



Radiologic Technology Program

STUDENT HANDBOOK

(For Fall, Spring, and Summer 2025)

September 2024

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1 Welcome to the Radiologic Technology Program at HCC

This Program Student Handbook is a student's guide for the Radiologic Technology (RADT) Program at Howard Community College (HCC). Policies and procedures for the program are included in this handbook. HCC policies may be found in the College Catalog at <http://howardcc.smartcatalogiq.com/en> and in the HCC Student Handbook at <https://www.howardcc.edu/student-life/student-handbook>. It is the responsibility of each student to read and understand the contents of the RADT Program Student Handbook, HCC Student Handbook, and the HCC policies in the College Catalog. After reading, each student is required to sign and return the receipt found on page J of this Program's Student Handbook.

The RADT Program is in the state-of-the-art Kathleen Hetherington Hall (KHH). The training is rigorous and comprehensive. The skills laboratory (KHH 264) is equipped with computed radiography (CR) and direct radiography (DR) units, a C-Arm, a DR portable x-ray unit, and CR image processor. Student skills lab training includes patient care, radiographic procedure skills, and CR and DR image production and archiving. Students produce radiographs utilizing phantoms.

The program is accredited by The Joint Review Committee on Education in Radiologic Technology (JRCERT) and complies with required Standards for Accreditation in Radiography, which may be accessed via JRCERT website. The current accreditation award was granted on July 27, 2022, for an 8-year period. [Standard 1 objective 1.5](#) of the JRCERT self-study stipulates that "the program assure students and faculty are aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of noncompliance with the Standards." The contact information for the JRCERT is as follows:

Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312.704.5300 • (Fax) 312.704.5304
www.jrcert.org

Faculty members welcome you to the program and stand ready to help you achieve your objective of becoming a Radiologic Technologist RT (R). We thank you for choosing HCC. We believe we can coach you and provide you with all necessary resources to perform your duties as a competent radiologic technologist upon graduation. Please visit the RADT Program Website for additional information including Outcomes for Programmatic Effectiveness, Clinical Site locations, and other important program field related links.

Disclaimer

This Program Student Handbook is reviewed every year and may be amended from time to time. The Program maintains the right to make modifications. Any amendment made to the Handbook is communicated to students in a timely fashion via email. A current copy of the Handbook is posted on the program's webpage and in the "Documents" folder of the Clinical Management System - Trajecsys. The student may print a hard copy of the updated Handbook, if preferred.

2 Mission, Vision, and Program Goals

2.1 *Mission Statement*

The mission of the HCC RADT Program is to recruit, educate, and prepare clinically competent students to become entry level radiographers.

2.2 *Vision*

The RADT Program is a dynamic and creative learning community, where students can discover greatness in themselves and others.

2.3 *Program Goals*

At the end of the RADT Program, students will be able to:

1. Practice as clinically competent entry-level technologists.
2. Display strong critical thinking and problem-solving skills.
3. Demonstrate communication skills in a healthcare setting.
4. Conduct their duties in an ethical and professional manner with a clear understanding of cultural diversity and healthcare access inequity.
5. Display proficiency in digital imaging skills.

Student learning goals and outcomes are an integral part of the RADT Program at HCC and drive programmatic improvement. The student learning goals and outcomes are available to students through the program website. In addition,

Program Effectiveness Data is available on the program website at this link -

<https://www.howardcc.edu/media/howardcc/programs-courses/divisions/documents/2022-radt-effectivness-data.pdf>

3 Course Offerings

The HCC RADT Program provides a well-structured, competency-based curriculum that prepares students to practice as entry level radiographers. The program follows the latest [American Society of Radiologic Technologists professional curriculum](#), which is a JRCERT-adopted curriculum. The HCC RADT curriculum is well-structured, appropriately sequenced, and is designed to facilitate evaluation of student achievement. According to the ASRT, the curriculum is “designed to ensure that entry-level radiographers possess the technical skills outlined in the ASRT Radiography Practice Standards (ASRT, 2017).”

The contents of the curriculum and sequence of courses and sections are structured as didactic, laboratory, and clinical courses. Similar to the ASRT objectives, the didactic courses are designed to prepare students for the laboratory and clinical rotations and promote qualities that are necessary for graduates to practice duties of a radiographer competently, become critical thinkers, provide appropriate patient care, communicate effectively, and keep abreast of current advancements within the profession.

The laboratory courses are competency-based and appropriately sequenced to allow effective student learning by providing didactic foundation and hands-on practice prior to performing procedures in a clinical setting. Similarly, the clinical courses are competency-based and appropriately sequenced. Students apply and refine their knowledge and skills in a clinical setting. The clinical rotations are designed for continuous knowledge and skills improvement until students are able to perform radiographs independently under appropriate supervision. The current ARRT list of required mandatory and elective competencies is used to determine the number of competencies a student must complete during the program.

For program course details and course descriptions, refer to the College Catalog or the following link: <https://howardcc.smartcatalogiq.com/en/2023-2024/catalog/>.

Program courses are offered in accordance with HCC's Academic Calendar. The current College Academic Calendar can be accessed at the following link: <https://www.howardcc.edu/programs-courses/academics/academic-calendars/>.

4 Program Faculty and Staff

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5 Program Expenses and Student Resources

5.1 Tuition

The RADT Program at HCC follows the tuition and consolidation fee schedule as listed in the HCC Schedule of Classes. Tuition fee per credit hour varies based on legal residency. However, consolidation fee is assessed as a percentage of the in-county tuition rate, regardless of residency. Additional and current information regarding tuition, fees, and refund policies can be obtained by referring to the College Catalog at <https://www.howardcc.edu/admissions-aid/pay-for-college/>

5.2 Books

The cost for books will vary by semester. Each course will have a required list of textbooks to purchase, which can be found in the college bookstore. Students are encouraged to buy in bundles as the program negotiates for lower price for those, and students can have access to additional online resources. There will be three bundles with an approximate cost of \$1000. Contact the bookstore for information concerning book costs <https://www.howardcc.edu/services-support/bookstore/>

5.3 Transportation and Parking

Each student will be expected to travel to clinical sites in the greater Baltimore/Washington metropolitan area. All students are responsible for their own transportation to and from clinical sites. To ensure timely attendance, students will need to know the location and approximate travel time (with and without traffic), before the first day of clinical assignment.

Parking on the college campus is free. Clinical site parking is free except for one site that has a parking fee of approximately \$10.00 per day. Transportation and parking at off campus sites are the responsibility of the student.

5.4 Miscellaneous Costs

Students are also responsible for additional costs such as ARRT certification exam registration fee, ARRT certification exam review seminar, and Clinical Management System fee. The current Clinical Management System used by the Program is called Trajecsyst Report System. Current Pricing and other information may be found at <https://www.trajecsyst.com/>.

The RADT Program has partnered with CastleBranch, one of the top background check and compliance management companies in the nation, to provide you with a secure account to manage your time sensitive school and clinical requirements. New students will pay an initial fee of approximately \$96.00 for the combination package of the criminal background, urine drug screen, and medical compliance tracker. For the required annual recheck of the criminal background and urine drug screening, the fee is reduced to \$65.00. Details can be obtained from the Health Sciences Division Clinical Liaison Team (hsdcc@howardcc.edu).

Students are required to purchase their own set(s) of lead markers with their class letter and initials on them. See Section 9.17 for more information.

5.5 *Student Resources and Services*

Students have access to college computers, library, cafeteria, and study rooms. Students can use college printers for free up to their maximum number of copies allowed per semester and pay per page basis for more pages than the limit. Some computer rooms may be reserved for training and/or examination purposes. Students are advised to check availability.

HCC has several Student Service provisions including: Career Services, Childcare, Co-Ops/Internships, Counseling, Disability Support, Learning Assistance Center, Library, Password Services, Adult Learners, Military & Veterans, Online Writing Lab, Student Support Services, Tutoring, and Wellness. Students are advised to refer to the HCC Website for further information, which can be found at this link: <https://www.howardcc.edu/services-support/> . Any student who needs support and/or life enrichment can contact the service providers for assistance.

6 Academic Standards

All students are expected to adhere to the policies, procedures and standards of conduct as determined by HCC. These policies are listed in several college documents including the HCC College Catalog <https://howardcc.smartcatalogiq.com/en/2024-2025/catalog/> and in the HCC Student Handbook <https://www.howardcc.edu/student-life/student-handbook/>

Students are expected to adhere to Academic Division and Program Specific Policies reviewed during the first week enrolled in the Radiologic Technology Program.

6.1 *Standards of Ethics*

The American Registry of Radiologic Technologists (ARRT) publishes a Standards of Ethics document that includes both a Code of Ethics and a Rules of Ethics component. Students are taught professional and ethical behaviors in accordance with the ARRT standards of Ethics and the American Society of Radiologic Technologists (ASRT) Practice Standards in the Patient Care sections of courses in the program curriculum.

Students in the program are expected to act in a professional and ethical manner in both school and clinical settings based on these standards.

6.2 *Academic Honesty*

The following information is obtained from the HCC Academic Honesty Policy for RADT Program use. Academic honesty is critical at HCC. Broadly, academic honesty means incorporating one's own thoughts and materials in all academic activities (e.g., assessments, papers, projects, lab reports). A violation of academic honesty involves misrepresentation, the submission of materials for evaluation that are not the student's own, or fulfillment of an academic exercise that does not result from individual effort or intellectual production. Examples of academic dishonesty include but are not limited to unauthorized use or copying of materials, unauthorized assistance with assignments, unauthorized collaboration, unauthorized use of devices or tools, unauthorized prior knowledge of the contents of assessment instruments such as exams, quizzes, or surveys, cheating on exams or quizzes, submitting fraudulent documents, and falsification or fabrication of information.

For full policy details and procedures concerning infractions of academic honesty and disciplinary actions, refer to the HCC's Academic Honesty Policy which may be accessed at the following link <https://www.howardcc.edu/about-us/policies-procedures/chapter-10/10.02.01-Academic-Honesty.html>.

6.3 *Social Media and Networking*

The program expects the student to use social media appropriately and with good judgment, always being conscious of whether a post will be helpful or potentially harmful. Good judgment also involves considering whether a post has embarrassing or promising potential or could positively or negatively affect a future opportunity. Students must not mention a clinical site by name (full or abbreviated), patient encounter or case, patient name or any identifying information, clinical instructor's name, and/or any other patient, staff or site related information.

6.4 *Drug, Alcohol, and Smoking*

HCC is a drug, alcohol, and smoke free campus. Drug and alcohol use and smoking on campus is prohibited. All students shall abide by the college policy as outlined in the HCC Student Handbook and the Health Sciences Resource Page: <https://www.howardcc.edu/programs-courses/academics/academic-divisions/health-science-and-technology/health-sciences/resources/>.

6.5 *Stalking, Harassment, and Sexual Misconduct*

All students shall abide by college policies concerning Stalking, Harassment, and Sexual Misconduct as outlined in the HCC Student Handbook.
<https://www.howardcc.edu/about-us/policies-procedures/chapter-63/63-01/63-01D.html>

6.6 *Skills Lab and Clinical Attendance*

Classroom, skills lab, and clinical attendance is key to the success of all courses and intended to maximize the student's potential to obtain required knowledge and skills. Students should attend all didactic classes to increase potential for success in the program.

Attendance policies for skills lab and clinical rotations are the same. Tardiness to and absence from skills lab and clinical can drastically affect student performance in the program. A student must complete the minimum number of clinical rotation hours stated on each clinical course syllabus. A student may leave days for an emergency or a valid reason but must ensure the required hours are met before the end of the course. Make up hours are arranged in consultation with the Clinical Coordinator. Students cannot exceed 10 clinical hours per day to make up leave day(s). Medical emergency and death in immediate family are examples of unanticipated valid reasons.

Students are expected to arrive on or before the scheduled start time and be prepared for all classroom and clinical activities. **Tardiness** is not acceptable, and **it will likely affect the student's ability to meet the clinical course requirements**. The **grace period** for tardiness is 5 minutes. A student who arrives at a clinical site later than 5 minutes after the scheduled clinical start time is considered late. A student should not go to a clinical site if they are going to arrive an hour or more later than the clinical start time. If a student goes to a clinical site, disregarding the above one-hour limit, the clinical site will deny access. Students may use a leave day for such an occurrence. Students are required to inform their Clinical Coordinator and clinical site if they will be late or absent.

Rules concerning lateness and clock in/out occurrences are as follows:

1. Students are excused for one clock in or out infraction and one lateness occurrence before point deductions are taken on the semester Professional Performance Evaluation.
2. Point deductions on the Professional Performance Evaluation may result in a failing grade for the evaluation and potentially the course.
3. Time missed due to lateness may not be eligible for makeup and cannot be made up at the end of the assigned day.

Excessive absenteeism is defined as attending less than the minimum number of clinical hours stated on a course syllabus during a semester and will result in course failure if the hours are not made up during the final exam week. However, if a student misses clinical rotation hours for serious medical condition, childbirth, or an unanticipated serious event with proper documentation, they might be allowed to make up the hours, if there is a clinical site for makeup. The program will evaluate the practicality of making up missed clinical hours for a prolonged illness/injury and if available, will assign a student to a site to make up the missed clinical hours.

If a clinical site requests a student to leave the department and/or site during an assigned rotation **due to no fault of their own**, the missed clinical hours must be documented on attendance sheet, but it will not be held against the student. However, if the clinical site or HCC clinical instructor requests a student to leave the department and/or site during an assigned rotation **due to issues such as disruptive behavior, concern for patient safety etc.**, the student will be held accountable. If a clinical site requests that a student not return due to behavioral reasons, the student may not be reassigned, and therefore, the student may not be able to progress in the program.

A student is required to inform his/her clinical site, HCC Clinical Coordinator, and Program Chair via email in advance to request an absence day. **If the absence is due to an emergency**, the student must contact the clinical site representative, Clinical Coordinator, and Program Chair by phone (leave voice message) and/or email at their earliest convenience. The student must provide proof of the emergency such as a doctor's note indicating that the student was treated for an emergency illness. The student should also provide documentation from the physician releasing them back to clinical duty without any limitations.

Clocking in/out must be done when the student is physically located at the assigned clinical site, in the work area, and using a site computer. Clocking in/out from any other location **is not permitted** and is considered document falsification. Students will use their personal cell phone to clock in/out **ONLY** when assigned to Johns Hopkins Howard County Medical Center or when designated by the Clinical

Coordinator. Students are permitted to clock in within 15 minutes before the scheduled clinical start time and clock out within 15 minutes after the scheduled clinical end time. A clock out within the 15 minutes after the scheduled end time is ONLY permitted to complete an exam currently being performed.

Students cannot leave the clinical site early or request to leave early, for any reason. Only the Imaging Director or Supervisor of a facility can dismiss students for safety or emergency reasons. In such cases, the student must notify HCC Clinical Coordinator and Program Chair via email. If a student leaves their clinical site without permission, disregarding the above rule and/or fails to notify the Program, they will be considered absent.

Clinical rotations are assigned by the Program Chair and Clinical Coordinator. Students cannot change or volunteer to change their clinical site under any circumstances. If a change in the student's assignment is necessary, it will be done only by the Program.

6.7 Bereavement Policy

Bereavement leave is not earned time and will be granted only if needed.

Documentation of the death (e.g. death certificate, obituary, documentation from funeral home, etc.) may be required. The amount of bereavement leave granted is as follows:

1. Upon the death of a father, mother, spouse, domestic partner, son, daughter, sister, brother, or legal guardian, the maximum bereavement leave time is 40 hours.
2. Upon the death of an uncle, aunt, grandparent, grandchild, niece, nephew, father-in-law, mother in-law, brother-in-law, sister-in-law, son-in-law, and daughter-in-law, the maximum bereavement time is 8 hours.

6.8 Leave of Absence Policy

The RADT Program may authorize and grant a Leave of Absence for up to 4 weeks of leave per rolling 12-month period for health reasons with valid documentation. The student may be required to demonstrate current knowledge prior to resuming coursework.

6.9 Classroom and Clinical Conduct

Students are always expected to be respectful to their classmates, college community, clinical staff, and instructors.

Eating and drinking in clinical patient care areas are prohibited. All personal cell phones and electronic devices must be turned off while in the clinical sites. Please see Section 6.6 of the RADT Student Handbook for the exception. In the classroom, personal electronic devices may be used for note taking, but cell phones must be turned off.

A student may be dismissed from a classroom or a clinical training site if the student is exhibiting behaviors of substance abuse or unprofessional behavior. If an incident of misconduct does occur, the faculty or the Program Chair will immediately investigate the incident. The student has the right to due process. If the student is found to be at fault, the student will be considered absent for the day(s) missed.

6.10 Falsifying Clinical Attendance or Other Documents

Any student found falsifying clinical attendance, competency, or any other documents may be dismissed from the Program, and they may be ineligible for readmission. Any student or technologist who collaborates in such an act, especially falsifying attendance and competency, will be considered equally guilty. The accomplice student may be dismissed from the Program, and they may be ineligible for readmission. The technologist(s) involved will be reported to the facility Imaging Director/Supervisor.

Students cannot refuse to sign any required school related and/or disciplinary document. Signing a document does not imply automatic agreement. Students can submit a written disagreement letter to the Program Chair, within 3 business days after the signing date if they do not agree with the contents or characterization of a situation. A student will be suspended from class and clinical for refusing to sign any required school related and/or disciplinary document. Making up any missed exams and/or clinical hours is not allowed until the student is cleared to return.

6.11 Use of Electronic Devices

Cellular phones and other electronic devices must not be used during any clinical rotation, unless approved by the Program and the site for Clinical Management System tracking purposes. Clinical site computers and other clinical site electronic devices must be used strictly for site related clinical activities. The only exception is the use of site computers to clock in/out. For emergency purposes, the student may use the facility telephone with permission.

6.12 Grading

Student grades in the HCC RADT Program are governed by both college and program grading policies and are based on performance. A student can earn a “W”, an “I”, or a “NA” grade based on attendance in some extraordinary situations such as illness. For detailed college grading information, refer to HCC Student Handbook.

RADT students are evaluated on a regular basis to assess comprehension of didactic concepts, clinical skills, and ethical and professional behaviors. The program uses the following letter grading scale for didactic and clinical courses:

100 - 90 = A, 89.9 - 80 = B, 79.9 - 75 = C, 74.9 - 60 = D, and < 59.9 = F.

Students must receive a “C” grade or better to progress in the program. If a student receives a “D”, “F”, or a “W” grade for any RADT course, the student is not eligible to progress in the program. The student may apply for readmission to the program to join the next cohort. See Section 6.14 for more information on Withdrawal (“W”).

6.13 Admissions policy

6.13.1 Standard Admission to HCC Credit Courses

HCC maintains an open-door policy of admission. Prospective students who are interested in taking classes at the college can be admitted on a space availability basis.

6.13.2 Admission to Radiologic Technology Program

Detailed RADT program admissions information may be found at <http://www.howardcc.edu/admissions-aid/apply-for-admission/alliedhealth/RadTech.html>

6.14 Withdrawal, Dismissal, and Readmission

Any student who earned a “D” or “F” grade for any of RADT courses will not be allowed to progress in the program. Students who do not progress in accordance with the RADT Program course sequence may choose to withdraw from the program. Students may be dismissed for inappropriate behavior and/or at-risk behavior.

Readmission to the RADT Program is neither automatic nor guaranteed but based on seat availability. To be considered for readmission, students must apply through the Office of Admission and Advising. A student is ineligible for readmission to the RADT Program if their prior withdrawal/dismissal was due to at-risk behavior, conduct-related issues, or they were banned from a clinical site. A student who withdrew for health-related issues is required to obtain health clearance from a physician to be

considered for readmission. If clearance cannot be obtained, the student is ineligible for readmission.

Steps for Readmission:

1. Students applying for readmission to the program should review their coursework while waiting for readmission.
2. Readmission eligibility is NOT determined based on the Student Handbook that was valid during the student's dismissal but based on the Student Handbook that is valid for the period that the student is seeking readmission.
3. Completed readmission application must be submitted to the office of Admissions and Advising by the following deadlines: May 15 for Fall readmission, September 15 for Spring readmission, and February 15 for summer readmission.
4. A student who earned an unsuccessful grade for any course in any semester must take a readmission theory examination for the course or courses failed or withdrawn from and must score a grade of 70 or above.
5. Readmission exams are administered three times a year: June 15– June 20 for Fall readmission, October 1- October 10 for Spring readmission, and March 1 – March 10 for summer readmission.
6. A prospective student should schedule the readmission exam with the Program Chair two weeks prior to the start of the examination window date.
7. If a student earns a passing score on the readmission exam, they will be readmitted to the program if there is a clinical seat.
8. A student has only one chance to pass the readmission exam. If they are unsuccessful on the first attempt, no additional attempts are permitted.
9. The prospective student must meet ALL clinical clearance requirements prior to clinical placement assignment.
10. Clinical competencies earned during successful clinical courses will be credited upon readmission. Clinical competencies acquired during the unsuccessful or failed course will not be credited upon readmission.
11. A student cannot be readmitted during a semester they completed successfully.
12. A student cannot repeat the same RADT course more than once.

6.15 Graduation Requirements

Below are the requirements for graduating with an Associate of Applied Science (AAS) in Radiologic Technology:

- Complete all ARRT didactic and clinical requirements. The current requirements can be found using the following link https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/68688f6b-d625-4fce-be07-b9b8a81b7d10/RAD_CC_2022.pdf.
- Fulfill the course requirements of the AAS in Radiography curriculum.
 - A total of 69 credit hours maintaining a 2.0 average GPA with a grade of "B" in Anatomy and Physiology I (BIOL 203) and "C" or above in each required radiography and general education courses.
 - General education core – 20 semester hours.
 - Required courses related to major – 49 credit hours. Must be taken at HCC with the RADT Program.
- Comply with program and clinical specific requirements such as training, health, and background checks.
- No outstanding tuition or fees owed to the college at time of graduation.
- Return of all school property including ID badges, radiation badges and holders, etc.

Graduates are eligible to apply for the National Certifying Examination in Radiography, administered by the ARRT and apply for Maryland Radiography license from the Maryland Board of Physicians.

6.16 *Grievance*

The grievance policy is adopted from the current HCC Student Handbook. RADT students must adhere to these steps to resolve any academic or nonacademic complaint(s).

6.16.1 Academic Complaint Procedures

To maintain the integrity of the academic environment and to ensure the rights of students in such matters, HCC's administrative policies and procedures provide a framework to resolve student complaints of an academic nature. An academic complaint is defined as an issue related to classroom instruction or a grade dispute in which the student believes a grade was assigned in an arbitrary or inconsistent manner. A student who has an academic complaint, including a specific academic complaint involving a faculty member, that remains unresolved through informal means, may enter a formal process of problem resolution. The student academic complaint procedures and the appropriate form may be obtained from the division offices. A student who wants to initiate a formal academic complaint must submit an academic complaint form no later than the end of the seventh week of the next major

term. All written correspondence concerning this matter will be sent to the students using their HCC email account.

1. The student must discuss the problem with the instructor prior to beginning the formal complaint process. Many times, misunderstandings can be resolved by honest, open dialogue.
2. If the issue is not resolved after discussing it with the instructor, the student may pursue the matter further by submitting a formal written complaint. The student should contact the division office to schedule an appointment with the appropriate designated division representative. A meeting will be scheduled between the division representative and the student to discuss the problem and outline the formal complaint process. The student may then file a formal, written complaint that must include:
 - A written description of the academic issues in dispute.
 - Any supporting evidence.
 - The specific academic complaint form with the student and faculty signatures or record of the electronic communications.

The written complaint must be submitted by the student to the division representative no later than the seventh week of the next full semester. Incomplete submissions will not be reviewed. This decision will be communicated to the student in a formal correspondence, and the faculty member and division leader will be notified of the decision.

3. If the student wishes to appeal the division resolution, the student must notify the division representative within one week of receiving the written resolution from the division or meeting with the division representative regarding the resolution, whichever occurred last. The student's written complaint, the instructor's written response, and the division representative's written recommendation will be forwarded to the Associate Vice President of Teaching and Learning (VPTL). The student has the right to meet with the Associate VPTL but is not required to do so. The student who wishes to have a meeting must contact the Associate VPTL's office directly within two weeks of notifying the division representative of their intention to appeal, to schedule the meeting. The decision of the Associate VPTL is final and will be conveyed in writing to the student.

6.16.2 Non-Academic Complaint Procedures

Procedures for resolution of student concerns involving student services are as follows:

1. Students should make an appointment with the appropriate administrator or staff member to discuss the problem (refer to the section titled "Who Do I See?" in the HCC Student Handbook).
2. If the student cannot resolve their problem by meeting with the administrator or staff person, the student may make an appointment with the staff member's immediate supervisor.
3. If the concern is not resolved at the administrator or supervisor level, the student may make an appointment to see the Vice President of Student Services or designee. The Vice President's decision is final.

Procedures for resolution of student concerns involving student clinical experiences/rotations are as follows:

1. Students should email or meet with the Clinical Coordinator to discuss the problem or concern.
2. The Clinical Coordinator will investigate and address the concern with the Site Clinical Preceptor and/or Department Supervisor/Manager as appropriate to the situation.
3. If the student does not feel their concern has been resolved by meeting with the Clinical Coordinator, the student may make an appointment with the Program Chair for resolution.
4. If the student cannot resolve the problem during a meeting with the Program Chair, the student may contact the division office to schedule an appointment to see the Dean. Prior to scheduling the appointment, the student must submit a written description (form provided at the back of handbook) of the problem, the resolution the student is requesting, and the signature of the Clinical Coordinator to confirm that the initial required meeting has taken place.
5. If the concern is not resolved at the division level, the student's written complaint, the Clinical Coordinator's written response, the Program Chair's written response, and the Dean's recommendation will be forwarded to the VPAA. At this stage in the complaint process, the student has the right to meet with the VPAA, but the student is not required to do so. That appointment must be made within two weeks of the meeting with the Dean. If the student has not made contact within two weeks, the student has waived the right to the meeting. After that two-week period, the VPAA will make a judgment on the case. The decision of the VPAA is final. This decision will be communicated to the student in a formal correspondence.

7 Awards and Honor Societies

7.1 *Allied Health Award*

Every year, the Health, Science, and Technology Division honors one student who has excelled during their time in one of HCC Allied Health programs. The student is selected for their unique academic achievement, community service, and leadership quality. Since 2010, four students from the RADT program were honored with this award. Some of the requirements considered during the selection process are:

1. Strong academic achievement.
2. Membership in professional organizations such as ASRT and MSRT.
3. Participation in HCC or other community service such as food drives, RADT info sessions.
4. Leadership such as class president, vice president, student mentor.

7.2 *Lambda Nu*

Lambda Nu (LN) is a national honor society for the radiologic and imaging sciences. Its objectives are to:

1. Foster academic scholarship at the highest academic levels.
2. Promote research and investigation in the radiologic and imaging sciences.
3. Recognize exemplary scholarship.

HCC RADT Program is the MARYLAND CHI Lambda Nu chapter among the 241 programs in 46 states. Student membership to Lambda Nu is by invitation from the local chapter in accordance with the chapter's bylaws. Once eligibility is verified by the chapter director, applications may be completed and sent to the home office of Lambda Nu.

7.3 *Alpha Eta Honor Society Selection Requirements*

The undergraduate students working towards an associate or a baccalaureate degree shall be deemed eligible for election by the chapter to active membership to the society if they have complied with the following conditions:

1. They shall be enrolled in an allied health program leading to an associate or a baccalaureate degree and will be enrolled in their last year in residence.
2. They shall have maintained an overall grade point average of 3.5 or better (out of 4.0) while enrolled in the allied health program on this campus.
3. They shall have shown capacity for leadership and achievement in their chosen allied health field.

4. They shall have been recommended by active members through a nominating process in each department or program and approved by the Division Chair of the Health Sciences.
5. Membership shall not exceed twenty percent of the student population of any department or program.
6. Students who are members of professional associations such as ASRT and MSRT have a better chance of being nominated to the Alpha Eta Honor Society.

8 Skills Laboratory

The skills laboratory serves to connect the learned didactic content with the clinical application. Students will practice and reinforce several areas of required objectives, including, but not limited to:

- Patient care and safety
- Communication, history taking, and document review
- Radiographic anatomy and pathology
- Radiographic image analysis
- Patient positioning
- Equipment manipulation and utilization
- Radiographic technique selection

Practicing in energized skills laboratory requires that a registered radiologic technologist always be present with a student. Students are prohibited from practicing in the energized skills lab without the **direct supervision** of a registered radiologic technologist. Students can practice positioning without energizing the x-ray machine if they have **indirect supervision** from a registered radiologic technologist.

All procedures courses have mandatory didactic and skills lab practice. In addition, optional open lab sessions are available. Additional skills lab practice can be arranged with the faculty or skills lab instructor. Students are required to attend all scheduled skills lab sessions prior to obtaining laboratory competencies. Performing skills lab competencies is like performing clinical competencies. A student who does not complete the required number of lab competencies for a particular course will fail the associated procedures course. Moreover, a student will not be permitted to obtain clinical competencies until the simulation requirements have been met. Grades for skills laboratory performance are incorporated into the radiographic procedures course grade. **Uniforms and a radiation monitoring badge must always be worn when practicing and performing simulated competencies.** Attendance is mandatory and the attendance policy is the same as clinical attendance policy. If a

student misses a skills lab session for any reason, it is the student's responsibility to arrange a makeup practice session before the next class.

Students, under direct supervision of a registered technologist, are required to complete a total of 57 competencies with a minimum grade of 85% on all basic projections demonstrated in the lab. The procedure designed to remediate student performance when a skills lab or clinical exam competency is attempted and unsuccessfully completed is reviewed in the RADT 108 Introduction to Clinical Radiography Course.

The breakdown for skills lab competencies is as follows: RADT 116 - a minimum of 23 skills lab simulation competencies, and RADT 126 - a minimum of 34 skills lab simulation competencies.

9 Clinical Rotation

9.1 *Clinical Onboarding Documents*

9.1.1 Health Requirements

Prior to the beginning of the first semester of the program, students are required to submit Health Forms, which are completed in conjunction with their Health Care Provider. These forms document that the student is physically and psychologically able to meet the requirements of the RADT Program. These forms are considered clinical onboarding documents and must be maintained. Health requirements, due dates, and specific forms are available at the following link: <https://www.howardcc.edu/programs-courses/academics/academic-divisions/health-science-and-technology/health-sciences/resources/>

All requirements are to be submitted to/through CastleBranch Health Compliance Tracker for review/approval. Please note to create an account please go to: <https://portal.castlebranch.com/hh18>

Students must fulfill all clinical onboarding documents in accordance with the designated deadlines determined by the Division Clinical Liaison. If there are questions, email the HSD Clinical Liaison Office at hsdcc@howardcc.edu.

Health forms, including CPR, must be submitted, and the student must be clinically cleared before the student can be scheduled to attend a clinical site. Clinical clearance is obtained when:

1. All required documents are submitted on time.
2. Health care provider and/or tests indicate that there are no restrictions and/or unacceptable lab values.

It is the student's responsibility to ensure that health requirements are kept up to date in accordance with clinical clearance policies. If any clinical onboarding document expires during a term, it must be updated in accordance with published deadline dates. Dates are available on the HCC Health Sciences Division website. If a student fails to keep clinical documents and requirements up to date, the student will not be permitted to attend clinical rotations which may jeopardize successful completion of clinical course requirements.

In addition, the RADT Program requires students to be in compliance with the following clinical onboarding documents:

1. Criminal Background Check, annually
2. Urine Drug Screen (10-panel), annually
3. CPR, BLS minimum.
4. Seasonal Flu and COVID-19 Vaccines

Criminal background check and drug screening are clinical requirements. If a student is prohibited from attending a clinical site due to an unsatisfactory criminal background check and/or positive drug results, the Program will not reassign the student to any other clinical site. Thus, the student will not be permitted to continue in the Program.

9.1.2 Health and Liability Insurance

HCC does not provide or sponsor health insurance for the students. If a student sustains any injury while on campus or in the clinical setting, students should utilize their own health insurance or pay out of pocket to cover the cost of treatment and/or follow-up care. The Office of Student Life, Office of Admissions, and the Wellness Center maintain health insurance information packets for students.

HCC provides liability insurance coverage for students while they are attending approved clinical activities arranged by the Program. Liability insurance provides for legal expenses, according to the limits specified by the coverage. Students are eligible for liability coverage only if they were acting within the approved scope of practice and were being appropriately supervised at the time the incident occurred.

NOTE: Liability insurance is not health insurance.

9.1.3 Standard Physical Requirements for Clinical Rotations

The following are the Standard Physical Requirements for working in the clinical environment as a student in the RADT Program. These requirements were established as a result of a survey of clinical affiliates that provide training to RADT students. If you cannot meet these requirements, please contact the Program Chair to discuss the matter.

- Lift While Standing -** Light to Moderate - Less than 50 pounds - Frequent
- Lift While Sitting -** Light - Under 25 pounds – Frequent
- Lift With Assistance -** Heavy - Over 50 pounds (Patient Transfer, etc.) - Occasionally/Frequent
- Pushing -** Heavy - Over 50 pounds – Frequent
- Pulling -** Heavy - Over 50 pounds - Frequent
- Reaching -** (Full Extension - Elbow Flexion) at shoulder level - Occasional/Frequent
- Reaching -** (Full Extension - Elbow Flexion) above shoulder level - Occasional/Frequent
- Standing for extended periods -** Frequent
- Standing for extended periods with radiation protective device -** Frequent
- Sitting for prolonged periods -** Frequent
- Walking -** (Moderate distances within clinical environment) - Frequent
- Carrying -** Light to Moderate - Less than 50 pounds - Occasional
- Bending -** Occasional/Frequent
- Stooping -** Occasional/ Frequent
- Kneeling -** Occasional/ Frequent
- Turning -** Frequent
- Hand Manipulation -** (Hand controls, simple grasping, power grasping, fine manipulation) - Frequent
- Foot Controls -** Frequent
- Visual Requirements-** Ability to observe alarms, monitors, indicators, patients, and the public. Ability to recognize and respond to safety issues.
- Auditory Requirements -** Ability to hear and understand orders from a physician or supervising technologist. Ability to hear warning buzzers, safety alarms and respond appropriately.

9.2 *Change in Health Status Policy*

Any student experiencing a change in health status (any illness or injury) while enrolled in the program will be required to submit a written statement from their healthcare provider as to their ability to perform all expected functions fully, safely, and without jeopardizing the health and/or well-being of themselves or others. Documentation must be provided prior to re-admittance into the didactic and/or clinical setting. Students with a health status change may have to re-sign documents for clinical clearance including, but not limited to, the MRI Safety Screening Form.

9.3 *Education Requirements for ARRT Certification*

The ARRT tests and certifies qualified candidates who have met the didactic and clinical requirements within the profession. They are the world's largest credentialing organization that seeks to ensure high quality patient care in radiologic technology.

The ARRT requires mandatory and elective clinical competency exams that **MUST** be completed as education requirements for ARRT certification. The following is a list of those requirements as of January 2022:

- Ten (10) mandatory general patient care activities.
- Thirty-Six (36) mandatory imaging procedures.
- Fifteen (15) elective imaging procedures selected from a list of 34 procedures.
 - One (1) of the 15 elective imaging procedures must be selected from the head section.
 - Two (2) of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.
 - One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur, but not both).

The program systematically rotates students to different clinical settings. It is the student's responsibility to complete all mandatory and required elective competencies in two years. Students can perform up to **two** simulated competencies if they come up short at the end of the program. For more information students are encouraged to visit the following ARRT website: www.arrt.org

9.4 Uniform

For clinical practice, procedures class and skills labs, students **MUST** wear the approved HCC RADT uniform. Students must order uniforms through the HCC bookstore. The following is information about the specifications of the uniform:

- Navy Blue V-neck scrub top embroidered with HCC logo, brand: Landau
- Navy Blue Pant, brand: Landau
- Navy Blue Scrub Jacket (optional)
- White short-sleeve crew neck shirt
- White long sleeve crew neck shirt (optional)
- White or black socks
- White or black tennis shoes (reinforced toe, no soft material)
- Current HCC Student ID
- Site ID badges, if issued
- Radiation badge
- Assigned R/L lead markers
- Clinical Binder
- Health Clearance and N-95 Fit Testing Cards
- Technique book (spiral notebook)

All the above uniform items are required. If a student lacks one of the above, they will be dismissed for the day. The uniform must be clean and ironed. If any portion of the uniform is unserviceable (i.e., wear/tear, dingy, etc.) the student must replace the item promptly, else the student will be dismissed for the day. Any dismissal due to uniform issues will be counted as an absence, regardless of the reason or time of day.

Students must maintain a “professional and well-groomed appearance and **good personal and oral hygiene.**” Infection control must be maintained regarding hair, beards and mustaches, which must remain in compliance with the assigned clinical site’s policies. If hair is longer than shoulder-length, it must be pinned in a neat fashion above the shoulders. No hats, scarves, bandanas, etc. are permitted to be worn at clinical sites, except for approved religious reasons. Nail-polish and artificial nails **ARE NOT** permitted at a clinical site. Fingernails must be clean and kept short. Perfume/cologne should be used in moderation to maintain professionalism. If there is a complaint about perfume/cologne usage, the student must immediately refrain from its use during clinical rotations. Visible body piercings and tattoos are not permitted, except for two small piercings per ear in the *lower* earlobe. Dangling jewelry can be accidentally or purposefully pulled by patients or caught in machinery, and thus should not be worn to clinical sites.

All students need to be willing to adapt to each clinical site's uniform policy. Some sites will require different PPE or scrubs (provided by site) to be worn depending on location- i.e. when in the OR. Student non-compliance with site and college uniform policies and expectations may lead to dismissal from the program.

9.5 *Clinical Evaluation and Grading*

The clinical experience is sequenced to correlate with didactic objectives of clinical education. Clinical rotations will provide students with practical experience and exposure to the responsibilities of a radiographer in the following areas:

- Patient care
- Professional behavior
- Radiation protection
- Radiographic procedures
- Equipment manipulation and setting technical factors.

The grading criteria for clinical courses are the same as that of didactic courses.

Clinical Competencies require a grade of $\geq 85\%$, based on the following criteria:

- a. Knowledge of procedure and communication
- b. Technical skills and equipment manipulation
- c. Radiation protection and infection control
- d. Critical thinking and image analysis

Students are assessed by faculty and staff clinical instructors during each semester. All registered technologists can provide clinical assistance and instruction to students; however, clinical competencies must be completed by a registered radiographer with at least two (2) years of experience. Unless specifically designated by the Clinical Coordinator, PRN technologists, who are not fully aware of Program policies, are not permitted to perform clinical competencies.

Exam Competency Failure Procedure

This procedure is designed to remediate student performance when a clinical exam competency is attempted, and the student achieves a score of less than 85%. When a student achieves less than the required score, the Clinical Coordinator will evaluate the need for, and type of remediation required to be eligible for successive attempts to achieve competency. The procedure involves three components: Student Counseling and Advisement, Skills Lab Remediation, and Reattempt of an Exam Competency. Full details are provided during RADT 108- Introduction to Clinical Radiography.

9.6 Professional Conduct

Students are responsible for conducting themselves in a manner consistent with the ARRT and ASRT Codes of Conduct and the HCC's Code of Conduct, its supporting policies, as well as state and federal laws and regulations. Students should always show professional courtesy and respect during clinical interactions.

9.7 Conduct Violations

The Program upholds industry standards regarding education and professionalism. HCC faculty and/or clinical staff have the right and responsibility to require a student to leave the clinical setting if the student's behavior is considered a breach of professional conduct. A breach of professional conduct includes the disruption of the physical and/or psychological well-being of patients, faculty, students, or clinical staff. Under these conditions, a student will be removed from a clinical site. If a student acts in any of the following ways, the student may be immediately dismissed from the Program, and they are not eligible for readmission.

The following is a list of behavioral activities that are considered a breach of professional conduct, but it is not all encompassing:

1. Mistreatment of patients in any manner
2. Medical negligence, such as leaving patients unattended while undergoing diagnostic procedures.
3. Falsifying attendance, competency form or other documents.
4. Habitual absence and/or lateness and failure to notify the clinical site, Clinical Coordinator, and Program Chair of an absence or lateness prior to the assigned starting time.
5. Loitering on hospital premises outside the Radiology Department or other unauthorized places and/or within Radiology Department beyond assigned hours.
6. Refusal to sign Program or College documents.
7. Exhibiting insubordination (refusal to follow instruction from designated supervisors), immoral conduct, or indecency.
8. Willfully damaging, destroying, or misusing institutional property.
9. Stealing or be in unauthorized possession of hospital or another person's personal property.
10. Touching a patient inappropriately.
11. Touching a staff, student and/or faculty member inappropriately.
12. Sexual Harassment.
13. Deliberately causing danger in the workplace or campus activities.
14. Breach of patient/staff confidentiality.

15. Create or contribute to unsanitary conditions in hospitals or other premises.
16. Intimidate or coerce another student or employee through physical or verbal threats.
17. Be in possession of a weapon of any kind while on clinical or college premises.
18. Exhibit signs and symptoms of drug and/or alcohol use or having possession of drugs and/or alcohol on clinical or college premises.
19. Failure to report any accident or injury involving students, patients, other hospital employees, or visitors.
20. Leave the clinical area early without prior permission.
21. Sleep or loiter during clinical time.
22. Accept or coerce gifts from patients.
23. Misuse of site ID badge.

Students may be required to submit alcohol and drug screenings, if at any time, signs and symptoms of possible use are observed. The student is responsible for all costs of any lab tests or screenings which are performed.

9.8 *At-Risk Behaviors*

During a student's progressive learning experience, the Program assesses the student's pattern of obtaining and applying previously learned concepts and skills. When the student's learning pattern is not consistent, after being assessed and evaluated as competent by the Program in specific skills, the student's behavior is considered At-Risk. At-Risk Behaviors are categorized as Critical and General Behaviors.

More than two (2) separate and/or repeat incidents of Critical At-Risk behaviors during the entire program will warrant immediate termination from the Program.

More than three (3) separate and/or repeat incidences of General At-Risk behaviors in a term or more than six (6) separate and/or repeat incidences of General At-Risk behaviors during the entire program will warrant immediate termination from the Program. A term is defined as the length of time designated for the completion of a sequenced course (class).

9.8.1 Critical At-Risk Behaviors

Critical At-Risk Behaviors include but are not limited to:

1. Not providing adequate radiation protection for patients, self, and staff according to the Program and clinical site policy.
2. Radiographing the incorrect patient and/or exam.
3. Non-use of Right and Left lead markers – more than two (2) occurrences.

4. Misuse of Right and Left lead markers (incorrect side of body)- more than two (2) occurrences.
5. Incorrect placement of the image receptor, such that an image would not be produced, and extra radiation would be given to the patient due to a repeat.
6. Failure to maintain medical and surgical asepsis and implement proper infection control.
7. Failure to maintain an environment conducive to patient and personal safety.
8. Disruptive or unprofessional behavior.

9.8.2 General At-Risk Behaviors

General At-Risk Behaviors include but are not limited to:

1. Positioning patients incorrectly for exams previously learned.
2. Improper uniform attire.
3. Unauthorized use of electronic devices.
4. Demonstrable lack of progress in learning or performing radiologic exams.
5. Failure to follow the JRCERT's and Program's Repeat and Supervision policies.
6. Not completing clinical onboarding in a timely manner or insubordination of any kind.
7. Smoking in undesignated areas of the Radiology Department or other undesignated areas of the clinical site or college.
8. Disobeying other regulations concerning safety, parking, and visiting.
9. Engaging in excessive talking, laughing, and other disturbances are not appropriate in the hallway, around patients, or on clinical premises.

9.8.3 At-Risk Behavior Documenting Procedures

1. At Risk behavior(s) will be documented on the Faculty-Student Consultation Form.
2. A student/instructor conference will be held.
3. A copy of the Student Conference Form will be given to the student, and the Program faculty will maintain the original copy in the student's file.

Students are expected to always conduct themselves in a professional manner. Students who are asked to leave a clinical experience or clinical laboratory due to violations of safety, professionalism, and/or college/Program code of conduct, will not be placed in another clinical site or laboratory, pending investigation and review. This may result in an inability to progress and/or complete a course/program. Students have the right to appeal and due process. Upon investigation, if the student was not at fault, the Program will attempt to place the student to another clinical site one additional time provided:

1. There is an available seat to place the student.
2. The student has not obtained three (3) General At-Risk Behavior notifications for that term or six (6) General At-Risk Behavior notifications for program duration.
3. The student has not obtained two (2) Critical At-Risk Behavior notifications during their time in the program.
4. The site change does not affect another student's scheduled objectives and learning.
5. The request for removal is not related to drug or alcohol use.
6. The request for removal is not due to conduct or At-Risk Behaviors that may jeopardize patient safety.

9.9 Incident Reporting / Overexposure

Following a clinical incident of patient or student injury or abnormal radiation exposure, the incident must be reported immediately to the site Clinical Instructor and Department Manager, and the RADT Program Director and Clinical Coordinator. The HCC Incident Report Form must be completed by the site Clinical Instructor and returned to the HCC Clinical Coordinator or Program Director. The clinical site may require additional documentation. In addition, any incident that the student or staff considers to be inappropriate or unethical must be reported immediately to the site Departmental Manager, and RADT Program Director and Clinical Coordinator.

9.10 Clinical Administration and Clinical Data Tracking

HCC student progress in a clinical setting develops from an observer to a competent radiographer who can perform radiographic procedures independently. In preparing the student to be a competent entry level radiographer, the following format is employed:

- Skills Lab practice and competency
- Clinical observation
- Pre-clinical competency practice
- Clinical competency
- Clinical and Skills Lab reinforcement (additional) competency
- Post competency practice for proficiency

9.10.1 Required Steps for Competency Achievement

9.10.1.1 Skills Lab Setting

Students must practice and successfully perform an Exam Competency in the Skills Lab prior to performing steps 3 and 4 (outlined below) in a health care setting. Steps

1 and 2 may be performed in the health care setting before a Skills Lab Competency is achieved. A Skills Lab Competency has two parts, a radiographic examination simulation and an anatomy test; to pass, a student must score at least 85%.

Additionally, students must practice and successfully complete Patient Care Competency Evaluations in the laboratory setting including Vital Signs Assessment, Patient Transfer Techniques, Sterile-Aseptic Technique, Venipuncture, and O2/Suction Equipment/Administration.

9.10.1.2 Clinical Setting

Documenting competency in a health care setting has four levels, each of which is completed chronologically and documented. However, Step 2 - Assisting the Technologist (Assist with Much Help) may be omitted if the student feels confident and ready to move to Step 3 - Performing Exam for Determination of Competency Readiness (Assist for Competency).

The four levels include:

1. Exam Observation (Observe)
2. Assisting the Technologist (Assist with Much Help)
3. Performing Exam for Determination of Competency Readiness (Assist for Competency)
4. Competency Performance Evaluation

Level 1: Exam Observation (Observe) is defined as no direct involvement with equipment manipulation, technique setting, or positioning. Students can earn observation credit at any time during the program.

Required Documentation: Clinical Management System only

Level 2: Assisting the Technologist (Assist with Much Help) is defined as minimal involvement with equipment manipulation, technique-setting, and positioning. This level follows Exam Observation. Students may set technical factors provided by the technologist and move the x-ray tube and IR receptor into position at this level. The student may assist the technologist to get the patient into position, but independent positioning of the patient may only be performed after content coverage in class/skills lab.

Required Documentation: Clinical Management System only

Level 3: Performing Exam for Evaluation of Competency Readiness (Assist for Competency) is defined as direct involvement with equipment manipulation, technique-setting and positioning. The student will perform the exam with minimal assistance by the technologist to determine readiness for a Competency Evaluation. Student markers must be used. This level follows a successful Skills Lab Competency, Observation, and Assisting the Technologist (optional). A student can only earn “assist for competency” credit after the didactic and skills lab portion of a body part is covered at HCC and the student documented competency at the skills lab.

Required Documentation: Clinical Management System and Daily Log Sheet

Level 4: Competency Performance Evaluation (Perform Competency) is defined as independent student performance of a radiographic exam including equipment manipulation, technique-setting, and positioning of the patient. This level follows all prior levels. The technologist or clinical instructor will complete an evaluation of the student’s performance at this level.

Required Documentation: Clinical Management System, Daily Log Sheet, and Clinical Competency Tracking Form.

Note: Some exams are considered exempt from the standard procedural steps for competency achievement provided a competency exam was completed in the skills lab. Students are exempt from documenting Step 3 - Performing Exam for Determination of Competency Readiness (Assist for Competency) for the following exams:

- All repeat competencies.
- Geriatric exams (if competency has been achieved on routine examinations)
- Sternum
- All head work (skull, sinuses, and facial bone etc.)
- Esophagogram, upper GI, small bowel series, and barium enema
- Cross table spine and cross table hip examinations (if competency has been achieved on routine spine)
- Soft tissue neck exam (if competency has been achieved on a cervical spine)
- Subsequent decubitus exams if a competency has been achieved on one.

As the student achieves competency in radiographic studies, they are allowed to perform with increased independence and indirect supervision (in the Clinical Management System, this is referred to as a “Post Comp”), thus promoting the development of self-confidence in exam performance. Ultimately, the result is a graduate who possesses competency as entry level radiographer.

A guide for performance of a Competency Evaluation is available in the Clinical Management System Report System.

9.11 Clinical Binder and Clinical Management System Tracking

The Clinical Management System will electronically profile the student's entire clinical experience. All clinical experiences must be tracked via the Clinical Management System. Students should also organize necessary documents in a Clinical Binder that they should always carry to their clinical site. The following are tasks that must be tracked and documented via Clinical Management System and/or hard copy for program credit:

1. Attendance (Clinical Management System and hard copy if electronic clock in/out is not feasible)- Refer to Section 6.6 for further detail.
2. Objective forms (Clinical Management System only)- It is a student responsibility to request a Site or HCC CI to complete all objective forms in Clinical Management System within two weeks of their assignment to a new clinical site.
3. Competency Steps (Clinical Management System and hard copy)- Refer to Section 9.10.1.2 for further detail.
4. Competency Evaluation Forms (Clinical Management System and hard copy)- a hard copy is highly recommended in case the clinical instructor forgets to log the evaluation into the Clinical Management System.
 - a. Daily Log Sheet Exams and Competencies must be entered into the Clinical Management System during the same week of occurrence to avoid a grade reduction of 15%. **Course credit will not be given for any clinical experience that is not documented in the Clinical Management System.**
5. Student self-evaluation (Clinical Management System only)- Students are required to complete a self-evaluation within two weeks of their semester assignment.
6. Clinical site and CI evaluations (Clinical Management System only)- Students are required to complete evaluations of the Clinical Site and Clinical Instructors by the last Friday of a clinical rotation.
7. Competency Tracking Form (hard copy only)

Information and examples of what to include in the Clinical Binder are given during the RADT 108- Introduction to Clinical Radiography course.

9.12 Clinical Packet Submission

Students are required to submit clinical packets at the end of each semester. The packet must be submitted via the Canvas Course by the due date indicated on individual course syllabi. Students are highly encouraged to keep hard copies of all clinical documents for their record.

The clinical packet must include the following hard copy items:

- Attendance Form (if hard copies are used)
- Daily Log (Assist for Competency and Perform Competency entries)
- Competency Tracking Form
- Competency Forms and Clinical Objectives (if hard copies are used)

9.13 Clinical Equipment and Examination Room Objectives

The program requires Equipment and Examination Room Objectives be met through site training prior to performing patient care/exam duties. Satisfactory knowledge of these objectives is indicated by the signature of a site technologist. The following is list of the required Objectives: CR/DR, OXYGEN/SUCTION, GENERAL RADIOGRAPHY EQUIPMENT PERFORMANCE, MOBILE EQUIPMENT, EVENING OBJECTIVES, and EMERGENCY EQUIPMENT/PREPAREDNESS. The Equipment and Examination Room Objectives are completed for each location, if rotating for the first time, within the first two weeks of the rotation. If a student rotates to the site more than once, the forms do not need to be completed again.

In addition to the Equipment and Examination Room Objectives, there are site-specific forms and requirements, which are achieved through site training prior to performing patient care/exam duties. Satisfactory knowledge of these requirements is indicated by the signature of a site technologist. This may include a FLUORO ORIENTATION which will be completed prior to fluoroscopy exam competency.

9.14 Clinical Sites

- **AAM** – Advanced Radiology- Arundel Mills, 7556 Teague Rd #200, Hanover, MD 21076 – 14 miles from HCC
- **AEC** – Advanced Radiology- Ellicott City, 4801 Dorsey Hall Drive #101, Ellicott City, MD 21042 – 4 miles from HCC
- **AM** – Advanced Radiology- Millersville (Shipley's Choice), 8601 Veterans Highway #100, Millersville, MD 21108 – 23 miles from HCC
- **BHC** – Bowie Health Center, 15001 Health Center Drive, Bowie, MD 20716 – 27 miles from HCC
- **CAP** – UM Capital Region Medical Center, 901 Harry S. Truman Drive, North Largo, MD 20774 – 33 miles from HCC

- **CRC** – Charter Radiology Columbia, 10700 Charter Drive, Suite 110, Columbia, MD 21044, Phone: 410-419-5149 – 0.8 miles from HCC
- **CRR** – Charter Radiology Reisterstown, 116 Westminster Pike, Suite 104, Reisterstown, MD 21136 – 27 miles from HCC
- **GMC** – Grace Medical Center, 2000 West Baltimore Street, Baltimore, MD 21223 – 20 miles from HCC
- **HCMC** – Johns Hopkins Howard County Medical Center, 5575 Cedar Lane, Columbia, MD 21044 – 0.8 miles from HCC
- **HUH** – Howard University Hospital, 2041 Georgia Avenue NW, Washington, DC 20060 – 28 miles from HCC
- **JHI** – Johns Hopkins Medical Imaging- Columbia, 11055 Little Patuxent Pkwy L9, Columbia, MD 21044 – 0.5 miles from HCC
- **LMC** – Laurel Medical Center, 7150 Contee Road, Laurel, MD 20707 – 14 miles from HCC
- **PFC** – Patient First- Columbia, 5900 Cedar Lane, Columbia, MD 21044 – 1 mile from HCC
- **PFOM** – Patient First- Owings Mills, 10210 Reisterstown Rd, Owings Mills, MD 21117-3606 – 24 miles from HCC
- **UMROI** – University of MD Rehabilitation & Orthopaedic Institute, 2200 Kernan Drive, Baltimore, MD 21207-6665 – 17 miles from HCC
- **VADC** – Washington DC VA Medical Center, 50 Irving St NW Washington, DC 20422 – 26 miles from HCC

9.14.1 Clinical Site Placement Procedure

Student assignments are non-discriminatory and are based upon the following criteria:

1. The number of students authorized by the JRCERT and agreed upon by the Clinical Site.
2. The clinical site has no objection to the placement of a specific student to their site. (Conflicts of interests, relatives employed by that facility, etc.)
3. The geographic location relative to HCC.
4. Clinical competency achievement, rigor of the site, and how well a student is expected to acclimate to and learn from the staff at a specific facility. (Some students may learn better at a facility with more one-on-one mentoring, some students may benefit from repetitive rotations to reinforce skills, etc.). This is determined initially by observation and assessment during RADT 106 skills lab sessions.

Note. If a student works/volunteers in one of HCC's clinical sites, the program will attempt to not assign the student to that clinical site. If that is not possible and the student is assigned to a clinical site where they work/volunteer, they must not use their employee ID, radiation monitor, or employee status during student clinical rotation or vice versa.

The following is the Radiography Program's clinical plan of education:

1. RADT 108, Term 1, students will perform Patient Care Comps in the HCC lab.
2. RADT 118 and RADT 128, which are Terms 2 and 3 respectively, students will rotate 8 hours/day, twice a week, for a total of 24 days or 192 hours within the 15-week semester.
3. RADT 238, Term 4 (Summer), students rotate 8 hours/day, 4 days/week, for a total of 32 days or 256 hours within the 8-week semester.
4. RADT 248 and RADT 258, which are Terms 5 and 6 respectively, students will rotate 8.5 hours/day, twice a week, for a total of 30 days or 255 hours within the 15-week semester.
5. Evening rotation assignments do not exceed the JRCERT's evening maximum rotation limit during the student's tenure in the Program.
6. Students will be assigned to at least three main sites over the course of the Program to ensure that adequate and comparable opportunities are afforded to all students to develop the necessary skills and obtain the required number of clinical competencies.
7. Clinical assignments also include observational advanced modality experience if a site is available (optional – CT, MRI, Mammo).
8. Clinical rotation schedules are developed to provide all students with comparable clinical experiences. Students are not permitted to change the schedule on their own. Students must remain in their assigned rotation. If the area has no radiographic exams in progress and there are radiographic exams in another area, the student may change areas under the following conditions:
 - a. The Staff Clinical Preceptor is in agreement.
 - b. The change will not create an overload of students in the area in which the radiographic examination in process (1:1 student to staff ratio will be maintained)
 - c. The change will not interfere with the clinical objectives or opportunities of the student already assigned to the area.
 - d. The student will return to the assigned area when there are clinical duties/exams to be performed.
9. The Clinical Coordinator will provide students, clinical sites, and the Health Science Division Clinical Liaison electronic notification of site placement in a timely fashion to allow for background checks and other site-specific

requirements. The Program Clinical Coordinator will provide students with information about objectives, location, parking information, and contact person. The Clinical Coordinator will also provide room assignments, upon site request. Room assignments will be based on:

- a. Room/equipment availability
 - b. Staff availability
 - c. Student readiness
 - d. Number of students assigned
10. The Clinical Coordinator will provide information about the clinical site regarding objectives.
11. A student will not be permitted to rotate to a clinical site if the student has not been clinically cleared by the Division Clinical Liaison Office.

9.14.2 Clinical Competency Requirements

1. Students are required to complete 36 mandatory and 15 elective clinical competency exams, as outlined by the ARRT.
2. Students must obtain a minimum number of clinical competencies per semester. The clinical competencies obtained by the student can be a new mandatory, new elective, or recomps (additional; see below for more information on these) competencies. Recomps competencies do not require an observe or assist step. New and recomp competencies of the same exam are not permitted in the same semester. If the student does not obtain the minimum number of clinical competencies in a semester, the student will receive a course failure and will not be permitted to remain in the Program. The following table indicates the number of competencies per clinical course.

Minimum Number of Competencies	Course	Cumulative number of Competencies	Cumulative Minimum number of Elective Competencies
0	RADT 108	0	0
5	RADT 118	5	0
12	RADT 128	17	0
14	RADT238	31	8
11	RADT 248	42	12
9	RADT 258	51	15

If a student obtains more than the minimum required competencies during a semester, the excess number of competencies cannot be used for subsequent

semesters to calculate the minimum. The total number will be used to calculate the ARRT requirement. A student may complete a competency on previously performed exams (recomps) to maintain the minimum competency requirements for a semester, provided that the cumulative number of new competencies is maintained. If a student recomps an exam to fulfill a given semester's competency requirement, it will not be counted toward the cumulative number of competencies. Students can only recomp a specific exam once during the entire program.

3. During the last semester clinical course, Clinical Radiography V (RADT 258), the student will be evaluated for terminal competence. Terminal competency completion is designed to evaluate the student's readiness to graduate from the program with entry level radiologic technology skills. Each student must successfully complete ten (10) terminal competencies, two (2) different exams from each of the following categories: [Chest and Thorax], [Upper Extremity], [Lower Extremity], [Head, Spine and Pelvis], [Abdomen and Fluoroscopy Studies]. The student must achieve 85% to successfully complete the terminal competency. If a student achieves less than the required score, the Clinical Coordinator will evaluate the need for, and type of remediation required to be eligible for successive attempts to achieve competency. Full details will be provided in the course syllabus.

9.14.3 Semester Competency Planning

All students MUST print a list of exams they are ready for or planning to perform for competency at the beginning of a semester and update it regularly. The list must be provided to the site clinical instructors for which the student is assigned.

9.14.4 RADT Observational and Advanced Modalities Rotation

Students must be HIPAA compliant and receive Bloodborne Pathogens training prior to assignment to an observational rotation for RADT 108. Students are not permitted to perform patient care duties during observational assignments. Students will observe clinical activities that have been introduced in the didactic component of the RADT 106 course. A hundred percent attendance is required for observational rotation days. Any missed observational days may be made up at the discretion of the Program.

For advanced modality rotations, students observe and assist in clinical activities that have been introduced in didactic courses. Students are permitted to perform patient care duties as indicated in the Program Advanced Modality Objectives.

9.14.4.1 Magnetic Resonance Imaging (MRI) Safety Policy

Students enrolled in the Radiologic Technology Program are required to have awareness of safe and responsible practices in MRI and practice accordingly.

The student is required to read the *ACR Guidance Document on MR Safe Practices: 2019* ([ACR guidance document on MR safe practices: Updates and critical information 2019 \(wiley.com\)](http://www.acr.org/)) prior to their initial clinical assignment. The guidelines provided through this URL were established by the American College of Radiology (ACR) <http://www.acr.org/> and are intended to promote the safe and responsible clinical practices in MRI.

In addition, the student must practice according to any applicable policies and follow screening procedures at each clinical site before entering the MRI area.

Students must also complete the “Magnetic Resonance Imaging (MRI) Safety Screening Form” and submit it to the Clinical Coordinator and/or Program Director **prior to participating in any clinical rotation.**

9.15 *Clinical Make-Up*

1. If a student is eligible for makeup time, it **MUST** be made-up during finals week in consultation with the clinical coordinator.
2. If make up time is due to Excessive Absenteeism:
 - a. Students are not allowed to exceed 10 hours/day and 40 hours/week. Therefore, make up time should be scheduled on clinical off time.
 - b. Make-up time should at least be 30 minutes at a time. (i.e., not 15 minutes sporadically)

9.16 *Tipping*

Accepting tips or any form of gratuity from a patient, member of a patient’s family, and/or staff member is prohibited.

9.17 *IR Markers*

At least one (1) set of initialed right and left lead markers is required and purchased by the student; the purchase of two (2) sets is strongly encouraged. In addition to student initials, the markers must also contain the assigned class letter. The markers cannot be loaned to others. If markers are lost, the student is responsible for replacing the markers. If a lead marker is lost or missing, the student must not go to their clinical rotation.

9.18 *Supervision*

Appropriate supervision of students enrolled in the RADT Program is necessary for patient safety and appropriate educational practices. Depending on student skill level and performance, the supervision is either Direct or Indirect.

Program Supervision Policy

Student performance of patient exams and/or procedures must be under direct supervision of a qualified radiographer until a student demonstrates competence, and then supervision can be indirect. Radiographer supervision of students is clearly defined by the JRCERT as:

- **Direct Supervision** is student supervision by a qualified radiographer who reviews the procedure in relation to the student's achievement, evaluates the condition of the patient in relation to the student's knowledge, is physically present during the conduct of the procedure, and reviews and approves the procedure and/or image.
- **Indirect Supervision** is student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement. The radiographer doesn't have to be physically in the room with the student, unless requested by the student.

In accordance with applicable JRCERT standards:

- Repeat images must be completed under direct supervision. The presence of a qualified radiographer during the repeat of an unsatisfactory image assures the patient's safety and proper educational practices.
- Students must be directly supervised during surgical and all mobile procedures, including mobile fluoroscopy procedures regardless of the level of competency.

This policy is in effect the entire time the student is enrolled. Students must acknowledge receipt and always adhere to the Program Supervision Policy. Students must refuse to perform any examination if the appropriate level of supervision is not provided. If the student does not abide by this policy, they will be subject to suspension or dismissal from the program.

9.19 Confidentiality/HIPAA/ Occupational Safety and Health Administration (OSHA)

HCC adheres to the federal HIPAA and OSHA regulations.

- HIPAA - The right to privacy of students, faculty, staff, patients, and their families should always be maintained by those associated with the RADT Program. It is the student's responsibility to keep confidential all patient and facility information. Any patient or related facility information should be accessed by students only if they are directly involved with the patient's care. Patient information should never be discussed in public areas with anyone, even those involved with patient care. If training materials or images are obtained by a student, all patient information must be removed or masked. Failure to adhere to HIPAA policy may lead to immediate dismissal from the program.
- OSHA - Students must understand OSHA regulations and should discuss any observed irregularities with the clinical coordinator or program chair as appropriate.

9.20 Clinical Site Requirements:

Some clinical rotations require additional requirements for clearance. Clinical rotations specific requirements are as follows:

1. Advanced Radiology- Arundel Mills, Ellicott City, Millersville- completion of patient confidentiality form
2. Charter Radiology – Columbia and Reisterstown sites – no requirement
3. Grace Medical Center – Submit required forms and obtain hospital ID badge before the first day of clinical rotation.
4. University of Maryland Sites- Bowie Health Center, Laurel Medical Center, and Capital Region Medical Center – submit confidentiality forms C, D and E, complete online training and obtain hospital ID badge prior to start of clinical rotation.
5. Johns Hopkins Sites- HCMC and JHI – Exhibit B & C form signed
6. Howard University Hospital – no specific requirement needed
7. Patient First- Columbia and Owings Mills – application is submitted online, and an interview is conducted by a Patient First representative prior to starting clinical rotation.
8. University of Maryland Rehabilitation Orthopaedic Institute – obtain hospital ID badge and complete online orientation prior to the first week of clinical rotation.
9. Washington DC VA Medical Center – no specific requirement needed.

10 Radiation Protection Policy and Procedure

10.1 *General Radiation Protection Policy and Procedure*

The RADT Program is committed to maintaining radiation exposure levels to As Low As Reasonably Achievable (ALARA), while still allowing each student to obtain all required clinical and didactic competencies. Students must not hold image receptors or patients during any radiographic procedure.

10.2 *Personal Monitoring Badges*

The purpose of personal monitoring is to ensure that a student's exposure level is kept below the annual effective dose limit. Data from personal monitoring can also provide work habits and working conditions. Students are given a radiation monitoring badge, free of charge, to document their radiation exposure data during energized laboratories and clinical rotations.

The Program follows a strict use of personal monitoring badges to promote safe radiation working habits by individuals and document radiation accidents. Hence:

1. Students without radiation monitors will not be allowed in any clinical setting and energized skills labs.
2. Badge should be worn at a collar level outside of a lead apron during fluoroscopic procedures or any time a lead apron is worn.
3. Students should notify the program immediately if their radiation monitoring badge is lost.
4. Declared pregnant students will be provided a fetal monitoring badge. It is to be worn at the waist level and under any protective aprons.
5. Radiation exposure reports are posted in the skills lab bulletin board located in KHH 264 or shared with students within thirty (30) school days following receipt of the data.

10.3 *Annual Occupational Dose Limits*

Any dose received must not exceed the annual occupational dose equivalent limits established by the Nuclear Regulatory Commission regulations standard 10 CFR subpart C-Occupational Dose Limits 20.1201. The Program has a published protocol that identifies a threshold dose for incidents in which student dose limits are exceeded, see Section 10.5.

Annual Dose Limits

- Whole body
 - 50 mSv (5 rem)/year
- Extremities
 - 500 mSv (50 rem)/year
- Lens of the eye
 - 150 mSv (15 rem) / year
- Fetus
 - 5 mSv (0.5 rem)/gestation
 - 0.45 mSv (0.045 rem) / month

10.4 Provision for Pregnant Student

Title IX of the Education Amendments of 1972 is a comprehensive federal law that prohibits discrimination based on sex in any federally funded education program or activity. Hence HCC cannot require a pregnant student to withdraw from classes or program or change her educational plans due to pregnancy.

A student who is pregnant or suspects that she might be pregnant has the option of disclosing the pregnancy to the RADT Program Chair. If the student chooses to inform the Program Chair, she must do so in writing and bring in a doctor's note that states the expected date of delivery. The Program Chair must complete a pregnancy consultation sheet with the student. A copy of the Pregnancy Consultation form is in the back of this Handbook.

If the declared pregnant student continues in the program, she will be provided with a second radiation monitor for the fetus. At any time, the student can withdraw her declaration of pregnancy and the original whole body effective annual dose limit for non-pregnant students will be applicable. If, however, the student wants to withdraw from the program, she **MUST** do so in writing by completing the Withdrawal Form located in the back of this Handbook.

Note: Performance expectations of a declared pregnant student remain unchanged. A student may not decline to perform patient exams. All program requirements, didactic and clinical, must be met.

10.5 Exceeding Dose Limits

Radiation dose more than the annual dose limit is very rare in Diagnostic Radiology. Students are encouraged and supervised to follow the cardinal principles of radiation protection and achieve the ALARA-principle.

If a dose limit is exceeded:

- The person involved is notified.
- The incident is documented and signed by the person involved.
- The person involved receives counseling on radiation protection.
- The Program Chair, Clinical Coordinator, and Clinical Instructor examine the cause of the exposure and student or faculty clinical work habits.

Depending on the cause, the Program can impose additional requirements, forbid activities, set penalties, and determine if student dismissal from the program is warranted.

11 Infection Control

This policy is consistent with Centers for Disease Control (CDC) Recommendations for Standard Precautions.

11.1 *General Principles*

1. Consider all patients' blood and body fluids as infectious materials.
2. Equipment, instruments, and utensils which come in contact with patient excretions, secretions and body fluids are considered contaminated.
3. Infectious waste includes, but is not limited to, the following:
 - a. All dressings
 - b. Used soiled pads/diapers
 - c. Intravenous tubing/catheters
 - d. Used Foleys and drainage bags
 - e. All used needles/sharps
 - f. Trash, gloves, gowns, masks, etc., from isolation room
 - g. Sanitary napkins
 - h. Used suction containers and tubing
 - i. Chest tubes and other drains and tubes
 - j. Specimens
 - k. Disposable equipment and supplies once used on a patient
 - l. Endotracheal tube, laryngoscope blades, airways

11.2 *Precautions*

All health-care workers should routinely use appropriate barrier precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids of any patient is anticipated. The purpose of personal protective equipment (PPE) is to keep blood and other potentially infectious material from contacting skin, eyes, and mucous membranes. In some cases, adequate protection is

provided solely by gloves. In other cases, masks and eye protection will also be needed. In still other situations, gowns, aprons, and head covering may be required.

11.3 ***Procedures***

1. Wash hands frequently between all patients and before and after glove use. Gloves should be changed after contact with each patient and immediately if they're torn or punctured.
2. Wear PPE when exposed to any patient's blood and body excretions and/or secretions such as when touching mucous membranes or non-intact skin, handling soiled equipment and venipuncture. Other examples include:
 - a. Collecting specimens.
 - b. Cleaning up fecal/urinary incontinence or handling linen and soiled garments.
 - c. Bathing a patient.
 - d. Mouth care and eye care.
 - e. Removing soiled bed linens.
 - f. Beginning/discontinuing/intravenous and intraosseous therapies.
 - g. Administering parenteral injections.
 - h. Emptying Foleys, bedpans, urinals, emesis basins, NG drainage and wound drainage, sitz baths.
 - i. Changing dressings, perineal pads, and diapers.
 - j. Cleaning any surface, the patient has contact with spills of blood or body fluids.
 - k. Handling tissues or clothing contaminated with tears or perspiration.
 - l. Performing suctioning or intubation.
3. Place disposable syringes and needles, scalpel blades, and other sharp items into designated, puncture-resistant containers. Do not recap, bend or break off needles.
4. Place all infectious waste not suitable for disposal in "sharps" container into red (biohazard) plastic bags.
5. Wear gowns if splashing or soiling by blood and body fluids is likely. After exposure, remove protective clothing in proper doffing method to avoid contaminating self. Place in the assigned area or container.
6. Wear other protective covering (e.g., masks, goggles, face shields, etc.) as indicated by situations such as newborns, infectious patients, during invasive procedures, or when splashing is likely. Wash after removing protective equipment and as soon as possible after blood contact with skin, eyes, or mucous membranes.

7. Individuals with exudative lesions or exposed skin surfaces should refrain from direct patient care and from handling patient-care equipment. Small cuts and scrapes should be covered with an occlusive adhesive dressing or bandage and monitored closely for integrity during patient care activities. Students with large open wounds (even sutured ones), should have a physician's release prior to attending any clinical experience.

11.4 Infection Control During Cardiopulmonary Resuscitation (CPR)

New guidelines by the American Heart Association (AHA) recommend that the three steps of CPR be rearranged. The new guidelines apply to adults, children, and infants, but exclude newborns. The old way was A-B-C -- for airway, breathing and compressions; the new way is C-A-B -- for compressions, airway, and breathing.

Since, students must work under direct or indirect supervision; the technologist should take over CPR by the time they get to the second step - establishing the airway. However, if the student is still performing CPR, they must use available resuscitation bags and ventilation devices or mouthpieces for mouth-to-mouth.

11.5 Exposure Incident

A significant exposure is defined as:

- A needle stick or cut caused by a needle or "sharp" that was actually or potentially contaminated with blood or body fluids.
- A mucous membrane exposure (i.e., splash to the eye or mouth) to blood or body fluids.
- A cutaneous exposure involving large amounts of blood or prolonged contact with blood - especially when the exposed skin was chapped, abraded, or afflicted with dermatitis.

If you are directly exposed, **report it immediately** to the site Clinical Instructor and Department Manager, and the RADT Program Director and Clinical Coordinator. The student must complete the required documentation as outlined in Section 9.9 of this Handbook.

If an accidental exposure occurs, faculty, students, and staff should follow the CDC guidelines for occupational exposure: if needle stick occurs, test for HIV to establish serum negativity first, then retest at 6 weeks, 3 months, 6 months, and 1 year.

You will be directed to your personal physician for any treatment and follow-up required because of any exposure you encounter. HCC and the clinical facility are not

responsible for covering the costs of any associated treatments. Students are strongly urged to obtain their own health insurance, see Section 9.1.2.

**HOWARD COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM**

PROGRAM SEXUAL HARASSMENT PROCEDURES

The Radiologic Technology Program is committed to maintaining an equitable and objectionable learning environment. The following behaviors are, therefore, prohibited:

1. Behavior that is sexual or fraternizing in nature.
2. Behavior that interferes with the student's performance.
3. Behavior that creates an intimidating, hostile or offensive learning/working environment.

Sexual Harassment Procedure

1. The student is to report to the Clinical Instructor and the Program Chair any occurrence that they considered to be harassment of a sexual nature.
2. The Clinical Instructor or Supervisor will notify the appropriate personnel at the clinical education site of the accusation if the accused is an employee. The hospital's policy on sexual harassment will then be followed.
3. The Clinical Instructor will notify the Program Chair if the accusation is against a student in the Radiography Program. At which time, the Sexual Harassment Policy, stated in the HCC Student Handbook will be followed.

I, _____, have read and understand the above policy and procedures for what qualifies as sexual harassment and what steps will be taken should a complaint be filed.

Student Signature

Date

RADT Faculty Signature

Date

Revised on September 9, 2024

**HOWARD COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM**

PREGNANCY COUNSELING SHEET

The purpose of this document is to state that the student named below has met with the Radiologic Technology Program Chair, or designee, regarding her declaration of pregnancy and the school's policy regarding student pregnancy.

The following topics were discussed:

1. Declaration of pregnancy is voluntary.
2. The student can withdraw a declaration of pregnancy at any time.
3. During the entire gestation period, the dose equivalent limit is 5 mSv (0.5 rem)/gestation or 0.45 mSv (0.045 rem) / month.
4. The principles of radiation protection including time, distance, and shielding must be applied to limit the fetal dose.
5. The student is expected to continue in the clinical and classroom environment. Competencies, objectives, and attendance policies remain in effect.
6. Absences may be made up according to the Program's make-up policy
7. The student has the option of withdrawing from the program and re-entering the following year, depending on seat availability.
8. The program will inform the supervisor of a clinical site where the student is rotating to ensure the privacy of the student is maintained as well as necessary radiation protection is applied.

I, _____, have discussed the above topics with the Radiologic Technology Program Chair and fully understand these as stated.

____ I plan to continue with the Radiologic Technology program during my pregnancy.

My approximate conception date was _____

____ I do not wish to continue with the Radiologic Technology Program currently.

Student Signature

Date

Program Chair Signature

Date

Revised on September 9, 2024

**HOWARD COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM**

CONSULTATION SHEET FOR WITHDRAWING DECLARATION OF PREGNANCY

The purpose of this document is to state that the student named below has met with the Radiologic Technology Program Chair regarding her withdrawing declaration of pregnancy.

The following topics were discussed:

1. Immediately turn in the dosimeter that was used for fetal monitoring.
2. The student has chosen to continue in the clinical and classroom environment. Competencies, objectives, and attendance policies remain in effect.
3. Absences may be made up according to the Program's make-up policy.
4. The student has the option of withdrawing from the program and re-entering the following year, depending on space and availability.

I, _____, have discussed the above topics with the Radiologic Technology Program Chair and fully understand these as stated.

___ I plan to continue with the Radiologic Technology Program.

___ I do not wish to continue with the Radiologic Technology Program currently.

Student Signature

Date

Program Chair Signature

Date

Revised on September 9, 2024

**HOWARD COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM**

EXPOSURE CONTROL PLAN- BLOODBORNE PATHOGEN

1. Distribution of Infection Control Policy to all nursing and allied health students, faculty, and staff.
2. Explanation of causes, symptoms, and methods of transmission of pathogens, particularly bloodborne pathogens.
3. Explanation of methods that will prevent or reduce exposure to blood borne pathogens including work practices, and personal protective equipment.
4. Description of types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment.
5. Explanation of reasons for selection of personal protective equipment.
6. Description of actions to take in the event of an exposure to potentially infectious materials including method of reporting the incident, medical follow-up, post-exposure evaluation and follow-up. Follow CDC guidelines; www.cdc.gov/
7. Description of signs and labels and/or color-coding used to identify hazards.

I verify that I have received training/education in all aspects of the Exposure Control Plan.

Student

Date _____

SIGN AND RETURN THIS FORM TO THE DIRECTOR BY THE END OF THE FIRST WEEK OF THE SEMESTER.

Revised on September 9, 202

HOWARD COMMUNITY COLLEGE
HIPAA Compliance/Confidentiality Standards

By signing this form, you are verifying that you have received training in the Basics of HIPAA Compliance and agree to adhere to HIPAA Compliance/Confidentiality Standards at all times while enrolled in the Radiologic Technology Program.

Student Name (Print): _____

Student Signature: _____ Date: _____

Received by: _____ Date: _____

Revised on September 9, 2024

HOWARD COMMUNITY COLLEGE

Magnetic Resonance Imaging (MRI) Safety Screening:

Student Name (first middle last): _____ **Gender:** _____

Answer YES or NO to each of the following questions and circle the type of implant you may have:

_____ Have you ever had an MRI examination before and had a problem?

_____ Have you ever had a surgical operation or procedure of any kind? If yes, indicate the type of surgery: _____

_____ Do you have any type of electronic, mechanical, or magnetic implant. If yes, circle the type of implant: Cardiac Pacemaker, Cardiac Defibrillator, Aneurysm Clip, Neuro-Stimulator, Cochlear Implant, Implanted Drug Pump, any type of Coil, Surgical Mesh, Filter, Valve, or Stent, Penile Implant, Diaphragm, IUD, any Type of Surgical Clip, Artificial Limb or Joint, Other (specify): _____

_____ Have you ever been injured by a metal object or foreign body (e.g., bullet, BB shrapnel)?

_____ Have you ever had an injury from a metal object in your eye (metal slivers, metal shavings, other metal object)?

_____ Are you pregnant (if applicable)?

If you answered YES to any of the above questions, you **MUST** meet with the Program Chair for more information to make sure that it is safe for you to enter a strong magnet MRI work area.

Moreover, you should remove any of the following before entering the MRI work area: hearing aid, medication patch, body piercing, all jewelry, hair pins, bobby pins, barrettes, clips, etc., watch, cell phone, credit and bank cards, and all other cards with a magnetic strip.

I attest that the above information is correct to the best of my knowledge. I have read and understood the contents of this form and had the opportunity to ask questions regarding the information and MRI work area risks.

Signature of Student: _____ **Date:** _____

For the Program Faculty/Director:

I, Assefa Fisseha, have reviewed the above information. From the answers, this student can/cannot (circle one) be allowed to rotate to any MRI clinical or visit an MRI suite.

Program Director's Signature: _____ **Date:** _____

Revised on September 9, 2024

HOWARD COMMUNITY COLLEGE
Magnetic Resonance Imaging (MRI) Safety Policy:

Students enrolled in the Radiologic Technology Program are required to have awareness of safe and responsible practices in Magnetic Resonance Imaging (MRI) and practice accordingly.

The student is required to read the *ACR Guidance Document on MR Safe Practices: 2013* (<http://onlinelibrary.wiley.com/doi/10.1002/jmri.24011/pdf>) prior to their initial clinical assignment. The guidelines provided through this URL were established by the American College of Radiology (ACR) <http://www.acr.org/> and are intended to promote the safe and responsible clinical practices in Magnetic Resonance Imaging (MRI).

In addition, the student must practice according to any applicable policies and follow screening procedures at each clinical site before entering the MRI area.

Students must also complete a **Magnetic Resonance Imaging (MRI) Safety Screening Form** and submit it to the Clinical Coordinator and Program Director **prior to participating in any clinical rotation.**

Students must also resubmit a Magnetic Resonance Imaging (MRI) Safety Screening Form to the Clinical Coordinator and Program Director if their MRI screening status changes.

I acknowledge receipt of the Magnetic Resonance Imaging (MRI) Safety Policy. I have read and understand the contents of this policy and had the opportunity to ask questions regarding MRI safety information.

Signature of Student: _____ Date _____

Faculty Signature: _____ Date _____

Revised on September 9, 2024

HOWARD COMMUNITY COLLEGE
Radiation Protection Policy and Procedure

By signing this form, you are verifying that you have received and understand the **Radiation Protection Policy and Procedure** (Section 10 of the Program Student Handbook) and agree to always adhere to the policy and procedures while enrolled in the Radiologic Technology Program.

Student Name (Print): _____

Student Signature: _____ Date: _____

Received by: _____ Date: _____

Revised on September 9, 2024

HOWARD COMMUNITY COLLEGE Program Supervision Policy

Appropriate supervision of students enrolled in the radiologic technology program is necessary for patient safety and appropriate educational practices.

Program Supervision Policy

Student performance of patient exams and/or procedures must be under direct supervision of a qualified radiographer until a student demonstrates competence, and then supervision can be indirect. Radiographer supervision of students is clearly defined by the Joint Review Committee on Education in Radiologic Technology (JRCERT):

Direct Supervision shall mean student supervision by a qualified radiographer who:

- reviews the procedure in relation to the student's achievement,
- evaluates the condition of the patient in relation to the student's knowledge,
- is physically present during the conduct of the procedure, and
- reviews and approves the procedure and/or image.

Indirect Supervision is student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement.

In accordance with applicable JRCERT standards:

- **Repeat images** must be completed under **direct supervision**. The presence of a qualified radiographer during the repeat of an unsatisfactory image assures the patient's safety and proper educational practices.
- Students must be **directly supervised during surgical and all mobile procedures**, including **mobile fluoroscopy procedures** regardless of the level of competency.

This policy is in effect the entire time the student is enrolled. Students must acknowledge receipt and always adhere to the Program Supervision Policy. Students must refuse to perform any examination if the appropriate level of supervision is not provided. If the student does not abide by this policy, he/she is subject to suspension, or dismissal from the program.

By signing this form, you are verifying that you have received and understand the **Program Supervision Policy** and agree to always adhere to the policy while enrolled in the Radiologic Technology Program. Your signature represents understanding it is your responsibility to perform examinations with the appropriate level of supervision as outlined in this policy.

Student Name (Print): _____

Student Signature: _____ Date: _____

Revised on September 9, 2024

Howard Community College

Radiologic Technology Uniform Policy

By signing this form, you are verifying that you have received and agree to always adhere to the Program Uniform Policy while enrolled in the Radiologic Technology Program. The uniform requirements are as follows:

For clinical practice, procedures class and skills labs, students **MUST** wear the approved HCC RADT uniform. Students must order uniforms through the HCC bookstore. The following is information about the specifications of the uniform:

- Navy Blue V-neck scrub top embroidered with HCC logo, brand: Landau
- Navy Blue Pant, brand: Landau
- Navy Blue Scrub Jacket (optional)
- White short-sleeve crew neck shirt
- White long sleeve crew neck shirt (optional)
- White or black socks
- White or black tennis shoes (reinforced toe, no soft material)
- Current HCC Student ID
- Site ID badges, if issued
- Radiation badge
- Assigned R/L lead markers
- Clinical Binder
- Health Clearance and N-95 Fit Testing Cards
- Technique book (spiral notebook)

All the above uniform items are required. If a student lacks one of the above, they will be dismissed for the day. The uniform must be clean and ironed. If any portion of the uniform is unserviceable (i.e., wear/tear, dingy, etc.) the student must replace the item promptly, else the student will be dismissed for the day. Any dismissal due to uniform issues will be counted as an absence, regardless of the reason or time of day.

Students must maintain a “professional and well-groomed appearance and **good personal and oral hygiene.**” Infection control must be maintained regarding hair, beards and mustaches, which must remain in compliance with the assigned clinical site’s policies. If hair is longer than shoulder-length, it must be pinned in a neat fashion above the shoulders. No hats, scarves, bandanas, etc. are permitted to be worn at clinical sites, except for approved religious reasons. Nail-polish and artificial nails **ARE NOT** permitted at a clinical site. Fingernails must be clean and kept short. Perfume/cologne should be used in moderation to maintain professionalism. If there is a complaint about perfume/cologne usage, the student must immediately refrain from its use during clinical rotations. Visible body piercings and tattoos are not permitted, except for two small piercings per ear in the *lower* earlobe. Dangling jewelry can be accidentally or purposefully pulled by patients or caught in machinery, and thus should not be worn to clinical sites.

All students need to be willing to adapt to each clinical site’s uniform policy. Some sites will require different PPE or scrubs (provided by site) to be worn depending on location- i.e. when in the OR. Student non-compliance with site and college uniform policies and expectations may lead to dismissal from the program.

Student Name (Print): _____

Student Signature: _____ Date: _____

Revised on September 9, 2024

**HCC RADIOLOGIC TECHNOLOGY PROGRAM
STUDENT HANDBOOK RECEIPT**

This Student Handbook is a student's guide for the Radiologic Technology (RADT) Program at Howard Community College (HCC). Policies and procedures for the Radiologic Technology Program are included in this handbook. It is the responsibility of each student to read and understand the contents of the handbook. After reading the handbook, each student is required to sign and return the receipt on the last page to indicate that the handbook has been received.

**I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND ALL
INFORMATION IN THE RADIOLOGIC TECHNOLOGY HANDBOOK**

Student's Signature: _____ Date: _____

Received by: _____ Date: _____

**SIGN AND RETURN THIS FORM TO THE DIRECTOR ONE WEEK FOLLOWING
RECEIPT.**

Revised on September 9, 2024

NON-ACADEMIC CLINICAL COMPLAINT FORM

Student Name: _____ Date: _____

Clinical Site: _____ Site Clinical Preceptor: _____

Clinical Coordinator: _____

Description of Complaint:

Student Requested Resolution:

Student Signature: _____ Date: _____

Clinical Coordinator Resolution:

Clinical Coordinator Signature: _____ Date: _____

Program Chair Resolution:

Program Chair Signature: _____ Date: _____

Dean of Health Sciences Resolution:

Dean Signature: _____ Date: _____