

RADIOLOGIC & IMAGING SCIENCES PROGRAM

**STUDENT HANDBOOK
2024**

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PREFACE (rev. 3/2018)

Welcome to the University of Southern Indiana Radiologic & Imaging Sciences program. The program faculty at USI and personnel of our clinical affiliates congratulate you on your acceptance into the program and wish you the best of success.

This handbook has been written to provide you with important information about the program and inform you of the many policies and procedures that affect students. This handbook is divided into four sections: an appendix that contains additional reference information follows General Information, Program Policies, Academic Policies, and Clinical Policies. Although great care has been taken to provide virtually all of the information students need to know, this handbook is not the only source of information. As a student of the University of Southern Indiana, you are subject to all policies, procedures, rules, and regulations established by the University and College of Nursing and Health Professions. All students should, therefore, should review the current University Bulletin and become familiar with its content. In addition, the University's Code of Conduct, "Student Rights and Responsibilities" and registration schedules for each semester contain important information. Information concerning various university services can be obtained by contacting appropriate offices on campus. The university telephone directory contains a section describing Campus Emergency Procedures. A list of all personnel associated with the program is provided in this handbook. The list provides names, office locations, and telephone numbers for your reference. Finally, all students should read the College of Nursing and Health Professions' Handbook found on the College's web-page.

The Radiologic & Imaging Sciences program is organized and operated in accordance with the "Standards for an Accredited Educational Program in Radiology" effective January 1, 2021, established by the Joint Review Committee on Education in Radiologic Technology. The standards can be found on the web-site of the accreditor: www.jrcert.org.

Please read through this Student Handbook completely as all students are required to know the program's policies and procedures and to abide by them. This handbook should not be construed as a contract or offer to contract between program and student. All contents are subject to periodic revision.

All students and faculty are expected to abide by the policies found in the College of Nursing and Health Professions (CNHP) Handbook. The handbook is located on the CNHP website listed under "About the College".

If you have questions or comments regarding this handbook or any policy or procedures, do not hesitate to contact the program director, faculty, or clinical preceptor. We look forward to helping you complete the program and achieve your goal of becoming a competent registered radiographer.

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GENERAL INFORMATION

PROGRAM DESCRIPTION

The Radiologic & Imaging Sciences program prepares individuals to function effectively in the modern health care system as entry-level radiographers. It is a full-time educational program of 28 months duration containing a prescribed sequence of concurrent academic and clinical courses.

Core curriculum and professional course requirements are included in the program. Core curriculum provides an essential base of knowledge and understanding that supports the professional aspects of the program. Professional courses provide the technical knowledge and skills necessary for competent and attentive patient care.

Upon successful completion of the program, students are awarded a Bachelor of Science degree. Graduates in good ethical standing as defined by the American Registry of Radiologic Technologists (ARRT) are eligible to apply to take to the national certifying examination of the ARRT.

PROGRAM PHILOSOPHY

Education is a process through which one may acquire knowledge, skills, values, experiences, and an appreciation for learning. It serves not just to prepare individuals for careers and greater financial security, but to enrich each person and foster good citizenship. The Radiologic & Imaging Sciences program seeks to provide its students with all of the benefits of education by integrating core curriculum with professional course requirements. The program strives to produce graduates who have the capability to enter a career in radiologic technology with confidence and competence and to continue their education in pursuit of higher levels of development.

The faculty of the Radiologic & Imaging Sciences program and personnel of affiliated clinical education centers are committed to providing each student with a high quality and comprehensive learning experience. The curriculum has been carefully designed to meet this commitment. Ongoing program review and improvement processes ensure that educational standards do not decline. The faculty is responsible for facilitating student learning. Educational objectives, learning materials, classroom presentations and examinations are developed with this in mind. Students, however, must be active participants in the program's endeavor for excellence. Consequently, standards of achievement exist which require grades no lower than C in any Radiologic & Imaging Sciences course. If assistance is needed, advice, counseling, and other support services are available to all students.

The Radiologic & Imaging Sciences program recognizes the primacy of individual rights. This includes protection from discrimination on the basis of sex, age, race, color, creed, national origin, or handicap(s), protection of personal information, right to due process, and right to appeal any action regarded as unfavorable.

PROGRAM MISSION (rev. 03/2019)

The University of Southern Indiana Radiologic & Imaging Sciences Program seeks to graduate students with advanced knowledge, innovative technologies and skills development essential for medical imaging professionals to respond as an interdisciplinary team member for the promotion of the health and welfare of diverse patient populations.

PROGRAM GOALS & OUTCOMES (rev. 03/2019)

The University of Southern Indiana Radiologic & Imaging Sciences Program goals:

Goal One: Student will promote the health and welfare of patients through critical thinking.

Outcome 1: Students will apply critical thinking to assess and adapt to varying clinical presentation of patients.

Outcome 2: Student will evaluate radiographic images for pathology pertinent to practice.

Goal Two: Student will demonstrate clinical competency as an interdisciplinary team member.

Outcome 1: Student will produce quality radiographic images using advanced technology for proper positioning while providing appropriate patient care.

Outcome 2: Student will apply knowledge of advanced patient assessment.

Goal Three: Student will demonstrate effective interpersonal skills.

Outcome 1: Students will demonstrate effective interdisciplinary communication skills to deliver care to a diverse patient population.

Outcome 2: Student will apply effective interpersonal skills in a healthcare environment.

ACCREDITATION (rev. 02/2021)

The North Central Association of Colleges and Secondary Schools accredits the University of Southern Indiana. The University is a member of the American Association of State Colleges and Universities and is on the approved list of the Association of American Universities.

The Joint Review Committee on Education in Radiologic Technology (JRCERT) accredits the Radiologic & Imaging Sciences program. Current accreditation status is kept by the program director and can be found on the program's webpage. Accreditation standards for accredited radiology programs can be found on the accreditor's website: www.jrcert.org.

REPORTING ALLEGATIONS OF NON-COMPLIANCE OF JRCERT STANDARDS (rev. 02/2021)

POLICY: The Radiologic & Imaging Sciences program at the University of Southern Indiana is fully accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). As an accredited program, the Radiologic & Imaging Sciences Program is required to meet standards which can be found on the JRCERT's web-site at <http://www.jrcert.org>. A

student, graduate, or person associated with the Program can file a written complaint when he or she believes the Program is in non-compliance with JRCERT Standards.

PROCEDURES: Complaints or concerns involving accreditation issues or non-compliance with the JRCERT standards should be addressed in writing to the program director. The written complaint should identify the specific standard(s) believed to be in non-compliance as well as any supporting evidence. Upon receipt of any allegations of non-compliance, the program director and the faculty will investigate the complaint. Investigation of the complaint will include a meeting with the program director and the originator(s) of the complaint. This investigation will take no longer than ten (10) days. If an incident of non-compliance is identified, the program director and faculty will take action to correct the incident immediately upon recognition. Follow-up and resolution actions taken will be communicated to the originator(s) of the complaint. If the originator of the complaint does not feel the issue has been resolved, then the originator should forward the complaint to the Dean of the College of Nursing and Health Professions for resolution. If the originator(s) of the complaint is unable to resolve the complaint with the program or university officials or believes that the concern(s) have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT (Chief Executive Officer, JRCERT 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182;(312)-704-5300).

The Radiologic & Imaging Sciences Program will maintain documentation of all allegations and their resolutions. A report of the allegation and the resolution is reported to the JRCERT annually.

CURRICULUM (rev. 3/2021)

The Radiologic & Imaging Sciences curriculum requires three semesters of pre-radiology courses and five semesters and two summer semesters to complete. The program begins in the spring semester (January) and runs continuously for 28 months ending at the end of the spring semester (May). A total of 120 credit hours are required for program completion.

All core curriculum and most RADT academic courses are taught on the USI campus. Some RADT course are taught utilizing distance education or a hybrid approach (part of course is in a traditional course setting and part of course is taught through distance education). The RADT clinical courses are conducted at affiliated clinical education centers. General education credits are open to all students and may be completed prior to formal admission to the program or transferred from other accredited colleges or universities. Enrollment in RADT courses required for the BS in Radiologic & Imaging Sciences degree is limited to students admitted to the program.

The program's Master Curriculum Plan shows the sequencing of required courses and specifies the total number of classroom, laboratory, and clinical contact hours required. The number of hours utilized per week for each course can be determined by dividing the total hours by the number of weeks in the semester. Combined class, lab, and clinical time commitments can be 30-36 hours per week for students following the published curriculum. In accordance with accreditation guidelines, total required time never exceeds 40 hours per week for any student.

Most academic and clinical class hours are scheduled during the day or early evening, Monday through Friday. Core curriculum courses sometimes require late afternoon or evening attendance. To insure a comprehensive clinical learning experience during six clinical

practicums, students are exposed to all aspects of radiologic technology. This includes rotations through all areas of the radiology department, surgery, mobile radiography, and advanced imaging modalities. In the last semester of clinical education (RADT 455), all students have the choice to select alternative clinical rotations not to exceed three weeks of clinical education. Students can choose an elective rotation during this semester in mammography, cardiac catheterization, nuclear medicine, ultrasound, oncology, orthopedics, evening shift, night shift, or additional rotations in required program rotations. Elective rotations not a part of the clinical affiliate campus address will be limited to a maximum of one day of observation only. Students who elect to perform a rotation during second or third shift will not spend more than 25% of total program hours on this rotation. Students will also be given consideration and adequate free time between the end of a third shift rotation and the start of the next scheduled clinical or academic course. It is noted that clinical hours are not remunerated. In order to gain familiarity with agencies in which radiographers are employed other than the assigned hospital and broaden clinical knowledge, students will be assigned to other affiliate hospitals starting spring semester of their second year of the BS in Radiologic & Imaging Sciences program. The program may assign students to clinical locations that are up to 70 miles away (see student transportation policy).

Clinical education is designed to integrate didactic education into hands-on learning and training where students practice skills that will be needed as a professional upon graduation. Clinical education is an academic credit course and students are not paid for their participation in these courses. Students are not entitled to a paid position or employment at any clinical education affiliate after completion of the program.

INSTRUCTIONAL METHODS

A written course syllabus exists for each Radiologic & Imaging Sciences course. Each syllabus states the course description, required textbooks, general course objectives, content outline, methods of presentation, and methods of evaluation. Course syllabi are available to students at the beginning of each course. Most classroom presentations are conducted in the standard lecture/discussion method with supplemental materials available to students on Blackboard. Some program courses may be identified as a distance education course (either all of course is delivered online or a portion of the course is delivered online). The current University Schedule of Course will identify which courses are delivered in a distance education format. A variety of audiovisual aids are used when appropriate to augment instruction. The instructor determines reading and other required assignments. The content of the academic courses is broken into units of study with written objectives given to students for each unit. Written objective tests follow the completion of each unit. Comprehensive final examinations are also given. Radiographic positioning courses (RADT 308, 313, 316 and 318) have lab accompanying each lecture. In the lab, students develop initial positioning skills by observing instructor demonstrations and practicing procedures studied in the classroom. Competency evaluations are conducted in the lab to document satisfactory achievement.

Radiographic exposure and radiographic procedure courses have assigned lab activities. Students complete the activities in the energized lab (HP 2009) and complete a lab report for each. Some courses such as DMS 301 (Patient Care for Imaging Sciences Professionals) utilize the expertise of guest speakers qualified in the subject area. Field trips are sometimes arranged by the course instructor to meet with the speaker(s).

DISTANCE EDUCATION (2/2021)

USI Distance Education enables students to enroll in courses that fit their circumstances or lifestyle. USI offers numerous individual courses and entire degrees through distance education. Students may choose to enroll in core curriculum courses that are delivered through distance education. USI's Radiologic & Imaging Sciences Program has few courses that are delivered entirely through distance education. Some of those distance education courses will also have on-campus sections or the delivery of the course is alternated each semester between traditional face-to-face classroom and distance education. The program also engages in hybrid or blended class formats where part of the student's course is delivered in class and part is completed online. In addition, some courses can be designated as Internet-based, which means some face-to-face class meetings will be required. Students are made aware of the course offerings and the delivery format in USI's Schedule of Courses.

Tuition rates for USI distance education courses are the same as tuition for on-campus classes. Distance education courses have an additional fee per course assessed. Other fees may also apply. Non-Indiana residents taking **only** distance education courses are assessed the resident tuition plus a distance fee. USI tuition and fee information is available online at <http://www.usi.edu/admission/tuition-fees>.

In order to maintain the integrity of courses delivered through distance education, the university assigns a secure username and pass code specific to each individual student. Students are encouraged to create their own unique pass code and change it frequently. Students are instructed not to share their pass codes with anyone. Both the secure username and pass code are needed to access MYUSI, which is a portal for accessing many USI services including Blackboard. Blackboard is the course management system that students use to access all of their registered courses, including distance education courses.

Faculty have numerous options to maintain the integrity of distance education courses. Faculty can choose to proctor examinations on campus or have USI's distance education office proctor examinations or help in establishing a proctor for students not located near campus. Faculty can also choose to issue pass codes for purposes of taking online tests or utilize Respondus Lock Down Browser or other online proctoring services. Respondus Lock Down software will prevent students from accessing any content found in the course or on their computer while taking an examination. The software will also prevent printing of examinations.

Distance education students are held to the same standards of academic honesty as students in face-to-face classrooms. USI follows distance education guidelines established by Indiana Commission for Higher Education, North Central Association, and Western Interstate Cooperation for Higher Education.

ACADEMIC CALENDAR (11/23)

The Radiology Program is a 28-month program that observes the University Calendar for Fall and Spring semester start and end dates, holidays observed, and breaks. A copy of the University Calendar is posted on the Registrar's webpage of the University's website. Students do participate in summer courses including clinical education. Summer course start dates begin during the University's first summer session and is continuous until the end of the second week of August for clinical education courses and the end date of the second summer session for didactic courses. University summer holidays are observed.

Summer 2024

Clinical courses 5/13/24-8/9/24 (RADT 333, 435, & 486)
9-week didactic courses 5/13/24-07/19/24 (RADT 312, 313, & 415)
11-week didactic courses 5/13/24-07/26/24 (RADT 196)

Summer 2025

Clinical courses 5/19/25-8/8/25 (RADT 333, 435, & 486)
9-week didactic courses 5/19/25-07/18/25 (RADT 312, 313, & 415)
11-week didactic courses 5/19/25-08/01/25 (RADT 196)

Summer 2026

Clinical courses times not determined yet (RADT 333, 435, & 486)
9-week didactic courses times not determined yet (RADT 312, 313, & 415)
11-week didactic courses times not determined yet (RADT 196)

TEXTBOOKS

A list of all required and recommended textbooks for radiology courses can be found in the Appendices. Many of these books are used for more than one course. Because of this and the need for study references in preparation for the ARRT certification examination following graduation, students are advised to keep all books for future reference.

ACADEMIC ADVISING (rev. 01/2016)

The program director and faculty serve as academic advisors to all students who have selected radiologic & imaging sciences as their major. This includes individuals admitted into the program. While those who are completing core curriculum coursework prior to admission have access to program faculty, this group of students are advised by a central advising center located in the College of Nursing and Health Professions. The main purpose of an academic advisor is to assist students in selecting appropriate courses. The advisor also monitors student progress and assists with academic problems. Students can meet with an advisor during regular office hours or by appointment.

ACADEMIC CREDITS (rev. 03/2018)

The number of academic credits required each semester for the program is specified by the Radiologic & Imaging Sciences curriculum. Students who have completed core curriculum courses prior to admission into the program have fewer required credits. Non-required courses may be added if desired or necessary to meet grant/loan/scholarship requirements.

Academic credit at the University of Southern Indiana is offered by the semester credit hour. At USI, a semester credit hour is based on 750 minutes of instruction per credit hour awarded. This standard is consistent Department of Education credit hour definition, as stated in regulation 34 CFR §600.2. The radiology program calculates didactic course hours in the same manner.

Credit hours awarded from courses taught via distance education or other in some other non-traditional setting follow the same rules when determining the number of credit hours awarded for a particular class. This practice also follows the credit hour definition found in Department of Education regulation 34 CFR §600.2.

Students in health profession majors, such as nursing, dental hygiene, diagnostic medical sonography, and occupational therapy are also able to earn academic credit for work in lab or clinical sites. The number of hours of work required for one academic credit hour varies by discipline and respective accrediting agency requirements. The radiology program utilizes an 8:1 ratio of clinical hours to credit hours for clinical practice. Clinical courses vary from 13-15 weeks a semester.

Certain courses at USI include a laboratory component or requirement, such as science courses including chemistry, engineering, geology, physics, and biology. Students may earn additional credit hours for the lab component. Minimum credit hour requirements are determined for weeks of lab/activity on a 2:1 laboratory contact minutes to lecture contact minutes ratio. Each department may determine contact time over the minimum requirement as need. Courses that include a lab component within the radiology program have 2 credit hours utilized for didactic course work and 1 credit hour for lab component. The laboratory component utilizes 50 minutes for each credit hour. As an example, a 3-credit hour radiographic positioning or exposure course with a lab will have 2 credit hours of didactic coursework (1500 minutes or 25 hours per 15 week semester) and 1 credit hour of laboratory work (900 minutes or 15 hours per 15 week semester). Please see the Curriculum plan in the appendix for the program's curriculum and associated credit and clock hours.

ACADEMIC FEES & PROGRAM EXPENSES (rev. 05/2014)

The number of academic credits required each semester for the program is specified by the radiologic & imaging sciences curriculum. The cost of tuition is determined by multiplying the number of credit hours by the current tuition rate. Tuition is a combined contingent, student service and instructional facilities fee. The combined contingent and academic facilities fees are used to help meet the cost of instruction, construction and maintenance of buildings, and library and laboratory resources. The student services fee provides student programs and other selected personal and cultural development activities. Other fees such as laboratory, late registration, change of schedule, transportation/parking, distance education, university services, student activity fee, clinical equipment fee (medical dosimeter), and medical malpractice are special fees paid in addition to tuition fees. For a complete listing and description of fees and expenses, the student is directed to the current University Bulletin or

can be found on the Office of the Admission's web-page: <https://www.usi.edu/bursar/tuition-fees>. It is noted that published charges are subject to change by action of the Board of Trustees. Students may inquire as to current rates at registration.

Additional costs incurred by students during the program are for textbooks, uniforms, personal identification nameplates, and purchase of online clinical education management system (Trajecsys). Students will also be required to complete pre-program clinical obligations (drug screening, national criminal background checks, and various immunizations), which is done through an online management company (CastleBranch) for a fee. Textbooks required for each course are available in the University Bookstore at the beginning of each semester. Uniforms may be purchased anywhere provided they meet the requirements established by the Radiologic & Imaging Sciences Program (see Uniforms). Nameplates are available for a minimal fee from the University Bookstore/Eagles Access. Fees associated with the Program and not found on the Admission's web-page are (subject to change):

- Clinical management system (Trajecsys): \$150 onetime fee in Spring semester
- Castle Branch: \$130 onetime fee prior to starting professional courses
- Uniforms (average of 3 uniforms needed; 1 laboratory coat; all white/black shoes; students may need replacement uniforms over the course of 28 months; average cost \$40-\$50 per uniform (top and bottom only): \$250-\$500 over course of program
- Textbooks: average \$1200-\$1500 over course of program
- Identification name plate: \$5 onetime fee during first Spring semester in program; unless replacement is needed
- Medical dosimetry badge fee (\$45 per clinical course): \$270 for all clinical courses
- Professional Liability insurance (once year at \$20 each): \$40
- Lead identification markers (varies if students need replacement markers during 6 clinical courses; two sets are needed to begin program (\$20-\$30 a set): \$40-60
- CPR (students may need renewal course before finishing program): varies \$90-\$110 per course
- Immunizations: varies per student and medical insurance
- Reliable transportation and fuel for travel to clinical affiliates: varies
- Lab fee- Nursing and Health Professions classroom (\$50 per course utilizing Radiology classroom/lab; 16-19 classes)- \$800-\$950 over course of program
- Some program courses are delivered through a distance education format. Those fees can be found at <https://www.usi.edu/bursar/tuition-fees> in the "other fees" section.

TRANSFER OF CREDIT (3/2018)

The Office of the Registrar is responsible for USI's transfer evaluation service. Official transcripts from other institutions will be reviewed to determine what academic credits will transfer to USI, and their equivalent USI courses.

Course credits earned from accredited colleges and universities will be accepted as transfer credit subject to the following guidelines:

- Only courses with grades of "C" or higher will transfer

- Orientation courses will not be accepted as transfer credit, nor will coursework from academic departments which have no counterpart in the USI curriculum.
- Noncredit courses earned at previous colleges or universities will not transfer.
- Transcripts from international institutions must be an official copy (not a photocopy). If records are in a language other than English, the student may also be required to provide an English translation and course-by-course evaluation report from an acceptable evaluation agency. This report will then be reviewed to determine acceptable transfer credit.
- Even though credit hours are transferable, the transferred hours may not necessarily apply toward a particular degree program. The applicability of credits toward a specific degree can be determined in counsel with the appropriate departmental advisor. The time expired since the completion of the course may also prohibit it from applying to the requirements of a particular degree program and is subject to review by the department chair of the student's major.
- The University does have various established articulation agreements with community or junior colleges in Illinois and Kentucky and one in Indiana:
 - Illinois: Black Hawk College, Carl Sandburg College, City Colleges of Chicago (Harold Washington College, Harry S Truman College, Kennedy-King College, Malcolm X College, Olive Harvey College, Richard J. Daley College, Wilbur Wright College), College of DuPage, College of Lake County, Danville Area Community College, Elgin Community College, Fox College, Frontier Community College, Heartland Community College, Highland Community College, Illinois Central College, Illinois Valley Community, College John A. Logan College, John Wood Community College, Joliet Junior College, Kankakee Community College, Kaskaskia College, Kishwaukee College, Lake Land College, Le Cordon Bleu College of Culinary Arts in Chicago, Lewis and Clark Community College, Lincoln College, Lincoln Land Community College, Lincoln Trail College, McCormac College, McHenry County College, Moraine Valley Community College, Morton College, Northwestern College, Oakton Community College, Olney Central College, Parkland College, Prairie State College, Rasmussen College – Aurora, Rasmussen College – Rockford, Rend Lake College, Richland Community College, Rock Valley College, Sauk Valley Community College, Shawnee Community College, South Suburban College of Cook County, Southeastern Illinois College, Southwestern Illinois College, Spoon River College, Springfield College in Illinois, Triton College, Wabash Valley College, Waubensee Community College
 - Kentucky Colleges: Ashland Community and Technical College, Big Sandy Community and Technical College, Bluegrass Community and Technical College, Bowling Green Technical College, Elizabethtown Community and Technical College, Gateway Community and Technical College, Hazard Community and Technical College, Henderson Community College, Hopkinsville Community College, Jefferson Community and Technical College, Madisonville Community College, Maysville Community and Technical College, Owensboro Community and Technical College, Southeast Kentucky Comm. and Technical College, Somerset Community College, West Kentucky Community and Technical College
 - Indiana Colleges: Vincennes University

- The Radiology Program does not have established agreements for transfer of radiology program students or radiology program credits. The Radiology Program does not consider students for advanced placement.

A student's overall transfer grade point average will not be recorded on the student's transcript. Consequently, a transfer student will establish a grade point average from the University of Southern Indiana based only on coursework taken at USI. A transfer student must, however, meet the standards of progress which correspond to the sum of the total transfer hours accepted and total quality hours attempted at this University.

WITHDRAWALS AND REFUNDS

University policies and procedures concerning student withdrawal and refund of tuition and fees are published in the University Bulletin. Although students may withdraw from classes at any time through the last day of classes, grade determination and refund amount will be affected by the date of withdrawal. Withdrawal and refund information is also published in the fall, spring, and summer schedules. A calendar specifying end dates for refund periods and last day to withdraw without evaluation is identified in each schedule. In order to withdraw from any class, Radiologic & Imaging Sciences students must obtain the program director's signature. Students who withdraw from the program are subject to readmission procedures if they decide to return. (See Readmission).

GRADUATION (rev. 03/2023)

In order to become eligible for graduation, students must complete all required courses as identified in the curriculum plan (academic and clinical) with grades of "C" or better, pass all required core curriculum courses, and have a cumulative GPA not less than 2.0. Additional requirements are stated in the University Bulletin. It is the student's responsibility to carefully read and meet all requirements for graduation as published in the Bulletin. The Radiologic & Imaging Sciences program ends in May of the final spring semester. The official date of graduation is at the end of the spring semester, which is the first date eligible students are able to take the ARRT certification examination.

CERTIFICATION/LICENSURE (rev. 03/2023)

After graduation the ARRT examination will be scheduled by the student at one of the published testing centers listed in the ARRT examination booklet. The application for the ARRT exam will be published in the ARRT test information booklet. Examinee handbooks with complete information are found on the ARRT's web-site. Application forms are distributed by the program director during the final Spring semester. A nonrefundable application fee of \$225.00 (current rate - subject to change) is required. In addition to having completed all program requirements, applicants must be of good moral character. Individuals who have been convicted of a crime (misdemeanor or felony) may not be eligible. All candidates for ARRT certification and registration are required to report any misdemeanor or felony offenses, which can create a timing issue for those whose offense resulted in court conditions being imposed. Candidates graduating after January 2013 must establish their ARRT eligibility within three years of their graduation date. Students must submit an application and be deemed to have met the educational and ethics requirements. Test results are mailed approximately two to three weeks after the date of

examination. Successful examinees receive certification as a Registered Radiographer by the American Registry of Radiologic Technologists. Unsuccessful examinees are assigned to reexamination pending payment of related fees.

Many states require individuals employed in radiation occupations to be licensed. Indiana, Illinois and Kentucky all have licensure requirements. Full licensure is granted in most states to ARRT registered radiographers upon submission of an application form, required documents, and fee. Application forms are usually available through employers, although copies can be obtained by contacting the appropriate state office of radiation safety. Graduates of accredited educational programs may obtain conditional employment in Indiana pending receipt of ARRT certification or for six months after graduation under their student permit ([see student permit](#)). Other states may require temporary licenses.

Specific requirements may be attached to the temporary license in accordance with state law. Graduates who plan to move to other states should determine whether licensure laws are in effect and if any special requirements are involved. **In Indiana, unlicensed students may not legally be employed as radiographers prior to graduation or perform radiography outside of regularly scheduled clinical education rotations.**

STUDENT RADIOGRAPHY PERMIT

Under provisions of a radiology licensing rule (2006) by the Indiana State Department of Health (ISDH), students must obtain a permit in order to take radiographs or perform regulated radiologic procedures. This permit is issued by the ISDH and must be obtained prior to taking any radiographs or performing a radiologic procedure. In order to obtain a student permit, the student must be admitted or enrolled in the radiology program and submit an *Application for Provisional or Student Permit* to the ISDH. There is no fee for the student permit. Once the ISDH has approved the application, the student will receive the permit in the mail. A copy of the permit will be kept in the student's file. A student permit only allows the student to perform procedures as part of the education program in which the student is enrolled. A student may not perform radiography outside of regularly scheduled clinical education.

Student permits are valid for the entire length of the program and expire six months after graduation from the program **or** immediately upon withdrawal or termination from the program. A student or individual with an expired permit/license may not perform radiography or fluoroscopy.

PROFESSIONAL SOCIETIES (rev. 01/2016)

As a part of professional development, students are strongly encouraged to join and participate in Radiologic & Imaging Sciences professional societies. Organizations exist at the national and state levels. Nationally, the American Society of Radiologic Technologists (ASRT) provides a variety of services for technologists and publishes a bimonthly journal. The Indiana Society of Radiologic Technologists (ISRT) publishes a journal, sponsors educational activities in conjunction with statewide Annual Meetings and Spring Seminars, and represents the interests of technologists throughout Indiana. Participation in professional societies helps students to understand the scope of the field they are entering. It also demonstrates interest in the advancement of the profession, enhances learning, and provides students with an opportunity to meet and interact with professionals and students from other programs. The cost of membership is reasonable. Application forms are available through the professional societies' web-site.

PROFESSIONAL ETHICS (rev. 05/2017)

POLICY: Radiologic & Imaging Sciences students shall abide by the Code of Ethics published by the American Registry of Radiologic Technologists (ARRT). Students must meet the ARRT ethics requirements to be eligible to take the national certification examination upon graduation. Compliance with the ethics requirements to determine eligibility is the sole responsibility of the student.

PROCEDURE: The principles of the ARRT Code of Ethics serve as guidelines for student professionalism throughout the program. Continued adherence to ethical standards after graduation is a quality of true medical professionals. A copy of the ARRT Code of Ethics is provided for reference in the appendix.

Every candidate for certification must, according to ARRT governing documents, "be a person of good moral character and must not have engaged in conduct that is inconsistent with the ARRT Rules of Ethics," and they must "agree to comply with the ARRT Rules and Regulations and the ARRT Standards of Ethics." ARRT investigates all potential violations in order to determine eligibility.

Issues addressed by the Rules of Ethics include convictions, criminal procedures, or military court martial as described below:

- Felony;
- Misdemeanor;
- Criminal procedures resulting in a plea of guilty or nolo contendere (no contest), a verdict of guilty, withheld or deferred adjudication, suspended or stay of sentence, or pre-trial diversion.

Juvenile convictions processed in juvenile court and minor traffic citations not involving drugs or alcohol do not need to be reported. Additionally, candidates for certification are required to disclose whether they have ever had any license, registration, or certification subjected to discipline by a regulatory authority or certification board (other than ARRT). Primary pathway candidates must indicate any honor code (including suspension) violations that may have occurred while they attended school. Candidates becoming certified through the primary pathway may complete a pre-application to determine their ethics eligibility prior to enrolling in or during their educational program.

Students are advised of the ARRT ethics requirement by program faculty. Faculty are available to assist students with the ethics review requirements, but it is the sole responsibility of the student to take the necessary steps to ensure eligibility to take the national certification examination after completing the program and program requirements.

HEALTH SERVICES (rev. 03/2018)

Confidential health services are available for students on campus. Student Health Services is located in the lower level of the Health Professions Building. During the fall and spring semesters a registered nurse, registered nurse practitioner, and physician are on duty Monday through Friday, 8 a.m. to 4:30 p.m. During the summer sessions Student Health Services hours are from 9:00 – 4:00 Monday through Friday. Students can pay a fee per semester to utilize health services. The Student Health Center also accepts certain insurance plans. Equipment can be available for loan includes humidifiers, heating pads, and crutches. For further information, students may contact the Student Health Center office at (812) 465-1250.

INFECTION CONTROL (rev. 08/2016)

The College of Nursing and Health Professions maintains policies and procedures on infection control. The policies and procedure found within the *Infection Control policy* are designed to prevent transmission of pathogens and must be adhered to by all students and faculty in the College of Nursing and Health Professions when participating in clinical education experiences. Please review the CNHP Handbook for the entire policy. The handbook is located on the CNHP website listed under "About the College."

HEALTH INSURANCE (rev. 4/2014)

Student Health Services provides information on how students can purchase an office visit plan (OVP) to be seen in the campus health clinic. Services related to hospitalization, surgical procedures, referrals to specialists, and accident care (typically "insured services") are not covered by the OVP. Students are expected to have their own health insurance to pay these expenses. Many students are covered by their parents' insurance. Students who are married or who are no longer considered dependents on a family policy will need their own health insurance policies. We highly recommend you always have health insurance.

Students are accountable for medical expenses associated with illness or injury before, after, or during clinical education. **Affiliated hospitals do not provide free health care services to students.**

MEDICAL MALPRACTICE INSURANCE (rev. 3/2018)

Medical malpractice insurance is required for all students enrolled in health professions programs. A yearly fee of \$20 is attached to a clinical course. The fee is paid when students register for these courses.

STUDENT COUNSELING/ DISABILITY RESOURCES (rev. 03/2023)

USI's Counseling Services provides confidential counseling services to students including personal/social and academic concerns. Students are encouraged to make use of the various services. An appointment can be arranged by calling (812) 464-1867 or by visiting the Counseling Services in the Orr Center (OC-1051). In addition, students requesting accommodations for disabilities as defined by applicable federal and state laws can visit Disability Resources (OR). Disability Resources is located in the Science Center, room 2206. They are open from 8 - 4:30 Monday – Friday. Students may stop by their office or call: 812-464-1961 for assistance.

If you have a disability for which you may require academic accommodations for a class, please register with Disability Resources (DR) as soon as possible. Students who have an accommodation letter from DR are encouraged to meet privately with course faculty to discuss the provisions of those accommodations as early in the semester as possible. To qualify for accommodation assistance, students must first register to use the disability resources in DR,

Science Center Rm. 2206, 812-464-1961, <http://www.usi.edu/disabilities>. To help ensure that accommodations will be available when needed, students are encouraged to meet with course faculty at least 7 days prior to the actual need for the accommodation. However, if you will be in an internship, field, clinical, student teaching, or other off-campus setting please note that approved academic accommodations may not apply. Please contact Disability Resources as soon as possible to discuss accommodations needed for access while in this setting.

ADDITIONAL UNIVERSITY SERVICES (rev. 03/2023)

A number of additional services are available on campus for students. Information on each of the following can be found in the University Bulletin: Housing and Resident Life, Veteran, Military and Family Resource Center, Alumni and Volunteer USI, Public Safety and Security, Library Services, and Career Services and Internships. Students seeking information on or need assistance with financial aid can visit or call the office of Student Financial Assistance (OC 1005; 464-1767).

CAMPUS MOTOR VEHICLE REGULATIONS

All students living on campus are required to register vehicles operated and parked on campus with the campus security office. University rules governing driving and parking on campus are listed in a pamphlet "Motor Vehicles Regulations and Procedures." Monetary assessments are made for failure to obey the regulations.

CODE OF CONDUCT (rev. 03/2023)

The regulations of the university concerning students are specified in a code of conduct. The code of conduct states the expectations and requirements of students admitted to the university, defines misconduct that may be subject to disciplinary action, specifies legal action regarding drug/alcohol use, fireworks and explosives, weapons, and physical violence, explains student rights regarding demonstrations and use of campus facilities, describes due process and appeals for actions taken against students, and outlines procedures for student grievance. Several of these policies are also described in the bulletin under "Student Policies" or on the webpage of the Dean of Students Office

WEATHER/EMERGENCY CLOSING (rev. 8/2016)

University functions are rarely canceled due to weather or emergencies. Even in severe weather - heavy snowfall, ice storms, and extreme cold - the university's academic programs, courses, classes, and seminars continue. Administrative offices also remain open. In the event that classes are canceled, all classes including clinical education will be dismissed until the university officially reopens. **If a late opening is declared or a change in the current status, all classes, academic and clinical, will begin or be cancelled at the designated hour.** If the late opening occurs during a scheduled class time, the class will meet for the time remaining. If students are at a clinical affiliate when a closing

is declared, they will be dismissed, but must report to the clinical preceptor before leaving the premises. All classes and clinical education missed during an official closing are not subject to make-up. Students are requested **NOT** to call the campus to verify class cancellation or late opening. Information concerning campus closure can be heard on the following local radio stations:

WSWI-AM (820)

WBAX-FM (107.5)

WJPS-FM (93.5)

WSTO-FM (96.1)

WYNG-FM (105.3)

WUEV-FM (91.5)

WIKY-FM (104.1)

WGBF-FM (103.1)

In addition, information is shared with other media outlets (TV and newspaper) in the area. Please note, in the event of a weather-related emergency or similar situation that would impact the community, local media are relaying and updating closure/cancellation information from multiple agencies throughout the area and their ability to distribute current and correct information may be limited. USI also uses email (USI email accounts), webpostings on USI's homepage (www.usi.edu), and text messaging (RAVE text messaging program) to communicate instructions and information related to the decision to close or delay hours of campus operation. Students also have the option to call the USI emergency hotline at 812-465-1085. Students are encouraged when possible to utilize these sources.

In consideration of individual safety traveling to and from classes during inclement weather, although the campus may be officially open, the final decision rests with the student. If a student decides not to attend academic or clinical classes due to weather or other reasons, it is expected that program policies concerning attendance will be followed.

Students should review the CNHP Handbook for information on RAVE, Emergency weather and the Emergency Action plan. The handbook is located on the CNHP website listed under "About the College."

PROGRAM POLICIES

NONDISCRIMINATION/HARASSMENT (rev. 01/2016)

POLICY: The Radiologic & Imaging Sciences program shall not discriminate or engage in harassment with respect to any legally protected status, such as race, color, religion, gender, age, disability, national or ethnic origin, sexual orientation, or veteran status. This policy is in accordance with the University's *Student's Rights and Responsibilities* policy on discrimination.

PROCEDURE: Recruitment, admissions, and all other ongoing operations of the Radiologic & Imaging Sciences program are conducted in accordance with this policy. Nondiscrimination is supported institutionally by the University of Southern Indiana and its clinical affiliates.

Any student who believes s/he is being discriminated against or harassed should bring the complaint first to the immediate attention of the program director or clinical preceptor. If the complaint is not satisfactorily resolved at the program level, the student may discuss the matter with the Dean of the College of Nursing and Health Professions, a counselor in the Counseling Center, or with the Director of Affirmative Action. Following this action, the student may discuss the matter with the Dean of Students or the Vice President for Academic Affairs. If no resolution is found through informal methods, the student may file a written grievance as described in the university's code of conduct, "Student Rights & Responsibilities."

ALCOHOL AND DRUG ABUSE (rev. 03/2023)

POLICY: The Radiologic & Imaging Sciences Program follows the University's policies on drug and alcohol abuse as outlined in the *Student Handbook* and in the *University Handbook*.

PROCEDURE: In response to the Drug-Free Schools and Community Act Amendment of 1989, (Public Law 101-226), the University has established policies to maintain an environment free of illicit drugs and illegal use of alcohol. The University prohibits the illegal manufacture, possession, use and/or distribution of drug and alcohol by students, employees, and visitors on University-owned or leased property or as a part of any "university activity" as that term is defined by the University.

In the event of conduct or occurrence which involves unsatisfactory performance or behavior but not limited to, a good faith belief of impairment because of alcohol consumption and substance abuse by a student, a clinical facility will give immediate notice to the Dean of the College of Nursing and Health Professions. All involved parties will cooperate with each other in making a prompt investigation of the facts and/or circumstances of such conduct or occurrence. The investigation and any disciplinary action involving the student is at the discretion of the University and must follow and comply with the appropriate policies and procedures of the University.

The *Student Handbook* can be found on the University's web site: <https://www.usi.edu/dean-of-students/policies-procedures-and-community-standards/student-handbook> . The Employee Handbook can be found on the University's web-site: <https://handbook.usi.edu/>

CRIMINAL BACKGROUND CHECK AND DRUG SCREEN (rev. 01/2016)

To ensure that students in professional programs in the College of Nursing and Health Professions uphold the professional standards, integrity, and behavior expectations of their discipline, all students are required to obtain a satisfactory national background check and drug screen.

Please review the CNHP handbook for the Criminal Background Check and Drug Screen policy. The handbook is located on the CNHP website listed under “About the College.”

ADMISSION (rev. 03/2023)

POLICY: An Admissions Committee shall select qualified applicants for admission to the Radiologic & Imaging Sciences program based on academic achievement, academic preparation, related healthcare experience, and personal qualifications. The admission process follows the University’s Student’s Rights and Responsibilities on discrimination.

PROCEDURE: Applications for admission to the Radiologic & Imaging Sciences program are accepted throughout the year until the application deadline of September 15. In September, all applications are reviewed for submission of required supporting documents and evaluated for minimum qualifications. Individuals with incomplete files are asked to submit missing materials. Minimum qualifications to be met are: acceptance into the university, have completed all required program prerequisites, core curriculum coursework with a prerequisite GPA not less than 3.0 (4.0 scale), and receiving a “C” or better course grade in the designated program prerequisite courses. Students who do not meet minimum qualifications are notified of ineligibility.

All applicants meeting minimum qualifications are invited to be interviewed by the Admissions Committee. Following completion of all interviews, the Admissions Committee conducts a careful final evaluation of each applicant with respect to the type and amount of recent coursework completed, level of academic success (grades, GPA), experience in health care, and personal qualifications such as knowledge, motivation, maturity, and communication. A rank order of applicants is established through points earned and used to determine the final selection and clinical placement. A letter of admission status advises all students interviewed.

During the clinical education portion of the radiology program, students are assigned to a home clinical site. In the admissions process, students indicated their preference for a home clinical site using the “Rank Order of Preference” form. Home clinical site preference is granted based on student rank order of acceptance into the program and the availability of positions at a particular clinical affiliate. Students will spend their first summer and fall and last spring semesters of clinical education at their home clinical site. All students will rotate up to three other clinical affiliates for the semesters between their home clinical site assignments. Students who were identified as alternates during admission fill vacancies in the program if needed and are offered the home clinical site associated with the student that left the program.

Program students have access to clinical affiliate rotations found on Trajecsyst as they are determined by semester for the entire length of the program prior to the admission process. Petitions to change home clinical site once assigned are not granted. Petitions to change a clinical affiliate semester rotation are usually not granted but are determined on a case-by-case

basis. Petitions to change a clinical affiliate semester rotation are dependent upon several factors including, but not limited to: open spaces at the clinical affiliate(s), the ability of the student to find another student to switch clinical rotations, the switch of students would not eliminate a rotation to a level-2 trauma center (Deaconess Midtown or St. Vincent) for either student, agreement from clinical preceptors to the proposed change, etc. Students wishing to petition for a change must have the request in place a minimum of four weeks prior to the affected semester.

ADMISSION ACCEPTANCE (rev. 03/2018)

Students accepted for admission must confirm in writing their intent to enroll. Admission is contingent upon a satisfactory background check, drug screen, completion of program-required documentation, and satisfactory completion of required prerequisite program courses that a student may have in progress. Students who fail to complete the admissions criteria will not be allowed to their professional coursework.

An alternate list of applicants is maintained to fill vacancies. Students who are not accepted for admission may reapply for the next admitted class.

Any student admitted to the university may select pre-Radiologic & Imaging Sciences as a major. Such students usually complete pre-radiology core curriculum courses while waiting to be considered for admission to the program. Selection of a Radiologic & Imaging Sciences major and completion of pre-radiology courses does NOT insure acceptance into the program. Acceptance is dependent on individual application ranking as described in the policy on Admission.

The Radiology Program does not have established agreements for transfer of radiology program students or radiology program credits. The Radiology Program does not consider students for advanced placement.

TECHNICAL STANDARDS (ESSENTIAL FUNCTIONS)

Essential functions are those physical, mental, and psychosocial characteristics that are necessary to meet the clinical/practice/fieldwork expectations for the College of Nursing and Health Professions programs. Becoming a healthcare professional requires the completion of an education program that is both intellectually and physically challenging. The purpose of this statement is to articulate the essential function requirements of the CNHP programs in a way that allows students to compare their own capabilities against these demands.

There are times when reasonable accommodations can be made in order to assist a student with a disability. Reasonable accommodation does not mean that students with disabilities will be exempt from certain tasks; it does mean that we will work with students with disabilities to determine whether there are ways that we can assist the student toward completion of the tasks.

Students need to review the entire essential functions policy found within the CHNP handbook. The handbook is located on the CNHP website listed under “about the College.”

PROGRAM CONTINUATION/COMPLETION (rev. 02/2020)

POLICY: In order to continue in the Radiologic & Imaging Sciences course sequence and complete the program, students shall receive not less than "C" level grades in all required radiologic and imaging sciences curriculum courses, passing grades in all required core curriculum courses, and maintain a cumulative grade point average (GPA) no lower than 2.0.

PROCEDURE: Students who fail to meet the requirements established in this policy may not continue in or graduate from the program. A letter from the program director of their enrollment status notifies students affected by this policy. If advanced courses have been preregistered, they should be dropped promptly.

Students who discontinue due to grade deficiencies must be formally readmitted to the program. In order to be readmitted the student must follow the procedure described under Readmission. Students who have received a failing grade in a course because of academic sanctions may not apply for readmission.

VACATIONS/HOLIDAYS (5/2012)

POLICY: Students are granted holidays and time off in accordance with the university calendar. The program will not grant vacations or clinical schedule changes for purposes of vacations during times when classes or clinical are scheduled.

PROCEDURE: Student holidays are indicated on the official university calendar each year. On holidays, no academic or clinical classes are conducted. Clinical make-up hours are scheduled on days designated as "no classes," but not on days when the university is closed. Students should schedule their vacation time for only the scheduled breaks between semesters. The program will not grant vacation leaves or give excused absences for student vacations (including weddings, honeymoons, etc.). The program will not grant clinical schedule changes to accommodate student vacations (including weddings, honeymoons, etc.). If a student decides not to attend academic or clinical classes it is expected all program policies (attendance, testing, etc.) will be followed.

BEREAVEMENT (rev. 01/2016)

POLICY: Students shall be granted limited leaves of absence for bereavement. Students on leave shall be responsible for all academic content and clinical requirements missed during the absence.

PROCEDURE: Students who suffer the loss of a close family member (parent, spouse, child, brother, sister, mother or father-in-law, or other member of the family residing in the immediate household) may initiate a bereavement leave by contacting the program director or clinical coordinator. The leave of absence begins immediately upon notification and continues for three consecutive days. If the loss involves other members of the family (grandparents, uncles, aunts, nieces, nephews, and in-law relatives) a one-day leave of absence is normally granted. Attendance at funeral services for relatives not listed or close friends should be discussed with

the program director and the clinical coordinator or clinical preceptor. Students missing clinical time as described in this policy do not have to make up their missed time. All academic assignments and tests must be made up. All clinical assignments and requirements will still need to be completed. Students requiring an extension of leave should contact the program director and clinical coordinator. Any clinical time missed during an extension is subject to make up time. Students that have properly notified all appropriate program officials of bereavement will not be required to call and report their daily absence during the bereavement days.

JURY DUTY/WITNESS (02/2020)

POLICY: Students are granted excused absences when serving for jury duty or when called as a witness.

PROCEDURE: Immediately upon receipt of notice of jury duty or subpoena to serve as a witness, the student must inform the program director and clinical preceptor. The student must provide a copy of the official notification of jury duty service or subpoena. Normally, such activity is not subject to makeup of clinical hours. Depending on the length of time involved, clinical activity missed, and requirements specified for successful completion of the affected course, makeup of clinical time may be necessary. All academic assignments and missed tests must be made up. In court cases where a student appears as a plaintiff or defendant for personal matters, the student can receive an excused absence if documentation of the court appearance is provided. A student attending court as a plaintiff or defendant for personal matters must make up missed time.

MILITARY SERVICES LEAVE/ANNUAL TRAINING (06/2015)

POLICY: The Radiologic & Imaging Sciences Program supports the military services provided by the government and allows program students serving in any military branch or category up to 10 excused clinical education days per academic year to fulfill their military commitment during their enrollment in the program. Students that miss additional time (>10 days) due to military service commitment will be required to utilize personal time and complete makeup time, if necessary.

PROCEDURE: The program student/service member will contact the clinical coordinator and clinical preceptor(s) to notify them of the training requirement. If orders are not available, a Commander's Memorandum will suffice until official orders are furnished. However, official orders must be presented when the student returns. Students are not required to call in every morning of missed clinical course days, when official orders (or Commander's Memorandum when official orders not available) have been provided in advance.

Students are responsible for all didactic and clinical course materials and requirements presented during their absences related to military service. Students that are not progressing toward successful completion of course requirements will need to meet with program officials and a corrective plan of action will be created. This plan of action can include and is not limited to: additional assignments, making up a portion or all of missed hours or completing additional clinical hours.

SHORT TERM LEAVE OF ABSENCE

POLICY: Students shall be granted limited leaves of absence for justifiable causes. Students on leave shall be responsible for all academic content and clinical requirements missed during the absence.

PROCEDURE: Students requesting leave must contact the program director. A written explanation for the leave will be required. A petition for a program policy variance may also be necessary (see Petitions). The program director will review the request and respond to the student in writing. All clinical time, academic assignments and missed tests must be made up. If the length of time required is such that the student will not be able to successfully complete the required courses, withdrawal may be necessary. Students requiring an extension of leave should contact the program director and clinical coordinator.

EXTENDED LEAVE OF ABSENCE (rev. 2/2012)

POLICY: Students may request an extended leave of absence (up to 12 months) with written explanation.

PROCEDURE: Students who intend to complete the program, but are temporarily unable to continue for personal, health or other reasons submit a written request to the program director for a leave of absence. The request specifies the length of leave, identifies the anticipated date of return, and includes an explanation for needing time off. The program director responds in writing within two weeks. The maximum length of leave is 12 months.

Students on approved leave are not required to apply for readmission to the program. Upon return to the program, the student is expected to resume clinical and academic activity at the performance level appropriate to the courses enrolled. To avoid loss of knowledge or skills, select courses may be repeated or audited prior to return. Audited or repeated classes will be determined by the program director and faculty.

The purpose of extended leave is to allow students an opportunity to resolve problems interfering with their progress in the program. Although successful return with program completion is the goal, students who are unable to return at the end of leave may be subject to withdrawal from the program and formal readmission.

WITHDRAWAL FROM THE PROGRAM/COURSE(S) (rev. 08/2016)

POLICY: Students have the right to withdraw from the program at any time.

PROCEDURE: Students may withdraw by completing and returning a Withdrawal form to the Registrar's office. As part of the withdrawal process, the student must obtain the program director's signature. This means the student must consult with the program director prior to withdrawal. If the withdrawal occurs **prior** to the tenth week of class, a W grade is recorded for each course dropped. W grades do not affect student grade point average. Withdrawals during or after the tenth week receive W grades only if the student is passing at the time of withdrawal. Students failing receive F grades. F grades are included in GPA calculation. Withdrawals completed early in the semester or summer session may qualify for partial refunds. University

refund policy and deadline dates are described in the University Bulletin and registration Schedule for each semester.

DISMISSAL FROM THE PROGRAM (rev. 08/2016)

POLICY: Students shall be dismissed from the program for serious or repeated violations of clinical affiliate, program or university policies or procedures. Dismissal actions shall follow due process.

PROCEDURE: Radiologic & Imaging Sciences program policies and procedures are defined by the contents of this handbook. It is the responsibility of each student to be aware of the policies and procedures and abide by them. Violations of established policies or procedures may result in disciplinary action. Depending on the nature of the violation, four levels of program disciplinary action may be initiated. The most severe action is dismissal from the program. Further description is provided under Disciplinary Actions.

Due process for a program dismissal action follows the university's process for "Conduct" (Student Rights & Responsibilities, Section 4). This process contains three fundamental steps: 1) presentation of the charges, 2) hearing, and 3) decision and action by an administrator. Please read the entire policy on Conduct: http://bulletin.usi.edu/content.php?catoid=1&navoid=15#1.1_Student_Rights_and_Responsibilities.

Action to dismiss a student from the Radiologic & Imaging Sciences program follows the recommendation of the program's Disciplinary Committee.

Students cannot be dismissed by decision of individuals or clinical affiliates alone. Clinical affiliates do have the right, however, to expel or reject any student whose behavior is unacceptable, unsafe or disruptive to their institution. A student who is expelled from a clinical affiliate may or may not be reassigned to another. If the student cannot be reassigned, it will be necessary for the student to withdraw from the program.

READMISSION (rev. 02/2020)

POLICY: Students who have withdrawn or discontinued due to inadequate grades shall be allowed to apply for readmission to the program one time. Students who have been readmitted once or dismissed from the program as a disciplinary action are not eligible for readmission. Students who have received a failing grade in a course as a result of academic sanctions may not apply for readmission.

PROCEDURE: Eligible students seeking readmission to the Radiography Program must complete the admissions process. Applications for admission to the Radiologic & Imaging Sciences program are accepted throughout the year until the application deadline of September 15. See the Admissions policy for further information on admissions.

PROGRAM COMPLETION TIME (rev. 04/2014)

POLICY: The total time that is allowed for successful completion of the Radiologic & Imaging Sciences curriculum should not exceed 40 consecutive months.

PROCEDURE: Students start the radiology program at the beginning of the Spring semester following acceptance into the radiology program. Students following the established curriculum are expected to finish the program as scheduled in 28 months. When students take extended leave of absence program completion is delayed. The maximum extension of time permitted for completion of all requirements is 12 months. Students who request readmission after 12 or more months absence will not be eligible to resume the program at the same level and must reapply to the program (see readmission policy). Students who withdraw or discontinue due to inadequate grades shall be allowed to apply for readmission to the program one time.

STUDENT EMPLOYMENT (rev. 08/2016)

POLICY: Students who work shall modify their hours of employment to avoid conflicts with scheduled classes, labs, and clinical assignments.

PROCEDURE: Each semester, students can access a detailed printed schedule showing the meeting times and days for all academic and clinical courses. This is helpful in avoiding most conflicts. It is important to note, however, that while the scheduled times and days for academic classes and labs are fixed, clinical hours may vary according to course requirements or assigned clinical affiliate.

To specify the hours assigned to clinical education, students are given schedules each semester by their clinical preceptor. This shows in advance what the required clinical hours will be each week and allows students to plan their work schedule accordingly.

It is also important for students to realize that semester schedules and clinical rotation schedules show contact hour requirements. These are the hours spent in class, lab, or in clinical education. In addition, students must allow adequate time for study and rest. If too many work hours are attempted, fatigue or poor preparation can adversely affect student performance.

STUDENT RECORDS (rev. 04/2014)

POLICY: All program records pertaining to students shall be maintained in accordance with the "Federal Family Educational Rights and Privacy Act of 1974" (Buckley Amendment). (FERPA. www.Ed.gov)

PROCEDURE: All student records accumulated during the program are considered confidential and kept in locked files. The contents of a student's file are not revealed to any unauthorized person without the student's knowledge and written consent. Students may review any records pertaining to them at the university or clinical affiliate by request during regular office hours. Student records are maintained for a period of eight years. Student files will be kept for a period of eight years and then shredded. If kept on file by the program, medical files will be kept indefinitely in an electronic format. Paper copies of medical files will be shredded after they have been transferred into an electronic format. The program uses CastleBranch.com for storage of

medical records and other program documents. Students use this system to upload their required program immunizations and information. Students have access to the system for retrieval of that information after graduation.

CHANGE OF NAME/ADDRESS/PHONE (rev. 3/2011)

POLICY: Students shall promptly report any change of name, address, or telephone number to the program director, clinical preceptor, and USI Registrar's Office.

PROCEDURE: In order for program and university records to remain current and to assure that students can be contacted easily, student names, addresses and telephone numbers must be accurate. Program records may be corrected by contacting the program director. Changes to clinical records require contacting the clinical coordinator. University records are corrected through the student's personal information page on MYUSI. All changes should be reported as soon as possible.

CHILD CARE (rev. 02/2021)

POLICY: Students with dependent children shall arrange for appropriate childcare while attending classes, labs, and clinical assignments.

PROCEDURE: Children are not allowed to accompany parents to classes, labs, or clinical assignments. This policy applies to all courses in the program. No childcare services are available for students at affiliate clinical facilities.

STUDENT TRANSPORTATION (rev. 08/2016)

POLICY: Students shall provide their own independent transportation to and from the University and clinical affiliates, which may be up to 70 miles away from the University.

PROCEDURE: In order to maintain good attendance, students must have a reliable mode of independent transportation. Although car-pooling may be possible for individuals who live nearby one another and follow the same schedule, it is not regarded as a reliable form of transportation. If the driver is absent, late, or required to leave early, the rider is affected. Also, clinical schedules vary to meet course requirements and are not adjustable for driving convenience. Public transportation is NOT recommended. Bus schedules or routes, if available, are not always convenient for class or clinical assignments. Fuel expenses for travel to clinical education will also be incurred by the student.

ADVISORY COMMITTEE REPRESENTATIVE (rev. 03/2023)

POLICY: Two student representatives and alternate shall be selected from each class to serve on the Radiologic & Imaging Sciences Advisory Committee.

PROCEDURE: The Radiologic & Imaging Sciences Advisory Committee consists of individuals who share an interest in the advancement and development of the Radiologic & Imaging

Sciences program. Members include hospital and university administrators, technologists, faculty, students, and other interested persons. Advisory meetings are held every other year in accordance with the College of Nursing and Health Professions Advisory Committee meeting event or more frequently if needed. The business of the committee is to review program operations and provide recommendations for change or improvement. Since any change eventually affects the students, student representation is important. If the designated student representative cannot attend, the alternate should be present.

Students serving on the advisory committee will be officers from the RT Student Organization. Officers within the student organization are elected to their position by their peers to serve in a variety of roles. According to the RT Student Organization Bylaws, the President and Vice President will serve as student representatives for their class on the USI Radiologic & Imaging Sciences Advisory Committee. The Secretary will serve as an alternate in the event that the President or Vice President cannot attend the Advisory Committee meeting. Each cohort of students has elected officers and will therefore have a President and Vice President to serve on the Advisory Committee to represent each class of students.

DISCIPLINARY ACTIONS (rev. 11/2018)

POLICY: Students who violate established policy or procedure of the program, university, or clinical affiliate shall be subject to disciplinary action.

PROCEDURE: Disciplinary action involves four levels of severity. The level of action taken is dependent on the nature of the offense and circumstances under which it occurred. An offense is equivalent to a single written student counseling notice. The levels are: 1) verbal warning, 2) written warning with probation, 3) suspension from the program (temporary), and 4) dismissal from the program (permanent). This policy is effective from May 1 of each year to April 30th of the next year.

Verbal warnings are used in response to minor offenses. The clinical coordinator, instructor, or clinical preceptor discusses the violation with the affected student. The student is allowed to respond. Once warned, it is expected that further violations will be avoided.

Written warnings are used for more serious offenses or incidents where students fail to abide by verbal warnings. A written warning consists of a letter from the program director specifying the violation and assigning a period of probation. Prior to issuing the letter, the program director discusses the matter with the student and allows the student to respond. A copy of the warning letter is placed in the student's file until the probation period expires. The length of probation varies with the nature of the offense.

If further violations occur during the probation, the warning letter may be used in higher level disciplinary action.

Suspension or dismissal actions are implemented upon recommendation of a Disciplinary Committee. The Disciplinary Committee is comprised of the Program Director, Clinical Coordinator, and a Director/Program Chair from another health program in the College of Nursing and Health Professions. Such actions are indicated in response to any serious policy or procedure violation. The committee may also convene to review lesser offenses that occur during a probationary period. If the violation involves clinical education, an affiliate clinical preceptor may participate on the committee.

The Disciplinary Committee conducts a hearing to determine the proper course of action. The student is given written advanced notice of the date and time of the hearing and advised of all rights as described under "Dismissal." The hearing is conducted with or without the student's participation. Afterward, the student is informed in writing of the committee's recommendations and resultant program action. The student may appeal within five days of notification.

If a suspension is recommended, its length may vary in accordance with the offense, but will not exceed a maximum of one week. During a suspension, the student is responsible for all academic material, tests, clinical time, and clinical activity missed. A written record of the suspension action is included in the student's file until graduation. Suspensions must be reported as part of violation of the honor code on the application for the certification examination of the American Registry of Radiologic Technologists. If a dismissal action is recommended, the student is required to withdraw immediately from all radiology courses. All levels of disciplinary action described under this policy are subject to appeal (see Program Appeals).

PROGRAM APPEALS (rev. 09/2016)

POLICY: Students shall have the right to appeal any action taken against them by the program. The program uses the University's policy on Grievances for appeals.

PROCEDURE: This policy applies to all student grievances including course grade disputes, unfavorable evaluations, and disciplinary actions. Formal and informal methods of appeal may be utilized. Since most grievances can be resolved through informal methods, the student is strongly encouraged to use informal procedure first. Students should review the University policy on Grievances found in the University Student Handbook and on the Dean of Students web-page: <http://www.usi.edu/deanofstudents/policies-procedures-and-community-standards/#AcademicAffairsStudentGrievanceProcedures> and <http://www.usi.edu/media/5599064/d16-117185-student-planner-pages-updated-9-2016.pdf>

All grievances and their resolutions will be kept on file with the program.

NON-ACADEMIC STUDENT COMPLAINTS (03/2023)

POLICY: It is the policy of the radiology program to address any student complaints that are non-academic in nature and do not require invoking any informal or formal grievance procedure.

PROCEDURE: If you wish to register a non-academic complaint, you should contact the Program Director/ Chair of the Radiologic & Imaging Sciences Program or visit the office of the Chair in person in the College of Nursing and Health Professions. Students should formally document the complaint and present it to Radiology Program Director/Chair. The Program Director will respond to the complaint within 5 days. Depending upon the nature of the complaint, the resolution or resolution timeframe may vary. The program will keep a copy of the complaint on file for 5 years to help in establishing patterns that could negatively affect the quality of the educational program.

PETITIONS (rev. 08/2016)

POLICY: Students shall have the right to petition for justifiable variances to program policies or procedures.

PROCEDURE: When extraordinary circumstances warrant a deviation from normal policy or procedure, students may petition the program director for a variance. The requested variance may be a special consideration, privilege, exemption, or waiver. The following guidelines describe the nature and content of an acceptable petition.

1. The petition is typed on plain white paper, in business letter form, dated, and addressed to the program director. Email form is also acceptable.
2. The policy or procedure of concern is clearly identified.
3. A specific type of variance is requested.
4. The extraordinary circumstances warranting the variance and all justifying reasons are concisely described.
5. Positive actions to be taken by the student that will prevent the need for further variances are described.
6. The petition is signed by the student.

The program director's response is conveyed by letter to the student within two weeks. If a variance is granted, this does not represent a permanent change in program policy or procedure. The variance applies only to the petitioning student and only for the specified situation. If the petition is rejected, reasons for the rejection are given and existing policy or procedure remains in force. Petitions that are rejected due to inadequate preparation may be resubmitted after appropriate revisions have been made.

FUNDRAISING (8/2016)

POLICY: All fundraising projects or activities shall follow the most current university policy on fund raising.

PROCEDURE: Student Organizations interested in conducting a fundraising project or activity must review and follow the current USI policy on fundraising. A copy of the most current policy can be obtained from the Office of Student Development Programs in University Center East.

HIPAA (rev. 08/2016)

Health Information Privacy Policies and Procedures have been implemented by the College of Nursing and Health Professions (CNHP). Student and faculty members of the CNHP workforce are obligated to protect the privacy of individually identifiable health information that we create, receive, or maintain as part of participation in a health program or course.

On a yearly basis every member of the College workforce must participate in online HIPAA education and testing which is accessed through the College website, <http://health.usi.edu/>. The HIPAA quiz must be completed with a score of 75% or higher. If a score of 75% or higher is not achieved the quiz must be repeated until a passing score is achieved. If you have questions or doubts about any use or disclosure of individually identifiable health information or about your

obligations under these Health Information Privacy Policies and Procedures, the Privacy Rules or other federal or state law, consult the College of Nursing and Health Professions Infection Control and HIPAA Committee at 812.464.1151 before you act.

Students should read the entire HIPAA policy and sanctions found on the CNHP website. The handbook is located on the CNHP website listed under “about the College.”

CONFIDENTIALTY (rev. 08/2016)

POLICY: Students shall respect and uphold confidentiality of information relating to patients and computer information systems at all affiliated clinical education centers.

PROCEDURE: Prior to the start of clinical education, all students read and sign a *Confidentiality Agreement*. This statement explains the importance of confidentiality and defines the standards to be observed by students. Prior to the first spring semester each student must pass an exam on the Health Insurance Portability and Accountability Act (HIPAA). Students upload HIPAA test scores and confidentiality agreements to CastleBranch.com prior to starting their first Spring semester and renew their competency once a year while in the program.

SOCIAL MEDIA POLICY (08/2016)

The use of social media has grown exponentially in the last decade and continues to reshape how society communicates and shares information. Social media can have many positive uses in health care; it can be used to establish professional connections, share best practices in providing evidenced based care, and educate professionals and patients. However, communication about professional issues can cross the line and violate patients’ privacy and confidentiality, whether done intentionally or not. Health professionals, including students in health profession disciplines, have a legal and ethical obligation to protect the privacy and confidentiality of each patient’s health information and privacy. The unauthorized or improper disclosure of this information, in any form, violates state and federal law and may result in civil and criminal penalties. Health professionals, including students in health care profession disciplines, have an obligation to respect and guard each patient’s privacy and confidentiality at all times.

Postings on social media sites must never be considered private, regardless of privacy settings. Any social media communication or post has the potential to become accessible to people outside of the intended audience and must be considered public. Once posted, the individual who posted the information has no control over how the information will be used. Students should never assume information is private or will not be shared with an unintended audience. Search engines can find posts, even when deleted, years after the original post. Never assume that deleted information is no longer available.

Students need to review the entire social media policy and sanctions found within the CHNP handbook. The handbook is located on the CNHP website listed under “about the College.”

STUDENT PARTICIPATION IN EDUCATION WITH A MEDICAL EDUCATION MODEL (8/2015)

POLICY: The Program uses students as medical education models. Modeling allows program participants to obtain the basic knowledge and skills required to provide quality health care.

Procedures performed by USI students on student medical models are supervised by an appropriately qualified health care professional. Students enrolled in this program are encouraged to speak with their instructor if they have questions or concerns about participating as a medical education model.

PROCEDURE: As part of their education, students will have opportunities to perform certain procedures on each other. Participation in the examining role is mandatory. Participation as the one on which the procedure is performed, the medical education model (MEM), is encouraged, but students who do not wish to participate as the MEM should consult the course instructor. Participation in either role requires that students follow policy and guidance on appropriate behavior and sign the Student Education Consent and Confidentiality form. A qualified health care professional will be present at each education session to support student learning. Staff and students must treat each other in a professional manner and with respect and courtesy at all times. All personal and health information revealed or discovered as a result of participation in these education sessions should remain confidential. Any student concerns about serving as a medical examination model should be raised with the course instructor prior to the beginning of this learning experience. Any student concerns that may arise during the course about participating in this training should be raised directly with program director/chair.

STUDY ABROAD (05/2023)

Policy: The Radiologic & Imaging Sciences program does not have a study abroad activity or course within the curriculum. The program aims to provide flexibility for students interested in study abroad while also ensuring that their academic progress and clinical education are not significantly compromised. The case-by-case evaluation approach allows for individualized consideration and encourages students to engage in study abroad experiences that enhance their development as future healthcare providers.

Procedure:

Students in the program are encouraged to explore USI-sponsored study abroad opportunities either before or after completing the program. While the program does not have a specific study abroad activity or course within the curriculum, students interested in studying abroad should consult the program director for guidance and support. Students should be aware that participating in long study abroad activities, typically lasting more than four weeks, may have an impact on their ability to complete program courses and clinical education within the designated timeframe. Study abroad activities that align with the program's goals of promoting cultural competency, enhancing clinical skills, and facilitating personal growth as a student radiographer will be considered on a case-by-case basis. Each student's request for study abroad participation will be individually evaluated and discussed with the program director. Study abroad opportunities that specifically focus on promoting cultural competency and enhancing clinical skills will be given consideration. These activities should provide meaningful opportunities for students to engage with diverse populations and healthcare systems, expanding their knowledge and skills in an international context.

Students should engage in a pre-approval process before finalizing any study abroad plans. This will involve consulting with the program director, who will provide guidance and assess the feasibility of the proposed study abroad activity within the program's requirements and timeframe. Consideration for approval will include the length of the opportunity (no longer than 4 weeks) and the student's year of education in the program (must be after the first year of

clinical education is completed). Other factors for consideration in approval are but not limited to: clinical progress including demonstration of required radiographic competencies and attendance. Students gaining approval would still be responsible for completing all enrolled course requirements during the study abroad opportunity.

DISASTER /CATASTROPHIC /PANDEMIC EVENT CONTINGENCY PLAN (04/2024)

Policy: The program will follow University, clinical affiliate, and/or local/state health department or emergency management agencies directions regarding student participation in campus courses or clinical education in the event of a declared disaster, catastrophic or pandemic event. Adjustments in the contingency plan will be made, as needed, to assure appropriate program operations.

Procedures: The program will maintain regular communication with students, faculty, clinical affiliates, and local/state health or emergency management agencies in a declared catastrophic or pandemic event. The program maintains a current contact information list for students, clinical preceptors, clinical settings, and faculty. Depending on the event, communication could occur through electronic means or by phone. If the program or University must temporarily close, the accreditation body will be notified.

The specific circumstances and event will determine the procedures and program modifications to be taken regarding student participation in courses, including clinical education. Temporary alternative methods of didactic instruction delivery, such as distance delivery utilizing current tools such as Zoom, recorded lectures, and online testing, and/or cessation of classes, including clinical education are possible. In circumstances where clinical education is interrupted at select educational sites, attempts will be made to find alternative clinical education that fall within accreditation standards and guidelines. In circumstances where clinical education cannot be substituted or an alternative location identified, the program can consider reducing clinical education hours as outlined below for those whose clinical education has been interrupted. Students are still expected to complete course objectives and requirements. In circumstances where specialized equipment is need (i.e. PPE) the program will communicate those needs and how they can be obtained or will be distributed.

In response to a catastrophe or pandemic the university may provide course grade options such as Pass/No Pass. In these situation pre-radiology students wishing to entertain the Pass/No Pass option must understand that they CANNOT change the P/NP into a grade at a later date. As the program has pre-courses established with a C or better requirement for admissions, the program will not accept P/NP for science courses (A& P, Physics, etc.) and will not allow more than two Pass courses for other categories requiring a C or better. Students wishing to use the P/NP as an option should take program pre-requisites into consideration. For currently enrolled program students wishing to entertain the Pass/No Pass option must understand that the Pass grade is considered a D grade and would not allow a student to continue in the program as the program requires a C or better in coursework. For the bachelors completion students (Track 3) wishing to entertain the Pass/No Pass option must understand that the option CANNOT be changed in the future for a grade. Most graduate schools will not accept coursework with P/NP and some will not accept the degree with them. While the program will allow completion students to take a P/NP, future career goals should be considered.

In the event a disaster code is called during clinical education, students shall follow the instructions of the clinical preceptor or designated supervisor. Disasters are catastrophic events

that may involve the clinical affiliate directly or the surrounding community. When an actual disaster response mobilization is called, students are to report to their clinical preceptor for pertinent instructions. Depending on the nature of the event, students may be assigned specific tasks to assist in relief efforts, advised to remain in a specified area out of the way or asked to leave the premises. In such situations, it is very important that students follow instructions precisely. Students must not interfere with or impede the implementation of the disaster plan. During simulated disaster drills, students are encouraged to observe and participate in order to gain experience for future employment.

During the occurrence of a communicable disease event, students will not participate in clinical education if sick. Additionally, students will not participate in clinical education with patients in isolation with the communicable disease.

If there is an interruption of clinical education for students and alternate education experiences cannot be made, the program will temporarily reduce clock to credit hours for make-up as outlined:

- 1-2 weeks of interrupted education: reduce clinical education clock to credit hours from 8:1 to 5:1
- 3-4 weeks of interrupted education: reduce clinical education clock to credit hours from 8:1 to 4:1
- 5-6 weeks of interrupted education: reduce clinical education clock to credit hours from 8:1 to 3:1
- More than 6 weeks of interrupted education: reduce clinical education clock to credit hours from 8:1 to 2:1

RADIOLOGIC & IMAGING SCIENCES STUDENT HANDBOOK/ POLICY CHANGES (rev. 11/2023)

POLICY: The student handbook or radiology program policies are subject to changes or additions. Students will receive notice of new or changed policies.

PROCEDURE: Students will receive a typed copy, electronic version, or notice of changes of policies. At times students will be required to submit a signed statement acknowledging the new or changed policy. The student handbook is updated once a year; therefore, it is possible new or revised policies have not been published at the time of handbook review.

ACADEMIC POLICIES

ACADEMIC PROFESSIONALISM (rev. 03/2023)

POLICY: As participants in a professional health education program, radiologic & imaging sciences students shall conduct themselves in a professional manner during all class and lab sessions.

PROCEDURE: Academic professionalism includes respect for the faculty and rights of other students, prompt attendance for all classes and labs, and avoidance of any behavior which disrupts or interferes with academic proceedings. Professionalism also requires adherence to ethical principles such as not cheating on tests, plagiarizing, or degrading the character of others.

All radiologic & imaging sciences students share the same goal, to graduate as knowledgeable and competent radiographers. Each individual receives the same educational opportunities but must reach the goal in their own way. When problems are encountered, they are most effectively solved on an individual basis. It is important for students to realize that the program is not a competition. Each individual should be dedicated to their own development and not overly concerned about the progress or problems of others. This, however, does not preclude the giving of help to others who may request it.

If the behavior of another student is considered unprofessional, unethical, or annoying, the offended student should bring the matter to the attention of the course instructor, clinical preceptor, program clinical coordinator, or program director. Appropriate action can then be taken to clarify and resolve the situation without lowering professional standards.

CLASSROOM ATTENDANCE

POLICY: Students shall maintain prompt attendance at all scheduled classes and labs. Absences and late arrivals shall be reported prior to occurrence. Absences in excess of one day shall be reported to the Program Director.

PROCEDURE: Records of attendance are required for all classes and labs. See individual course syllabi for attendance policy. Good attendance not only promotes higher performance in a course, it also reflects positively on one's dependability and interest.

Students are expected to report absences or late arrivals BEFORE they occur. If the course instructor cannot be reached, a message should be left. If it is not possible to notify prior to an absence, the student should call at the earliest opportunity on the same day. This is especially important on scheduled test days (see Test Attendance/Makeup). **Students who are absent more than one day must contact the Program Director on the second day of absence.**

TEST ATTENDANCE/MAKE-UP

POLICY: Students shall be present on scheduled test days. Make-up tests may be a different form of the exam and shall be administered only to qualified absentees.

PROCEDURES: Although prompt attendance is expected on all days, attendance on test days is most important. Test dates are announced to students in advance. It is the student's responsibility to be aware of these dates, prepare for them, and be present. If ANY circumstance prevents a student from attending on a test day, the student is REQUIRED to report the absence in advance

Make-up tests are allowed under the following conditions:

1. The student **MUST** report the absence to qualify for make-up privileges.
2. One opportunity for make-up is permitted. If a student is not present for an assigned make-up, no further opportunities will be scheduled.
3. Make-up tests are scheduled at the convenience of the instructor.
4. Make-up tests are completed within **one week** of the originally scheduled date.

Failure to complete a make-up test as specified above will result in the loss of ALL CREDIT for that test. If extraordinary circumstances make it impossible for a student to report the absence and the absence can be justified in writing, a make-up may be arranged at the discretion of the instructor.

ACADEMIC GRADING (02/2020)

POLICY: All academic course grades shall be determined according to a fixed percentage scale.

PROCEDURE: In each academic course, students accumulate points during the semester through scores on tests, quizzes, assignments, etc. The number of points achieved by each student is converted to a percentage of the total points possible for the course. Grades are assigned according to the following scale:

Minimum 93%	- A		
90	- B+	70	- D
84	- B	below 70	- F
80	- C+	Incomplete	- IN
75	- C		

Course letter grades will be based on whole numbers only and assigned according to the grading scale. If a final course grade has a decimal value, the grade will be rounded down at 0.4 and below and rounded up at 0.5 and above. Extra credit is up to the discretion of the course instructor(s). Extra credit will not be applied to a course after the last regular scheduled class day. Course extra credit will not be applied once finals week begins or after.

Students who do not complete all requirements for a course receive either an F (fail) or an IN (incomplete) grade at the discretion of the instructor. Students who receive an IN grade must make arrangements with the instructor for prompt completion of course requirements. In order to continue in the program, all required RADT courses must be completed with at least C level grades (See Program Continuation/Completion). In order to continue on to the next clinical course all make-up time must be completed prior to the beginning of the next semester.

ACADEMIC INTEGRITY (8/2016)

The University of Southern Indiana is an engaged learning community advancing education and knowledge, enhancing civic and cultural awareness, and fostering partnerships through comprehensive outreach programs. The campus is dedicated to a culture of civility among students, faculty, and staff. Academic integrity is vital to the campus mission and culture. The academic integrity statement serves as an educational tool, defining academic integrity, violations of academic integrity, outlining sanctions for violations and administration of academic integrity

policy. Students should review the University's entire academic integrity policy to understand violations, sanctions, and procedures: <http://www.usi.edu/deanofstudents/academic-integrity> .

Academic Integrity:

- Demonstrates respect for all students' right to a safe, quality learning environment
- Does not interfere with others educational goals
- Promotes professional and ethical behaviors of all majors
- Appropriately cites others ideas, writings, and/or work
- Prohibits unapproved assistance with all academic endeavors which includes but is not limited to tests, writing, research, analysis, interpretation

Academic Integrity ensures:

- Fairness to students
- All students have the same opportunities
- Everyone receives appropriate credit for their work
- Academic honor
- A culture of civility

Violations of Academic Integrity:

- **Cheating:** Cheating is intentionally using or attempting to use unauthorized materials, information, or study aids in any academic exercise.
- **Interference:** Interference is behavior that detracts from a safe, quality learning environment of others educational goals.
- **Fabrication:** Fabrication is creating something for the purpose of deception.
- **Plagiarism:** Plagiarism is using the work and/or ideas of another person as if it is your own.
- **Academic Sabotage:** Academic sabotage is intentional impediment of others academic progress.
- **Facilitating Academic Dishonesty:** Facilitating academic dishonesty is intentionally or knowingly helping or attempting to help another commit an act of academic dishonesty.
- **Violation of research or professional ethics:** Violations in this category include professional ethical codes, university code of conduct, ethical research protocol and/or any professional standard communication by a professor or program.
- **Violations Involving Potentially Criminal Activity:** Violations in this category include actions such as theft, fraud, forgery, and/or distribution of unauthorized materials.

ACADEMIC INTEGRITY IN TESTING (3/2019)

POLICY: Assessment is to be completed individually with no assistance from others or use of unauthorized materials (books, notes, internet, etc.), unless otherwise explicitly stated by course faculty. All assessment materials are to remain confidential and will not be shared or transmitted.

PROCEDURES: Dates for course assessment (tests, quizzes, etc.) are identified in the course syllabus and calendar. Refer to course syllabus or course faculty for testing format (i.e. closed-book, open-booked, use of Respondus Lockdown Browser, etc). Testing formats vary by faculty member and by class. Downloading, copying, printing, taking a screen shot, or electronically transmitting any exam or quiz or part of an exam or quiz is considered academic dishonesty and will result in disciplinary action. Details of correct or incorrect responses may be shared with you for review depending on faculty preference.

Students will not be allowed to take notes, capture and/or share test/exams via electronic media or other devices at any time. Students found to have any assessment material on any recording or communication device, such as cellular telephone, Internet appliance, digital camera, audio recorder, or personal digital assistant will be considered cheating regardless of intent.

Transmission of assessment material to other students, course faculty or posted on any platform will be considered cheating. Additionally, soliciting and receiving didactic program examination and/or assessment information that uses language that is substantially similar to that used in questions and/or answers on examinations or assessments from another student, whether requested or not; and/or having unauthorized possession of any portion of or information concerning a future, current, or previously administered program examinations or assessment; and/or possessing unauthorized materials; and/or conduct that in any way compromises the integrity of USI education requirements, including, but not limited to, didactic instruction, clinical experience and competency requirements; and/or sharing answers to examination or assessment activities; and/or submitting clinical procedures that were not performed will be considered cheating regardless of intent. Students receiving assessment information as described above that was not solicited and is not reported to program officials immediately are also subject to academic integrity sanctions for cheating.

For online testing, Blackboard can sometimes be interrupted for a variety of reasons resulting in a testing session being interrupted or ended completely. It is highly recommended that students utilize a wired internet connection for testing through Blackboard. All programs on the student's computer that may utilize the internet (Internet browsers – Chrome, Internet Explorer, Safari, iTunes, App Stores, Netflix, etc.) should be closed while testing is in progress as these can interrupt Blackboard's connection and result in the test being ended prematurely. If a Blackboard interruption occurs during testing, the student should communicate with the instructor immediately regarding the interruption. The instructor, upon review, may reset an interrupted exam. Any answers submitted previously will be noted by the instructor but will have to be reentered by the student. If the student requests an additional test reset, the instructor may require a student to find an approved test proctor prior to being allowed to resume the test. If the test is not completed by the due date, the student will only receive credit for previously submitted responses.

Course faculty at any time reserves the right to require a proctor for course assessments. USI's distance education department provides information regarding exam proctoring for distance courses: <http://www.usi.edu/onlinelearning/students/examproctoring/>

CLASSROOM LABORATORY RADIATION SAFETY (3/2023)

POLICY: All students who participate in using classroom equipment in the energized laboratory must be monitored for radiation exposure including but not limited to simulation procedures, exposure experiments or quality assurance. Students must obtain permission from an instructor or licensed radiographer prior to using the energized laboratory.

PROCEDURE: All students enrolled in didactic education courses shall practice radiation safety procedures to protect themselves, other students, and faculty when initiating exposures in the energized laboratory. Students will utilize the energized laboratory to make exposures of radiographic phantoms and quality control devices to facilitate learning during radiographic positioning courses, radiographic exposure courses, and the radiation physics and quality control

course. Each student is individually responsible for implementing proper radiation protection and monitoring procedures. Students **MUST** wear a dosimeter to participate in energized laboratory exposures. Failure to wear the dosimeter in the classroom setting on days when the energized laboratory will be utilized will result in the student not being able to participate in the energized laboratory activity. Students will be responsible for all missed activities.

During energized laboratory exposures, students should exercise reasonable means to protect themselves from excessive radiation exposure. Students must not hold image receptors during any laboratory exposure. It is also inappropriate for students to make exposures on themselves.

The Radiologic & Imaging Sciences Program does utilize energized laboratory(ies) which has the capabilities to produce ionizing radiation and should not be used without the supervision of an instructor or licensed radiographer. Students practicing in an energized laboratory should never turn on the control panel or make exposures without the permission of the instructor or supervising licensed radiographer. This room will be locked at times when supervision is not available or when class is not in session. Students who wish to practice in this room during non-class hours should seek supervision and permission of an instructor.

Students should also refer to the radiation safety and dosimeter policies found within the Clinical Policies section of the Student Handbook.

CLINICAL POLICIES

RADT

UNIFORMS (rev. 04/2023)

POLICY: The student uniform shall be professional in appearance and conform to the guidelines established by the program.

PROCEDURE: The student should remember that the uniform will have a strong influence on how patients and affiliate personnel perceive the student. A student who is appropriately dressed will be more readily accepted by patients and staff and project a good image for the educational program. The Radiologic & Imaging Sciences program uniform selected by the program will be required to be worn at all clinical affiliate sites.

The University of Southern Indiana Radiologic & Imaging Sciences majors will be required to purchase their official program uniforms. The uniforms must be “Landau” or “Urbane”, Navy Blue and they can be purchased from any uniform store. Shoes should be mostly white or black, nonporous construction with closed toe and heel. Any shirt worn under the uniform top must be solid white. The only apparel that can be worn over the uniform is a navy-blue lab coat.

Uniforms are expected to fit the student appropriately and maintain coverage of student’s body during performance of clinical duties. To reduce the spread of germs, uniform pants should not drag the floor. All attire must be clean, neat, in good taste and in good repair. If a student’s attire does not meet uniform policy guidelines as determined by clinical or program representatives, the clinical preceptor will counsel the student on the uniform policy and provide instructions on how to become compliant with the policy.

IDENTIFICATION (rev. 5/2019)

POLICY: All students shall wear identification nameplates, plainly visible always while attending clinical education.

PROCEDURE: Nameplates may be purchased at the through Eagle Access for a minimal fee. Students are responsible for the cost of the nameplate. The plates are durable and should last throughout the program. If a nameplate is lost or damaged, the student should immediately purchase a replacement through Eagle Access. Nameplates are worn on the left chest over the pocket. The nameplate should not be obstructed from view by clothing or other objects. If the student chooses to utilize a badge reel for display of the nameplate, the badge reel must be facility neutral. Lanyard may not be utilized in the clinical setting.

ELECTRONIC DEVICE (rev. 1/2019)

POLICY: Students shall refrain from utilizing electronic devices for personal use included but not limited to tablets, laptops, smartphones, cellular phones, or wearable electronic devices capable of transmitting or receiving personal data or emitting signals while on duty during clinical education.

PROCEDURE: Students are not to use cell phones, tablets, computers, or wearable electronic devices while on duty in the clinical affiliate for purposes outside of clinical duties or documentation. Any observed use of electronic devices will result in a student counseling notice being issued. Students are expected to adhere to policies outlined in the Social Media policy with regards to clinical education as well as the Confidentiality policy.

PROFESSIONAL APPEARANCE (rev. 7/2022)

POLICY: All students shall maintain appropriate professional appearance and hygiene while attending clinical education. Clinical affiliate policies regarding professional appearance must be followed and are used to address appearance questions not directly addressed in this policy. Students must understand that appearance policies will differ between clinical affiliates.

PROCEDURE: An appropriate professional appearance involves more than a clean uniform. These guidelines are based on hygienic and safety principles. Personal hygiene is important in maintaining medical asepsis and avoiding offending patients or coworkers. Offensive body, breath, or smoking odors may adversely affect patient care or interactions with other healthcare professionals. Medical professionals can more effectively elicit a patient's cooperation if they have an appropriate professional appearance. Students should be remembered for their competency, efficiency, and patient care rather than the way they look. Unnecessary jewelry harbors bacteria and other contaminants. Jewelry can also be a cause of injury to the patient. Bracelets can get caught in machinery. Necklaces and loose earrings can be accidentally pulled off when moving or assisting patients. Long fingernails can be injured when operating equipment and pose the risk of accidental scratching or puncturing the skin of a patient or coworker. Nail polish can chip off causing contamination of sterile fields.

Hair: Hair should be clean, conservatively styled, and meet infection control guidelines of the clinical affiliate. Unconventional hair color cannot be the dominant color or distracting and meet the guidelines of the clinical affiliate. Hair or hair accessories must not be distracting or extreme. Hair that is longer than shoulder length should be tied back or otherwise restrained to prevent contact with patients or equipment. Hairstyles should not allow hair to fall into one's face. Having to brush hair back with the hands during a procedure interferes with the procedure and can contaminate the face.

Facial Hair: Beards, mustaches, or sideburns must be well-trimmed and neatly styled and not interfere with personal protective equipment.

Tattoos: Tattoos not covered by clothing must be small and not construed as offensive. Extreme body altering and branding must not be visible.

Jewelry: Jewelry should be limited to not more than two rings per hand and a wristwatch. Bracelets should not be worn. Necklaces should be worn **INSIDE** the top garment. Pierced body ornamentation is limited to earrings in the ears only. Tongue, nose, and eyebrow piercings must be removed.

Fingernails: Fingernails should be kept short and free of nail polish. Artificial nails are not permitted. Artificial nails include products or items added to the natural nail to give length, shape, and/or color.

Misc.: Makeup should not be used excessively. Perfumes, colognes, aftershaves, scented lotions, scented hairsprays, and other aromas may not be worn in clinical areas or during direct patient care. Eating, drinking, or gum chewing is not permitted in patient care areas. Hands should be washed or sanitized before and after each patient and always before and after eating. Students must keep themselves, their uniforms, lab coats, and shoes clean and free from smoke and other offensive odors.

Professional appearance also means meeting the program's uniform and identification guidelines.

PROFESSIONAL BEHAVIOR (3/2012)

POLICY: Students shall display appropriate professional behavior while participating in clinical education and as representatives of the radiology program, university, or clinical affiliate(s).

PROCEDURE: Students are expected to demonstrate professional behavior at all times, meaning that each student is individually responsible for his/her own actions, and must abide by the standards, procedures, policies, rules, and regulations as outlined by the program/clinical affiliates. While off campus and during clinical assignment, students represent the program, the college, and profession and are required to conduct themselves in a positive manner.

Infractions of professional behavior can include, but are not limited to: insubordination, falsification of any documents or statements, intoxication or abuse of prescription or nonprescription drugs, theft of any kind, malicious gossip, use of profane/vulgar language, failing or refusal to work/communicate with classmates or clinical personnel, displaying rude or discourteous behavior, violating HIPAA, gambling, inappropriate use of technological devices, excessive absenteeism, abandonment of clinical assignment, inattention or carelessness of clinical responsibilities (including sleeping during clinical assignment) and other misconduct as deemed by program administration or clinical affiliates.

Each clinical affiliate reserves the right to refuse a student admission or continued education at their facility resulting from a violation of the code of ethics, infractions of professional behavior, or other violations of program or clinical affiliate policies. Clinical affiliates also reserve the right to ask a student to leave their facility when patient safety is a concern.

CLINICAL PRECEPTOR (rev. 01/2020)

POLICY: A clinical preceptor shall be appointed at each clinical affiliate to assume responsibility for all students (no more than 10) assigned to the affiliate.

PROCEDURE: Clinical preceptors are ARRT registered radiographers who through education and experience meet or exceed the qualifications established by the Joint Review Committee on Education in Radiologic & Imaging Sciences. Although clinical preceptors are employed by the clinical affiliate, they are responsible for all USI students assigned to the affiliate and perform a variety of functions for the university. Most important of these is the responsibility to ensure that each assigned student's clinical education is appropriate and in compliance with program's Clinical Education Master Plan. Among the clinical preceptor's duties are: orienting students to the affiliate, scheduling room or experience assignments, monitoring student progress, maintaining attendance and other pertinent records, evaluating student achievement, counseling students on clinical concerns, and teaching clinical practice forums and other assigned courses.

Clinical preceptors are students' immediate supervisors at the clinical affiliate. Students are not employees and, consequently, do not report directly to employee supervisors. Any questions problems or concerns students have regarding their daily activity should be directed to the clinical preceptor. Changes of room scheduling or attendance must be with the clinical preceptor's knowledge and consent. Any problem or concern that cannot be resolved by the clinical preceptor should be brought to the attention of the clinical coordinator and radiology department manager.

PERFORMANCE OF CLINICAL PROCEDURES (rev. 11/2015)

POLICY: Students shall NOT attempt to position patients for any examination at a clinical affiliate until they have successfully completed appropriate classroom and/or laboratory requirements. Students will follow clinical affiliate protocols and imaging procedures.

PROCEDURE: Clinical activities of students each semester are specified on a course syllabus. The syllabus identifies the examinations that are most important for that particular session. The course syllabi are available on each clinical course's Blackboard site. Generally, the focus of student practice each semester is directed toward mastering the listed examinations while maintaining competency on those already completed. However, before students can begin practicing any radiographic examination, they must first have completed the study of the examination in a radiographic positioning class and successfully passed initial competency tests under simulated conditions. During the first year, student activities are limited, but gradually increase as more and more examinations are learned. This policy serves to protect patients from unnecessary exposure and promotes higher quality patient care.

Students while in clinical rotations in advanced imaging modalities may perform procedures related to that specialty under direct supervision after having been exposed to the specialty in a didactic course.

Student must follow the imaging procedures and protocols established by the clinical affiliate. The student will follow a reasonable course of action for performance of clinical procedures based on established protocols, current knowledge, available resources, and the needs of the patient. Students should at a minimum: establish a professional rapport with the patient; make sure the correct patient is being imaged by using two patient identifiers; appropriately question female patients concerning pregnancy; obtain and record an applicable patient history; assure the correct imaging study/part is being performed; utilize appropriate image markers; complete the imaging study per the clinical affiliate protocol; perform appropriate patient care as required by the exam or patient; and have all clinical images reviewed and approved by a qualified radiographer prior to dismissal of the patient. All levels of supervision (direct, indirect, and direct for repeats) must be followed as outlined by the supervision policy.

SUPERVISION (rev. 05/2020)

POLICY: Radiographic examinations and procedures performed by students shall take place under the appropriate supervision of qualified radiographers.

PROCEDURE: Appropriate supervision assures patient safety and proper educational practices. Students are expected to work with a variety of qualified radiographers each semester. This allows each student to benefit from the diversity of technical backgrounds and experiences that different technologists have to offer. It also provides a broad base of supervisor observations from which more accurate evaluations of student performance can be derived. A qualified radiographer is an experienced technologist who is actively registered by the American Registry of Radiologic Technologists or equivalent, registered in pertinent discipline, practicing in the profession, and holds applicable state license.

Direct Supervision-

The JRCERT defines direct supervision as student supervision by a qualified radiographer who: reviews the procedure in relation to the student's achievement; evaluates the condition of the patient in relation to the student's knowledge; is physically present during the performance of the procedure; and reviews and approves the procedure and/or image. In addition, USI's radiology program requires the qualified radiographer to review the requested order for each procedure as part of any supervision level. Until a student can demonstrate complete proficiency in a given procedure, document the proficiency on a competency test form and gain approval from the clinical preceptor/preceptor, all clinical assignments must be carried out under the DIRECT supervision of qualified radiographers. Students must be directly supervised during mobile (including mobile fluoroscopy) and surgical procedures.

Repeat images must be completed under direct supervision. The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must be physically present during the performance of a repeat image and must approve the student's procedure prior to re-exposure. This is to ensure that the repeated exposure is properly completed and further exposures will not be necessary. Students must document all repeated images within the online clinical management system (Trajecsys). The "repeat log sheet" form will be utilized to document the exam repeated, the reason for the repeat, and the name of the supervising technologist that directly supervised the repeat. All direct supervision is limited to one student per qualified radiographer.

Indirect Supervision-

After a student has documented competency in a given procedure, direct supervision is usually no longer necessary. This does not mean that the student no longer requires supervision. Students who have successfully completed competency evaluations must always remain under INDIRECT supervision on a 1:1 student/technologist ratio. All requested orders must be verified by a qualified radiographer. Indirect supervision promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. "Immediately available" is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a diagnostic procedure is being performed. The program at USI requires this availability in all areas where students participate in procedures. Calling a radiographer for help on a telephone does NOT qualify under this definition. Consequently, students may NOT perform emergency room procedures, unless a qualified radiographer is immediately available.

CLINICAL COMPETENCY EVALUATIONS (rev. 05/2023)

POLICY: All students shall document their proficiency in clinical procedures by successfully completing required competency evaluations during scheduled clinical education hours.

PROCEDURE: Each semester, students are assigned a specific number of examinations for which competency must be documented. Through appropriate scheduling of room assignments, students gain experience and proficiency in radiographic procedures. When the student feels very proficient in a procedure and can complete the procedure without assistance, a competency evaluation is requested prior to exam starting. The clinical preceptor or a qualified supervising radiographer observes the student's patient interaction, positioning, and equipment operation and

evaluates the quality of all resulting radiographs. The evaluator then completes an appropriate competency evaluation form. The completed form is submitted to the clinical preceptor for review and recording within 2 weeks of completing the competency. The clinical preceptor holds the ultimate authority in approval of any competency evaluation. The clinical preceptor reserves the right to deny and/or reinstate a failed competency. All evaluations, including those with errors noted, are turned in. Any evaluation that is unsatisfactory must be repeated after the student has had further supervised experience in the procedure.

Institutional protocol will determine the positions/projections used for each procedure. Certain required program competencies are listed as trauma or geriatric. Trauma is considered a serious injury or shock to the body. Modifications in the procedure may include variations in positioning, minimal movement of the body part, etc. An affiliate's routine protocol that has incorporated trauma projections does not necessarily make that procedure eligible for a trauma competency. Meeting the definition of trauma and/or modifications of the procedure will be the key factor in deciding if a procedure can be considered a trauma competency. Geriatric is considered a person that is at least 65 years old and physically/cognitively impaired as the result of aging.

A list of clinical competency examinations that must be passed during the program is provided to students prior to starting clinical education. This list includes examinations necessary to meet ARRT radiography clinical competency requirements. Additionally, the list includes 10 repeat competencies that are completed in the final semester prior to graduation. Each clinical course is assigned a specific number of competencies to be completed. To assist the student in achieving the required number, a list of recommended procedures is included on each course syllabus. These lists are based on student preparation level and availability of examinations. Students are not limited to the examinations on the recommended list for each semester. Other exams may be substituted provided they are included on the Required Competency List and the student has successfully completed all appropriate classroom preparation first. Since not all examinations occur with equal frequency, students are encouraged to watch for those that occur less often and take advantage of opportunities for experience when they arise during scheduled hours.

In the "Choose One" categories of the Required Program Competencies, only one of the listed options may be used to fulfill that competency listing. For students acquiring additional competencies beyond the first required within an individual examination elective (i.e. upper extremity: Choose one: clavicle, scapula, ac joints), those competencies will be reflected in the student activities section of the final evaluation but will not count toward the number of competencies required for the semester grade calculations for section C of the final evaluation. (As an example: Student demonstrates competency on a sacrum/coccyx examination. This examination will count and fulfill the spine/pelvis elective needed. In the same semester (or subsequent semester), the student demonstrates competency on a scoliosis examination. The scoliosis examination will not count as an additional spine/pelvis elective, nor count towards the total number of competencies needed for that particular clinical course. The scoliosis competency will reflect positively in the student activity section on the final evaluation as it shows the student's willingness and ability to go beyond set expectations.)

The ARRT requirements specify that certain clinical procedures may be simulated. While all procedures should be performed on patients, in certain circumstances simulations may occur. Simulations may only occur in the final semester of clinical education (RADT 455). Simulations must meet the following criteria: (a) 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;(b) the program director or clinical preceptor is confident the skills required

to competently perform the simulated task will generalize or transfer to the clinical setting, and, if applicable, the student will evaluate related images. Simulated competencies will be credited only half of the points as competencies performed on patients. Up to 5 of the required program examinations may be simulated if demonstration on actual patients is not feasible. Students may not simulate repeat competencies and may only simulate examinations that the ARRT has determined eligible for simulation. Students that fail to achieve the required competencies for the program by the end of their final clinical course (RADT 455) will not be able to complete the program as obtaining all competencies is required as part of the verification of program completion for eligibility to take the national certification examination. However, students that are passing the final clinical course (RADT 455) with a 75% or higher may take an Incomplete for the course and use the first two summer sessions to finish obtaining missing radiographic competencies. Failure to complete the remaining clinical competencies in this time frame will turn the Incomplete grade into a failing grade regardless of the final clinical course evaluation.

In circumstances where students take a leave of absence (more than 12 weeks) from the program or are reinstated in the program after any length of absence, they must redemonstrate competency in all previously obtained competencies.

Competency evaluations may be completed only during scheduled clinical course hours. Students who are employed by radiology departments may not complete competencies during work hours.

LEAD MARKERS (rev. 08/2016)

POLICY: All students shall use personalized lead markers on radiographs produced during clinical education.

PROCEDURE: Prior to clinical education, students must purchase a minimum of one set of R and L markers personalized with their three initials. All radiographs produced by a student must clearly show the student's marker. The transferring or sharing of markers is not permitted; each student must use his or her own. Students are accountable for their own lead markers. Students are responsible for replacement of any lost lead markers. It is suggested that students obtain an additional set of markers to have as a replacement in case the first set is lost. Information on the obtaining lead markers can be obtained from the clinical coordinator.

As an additional method of identification, clinical affiliates place student initials in the identification field of the radiology information systems or picture and archival systems on examinations completed. Initialing in the information systems is important for two reasons: 1) So that a radiologist can locate the person(s) who did the examination for further information. 2) If a patient is determined to have a communicable disease, all persons who have had contact with the patient can be identified.

VENIPUNCTURE & INJECTIONS (rev. 6/2012)

POLICY: Students may practice venipuncture and inject radiology contrast media in an upper extremity during clinical education under the direct supervision of a qualified radiographer, physician or nurse.

PROCEDURE: During the first Spring semester of the program, students receive didactic education and practicum training in DMS 301: Patient Care for Imaging Science Professionals. Students in this course practice venipuncture utilizing butterfly needles and intravenous catheters (angiocaths). Students will again review venipuncture in RADT 355: Advance Patient Care, which is taken during their second year of the radiology program. Upon successful completion of laboratory practice in DMS 301, students, under direct supervision of a qualified radiographer, physician, or nurse, may perform venipuncture on an upper extremity for the sole purpose of radiology contrast media injections. In addition, while under direct supervision, students may prepare syringes with contrast media, complete contrast injections started by someone else, and remove devices used for contrast injection (butterfly needles or intravenous catheters).

Students must introduce themselves to the patient as a radiology student prior to venipuncture. Students must follow appropriate venipuncture techniques and policies of the clinical affiliate. It is recommended students start with observation of venipuncture and then begin initial practice on patients with large, distended, highly visible veins. Students will document venipuncture attempts and outcomes of those events. Students may NOT try to obtain venous access more than twice on the same patient. In certain circumstances, the supervising technologist may determine that it is appropriate to allow only one attempt. Students should attempt to document a minimum of ten successful venipunctures on patients before the completion of clinical education. Students must keep documentation of venipuncture attempts as evidence of this general patient care competency in their clinical logbooks.

PATIENTS WITH COMMUNICABLE DISEASES (rev. 8/2016)

POLICY: Students shall perform examinations on patients with communicable diseases under the direct supervision of a qualified radiographer. During those examinations that require specially fit respirator masks, only those students who have undergone the specialized testing may participate. In such cases, the policies and procedures established by the USI College of Nursing and Health Professions Infection Control Program shall be followed.

PROCEDURE: Each day, during interactions with patients, all hospital personnel have some risk of exposure to communicable disease. Although confirmed cases are given special consideration, it is understood that exposure to communicable disease can occur before a diagnosis is known. In this respect, all patients must be considered as potentially infectious and subject to infection control procedures. Therefore, universal precautions should be observed at all times.

Certain examinations performed at clinical affiliates will require the student to don a specially fit respirator mask. Respirator mask fit testing and subsequent determination of respirator mask model and size is not required or provided by the program or its clinical affiliates. Only students who have undergone the specialized testing will be allowed to participate in those examinations.

Methods of infection control are studied in DMS 301 (Patient Care for Imaging Science Professionals). Direct supervision in handling cases of known communicable disease means that the qualified radiographer accompanies the student, observes all student activities and provides necessary guidance or assistance to the student. This policy applies to students at all levels of achievement and ensures that appropriate safety procedures are followed for the protection of the patient, student and others.

Please review the CNHP Handbook for the entire Infection Control policy. The handbook is located on the CNHP website listed under "About the College."

EXPOSURE TO/CONTRACTION OF COMMUNICABLE DISEASE (rev. 08/2016)

POLICY: The College of Nursing and Health Professions (CNHP) Infection Control Policy shall be utilized in cases of student exposure to or contraction of communicable disease. Students shall utilize all available methods to control the spread of infectious diseases.

PROCEDURE: The CNHP Infection Control Policy contains important information relating to risks of exposure and contraction of communicable diseases. It defines procedures to be followed in the event of exposure to blood or other potentially infectious materials and describes methods of reporting exposure or contraction of diseases. It also provides specific information on reducing the potential for exposure. Please review the CNHP Handbook for the entire Infection Control policy. The handbook is located on the CNHP website listed under "About the College." Students are expected to become familiar with the stated policies and procedures in order to avoid unnecessary risks and respond appropriately should an incident occur.

Students who contract common communicable diseases such as the flu or upper respiratory infections may pose a risk to patients, radiology personnel and fellow students. Consequently, affected students should not attend academic classes or clinical education until the contagious phase of the illness has passed. Depending on the length of absence, a physician's release may be required before returning to clinical education (see Absence from Clinical Education). An exposure incident report must be filled out and promptly returned to clinical coordinator in cases of communicable diseases acquired during clinical education.

STUDENTS AS SUBSTITUTES FOR PAID STAFF (rev. 08/2016)

POLICY: Students shall not be used by clinical affiliates to substitute for paid staff or take the responsibility or place of qualified radiographers.

PROCEDURE: Student activities at clinical affiliates are intended to promote learning of essential skills and development of competency as radiographers. These activities allow students to achieve the objectives for each clinical course. Assignments that involve taking the place of an absent employee such as a patient transporter or clerical worker are not allowed. As described under Supervision by Radiographer, all student radiographic activity must be supervised, either directly or indirectly, by qualified radiographers. **The utilization of students as substitutes for missing radiographers is, therefore, clearly inappropriate and prohibited.**

CHANNELS OF COMMUNICATION (rev. 08/2016)

POLICY: Open channels of communication shall be maintained at all times between the University of Southern Indiana, its clinical affiliates and radiologic and imaging sciences students.

PROCEDURE: In order for the program to function effectively, it is vital that the university, clinical affiliates, and students remain in continual open contact with one another. To facilitate such interaction, the program director, clinical coordinator, or faculty visits each clinical affiliate frequently to monitor student activity and meet with students in the clinical environment.

Communication between the university and clinical affiliates occurs during the visits as well as through written information, e-mail, Blackboard, and telephone conversations. In addition, the program clinical coordinator and clinical preceptors from all affiliates meet frequently to discuss issues concerning the program. Students interact with the clinical affiliates through their daily

assignments and evaluations. Clinical preceptors meet regularly with students to transmit appropriate information and hear student comments or concerns. Representatives of all groups come together for Radiologic & Imaging Sciences Program Advisory Committee Meetings (see Advisory Committee Representative).

The intent of having many channels of communication is to promote free exchange of information and avoid confusion. The expected outcome is to continually improve the program both clinically and academically. Students are encouraged to utilize all channels of communication to obtain information, avoid misunderstanding, and make their views known.

CLINICAL ATTENDANCE (rev. 02/2021)

POLICY: Attendance at all clinical education assignments is the responsibility of each student. Accurate records of attendance shall be maintained.

PROCEDURE: Students must assure that all clinical hours are completed as assigned. Prompt daily attendance is an important aspect of PROFESSIONALISM. Quality patient care requires that technologists be present as scheduled to perform examinations. As future employees, students must develop appropriate work habits to obtain and maintain employment. Students who are unable to attend clinical education for any reason or are unable to arrive on time shall call the clinical affiliate and report their absence/truancy IN ADVANCE of the occurrence. Students are expected to schedule medical and dental appointments and other personal activities during non-assigned hours.

Arrivals and departures-

Every day of attendance must be documented upon arrival and departure. Students should strive to arrive at their assigned clinical affiliate at or before their scheduled time (SEE CLINICAL COURSE HOURS POLICY) and complete their assigned hours. Daily arrival and departure times are recorded in an online clinical management system (Trajecsys). Each student is responsible for maintaining accurate time records using the online system at their clinical affiliate. Students may not clock-in/clock-out other students. Students are required to record clock-out and clock-in times when they leave/return to the affiliate's campus for personal business. When arriving after their scheduled time or not in attendance for 1-59 minutes at any point during his or her assigned time, the student will be considered truant. If the time is 60 minutes or more, the student will be considered absent. This will be verified by the student's time log record.

The first two occurrences of truancy will result in one verbal counseling notice. Third and subsequent occurrences will result in a written counseling notice. Please review the Student Counseling Notice policy and the Disciplinary Actions Policy. Students arriving at the clinical affiliate 60 minutes or more after scheduled clinical time will be considered absent (not truant) for that time. In the case of an emergency departure, if the clinical preceptor is not immediately available, the student should leave a message stating the reason for the departure and expected time of return. When the student returns to the clinical affiliate, the clinical supervisor is notified upon arrival.

Absence-

Students are considered absent if they are not in attendance during their assigned clinical hours for a period of 60 minutes or more. When a student knows in advance that they will not be able to complete assigned hours as scheduled, they are to notify the clinical preceptor PRIOR to the day of absence. Excessive unexcused absences (three or more per semester) will result in a student counseling notice. On the third absence in a semester the student will be issued a verbal counseling notice, with written counseling notices for each absence thereafter. Absences because of illness can be considered excused if the student presents a signed physician's excuse upon return to the next scheduled clinical day or within 3 days of absence, whichever comes first. Please note that excused absence(s) does not alleviate the student's responsibility of those hours. If the student feels he/she has a disability or illness that will/may require multiple absences, the student should petition for variance through the program director. To report an absence, students must call the clinical affiliate prior to the assigned arrival time. If the clinical preceptor or back-up clinical preceptor is not available, a message should be left in the radiology department. Students must also leave a message on the clinical preceptor's voice mail or send an email message. Extenuating circumstances can sometimes make it impossible for a student to call prior to the absence. When it is not possible to report the absence prior to its occurrence, then the student must call as soon as possible on the same day. Students are expected to call in EVERY DAY they are absent. Students with serious illnesses or injuries may have someone else call for them. In this circumstance, the individual reporting the absence must speak directly with the clinical preceptor. Students who have been absent for three days or more due to illness, injury or surgery must have a signed excuse from a physician in order to return to clinical.

Make-up

When absence occurs, the student is still expected to make up the missed time in excess of 8 hours. Time missed meeting the criteria for truancy will not apply. Time missed will be made up on predetermined clinical make-up days (ex.: Spring Break, Christmas Break, and holidays which the university is not holding classes but is still open). Makeup hours are assigned in the same area and at the same clinical facility in which time was missed. Hours requested that are more than two cannot be spread out over several clinical days. Students cannot complete more than ten hours a day or forty hours a week combined clinical and required radiology coursework. Students completing make up time or requesting additional clinical time should complete the "Request for Clinical Time" form at least 48 hours in advance of the requested date and time. Approval is dependent upon space, supervision, opportunity for beneficial clinical experience, and that the requested hours do not impede the clinical education of a regularly assigned student. In addition, the request must be within normal working days and hours (weekdays between 5 a.m. and 7 p.m.) and on days the University schedule indicates as open. Students should understand that approval, based upon the criteria above, will vary among clinical affiliates. When a request is granted those day(s) become(s) regularly scheduled clinical day(s) and all clinical policies will be followed. If the student does not or is unable to make-up all missed clinical time by the end of the semester, the student will receive an Incomplete for the semester. Failure to make up missed clinical time by the start of the next semester will result in the Incomplete grade turning into a Failing grade (F) regardless of their clinical evaluation or level of competency. A failing grade results in dismissal from the radiology program. Missed time of 2 hours or less can be made up on a single day near the end of the clinical semester, if scheduled with clinical preceptor.

Approved time-off-

Clinical courses will follow the University Calendar for fall and spring semesters and will begin the first day of each semester and end with the last day the final week of the semester. Summer clinical course start dates begin during the University's first summer session and is continuous until the end of the second week of August courses (see Academic Calendar policy). University summer holidays are observed. Clinical education is not scheduled during final examination weeks of the fall and spring semesters unless makeup time is required. Students are also off on all days specified as "NO CLASSES" or "UNIVERSITY CLOSED" on the official university calendar. All official university calendars, including the 5-year academic calendar, may be found on the registrar's web-page: <http://www.usi.edu/registrar/academic-calendar>. The program will not grant requests to accommodate student vacations or trips (including weddings, honeymoons, etc.). Students should schedule their vacation time for only the scheduled university breaks or breaks between semesters.

STUDENT COUNSELING NOTICE (03/2019)

POLICY: Student counseling notices are utilized to document and counsel students that have failed to comply with, abused or violated program policies or clinical affiliate policies. Student counseling notices are a reflection of professionalism and will impact a student's clinical course grade.

PROCEDURE: Student counseling notices will be used by clinical faculty and university faculty to document violations of program or clinical affiliate policies. The level of action taken is dependent on the nature of the offense and circumstances under which it occurred. Students will be counseled by faculty on the violation and the corrective action plan. Students will have the opportunity to discuss the violation and action plan and make written comments. Regardless of the nature of the evaluation, the student must sign and date the evaluation to indicate that they have seen it.

Because noncompliance with program or clinical affiliate policies is a reflection of professionalism, each student counseling notice received by a student will be reflected on the final course evaluation and in the student's course grade. Each verbal counseling notice will reflect as a two-point reduction in section B: student activity on the final course evaluation. Each written counseling notice will reflect as a four-point reduction in section B: student activity on the final course evaluation. The maximum reduction for counseling notices will not exceed 20 points. See the appendices for a sample counseling notice. Please also review the Disciplinary Actions policy as student counseling notices are also reflected in these disciplinary procedures.

CLINICAL COURSE HOURS* (rev. 11/2023)

POLICY: Clinical affiliates and university faculty determine clinical course hours. Clinical hours may vary according to each clinical affiliate assignment or clinical rotation. Students should be

aware of each clinical affiliate's established clinical hours as some may begin as early as 6:30 a.m. Central Standard Time (CST).

PROCEDURE: A full clinical day is eight hours with one 30-minute lunch (please see Lunch and Break-time allowance policy). The following are current clinical affiliate hours:

Deaconess Hospital	0730-1600 CST* & 0800-1630 CST
Memorial Hospital and Health Care Center	0630-1500 CST* (0730-1600 EST)
St. Vincent	0700-15300 CST*
Deaconess Clinic	0800-1630 CST*
Deaconess Gateway Hospital	0730-1600 CST* & 0800-1630 CST
Owensboro Health Regional Hospital	0800-1630 CST*

*The University of Southern Indiana is located in Evansville, IN and observes CST during fall and winter months and CDT during the summer months. All clinical hours are based on the current time zone Evansville is observing. Memorial Hospital and Health Care Center located in Jasper, Indiana observes Eastern Standard Time (EST).

LUNCH AND BREAK-TIME ALLOWANCE (rev. 8/2010)

POLICY: Student lunch/break allowances shall be scheduled in accordance with departmental policy of the assigned affiliate.

PROCEDURE: Clinical days of 6 hours or more will include one 30-minute break. The actual time of day when break occurs will vary between affiliates. Normally, students follow the same lunch/break schedule as the supervising radiographers. However, students will not be denied lunch/ break time.

It is not acceptable for a student to remain in a radiographic area while the supervising technologist is at lunch or on break. This is not consistent with JRCERT rules concerning student supervision. Students may, however, occasionally choose to skip their lunch or break time in order to participate in or observe some procedure of interest. If a student is to leave the clinical site during lunch/break times, the clinical preceptor should be notified. Students should also clock in and out when leaving the clinical site.

If a situation arises concerning lunch/break allowance that is not explained in this procedure, the student must consult with the clinical preceptor.

CLINICAL ROTATION EVALUATIONS (rev. 02/2020)

POLICY: Students shall be evaluated on overall clinical performance upon completion of each assigned rotation.

PROCEDURE: A qualified supervising radiographer from the assigned area evaluates students on overall performance. Over the course of a semester, evaluations are obtained from as many different radiographers as possible. All completed evaluations are submitted to the clinical preceptor. These evaluations provide information that aids the clinical preceptor in determining appropriate ratings for comprehensive midterm (progress reports) and final evaluations. All

completed evaluations are retained until graduation. These materials are confidential and are not shown to anyone other than the program director/clinical coordinator without the student's knowledge and consent.

Students must at a minimum obtain 5 clinical performance and clinical competence evaluations for each clinical course within 2 weeks of completing the clinical rotation (exception is RADT 333 where students only need three evaluations). These clinical rotation evaluations should be obtained during different clinical experiences that are scheduled throughout the semester. Students are encouraged to obtain one more than officially needed so the lowest evaluation score can be removed and not average with the other completed evaluations. A zero score is used for each missing clinical performance and clinical competence evaluation.

Students should consider clinical rotation evaluations to be positive experiences. They are intended to keep students continually aware of both strengths and weaknesses as perceived by supervising radiographers. This helps the individual to make necessary changes or improvements prior to progress reports or final evaluations.

CLINICAL EDUCATION GRADING (rev. 04/2024)

POLICY: Students shall be assigned a letter grade for each clinical education course as outlined in each clinical syllabi. Grades of "C" or better are required to continue in the program.

PROCEDURE: Each semester, including summer sessions, all students shall receive a comprehensive six-week progress report and final evaluation of their clinical performance. Each clinical syllabi contain detailed information regarding student expectations and clinical grading. Students should read each clinical syllabi at the start of the course to be familiar with the responsibilities and expectations for each course as it relates to grades. The clinical preceptor at each affiliate completes progress reports and final evaluations. The clinical grading forms are completed online, but paper samples of each form (located in the appendices) demonstrate the areas evaluated and percentage of credit assigned to each. The student activity section of the final clinical evaluation will also reflect the student's professionalism. Excessive absences and noncompliance with program policies or clinical affiliate policies reflect the student's professionalism. Please see Clinical Attendance policy and Student Counseling Notice policy.

Progress reports and final grades are discussed with students. When students are absent for their progress report, grades will be submitted and then discussed with students upon return to clinical education at a time designated by the clinical preceptor. When students are absent for their scheduled final grade evaluation, they must still review and sign off on their final grade in Trajecsys before it can be submitted. Final grades that have been signed off by the student before grades are due to the University will be recorded. Final grades that have not been signed off by the student before the time to submit grades will receive an incomplete (IN).

After each evaluation is filled in and signed by the clinical preceptor, the student may ask questions concerning the evaluation and make comments on the form. If the evaluation is unfavorable, the student should discuss it privately with the clinical preceptor to fully understand the reasoning behind poor ratings. The student may then include rebuttals to any or all portions of the evaluation. Finally, regardless of the nature of the evaluation, the student must sign the evaluation to indicate that they have seen it. All comments are made electronically. Signatures are electronically captured when the form is reviewed. Any evaluation, which is disputed in writing by a student, will be investigated by the program director and clinical coordinator. If necessary, a joint meeting between the student, clinical preceptor, and clinical coordinator

will be arranged in order to resolve the dispute. If this is not successful, the student may pursue a grievance procedure (see Program Appeals).

Incomplete grades may be given in certain circumstances. A student who receives an incomplete grade may continue in clinical education but must arrange a plan with the clinical preceptor for completion of the missing requirements prior to the beginning of the next clinical course. Failure to complete missing requirements prior to the beginning of the next clinical course will result in the incomplete grading changing into the grade earned. A student who receives any grade less than "C" may not continue in clinical education.

Failure to make up missed clinical time by the start of the next semester will result in the Incomplete grade turning into a Failing grade (F) regardless of their clinical evaluation or level of competency. A failing grade results in dismissal from the radiology program. Students who withdraw or discontinue due to inadequate grades shall be allowed to apply for readmission to the program one time (see readmission policy).

PHYSICAL EXAMINATION/IMMUNIZATION (rev. 02/2021)

POLICY: All students shall have a complete physical examination and immunization record on file prior to the beginning of professional coursework in accordance with the policies of the College of Nursing and Health Professions Infection Control Policy.

PROCEDURE: Students' health records are managed in an online system called CastleBranch. CastleBranch is a secure platform that allows students to complete their background check, drug screen, and house immunization, medical, or other required program documents. Students are required to purchase this records management system through CastleBranch.com. Students are responsible for all costs of the physical examination, immunizations (tuberculin skin test, hepatitis B, influenza, MMR, varicella, tetanus, diphtheria, and pertussis), lab tests, drug screen (10-panel), and other program requirements (national criminal background check, CPR, etc.). Students receive information on these required tests and documents upon acceptance into the program. All forms needed by the student for this process can be downloaded from Castlebranch. Students may not begin clinical education until the completed physical examination and accompanying documents have been uploaded, accepted, and approved by Castlebranch. Please refer to the College of Nursing and Health Professions Infection Control Policy (found in the College Handbook) for all required vaccinations and procedures. Please refer to the CNHP Handbook for more information on CastleBranch.

It is the responsibility of the student to make sure all immunizations, required vaccinations, and testing (ex. tuberculin skin test) are current with the radiology program. Failure to maintain these documents will result in suspension from clinical education. All missed clinical education due to suspension will be made up according to program policy concerning attendance.

INCIDENT REPORTS (rev. 08/2016)

POLICY: Incident reports shall be completed for any incident/occurrence, which is not consistent with the routine operation of the affiliate hospital or the routine care of a patient.

PROCEDURE: Incident reports are written documents that describe unusual occurrences in the clinical setting involving students, patients, hospital employees or visitors. This includes, but is not limited to, physical injuries or accidents, medication errors, illnesses and medical emergencies. Incident reports are also used to describe situations, which may result in an injury

or accident. When an incident occurs involving a student, the clinical preceptor must be notified as soon as possible. The clinical preceptor will then direct the student on the reporting procedure established by the affiliate and complete a *USI Injury or Illness Report*. The clinical preceptor will advise the clinical coordinator of the incident and forward the original USI Injury or Illness Report to the clinical coordinator. If the incident involves student exposure to possible infection, a *Student Exposure Incident Report* must be completed by the clinical preceptor.

STUDENT PREGNANCY (rev. 08/2016)

POLICY: The Radiologic and Imaging Sciences program is consistent with the Nuclear Regulatory Commission Regulation regarding the declared pregnant student. Any female student who becomes pregnant during her education in the Radiography Program has the option of whether or not to inform the Program Director or any other Program official about her pregnancy. If the student chooses to declare her pregnancy, the declaration needs to be in writing before the program can consider her pregnant. This policy will be followed despite any obvious physical condition or lack of confirming pregnancy. The declared pregnant student also has the option to withdraw a declaration of pregnancy in writing for any reason at any time.

PROCEDURE: Once notified the program director, clinical coordinator and clinical preceptor will review the student's clinical schedule to ensure that appropriate radiation safety precautions are being observed. It should be noted that the radiologic procedures and activities, do not need to be restricted, but scheduling may be altered. If the student wishes, she can be referred to the radiation safety officer and/or physicist at the assigned affiliate for counseling on appropriate radiation protection procedures and explanation of federal guidelines on prenatal exposure. The student will be referred to the Nuclear Regulatory Commission's Regulatory Guide 8.29 Appendix: "Instruction Concerning Risks from Occupational Radiation Exposure. When assigned to areas of potential radiation exposure (fluoroscopy, mobile procedures, or surgery) the student will be required to wear a wrap-around style lead apron of at least 0.50 mm lead equivalency. The student will receive every possible consideration in an effort to permit normal continuation in the program. However, the student must realize that pregnancy may result in an interruption of progress toward program completion. The student will not be terminated from the program on the basis of being pregnant. Breaks or modifications of clinical hours/rotations or didactic course work will be determined on an individual basis in a conference with program officials and the student. The student and program officials may decide on one of the following potential options:

1. Continue in the program as a full-time student with no modifications or interruption.
2. Continue in the program with modification of clinical assignments or hours. Time and rotations missed will have to be made up. Process to make up these hours will be determined during the conference.
3. Continue in the didactic portion of the program and take a leave of absence from the clinical portion. Breaks in the clinical portion will require the student to make up clinical hours and rotations missed. Process to make up these hours will be determined during the conference.
4. Withdrawal from the program and be readmit in the next accepted class. Students who withdraw from the program are required to retake the semester during which they left.

The declared pregnant student shall be adequately monitored with a dosimetry badge above the lead apron and another dosimetry badge at the waist level, under the apron. These monitoring devices shall be worn during the entire gestation period, and the maximal permissible dose, equivalent to the expectant mother from occupational exposure, shall not exceed 50 mrem per

month and/or 500 mrem/ during her gestation. The declared pregnant student will be monitored on a monthly basis.

The declared pregnant student also has the option to withdraw in writing a declaration of pregnancy for any reason at any time. It is strongly recommended that the declared pregnant student discuss their educational situation with their physician.

RADIATION MONITORING / DOSIMETER REPORTS (rev. 03/2024)

POLICY: The Radiologic & Imaging Sciences program is consistent with the Nuclear Regulatory Commission’s (NRC) instructions concerning risks from radiation exposure. All students enrolled in clinical education courses shall wear a dosimeter at all times during clinical education. Quarterly dosimeter reports are maintained by the clinical coordinator.

PROCEDURE: Whole body dosimeters are provided for students by the university. A laboratory fee is attached to each clinical course for the cost of the dosimeter. Dosimeters are to be worn at the waist at all times. When wearing a lead apron, students are to wear the dosimeter underneath the apron. Failure to wear the dosimeter in the clinical setting will result in the student being sent home or to the university to procure a dosimeter. Any time missed for this reason must be made up. Students will receive a student counseling notice for radiation safety for failure to have or wear a dosimeter badge. Students will be responsible for the cost of replacement film badges. It is suggested that students leave their dosimeters at their clinical site except when needed for energized laboratory experiments at the university.

All dosimeters are changed quarterly. It is the students’ responsibility to obtain and install a fresh dosimeter(s) at the beginning of each wear period. New dosimeters can be obtained from the clinical coordinator. Used dosimeter(s) are to be turned into the clinical coordinator at the time of exchange or at the end of the wear period. Students are also responsible for the care and maintenance of the dosimeter holder. If properly maintained, a single holder should normally last throughout the length of the educational program. If a dosimeter or dosimeter holder is lost, damaged, or accidentally exposed to radiation, it must be reported to the clinical coordinator immediately. Students may **NOT** wear any radiation monitoring badges other than their own. Students should only wear their dosimeters during clinical education. Students employed in a radiology department should wear dosimeters provided by their employer during employment hours.

Exposure records for each student are maintained by the clinical coordinator and are readily accessible. Quarterly reports shall be reviewed with any student upon their request. A yearly individual report shall be given to each student per NRC-CFR part 20. The Radiation Safety Officer will review the quarterly reports. Any dose equal to or exceeding program dose quarterly ALARA Level I limitations will require the student to have a counseling session with the Radiation Safety Officer or physicist at the assigned affiliate. Dosages recorded at or above ALARA Level II will be investigated and a counseling session will result.

Program Quarterly Dose Limitations		
	ALARA Level I	ALARA Level II
Whole Body	250Mrem	750 Mrem
Eye	750 Mrem	2250 Mrem
Extremity/Skin	2500 Mrem	7500 Mrem

Students, who declare pregnancy during the program, will be provided with a fetal monitoring badge. The fetal monitoring badge is in addition to the whole-body dosimeter and should be worn as specified by the manufacturer. These monitoring devices shall be worn during the entire gestation period, and the maximal permissible dose, equivalent to the expectant mother from occupational exposure, shall not exceed 50 mrem per month and/or 500 mrem/ during her gestation. The declared pregnant student will be monitored on a monthly basis.

An accumulative radiation exposure summary shall be maintained for all program graduates and becomes a part of the student's permanent record. Graduates or employers may request this information in order to assure continuity of radiation exposure totals. Students, who worked in a radiology department during the same time they were in the radiology program, should request that their radiation exposures be combined to accurately reflect their total exposure history.

RADIATION SAFETY (rev. 02/2020)

POLICY: All students shall practice appropriate radiation safety procedures in protecting themselves, patients, and other personnel from unnecessary exposure.

PROCEDURE: Each student is individually responsible for implementing proper radiation protection procedures. Radiation protection is studied initially as part of DMS 301 – Patient Care for Imaging Science Professionals. Further study occurs in all radiographic positioning courses (RADT 308, 313, 316, 318), all clinical courses (RADT 333, 343, 353, 435,445,455), RADT 311- Introduction to Radiographic Technology, RADT 312- Radiographic Exposure, RADT334- Radiographic Physics, RADT 335 – Radiation Biology, and reviewed in RADT 465-Directed Study in Radiologic Technology. Exposure of all individuals to radiation must be kept as low as reasonably achievable (ALARA concept). During clinical practice students should exercise reasonable means to protect themselves from excessive radiation exposure. Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care. When patients need to be held students should utilize one of the following applications of radiation safety practices: 1) have the patient assist in holding the part to be imaged or image receptor, 2) have a non-pregnant family member hold the part/patient, 3) use positioning aids to hold the patient/image receptor or 4) alternate with the supervising technologist in holding patients. Students may not expose any person to radiation without a valid requisition authorized by a physician or approved licensed practitioner. It is also inappropriate for students to make exposures on themselves. In order to avoid excessive patient exposure, all unsatisfactory radiographs produced by students must be repeated in the presence of a supervising radiographer.

The American Society of Radiologic Technologists (ASRT) recognizes the concept of ALARA to include energies used for magnetic resonance. Students in the radiology program participate in clinical education in magnetic resonance imaging (MRI) starting their first fall semester of clinical education and complete an average of 100 hours prior to graduation. Students watch an MRI safety video and take a safety examination prior to starting clinical education. Students also receive MRI safety training in RADT 411- CT/MR Physics and Instrumentation prior to engaging in education in this clinical area. During RADT 411 students watch an MRI safety video, receive over three hours of MRI safety lectures/training, take and must pass an MRI safety test. Upon admission to the program, students complete a MRI screening questionnaire (example in appendix). In addition, students are screened at the clinical affiliate prior to their MRI educational experiences. Students' participation in this clinical area is determined by review of their screening

questionnaire and possible discussion with program officials. Students unable to fully participate in this clinical rotation will have an alternate clinical rotation assigned. Pregnant students will not be allowed in the MRI scan room when the radiofrequencies are being utilized. Students are required to notify the program when their responses on the MRI screening questionnaire have changed.

TELEPHONE CALLS

POLICY: Students shall use public telephones to make personal calls from clinical affiliates. Students shall not receive personal calls at the clinical affiliate except in case of emergency.

PROCEDURE: Students may not use affiliate phone lines for personal business. Public phones may be used during lunch or break periods. Students should advise friends and relatives not to call the clinical affiliate unless there is a legitimate need. Cell phone usage (including texting) is prohibited; except during non-clinical times and is limited to designated areas.

PARKING

POLICY: Students shall park at clinical affiliates in designated areas.

PROCEDURE: The clinical preceptor will inform students of designated parking areas.

SMOKING

POLICY: Students shall adhere to smoking regulations established by the clinical affiliate.

PROCEDURE: All clinical affiliates prohibit smoking anywhere on hospital properties. Smoking anywhere on hospital or clinic properties will result in a verbal or written counseling.

FIT FOR WORK (04/2014)

POLICY: Students are considered fit-for-work when they are free from fatigue, stress or adverse medical conditions. In addition, students are expected to be free from the effects of alcohol, illicit drugs, or prescribed medication that hinders performance. Being fit for work ensures the health, safety and welfare of the student, the patients they take care of and others.

PROCEDURE: The clear expectation is that all students will arrive for and return to work/clinical in a competent state and are not affected by drugs and/or alcohol during clinical practice. Drug and/or alcohol policies of the University are to be followed.

This policy shall also be applied in situations when a student is restricted in the performance of their regular duties due to personal injury, illness or medical condition. Students after injury or illness may return to clinical when free from restrictions. Students that have been injured and seen by a physician can return to clinical practice upon submission of a signed licensed practitioner's release without restrictions. Students should review the "Essential Functions" for students in or entering in programs of the College of Nursing and Health Professions to ensure they are able to perform the essential functions, with or without reasonable accommodation, when returning to clinical education.

RADOT

APPENDICES

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RADIOLOGIC & IMAGING SCIENCES PROGRAM**

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**UNIVERSITY OF SOUTHERN INDIANA
RADIOLOGIC & IMAGING SCIENCES PROGRAM**

RADIOLOGY TEXTBOOKS

AUTHOR	TITLE	COURSE
Torres	Basic Medical Techniques & Patient Care In Imaging Technology	DMS 301
Bontrager	Textbook of Radiographic Positioning and Related Anatomy	RADT 308,313,316,318
Carroll	Radiology in the Digital Age	RADT 311, 312, 412
Bontrager	Textbook of Radiographic Positioning and Related Anatomy	RADT 333, 343,353,435,445,455
Trajecsys	Trajecsys* Online Clinical Management System	
Westbrook, Roth, Talbot Romans	MRI in Practice Computed Tomography for Technologists	RADT 411
Bushong	Radiologic Science for Technologists	RADT 334
Snopek	Fundamentals of Special Radiographic Procedures	RADT 337
Statkiewicz-Scherer	Radiation Protection in Medical Radiography	RADT 335
Madden Madden	Sectional Anatomy Review Introduction to Sectional Anatomy	RADT 413, 415
Jensen/Peppers Torres Huff	Pharmacology and Drug Administration Basic Medical Techniques & Patient Care in Imaging Technology ECG Workout: Exercises in Arrhythmia Interpretations	RADT 355
Martensen Martensen	Image Analysis Radiographic Image Analysis Workbook	RADT 425
Carter, Veale	Digital Radiography and PACS	RADT 427
Eisenberg	Comprehensive Radiographic Pathology	RADT 345
McConnell	Umiker's Management Skills for the New Health Care Supervisor	RADT 424
Saia	Lange Q & A Radiography Examination & Radiography Prep	RADT 465
Fadiman	A Spirit Catches You and You Fall Down	RADT 491

Faculty may request new textbooks for their courses. Student will be informed of any changes. The textbooks for each class will be on the course syllabus. The University Bookstore will have the most current textbook edition for students to purchase. Students will use textbooks purchased for other courses and will not be expected to purchase updated versions if they become available after their initial text purchase once in the program.

*Trajecsys is an online clinical education management system that is used to record clinical education. Students are required to purchase the service through the company or bookstore. The service is paid only once and is good for the entire length of clinical education or 2 years.

CURRICULUM PLAN (REV. 04/2024)

Spring Second Year				Semester hour totals			
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
DMS 301	Patient Care for Imaging Science Professionals	Face-to Face	2	25	0	0	
RADT 308	Introduction to Radiographic Positioning	Face-to Face	3	25	30	0	
RADT 311	Introduction to Radiographic Technology	Face-to Face	3	37.5	0	0	
RADT 427	Radiology Department Information Systems	Distance Education	3	37.5	0	0	
KIN 192			1	15	0	0	
Total Didactic hours weekly	12	Total clinical Hours weekly	0	Total didactic and clinical hours weekly		12	

Summer Second Year				Semester hour totals			
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 333	Clinical Practicum I	Off-campus/ In-person	2	0	0	224	
RADT 312	Radiographic Exposure	Face-to Face	3	37.5	15	0	
RADT 313	Radiologic Procedures I	Face-to Face	3	37.5	30	0	
Total Didactic hours weekly	6	Total clinical Hours weekly	16	Total didactic and clinical hours weekly		22	

Fall Third Year				Semester hour totals			
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 343	Clinical Practicum II	Off-campus/ In-person	2	0	0	240	
RADT 316	Radiographic Procedures II	Face-to Face	3	25	30	0	
RADT 334	Radiographic Physics	Face-to Face	3	37.5	0	0	
RADT 412	Advanced Radiographic Exposure & Mobile Radiography	Face-to Face	3	37.5	0	0	
RADT 411	CT/MRI Physics & Instrumentation	Face-to Face	3	37.5	0	0	
Total Didactic hours weekly	12	Total clinical Hours weekly	16	Total didactic and clinical hours weekly		28	

Spring Third Year				Semester hour totals			
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 353	Clinical Practicum III	Off-campus/ In-person	2	0	0	240	
RADT 337	Introduction to Invasive Imaging Procedures	Face-to Face	3	37.5	0	0	
RADT 318	Radiographic Procedures III	Face-to Face	3	25	30	0	

RADT 335	Radiation Biology	Face-to Face	2	25	0	0	
RADT 413	CT/MRI Procedures	Face-to Face	3	37.5	0	0	
Total Didactic hours weekly		11	Total clinical Hours weekly		16	Total didactic and clinical hours weekly	27

Summer Third Year			Semester hour totals				
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 435	Clinical Practicum IV (24 hr./week)	Off-campus/ In-person	3	0	0	336	
RADT 415	CT/MRI Procedures II	Face-to Face	3	37.5	0	0	
Total Didactic hours weekly		3	Total clinical Hours weekly		24	Total didactic and clinical hours weekly	27

Fall Fourth Year			Semester hour totals				
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 445	Clinical Practicum V (24 hr./week)	Off-campus/ In-person	3	0	0	336	
RADT 345	Radiographic Pathology	Face-to Face	3	37.5	0	0	
RADT 425	Radiographic Critique	Face-to Face	3	37.5	0	0	
RADT 424	Radiologic & Imaging Sciences Practice & Management	Distance Education	3	37.5	0	0	
Total Didactic hours weekly		9	Total clinical Hours weekly		24	Total didactic and clinical hours weekly	33

Spring Fourth Year			Semester hour totals				
COURSE	TITLE	COURSE DELIVERY MODE	CREDIT	CLASS	LAB	CLINICAL	
RADT 355	Advanced Patient Care for Imaging Sciences	Face-to Face	3	37.5	0	0	
RADT 455	Clinical Practicum VI	Off-campus/ In-person	3	0	0	336	
RADT 491	Integration of Advanced Imaging Concepts	Face-to Face	3	37.5	0	0	
EEG	Global	Face-to Face or Distance Education	3	37.5	0	0	
Total Didactic hours weekly		9	Total clinical Hours weekly		24	Total didactic and clinical hours weekly	33

TOTALS FOR BS IN RADIOLOGIC & IMAGING SCIENCES (not including pre-requisite courses) =
79 CREDITS, 762.5 CLASS HOURS, 75 LAB HOURS, 1680 CLINICAL HOURS

REQUIRED PRE-RADIOLOGY COURSES

COURSE #	COURSE NAME	SEMESTER HOURS
ENG 101	Rhetoric & Composition I	3
ENG 201	Rhetoric & Composition II	3
MATH 114/215/230	Choose an approved course listed	3
BIOL 121	Anatomy & Physiology I	4
BIOL 122	Anatomy & Physiology II	4
Social Sciences	Choose an approved course	3
HP 115	Medical Terminology * offered Distance Education only	2
CMST	Choose CMST 101 or CMST 107	3

SCIENCE	PHYS 101: Intro. to Physics	3
Social Inquiry	Choose an approved course	3
World Languages and Culture	Choose an approved course	3
Ways of knowing	Choose a creative& aesthetic expression OR History OR World Languages & Culture	3
Ways of Knowing	HP 356: Ethics & Healthcare in Pluralistic Soc.	3
RADT 196	Orientation to Radiologic & Imaging Sciences	2
UNIV 101	Freshman Seminar	1
	TOTAL	43

ALL RADT, DMS AND ENG 101, ENG 201, BIOL 121, BIOL 122, PHYS101, RADT 196, HP 115 AND MATH COURSE MUST BE COMPLETED WITH A GRADE OF "C" OR BETTER.

SEMESTER COMPETENCY MASTERY BY EXAM (rev. 01/2022)

SEMESTER COMPETENCY MASTERY BY EXAM 09/2021 – EFF. 1/2022

Clinical competencies should be completed during the course of the student’s clinical education*. Suggested clinical competencies for each clinical course can be found on each clinical course syllabi. Competency completion should be recorded by the student on this form. Clinical instructors will verify completion of clinical competencies utilizing this form. It is the student’s responsibility to maintain accurate competency records. The student’s copy of each competency should be placed in this section of the clinical documents book.

CURRENT	Eligible for Simulation †	Date Completed	Verified By:
Semester #1 (1st Summer)	Maximum 5	RADT 333	
1. Chest (routine adult)			
2. Abdomen supine (KUB)			
3. Upper Extremity (finger or thumb)	✓		
4. Abdomen(decubitus)	✓		
5. General Patient Care(GPC): Transfer of patient			
6. GPC: Care of Patient Medical Equipment			
Semester #2 (1st Fall)		RADT 343	
1. Urinary: Choose one(Intravenous Urography, Cystography, cystourethrography)			
2. Abdomen upright	✓		
3. Upper Extremity (hand)			
4. Upper Extremity (wrist)			
5. Upper GI Series (single or double)			
6. Geriatric** Chest			
7. GPC: Sterile and Medical Aseptic Technique			
Semester #3 (1st Spring)		RADT 353	
1. Lower Extremity (knee)			
2. Upper extremity (forearm)			
3. Upper extremity (elbow)			
4. Upper extremity (humerus)	✓		
5. Lower extremity (foot)			
6. Lower extremity (ankle)			
7. Lower extremity (tibia/fibula)	✓		
8. Lower Extremity (toe)	✓		
9. GPC: Vital signs: blood pressure			
10. GPC: Vital signs: pulse			
Semester #4 (2nd Summer)		RADT 435	
1. Barium enema (single or double)			
2. Upper extremity or lower ext.(age 6 or younger)	✓		
3. Upper Extremity: Shoulder			
4. Portable chest (adult)			
5. Lower extremity (femur)	✓		
6. Pediatric Abdomen	✓		
7. Pelvis			
8. Upper Extremity Elective: choose one (scapula or ac joints)	✓		
9. Hip			
10. Chest AP (wheelchair or stretcher)			
11. Upper Extremity (clavicle)	✓		
12. GPC: Vital signs: respiration			
13. GPC: Vital signs: pulse oximetry			

	<i>Eligible for Simulation †</i>	<i>Date Completed</i>	<i>Verified By:</i>
Semester #5 (2nd Fall)	Maximum 5	RADT 445	
1. Fluoroscopy G.I. Elective: choose one (small bowel or esophagus) *cannot be MBS			
2. Chest (age 1-6)	✓		
3. Cross-table lateral hip- Horizontal beam	✓		
4. Ribs	✓		
5. Trauma*** Shoulder or humerus (Scapular Y, Transthoracic, or axial)			
6. Head Elective #1 choose one: (skull, sinuses, facial bones, orbits, , nasal bones, mandible, TMJ)	✓		
7. Lower Extremity Elective: choose one (patella or os calcis)	✓		
8. Portable Abdomen (adult)			
9. Cervical spine			
10. Thoracic spine	✓		
11. Lumbar spine			
12. Geriatric upper extremity or lower extremity**			
13. GPC: Venipuncture			
14. GPC: Vital signs: temperature			
Semester #6 (2nd Spring)		RADT 455	
1. Trauma*** Lower Extremity (nonhip)			
2. Head Elective #2 choose one: (skull, sinuses, facial bones, orbits, , nasal bones, mandible, TMJ)	✓		
3. Fluoroscopy Elective: Choose one: (Myelogram, Arthrogram, ERPC, Hysterosalpinography)	✓		
4. C-arm procedure (requiring manipulation to obtain more than one projection)	✓		
5. Surgery C-arm procedure (requiring manipulation around a sterile field)	✓		
6. Portable Upper or Lower Extremity (adult)			
7. Cross table (horizontal beam)- lateral spine	✓		
8. Thorax elective: choose one (soft tissue neck, sternum, or SC joints)	✓		
9. Trauma*** Upper Extremity (nonshoulder)			
10. Spine/Pelvis Elective: choose one (sacrum/coccyx, scoliosis, or SI Joints)	✓		
11. Geriatric hip or spine**			
10 Recheck Competencies Required - to be completed in RADT455			
1. Upper Extremity			
2. Trauma*			
3. Urinary/Abdomen			
4. Pediatric Exam			
5. Portable			
6. Lower Extremity			
7. GI Series			
8. Vertebral Column			
9. Thorax			
10. Surgical Procedure			

Mandatory "General Patient Care" competencies have been placed on the semester competency list by Clinical Course. This list is for your reference.

<input type="checkbox"/>	ID	Order	Item Name
<input type="checkbox"/>	1929307	up down	Effective Utilization of Equipment Prepares room/equipment for exam/procedure. Use correct SID Use correct projection of central ray. Select proper image receptor/field size and utilize correctly. Apply L/R marker correctly. Restrict primary xray beam correctly. Utilize bucky correctly (table/aux.) Utilize ancillary equipment appropriately. Operate specialized equipment correctly, if required. Select appropriate imagin/radiographic technique
<input type="checkbox"/>	1929308	up down	Accurate Positioning Positions patient correctly. Center image receptor correctly. Center central ray correctly.
<input type="checkbox"/>	1929309	up down	Appropriate Patient Care Assesses patient's abilities and condition Interact with patient respectfully and courteously. Acquire a complete history. Prepare patient and give clear, appropriate instructions. Elicit cooperation and respond to patient's needs. Provide for patient's physical safety and comfort. Protect patient's privacy and modesty. Shield patient from unnecessary radiation exposure. Safeguard patient's personal belongings.
<input type="checkbox"/>	1929310	up down	Competent Performance or Exam/Procedure Identify correct patient Verify examination ordered Complete exam/procedure in an organized manner. Complete exam/procedure in a reasonable time. Demonstrate knowledge and self-confidence. Complete all paperwork correctly. Demonstrates principles of ALARA. Evaluates digital exposure indicator values. Demonstrated knowledge of image processing for quality. Demonstrates knowledge of health records information. Follow through on exam completion/patient dismissal.
<input type="checkbox"/>	1929311	up down	Acceptable Quality of Radiographic Images Appropriate contrast, brightness, spatial resolution & digital exposure indicator values. Anatomy centered, aligned, and visualized correctly. All images clearly labeled and identified.
<input type="checkbox"/>	2941263	up down	This exam was completed without any repeats?
<input type="checkbox"/>	711841	up down	Is the Student Capable of Performing This Exam without Direct Assistance?

CLINICAL EDUCATION COMPETENCY EVAL. FORM 1

Categorized Items	
Template:	RADT 445 Evaluation <input type="button" value="v"/> <input type="button" value="🔍"/> Category: Clinical Performance Evaluation
Item ▲▼	
1. Dependability in working conditions.	Ques
2. Initiative	Ques
3. Organization of work area.	Ques
4. Manipulation of equipment.	Ques
5. Positioning skills	Ques
6. Formulating/adjusting technique factors	Ques
7. Ability to critique images	Ques
8. Radiation protection(patient, self, others)	Ques
9. Patient Care	Ques
10. Application of knowledge/retention	Ques
11. Problem solving skills/critical thinking	Ques
12. Professionalism (development & growth)	Ques
13. Communication skills-patient rapport	Ques
14. Interdisciplinary professionalism & communication	Ques
<input type="button" value="Add New..."/>	

CLINICAL PERFORMANCE/COMPETENCY FORM 1

Progress Report ✕

Subject:

COURSE:

RADT

Clinical Rotation Evaluations (radiographer)

Student Activity

Competencies Achieved

Completion of Paperwork

Areas of Strength

Recommendations for Improvement

STUDENT'S PROGRESS AT MIDTERM

Denote student progress at midterm: BELOW AVERAGE AVERAGE ABOVE AVERAGE 💬

Clinical Instructor's Signature & Student Electronic Signature (via comment):

Student Comments

Check to complete later, then click "Submit" Approved Not Approved

Submit

CLINICAL EVALUATION PROGRESS REPORT FORM 1

Clinical Evaluation - FINAL

Instructions

Please use two lines in each of the first four categories to select the student's score. The top line in each category is the "tens" line and the second line is the digits line. For a score of 15, select 10 on the top line and 5 on the second line. For a score of 20, please select 20 on the first line and 0 on the second line. PLEASE NOTE MAXIMUM SCORING PER CATEGORY.

Please enter course for which this evaluation is being completed:

Clinical Rotations Evaluations

Clinical Rotations Evaluations - Select **10s** score for this item on this line and the digits score on next line. (For example, if you score student at 15 on Clinical Rotations Evaluations, select 10 on this line and select 5 on the next line. If you score at student at 8 on Clinical Rotations Evaluations, select 0 on this line and 8 on the next line.) **PLEASE NOTE THAT THE MAXIMUM SCORE FOR CLINICAL ROTATIONS EVALUATIONS IS 15 POINTS (Combined line scores).**

 0 10

Select **digits** score for Clinical Rotations Evaluations on this line.

 0 1 2 3 4 5 6 7 8 9

Student Activity

Student Activity - Select **10s** score for this item on this line and the digits score on next line. (For example, if you score student at 32 on Student Activity, select 30 on this line and select 2 on the next line. If you score at student at 9 on Student Activity, select 0 on this line and 9 on the next line.) **PLEASE NOTE THAT THE MAXIMUM SCORE FOR STUDENT ACTIVITY IS 35 POINTS (Combined line scores).**

 0 20 30

Select **digits** score for Student Activity on this line.

 0 1 2 3 4 5 6 7 8 9

Competencies Achieved

Competencies Achieved - Select **10s** score for this item on this line and the digits score on next line. (For example, if you score student at 32 on Competencies Achieved, select 30 on this line and select 2 on the next line. If you score at student at 8 on Competencies Achieved, select 0 on this line and 8 on the next line.) **PLEASE NOTE THAT THE MAXIMUM SCORE FOR COMPETENCIES ACHIEVED IS 40 POINTS (Combined line scores).**

 0 20 30 40

Select **digits** score for Competencies Achieved on this line.

 0 1 2 3 4 5 6 7 8 9

Completion of Paperwork/Projects

Completion of Paperwork/Projects - Select **10s** score for this item on this line and the digits score on next line. (For example, if you score student at 10 on Completion of Paperwork/Projects, select 10 on this line and select 0 on the next line. If you score at student at 8 on Completion of Paperwork/Projects, select 0 on this line and 8 on the next line.) **PLEASE NOTE THAT THE MAXIMUM SCORE FOR COMPLETION OF PAPERWORK/PROJECTS IS 10 POINTS (Combined line scores).**

 0 10

Select **digits** score for Completion of Paperwork/Projects on this line.

 0 1 2 3 4 5 6 7 8 9

Completion of Required Clinical Hours

Completion of Required Clinical Hours - Please select Yes or No.

 No Yes

Check to complete later, then click "Submit"

Approved Not Approved

CLINICAL EVALUATION FINAL FORM 1

University of Southern Indiana Radiologic and Imaging Sciences
Student Schedule Change Request Form

Name: _____ Date: _____

Request: _____

Reason: _____

Approval is dependent upon reason for schedule change, space, supervision, opportunity for beneficial clinical experience, and that the change of hours does not impede the clinical education of a regularly assigned student. In addition, the change of schedule request must be within normal working days and hours (weekdays between 5 a.m. and 7 p.m.). Students should understand that approval, based upon the criteria above, will vary among clinical affiliates. The program will not grant clinical schedule changes to accommodate student vacations or trips (including weddings, honeymoons, etc.). Please refer to the Change of Clinical Schedule policy in the Student Handbook for the entire policy/procedure.

=====

Clinical Instructor Response

Granted

Denied

Reason Denied/Other Comments: _____

Clinical Instructor Signature

Date

Student Schedule Change Request Form 1

University of Southern Indiana Radiologic and Imaging Sciences Student Counseling Notice

Purpose: Verbal Counseling Notice Written Counseling Notice

Date Issued: _____ **Name:** _____

Clinical Site: _____

Date, time, location of occurrence: _____

VIOLATIONS OF STUDENT HANDBOOK/ PROGRAM POLICY:

- | | | |
|---|---|--|
| <input type="checkbox"/> Dress code | <input type="checkbox"/> Repeating radiographs | <input type="checkbox"/> Lunch and break time allowance |
| <input type="checkbox"/> Professional appearance/behavior | <input type="checkbox"/> Parking | <input type="checkbox"/> Radiation safety |
| <input type="checkbox"/> Lead markers | <input type="checkbox"/> Performance of clinical procedures | <input type="checkbox"/> Telephone calls/cell phone usage |
| <input type="checkbox"/> Injections | <input type="checkbox"/> Professional ethics | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Change of clinical schedule | <input type="checkbox"/> Clinical attendance | <input type="checkbox"/> University/clinical site policies |
| <input type="checkbox"/> Other _____ | | |

Summary of Violation/Performance Deficiency: _____

Corrective Action Plan: _____

You are receiving formal counseling to bring to your attention the severity of this situation. Failure to correct this behavior and/or further violation of program policy will result in additional disciplinary action as stated in program policy.

Student Comments: _____

The above violation/performance deficiency has been discussed with me by my clinical instructor. I understand the contents and acknowledge and understand the corrective action required. I also acknowledge and understand the potential consequences of non-compliance.

Clinical Instructor _____	Date _____	Student signature _____	Date _____
---------------------------	------------	-------------------------	------------

Has student been counseled previously this semester? <input type="checkbox"/> Yes (date: _____) <input type="checkbox"/> No	
If yes, for similar violation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Explanation or comments: _____	

W= clinical instructor Y= program director P= student

Rev. 7/2009

**University of Southern Indiana Radiologic and Imaging Sciences
Student Counseling Notice**

rev112105

Date Issued: _____

Name: _____

Date, time, location of occurrence: _____

VIOLATIONS OF STUDENT HANDBOOK/PROGRAM POLICY

- | | |
|--|--|
| <input type="checkbox"/> University policies | <input type="checkbox"/> Professional ethics |
| <input type="checkbox"/> Tardiness | <input type="checkbox"/> Cheating |
| <input type="checkbox"/> Disruptive behavior | <input type="checkbox"/> Unexcused absence |
| <input type="checkbox"/> Other | |

Summary of Violation/Performance Deficiency:

Corrective Action Plan:

You are receiving formal counseling to bring to your attention the severity of this situation. Failure to correct this behavior and/or further violation of program policy will result in additional disciplinary action, as stated in program policy.

Student Comments:

The above violation/performance deficiency has been discussed with me by my clinical instructor. I understand the contents and acknowledge and understand the corrective action required. I also acknowledge and understand the potential consequences of non-compliance.

Instructor Date

Student signature Date

Program Director Date

UNIVERSITY STUDENT COUNSELING FORM 1

University of Southern Indiana Radiologic & Imaging Sciences
Disciplinary Actions Policy
Verbal Warning

Dear Student,

You are receiving formal notice that you have violated an established policy or procedure of the program, university, or clinical affiliate. You have received a student counseling notice for the violation identified below which subjects you to a verbal warning according to the Disciplinary Actions Policy. The next violation/offense will subject you to a written warning with probation. Further violations can lead to suspension or dismissal from the program. It is strongly advised that you review the Disciplinary Actions Policy in your student handbook.

Student Name: _____

Summary of Violation:

Violation Date: _____

I acknowledge that this notice serves as a verbal warning for the Disciplinary Actions Policy. I understand and acknowledge the potential consequences of non-compliance with this policy.

Student Signature

Date

Instructor Signature

Date

Witness Signature

Date

W-instructor Y-program director P- student
--

10/06

DISCIPLINARY ACTIONS VERBAL WARNING FORM 1



University of Southern Indiana
MRI SAFETY QUESTIONNAIRE

Student's Name: _____ **Student's ID:** _____

The American Society of Radiologic Technologists (ASRT) recognizes the concept of ALARA to include energies used for magnetic resonance. Students in the radiology program participate in clinical education in magnetic resonance imaging (MRI) starting their first fall semester of the program and complete an average of 100 hours prior to graduation. Students receive MRI safety training in RADT 411- CT/MR Physics and Instrumentation prior to engaging in education in this clinical area.

The MRI scan room contains a VERY strong magnet. You must complete this confidential screening tool to determine if you are able to participate in this portion of clinical education. Students who are unable to enter the MRI scan room will have an alternative clinical experience assigned. Please answer these questions carefully and let the clinical coordinator know if you have any questions or concerns.

Please place a check in the yes or no box for each question below.

	Yes	No
Have you ever had surgery on your brain?		
Do you have anything implanted in your brain?		
Do you have aneurysm clips in your brain or abdomen?		
Have you ever had surgery on your heart?		
Are there any stents, valves or shunts in your body?		
Have you ever had a pacemaker or defibrillator in your body / brain?		
Have you ever had surgery on your inner ear?		
Are there any medical devices implanted in either ear?		
Do you have any pain pumps or insulin pumps in your body?		
Do you have any stimulators, coils, filters or ports in your body?		
Have you had any surgery on your eyes?		
Have you had any surgery in past 8 weeks?		
Is there <u>anything</u> implanted inside your body? <i>Some examples are: Examples may include: joint, pin, screw, plate, rod, cage, wire, lens implant, clip, penile implant, IUD, staple, mesh, bullet, BB, shrapnel</i>		
Have you ever had metal in your eyes from welding, grinding, sheet metal work or sharpening lawn mower blades?		
Do you wear any hearing devices or dentures or partial plates held in by a magnet?		

My signature below indicates that I have answered the questions above to the best of my knowledge and have had the opportunity to ask questions regarding my participation in clinical education in the MRI environment. I acknowledge that it is my responsibility to communicate with program and clinical officials if I need to make a change regarding my answers on this form.

_____	_____
Student	Program Representative
_____	_____
Date	Date

MRI Student Screening form 1

Student Education Consent and Confidentiality Form

(Indicate by placing your initials on the spaces at the left of each statement.)

_____ I consent to take part in student to student education experience, including as a subject.

_____ I consent to take part in student to student training but not as Medical Education Model (MEM). I have discussed my preference not to participate as a subject with my course instructor.

I will treat my fellow students professionally and with respect and sensitivity at all time.

I will keep confidential any information revealed or discovered during this training.

Signature

Printed Name

Date: _____

Figure 1 Student Education Consent and Confidentiality Form

CODE OF ETHICS

The Code of Ethics forms the first part of the *Standards of Ethics*. The Code of Ethics shall serve as a guide by which Registered Technologists and Candidates may elevate their professional conduct as it relates to patients, healthcare, consumers, employers, colleagues, and other members of the health care team. The Code of Ethics is intended to assist Registered 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.

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
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.
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.
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.
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.
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.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs serves in accordance with an accepted standard of practice, and demonstrates expertise in minimizing the radiation exposure to the patient, self and other members of the health care team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The radiologic technologist respect 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.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing educational and professional activities, sharing knowledge with colleagues and investigating new aspects of professional practice.

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