professional development and pursuit of scholarly activities.
- maintain a good rapport with the clinical affiliates.

Part-Time Didactic Program Faculty Responsibilities

The part-time didactic faculty will:

- prepare and maintain course syllabi/outlines and objectives, instruct and evaluate students, and report progress
- participate in the assessment process, when appropriate
- cooperate with the Program Director in periodic review and revision of course materials
- maintain appropriate expertise and competencies through continuing professional development and pursuit of scholarly activities.

Final Examinations

Students should expect that they will be given a final examination or other culminating assessment during finals week at the end of each semester. The final assessment may be, for example, term projects or written exams.

If there is a conflict in scheduling of the final examination, notify the instructor immediately, who will make accommodations if possible.

Financial Aid

See the *NCC Student Handbook or Catalog* for details.

Special Note:

To be considered for an endowment or scholarship, the student needs to file for financial aid (including a FAFSA filing). Even if not eligible for financial aid, you must file in order to be entered into the candidate pool. Please contact the Financial Aid Office, on campus, for filing information.

As of August, 2018 there are six endowed radiography scholarships available for students. Eligibility requirements vary and may include financial need, GPA, county of residence, clinical site rotations, military service, and other criteria. Typically awards are granted for the student's second Fall semester.

General Patient Care Simulations

Before graduation from the program each student is required to complete a patient care simulation in the following:

- CPR
- Vital signs assessment
 - Blood Pressure
 - Pulse
 - Respiration
 - Temperature
 - Pulse Oximetry
- Sterile and medical aseptic technique
- Venipuncture
- Transfer of the patient
- Care of patient medical equipment (e.g., oxygen tank, IV tubing)

These skills will be taught, evaluated and/or validated either at the Clinical Site or the College by NCC Faculty, the Clinical Preceptor, radiology nurse, or a qualified healthcare employee.

Note: The outcomes for principles/concepts in each patient care area will be reinforced in all the radiography didactic courses. Successful completion of the simulations will be documented in Trajecsys.

General Patient Outcomes (for Simulation)

Cardiopulmonary Resuscitation (CPR)

When this area of instruction/demonstration is completed, the student will be able to:

- Recognize when CPR should be initiated on infants, children, and adults.
- Perform CPR on infants, children, and adults.
- Recognize when the Heimlich maneuver should be initiated on infants, children and adults.
- Perform the Heimlich maneuver on infants, children, and adults.
- Perform both CPR and the Heimlich maneuver without causing unnecessary bodily harm.
- Know the theory behind both CPR and the Heimlich maneuver.

Vital Signs (BP, Pulse, Respiration, Temperature, Pulse Oximetry)

When this area of instruction/demonstration is completed, the student will be able to:

- Take vital signs accurately.
- List the rates of pulse, respiration, and blood pressure that are considered to be within normal limits for a child and for an adult.
- Record the readings according to departmental protocol.
- Discriminate between normal and abnormal findings.
- Understand how readings relate to the functioning of the body.
- Explain the implication of abnormal vital signs.

Sterile and Aseptic Technique

When this area of instruction/demonstration is completed, the student will be able to:

- Differentiate between medical asepsis and surgical asepsis
- Explain the radiographer's responsibility for maintaining surgical aseptic technique when it is applicable.
- Demonstrate the medically aseptic hand washing technique.
- List the steps in a surgical scrub.
- Differentiate between disinfection and sterilization.
- Demonstrate the correct method of opening a sterile pack and placing a sterile object on a sterile field.
- Demonstrate the correct method of putting on a sterile gown and sterile gloves.
- Demonstrate skin preparation for a sterile procedure.
- Demonstrate the correct method of removing and reapplying a sterile dressing.
- Demonstrate removal and disposal of gowns, gloves, and masks without breaking isolation principles.
- Demonstrate the correct method of linen disposal using medical asepsis principles.
- Name the agent and state the dilution used for disinfecting radiographic equipment, as recommended by the Centers for Disease Control (CDC).
- Demonstrate the proper disposal of contaminated equipment in the clinical area.
- Use isolation techniques for infectious and immunocompromised patients.

Venipuncture

When this area of instruction/demonstration is completed, the student will be able to:

- Perform venipuncture using universal precautions.
- Maintain asepsis of the area.
- Identify infiltration of the vessel.
- Know what to do for an infiltrated vessel.
- Know the departmental protocol for the procedure.
- Maintain IV patency according to established guidelines.

Transfer of the Patient

When this area of instruction/demonstration is completed, the student will be able to:

- Describe the cause, signs, symptoms, and treatment of orthostatic hypotension.
- Demonstrate the correct method of moving and positioning a patient to prevent injury to you or to the patient.

- List the safety measures that must be taken when transferring a patient from a hospital room to the radiographic imaging department.
- Demonstrate good body mechanics for lifting and transfer techniques.
- Assist patient to sit from a recumbent position
- Assist patient into and out of wheelchair.
- Perform two-person transfer of patient from bed to stretcher and stretcher to bed.

Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)

When this area of instruction/demonstration is completed, the student will be able to:

- Identify the most common types of oxygen administration equipment and explain their potential hazards.
- Identify high-flow and low-flow oxygen delivery devices.
- List the precautions that must be taken when oxygen is being administered.
- Administer oxygen to the patient according to the doctor's orders.
- List the symptoms that indicate infiltration into the surrounding tissues by an intravenous infusion.
- Move the patient without disrupting the flow of solution within the IV tubing.
- Know out to use an existing IV setup for injection of contrast while maintaining medical asepsis.
- Maintain the predetermined flow/drip rate for the IV setup.
- Provide care to a patient with a tracheostomy.
- Provide care to a patient with chest tubes.
- Provide care to a patient with a urinary catheter
- Provide care to a patient with intravenous and intra-arterial lines.
- Demonstrate how to drain and measure the output from a urinary collection bag.

Goals and Learning Outcomes (NCC Radiography Program)

*To graduate students who:

1. are clinically competent.

The students will be clinically competent when they are able to:

- A. Position accurately and in a timely fashion in order to visualize the appropriate anatomical structures.
- B. Select technical factors that will produce an optimal image.
- C. Employ principles of radiation protection

2. communicate effectively through word choice, level of explanation, and method of delivery.

The students will be able to communicate effectively when they are able to:

- A. Write an accurate patient history.
- B. Communicate effectively in written and oral formats with patients, members of the health care team, and the community.
- C. Listen, understand, and evaluate what the speaker is saying.
- D. Speak using effective word choice, appropriate terminology, level of explanation and method of delivery.

- 3. analyze situations using critical thinking to foster better patient care.
 - A. Employ critical thinking skills to use appropriate alternative patient positioning and equipment configurations based on patient condition.
 - B. Critique the image and evaluate radiographic quality.
 - C. Manipulate exposure factors to compensate for patient and image variability while minimizing patient dose.

- 4. employ the five components of being a true professional: character, attitude, excellence, competency, and conduct.
 - A. Demonstrate professional attitude, ethics and sound judgement.

*Key:

1, 2, 3, 4 are goals

A., B., C., etc., are outcomes

Grade Appeals

See the *NCC Student Handbook or Catalog* for details.

Grading Scale (Radiography Program)

The plus/minus grading system is utilized in the Radiography Program. The Radiography Program’s grading scale is different than the College’s scale. The lowest passing grade is 75% to coincide with the registry examination’s scale.

91 - 100 =	A	79 =	C+
90 =	A-	76 - 78 =	C
89 =	B+	75 =	C-
81 - 88 =	B	74 - 0 =	F
80 =	B-		

Graduate Survey

In an effort to assess and continually improve the Radiography Program effectiveness, the graduates at 6-months post-graduation will receive a questionnaire used for assessing career preparedness. To ensure validity, a high response rate is needed. Please respond to the survey request for the advancement of the program.

Graduation Timing

If you complete all your competency evaluations, proficiency evaluations, and all program requirements by the published deadline for the last day of classes for the spring semester, you will not need to complete the **six (6) week extension**. You will be eligible for graduation during the spring (May) commencement. Students remaining for, and completing, the **6 week extension** are eligible for graduation during the winter (January) commencement.

Note: Completion of all program requirements by the published deadline for the last day of classes for the spring semester is required to enter the Advanced Skills Internship (ASI).

Harassment and Discrimination

Every student has the right to be protected from any form of harassment or discrimination which is based on race, color, religion, age, gender, gender identity, national origin, ancestry, sex, sexual orientation, citizenship, marital status, or based on an individual's actual or perceived disability, or on a person's association with a person with a disability, or any other legally recognized protected basis under federal, state, or local laws, regulations or ordinances). A student has the responsibility to avoid participation in any situation that results in such harassment or discrimination.

See the NCC Student Handbook for the procedure for discrimination complaints.

Health Insurance Portability and Accountability ACT of 1996 (HIPAA) (Confidentiality of Patient Information)

The student is required to abide by the policies of their clinical site concerning confidentiality issues and "anything" regarding HIPAA. Failure to abide by the policies will result in disciplinary action.

Any information regarding the diagnosis, treatment, prognosis and/or personal life of any patient is to be regarded as confidential information by the student and not to be discussed with the patient, public, and your "family/significant other."

Requests for confidential information relative to the clinical education center and/or patient should be referred to the supervising radiographer, clinical preceptor, radiologist, or attending physician.

Confidentiality is a patient's right and the responsibility of the radiographer, student radiographer, and all the health care team members in radiology. Any information in written, oral, or electronic form about a patient's physical, emotional, or mental health or treatment is considered confidential and should be shared only in a private area among healthcare providers involved in the care and diagnostic treatment of the patient. This information must be handled discretely and privately and protected against theft, loss, or inappropriate disclosure.

Student radiographers, by virtue of the educational process, will have access to protected health information (PHI) of patients under their care in and outside the radiology department at each of the clinical education sites. Students must sign a confidentiality agreement upon entrance into the Radiography Program which is retained in their file. Students will comply with the Confidentiality Policies and HIPAA regulations at their clinical sites.

Assignments that include patient-related information must be handled securely to avoid unnecessary or inadvertent disclosure and will not include patient identifying information.

Students violating patient confidentiality will be disciplined under the Corrective Action Plan and will be withdrawn from the program.

Patient Information: Protecting

Any documentation (e.g. competency forms, image critiques) containing protected patient information must be kept at the clinical site in a secured area. Documentation containing patient information is never to be taken home by the student.

Health Requirements / Health and Wellness Center

The Health and Wellness Center, located in College Center 120, 610-861-5365, is managed by St. Luke's Hospital and offers professional health care services to students and staff. Hours are Monday – Friday 8:30 a.m. – 4:30 p.m. Summer hours are 9:00 a.m. – 1:00 p.m. Any emergencies at other hours should be referred to Public Safety.

The Nurse at the Health and Wellness Center reviews the health forms and medical documentation to ensure that the medical/immunization requirements have been satisfied prior to the start of clinical rotations. This information is strictly confidential. Personal medical questions should be addressed to the Nurse. General questions related to the health requirements may be addressed to the Nurse or the Program Director.

First-year health requirements:

Students are required to:

- complete the *NCC Allied Health and Sciences Health Form* after acceptance into the program which includes a physical examination by a licensed medical practitioner.

The physical examination and laboratory tests must be performed as described in the information packet distributed to accepted applicants. Completion by the due date is necessary in order to receive clearance from the Hospitals for clinical rotations in a timely manner. Additional information will be communicated to accepted students during the Allied Health and Science Orientation meeting scheduled in May. The length of time needed for the vaccinations and follow up titers requires careful planning in order to meet the deadlines for clinical placement.

Note:

Medical documentation is submitted via student upload to a secure site for review by the Health and Wellness Center's Professional Health Staff. Non-medical documentation is uploaded for review by the Program Director.

Failure to comply with the health requirements by the published deadline will result in one or more of the following:

1. Suspension from clinical education with required make-up of days missed.
2. Withdrawal of housing privileges if a Residence Hall resident.
3. A "hold" placed on the student's status at NCC.
4. Withdrawal from the Program

Second-year health requirement:

Students are required to have their annual TB (tuberculosis) test prior to the fall semester. The deadline for the submission of the results is approximately three (3) weeks prior to the fall semester start. The exact date will be communicated to students during the summer semester. Failure to submit the results on time will result in suspension from the clinical education setting until the results are on file. Make-up time will be required. Failure to comply is a violation of the affiliation agreement with the clinical sites.

Holding Patients or Image Receptors

Students must employ proper radiation safety practices including, but not limited to, time, distance and shielding.

Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.

Holidays and Clinical Education

Clinical education will not be scheduled, and students may not volunteer to participate in clinical rotations, on the following College holidays: Labor Day, Thanksgiving Day, the day after Thanksgiving, Christmas Day through New Year's Day, Dr. Martin Luther King Day, Memorial Day, and July 4th.

Housing

Space is available on campus for students in the residence hall. There is also a list of off-campus housing opportunities available in the Student Activities/Housing Office, College Center 252, 610-861-5324.

Identification Badges

The Identification badge is considered to be part of the student's uniform. Some clinical sites provide an ID while others require the students to wear their NCC student ID. The badge must be worn at all times at the clinical site. Failure to comply with wearing the identification badge will result in the following:

- Removal from clinical education for the day with make-up time required.
- Repetitive failure to comply with the dress code will result in suspension.

Image Critiques

Philosophy:

Image critiques are a valuable part of the student's clinical educational experience. The critique is an evaluation of the student's ability to critically think, problem solve, and to blend all the information together that they have learned in a presentation or surprise critique. The purpose of the written portion of the assignment is to reinforce writing skills.

Location of presentation:

The image critiques are held at the students' clinical sites.

Schedule for image critiques:

The schedules include: Date of the image critiques, Starting time, Student names, Topics of the major and minor critiques.

Posting of image critique schedules:

The image critique schedules are posted in the radiology department.

Note: A copy of the form is forwarded to the Clinical Education Coordinator at NCC.

Semesters when the student must do their critique sessions/writing assignment:

Clinical Practice II—spring semester, first-year

Clinical Practice III—summer session, first-year

Clinical Practice IV—fall semester, second-year

Clinical Practice V—spring semester, second-year (transfer site comparison/contrast paper)

Timeline for presentations:

Generally, the Clinical Preceptors schedule the image critiques during the last half of each semester or summer session.

Audience:

The audience may consist of classmates, staff radiographers, clinical preceptors, radiologists, and if possible the Clinical Education Coordinator and/or the Program Director.

Grading of image critiques is done using the following 12 descriptors from the grade sheet:

- Patient history: Able to describe from admission to discharge
- Patient's description: Age, sex, body habitus, etc.,
- Positioning: Able to describe the patient's set-up for procedure
- Exposure factors/indices and equipment used: Able to discuss
- Radiation protection: Able to discuss principles and application
- Anatomical structures: Able to identify - knows if visualized
- Pathology or disease process: researched and able to explain
- Density and contrast: able to apply principles for image improvement
- Artifacts on the image: identifies and describes how to prevent
- Evaluation of image: able to suggest methods for improvement
- Communication/presentation skills: including medical terms
- Question and answer session: entire group (peers and preceptors)

There is a separate grade for the writing assignment using a rubric.

Number of critiques per semester or summer sessions:

Each student is required to do one (1) of each of the following:

Major critique

Minor critique

Surprise critique/activity from the Clinical Preceptor

Major image critique:

The major image critique is an **extensive** report on a particular procedure/study and must include all the items on the "Image Critique/Image Evaluation" sheet.

Some examples:

Head work/Facial bones

GI series

Hip pinning

Minor image critique:

The minor image critique is usually shorter than a major image critique. Consult with your Clinical Preceptor to make sure that all the expectations are met.

Some examples of some minor image critique topics are:

Specific position

Specific radiographic view

A positioning or technique problem

Artifacts

Positions or techniques related to pathology or trauma,

Quality control testing methods, etc.

Problem that has stimulated the interest of the student

Surprise image critique: The Clinical Preceptor will present the topic to the student for an immediate response/solution as appropriate. As a general rule of thumb, the surprise image critique usually **does not or may not** cover all 12 image critique items.

Some examples:

Artifacts—identify, discuss

Critical thinking exercise—synthesize all the information and either form a solution or demonstrate how something should be done.

Problems solving exercise

Room set-up

Note:

This surprise critique may focus on a student's area of weakness.

Picking topics:

This may be done in one (1) of two (2) ways: The student picks their own topic.

Clinical Preceptor has the option to assign the topic(s) to the student.

When choosing a topic for a major, minor, or surprise image critique, the student and/or Clinical Preceptor should consider the following:

The student's level of experience in didactic/clinical education.

Approval of topics

The Clinical Preceptor must approve the topics for the major and minor image critiques.

The student presenter is expected to do the following:

- Collect the images (do not use the ones in the NCC teaching files on campus — the idea is to have the students learn how to retrieve the images at the clinical site).
- Utilize other imaging modalities, such as CT, MRI, and Interventional studies when possible.
- Make copies of images only if the clinical site allows it.
- Do not breach HIPAA guidelines for patient privacy: anonymize the images (remove patient identifiers).
- Check with your Clinical Preceptor on how to use the medical records department, the library and the teaching file at your clinical site for research purposes and adhere to HIPAA guidelines.
- Thoroughly research the information on the topic that has been chosen.
- It is good to have normal and abnormal images when a disease process is being presented.
- Use diagrams when and if you feel that it is appropriate.
- Be as creative and interesting as possible.

Follow the check list on the "Image Critique Evaluation." Check with your Clinical Preceptor to find out if they want you to follow the check list in any particular order. All 12 areas on the check list must be covered, but the way the information is presented is up to the Clinical Preceptor(s) at that particular clinical site.

Point value:

See the syllabus for the applicable Clinical Course.

Missed image critique:

A telephone call is required on the day of absence as described in the Personal Day/Lateness policy. If no phone call is received, a "0" grade will be assigned. If a phone call is received, the missed critique is to be made up on the first day back to clinical practice or at the discretion of the Clinical Preceptor. 10% will be deducted from the total score.

Image critique writing assignment:

In addition to orally presenting image critiques, the student are required to submit a written paper covering their major and minor image critiques. This paper should be used to organize the student's thoughts, oral presentation techniques, and further prepare for their critiques.

Guidelines:

1. The text of the paper will consist of these main parts:
 - a. Covering descriptors 1-10 from the "Image Critique/Image Evaluation" Grading Sheet for the Major and Minor Critique.
 - b. Format/Neatness/Grammar/Parenthetical citations/Works cited will be assessed.
 - c. Double-spaced.
 - d. All borders should be 1 inch.
 - e. Include page numbers
2. Overall organization and flow of the paper will be graded as well
3. Students must submit their research paper electronically to the Clinical Education Coordinator in the manner described in the course syllabus.

Correlate your paper with the grading sheet.

Trajecsys:

The grades for the major, minor, and surprise evaluations are entered into the Trajecsys system by the Clinical Preceptor. The written assignment grade is entered into Trajecsys by the Clinical Education Coordinator.

Incomplete Policy

An incomplete grade of "I" is given only when a student has obtained the permission of the instructor to postpone completion of specific course work for a valid reason (illness, death in the student's immediate family, etc.).

The deadline for completing the course requirements is no more than five months—or sooner as designated by the instructor—after grades were due in the semester in which the "I" grade was issued. If the "I" grade is not changed within that period through your completion of applicable course work, it will be changed to an appropriate grade. The instructor may designate that the "I" become a specified letter grade. The grade may not be a W, WP, or WF.

Insurance (Personal Health and Liability)

Health insurance coverage is required throughout the duration of the program. Documentation of coverage must be uploaded for review by the Health Center when starting the program and whenever there is a policy change or an updated insurance card is received. Lapse of coverage will result in suspension from the clinical practice setting until documentation is received. The missed time will need to be made-up.

The College shall maintain liability (malpractice) insurance, purchased by the student, in the following amounts: a minimum of \$1,000,000 for each claim and \$5,000,000 aggregate. The course fee for each Fall semester clinical practice course includes the annual fee for the malpractice insurance.

JRCERT Allegations of Non-Compliance with the JRCERT Standards

For information about the JRCERT Standards, go to:

- www.jrcert.org

If a student thinks that the radiography program is not abiding by the JRCERT standards and wants to lodge a complaint with the JRCERT, they may contact the JRCERT directly via www.jrcert.org.

The JRCERT's contact information is also included on page 1 of this handbook.

In response to the allegation the program will do the following:

- Document the allegation for the program files
- Come to a resolution
- Document the outcome

**Lambda Nu**

National Honor Society for the Radiologic and Imaging Sciences.
Arkansas State University, Box 910, State University, AR 72467-0910, 870-972-3073, Fax 870-972-2004
rwinters@astate.edu, <http://www3.astate.edu/conhp/lambdanu/>

**BY-LAWS
OF THE PENNSYLVANIA DELTA CHAPTER OF LAMBDA NU****Article I
Name, Location, and Color Identity**

The name of this organization is the **Pennsylvania Delta Chapter of Lambda Nu**, the national honor society for the radiologic and imaging sciences.

This Chapter is established at **Northampton Community College, Bethlehem, Pennsylvania.**

$\lambda\nu$

Lambda Nu's name is derived from the lower case Greek characters in the formula $\lambda\nu$, which represents the physics of the inverse relationship between wavelength (λ) and frequency (ν), an essential parameter across the diversity of modalities comprising the professions.

ΛN

In a similar manner, Lambda Nu uses the upper case Greek characters Λ and N to represent the inverse relationship and delicate balance required between the art and the science inherent in the radiologic and imaging sciences professions of radiography, radiation therapy, nuclear medicine, diagnostic medical sonography, cardiovascular-interventional technology, mammography, computed tomography, magnetic resonance imaging, quality management, and bone densitometry.

Lambda Nu's colors are maroon for the radiologic sciences, forest green for the health professions, and gold, the ancient color of honor.

**Article II
Purpose**

The purpose of this Chapter is to:

- ❖ foster academic scholarship at the highest academic levels
- ❖ promote research and investigation in the radiologic and imaging sciences
- ❖ recognize exemplary scholarship

**Article III
Membership**

Radiologic and imaging sciences students, alumni, and faculty qualify for membership according to the following standards:

- Section A. Professional course GPA 3.5 or higher on 4.0 scale after one full time semester (or equivalent – summer clinical practice is not a stand alone semester) of the professional program.
There can be no grades of “F” in a professional course(s) in order to become a member or to maintain a membership. This will become effective with the Radiography and Sonography students entering their professional courses during the fall semester of 2010.
- Section B. Enrollment in a radiologic or imaging sciences program as a full time student for at least one term.
- Section C. Evidence of professional commitment beyond minimum requirements of the program, including, but not limited to:
 GPA higher than Chapter minimum
 actively pursuing an independent research project
 active membership in a professional organization, as evidenced by:
 holding office or committee appointments
 preparing for presentation of a professional paper or poster
 preparing for competition in a Quiz-Bowl
 clinical-based employment in a radiologic or imaging sciences field
- Section D. An invitational letter will be sent to eligible students.
- Section E. Faculty members are eligible for membership upon meeting the following criteria:
 actively teaching at the institution of the above chapter (full time, part time, adjunct, or guest faculty)
- Section F. All members must register and pay national dues as well as meet all Chapter obligations.
- Section G. Exemplary honors may be achieved upon evidence of advanced professional recognition (i.e., academic paper or poster presentation, publication, etc.)
- Section H. After induction into the honors society, the member is required to maintain his or her 3.5 GPA per semester.
- Section I. If a member's GPA for a semester drops below a 3.5, he or she will be sent a letter and have one semester probationary term to build up his or her GPA up to 3.4 or higher.
- Section J. During the probationary semester, he or she will retain membership benefits.

Article IV Officers

- Section A. Each Radiologic Science Program will have its own officers.
- Section B. Only members in good standing may hold an office.
- Section C. The President of this organization may not be President of another campus organization.
- Section D. The duties of the President, are:
 1. represent the Chapter, behave, and speak only in its best interest
 2. carry out purposes of the organization
 3. act to ensure the welfare of the organization
 4. preside at business meetings
 5. service as ex-officio member of all committees

Section E. The primary duty of the Vice-President is to assume the duties of the President in the event of absence, incapacity, or resignation.

Section F. The duties of the Secretary are to record and preserve the proceedings and records of the organization.

Section G. The duties of the Treasurer are to keep accurate financial records, provide for the safekeeping of funds, and assure expenditures are according to the by-laws and the will of the Board and membership.

Section H. Officers assume their duties at the beginning of the second fall semester.

Section I. In the event of a vacancy in any office, the President will appoint an active member to fill the vacancy.

Article V Executive Board

Section A. The members of the Executive Board include all officers of the Chapter and the chairpersons of all standing committees.

Section B. A university faculty sponsor shall be appointed by the Department Chair and shall serve as an ex-officio member of the Executive Board. Ex-Officio members do not have voting rights but have the right to attend all meetings and consultations of the Executive Board and must be notified of all such meetings and consultations.

Section C. The duties of the Executive Board are to carry out the work of the Chapter between meetings of the membership.

Article VI Meetings

Section A. The membership shall meet at least once per academic year (August – May).

Section B. The following business will be conducted at least once per year:

1. induction of new members
2. election and installation of new officers
3. conduct the business of the organization
4. planning or participation in one campus or community charitable event without profit to the organization
5. planning or participation in one social event

Section C. A quorum for the purpose of conducting business will consist of those members present at a meeting announced by the Executive Board through posting a notice and making announcements in class.

Article VII Elections

Section A. The election of officers shall occur once per academic year (August – May).

Section B. A call for nominations for office shall be made to the membership at least 7 days prior to the election. Nominations may be verbal or written but require seconding by another member and acceptance of the nomination by the candidate.

Section C. Elections shall be by secret ballot of all members currently registered for classes at the time of the election.

Section D. Elections shall occur by a method announced at least 7 days in advance by the Executive Board (i.e., in person during a meeting, in-class ballot distribution, via email, or other means)

Article VIII Dues and Finances

Section A. Dues for students shall be a one-time fee of \$40.

1. \$20 shall be forwarded with the proper application form to the national Lambda Nu Chapter for registration and issuance of an individual membership certificate. This is a one-time fee required by the national office.
2. \$20 shall be deposited in the Chapter account

Section B. All Chapter fund expenditures must have the approval of the president of the Chapter and the faculty sponsor.

Article IX Standing Committees

Section A. A Program Committee will plan and conduct induction of new members and officers as well as academic, charitable, and social events.

Section B. A Scholarship Committee will plan and conduct all scholarship activities, including, but not limited to monetary awards, exemplary recognition of members, and a forum for presentation of academic and research projects.

Section C. Ad-hoc committees may be established as necessary by the President upon ratification by a majority vote of the Executive Board.

Section D. Committee Chairs are appointed by the President upon ratification by a majority vote of the Executive Board. Committee Chairs serve at the pleasure of the President but can be replaced only upon ratification by a majority vote of the Executive Board.

Article X Parliamentary Authority

Business of the Chapter shall occur according to parliamentary procedure practices as described in *Sturgis' Standard Code of Parliamentary Procedure*. This includes the transaction of business in meetings of the membership and the Executive Board.

Article XI Amendments to the By-Laws

Section A. Proposed by-law amendments must be distributed to all members currently registered for classes by a method approved by the Executive Board at least 7 days prior to the meeting at which the proposal is to be presented for vote.

Section B. A 2/3 majority is required of those voting for a by-law to become effective.

Article XII Validity of By-Laws

These by-laws are valid only when they have been accepted by the national Lambda Nu office.

Mack Library

The Mack Library on the fourth floor of the College Center has both print and non-print materials including books, magazines, newspapers, audio/visual materials, hardware and software. Lounge areas, individual study compartments, and Internet access are available as well as audio/visual equipment. Some of the audio/visual materials are located in the Gary Wogenrich Laboratory in Commonwealth Hall.

Mammography Rotations

The Program will make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, the Program will not attempt to supersede clinical site policies that restrict breast imaging rotations/procedures to students. Students are advised that placement in a breast imaging rotation is not guaranteed. Students should be aware that there are various employment opportunities, and potential barriers, that may affect their ability to work in a particular clinical staff position.

Logging Radiographic Procedures- Guidelines

Philosophy:

Logging helps students prepare to do a competency procedure. The only way to become competent is through repeated practice of the procedure(s). Radiography is an experience based profession. Furthermore, when competency has been validated, it is important for students to keep performing the procedures in order to reinforce their proficiency.

Purpose:

Logging is the documentation of *hands-on practice* in radiographic/fluoroscopic examinations under the direct supervision of a certified radiographer in preparation for validation of competency. Once competency has been validated, the student can practice/perform that procedure under indirect supervision.

Logging is available in Trajecsys and can be used by the student at any time to record rare procedures.

Note: Procedures do not have to be logged prior to attempting the competency evaluation.

Markers for Clinical Education

Students are required to utilize radiographic markers to properly mark each radiographic procedure they perform. Markers may be provided by the clinical education setting, if not, students have to purchase their own. Failure to properly mark and/or identify a radiograph is a potential medical/legal problem and result in a possible negligence case. Non-compliance will be handled through the Corrective Action Plan. Markers should include 3 initials for identification purposes and the **right** marker must be **red**.

Meals/Breaks during Clinical Education

The College's staff and students have access to the dining facilities at the clinical education setting. Each student shall have the same amount of time for lunch and the scheduled time is determined by the Clinical Preceptor, not the student.

Even though students may want to eat together, sometimes this may not be possible. For example, if you are in the middle of a case, you would not leave; or if the case is rare, it would be more beneficial to stay for the exam and go to lunch at a later time.

Medical Restrictions-Light Duty

Any injury or medical condition that restricts a student to "light duty" may present an increased risk of harm to the student and/or the patient in the clinical setting. If a student cannot perform any of the functions stipulated in the standard "Essential Functions of a Radiographer", or if the clinical site requests that the student not provide patient care, the student shall follow the guidelines for Medical Leave of Absence.

Misconduct (Student Non-Academic)

See the *NCC Student Handbook* or the *College Catalog* for details related to the student code of conduct. Also see the following policies in this handbook: "Professional Conduct" and "Withdrawal of Students from the Clinical Education Setting".

Misdemeanor/Felony (ARRT Pre-Application Review)

The ARRT investigates all potential violations in order to determine eligibility to take the registry examination. Such investigations can cause delays in processing exam applications. Students can avoid delays by requesting a pre-application review of the violation before or during training, rather than waiting until completing the educational program. The ARRT will rule on the impact of the violation on eligibility for ARRT registration. Once eligibility is established, the candidate can proceed with fulfilling program requirements with the knowledge that they can take the exam. **Give a copy of the ARRT's response letter to the Program Director for the registry application sign-off process.**

The pre-application review form is downloadable from the ARRT web site: www.arrt.org, or you may request a copy by phoning the ARRT at 651-687-0048. This information will remain confidential.

Mistreatment at the Clinical Education Site

If there is an issue of student mistreatment by a staff person at the clinical site, the student should complete an incident report form and submit it to the Program Director or Clinical Education Coordinator for follow-up. The "Incident Report" form is included with the other program documents on Trajecsys.

At the completion of fact finding by the Program, the Radiology Administrator will be approached if the issue cannot be resolved and warrants that level of intervention or disciplinary action.

Off-Hours Use of Wogenrich Lab

The radiography students may use the Gary Wogenrich Lab facilities during off-hours to practice for practical examinations or to study in groups. Open lab times are: Monday –Friday 5:00pm – 10:00pm
Saturday & Sunday 9:00am – 9:00pm

Students requiring access to the Radiography Program facilities during off-hours (outside the hours of 7:30 a.m. to 5:00 p.m. on Monday through Friday) may have to contact Public Safety to unlock the building or lab door. Public Safety can be reached at 610-861-5588, please have your NCC photo ID to ensure access.

There are computers for student use in the lab area.

Magnetic Resonance Imaging (MRI)

The presence of ferromagnetic non-removable devices, implants etc. does not prevent a student from completing the radiography program. All accepted students must complete the MRI Safe Practices **Screening Form (next section)** as part of the pre-clinical documentation to ensure that:

1. the student is aware of the hazards associated with the MRI environment
2. the student may safely enter the MRI environment
3. the clinical staff do not unintentionally place the student in an unsafe environment.

Prior to a student's rotation in MRI, the clinical staff will review the student's suitability for safely rotating in the area in accordance with the hospital protocol in place at that time. If the screening flags an area of concern, additional screening may be necessary that could require a physician's order e.g. pre-MRI orbit radiographs.

Magnetic Resonance Imaging (MRI) Safe Practices Information, Screening and Acknowledgement

The magnetic and radiofrequency fields utilized in MRI imaging can be hazardous. The system uses a very strong magnetic field that may be hazardous to individuals entering the room if they have certain metallic, electronic, magnetic or mechanical implants, devices or objects. Remove all metallic objects before entering the MRI environment. These objects include hearing aids, pager, cell phone, keys, eyeglasses, hair pins, barrettes, jewelry (including piercings), watch, safety pins, paperclips, bank/credit cards, any magnetic strip card, coins, pens, pocket knives, nail clipper, steel toe or shanked boots/shoes and tools. To ensure student and patient safety during educational rotations in the MRI environment, carefully complete the following screening and read the information section covering specific equipment restrictions. **Any “yes” response needs to be evaluated and signed off by appropriate clinical personnel before the student is permitted to rotate in the modality. Students MUST notify the program and the appropriate MRI personnel of ANY change in their status before rotating in MRI.**

1. Have you ever had an injury to the eye involving a metallic object or fragment (e.g., metallic slivers, shavings, Yes No foreign body) or worked around metals?
If yes, please describe _____
2. Do you have any implanted devices? E.g. morphine or insulin pump, other infusion pump, bone stimulator, Yes No tens unit, leads, penile implant, ear implants (cochlear or stapes), pacemaker or pacer wires, internal defibrillator (ICD) etc.
If yes, please describe _____
3. In the past 2 weeks have you had an endoscopy procedure, GI clips, video capsules or GI bleed? Yes No
If yes, please describe _____

WARNING: Certain implants, devices or objects may be hazardous to you and/or may interfere with the MRI equipment.
The MRI system magnet is ALWAYS on.

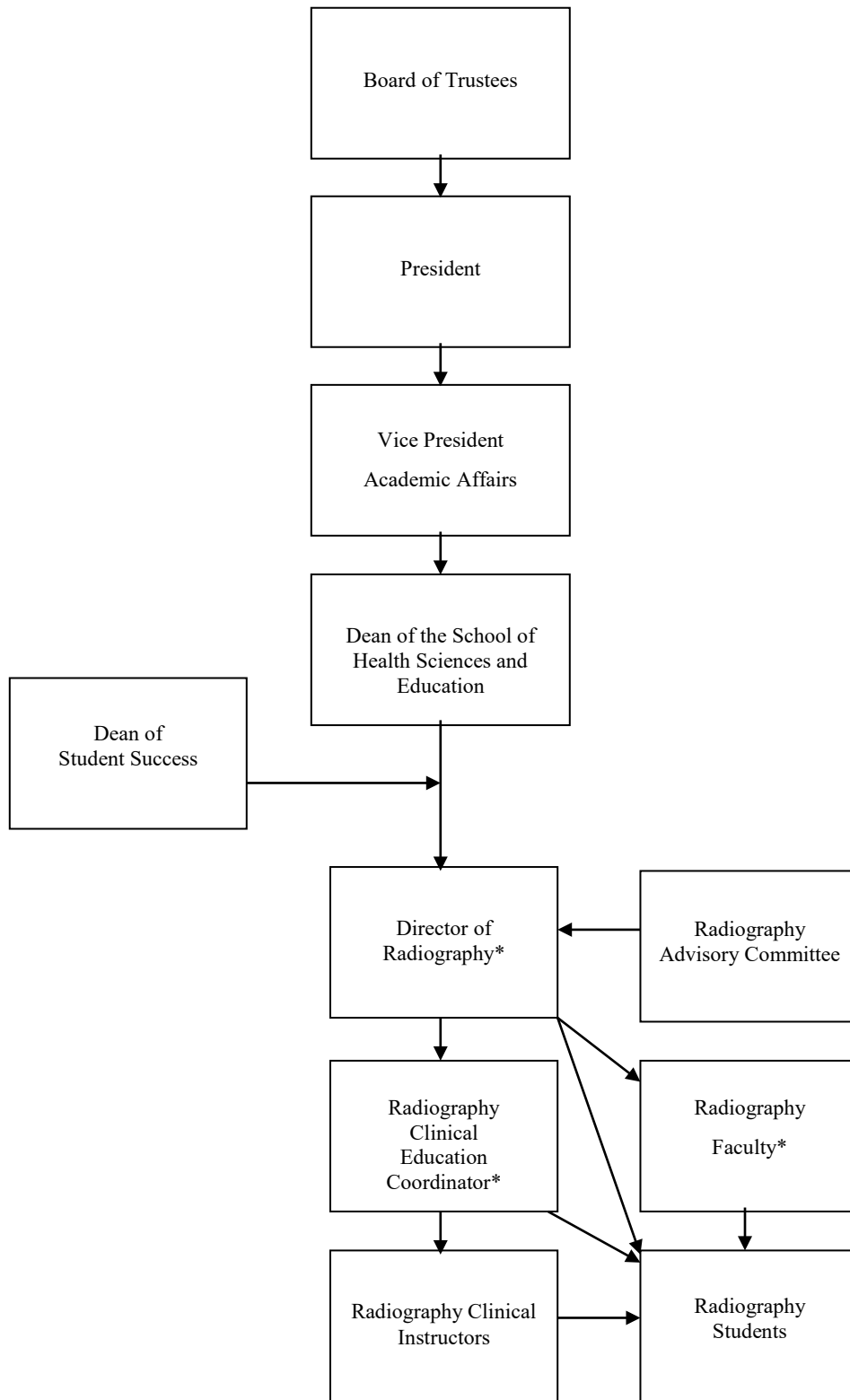
Please indicate if you have any of the following:

- | | | | | | |
|------------------------------|-----------------------------|---|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Vascular or Aneurysm Clips | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Radiation seeds or implants |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Gunshot wound or shrapnel injury | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Wire mesh implant |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Surgery in the past 8 weeks | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Tissue expander (e.g., breast) |
| | | Artificial limbs, metal implants, screws, rods, | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Heart valve prosthesis |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | plates, prosthesis or joint replacement | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Eyelid spring or wire |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Neurostimulation system | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Metallic stent, fiber or coil |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Spinal cord stimulator | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Shunt (brain or spine) |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Internal electrodes or wires | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Pregnant, suspect pregnancy or breast feeding |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Bone growth/bone fusion stimulator | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Body piercing jewelry |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Vascular access port and/or catheter | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Tattoo(s) or permanent makeup |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Medication patch or metallic ointment | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Other items of concern _____ |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | IUD, diaphragm or pessary | | | |

Please consult the MRI technologist if you have any questions or concerns BEFORE you enter the MRI system room.

There are special items marked MRI safe. Those items are allowed to come into the MRI rooms. This includes special carts, special IV poles, special beds, special wheelchairs, etc. do not let anyone bringing unmarked hospital equipment into an MRI room unless you are absolutely sure the equipment is safe in the room. Hospital employees must also be cleared to go into the rooms. They must check their pockets for scissors, pens, any kind of clips, any medical metal pieces, any items in their hair like bobby pins, etc. Masks used throughout the hospital contain a metal strip across the bridge of the nose. Those masks must either be replaced with an approved unit or have the metal strips removed. As a student, safety protocol is also your responsibility. Be conscious of all the safety rules and when in doubt, ask a tech.

Organizational Chart (Radiography Program)



*constitutes the Radiography cluster

Orientation to the Clinical Site – First Day

On the first day of clinical practice, after the first three weeks on-campus, the Clinical Preceptor(s) will arrange an orientation to the clinical site that will include at least the following topics:

- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions
- Dosimeter storage area if the site issues dosimeters

Parking at the Clinical Sites

Parking is available at each clinical education setting. Specific parking regulations vary and will be explained by that site's Clinical Preceptor.

Patient's Bill of Rights

There is not one single Patient's Bill of Rights. A typical example follows and serves to acquaint you with the rights and expectations of patients as well as the clinical site where you will be assigned.

We consider you a partner in your hospital care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible. This hospital encourages respect for the personal preferences and values of each individual.

While you are a patient in the hospital, your rights include the following:

You have the right to considerate and respectful care.

You have the right to be well-informed about your illness, possible treatments, and likely outcome and to discuss this information with your doctor. You have the right to know the names and roles of people treating you.

You have the right to consent to or refuse a treatment, as permitted by law, throughout your hospital stay. If you refuse a recommended treatment, you will receive other needed and available care.

You have the right to have an advance directive, such as living will or health care proxy. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have written advance directive, you should provide a copy to the hospital, your family, and your doctor.

You have the right to privacy. The hospital, your doctor, and others caring for you will protect your privacy as much as possible.

You have the right to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.

You have the right to review your medical records and to have the information explained, except when restricted by law.

You have the right to expect that the hospital will give you necessary health services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.

You have the right to know if this hospital has relationships with outside parties that may influence your treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.

You have the right to consent or decline or take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.

You have the right to be told of realistic care alternatives when hospital care is no longer appropriate.

You have the right to know about hospital rules that affect you and your treatment and about charges and payment methods. You have the right to know about hospital resources, such as patient representatives or ethics committees that can help you resolve problems and questions about your hospital stay and care.

You have responsibilities as a patient. You are responsible for providing information about your health, including past illnesses, hospital stays, and use of medicine. You are responsible for asking questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment, you are responsible for telling your doctor.

This hospital works to provide care efficiently and fairly to all patients and the community. You and your visitors are responsible for being considerate of the needs of other patients, staff, and the hospital. You are responsible for providing information for insurance and for working with the hospital to arrange payment, when needed.

Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of life-style on your personal health.

A hospital serves many purposes. Hospitals work to improve people's health; treat people with injury and disease; educate doctors, health professionals, patients, and community members; and improve understanding of health and disease. In carrying out these activities, this institution works to respect your values and dignity.

Practice Standards by the American Society of Radiologic Technologists (ASRT)

Go to www.asrt.org to read about the profession's practice standards for radiographers.

Practical Evaluations in Lab on Campus

The practical evaluations that are performed in the laboratory setting at NCC help to facilitate the transfer of the student's knowledge to the clinical practice setting. The goal in performing the practical evaluations is to help prepare the student to be more successful in completing the clinical competency evaluations.

When you have passed your lab practical, you are eligible to do a competency evaluation on that procedure/exam.

Pregnancy Policy/Procedure

In accordance with U.S. Nuclear Regulatory Commission (NRC) Regulatory Guide 8.13, the following pertains to a pregnant student:

- If you decide to voluntarily declare pregnancy, you must do so in writing.
- You have the option to continue in the program without modification.
- You may withdraw your declaration of pregnancy, which also must be in writing.

If you decide to voluntarily disclose your pregnancy, use form NRC 8.13-8 (form letter for declaring pregnancy available in the Program Director's office or on Trajecsys) or develop your own format. Whatever format is used, the month and year you became pregnant must be included. In the absence of this voluntary, written disclosure, a student cannot be considered pregnant.

You do have the option to continue the educational program **without modification** or interruption, or you may do one of the following:

1. make modifications in your clinical assignments.
2. take a leave of absence from your clinical assignments.
3. take a leave of absence from the program.
4. develop your own plan with reasonable accommodations developed in collaboration with your physician, and the radiation physicist/radiation safety officer at the clinical education setting.

If you want reasonable accommodations to be made as quickly as possible, in addition to the written disclosure, you will need to submit to the Program Director the program's "Pregnancy Information Sheet" completed in a timely fashion by your physician. The form asks for the following information:

1. how many months pregnant you are.
2. the name of your physician.
3. whether your physician advises you to continue in both the academic and clinical portions of the program. If periodic evaluations are recommended above and beyond what is considered normal for the "average" pregnancy, what reasonable accommodations will be needed? What reasonable accommodations are you and your physician recommending for your pregnancy?
4. what is your anticipated date of return to the program following the delivery of your baby? (Remember to submit your physician's release to return to classes and/or clinical practice to the NCC Health Center.)
5. consult with your physicist (radiation safety officer) at your clinical education setting. Wear a fetal monitor (baby badge) at the clinical education setting in addition to your regular dosimeter.
6. submit your individualized plan to meet the program requirements and help us to reasonably protect both you and your baby.

The basic premise is that you need to make an informed decision based on your individual needs and preferences. You will then need to write your plan in a timely fashion using either the suggested accommodations from above or developing your own reasonable accommodations in consultation with your physician and the radiation physicist/radiation safety officer. The written plan is then submitted to the Program Director, Clinical Education Coordinator, and Clinical Preceptor for approval.

In addition, the student shall:

1. review all radiation protection information covered in the program and at the clinical education setting.
2. meet with the clinical education setting's consulting radiation physicist or radiation safety officer for the purpose of in-service training and counseling on pregnancy/prenatal exposure.
3. obtain an additional dosimeter (known as a baby badge) that must be worn at all times while in a radiation area in the clinical education setting.

Upon approval of the plan, the Program Director, Clinical Education Coordinator, and Clinical Preceptor will see that requested reasonable accommodations are made for the unborn child and the mother.

After the baby's birth, the student's written medical release from her physician needs to be submitted to the NCC Health Center in order to return to both the didactic and clinical education components of the program, and if you took a leave of absence, contact the Clinical Education Coordinator in order to revise the schedule in order to make up rotations and missed evaluations. If possible, we will try to see that you graduate and have your pinning ceremony with your class.

Professional Conduct Policy

Documented evidence of a student's failure to conduct themselves in accordance with professional codes of conduct (e.g. Program, College, Departmental and Host Facility Codes of Ethics, Codes of Conduct, Policies on Clinical Procedures, Departmental Policies and Procedures, etc.) will result in serious academic penalties up to and including failure of the course and/or dismissal from the program. If a student wishes to appeal any action taken under this policy they should follow the procedures listed in the NCC Student Handbook, or the College Catalog, and other applicable policies listed in this handbook.

Professional Conduct includes, but is not limited to, the following behaviors:

- Students will communicate and interact with one another, faculty and clinical staff in a respectful, professional manner. In a classroom or clinical setting, students should grant each other time to speak uninterrupted. Students should also avoid interrupting instructional time with conversation.
- Students shall abide by NCC's Discrimination, Harassment, and Sexual Misconduct Policy when interacting with their fellow students, faculty, and clinical staff.
- Students shall avoid engaging in unwelcome harassing behavior or verbal, written, and/or online conduct that deprives another person of the loss of education access, opportunities, rights, and/or peaceful enjoyment therefrom.
- Students shall avoid any intimidating speech directed at a specific individual in a face-to-face confrontation that is likely to provoke a violent reaction.

- Recognizing that personal relationships and/or being too friendly with staff technologists and staff can create misconceptions of favoritism, professional interactions must be maintained at all times.

Violation of this Policy may result in a student being asked to leave or being escorted off the clinical site or NCC campus by Public Safety. This behavior will also require a conference with the Clinical Education Coordinator and the Program Director, as well as the Dean of Health Sciences and Education, the Title IX Officer, and/or the Dean of Students.

Avoidance of gossip:

Gossip is an activity that can corrupt, disrupt and distract a fellow student's effectiveness, productivity, moral, and overall happiness. It has the potential to destroy an individual and is counterproductive to an organization. Most people involved in gossip may not intend to do harm, but gossip can have a negative impact as it has the potential to destroy a person's, or organization's, reputation and credibility. Gossip includes:

- Talking about a person's personal or professional life when they are not present.
- Negative, unsubstantiated, untrue, or disparaging comments or criticisms of another person or persons.
- Creating, sharing, or repeating information that can injure a person's credibility or reputation.
- Creating, sharing, or repeating a rumor about another person, or creating, sharing or repeating a rumor that is overheard or hearsay.

Program Director's Responsibilities

The Program Director will:

- assure effective program operations
- oversee ongoing program assessment
- participate in budget planning
- maintain current knowledge of the professional discipline and educational methodologies through continuing professional development
- assume the leadership role in the continued development of the program.
- develop, implement, supervise, evaluate and revise the program curriculum and programs in the area of community service and continuing education in radiology.
- counsel faculty and staff and make recommendations concerning development and offering of orientation programs for new faculty, part-time faculty, and Clinical Preceptors.
- assign faculty instructional and coordination responsibilities.
- counsel students and utilize referral programs to ensure that students who require additional counseling are directed to appropriate College personnel.
- assist with and encourage student activities.
- assist with the recruitment, interviewing, and selection of students.
- schedule appropriate student clinical education.
- maintain adequate student records.
- implement and support Continuous Improvement Initiative Assessment Cycle.
- prepare a list of special assignments that reflect institutional and individual goals and ambitions appropriate to the position and the administrative team.

- maintain cooperative working relationships with College personnel, affiliate hospitals, appropriate community, state, regional, and national groups, agencies, and professional organizations.
- function as an active member of the administrative team.

Program Director (Registry Application)

The meeting with the Program Director to verify Registry eligibility occurs during the latter part of Clinical Practice V. The following is validated as having been completed:

- Competency evaluations
- General patient care simulations
- Course requirements for the AAS degree

If all the program requirements for graduation are completed, or can be completed, by the date that grades are due for graduation eligibility, the Program Director validates the student's Registry application.

Program Meetings

Mandatory program meetings are scheduled at the beginning of each semester and the summer session. The purpose of the program meeting is to distribute the clinical practice course syllabus, and rotation schedules. The assessment techniques, additional clinical information, policies/procedures, and any other issues at hand are discussed. Student attendance is mandatory.

Consequence for not showing: A personal day will have been used and make up is required. A meeting with the Program Director will also need to be scheduled in order to be updated on the missed material.

Progress Reports (Didactic)

Either a satisfactory (S) or an unsatisfactory (U) grade will be issued approximately six (6) weeks into the fall or spring semester (summer sessions are not applicable). A letter grade is issued at the end of the semester.

Conferencing occurs between the course instructor and every student earning a U. The goal is to help that student be successful in that course. Progress reports are not part of the final course grade, they are used as a tool to address potential issues early.

Although progress reports are not generated by the Records office during the summer months, the Clinical Preceptors are to report concerns to the Program Director and/or the Clinical Education Coordinator by July 3rd.

Radiation Safety Policies and Procedures-Holding Patients/IRs

Students must employ proper radiation safety practices including, but not limited to, time, distance and shielding.

Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.

Radiation Safety Policies and Procedures (Wogenrich Laboratory)

Energized radiographic equipment can be dangerous when used inappropriately. Misuse of the equipment and inappropriate behavior will result in withdrawal from the Radiography Program.

Students must comply with the following rules and regulations:

- Dosimeters are to be worn at all times during clinical rotations and the laboratory sessions. No student will be permitted to remain in an energized laboratory without their dosimeter.
- If you do not have your dosimeter for clinical, you will be sent home and charged with an absence (personal day). The dosimeter is a vital component of your dress code.
- If you are pregnant, you may voluntarily disclose your pregnancy. Disclosure must be in writing, and you may also rescind your disclosure at any time, which also must be in writing.
- You are not to make radiographic exposures unless an instructor is present.
Note: The exposure buttons on radiographic units are disabled when the instructors are not in the lab area. You will be able to practice with the units, but the exposure buttons will be disabled when no instructor is present.
- Exposures are never to be made when the door to the radiographic room is open.
- The radiographic room door is to be locked prior to making an exposure.
- If the door to the radiographic room is closed, always knock before attempting to enter.
- If you notice that the equipment is not working properly, report your findings to a faculty member immediately.
- Malfunctioning equipment is never to be used.
- As a student, you are never to attempt to repair the equipment.
- Friends, relatives, colleagues, or pets are never to be exposed to ionizing radiation in the lab.
- Students are encouraged to utilize the Wogenrich Laboratory outside of scheduled class time.
- Students are responsible for the return of any equipment and all accessories (phantoms, cassettes, etc.) to their proper place.
- All equipment and the appropriate circuit breakers will be turned off before leaving the laboratory. Refer to the posted startup/shutdown informational pages.
- The lab area must be cleaned/organized before leaving for the day. Failure to clean-up will be reflected in the course grade.

Radiographic Units (Wogenrich Laboratory) Department of Environmental Protection Commonwealth of Pennsylvania

The certificate of registration for the radiation producing machines is posted above the dosimeter board in the common area of the radiographic laboratory and is in compliance with state regulations.

References and Letters of Recommendation

In order for a member of the program faculty to provide you with a reference, a written release needs to be submitted for your file. We as a department have agreed that we have the right to not give a reference. Therefore, it is imperative for you to ask the faculty person for permission to use them as a reference before submitting their name to the employer/educational institution. **Never** give out anyone's name as a reference without their permission. The individual who is giving you a reference needs to know ahead of time that they may be contacted regarding a reference for you. For references from the **Clinical Preceptors**, students need to check with them individually since they have to adhere to the policy/procedure for their clinical site.

References are important and can be time consuming to write, so plan to provide an updated copy of your resume and information on employment history and skills. Also, take the time to stay in touch and keep your references updated on your employment status.

Refund of Tuition and Fees

Total withdrawal from the College or withdrawal from a single course may affect your financial aid award and your eligibility for future semesters of financial aid. It is your responsibility to notify the financial aid office of changes in enrollment status. The last day to request a full tuition refund is before classes start and the percent refunded decreases quickly as the semester progresses. Check the current academic calendar for refund cut-off dates.

See the *NCC Student Handbook* and *College Catalog* for details.

Registration

Your registration is scheduled based on the number of credits you have completed. Students who have the greatest number of credit hours completed will register first.

It is your responsibility to be sure you have met all of your graduation requirements. Throughout the Radiography Program, you will be meeting with your program academic advisor, who will help you plan your coursework and have the necessary information to complete your registration.

See the *NCC Student Handbook* and *College Catalog* for details.

Registry (ARRT) Application for Certification Examination

In the latter part of the spring semester, the Program Director will meet with each second-year student to complete and sign-off the "Application for Certification and Registration" for the ARRT Radiography registry exam to be administered that year. Passport photos are a requirement for the application.

Registry (ARRT) Review Testing for Certification Examination

The Senior Review course is devoted to Registry review and testing. Some examples of resources are:

- On-line practice exercises, quizzes, and simulated Registry examination
- Review books

Repeated Courses-General College Policy

The College allows a student to repeat any course once for any reason*. This is subject to availability in limited enrollment courses (see special policy for readmission, reentry into limited enrollment courses).

A student, who fails to earn credit or to satisfy a grade prerequisite after enrolling in a course for the second time may not take the course for one academic year after the last attempt.

Grades for all repeated courses will appear on the student transcript. The credit hours for the course may be counted only once unless the course description states otherwise. Only the highest grade earned will be used in calculation of the cumulative grade point average.

Appeals to this policy may be made to the Director of Advising & Transfer Services who, in consultation with the appropriate faculty, will make a decision. Further appeals can be made to the Vice President for Academic Affairs and that decision shall be final.

*Except for Allied Health Students (refer to Academic Dismissal from Allied Health Programs Policy)

See the NCC College Catalog

Repeated Courses-Policy for Academic Dismissal from Allied Health Programs (Nursing, Dental Hygiene, Medical Assistant, Radiography, Diagnostic Medical Sonography, Funeral Service, Licensed Massage Therapy, and Veterinary Technician)

Any student who does not successfully complete two (2) courses (either two different courses or the same course twice), that carry the prefix of the student's Allied Health program, regardless of when in the program curriculum the unsuccessful attempt occurs, will be dismissed from their Allied Health program. An unsuccessful course completion is defined as a final course grade of an "F", or "W". A withdrawal due to factors unrelated to program performance, e.g. a medical leave of absence, will not be considered an unsuccessful attempt when approved by the Program Director.

Rotation Schedules for Clinical Education & Hour Limitation

A common rotation schedule is prepared, prior to the beginning of each semester/session by the Clinical Education Coordinator in collaboration with the Clinical Preceptors in order to ensure all students spend an equivalent amount of time in each diagnostic area. The schedule consists of daily "blocks" for the specific number of days in each rotation. The schedules are distributed to the Clinical Preceptors who assign the specific dates for the rotations according to staffing and patient volume availability at their site.

Copies of the schedule are distributed to the student and the Clinical Preceptor ensures that the schedule is followed. In areas where there is more than one room, the Clinical Preceptor will decide where to place the students for their optimal educational experience. Each student will receive the same rotations just in a different sequence. Clinical shifts are typically 8 ½ hours including a 30 minute lunch and a 15 minute morning break. Some sites may allow 45 minutes for lunch with no morning break. During the summer session (Clinical Practice III) shifts are 4 days per week for 10 hours a day including lunch/breaks.

Students may not be scheduled for more than 10 hours of clinical in any one day or more than 40 hours of clinical plus didactic instruction in a week.

Your responsibility:

It is the responsibility of the student to know when cases have been ordered, scheduled, announced or called for that exam room or rotation (including portables and OR). It is not up to the staff radiographer to find you in your assigned rotation. Personal days being made-up should be scheduled in the rotational area originally missed.

Rotation Schedule Changes for Clinical Education Initiated by the Clinical Preceptor

Clinical education rotation schedule changes initiated by the Clinical Preceptor must be kept to a minimum and should be considered only in the best interests of achieving clinical education objectives as opposed to radiology department objectives. The rotation schedules must provide an equitable clinical experience for each student.

Rotation Schedule Changes for Clinical Education Requested by the Student

Clinical education rotation schedule changes requested by the student must be kept to a minimum and must be approved, **in advance**, by the Clinical Preceptor. There must be adequate supervisory personnel available and the change must maintain an equitable clinical experience for each student. **Students cannot take it upon themselves to adjust their clinical schedules without approval.**

Security and Safety on NCC Campus

NCC is concerned about the safety and welfare of all individuals who study or work at the College or who visit the campus. We believe that every student, employee, and visitor has the right to be part of an environment which is safe and does not tolerate misconduct.

Urgent concerns should be reported to Campus Public Safety at 610-861-5588 (the Bethlehem Campus radio linked number) or by calling 9-1-1 as appropriate.

Non-urgent concerns may be reported via the Online Reporting Form <https://northampton.edu/reportit> or by visiting the Office of Student Affairs (Bethlehem), College Center Suite 200, 610-861-4558. See the NCC Student Handbook or College website for more details.

Sexual Harassment, Assault Policy / Procedure

Members of the NCC community, guests and visitors have the right to be free from sexual discrimination, harassment and misconduct. All members of the campus community are expected to conduct themselves in a manner that does not infringe upon the rights of others. Sexual assault and related violence are not tolerated within the academic and residential environment of this community. See the NCC Student Handbook and the College Catalog for the Discrimination, Harassment, and Sexual Misconduct Policy.

Incidents should be reported as described above in the section titled Security and Safety on NCC Campus

Self-Evaluation by Students during Clinical Education

The student self-evaluation is completed on Trajecsys approximately one (1) week before the end of each clinical practice course (see course syllabus). The evaluation is the student's reflection on their performance (cognitive, affective, and psychomotor). The focus is on areas of strength and those needing improvement.

Social Networking/Social Media Policies (College and Radiography Program)

The College's Social Networking Policy as described in the NCC Student Handbook:

Being active in social media can help you meet and communicate with other students, but it is important to use good judgment. Familiarize yourself with the terms and conditions of the sites or services you use, and be careful not to post anything that would jeopardize your safety or future job prospects.

Be very careful not to use social media to harass or threaten others or to damage their reputation. It is O.K. to disagree with someone, but differences of opinion should be expressed respectfully. Behavior that is not acceptable on campus is not acceptable online. Infringing on the rights of others or seriously disrupting the educational functions of the College may be in violation of the Student Code of Conduct and may result in disciplinary action. If you have questions about this, please contact the Assistant Dean of Student Life at 610-861-4558.

The Radiography Program's Social Media Policy includes additional information applicable to Allied Health Students. The following guidelines are not all inclusive and you must use common sense in your feeds.

When in doubt, do not post.

Social networking is not permitted during classes, lab, and clinical practice. Be aware that information published on social media about, or related to your clinical experience, clinical site, clinical or college personnel may be considered a violation of the professional conduct policy. It is a HIPAA violation if you mention a patient and include enough information that the person could possibly be identified. This includes posting of images (whether the patient is specifically identifiable or not). Posting certain information is illegal. Violation may expose the offender to criminal and civil liability. Offenses will be considered a violation of the professional conduct policy.

The Radiography Program recognizes that there is a possibility that protected information could be shared and that misinterpretation of the relationships between, and motivations of, individuals based on social media postings can occur. Do not ask staff technologists, clinical preceptors or any NCC employee to "friend" or "follow" you on any social media while engaging in clinical practice.

Do not expect that your information will remain private on social networking sites. Despite your personal privacy settings, content that you publish on social media should always be considered public and can never truly be removed or deleted.

Make every effort to present yourself in a positive, mature, responsible, authentic and professional manner. Interactions should always be honest, civil and respectful. If the content of your message would not be acceptable for face-to-face conversation, it is not acceptable for a social networking site. Ask

yourself, would I want to see this published or posted publically tomorrow or 10 years from now? Increasingly, employers are conducting web searches on job candidates before extending offers. Be sure that what you post today will not come back to haunt you.

Avoid engaging in on-line disputes. Do not get in arguments if someone is misstating facts. If you need to respond, simply state the accurate information, state the source of the information and let the matter drop. Don't engage with trolls. If a situation develops, take screen shots of the exchange (for possible follow up documentation) and then block the person and/or delete the posts.

Basic privacy protocols should be followed such as: Don't provide personal information that scam artists or identity thieves could use. Don't list your home address, telephone number or include the type of information that would be used as answers to security questions. It is a good idea to create a separate email address that is used only with social media sites. There are some useful tips in the following article published by Fastweb (Financial Aid Search Through the Web).

<https://www.fastweb.com/student-life/articles/social-media-guidelines-for-students>

HIPAA violations:

Information about a patient in any reference is a possible HIPAA violation. Discussing clinical education in a social networking environment is a potential HIPAA violation.

Consequences for HIPAA violations:

HIPAA violations will result in withdrawal from the Radiography Program.

Specialty Areas

If you are interested in specialty training in radiology, see the Radiography Program Director, the Clinical Education Coordinator or a program faculty member for advice regarding the modality in which you are interested.

Student Choice Rotation

There is a three (3) day "Student Choice" rotation during Clinical Practice V which allows the students to go into areas of particular interest to them. The student can also select a rotation where they feel they need more time to reinforce skills. Male students may not be able to rotate through mammography based on the policy at their clinical site. Missed specialty rotations may not be able to be rescheduled due to staffing or patient volume factors.

Suspension

Each day of suspension will be counted as a personal day with make-up time required. The clinical rotation time missed will be completed during the six (6) week extension. If a suspension occurs, the ARRT will need to do an ethics review which could delay or prevent the student from taking the registry examination.

Syllabi

At the beginning of each semester, you will receive a course syllabus for each course. It is your responsibility to check the policies and procedures contained in each syllabus. It is the instructor's prerogative to implement changes, as necessary, which will help facilitate your learning.

Telephone Number Changes

All changes to your mailing address, e-mail address, or telephone number must be immediately forwarded to:

- Radiography Program Director
- Radiography Secretary
- Records Office

Trajecsys

Trajecsys is the on-line data management system for student records.

Transfer of Student from One Clinical Education Site to Another Site (Student Initiated)

After attempts have been made by the Clinical Education Coordinator, Clinical Preceptor, and student to resolve a student's problems or reason for the request, the student may initiate a written request for a transfer from the clinical education setting. The written request should contain information regarding the reason for requesting the transfer and any attempts that have been made to resolve the issue. Students will not be offered an alternative clinical setting, and will be withdrawn from the program, if the reason for the request is due to unprofessional conduct.

Upon receipt of the written request, the Program Director and/or Clinical Education Coordinator will act as mediators and meet with all parties involved to determine if an alternative solution can be found. If the decision is to transfer the student, the Program Director will assist the student in, but not be responsible for, nor guarantee, finding another clinical education setting.

Transfer of clinical education settings will be done on a **one time** basis.

Transferring to Four-Year Degree Program

The Career Services/Transfer Advising offices have current information on further education and vocation choices. If you are interested in transfer programs, call the office, 610-861-5346, for detailed information. See the *NCC Student Handbook* for more details. Program Faculty are also a good resource for career advice.

Transportation

Students are responsible for obtaining their own transportation to and from the clinical education setting. If you need to use public transportation, let the Program Director know so your clinical site is assigned accordingly.

Vacation

During the summer session (Clinical Practice III) there is no clinical practice on Memorial Day or the July 4th holidays. There is adequate time in the semester to satisfy the required clinical hours and also take time off. Vacation time should be scheduled with the Clinical Preceptor so that rotations can be scheduled appropriately.

“Way to Go” (Merit Award)

Purpose: The “Way to Go” is awarded at the discretion of the Clinical Preceptor with the validation of the Clinical Education Coordinator for outstanding student performance.

Reward: The reward is one (1) hour of release-time from clinical practice to be scheduled with the Clinical Preceptor(s).

Paperwork:

- The student and Clinical Preceptor(s) sign the form which will become a part of the student's file.
- Email a copy of the paperwork to the Clinical Education Coordinator or the Program Director. It can also be faxed to 610-861-4581.
- Return the original form with the end-of-the semester paperwork for filing at the College.

Recognition at the College:

Those who have earned the merit award will be recognized at the next Opening Program / Clinical Education Meeting.

Letters of recommendation:

The merit award can be used as resource material by the Faculty and Program Director for writing references.

Withdrawal (Academic) from Allied Health Programs

Students may withdraw from classes in which they are enrolled through the 90% point of the semester (the end of the 14th week in a 15 week semester, or equivalent in courses that run on a non-standard schedule) and an instructor may issue a withdrawal for poor attendance through the same period. Any student, who officially withdraws, or is withdrawn by the instructor during this period will receive a grade of W for the course. If the student drops the course within the Add/Drop period (the first 3 weeks of the semester or equivalent) there is no “W” issued and a partial tuition refund is issued. See the academic calendar for specific dates.

Withdrawal paperwork must be done through the Records office.

Withdrawal from the program is done through an exit interview with a program representative or the designated person from the Admissions Office.

Withdrawal (Inability to Comply with “Essential Functions of a Radiographer”)

The inability to perform the routine skills required of the profession, at a competent level, will require withdrawal from the program to protect the patient population.

Withdrawal (Student Initiated) from a Radiography Course

Students may not selectively withdraw from a radiography course due to the structured scheduling of the program. If a student chooses to withdraw from one (1) radiography course, they must withdraw from all radiography courses and the program. If after having withdrawn from the program, a student wishes to re-enter the program, they must re-apply through Admissions. The only exception, with Program Director and Clinical Education Coordinator approval, is for a student who needs to take a medical leave of absence.

Withdrawal of Students from the Clinical Education Setting

The clinical education setting reserves the right to request that the College withdraw a student from their site due to a variety of reasons, e.g. unacceptable personal behavior, unethical conduct, insubordination, substance abuse, threats to patient or staff safety etc. **Any student that is asked to leave a clinical site due to unprofessional conduct will be withdrawn from the program.**

If the withdrawal is due to “other reasons” e.g. staffing cutbacks, personality clashes, the Program Director and Clinical Education Coordinator will investigate the issues and reach a decision as to the student's progression in, or withdrawal from, the program. Until a decision is reached, the student will be placed on suspension. Days missed will be made-up during the six (6) week extension for clinical education if the student is allowed to continue in the program. Reassignment to another site due to “other reasons” (if approved) is a one-time occurrence, a second request will result in the student's withdrawal from the program. If the decision is to allow the student to continue in the program and there is not an alternative clinical site willing to accept them, the student will be withdrawn from the program.

If there is a non-voluntary withdrawal from the Radiography Program, the student must be reviewed and cleared by the ARRT before taking an ARRT certification examination in the future.

Cover Image:

Osgood-Schlatter disease (OSD) is a chronic fatigue injury due to repeated microtrauma at the patellar ligament insertion onto the tibial tuberosity, usually affecting boys between ages 10-15 years.

Epidemiology

Osgood-Schlatter disease is seen in active adolescents, especially those who jump and kick. It is bilateral in 25-50% of patients. The typical age of onset in females may be slightly earlier (boys 10-15 years; girls 8-12 years).

Clinical presentation

Clinically, patients present with pain and swelling over the tibial tuberosity exacerbated with exercise.

Radiographic features:**Plain radiograph**

Soft tissue swelling with loss of the sharp margins of the patellar tendon is the earliest signs in the acute phase; thus, a compatible history is also essential in making the diagnosis. Bone fragmentation at the tibial tuberosity may be evident 3 to 4 weeks after the onset.

It is important not to equate isolated 'fragmentation' of the apophysis with OSD, as there may well be secondary ossification centers.

Ultrasound

Ultrasound examination of the patellar tendon can depict the same anatomic abnormalities as can plain radiographs, CT scans, and magnetic resonance images. The sonographic appearances of Osgood-Schlatter disease include:

- swelling of the unossified cartilage and overlying soft tissues
- fragmentation and irregularity of the ossification center with reduced internal echogenicity
- thickening of the distal patellar tendon
- infrapatellar bursitis

MRI

MRI, as expected, is more sensitive and specific, and will demonstrate:

- soft-tissue swelling anterior to the tibial tuberosity
- loss of the sharp inferior angle of the infrapatellar fat pad (Hoffa fat pad)
- thickening and edema of the distal patellar tendon
- infrapatellar bursitis (clergyman's knee)
 - a distended deep infrapatellar bursa can be a frequent finding
- bone marrow edema may be seen at the tibial tuberosity

Treatment and prognosis

Treatment is usually conservative and involves rest, ice, activity modification (decreasing activities that stress the insertion, especially jumping and lunging sports), and quadriceps and hamstring strengthening exercises. Analgesia and padding to prevent pressure on the tibial tuberosity are also useful. Only rarely are therapeutic casts required. The condition spontaneously resolves once the physis closes.

In rare cases, surgical excision of the bone fragment(s) and/or free cartilaginous material may give good results in skeletally mature patients who remain symptomatic despite conservative measures.

Unresolved OSD is the term given to clinical and radiological findings of OSD that persist into adulthood.

History and etymology

It is named after American orthopedic surgeon Robert B Osgood (1873-1956) and Swiss professor of surgery Carl Schlatter (1864-1934).

Differential diagnosis

Imaging differential considerations include:

- Sinding-Larsen-Johansson disease (SLJ): similar condition involving the inferior pole of the patella
- jumper's knee: involves the patellar tendon rather than the bone, and is essentially tendinopathy with focal tenderness, although it may eventually be associated with bony changes (some authors do not distinguish between SLJ and jumper's knee)
- infrapatellar bursitis

**Student Verification of Understanding
"Radiography Program Student Handbook"**

I hereby verify that I have read and understand the contents of the Radiography Program Student Handbook, revision 11/17/2021, and know I can access a copy via Trajecsys or the Radiography Program webpage when I need additional information.

Printed name

Signature

Date