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Dear Radiography Student:

Welcome to Adventist University of Health Sciences’ Radiography Program. I am hopeful that it will be an exciting and productive time for you.

Medicine is an ever-changing science. As new research and technology evolves, it is our responsibility at Adventist University of Health Sciences (ADU) to keep you, the student, abreast of new and innovative trends in our profession. We trust that through your training at the university and the various clinical education sites, you will achieve not only personal satisfaction, but also an opportunity to satisfy your professional career ambitions.

As a student radiographer, you will want to know many things about the program that will better enable you to understand the full realm of your training. As such, I am pleased to make available to you this A.S. Radiography Program Manual. This document is designed to help familiarize you with important aspects of the program and its policies. It is our intention at ADU to demonstrate a commitment to excellence and a dedication to Christian principles, all in a nurturing climate.

Each student enrolled in the Radiography Program at ADU is responsible for reading, understanding, and abiding by the Rules and Regulations as presented in this manual, as well as the general Rules and Regulations of the university as set forth in the Student Handbook.

The Radiography Program at ADU is fully accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 North Wacker Drive, Suite 2850, Chicago, IL 60606-3182; Phone: (312) 704-5300; Fax: (312) 704-5304; e-mail: mail@jrcert.org, website: www.jrcert.org.

I hope that you will find this Manual useful. Please don’t hesitate to call upon our faculty if you have any questions or concerns after reading this manual thoroughly.

Sincerely,

Genese M. Gibson, M.A.  R.T. (R) (M) (QM)  
Professor  
Chair, Department of Imaging Sciences

Jena Heflin, MBA, RT(R), CMOM  
Asst. Professor  
Program Director, Radiography

Radiography Program Faculty:  
Leslie Whalley, B.S., R.T. (R); Instructor; Clinical Coordinator  
Maggie Conner, M.A., R.T. (R); Instructor, Denver Campus  
Lukus Staup, B.S., R.T. (R), (MR); Instructor  
Liz Baker (Thomason), BSRS; R.T. (R)(CT), Instructor
SECTION 1: GENERAL PROGRAM INFORMATION

Mission Statement

Consistent with the mission of the university, the Radiography Program at Adventist University of Health Sciences (ADU) provides a Christian educational environment that prepares students to become skilled imaging professionals who possess technical expertise and personal characteristics for successful employment.

Program Goals

The Radiography Program has established specific goals to be achieved by the students who will graduate from our program. These goals and the expected outcomes are as follows:

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<th>Goal Statement</th>
<th>Expected Learning Outcomes</th>
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<td>1. Students will develop and manage meaningful practices that demonstrate caring and concern in all interactions.</td>
<td>1. Students will deliver quality patient care and demonstrate concern for the patient</td>
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<td>2. Students will demonstrate sound written and oral communications in the didactic and clinical environment.</td>
<td>1. Students will properly articulate medical terminology.</td>
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<td></td>
<td>2. Students will utilize appropriate verbal and non-verbal communication skills in the clinical environment.</td>
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<td>3. Students will demonstrate critical thinking skills and problem solving competencies.</td>
<td>1. Students will accurately perform radiographic examinations, demonstrating the ability to adapt to atypical situations</td>
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<td>4. Students will demonstrate ethical and professional behavior</td>
<td>1. Students will apply the ethics and professionalism of a radiographer</td>
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<td>2. Clinical Education Sites are satisfied with the ethical and professional behavior of the students</td>
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<td>5. Students will be prepared to be engaged in the ongoing pursuit of knowledge for personal and professional development</td>
<td>1. Students will successfully demonstrate information literacy</td>
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<td>2. Students will demonstrate progression in meeting personal, self-assessed clinical goals.</td>
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<tr>
<td>6. Students will be prepared as entry-level professionals.</td>
<td>1. Students will evaluate radiographic images</td>
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<td>2. Students will produce quality radiographs</td>
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3. Students will apply appropriate radiation safety measures
4. Students will deliver quality patient care and safety

7. Students will participate in meaningful service, guided reflection, and experiential education

JRCERT Standards

The Radiography Program, Department of Imaging Sciences, at Adventist University of Health Sciences is accredited in accordance with the Standards for an Accredited Educational Program in Radiologic Sciences (STANDARDS) by the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 North Wacker Drive, Suite 2850, Chicago, IL. 60606-3182; Phone: (312) 704-5300; Fax: (312) 704-5304; e-mail: mail@jrcert.org, website: www.jrcert.org.

The STANDARDS require a program to articulate its purposes and scope; demonstrate that it has adequate human, financial, and physical resources effectively organized for the accomplishment of its purposes; document its effectiveness in accomplishing its purposes; and provide assurance that it can continue to meet accreditation standards.

It is the policy of the Program that all students be made aware of the STANDARDS and the actions to be taken in the event that any student believes that the Program is not in compliance with the STANDARDS. A copy of the STANDARDS is available for review in the reference section of the university library.

Should a student have a grievance concerning whether or not the Program is in compliance with the STANDARDS, he/she must follow the procedure outlined below:

1. The student should discuss his or her grievance with any member of the program faculty within one (1) week after the issue of non-compliance is believed to have occurred. The faculty member will document this meeting in the student’s file.

2. If the grievance is not resolved to the student’s satisfaction, the student should, within one (1) week, submit a written statement to the Program Director concerning the matter. The Program Director will then have one (1) week to respond to the student’s written request.

3. If the student is still not satisfied, he or she may request to have all materials concerning the grievance be given to the Vice President for Academic
Administration. The Vice President will then review the grievance materials and will return a written decision within two (2) weeks of their receipt.

4. Should the student still not be satisfied with the response from the Vice President, he or she may contact the JRCERT directly with his/her complaint. The address is:

Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
(Telephone: 312-704-5300)
(Fax: 312-704-5304)
Website: www.jrcert.org

Radiography Program Information

Information regarding A.S. Radiography Program admission, progression, readmission, and completion can be found in the Academic Catalog. Students are held accountable to the policies and procedures outlined in the current Academic Catalog, Student Handbook and the current A.S. Radiography Program Manual.
SECTION 2: INSTITUTIONAL POLICIES AND PROCEDURES

Academic Appeal

Should a student have an academic grievance concerning a grade or other matters concerning a particular course, he or she should follow the appeal procedures below:

1. The student should discuss the grievance with the instructor involved no later than five (5) business days after the incident prompting the grievance.
2. The instructor must respond to the student within five (5) business days of receipt of the appeal.
3. If the grievance is not resolved, a written statement should be submitted to the department chair no later than ten (10) business days after the instructor’s response. The chair will then speak with the instructor involved and reply in writing to the student within five (5) business days of receiving the student’s written statement.
4. If a resolution has not been reached, the student may request that all materials concerning the grievance, be given to the Senior Vice President for Academic Administration. This individual will then review the grievance materials and return a written decision within ten (10) business days of their receipt. The decision of the Senior Vice President for Academic Administration is final.

Should a student have an academic grievance concerning a decision of their academic program, he or she should follow the appeal procedures outlined below:

1. The student should discuss the grievance with the department chair no later than five (5) business days after the decision prompting the grievance.
2. The department chair must respond to the student within five (5) business days after the decision prompting the grievance.
3. If a resolution has not been reached, a written statement should be submitted to the Senior Vice President for Academic Administration no later than ten (10) business days after the chair’s response. This individual will then speak with the department chair and reply in writing to the student within ten (10) business days of receiving the student’s written statement. The decision of the Senior Vice President for Academic Administration is final.

Refer to the Academic Catalog for more details on the “Academic Appeal” policy.

Academic Dismissal

A student is subject to academic dismissal when any of the following occurs:

- Earning a GPA below 1.00 during any trimester.
• Failing to achieve a cumulative GPA of 2.00 after being on academic probation for two trimesters.
• Displaying a high degree of academic irresponsibility in matters of course attendance or class assignments.
• Displaying a high degree of academic dishonesty

Refer to the Academic Catalog for the complete “Academic Dismissal” policy.

Active Military Duty

Any student called to active duty from the reserves of any branch of the military or the National Guard will receive special consideration from the university to ensure a smooth transition. This includes a full refund of tuition and fees for the current trimester. Students leaving a professional program for active duty will be able to re-enter the program at the beginning of the same trimester in the suggested course of study. Exceptions and special needs will be addressed on an individual basis.

Refer to the Academic Catalog for the entire “Active Military Duty” policy.

Americans with Disabilities Act & the Rehabilitation Act

In an effort to comply with the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973 (Section 504), the following policy has been adopted:

Students seeking accommodations must first contact the Office for Students with Disabilities (OSD) located within the Center for Academic Achievement (CAA), prior to or at the beginning of the trimester. The processing time for these forms is approximately two weeks.

The student must provide the OSD the requested current, official documentation related to his or her disability. That documentation will be used to determine the type and extent of accommodation that is most reasonable and effective for that student. All forms can be found online on the CAA webpage or within the CAA itself.

If all forms have been completed, criteria met, and accommodations granted, the OSD will then notify each of the student’s instructors of the accommodations that should be provided.

Refer to the Academic Catalog for the complete “Rehabilitation Act (1973) Section 504” policy.
Campus Safety and Security

The university is committed to maintaining high standards of safety and security for faculty, staff, students, and property. ADU/Florida Hospital Security Officers assist with fire prevention and detection, parking and traffic control, and maintenance of campus peace and order.

All persons on the ADU campus are required to have visible identification. Students are required to wear their student identification badges; faculty and staff are required to wear their employee identification badges. If you do not have your identification badge while on campus, you must visit the Student Services Office to obtain a temporary badge/visitor’s pass. All visitors and contracted workers must stop at the Reception Desk of the Campus Center to obtain a visitor’s pass. If you encounter any persons without the proper identification, notify Campus Security immediately.

Counseling Services

Counseling is the process of exploring your true self with someone who is a trained mental health professional. Individuals may decide to see a counselor for various reasons. If you are facing stressful situations and personal issues, counseling can offer emotional support, new perspectives, and help in considering possible solutions. Counselors are also available for academic concerns and a variety of other issues.

Counseling is offered free to all students. You are encouraged to seek counseling assistance proactively. Please visit the Student Services Office or call 407-303-7747, ext. 1106074 to make an appointment.

Refer to the ADU Student Handbook for more information.

Harassment

Adventist University of Health Sciences does not tolerate harassment on the basis of gender by a student against another student, faculty, staff, technologist, or other member of the medical imaging team. Violation of this policy may subject a student to discipline, up to and including dismissal from the university.

Sexual harassment is defined as:
1. Threats made on the basis on gender, or unwelcomed sexual advances
2. Requests for sexual favors; and all other verbal, physical, or visual conduct of a sexual or otherwise offensive nature
3. Sexual innuendo, suggestive comments, sexually orientated “kidding” or “teasing,” “practical jokes,” jokes about gender specific traits, foul or obscene language or gestures, displays of foul or obscene printed or visual material
4. Physical sexual misconduct that includes unwelcome touching which may involve, but is not limited to: fondling, petting, pinching, hugging, repeatedly brushing against, or other physical contact with a person without his or her consent.

All students who encounter or are aware of any type of harassment shall report such incidents to the University Administration for investigation.

Refer to the *ADU Student Handbook* for more information.

**Health Insurance Portability and Accountability Act (HIPAA)**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires health care providers to abide by the regulations for privacy and confidentiality of protected health information (PHI). The HIPAA privacy rule covers all individually identifiable health information at Adventist University of Health Sciences and the affiliated Florida Hospital and Centura Health facilities, whether the information is electronic, paper, or spoken.

In accordance with HIPAA, the Department of Imaging Sciences has implemented and provides training for students within the Radiography Program. All students are required to observe these regulations and be in compliance in all aspects of their academic education, both didactic and clinical. Regulations specific to the clinical environment include, but are not limited to:

- Taking any photos or video on clinical site property
- Discussing patient cases in public areas
- Communicating information about clinicals outside of academic use
- Transmitting by way of any electronic media (texting, social media, etc.) any patient-related information or image that is reasonably anticipated to violate patient rights to confidentiality or privacy

If a student is found to be in violation of this policy, they are subject to the penalties as outlined in the Disciplinary Action Policy.

**Jury Duty**

As per the Academic Catalog:
The individual course instructor will make reasonable accommodations for any student required to fulfill jury duty obligations. This includes providing additional time to complete assignments, tests, or quizzes missed during the absence. Students should submit a copy of their jury duty notice to the course instructor.
In addition to the didactic policy mentioned above, the ADU Radiography Program’s Jury Duty policy as pertains to clinical education is as follows:

- Missing clinical time due to Jury Duty does not exempt the student from completing the trimester clinical competency requirements unless under specific circumstances. This will be determined on a case by case basis.
- If a student misses just one day of clinical education due to Jury Duty, that day does not need to be made up, unless the student needs to do so in order to satisfy the competency requirements for the trimester.
- All days missed in excess of the first day must be made up. For example, if a student misses three clinical days due to Jury Duty, then the student needs to make up two clinical days.

Social Networks

Social networking sites provide many positive opportunities for communication and connectivity. In keeping with the mission of Adventist University of Health Sciences, students are encouraged to use the social networking sites for the development and maintenance of healthy relationships. Students should refrain from making derogatory, defaming, threatening or profane comments against fellow students, staff, or faculty. Students found to be posting such comments are subject to disciplinary action by the Adventist University of Health Sciences Citizenship Committee.

Student Bereavement

Students are allowed to consider time off for bereavement as excused if the death was an immediate family member (spouse, parent, sibling, child, or grandparent). Other family members such as aunts, uncles, and cousins are usually not in this category unless they were part of the immediate family. In general, five days are given that are not counted against attendance. Additional time must be requested by the student and agreed to by the instructor(s). Verification must be provided at the time of the student’s return to class. All coursework needs to be made up within a time frame agreed upon with the course instructor.

Student Rights and Confidentiality of Records

The procedures for protecting the confidentiality of student records are based on the Federal Educational Rights and Privacy Act of 1974 (FERPA). FERPA affords students certain rights with respect to their education records. The rights include the following:

1. The right to inspect and review the student’s education records within 30 days of the day the university receives a request for access.
2. The right to request the amendment of the student’s education records that the student believes are inaccurate or misleading.
3. The right to consent to disclosure of personally identifiable information contained in the student’s educational records, except to the extent that FERPA authorizes disclosure without consent.

Refer to the Academic Catalog for the complete “Students Rights and Confidentiality of Records” policy.

**Student Work Policy**

Students enrolled in the Radiography Program have a rigorous academic load. The combination of clinical and didactic hours will not exceed 40 hours per week. The following policies are in effect:

- Students who work while enrolled in the Program, do so without compromising their academic and clinical responsibilities.

- During assigned clinical rotations, students may not take the responsibilities of, nor be substituted for, clinical staff.

- Students employed by an affiliated clinical facility are not permitted to perform program clinical objectives during their work shift.

**Title IX and School Policies**

Title IX of the Education Amendments of 1972, and its implementing regulations, prohibit Sex Discrimination in Adventist University of Health Sciences (ADU) educational programs and activities. Title IX also prohibits retaliation for asserting claims of Sex discrimination. ADU provides support and resources to students, faculty, and staff to address concerns related to Sex Discrimination.

ADU has designated the following people to coordinate its compliance with Title IX and to receive inquiries regarding Title IX, including complaints of Sex Discrimination:

**Title IX Coordinator**
Starr Bender  
Campus Center Room 330  
671 Winyah Drive  
Orlando, FL 32803  
Ph: 407-303-5765  
Fax: 407-303-0876  
starr.bender@adu.edu

**Deputy Title IX Coordinator (Denver Site)**
Katie Shaw
Miscellaneous Policies

Minor Children on Campus
Students (parent/guardian) are not allowed to bring their minor children on campus. This includes taking their child to class. Exceptions to this policy must be approved by the student’s department chair.

Professional Dress and Deportment
In keeping with its mission to educate healthcare professionals in a Christian environment, Adventist University of Health Sciences requests that students dress modestly and conduct themselves in a professional manner. Faculty and staff reserve the right to speak with students relative to the appropriateness of dress and to expect that the students will follow their directives. Students enrolled in clinicals will receive guidelines from their departments reflecting appropriate dress and deportment of the various clinical facilities. Refer to the ADU Student Handbook for the complete policy.
## SECTION 3: RADIOGRAPHY PROGRAM POLICIES AND PROCEDURES

1. **Academic and Personal Integrity**
   - 1.1. Academic Dishonesty/Misconduct

2. **Ethical and Professional Conduct**
   - 2.1. General Guidelines
   - 2.2. Radiography Clinical Guidelines

3. **Disciplinary Action**
   - 3.1. Disciplinary Process
   - 3.2. Infractions
   - 3.3. Actions Taken
   - 3.4. Critical Error Policy

4. **Criminal Background Checks**
   - 4.1. University Policy
   - 4.2. ARRT Policy
   - 4.3. State Policies

5. **Health Records**
   - 5.1. CPR Certification
   - 5.2. Immunizations
   - 5.3. FIT Testing
   - 5.4. HIV/AIDS Certificate

6. **Radiography Laboratory**

7. **Clinical Attendance**
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   - 7.2. Make-Up Time
   - 7.3. Absence and Tardiness
   - 7.4. Personal Days Off
   - 7.5. Transportation

8. **Clinical Uniform and Appearance**
   - 8.1. Radiography Clinical Uniform
   - 8.2. General Appearance
   - 8.3. Personal Hygiene

9. **Clinical Supervision**
   - 9.1. Direct Supervision
   - 9.2. Indirect Supervision
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10. **Repeat Policy**

11. **Clinical Procedure Logs**

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   - 12.1. Radiation Protection Guidelines
   - 12.2. Personal Safety

13. **Pregnancy Policy**
   - 13.1. Discussion of Pregnancy
   - 13.2. Clinical Options

14. **Communicable Disease Policy**

15. **Patient Safety**

16. **Trajceansys**

17. **Service Learning**
1. Academic and Personal Integrity

Adventist University of Health Sciences expects students to exhibit high levels of integrity in all activities applicable to the classroom and clinical settings. Students are expected to adhere to the ethical and professional standards set forth by ADU and the Radiography program. Refer to the Academic Catalog for the complete “Academic Integrity” policy.

1.1. Academic dishonesty/misconduct includes, but is not limited to:

1.1.1. Falsifying official documents or misrepresenting academic qualifications

1.1.2. **Cheating** on an assignment or examination. Cheating is using or attempting to use materials, information, notes, study aids, or other assistance that has not been authorized by the instructor. **This includes the use of positioning notes during competency testing.**

1.1.3. Stealing, accepting, or studying from stolen quizzes or examination materials.

1.1.4. **Plagiarism**, defined as intentionally or carelessly presenting the work of another as one’s own. It includes the presentation of the work, ideas, representations, or words of another person without customary and proper acknowledgement of sources.

1.1.5. **Fabrication**, defined as the use of invented, counterfeited, altered, or forged information. ** Forgery, defined as the imitating or counterfeiting of images, documents, signatures, and the like.** **Obstruction**, defined as behavior that limits the academic opportunities of other students by improperly impeding their work or their access to educational resources.

1.1.6. **Multiple submissions**, defined as the submission of the same or substantially the same work for credit in two or more courses, including the use of any prior academic effort previously submitted for academic credit at this or a different institution.

1.1.7. Misusing material which belongs to ADU, including the illegal use of copyright materials, trademarks, trade secrets, or intellectual properties.

1.1.8. **Computer misuse**, defined as use of computers that is disruptive, unethical, or illegal use of the university’s computer resources. Unauthorized access to the ADU computer network including its hardware, software, and data.
1.1.9. Information used to evaluate students’ academic performance (homework, quizzes, exams, projects, etc.) is not permitted to be discussed, shared, or removed (i.e. download, copy/paste, screen shot, etc.) from the on-campus or online environment. Students should seek Course Instructor approval prior to taking any action that may be considered to be plagiarism, forgery, falsification of documents, and/or cheating. Please refer to the Academic Catalog.

2. Ethical and Professional Conduct

Serious breaches of professional or ethical behavior may result in disciplinary action or dismissal from the program.

2.1. General Guidelines

Breaches of ethical or professional conduct include, but are not limited to:

2.1.1. Insubordination or refusal of a student to follow instructions or perform designated duties where such instructions or duties normally and properly may be required of a student for educational experience and purpose. Students may not refuse to do exams simply because they have already competency tested on them.

2.1.2. Theft or dishonesty

2.1.3. Immoral behavior, improper dress

2.1.4. Soliciting or receiving tips/gifts from patients or other individuals

2.1.5. Violating safety rules or creating safety hazards

2.1.6. Smoking on university campus grounds or any hospital grounds

2.1.7. Gambling

2.1.8. Abuse or waste of hospital property, supplies, equipment, etc.

2.1.9. Possession of firearms or other weapons

2.1.10. Possession of intoxicants or narcotics, or being found under the influence of alcohol or drugs

2.1.11. Use of abusive or profane language
2.1.12. Failure to adhere to the personal hygiene policy. Refer to Section 3, Policy 8.3.

2.2. Radiography Clinical Guidelines

The following guidelines will be adhered to:

2.2.1. Telephones belonging to the clinical education site are not to be used for personal business except in bona fide emergencies.

2.2.2. Use of personal computers, and making calls or text messaging using personal cell phones are not to be made during the assigned clinical times. Restrict these activities to your lunch time. Phones, tablets, or computers cannot be used for studying during clinical time. If you wish to study, only printed positioning notes are allowed. (See Cell Phone Policy)

2.2.3. All accidents or incidents involving patients and students occurring within the clinical site must be reported to the coordinator and proper forms filed.

2.2.4. No student will leave clinical assignments, prior to the end of their rotation, without specific permission from a clinical faculty member.

2.2.5. The student will return promptly from meal breaks. Meal breaks are 30 minutes long, except where otherwise directed.

2.2.6. Eating, drinking or gum chewing in the procedure rooms is prohibited.

2.2.7. Students should give prompt and courteous recognition to patients, visitors, physicians, and staff.

2.2.8. Patient complaints are to be investigated and referred to the appropriate sources. Students will direct patient complaints to the Department Coordinator/Supervisor.

2.2.9. Private conversations should be avoided in patient’s presence or within hearing range of patients or visitors.

2.2.10. No patient should ever be left unattended for any unreasonable period of time, especially when they are lying on the examination table. Safety straps, side rails, or other devices are to be utilized with patients whose conditions warrant the use of these precautions.
2.2.11. Check patient’s name bands and charts before doing any procedure to ensure you have the correct patient.

2.2.12. Complaints or areas of concern should only be discussed with the program faculty.

2.2.13. Students are responsible for all information placed in the student mailboxes.

2.2.14. Telephones should be answered according to the established protocols.

2.2.15. The clinical setting is for the student to gain experience in the performance of all radiologic procedures. When no patient procedures are being done in the department, clinical rotations should be spent practicing positioning, studying your positioning notes or learning to operate the x-ray equipment (i.e. general radiographic equipment, fluoroscopic equipment, and c-arm equipment). Additionally, it is the responsibility of all students to ensure that the procedure rooms are adequately stocked with linens and other supplies as necessary.

Clinical time spent in any other manner will be deemed inappropriate and will result in a written reprimand. Each case will be discussed and action taken on a case by case basis.

2.2.16. Injecting patients with contrast for certain examinations is part of the requirements for Radiologic Technologists. As a student in this program, you will receive training on the proper method of injecting patients. However, while you are a student, you will follow the requirements of the clinical education site where it pertains to injecting patients. Because of various reasons, some of the clinical education sites do not allow students to inject patients. Other sites do allow injection by students, however, a registered technologist, registered nurse, or a doctor must be present in the room observing you while you perform the injection. This requirement is in effect for the entire length of the program.

2.2.17. Patient confidentiality must be maintained at all times. Patient Protected Health Information (PHI) should only be discussed with other medical personnel who are directly involved with the procedure. Adventist University of Health Sciences follows the terms set forth in the Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law 104-191 and the regulations contained in chapter 45 of the Code of Federal Regulations (CFR), parts 160, 162, and 164. In accordance with this law and ADU policy, students are required to take certain measures
to keep PHI confidential. The policy takes into account all PHI including but not limited to external remote electronic transmissions.

Should a suspected violation of this policy occur, the ADU Department of Imaging Sciences will conduct an investigation of the alleged incident. After investigation and confirmation that a violation has transpired, the student(s) will be sanctioned and disciplined according to the severity of the violation; up to and including program dismissal.

3. Disciplinary Action

Students in the Radiography Program are required to abide by the policies and procedures of Adventist University of Health Sciences, the Radiography Program, Florida Hospital Healthcare System, Centura Health, and any other clinical education sites to which they are assigned. Students in the Radiography Program are expected to abide by the Code of Ethics of the American Registry of Radiologic Technologists (See Appendix A).

3.1. Disciplinary Process: Failure to adhere to any of these may result in disciplinary action against the student. The disciplinary process is intended to help the student identify and correct unacceptable behavior and to promote a higher standard of professionalism. Disciplinary action is used to maintain a positive learning environment and safety in the clinical setting. Failure to conform to these regulations will result in one, or a combination, of the following:

3.1.1. Written counseling report – This is usually given on a first offense, provided that the offense is a minor one. This will identify the offense and present a course of action that the student will take to correct the behavior. A written counseling report has no effect on the student’s grade.

3.1.2. Written warning – This is usually given for a second offense of a minor infraction or the first offense of a more serious infraction. This will identify the offense, present a course of action to correct the behavior, and instruct the student that another offense of this nature will result in a written reprimand. A written warning has no effect on the student’s grade.

3.1.3. Written reprimand – This is usually given for the third offense of a minor infraction. It is assumed that the student has not learned from the first two offenses. It can also be given on the first offense of a serious nature, such as violating patient safety procedures while in the clinical setting or violating the “Direct Supervision” policy. The issuance of a written reprimand will automatically result in the lowering of the trimester clinical grade by one step (i.e. from B+ to B).
3.1.4. **Probation or dismissal** – This action may be taken as a last resort for those students who continue to display inappropriate behavior or who commit an infraction that is considered to be of a serious nature.

### 3.2. Infractions

The infractions resulting in disciplinary action include, but are not limited to:

3.2.1. Excessive Absenteeism

3.2.2. Excessive Tardiness

3.2.3. Improper appearance/apparel

3.2.4. Failure to notify faculty or clinical site prior to a tardiness or absence

3.2.5. Unprofessional conduct

3.2.6. Dishonesty

3.2.7. Breach of confidentiality/Violation of HIPAA policies

3.2.8. Soliciting or receiving tips/gifts in any form from patients

3.2.9. Insubordination

3.2.10. Any safety violation

3.2.11. Leaving assigned area without notice or approval

3.2.12. Failure to complete clinical assignments in a timely manner

3.2.13. Repeated failure to submit clinical procedures logs or a gross disregard for logging repeats correctly

### 3.3. Actions Taken

The following actions will be taken following any infraction:

3.3.1. The appropriate form will be completed by the faculty member. It will indicate the specific infraction, the degree of seriousness of the infraction (i.e. counseling, warning, reprimand or probation) and the steps needed to be taken by the student to correct the behavior.
3.3.2. The faculty member will discuss the infraction with the student and the form will be signed by both the student and the faculty member. The student will receive one copy and a copy will go into the student’s file.

3.3.3. The faculty member will discuss the infraction with the Program Director. The Program Director may or may not decide to talk to the student about the infraction depending on the seriousness of the infraction.

3.3.4. If a student receives a total of four reprimands at any time during the course of the program or incurs a serious violation of disciplinary policy, the Program Director may recommend to the Vice President for Academic Administration probation or dismissal of the student from the program.

**Items that will be considered by the faculty are the student’s:**

- Past disciplinary record
- Attitude
- Record of absenteeism and tardiness
- Grade record
- Clinical performance

**3.4. Critical Error Policy**

Patient safety and the importance of performing radiographic procedures properly are of paramount concern. In this regard, the following policy will be followed for any student found to have performed procedures improperly in which a critical error was determined to have occurred. Examples of situations classified as Critical Errors include, but are not limited to:

1. Performing an imaging examination on the Wrong Patient.
2. Placing the Wrong Name on an imaging exam or specimen.
3. Performing the Wrong Examination on a patient.
4. Placing the Wrong Marker/Annotation/L-R Procedure Description on an image.
5. The correct Anatomy/Region of Interest is not included in the exam.
6. All Correct Images are not sent to PACS for interpretation.
7. Errors determined to have the potential to directly affect the patient’s treatment status.

When the Clinical Coordinator determines that a student has performed an examination that resulted in a Critical Error, the following disciplinary protocol will be followed for the duration of the Radiography program:
1. For the First Critical Error:
   a. The student will receive a written warning.

2. For the Second Critical Error:
   a. The student will receive a written reprimand. This will result in
      the student’s clinical grade for that trimester being
      lowered one step as per the Disciplinary Action Policy
      (Section 3.1.3) in the A.S. Radiography Program Manual
   b. The student will be required to submit a Reflection Paper on
      the incident that resulted in the Critical Error. The
      requirements for the Reflection Paper will be provided to
      the student.

3. For the Third Critical Error:
   a. The student will receive a written reprimand with the same
      consequences as noted above in section 2.a.
   b. The student will be suspended from the clinical aspect of the
      program for a period of six (6) clinical days.* This missed
      clinical time will be required to be made up following the
      student’s graduation from the radiography program.
      Regardless of the amount of time that these six days
      amount to, the student will be required to complete 80
      hours of clinical time. Upon successful completion of this
      time, the student will then be eligible to take the National
      Registry Examination administered by the American
      Registry of Radiologic Technologists and to commence
      working as a graduate radiographer.

4. For the Fourth Critical Error:
   a. The student will be dismissed from the program. If eligible,
      students may re-apply to the program according to the
      policy as published in the Academic Catalog.

*It must be emphasized that being suspended for six (6) clinical days does not
relieve the student from acquiring the mandatory number of competencies for
that trimester. Failure to perform the required number of competency
examinations will affect the clinical grade as noted in the clinical syllabus.

If the student shows a gross disregard for the Critical Error Policy, which results
in serious injury to a patient, it is at the discretion of the Program Chair to
administer further disciplinary action to the student. Serious injury to the patient
includes, but is not limited to, imaging the wrong patient and performing the
wrong exam on the patient.
4. Criminal Background Checks

4.1. University Policy: A background check is required for all students accepted to a professional program. The results of this background check may impact the student’s eligibility to enroll in clinical education courses and to sit for the national credentialing examination administered by the American Registry of Radiologic Technologists.

4.2. American Registry of Radiologic Technologists (ARRT) Policy

The candidate for certification by the American Registry of Radiologic Technologists (ARRT) (commonly referred to as the Registry) must be of good moral character. The conviction of a felony or misdemeanor (with the sole exceptions of speeding and parking violations or juvenile offenses that were adjudicated in Juvenile court) may indicate a lack of good moral character for Registry purposes. Individuals convicted of a crime must supply a written explanation including court documents with their application for examination. Anything less than complete and total disclosure of any and all convictions will be considered as having provided false or misleading information to the ARRT. This is grounds for permanent denial of eligibility for certification.

The ARRT strongly encourages students with misdemeanor or felony convictions to submit a Pre-application Review of Eligibility. This review can be started at any time but should be completed six months prior to graduation. All violations must be cleared before an applicant is determined eligible and assigned to a testing window. Pre-application review forms and instructions are available by contacting the Ethics Department at the ARRT office.

The American Registry of Radiologic Technologists
1255 Northland Drive
St. Paul, MN 55120
(651) 687-0048

The “Pre-application Review of Eligibility” form can also be downloaded from the ARRT’s web site at www.arrt.org.

4.3. State Policies

4.3.1. State of Florida Policy
The requirements and recommendations of Policy 4.2. also apply for licensure by the State of Florida.

Pre-application must be made to the following address:

Department of Health
Bureau of Radiation Control
Radiologic Technology Program
2020 Capital Circle, SE, Bin #C21
Tallahassee, FL 32399-1741
(850) 487-3451

4.3.2. State of Colorado Policy

The State of Colorado does not require a state license in radiography. The requirements and recommendations of Policy 4.2 also apply for the State of Colorado and Centura Health. Students at the Denver campus will abide by the “Student Experiences” policy which requires a Background check.

5. Health Records

Students are required to maintain current and accurate health records throughout the duration of the Radiography Program. It is the student’s responsibility to supply the Radiography faculty with updated copies of health records. Health records must be current in order for a student to participate in clinical education. An electronic record of the student’s health records will be maintained at ADU, and print copies will be contained within each student’s file located in the Program Director’s office.

5.1. CPR Certification

Verification of Basic Life Support for Healthcare Providers, which incorporates certification in cardiopulmonary resuscitation (CPR) from the American Heart Association including infant, child, and adult CPR is required. This CPR certification must remain current throughout the program. Renewal is required every two years to meet the requirement of our clinical affiliations. Courses offered via the Internet are not acceptable.

5.2. Immunizations
Students are required to complete the *Student Health Assessment Form* provided by the university. Students enrolled in a professional program must present the following:

5.2.1. Yearly verification of tuberculosis screening test (PPD for Orlando; QuantiFERON for Denver). If the test is positive, a chest x-ray is necessary. If testing reveals active disease, the student must follow the directives within the “Communicable Disease Policy” stated in the *ADU Student Handbook*.

5.2.2. Updated immunization records including Hepatitis B, MMR and Tetanus-Diphtheria

5.2.3. Verification of varicella vaccination or immunity (titer)

5.2.4. Evidence of physical examination within three months prior to beginning a professional program

**5.3. FIT Testing**

Students must complete and pass the Medical Clearance for Respirator Wear (a.k.a. FIT Testing) prior to the start of clinicals. FIT testing appointments for Orlando students can be made at the Florida Hospital Orlando Employee Clinic or may be done at ADU at times designated by the Radiography faculty. FIT testing appointments for Denver students must be made at the Centura Center for Occupational Medicine. You must present your student badge at the time of the appointment. Proof of FIT testing completion must be submitted prior to the start of clinicals, and annually thereafter. Failure to obtain proof of FIT Testing completion will result in suspension of the student from clinicals.

Due to the nature of FIT Testing, any change in facial hair or weight may void the original results. If this occurs, it is the responsibility of the student to notify the Radiography faculty and be re-tested.


**5.4. HIV/AIDS Certificate**

Students in the Radiography Program at ADU are required to complete the mandatory HIV/AIDS seminar prior to engaging in the patient care setting. This course is designed to provide the students with the mandatory 4-hour requirement for the Radiography program, and will be offered during the first
trimester of the Radiography Program. This course fulfills the state of Florida HIV/AIDS certificate requirement.

It is the responsibility of the students to retain a copy of their HIV/AIDS certificate upon completion. For those students applying for Florida state licensure, you may be required to submit a copy of this certificate at the time of initial application or subsequent renewal of the state license.

6. Radiography Laboratory

6.1. The Radiography Program Laboratory (Lab) consists of a non-energized x-ray tube on one side and a fully energized tube/fluoroscopic unit on the other side.

Students are allowed to utilize the lab to practice and prepare for their lab testing. With the exception of when lab testing is in progress, or if the lab is being used for another purpose, it is open during normal campus hours: Monday through Thursday from 8:00 a.m. to 4:00 p.m. and Friday from 8:00 a.m. to 3:00 p.m. The Radiography Lab will be closed during 11:30 a.m. to 1:00 p.m.

The following signage is posted in the lab:

“Radiography Faculty must be available for all radiation exposures”

6.2. Students will not make any exposures in the lab without the approval of one of the Radiography Program faculty. When the Radiography Program Faculty are not available, the lab will be turned off and the door will be locked. Failure to follow this policy will result in the offending student(s) being banned from practicing in the lab for the remainder of that trimester. Future violations of this policy will result in a recommendation of dismissal from the program.

7. Clinical Attendance

Clinical education is a vital part of the total program in developing a student’s skills. Prompt and consistent clinical attendance is expected of all students in the Radiography Program.

7.1. Attendance Policy

7.1.1. The student is responsible for being present for all scheduled clinical hours. The student will clock in and out of their clinical site using Trajeecsys (see Section 3, Policy 14). Students must use the computers located in the Radiology department at their clinical site to clock in and out. Clocking in and out by any other means (i.e. cell phone, laptop computer, computers not located at the clinical site, etc.), demonstrates
falsification of records. Any student doing so will be subject to Program Dismissal.

7.1.2. The student must notify the program faculty and the clinical site in the event of an absence, including a PDO (see Policy 7.4.), or late arrival.

A student will be penalized if any of the following criteria is not met:

- Notified clinical site, via personal e-mail, of absence or PDO prior to the start of the assigned clinical rotation
- Notified all the program faculty of absence prior to the start of the assigned clinical rotation via the CANVAS e-mail system
- Notification e-mail must include the following components:
  - The date/day you will be absent
  - The clinical rotation you are assigned to
  - Whether you are taking a PDO or not

Failure to meet the above criteria will result in a 1% reduction in the student’s overall clinical grade for each incident.

7.1.3. If a student is going to be absent from clinicals and he/she is not taking a PDO, a valid reason must be provided along with supporting documentation (i.e. doctor’s note, evidence of car trouble, etc.). This documentation must be provided to the Clinical Coordinator no later than one week from the first date of absence. If the student fails to provide a valid reason for the absence and supporting documentation within the stated timeframe, the absence will be considered unexcused. An unexcused absence will result in a written reprimand. The student is also subject to the grade reductions for accumulating three (3) or more absences within a given trimester (refer to Section 3, Policy 7.3.4).

7.1.4. Students are not allowed to switch clinical rotations with another student. If any extenuating circumstances arise, the student must receive approval from the Clinical Coordinator to make any changes to his/her clinical schedule.

7.1.5. Students are not to exceed a combined class hours, clinical hours, and clinical make-up time of 40 hours per week. Students are not to exceed 10 clinical hours per day.

7.1.6. Students requesting to do extra clinical time (not make-up time) during the approved days/times of the program must do so in writing via the Request for Clinical Schedule Adjustment form. The program will not authorize students to perform clinicals on the weekends.
7.2. Make-Up Time

7.2.1. Make-up time must be scheduled with the program clinical faculty a minimum of two days prior to the day that it is to be performed. If the student fails to fulfill the scheduled make-up time without prior notification, it will be counted as additional missed clinical time.

Failure to complete the makeup time as scheduled will result in additional makeup time equivalent to the missed scheduled time. If students do not complete the makeup time as scheduled without prior notification to the faculty, the missed makeup time will be considered an absence (refer to Item 1 of the Participation/Attendance section for information on number of absences). All policies regarding time and attendance also apply to makeup time.

7.2.2. All clinical time missed, regardless of the reason, **must be made up no later than the following 2 weeks**. Consideration will be given to time missed due to extenuating circumstances such as personal surgery, etc.

7.2.3. Clinical time, including any makeup time, is only to be performed during the hours of 7:00 a.m. and 11:00 p.m. Monday through Friday.

7.3. Absence and Tardiness

7.3.1. The student must arrive at the clinical site on time. Tardiness is defined as not being present, clocked in, and in the assigned area ready to work according to published times.

7.3.2. Failure to clock in before the scheduled start time will be recorded as a tardy.

7.3.3. A student is allowed to accumulate 2 excused absences and tardies without penalty to the clinical grade.

7.3.4. Accumulating more than 2 incidents of absenteeism or tardiness will result in a grade reduction as follows:

- 3 results in a 5% reduction and a written notification
- 4 results in a 7% reduction and a written notification
- > 4 results in a 10% reduction and a written notification

7.3.5. A student who accumulates more than 10 incidents of clinical absences or tardiness any time during the length of the program may be subject to dismissal.
7.3.6. In addition to the above, the university policy on attendance will be adhered to as well. This policy states that when a student’s number of absences (excused or unexcused) for any course exceeds 20% of the total course appointments, a grade of “F” may be given for that course. For Clinical Education I, II, and III, 20% is equivalent to 5 days. For Clinical Education IV and V, 20% is equivalent to 8 days.

7.4. Personal Days Off (PDO)

7.4.1. In addition to the two absences mentioned in Policy 7.3.4., each student is allowed two (2) Personal Days Off (PDO) each clinical trimester.

7.4.2. Students are not required to make up days taken as a PDO.

7.4.3. If a student does not use the two PDOs, they cannot be carried over into the next trimester.

7.4.4. It is up to the student to inform the faculty on the day of the missed clinical time as to whether or not they will be using that day as a PDO.

7.4.5. Personal Days Off (PDO) are a privilege, not a right. Students abusing any program policy or procedure, as determined by the faculty, will have their PDOs suspended for that trimester. If they have already used their PDOs for that trimester, the next trimester’s PDOs will be suspended.

7.4.6. If a student chooses to save their PDO(s) until the last week of the trimester, he/she must ensure that all clinical requirements are completed for that trimester before taking the PDO(s). If there are any pending clinical requirements, the student will not be allowed to take the PDO(s).

7.5. Transportation

Due to the nature of clinical education where travel to various clinical sites is mandatory, it is imperative that each student have their own reliable transportation. Some of the clinical education sites are located at a distance of up to 40 miles from the university campus.

8. Clinical Uniform and Appearance
Proper dress, personal grooming, and overall appearance adds much to the positive image that the public has of Adventist University of Health Sciences and its clinical affiliations. For these reasons, the Radiography Program requires all students to follow the clinical uniform and appearance policies as stated herein.

8.1. **Radiography Clinical Uniform**

8.1.1. In order to exhibit the proper professional image to patients, co-workers, and the public, student radiographers assigned to the Radiology Department are required to wear a standardized uniform. This uniform must be worn in all clinical areas, including surgery.

8.1.2. The Radiography Clinical Uniform consists of the following:

- Choice of Ceil Blue, Navy Blue, or Galaxy Blue scrubs with leather closed toe shoes/sneakers may be worn
- T-shirts, if worn beneath the scrub top must be plain white. Colored T-shirts are not authorized.
- The uniform must be neat, clean, and pressed.
- White lab coats with long or short sleeves may be worn. Lab coats or track jackets in the color of Ceil Blue, Caribbean Blue, and Galaxy Blue are also acceptable. If the student chooses to wear a colored lab coat, it must be the same color as the scrubs.
- The Adventist University of Health Sciences patch must be worn on the left sleeve of each uniform and lab coat. It must be centered 2 ½” below the shoulder seam.
- Shoes must be a solid, conservative color and in good repair.
- Student must wear radiation monitoring devices (film badges) and hospital ID cards on the outside of the uniform while in the clinical setting.
- Appropriate undergarments are to be worn.

8.1.3. Hospital-provided scrubs are not authorized clinical attire in any area other than surgery while performing your clinical assignment.

8.1.4. All students assigned to a surgical rotation at Florida Hospital will adhere to the Florida Hospital Policy 220.006-1 titled “Surgical Attire/Personal Protective Equipment (PPE).” This policy states that personnel in surgery shall wear:

- A traditional non-lint producing cotton or cotton/polyester blend material that is freshly (daily) laundered. It should consist of a
short sleeve scrub shirt with draw string or elastic waist trousers and warm-up jacket of proper fit.

- Only a short sleeve white tee shirt may be worn under the scrub top.
- Closed toe shoes may have shoe covers placed over them for protection from gross contamination.
- A surgical hat or hood shall confine all hair. Men shall cover beards with hood style head cover.
- Masks shall cover the nose and mouth.
- No perfume shall be worn in surgical suites.
- When leaving the surgical area, all personnel shall remove and discard in designated areas, mask and shoe covers, remove all PPE, and wash hands.

8.1.5. All students assigned to a surgical rotation at Centura Health System will adhere to the following policies:

- Operating room attire consists of approved, clean, and freshly laundered attire made of multiuse fabric or limited use nonwoven fabric. All PPE must be removed prior to leaving the surgical department.
- Head and facial hair, including sideburns and necklines, are to be covered when personnel are in Surgical Services’ semirestricted and restricted areas.
- Clean, closed-toe shoes are to be worn in semirestricted and restricted areas. Shoe covers are worn if it is anticipated that splashes or spills will occur.
- When open sterile items and equipment are present in Surgical Services’ restricted areas, personnel entering those areas are to wear high-filtration masks. Masks must fully cover the nose and mouth and be secured in a manner that prevents venting, and should be discarded upon removal. Masks are not to be worn around the neck, i.e., wear it or take it off.
- All personnel entering Surgical Services’ semi-restricted and restricted areas should confine or remove all jewelry and watches. Personal jewelry should be kept to a minimum in the OR suites. Other jewelry (e.g., earrings, necklaces) should be removed or totally confined within the scrub attire.
- Fingernails are to be kept short, clean, and healthy. Nail polish that is obviously chipped or worn longer than four days has a tendency to harbor greater numbers of bacteria. Artificial nails should not be worn.
• All gloves are to be changed between patient contacts or after contact with contaminated items when task is completed.
• Protective eyewear, masks, or face shields must be worn when splashing or spraying is likely.
• Additional protective attire (e.g., liquid-resistant aprons, gowns, shoe covers) is to be worn when exposure to blood or potentially infectious materials is reasonably anticipated.

8.2. General Appearance

8.2.1. Uniforms and shoes must be kept clean and neat.

8.2.2. Women’s hair must be worn in such a manner that when bent over, it does not come down around the face so that it comes into contact with the patient.

8.2.3. Men’s hair must be neat and should not extend beyond the top of the shirt collar.

8.2.4. No health care worker that has patient contact (touching the patient) will wear artificial nails or nail extenders. All health care workers that have patient contact (touching the patient) will maintain natural nail length that does not extend beyond the fingertip. Polish, if worn, will be clear or flesh tone and will not be chipped.

8.2.5. The only acceptable jewelry for men is a wedding ring (if applicable) and a wristwatch.

8.2.6. The only acceptable jewelry for women is a wedding/engagement ring (if applicable), wristwatch, and earrings. Women are allowed one earring per ear. Earrings worn are not to be hoops or dangling, and cannot exceed a width of ¼ inch or hang below the earlobe.

Disclaimer: It must be kept in mind that at various times during your clinical education, you will be required to wear latex exam gloves. Rings may interfere with the proper donning and wearing of these gloves and may cause the gloves to rip. Therefore, to be prudent, the wearing of any rings that may cause interference with the proper wearing of latex gloves should be avoided.

8.2.7. While assigned to surgical rotation, the wearing of any ring that protrudes above the fingers is not allowed.
8.2.8. Men are allowed to have a mustache and/or goatee. Full beards are not allowed. If a student decides to grow a mustache and/or goatee, it is to be neatly trimmed. Sideburns will not extend below the bottom of the earlobe.

8.2.9. Sideburns and mustaches should be neatly trimmed, extending no more than ½” from the skin. For those individuals providing patient care (this includes radiographers), facial hair that interferes with the seal of the respirator is prohibited. (Refer to Section 3, Policy 5.3.)

8.2.10. When in clinical uniform, the following must be avoided:

- Perfume, strong colognes or aftershave lotions (these odors make some people nauseous).
- Chewing gum.
- Extremes in hair color or style.
- Excessive make-up.
- Tattoos – As some of the clinical education sites do not allow tattoos to be displayed, students who have tattoos must ensure that they are not visible.
- Visible Body Piercings (including the tongue) with the exception of pierced ears.

8.2.11. Students arriving in the clinical area inappropriately dressed or unshaven (as determined by the program faculty or department staff) may be asked to leave. Any time missed because of this will be required to be made up. Additionally, the student will receive a written warning or reprimand (Refer to Section 3, Policy 3.1.), as appropriate.

8.3. Personal Hygiene

Students are required to maintain personal hygiene in the clinical, classroom, and laboratory setting. Every detail of personal hygiene is extremely important. Students are expected to present a positive image of themselves, considering the needs of patients and/or peers. Personal hygiene includes, but is not limited to:

8.3.1. Daily bathing and oral hygiene

8.3.2. Clean body and minimized body odors, including bad breath

8.3.3. No heavily scented perfumes/powders, colognes, and lotions
8.3.4. Clean and trimmed fingernails

8.3.5. Neat and well-groomed hair and facial hair

8.3.6. Modest make-up on females (males are not to wear any make-up)

8.3.7. Following appropriate guidelines with respect to clothing contaminated with blood, body fluids, or other contaminants

9. Clinical Supervision

The clinical phase of the Radiography Program provides an environment for supervised clinical education and experience and offers a sufficient, well-balanced variety of radiographic examinations. In addition, the student will be introduced to a variety of radiographic equipment.

9.1. Direct Supervision

According to the Standards for an Accredited Educational Program in Radiologic Sciences, promulgated by the Joint Review Committee on Education in Radiologic Technology (JRCERT), direct supervision occurs when a qualified radiographer:

- reviews the procedure in relation to the student’s achievement;
- evaluates the condition of the patient in relation to the student’s knowledge;
- is present during the conduct of the procedure;
- reviews and approves the procedure;
- is present during student performance of any repeat of any unsatisfactory radiograph.

9.1.1. The student will work under the direct supervision of a registered radiographer until he/she has demonstrated competency in any given procedure. Once competency has been demonstrated, the student will work under the indirect supervision (Refer to Section 3, Policy 9.2) of a registered radiographer. Students found to be in violation of this policy will receive a written reprimand.

9.1.2. Any images that need to be repeated must always be performed under the direct supervision of a registered radiographer, regardless of the student’s level in the program. Students who choose to perform a repeat without adequate supervision (regardless of the reason) will receive a written reprimand.
9.1.3. A student will perform contrast media injections only under the direct supervision of a qualified radiographer, nurse, or physician.

9.2. Indirect Supervision

According to the Standards for an Accredited Educational Program in Radiologic Sciences, promulgated by the Joint Review Committee on Education in Radiologic Technology (JRCERT), indirect supervision is defined as follows:

“That supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.”

9.3. Mobile/Surgical Supervision

A registered radiographer will accompany students on all portable and surgical procedures in order to fulfill the minimum requirement of indirect supervision. Refer to Section 3, Policy 9.2.

10. Repeat Policy

Any images that need to be repeated must always be performed under the direct supervision of a registered radiographer, regardless of the student’s level in the program. Students who choose to perform a repeat without adequate supervision (regardless of the reason) will receive a written reprimand.

Failure to properly record any repeated radiograph on the Clinical Procedure Log will result in a written warning and a 1% reduction of the final clinical grade. These reductions will be for each occurrence. If the student accumulates more than 2 violations in a given trimester, he/she will receive a written reprimand and be subject to the consequent grade reduction, as stated in the A.S. Radiography Program Manual. Any student demonstrating a gross disregard for this policy may be subject to program dismissal.

Examples of violations include:

- Missing technologist initials for a repeat
- Missing the reason for the repeat
- Repeat noted on a Competency Form, but is not logged on the student’s Clinical Procedure Log
Upon notification of a violation, the student will have two weeks to log the repeat correctly on the Clinical Procedure Log and/or obtain the supervising technologist’s initials. The corrected Clinical Procedure Log must be turned into the faculty for verification of successful remediation.

**NOTE:** The student will still receive the 1% grade reduction for each violation of the Repeat Policy, even after this process is complete. If this process is not completed by two weeks, the student will be suspended from clinicals until the process is completed.

11. Clinical Procedure Log

Each student will record all procedures performed or observed during their clinical rotations on the Clinical Procedure Log. Due to the confidentiality requirements of the Health Insurance Portability and Accountability Act (HIPAA), the assigned clinical rotation will not be indicated on these forms.

In addition, these procedures must then be entered electronically into the “Daily Procedure Log” form in Trajecsys. These entries are **not** to be accomplished during clinicals hours.

If a student fails to log all procedures that he/she observes/performs in clinicals and/or fails to log technical factors, the student will be issued a **written warning** for the first and second offences. If the student violates this policy for a third time, he/she will be given a **written reprimand** and be subject to the consequent grade reduction (refer to the *A.S. Radiography Program Manual, Section 3, Policy 3.1.3.*).

The Clinical Procedure Log must be submitted to the Faculty by the due dates provided. Failure to submit these forms on the due date will result in a **1% reduction** of the final clinical grade for each day the forms are late. Forms submitted more than **1 week** after the due date will result in the student receiving a **written reprimand**. If a student fails to submit his/her Clinical Procedures Logs for any reason, he/she will receive a **written reprimand**. Students who repeatedly fail to submit these forms will be subject to Clinical Probation (refer to the *A.S. Radiography Program Manual, Section 3, Policy 3.1.4.*).

12. Radiation Protection and Safety

Adventist University of Health Sciences and the Department of Imaging Sciences promote a safe learning environment for all students. In the Radiography Program, it is vital that students adhere to the guidelines set forth to maintain their safety in the clinical environment.

12.1. Radiation Protection Guidelines
The following rules have been established for your protection against ionizing radiation during clinical education. Exposure to radiation always involves a risk of biologic changes that cannot be ignored. The benefits of diagnosis of disease certainly outweigh the risk. These rules are established for the students’ benefit and must be strictly adhered to:

12.1.1. At any time during activation of the x-ray tube (when x-rays are being generated), observation will be made from the protection of the control booth. For an exception to this, refer to Section 3, Policy 12.1.6.

12.1.2. Specifically, students must not hold or support a patient during exposure, nor will they hold or support a cassette during exposure. If an emergency arises, protective apron and gloves must be worn.

12.1.3. During activation of the x-ray tube, students must not be in direct visual line with either tube or patient. Thus, they may not observe the patient during exposure from an adjacent room or hall unless through a lead glass protective window.

12.1.4. During an exposure or procedure, do not place yourself in direct line with the central ray, even though you are wearing a lead apron, and even though a lead shield is interposed between the tube and yourself. The tube must in all cases be pointing away from your body.

12.1.5. Under no circumstances will students permit themselves or fellow students (or any other human being) to serve as “patients” for test exposures or experimentation.

12.1.6. During fluoroscopic procedures and bedside radiography, students will remain in the room with the patient. The following will prevail:

- A lead apron will be worn at all times, or you will remain behind a lead protective screen and not in visible line with either tube or patient.

- Students must stand as far from the patient and tube as possible, consistent with the conduct of the examination.

12.1.7. A radiation monitoring badge must be worn at all times. When wearing a lead apron, the badge must be worn on the outside close to the neck region.

Failure to comply with safe radiation protection practices are grounds for
dismissal from the Radiography Program.

12.2. Radiation Dose Limit Policy

All students enrolled in the Radiography program must comply with keeping their radiation exposure as low as reasonably achievable (ALARA) according to the Nuclear Regulatory Commission (NRC). Students are expected to wear their monitoring device as instructed by program faculty. Loss or mishandling must be reported to faculty as soon as possible.

Doses must NOT exceed National Council on Radiation Protection and Measurements (NCRP) requirements. Should a monitor report indicate an exposure of 125 mRem per quarter or 500 mRem per year or higher for a student, the following steps will be taken:
1. Notification of student of excessive dose
2. A conference between the student, program director and/or clinical coordinator will be held.
3. Through consultation with the certified medical physicist, an action plan will be determined to reduce future excessive exposure.

12.3. Personal Safety

The following rules and recommendations have been established to maintain the students’ safety when in the clinical environment. Any violation may result in compromise of the students’ safety.

12.3.1. Students will adhere to the safety regulations set forth by the clinical facility. This includes security and fire regulations.

12.3.2. Students will utilize proper body mechanics when interacting with and moving patients, equipment, and/or supplies. Proper body mechanics are taught to the students in the Patient Care for Health Sciences course in the trimester before they begin their clinical education.

12.3.3. Students must follow universal precautions with respect to handwashing, infection control, and proper disposal of medical waste.

12.3.4. When entering patient’s rooms, adhere to any contact or respiratory precautions required. Use the appropriate personal protective equipment (PPE).

12.3.5. If a student experiences a needlestick or exposure to body fluids, he/she is to cleanse the area, then call the Needlestick Hotline for Florida
Hospital at 1-888-807-1020 or the contact Employee Health for Centura Health.

12.3.6. Report any suspicious or violent behavior to hospital security or dial 911.

12.3.7. If a student experiences a personal injury, he/she is to fill out the necessary incident report forms required by the hospital and notify the Clinical Coordinator.

13. Pregnancy Policy

The ADU Radiography Program adheres to the JRCERT’s standard with regards to the declaration and discussion of pregnancy, including the appropriate courses of actions once declaration of pregnancy has occurred. This policy is also found in the clinical syllabi.

13.1. Discussion of Pregnancy

13.1.1. Although not required, it is recommended that the Program Director and Clinical Coordinator be notified as soon as possible of any pregnancy of a Radiography Program student. This is because of the potential radiation hazard to the embryo/fetus, particularly during the first trimester.

13.1.2. It is further recommended that the pregnant student discuss her situation with her physician.

13.1.3. Upon declaring herself pregnant, the student will meet with the Program Director or Clinical Coordinator who will review the program’s pregnancy policy with her.

13.1.4. The student will be given a series of articles dealing with a pregnant woman in the clinical area of a Radiology Department to read.

13.2. Clinical Options

If the student decides to declare her pregnancy, she will be given the following options with regards to her clinical education:

Option 1: Terminate her clinical education and continue the didactic (classroom) portion of the program. Lost clinical time will be made up after delivery. This may result in
postponement of graduating from the program and sitting for the national certification examination.

**Option 2:** Continue her clinical rotations with **no** changes in the types of assignment (fluoro, portables, etc.) and in performance/behavior responsibilities required of all students.

The pregnant student will read and sign an election form indicating her choice. Her signature will attest to the fact that she has been given proper attention and that she understands the level of risk associated with her continued training if she chooses Option 2.

The student will be issued an additional radiation monitor as per Florida Administrative Code 64E-5.311 (5) which states: “each individual who has declared pregnancy shall wear a radiation monitor at waist level at all times at work.”

At any time, the student has the right to submit a written withdrawal of declaration of pregnancy to the Program Director and/or Clinical Coordinator.

### 14. Communicable Disease Policy

#### 14.1. Florida Hospital and Centura Health are not responsible for providing testing or treatment in the event that students become injured or exposed to a communicable disease while performing clinical responsibilities. The student is required to obtain insurance coverage, and to consult their personal physician for follow-up of any injury or exposure.

For the purpose of this policy, a communicable disease is defined as any disease transmitted from one person to another, i.e. tuberculosis, hepatitis, meningitis, chicken pox, or HIV/AIDS.

If a student is exposed to a communicable disease in the clinical environment, he/she should notify the department coordinator and call the Infection Control office. Follow-up should be made with the student’s personal physician.

If the student experiences a needle-stick injury, they should first wash the wound and then call the Employee Health Clinic (see below). This number is available twenty-four hours a day. The student will receive counseling and a packet of information and forms to follow-up with.
If a student develops a communicable disease, he/she must notify the program faculty immediately. The student will be temporarily relieved from clinical responsibilities according to the recommendation of the Infection Control Department. All employees/students/patients exposed to the individual will be identified and notified by Infection Control. Refer to the ADU Student Handbook for the complete “Communicable Disease Policy.”

15. Patient Safety

Adventist University of Health Sciences is dedicated to promoting and ensuring the safety of all patients. This includes proper patient identification, patient assessment, and the administration of any classification of drug.

15.1 Students are responsible for adhering to the Patient Safety Goals established by their clinical site. These include, but are not limited to:

- Identifying patients correctly. Use at least two methods to identify patients, such as full name and date of birth.
- Using proper communication among staff. Communicate to all personnel involved about the status of the patient, including any known allergies.
- Prevention of infection. Employ the proper techniques to prevent the spread of infection, such as handwashing and proper disposal of medical waste.
- Prevention of patient injuries. Take precautions to ensure the safety of all patients with regards to bedrails, obstacles, and other hazards.
- Prompt response. Be mindful of the status of the patient from the start of your encounter. Regularly assess the condition of the patient, and report any deterioration in condition to the appropriate medical personnel.
- Appropriate use of restraints. Understand the appropriate use of restraints, including the application and release of restraints.
- Use of emergency response codes. Know the types of emergency response codes applicable to the clinical setting and the appropriate action to take.

16. Trajecsys

The Radiography Program at Adventist University of Health Sciences uses an on-line student record management service called Trajecsys. This system is used by each student to clock in
and out of their clinical education sites as well as to keep track of the radiographic procedures in which they are involved. It is used by the staff technologists to complete the necessary paperwork on each student, and it is also used by the faculty to maintain accurate records of each student’s accomplishments in the clinical setting.

Each student is required to sign up for this service. The instructions for doing this will be provided during the “Introduction to Radiography” course. There is a one-time fee of $150.00 that is good for the length of the program. Full refunds will be given if a student withdraws from the program within 30 days of registering for Trajecsys. Following this 30 day window, no refunds will be given. **Students will not be allowed to start their clinical education unless they have registered and paid for Trajecsys.**

17. Service Learning

Adventist University of Health Sciences requires that all students receiving an Associate of Science Degree, such as the A.S. in Radiography (ASR), must complete Service Learning (refer to the Academic Catalog). Project requirements will be given to the students during the third trimester of the program.

During Service Learning, students engage in community service activities with intentional academic learning goals and opportunities for reflection that connects to their academic disciplines. The students benefit from the experiential learning and the opportunity to be of service to the community. The Service Learning project is based on goal-directed learning experiences that incorporate course concepts.
SECTION 4: DIDACTIC/CLINICAL SCHEDULING

Course Sequences

The following is the recommended sequence for students in the Radiography Program starting in May. Individual programs may differ from this for students who have previous college/university level credits. However, the length of the program will remain as two years, as all Radiography courses can only be taken in the indicated trimester. A student who successfully follows this sequence will complete the curricular requirements. Failure to follow this recommended sequence may result in the student not graduating on time and will delay the student sitting for the ARRT certification examination.

Recommended Course Sequence*

<table>
<thead>
<tr>
<th>First Year</th>
<th>Summer</th>
<th>Fall</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>RTCA 111:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RTCA 113:</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>ENGL 144:</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RELP 103:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BIOL 101, 102: Anat. and Phys. I, II with Lab</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>RTCA 112, 122: Cl. Ed. I, II</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>RTCA 121, 141: Rad. Proc. I, II</td>
<td>3</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>ENGL 101, 102: English Com. I, II</td>
<td>3</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>PHYS 121:</td>
<td>4</td>
<td></td>
<td></td>
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<tr>
<td><strong>Trimester Total</strong></td>
<td>13</td>
<td>12</td>
<td>13</td>
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<table>
<thead>
<tr>
<th>Second Year</th>
<th>Summer</th>
<th>Fall</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>RTCA 232:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HPER 125:</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RTCA 224:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REL__:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RTCA 202, 212, 222: Cl. Ed. III, IV, V</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>RTCA 241:</td>
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</tr>
<tr>
<td>RTCA 251:</td>
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<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>RTCA 255:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BIOL 144:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSYC 124:</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Trimester Total</strong></td>
<td>14</td>
<td>10</td>
<td>11</td>
</tr>
</tbody>
</table>

*Program Pre-Requisite Courses:
MATH 120 College Algebra

Course descriptions can be found in the Academic Catalog.
Clinical Assignments

The Radiography Program at Adventist University of Health Sciences uses many clinical education sites for the clinical aspect of your training. During each clinical trimester, you will be assigned to a specific site, or a set of sites, for two or three weeks at a time in which to perform your clinical assignment.

<table>
<thead>
<tr>
<th>ADU Radiography Clinical Education Sites</th>
<th>Clinical Rotations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Florida Hospital Apopka</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Altamonte</td>
<td>Day &amp; Eve.</td>
</tr>
<tr>
<td>Florida Hospital Altamonte Outpatient Center</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Celebration</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Deland</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital East Orlando</td>
<td>Day &amp; Eve.</td>
</tr>
<tr>
<td>Florida Hospital Fish Memorial</td>
<td>Day, Mid-Day, &amp; Eve.</td>
</tr>
<tr>
<td>Florida Hospital Kissimmee</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Orlando</td>
<td>Day &amp; Eve.</td>
</tr>
<tr>
<td>Florida Hospital Orlando Outpatient Center</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Waterman</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Hospital Winter Garden</td>
<td>Day, Mid-Day &amp; Eve.</td>
</tr>
<tr>
<td>Florida Hospital Winter Park</td>
<td>Day, Mid-Day &amp; Eve.</td>
</tr>
<tr>
<td>Florida Radiology Imaging (FRi) – Lake Mary</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Radiology Imaging (FRi) – Princeton</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Radiology Imaging (FRi) – Waterford Lakes</td>
<td>Day</td>
</tr>
<tr>
<td>Florida Radiology Imaging (FRi) – Oviedo</td>
<td>Day</td>
</tr>
<tr>
<td>Castle Rock Adventist Hospital (Denver Campus)</td>
<td>Day &amp; Eve.</td>
</tr>
<tr>
<td>Parker Adventist Hospital (Denver Campus)</td>
<td>Day, Mid-Day, &amp; Eve.</td>
</tr>
<tr>
<td>Littleton Adventist Hospital (Denver Campus)</td>
<td>Day, Mid-Day, &amp; Eve.</td>
</tr>
<tr>
<td>Porter Adventist Hospital (Denver Campus)</td>
<td>Day &amp; Eve.</td>
</tr>
<tr>
<td>Orthopedic Associates (Denver Campus)</td>
<td>Day</td>
</tr>
</tbody>
</table>

In the Central Florida area, the clinical education sites are dispersed over five (5) different counties. In the Denver area, there are currently four hospitals and a free-standing orthopedic center at which the Denver campus students will be performing their clinical rotations. There will be a time that you may be assigned to several of these clinical sites during the same trimester; therefore, reliable, personal transportation is required for you to be able to get to your assigned sites.
The following outlines the types of clinical rotations all students will have throughout the duration of the Radiography Program:

<table>
<thead>
<tr>
<th>Clinical Education I – II (Fall &amp; Spring of 1st year)</th>
<th>Clinical Education III (Summer of 2nd year)</th>
<th>Clinical Education IV &amp; V (Fall and Spring of 2nd year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mondays &amp; Wednesdays</td>
<td>Fridays</td>
<td>Tuesdays &amp; Thursdays</td>
</tr>
<tr>
<td>Day Rotation</td>
<td>7:30 am – 4:00 pm</td>
<td>7:30 am – 3:00 pm</td>
</tr>
<tr>
<td>Mid-Day Rotation</td>
<td>10:00 am – 6:30 pm</td>
<td>10:00 am – 6:30 pm</td>
</tr>
<tr>
<td>Evening Rotation (Eve.)</td>
<td>1:00 pm – 9:30 pm</td>
<td>1:00 pm – 9:30 pm</td>
</tr>
</tbody>
</table>

There are a total of five (5) clinical trimesters; therefore, clinical assignments will vary from one trimester to another. Students will not receive preferential treatment for clinical assignments based on their home address. Clinical sites are normally within 40 miles of both the Orlando and Denver campuses, which may require students to drive significant distances.

In accordance with the Joint Review Committee on Education in Radiologic Technology (JRCERT) [20 North Wacker Drive, Suite 2850, Chicago, IL 60606-3182; Phone: (312) 704-5300; Fax: (312) 704-5304; e-mail: mail@jrcert.org, website: www.jrcert.org], students are limited to not more than 10 scheduled clinical hours in any one day. In addition, students shall not exceed a combined total of 40 didactic and clinical hours per week. Hours exceeding these limitations must be voluntary on the student’s part.

As part of the clinical requirements, students are required to perform evening rotations. The JRCERT states that a maximum of 25% of the student’s total clinical clock hours can be performed in evening and weekend assignments. The Radiography Program at ADU does not make use of weekend clinical assignments.

The JRCERT defines evening hours as any time between 7:00 pm and 5:00 am. Based on the 25% maximum allowed by the JRCERT, students at ADU traditionally have spent between 3% and 11% of their total clinical clock hours on evening rotations. The Radiography Program requires students to participate in evening rotations for a minimum of 3% and a maximum of 15% of their total clinical clock hours.

Students are assigned to the evening rotation in order to meet the following:
Evening rotations are utilized to provide the student radiographer an all-inclusive clinical experience. Due to the decrease in ancillary staff during the evening rotations, students can contribute in all aspects of the patient/examination workflow. Examinations during the evening rotations require greater experience and expertise in performing skeletal work, trauma, and portables due to the heavier concentration of outpatient and emergency examinations during this period.

- Gain knowledge and experience in performing all types of examinations on trauma patients.
- Attain experience and accelerate independence in performing a variety of examinations due to the lighter work load (the examinations usually need not be rushed).
- Satisfy other objectives as listed in the course outlines, such as:
  a. Practicing and becoming proficient in the positioning of patients for all routine procedures that have been presented in the classroom.
  b. Practicing and becoming proficient with the operation and use of all x-ray generating equipment and accessories that are available for use in the performance of producing satisfactory radiographic images.

Note: It must be pointed out that the first three bullets listed above are of paramount importance and must receive the most emphasis.

Students assigned to the evening rotation will make their presence known to the department coordinator. When not performing procedures, the student is to stay in the vicinity of the coordinator’s desk. You must ensure that the coordinator is aware of your location at all times.

Clinical Site Contact Numbers

<table>
<thead>
<tr>
<th>Clinical Site</th>
<th>Contact Number*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Florida Hospital Apopka</td>
<td>(407) 889-1000 ext. 1372</td>
</tr>
<tr>
<td>Florida Hospital Altamonte – Dept.</td>
<td>(407) 303-2600</td>
</tr>
<tr>
<td>Florida Hospital Altamonte – OPC</td>
<td>(407) 303-2155</td>
</tr>
<tr>
<td>Florida Hospital Celebration</td>
<td>(407) 303-4450 ext. 3730</td>
</tr>
<tr>
<td>Florida Hospital Deland</td>
<td>(386) 943-4608</td>
</tr>
<tr>
<td>Florida Hospital East Orlando</td>
<td>(407) 303-8695</td>
</tr>
<tr>
<td>Florida Hospital Fish Memorial</td>
<td>(386) 917-5114</td>
</tr>
<tr>
<td>Florida Hospital Kissimmee</td>
<td>(407) 933-6691</td>
</tr>
<tr>
<td>Florida Hospital Orlando – Dept.</td>
<td>(407) 609–0850</td>
</tr>
<tr>
<td>Florida Hospital Orlando – OPC</td>
<td>(407) 303-2510</td>
</tr>
</tbody>
</table>
*These contact numbers are subject to change without notification to the ADU Radiography Program Faculty. It is the student’s responsibility to make sure he/she has the most current contact information.

Each clinical site has an assigned Adjunct Clinical Instructor. The names of these instructors will be provided during Clinical Orientation.

**Modality Shadowing Policy**

Any student wishing to shadow a different imaging modality during clinical time must meet the following criteria:

- All required comps for the program must be completed
- The student must be passing RTCA 255 Radiography Review at the time of the request
- The student must be in good standing with regards to their academic and clinical performance. Students on probation or who have repeatedly violated clinical policies are not eligible.

If a student meets the above criteria, he/she may submit the request to the Clinical Coordinator using the Modality Shadowing Application form. The student must specify the modality and clinical site at which the shadowing would take place. The Clinical Coordinator or Program Faculty will then contact the appropriate personnel at the clinical site to place the request. Note the following:

- Students may only request to shadow ONE modality
  - Students may not request shadowing opportunities in Mammography
- Requests for shadowing can only be made in the final clinical trimester of the program
- Requests are not guaranteed, and are subject to approval by the clinical site and Clinical Coordinator and/or Program Director
• If approved, students may shadow the requested modality for a maximum of 2 clinical days
  o During the shadowing, the student must list the exams observed on their Clinical Procedure Log
  o Within 2 weeks from the last day of shadowing, the student must submit a Reflection Paragraph of no less than 150 words to the Clinical Coordinator via Canvas email. In this Reflection, the student must address the following:
    ▪ Brief description of what you were able to observe.
    ▪ What did you learn about the modality?
    ▪ How has this experience benefitted you as you prepare to become a radiographer?
SECTION 5: DIDACTIC/CLINICAL GRADE EVALUATION

1. Radiography Program Grading Scale
   1.1. Program Grading Scale
   1.2. Academic Counseling
   1.3. Academic Probation

2. Clinical Grade
   2.1. Evaluation of Clinical Grade
   2.2. Clinical Performance
   2.3. Clinical Dismissal

3. Laboratory Proficiency Testing Policies and Procedures
   3.1. Scheduling of Laboratory Testing
   3.2. Competency Record
   3.3. Identification Markers
   3.4. Patient Shielding
   3.5. Tardiness to Laboratory Testing
   3.6. Unexcused Absence for Laboratory Testing
   3.7. Excused Absence for Laboratory Testing
   3.8. Student Interaction
   3.9. Communication
   3.10. Time Limit
   3.11. Deductions
   3.12. Completion
   3.13. Laboratory Remediation

4. Clinical Competency Policies and Procedures
   4.1. ARRT Requirements
   4.2. Demonstration of Competence
   4.3. Competency Protocol
   4.4. Radiological Procedures
   4.5. Electives/Simulations
   4.6. Competency Remediation

5. Adjunct Clinical Instructor/Staff Technologist Evaluations

6. Clinical Case Studies
   6.1. Grading Criteria
   6.2. HIPAA
   6.3. Resources
1. Radiography Program Grading Scale

1.1. Program Grading Scale

In order to maintain satisfactory academic progress in the Radiography Program, each student must achieve and retain in each didactic course* a minimum grade of 78% (C).

The grade scale for most Radiography classes is as follows:

\[
\begin{array}{cccccc}
96 - 100 & = & A & 90 - 92 & = & B+ \\
93 - 95 & = & A- & 87 - 89 & = & B \\
84 - 86 & = & B- & 75 - 77 & = & C- \\
70 - 74 & = & D & < 70 & = & F
\end{array}
\]

*Patient Care for the Health Sciences (RTCA 113) and Radiography Review (RTCA 255) utilize the following grading scale, in which the minimum passing grade is 80% (C).

\[
\begin{array}{cccccc}
98 - 100 & = & A & 92 - 94 & = & B+ \\
95 - 97 & = & A- & 89 - 91 & = & B \\
86 - 88 & = & B- & 75 - 79 & = & C-
\end{array}
\]

1.2. Academic Counseling

Every effort by counseling will be made to aid the cooperative student in fulfilling these minimum standards. However, if a student receives a final grade below a C, a recommendation of dismissal will be presented to the Vice President for Academic Administration.

2. Clinical Grade

It is the student’s responsibility to fulfill all clinical course requirements before the appointed deadline as published in the clinical syllabus. The student must plan ahead and utilize each clinical rotation effectively in order to master the necessary skills to accomplish this.

2.1 Evaluation of Clinical Grade

2.1.1. The grade for Clinical Education I and II will be calculated based on the following general scale:

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluations</td>
<td>30%</td>
</tr>
<tr>
<td>Competency Exams</td>
<td>50%</td>
</tr>
<tr>
<td>Lab Proficiency Evaluations</td>
<td>10%</td>
</tr>
<tr>
<td>Case Studies</td>
<td>10%</td>
</tr>
</tbody>
</table>
The grade for Clinical Education III will be calculated based on the following general scale:

- Competency Exams 70%
- Evaluations 30%

The grade for Clinical Education IV will be calculated based on the following general scale:

- Evaluations 30%
- Senior Lab Testing 10%
- Competency Exams 60%

A minimum grade of 78% is required in order to progress in the program. Refer to Section 5, Policy 1.1. for the grading scale.

2.1.2. Additional factors that will affect the student’s trimester grade as noted on each respective syllabus are:
- Attendance
- Disciplinary actions
- Record of Clinical Procedure Logs/Repeat Image Violations

2.1.3. Students who do not complete all of the competency requirements for any trimester prior to the assigned completion date will have their clinical grade computed as follows:

The “Competency Exams” portion of the grade will be calculated by adding the grades of all comps performed for that trimester and dividing that sum by the total number of comps required for the trimester. Once the overall clinical grade has been calculated, it will then be reduced one step in letter grade (i.e.: B+ to B).

2.2. Clinical Performance

A student’s clinical performance may be evaluated by program faculty at any time while in the Radiography program to determine whether the student is
performing at the appropriate clinical level. If the student's performance is found to be below the appropriate clinical level as determined by the program faculty, actions taken may result in failure of the clinical course or program dismissal.

### 2.3. Clinical Dismissal

The infractions resulting in recommendation for dismissal from the Radiography Program include, but are not limited to:

2.3.1. Absent from clinicals for more than 20% of the scheduled time. Refer to the Academic Catalog.

2.3.2. Received four reprimands for the same or different offenses. Refer to Section 3, Policy 3.1.

2.3.3. Failure to satisfactorily fulfill the terms imposed by clinical probation.

2.3.4. Any gross disregard for hospital/university policies in the clinical setting.

2.3.5. Breech of ethical or professional behavior. Refer to Section 3, Policies 2.1 and 2.2.

2.3.6. Accumulating four critical errors while enrolled in the Radiography Program. Refer to Section 3, Policy 3.4.

2.3.7. Failure to demonstrate satisfactory clinical performance appropriate for the clinical level. Refer to Section 5, Policy 2.2.

### 3. Laboratory Proficiency Testing Policies and Procedures

Laboratory Demonstration will be conducted following the classroom presentation of the Radiographic Procedures I and II courses (RTCA 121 and 141). The grade received for the Laboratory Testing will be included as part of the clinical grade for Clinical Education I and II courses (RTCA 112 and 122). For Clinical Education I and II, students must successfully complete the Laboratory Proficiency Testing before they are allowed to perform their attempts on the respective procedures. Refer to Section 7, Appendix D.

In addition, Senior Lab Testing will be conducted during Clinical Education IV and V.

The following policies will be adhered to during laboratory testing:
3.1. Scheduling of Laboratory Proficiency Testing

Upon registering for the Radiographic Procedures I or II course, students will also register for a corresponding Lab (i.e. Lab A, Lab B, etc.). Students are required to be **present and punctual** to the Lab that they have registered for. During this scheduled Lab time, students will perform their required laboratory proficiency testing and also serve as a patient for another student.

3.2. Competency Record

Upon successful completion of the lab testing, the faculty member will update the student’s Competency Record of Radiological Procedures form to allow the student to progress in the clinical arena.

3.3. Identification Markers

3.3.1. Students are to bring their own markers to the laboratory testing session.

3.3.2. Students who forget their markers may borrow a set of generic markers from the program faculty.

3.3.3. Students who forget their markers will be penalized in the Exam Performance category related to appropriate use of markers.

3.4. Patient Shielding

3.4.1. Protective shielding must be used on all examinations unless it interferes with the examination.

3.4.2. Protective shielding includes shielding the gonads of both males and females as well as the breasts of female patients and proper collimation as required.

3.5. Tardiness to Laboratory Testing

3.5.1. Students are required to arrive on time for laboratory proficiency testing according to the Lab time they have registered for. **Any student arriving after his/her scheduled lab time is considered late.**

   **Example:** Lab A is scheduled from 10:00 a.m. to 11:00 a.m. All students registered for Lab A should arrive at 10:00 a.m. Any student arriving after 10:00 a.m. is considered late.
3.5.2. If a student is late to laboratory testing, he/she will have to stay to be worked back into the testing rotation per the discretion of the Lab Instructor.

3.5.3. If a student arrives after the duration of the Lab time he/she registered for has passed, the student will be given an unexcused absence and is subject to the subsequent penalties. Refer to Section 5, Policy 3.6.

3.5.4. Students accumulating more than three (3) incidents of tardiness demonstrate a disregard for Program policies and this may result in Program dismissal.

3.6. Unexcused Absence for Laboratory Testing

3.6.1. It is the responsibility of the student to notify the Course Instructor and/or Lab Instructor of any absences prior to the start of his or her scheduled Lab Testing appointment and provide a valid excuse. The student may contact the Course Instructor and/or Lab Instructor via phone (voicemail) or e-mail.

3.6.2. Failure to notify the program faculty of the absence prior to the start of his/her scheduled Lab Testing appointment and/or provide a valid excuse constitutes an unexcused absence, and will result in a grade of zero (0).

3.6.3. The student is still required to demonstrate the missed procedures. If the student fails the laboratory testing, he/she must undergo the remediation process. Refer to Section 5, Policy 3.1.

3.6.4. The student must make up the laboratory testing within 3 academic days of the missed appointment. On Day 4, the student will receive a written reprimand from the Clinical Coordinator, resulting in a reduction of the overall clinical grade. Refer to Section 3, Policy 3.1.3.

3.7. Excused Absence for Laboratory Testing

3.7.1. If the student notifies the program faculty of the absence prior to the start of his/her scheduled Lab Testing appointment and provides a valid excuse, this constitutes an excused absence.

3.7.2. The student is still required to demonstrate the missed procedures. If the student fails the laboratory testing, he/she must undergo the remediation process. Refer to Section 5, Policy 3.1.3.
3.7.3. The student must make up the laboratory testing within 3 academic days of the missed appointment. On Day 4, the student will receive a grade of zero (0).

3.8. Student Interaction

Students acting as the “patient” shall not communicate anything that may assist in any way with the student performing his/her proficiency. This includes orally giving them hints or physically placing yourself into a specific position. The “patient” is to wait until told when to lie on the table or stand in front of the Upright Bucky, etc. Any student found to be in violation of this will have 2 percentage points deducted from their own grade.

3.9. Communication

The student performing the examination is to properly communicate to the “patient” so that there is no misunderstanding as to what is desired. Students are to use layman’s terminology when addressing the “patient,” not medical terminology.

3.10. Time Limit

3.10.1. Students are required to complete laboratory testing within a 15 minute time period. Within this time period, the student is expected to properly screen the “patient,” perform the required procedures/views, and answer any questions posed by the program faculty.

3.10.2. Students who exceed the 15 minute time period will receive a score of “Inadequate” in the Exam Efficiency category related to the time limit. Students will be stopped at 20 minutes and graded on the lab performance up to that time.

3.11. Deductions

In addition to the deductions stated in Section 5, Policies 3.3.3., 3.6.2., 3.7.3., 3.8., and 3.10.2., the following actions will result in deductions to the student’s laboratory testing grade:

3.11.1. Students performing the incorrect view will be graded on the view performed, but receive a score of “Inadequate” in the Exam Performance category related to performing assigned views. Students will be responsible for explaining the correct view to the program faculty.
3.11.2. Any error or collection of errors resulting in a repeat for any view will result in a score of “Inadequate” in the Exam Efficiency category related to repeats. Such errors include, but are not limited to, clipping anatomy of interest, setting incorrect technical factors, no marker used, incorrect patient positioning, incorrect use of tube angle, etc.

3.11.3. If a student has to repeat all views in a given lab testing, the student will fail that lab testing and be given a score of zero, regardless of the score in TrajeSys (refer to the A.S. Radiography Program Manual, Section 5, Policy 3.12.5).

3.12. Junior Lab Testing Completion (Clinical Education I & II)

3.12.1. Students must receive a grade of 78% or higher to be considered as having passed the proficiency examination.

3.12.2. Any grade below 78% is considered a failure for that proficiency. This requires the student to undergo the remediation process. Refer to Section 5, Policy 3.13.

3.12.3. If a student fails any proficiency examination, he/she is not allowed to perform any attempts or competency exams on that procedure in the clinical setting until after successfully completing the remediation process.

3.12.4. The grade the student receives on the first attempt of laboratory testing will be the one recorded in the clinical file. Any grading on subsequent attempts of laboratory testing during the remediation process will be used to evaluate the student on a pass/fail scale.

3.12.5. Failure of three (3) laboratory proficiency examinations (lab tests), in a given trimester, will result in a failure of Clinical Education I (RTCA 112) or II (RTCA 122), as appropriate. This will result in dismissal from the program. Readmission will follow normal procedures as outlined in the Academic Catalog.

3.13. Junior Laboratory Remediation

If a student fails a laboratory testing, he/she must undergo the Laboratory Proficiency Remediation process. Refer to the Laboratory Proficiency Flowchart in Section 7, Appendix D.

A Clinical Faculty member will issue a remediation “pink” slip and give the remediation worksheet to the student. If the student fails the worksheet in the
remediation process, he/she will complete another worksheet. If the student fails the second worksheet, the failure will count as a **lab testing failure**.

The faculty member who issues the remediation “pink” slip will schedule the retesting.

Retesting of the student will not be based on the EXACT positions that were originally given, rather a combination of positions from those attempted and those required. **The student must achieve an 85% on the retest of the failed exam. Failure to achieve an 85% will result in a lab testing failure.**

3.13.1. The Laboratory Proficiency Remediation process must be completed within **four (4) academic days**. If the student fails to complete the remediation process in this timeframe, he/she will receive a written reprimand. Refer to **Section 3, Policy 3.1.3**.

3.13.2. If a student does not successfully complete the remediation process, he/she may meet with the Clinical Coordinator before re-attempting the remediation process. Refer to **Section 5, Policy 3.12.5**.

3.13.3. Each time a student must undergo the remediation process, a failure will be recorded. For example, if a student fails a laboratory testing, undergoes the remediation process, and fails the remediation process, the student has accumulated a total two (2) laboratory testing failures. Refer to **Section 5, Policy 3.12.5**.

### 3.14. Senior Lab Testing Completion (Clinical Education IV & V)

3.14.1. Students must receive a grade of **85%** or higher to be considered as having passed the proficiency examination.

3.14.2. Any grade below 85% is considered a failure for that proficiency. This requires the student to undergo the remediation process. Refer to **Section 5, Policy 3.13**.

3.14.3. The grade the student receives on the first attempt of laboratory testing will be the one recorded in the clinical file. Any grading on subsequent attempts of laboratory testing during the remediation process will be used to evaluate the student on a pass/fail scale.

3.14.4. **Failure of three (3) laboratory proficiency examinations (lab tests), in a given trimester, will result in a failure of Clinical Education IV (RTCA 212) or V (RTCA 222), as appropriate.** This will result in dismissal.
from the program. Readmission will follow normal procedures as outlined in the *Academic Catalog*.

### 3.15. Senior Laboratory Remediation

If a student fails a laboratory testing, he/she must undergo the Laboratory Proficiency Remediation process. The faculty member who issues the remediation “pink” slip will schedule the retesting.

Retesting of the student will not be based on the EXACT positions that were originally given, rather a combination of positions from those attempted and those required. **The student must achieve a 90% on the retest of the failed exam. Failure to achieve a 90% will result in a lab testing failure.**

**3.15.1.** The Laboratory Proficiency Remediation process must be completed within *four (4) academic days*. If the student fails to complete the remediation process in this timeframe, he/she will receive a written reprimand. Refer to *Section 3, Policy 3.1.3*.

**3.15.2.** If a student does not successfully complete the remediation process, he/she may meet with the Clinical Coordinator before re-attempting the remediation process. Refer to *Section 5, Policy 3.12.5*.

**3.15.3.** Each time a student must undergo the remediation process, a failure will be recorded. For example, if a student fails a laboratory testing, undergoes the remediation process, and fails the remediation process, the student has accumulated a total two (2) laboratory testing failures. Refer to *Section 5, Policy 3.14.4*.

### 4. Clinical Competency Policies and Procedures

After a student has successfully completed laboratory proficiency testing and any required attempts of a procedure, he/she is then able to competency test on that procedure in the clinical setting. This requires that the student perform the procedure without the aid of any technologist, textbook, or notes. The student must satisfactorily fulfill all trimester requirements as outlined in the course syllabus. By the completion of the program, the student must have successfully completed the required number of mandatory and elective Competency Requirements.
4.1. ARRT Requirements

The purpose of the clinical competency requirements is to verify that individuals certified and registered by the ARRT have demonstrated competency performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the radiography certification examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the student has performed the procedure independently, consistently, and effectively during the course of his or her formal education.

This policy describes the competency requirements for Radiography that became effective January 1, 2017. These requirements are in addition to graduating from an educational program accredited by a mechanism acceptable to the Registry. The requirements listed are the minimum core clinical competencies necessary to establish eligibility for participation in the ARRT Certification Examination. ARRT encourages individuals to obtain education and experience beyond these core requirements.

4.1.1. Students must demonstrate competency in all 37 Imaging Procedures identified as mandatory.

4.1.2. Students must also demonstrate competency in at least 15 of the 37 Imaging Procedures identified as elective.
   - One of these elective procedures must come from the Head section
   - Two of these elective procedures must come from the Fluoroscopy section, one of which must be either an Upper GI or a Contrast Enema.

4.1.3. In addition to the requirements of Sections 4.1.1 and 4.1.2 above, the Program requires students must also demonstrate competency on three Equipment Checkoffs. The requirements for these checkoffs will be explained at the beginning of the respective trimesters.

4.1.4. In addition to the Imaging Procedures competencies, the ten (10) General Patient Care competencies are mandatory. These competencies may be simulated.

4.2. Demonstration of Competence

Demonstration of competence includes requisition evaluation, patient assessment, room preparation, patient management, equipment operation,
technique selection, positioning skills, radiation safety, image processing, and image evaluation.

4.2.1. Competency exams must be done under the direct supervision of a radiologic technologist. Upon successful completion, the student will be able to perform the competency tested procedure under indirect supervision. Refer to Section 3, Policies 9.1.1. and 9.1.2.

4.2.2. A student must declare his/her intention to compet on an exam to the radiologic technologist before the start of the exam and before seeing the patient. Once students have decided that they want to competency test on a given procedure, they may not change their mind once the procedure has begun.

4.2.3. The student is not allowed to pre-select patients in any way in order to competency test on a procedure. This includes looking at the size/status of a patient before declaring to the technologist that he/she would like to competency test on the exam.

4.2.4. When a student requests to be competency tested, he/she must know and be able to perform the routine views for the procedure and select the correct technical factors, including manual techniques. The student is not permitted to use the procedure menu on the control panel to select the technical factors. Trauma competency exams are not limited to only the trauma views. Students are required to perform all views as per the facility’s protocol.

4.2.5. During competency testing, the student is not allowed to refer to positioning notes, textbooks, or ask the technologist for help in knowing how to perform routine views. The technologist may offer assistance with a difficult patient, but it is the student’s responsibility to take the lead in performing the exam.

4.2.6. The supervising technologist is allowed to stop the student at any time during the competency exam if he/she feels that the student is not demonstrating competence or harm will result to the patient.

4.2.7. A student may competency test on an exam at the technologist’s discretion. If the technologist feels that the patient is not an appropriate case on which to competency test, he/she may deny the student’s request to competency test.
4.2.8. If, during the course of the competency testing, the student has to be corrected or assisted in any manner, this will be reflected in the grading of the competency exam.

4.2.9. Competency on any procedure does not mean mastery of it. It means that you are capable of performing it without direct supervision. Mastery of all procedures in Radiography comes with continued performance of the procedures until they are second nature to you. Therefore, once a student has competency tested on any procedure (e.g. Chest X-ray), they will not shy away from or refuse to do them at any time. Statements such as “I don’t need to do that because I have already competency tested on it” or “I’ve done enough of those” will not be tolerated. Violators of this policy will receive disciplinary action as discussed in Section 3, Policy 3.1.

4.2.10. Competencies performed with staff technologists may periodically be evaluated by one of the program faculty. Changes to the competency grade may be made at the discretion of the program faculty.

4.2.11. If a student fails 5 comps while enrolled in the Radiography Program, he/she will be dismissed from the program. Additionally, if a student fails the same comp 3 times, the student will be dismissed from the program. NOTE: Equipment Check-offs are considered comps.

4.3. Competency Protocol

The following protocol will be adhered to in order to competency test on any procedure.

- Students will receive classroom instruction on a specific procedure (Chest x-ray, abdomen, hand, etc.).
- That procedure will then be demonstrated in the lab.
- Students will practice the procedure while attending their clinical assignment or in the Radiography Lab. Students may also perform these procedures on patients while under the direct supervision of a registered radiographer. Refer to Section 3, Policies 9.1.1. and 9.1.2.
- Students will then demonstrate, to the program faculty, their ability to successfully perform the procedure during Laboratory Proficiency Testing.
- Upon satisfactory completion of the laboratory proficiency testing, the students may then request to perform the procedure as an “attempt.” “Attempts” are only required for the first three clinical trimesters.
• Once the student has successfully completed two “attempts” on the procedure, he/she may then request to perform it as a competency exam.

• **The student may only complete one attempt and one competency exam OR two attempts on a given procedure in a single clinical shift.** The student is not allowed to complete two attempts and a competency exam on the same procedure in a single clinical shift.

• **Out of respect for the patient, only one student may perform attempts and/or competency exams on a single patient.** In other words, two or more students may not competency test or attempt any exam on the same patient. Any student violating this policy will have the resulting competency exam grade invalidated.

• Should a patient present with bilateral exams (i.e. Bilateral Hands, Bilateral Feet, or Bilateral Hips), and the student has either no attempts or one attempt on the procedure, that student cannot use one side as an attempt and then the other side as the 2nd attempt or as a comp. The student is only allowed to use one of the exams as either an attempt or a comp.

  o Example #1: Mrs. Jones presents with a prescription for x-rays of both hands. Junior Student, Joe Smith, has no attempts on this procedure and he would like to perform these exams. He can radiograph both hands, under the direct supervision of a Registered Technologist, but he can only log it as one attempt. He cannot use one hand as Attempt #1 and the other hand as Attempt #2.

  o Example #2: Mr. Rodriguez presents with a prescription for x-rays of both feet. Student Jane O’Brien already has one attempt on a foot. She can radiograph both feet, under the direct supervision of a Registered Technologist, but she can only log it as Attempt #2. She cannot use one foot as Attempt #2 and the other foot as a comp.

• Note: The views for the Adult and Pediatric Bone Survey are not comprehensive enough to allow students to competency test on a portion of the exam.

• **A grade of 78% (C) or better is required for the comp to be considered successful.**

• If the grade on the competency exam is less than 78%, the student must complete the remediation process prior to attempting to perform the procedure again. Refer to Section 5, Policy 4.6.

• Upon successful completion of the Comp, the student is considered competent to perform the procedure under indirect supervision of a registered radiographer. Refer to Section 3, Policy 9.2.

• A comp must be entered in Trajecsys **within 3 business days** of the date of the comp to be considered valid. If the comp is not entered within this timeframe, the comp is considered invalid and will not count towards the
student’s clinical grade; therefore, the student would need to re-comp the exam.

4.4. Radiologic Procedures

The following table illustrates the various competency requirements set forth by the ARRT and indicates whether the competencies are mandatory or elective. The total number of competencies that are required each clinical trimester will be indicated on the respective syllabus.

<table>
<thead>
<tr>
<th>Exam</th>
<th>Mandatory</th>
<th>Elective</th>
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<tbody>
<tr>
<td>CHEST and THORAX</td>
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<tr>
<td>Chest, routine</td>
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<tr>
<td>Chest AP (wheelchair or stretcher)</td>
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<tr>
<td>Ribs</td>
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<tr>
<td>Chest, lateral decubitus</td>
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<tr>
<td>Sternum</td>
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<tr>
<td>Upper Airway (Soft Tissue Neck)</td>
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<tr>
<td>UPPER EXTREMITIES</td>
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<td>Thumb or Finger</td>
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<tr>
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<td>Trauma: Shoulder or Humerus (Y-view, Transthoracic, or Axillary)*</td>
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<td>Acromioclavicular (AC) Joints</td>
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<td>LOWER EXTREMITIES</td>
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<td>Knee</td>
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<td>Tibia-Fibula</td>
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<td>Femur</td>
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<td>Trauma: Lower Extremity*</td>
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<tr>
<td>Patella</td>
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<tr>
<td>Calcaneus (Os Calcis or Heel)</td>
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<td>Elective</td>
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<tr>
<td>Skull</td>
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<td>Paranasal Sinuses</td>
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<td>Zygomatic Arches</td>
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<td>Temporomandibular Joints (TMJ)</td>
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<td><strong>SPINE and PELVIS</strong></td>
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<td>Cervical Spine</td>
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<td>Thoracic Spine</td>
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<td>Lumbosacral Spine</td>
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<td>Cross-Table (Horizontal Beam) Lateral Spine</td>
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<td>Hip</td>
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<td>Cross-Table (Horizontal Beam) Lateral Hip</td>
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<td>Scoliosis Series</td>
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<td>Sacroiliac Joints</td>
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<td><strong>ABDOMEN</strong></td>
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<td>Abdomen Supine (KUB)</td>
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<td>Abdomen – Upright</td>
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<td>Abdomen – Decubitus</td>
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<tr>
<td>Abdomen Series</td>
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<tr>
<td>Intravenous Urography (IVU)</td>
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<td><strong>FLUOROSCOPY STUDIES</strong>: must select either UGI or BE plus one other from this section.</td>
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<td>Upper GI Series (Single or Double Contrast) (UGI)</td>
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<tr>
<td>Barium Enema (Single or Double Contrast) (BE)</td>
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<td>Small Bowel Series (SBS)</td>
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<tr>
<td>Esophagus</td>
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<tr>
<td>Cystography/Cystourethrography</td>
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<td>ERCP</td>
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<tr>
<td>Myelography</td>
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<tr>
<td>Arthrography</td>
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<tr>
<td>Hysterosalpingography</td>
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<tr>
<td><strong>MOBILE C-Arm STUDIES</strong></td>
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<tr>
<td>C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)</td>
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<tr>
<td>Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)</td>
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</table>
### Exam

<table>
<thead>
<tr>
<th>Mobile Studies</th>
<th>Mandatory</th>
<th>Elective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest (PCXR)</td>
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<tr>
<td>Abdomen (PKUB)</td>
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<tr>
<td>Orthopedic</td>
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**Pediatrics (Age 6 or younger)**

<table>
<thead>
<tr>
<th>mandatory</th>
<th>elective</th>
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<tbody>
<tr>
<td>Chest Routine</td>
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<tr>
<td>Pigg-O-Stat CXR</td>
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<tr>
<td>Contrast Study</td>
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<tr>
<td>Upper Extremity</td>
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<tr>
<td>Lower Extremity</td>
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<tr>
<td>Abdomen</td>
<td></td>
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<tr>
<td>Mobile Study</td>
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</table>

**Geriatric Patient** (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)

<table>
<thead>
<tr>
<th>mandatory</th>
<th>elective</th>
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<tbody>
<tr>
<td>Chest Routine</td>
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<tr>
<td>Upper Extremity</td>
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<tr>
<td>Lower Extremity</td>
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</table>

**Equipment Check-Offs**

<table>
<thead>
<tr>
<th>mandatory</th>
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<tbody>
<tr>
<td>C-ARM</td>
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<tr>
<td>General Radiographic</td>
</tr>
<tr>
<td>Fluoroscopic</td>
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</table>

**General Patient Care**

<table>
<thead>
<tr>
<th>mandatory</th>
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<tbody>
<tr>
<td>CPR</td>
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<tr>
<td>Vital Signs – Blood Pressure</td>
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<tr>
<td>Vital Signs – Temperature</td>
</tr>
<tr>
<td>Vital Signs – Pulse</td>
</tr>
<tr>
<td>Vital Signs – Respiration</td>
</tr>
<tr>
<td>Sterile and Medical Aseptic Technique</td>
</tr>
<tr>
<td>Venipuncture</td>
</tr>
<tr>
<td>Transfer of Patient</td>
</tr>
<tr>
<td>Care of Patient Medical Equipment (e.g., oxygen tank, IV tubing)</td>
</tr>
</tbody>
</table>

* Trauma is considered a serious injury or shock to the body and requires modifications in positioning and monitoring of the patient’s condition.

### 4.5. Simulations

Due to the experience gained in performing examinations on actual patients, it is highly recommended that all mandatory and elective Imaging Procedures be performed on actual patients. However, due to the infrequency of certain
procedures being ordered, it may be difficult for all students to perform these procedures on actual patients. Therefore, simulations may be necessary. As per the ARRT, Simulations must meet the following criteria:

- The student must simulate the procedure on another person with the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient. Examples of acceptable simulation include positioning another person for a projection without actually activating the x-ray beam.
- The faculty must be confident that the skills required to competently perform the simulated procedure will transfer to the clinical setting, and, if applicable, the student must evaluate related images.

The following policies apply to the performance of elective competency examinations and simulations:

4.5.1. Students may not competency test on any elective procedure or perform any simulations during the first clinical trimester.

4.5.2. During clinical education trimesters II – V, simulations may only be performed in the second half of the trimester. Specific dates will be indicated on the respective syllabus. Students are only allowed to complete 1 simulation per clinical trimester, with the exception of the first clinical trimester, in which no simulations are allowed.

4.5.3. Simulations may **not** be performed on any of the following procedures:

- Studies that involve the use of a contrast agent to make visible the internal organs or vasculature of the body
- Portable examinations
- Surgery examinations
- Pediatric examinations

4.5.4. Any competency examination that is performed as a simulation may only be conducted with one of the designated on-site Adjunct Clinical Instructors or one of the program faculty.

Exceptions to any of these policies will only be made by the Program Director or Clinical Coordinator on a case-by-case basis.

4.6. Competency Remediation

Any student who does not successfully complete a competency exam must notify the Clinical Coordinator within 48 hours of the failed competency. He/She
will then meet with the Clinical Coordinator and the appropriate remediation actions will be taken.

5. **Adjunct Clinical Instructor / Staff Technologist Evaluations**

5.1. In order to assess the students’ progress throughout the clinical education experience, the adjunct clinical instructor or supervising staff technologist at each of the students’ clinical rotation sites will submit an evaluation at periodic times each trimester.

5.2. The evaluations of the student’s progress and performance will be completed in the Trajecsys® student record management system.

5.3. The adjunct clinical instructors may hold periodic lab/image critique sessions. The student’s performance and participation is encouraged and may be reflected on the evaluation.

5.4. Any student receiving a failing or substandard evaluation will be brought in for counseling by the Clinical Coordinator.

Refer to **Section 5, Policy 2.1.1.** as to the weight of these evaluations on the student’s grade.

6. **Clinical Case Studies**

A clinical case study project is required during various clinical education courses. For this project, students will be placed into groups and are required to present on a specific case or exam encountered in their clinical experience. The purpose of this project is to encourage students to apply material learned in class and laboratory instruction to real-life clinical situations. Students will also glean knowledge from their peers’ presentations.

6.1. **Grading Criteria**

A grading rubric will be used in order to evaluate the quality of the presentation with regards to content organization, clarity of presentation, accuracy and use of medical terminology, and how well the students worked as a group.

6.2. **HIPAA**

According to the regulations of HIPAA, students are not permitted to be in possession of any materials that contain identifiable patient information. This includes radiologist reports and images with the patient’s name and identification number. Students are required to remove all patient identifiers before presenting and submitting their project. Refer to **Section 2** for the
complete “HIPAA” policy and to Section 3, Policy 2.2.17. for the “Patient Health Information” policy. Any student found in violation of this policy will be given a written reprimand. Refer to Section 3, Policy 3.1.3.

6.3. Resources

The students may use their textbooks, positioning notes, the internet, and the ADU Library in order to find the material needed for their presentation. All information acquired from sources other than the students themselves needs to be referenced and cited throughout the presentation. Refer to Section 3, Policy 1.1.
SECTION 6: GRADUATION REQUIREMENTS

In order to graduate from the Radiography Program, you must fulfill the requirements of Adventist University of Health Sciences as listed in the *Academic Catalog* as well as the following minimum program requirements:

- Complete all radiography cognate courses and Radiography Program requirements with a minimum grade of “C”.

- Satisfactorily fulfill all mandatory and elective competency requirements as required by the ARRT. Refer to *Section 5, Policy 4.1*.

- Have completed any missed clinical hours due to illness, pregnancy, etc.

- Not be on disciplinary probation.

- Possess the following skills:
  - Apply knowledge of anatomy, physiology, positioning, and radiography techniques to accurately demonstrate anatomical structures on a radiograph or other imaging receptor.
  - Understand basic x-ray production and interactions.
  - Operate medical imaging equipment and accessory devices.
  - Determine exposure factors to achieve optimum radiographic techniques with minimum radiation exposure to the patient.
  - Demonstrate knowledge and skills relating to medical image processing.
  - Evaluate radiographic images for appropriate positioning and image quality.
  - Apply the principles of radiation protection to the patient, self, and others.
  - Provide patient care and comfort.
  - Recognize emergency patient conditions and initiate lifesaving first aid and basic life-support procedures.
• Detect equipment malfunctions, report same to the proper authority and know the safe limits of equipment operation.

• Exercise independent judgment and discretion in the technical performance of medical imaging procedures.

• Participate in radiologic quality assurance programs.

• Provide patient/public education related to radiologic procedures and radiation protection/safety.

• Support the profession’s code of ethics and comply with the profession’s scope of practice. Refer to Section 7, Appendix A.

• Competently perform a full range of radiologic procedures on children and adults in the following categories:
  - Head/Neck
  - Abdominal/Gastrointestinal/Genitourinary
  - Musculoskeletal
  - Thorax
  - Trauma
  - Bedside (Mobile)
  - Surgical
SECTION 7: APPENDICES

Appendix A

The American Registry of Radiologic Technologists
Code of Ethics

Preamble

The Code of Ethics shall serve as a guide by which Radiologic Technologists and Candidates may evaluate their professional conduct as it relates to patients, health care consumers, employers, colleagues, and other members of the health care team. The Code of Ethics is intended to assist Radiologic Technologists and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

Principle 1

The Radiologic Technologist conducts himself/herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.

Principle 2

The Radiologic Technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

Principle 3

The Radiologic Technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socioeconomic status.

Principle 4

The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

Principle 5

The Radiologic Technologist assesses situations; exercises care, discretion and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
Principle 6

The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

Principle 7

The Radiologic Technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the health care team.

Principle 8

The Radiologic Technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

Principle 9

The Radiologic Technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

Principle 10

The Radiologic Technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

Refer to the ARRT website (www.arrt.org) for more information.
Appendix B

Looking Right: A Guide to Professional Appearance at Florida Hospital

The Philosophy behind Looking Right
Florida Hospital’s employees are an important part of the hospital’s public image. Courteous, friendly and efficient staff members contribute greatly to the impression made in daily contact with patients, visitors, and fellow employees. Proper dress, personal grooming and overall appearance adds much to the positive image that the public has of Florida Hospital. This important combination of dress and grooming also promotes poise, self-confidence, and a professional atmosphere throughout the hospital, thus enhancing the quality of care and caring provided.

Florida Hospital recognizes that fashions change and individual tastes vary. Yet certain styles of clothing remain particularly appropriate for certain work situations. Florida Hospital’s dress code program shows attention to these fashion principles for professional and business wear, while reflecting the high quality of health care that Florida Hospital provides in Central Florida. A dress code program identifies each employee as a member of the Florida Hospital team for security reasons and distinguishes him or her to fellow employees, as well as to the hospital’s patients and visitors. As patients and visitors move throughout the hospital, they should be able to observe a consistent professional appearance among employees. Every detail is important. Even careless personal hygiene will offset many other fine qualities.

For these reasons, Florida Hospital requires all employees, from the first day of employment, to follow the dress code program and the dress code guidelines for the department they work in. An employee who fails to follow this standard should expect to be requested by his or her supervisor to correct any inconsistencies. It is the responsibility of department directors to counsel with employees whose appearance is not satisfactory.

A dress code committee has been established to work with administration and department directors in developing consistent dress and grooming guidelines for all classification of personnel throughout Florida Hospital. The committee is responsible to inform hospital leadership and all employees of changes in dress code guidelines through announcements published in the hospital newsletter. Employees’ suggestions about dress code are welcomed and should be routed through their supervisor.

Thank you for taking the time to familiarize yourself with the dress code program described in this brochure and special guidelines about the dress requirements for your specific area of work. By following them, you make a personal contribution in maintaining Florida Hospital’s image as a caring institution: one that is – and looks – highly professional.

CLOTHING
Clothing should be clean and neat at all times. It should fit well (ie. sized appropriate for body type) and not be frayed or unduly worn.

IDENTIFICATION BADGES
Identification Badges should be worn on the upper portion of the chest on the outer garment (except in areas where a sterile environment is required). The I.D. Badge completes the employee’s professional image as part of the Florida Hospital team. Wear it with pride!

SCRUB CLOTHES
Scrub clothes are to be worn only in approved areas. Hospital-issued scrub clothes are not to be worn outside the hospital premises.

PERFUME/COLOGNE/TOBACCO/OFFENSIVE ODORS
Perfume, cologne, or scented powders, if worn, should be mild and light. The excessive smell of perfume, cologne, scented powders, tobacco, alcohol, bad breath, or other offensive body odors is unacceptable in the work environment. Every detail of personal hygiene is extremely important. Each employee is expected to present a positive image of themselves, considering the needs of patients and/or co-workers.

SKIN CARE
Personal hygiene is extremely important for professional appearance and personal safety. Any skin abrasions and/or wounds need to be covered to prevent contamination from patient to employee or vice versa. Visible tattoos or piercings (other than approved under earrings) are to be removed or covered to the extent possible to present a professional image.

WOMEN

HAIR
Hair should be neatly combed and arranged in an attractive, easy-to-maintain style. Any extreme hair styling is not permitted. Extremes in dyeing, bleaching, or tinting are not permitted.

Length and confinement
Those who prefer long hair should take special care that it is neat and well groomed. Hair should be worn in such a manner that it is confined away from the face so that it will not fall forward or over the face while performing normal job duty. It is required by law that food service employees confine their hair.

Accessories
Acceptable hair accessories include barrettes or combs which match the hair color, or in gold, silver, tortoise shell, without ornamentation; ribbons or bows which coordinate with the uniform colors being worn and which do not extend below the top of the collar and are of an appropriate size.
Additional restrictions may be made in certain areas due to health and safety precautions.

**COSMETICS**

**Face make-up**
Natural make-up is permitted. Foundation bases, powder and blushes should correspond with each individual’s skin coloring.

**Eye make-up**
If mascara is worn, it should be applied lightly in shades of black or brown. Eye shadow, if worn, should be in natural shades so as not to be conspicuous.

**Lipstick**
Lipstick, if worn, should be applied lightly and complement the individual’s appearance. True lip tones or natural shades of lipstick are acceptable.

**FINGERNAILS**
Fingernails should be kept clean, short, and healthy. If polish is used, it should be clear or flesh tones and unchipped.

Additional restrictions may be made due to health and safety precautions. For instance, health care workers that have patient contact (touching the patient) will not wear artificial nails or nail extenders.

**JEWELRY**
In the professional environment jewelry should be a simple accent and minimized to avoid distraction or the presentation of a cluttered appearance. Permitted jewelry is limited to the wearing of one ring per hand (or wedding set), a wristwatch or watch pin, a hospital service pin, a professional school pin, a civic organization pin and one chain necklace with or without pendant.

**Earrings**
Earrings are limited to one earring per ear of pearl, diamond, colored stone, gold or silver only (earrings must match, are to be worn in the lower lobe of the ear only and are not to exceed beyond the margins of the ear lobe).

**Necklaces**
Necklaces will be of a plain fine linked chain no more than $\frac{1}{8}$” in thickness (silver or gold in color only) with or without a small pendant.

**Pins**
Lapel pins, scarf rings and functional pins (ie. pen or glasses holders) which coordinate with the clothing and do not exceed 2” may be worn. These pins should be conservative in design without logos (however FH or FH approved logos may be permitted).
The wearing of any other type of or additional numbers of earrings, chains, necklaces, bracelets, ornamental pins and rings is not permitted.

Additional restrictions may be made in certain areas due to health and safety precautions.

SHOES
Shoes (no open toe shoes or sandals allowed) should be polished and kept in good repair. Hosiery is required to be worn at all times in shades as defined in the appropriate dress code guidelines.

MEN

HAIR
A neat, natural haircut and a clean shave (see below) are essential. The hair is to be neatly groomed so that it does not extend beyond the top half of the ear. Hair must not hang out over the shirt collar. Any extreme hair styling is not permitted. Extremes in dyeing, bleaching, or tinting the hair are not permitted. It is required by law that food service employees confine their hair.

   Sideburns, mustaches, and beards
   Sideburns, mustaches, and beards should be neatly trimmed, extending no more than ½” from the skin.

Additional restrictions may be made due to health and safety precautions. For instance, for persons providing patient care, facial hair that interferes with the seal of the PFR 95 respirator is prohibited.

FINGERNAILS
Fingernails should be kept clean, short and healthy. Clean presentable fingernails are a must.

JEWELRY
Jewelry is limited to the wearing of one ring per hand, a wristwatch or watch fob, a hospital service pin, a professional school pin and/or a civic organization. Lapel pins, tie pins and functional pins (ie. pen or glasses holders) which coordinate with the clothing and do not exceed 2” may be worn. These pins should be conservative in design without logos (however FH or FH approved logos may be permitted). The wearing of any other type of or additional numbers of chains, necklaces, bracelets, ornamental pins, rings and earrings is not permitted. Additional restrictions may be made in certain areas due to health and safety precautions.

SHOES
Shoes (no open toe shoes or sandals allowed) should be polished and kept in good repair. Socks that coordinate with the clothing are required.
Appendix C

Competency Testing Grade Evaluation

General Evaluation

Requisition
The student was able to:
1. state the patient’s name, sex, and age.
2. identify the mode of transportation.
3. identify the procedures(s) to be performed.
4. note any pathological conditions listed.

Patient Care and Safety
The student:
1. checked the patient’s wrist band and/or chart with the request.
2. transferred patients safely to and from stretchers and wheelchairs, correctly utilizing accessory equipment.
3. introduced him/herself to patient and briefly explained the procedure.
4. checked if patient was properly prepared for the examination.
5. checked with patient, chart, and x-ray request for any contraindications.
6. provided safe storage for patient’s belongings, e.g. eyeglasses, dentures, jewelry, etc.
7. provided safety to the patient from mechanical and electric hazards.
8. utilized rules of body mechanics during physical assistance.
9. gave proper moving and breathing instructions to the patient.
10. checked on patient’s condition at regular intervals.
11. asked female patients, between the ages of 12-50 years old, if they might possibly be pregnant.
12. state types of reactions to contrast media.
13. state emergency measures for reactions to contrast media.

Facilities Readiness
The student:
1. exhibited clean and orderly storage cabinets and shelves.
2. had the radiographic room stocked with all necessary supplies and accessories.
3. had the radiographic table and other equipment clean and ready.
4. exhibited the correct supplies and accessories.
5. turned the machine “on” and opened the technique book to the proper chart to be utilized.
Performance Evaluation

Efficient Use of Time and Energy
The student:
1. performed tasks in an efficient order.
2. used a minimum of time and physical movement to accomplish an objective.
3. restocked and cleaned the room between procedures.
4. measured and set technique before positioning.

Correct Radiographic Positioning, Centering, Alignment, and Rotation (Also Image Evaluation)
The student:
1. correctly positioned patient upright, on stool, or table.
2. placed the proper size cassette in the “Bucky tray” or on table top.
3. placed correct markers on the cassette and any lead blockers if needed.
4. centered collimator to midline of table, if done “Bucky” (put tube in detent).
5. set the correct tube angle.
6. set the correct source-to-image distance (SID).
7. opened collimator to desired field size.
8. positioned the patient so that the part was in proper aspect to the Image Receptor (IR).
9. aligned center of part to be demonstrated to the center of the IR and centered CR to center of IR or specific area of part.
10. positioned “Bucky” or cassette holder so that the CR was centered to the IR.
11. collimated down on part to be x-rayed, being careful not to cut off any of the anatomy of interest.

The radiograph demonstrates:
1. correct transverse and longitudinal centering of the image.
2. correct tube-part-cassette alignment.
3. correct CR angulation and placement.
4. the body part in proper position and rotation.

Correct Equipment Selection and Use
The student:
1. selected the proper cassette, cassette holder, grid, etc.
2. used immobilization devices as needed.
3. filled syringes with correct contrast media or other solutions using aseptic technique.
4. used equipment in a manner safe to both patient and operator.
5. programmed control panel correctly for manual and phototiming technique.
6. correctly utilized all control panel and tube controls.
7. effectively utilized table and upright “Bucky” controls.
Correct Selection of Technical Factors (Correct Density, Contrast, and Definition)

The student:
1. properly measured the patient or determined if small, medium, or large.
2. properly utilized technique charts in determining correct exposure factors.
3. adjusted exposure factors for body habitus, pathology, motion, etc.
4. adapted exposure factors for changes in SID, grid ratio, screens, collimation, contrast, etc.

The radiograph demonstrates:
1. correct adjustment of mAs, kV, filtration etc.
2. adjustment of factors for pathology or motion.
3. correct use of cassette, cassette holder, grid, etc.
4. no motion, grid lines, or artifacts.
5. correct SID and OID.

General Radiation Protection (Evidence of Radiation Protection)

The student:
1. coned or collimated to part.
2. used gonadal or ovarian shields where applicable.
3. wore a film badge.
4. wore a lead apron and gloves when appropriate.
5. kept door to radiographic room closed and asked any persons in the vicinity of the patient to move away before making an exposure.

The radiograph demonstrates:
1. visible cone or collimation limits.
2. gonad shields in place (if utilized).

Correct Patient Markers and Identification

The radiograph demonstrates:
1. right or left markers correctly placed.
2. time and/or position markers correctly placed.
3. patient information, name, number, etc. clearly visible.

Student Evaluation of Image

The student was able to:
1. identify all anatomy of interest which must be included on the radiograph.
2. state whether the radiograph is acceptable as defined by the image evaluation criteria listed above.
3. state what corrective measures are to be taken to improve any radiographic image deficiencies.
Appendix D

ADU Radiography Program
Laboratory Proficiency Flowchart
Appendix E

Critical Error Policy Flowchart

Refer to the complete Critical Error Policy for further explanation.

*Student may re-apply to the Radiography Program, if eligible