



Radiologic Sciences Program
Policy and Procedures Manual

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General Program Information

The Radiologic Sciences Program is designed to integrate didactic education, demonstration, supervised lab practice, clinical experience, and image analysis to provide the students with a well-rounded education in the radiographic arts and sciences.

The radiologic sciences lab provides an opportunity for the student to apply concepts learned in the classroom using realistic simulated scenarios. The student will be assessed by demonstrating proficiency in various radiologic procedures by positioning on fellow classmates, instructors, or phantoms.

In the first summer session students visit the clinical sites to observe the practical operation of the department and are oriented to the layout of the facility. The student must complete the following by the end of the summer semester in order to participate in clinic beginning in the fall; CPR certification, clinical orientation modules, health examination and documentation, immunizations, background, drug and alcohol checks, and releases.

The clinical coordinator, clinical instructor and clinical preceptors evaluate student progress in the clinical setting. The preceptor completes performance evaluations at the end of each student's rotation at each clinical site. The clinical coordinator or clinical faculty observe the students in the clinical setting each week. Students must maintain and submit records of the procedures done, verification of attendance for each week, and complete image analysis, and competency evaluations as process requirements are met for these studies.

Evaluation in each of the didactic course is based on an average of test and/or quiz grades, papers or projects, and a final exam. In some cases labs take the place of, or supplement, quiz grades. Examinations are done frequently for most courses, usually on a unit-by-unit basis.

Accreditation

Regional Accreditation

The Commission on Higher Education of the Middle States Association of Colleges and Secondary Schools accredits Chesapeake College, a regional community college. The College is approved by the Maryland State Board for Higher Education and is authorized to grant the degree of Associate in Applied Sciences.

Programmatic Accreditation

The radiologic sciences program meets the accreditation standards for radiography programs assured by the Joint Review Committee on Education in Radiologic Technology (JRC/ERT).

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

Program Sponsorship

Chesapeake College and the University of Maryland Medical Systems (Shore Health Systems at Easton, Cambridge, the Diagnostic and Imaging Center, Chestertown, Medical Pavilion at Queenstown, and Emergency Center at Queenstown), The Orthopedic Center, Shock Trauma in Baltimore, as well as Luminis Health have contracted to provide students with clinical instruction, supervision and practice. Evidence will be provided through objective, competency based education, of student mastery of basic radiographic skills. This is a cooperative effort involving the participation of college faculty, guest lecturers, and the staff of the radiology departments.

Chesapeake College has the primary responsibility for curriculum planning and the selection of course content. The college appoints faculty, sets admissions criteria, and admits qualified students to the program. In affiliation with hospital representatives it coordinates the didactic and clinical portions of the program.

Program Vision

Our vision for the radiography program at Chesapeake College is to empower our students to become compassionate, skilled, and innovative professionals who use their talents to improve the lives and health of individuals in their communities. We strive to create a dynamic learning environment that fosters critical thinking, ethical practices, and lifelong learning, and to graduate students who are prepared to excel in their careers and make meaningful contributions to the field of radiography.

Program Mission

The Chesapeake College Radiologic Sciences Degree Program prepares students to deliver quality radiologic services and patient care, with the goal of qualifying them to sit for the ARRT certifying examination and obtain Maryland licensure as a radiographer.

Program Goals:

Upon completion of the program students will:

1. Demonstrate clinical competency.
2. Develop and apply effective critical thinking skills.
3. Demonstrate the ability to communicate effectively.

Student Learning Outcomes:

- 1.1 Students will apply appropriate radiation protection standards
- 1.2 Students will demonstrate proper positioning and technical factors
- 2.1 Students will critically analyze images for diagnostic quality
- 2.2 Students will solve problems in the field of radiology through critical analysis
- 3.1 Students will demonstrate effective oral communication as part of the healthcare team
- 3.2 Students will demonstrate effective written communication skills in the didactic setting

Admissions Process

New students wishing to apply to the radiologic sciences program must first contact the admissions department and apply to Chesapeake College. The admissions department can be reached at admissions@chesapeake.edu. Existing students must contact an advisor and change your major to Radiologic Sciences. The advising department can be reached at advising@chesapeake.edu.

Readmission Policy

Students admitted to the radiologic sciences must pass each course with a grade of “C” or better in order to continue in the program. The student is responsible for demonstrating clinical and didactic competency. Competency must be demonstrated for the student to progress in and graduate from the program.

Once admitted to the program, should a student fail a radiologic sciences course or need to drop out of the program for other reasons, they may apply for readmission the following academic year. A student applying for readmission is not guaranteed placement, and is held to the same admission standard as all program applicants. To be considered for readmission, the student must demonstrate competency in both didactic and clinical courses covered to date in order to resume their studies from the point at which they left off. Both written and practical exams will be administered to verify course competency. Should a student apply and not receive readmission, they may apply again the following academic year. However, they must start the process as a new applicant and are not eligible to resume their studies from the point at which they left off. Any student dismissed from the radiologic sciences program for behavioral or disciplinary reasons are not eligible for program readmission.

Students who have been out of the radiologic sciences program for more than one semester must demonstrate competency for each radiologic sciences course previously taken through written or performance evaluation or both. There will be only one attempt at readmission allowed.

Graduation Requirements

To be eligible for graduation with an Associate of Applied Science Degree, the student must:

1. Fulfill all of the requirements of Chesapeake College as outlined in the catalog.
2. Successfully complete all general education courses with a grade of “C” or better.
3. Successfully complete all radiologic sciences courses with a grade of “C” or better.
4. Successfully complete all the required clinical competencies.
5. Demonstrate the ability to perform as an entry-level radiographer by exhibiting the student learning outcomes.

RADIOGRAPHY PROGRAM CURRICULUM			
Pre-admission General Education Courses	Credits	Weeks	Lecture/Contact Hrs
BIO 211 Anatomy & Physiology I	4	15	3 lecture/2 lab
BIO 212 Anatomy & Physiology II	4	15	3 lecture/2 lab
MAT 113 College Algebra OR	3	15	3 lecture
MAT 115 Precalculus			
ENG 101 English Composition	3	15	3 lecture
COM 101 Fundamentals of Oral	3	15	3 lecture
SCI 141 Physical Science <small>*(waive if completed high school physics 1&2 within three years of program admission)</small>	4	15	3 lecture/2 lab
SOC SCI Elective	3	15	3 lecture
MED 106 Medical Terminology	1	15	1 Hr.
Total <small>*(not including waived SCI 141)</small>	21*		
Post-admission Radiologic Science Classes	Credits	Weeks	Lecture/Con Hrs.
First Summer			
RSR 103 Fundamentals of the Radiologic	2	8	4 Hrs.
RSR 105 Intro to Positioning	2	8	2 lecture/2 lab
RSR 107 Rad. Patient Care	3	8	4 lecture/4 lab
Total	7		16 Hrs.
First Fall			
RSR 111 Positioning I	4	15	2 lecture/4 lab
RSR 117 Fundamentals of Radiographic	3	15	3 lecture
RSR 121 Clinical Rad I	2	15	No more than 24 Hrs.
Total	9		33 Hrs.
First Spring			
RSR 126 Positioning II	4	15	2 lecture/4 lab
RSR 132 Radiographic Imaging Equipment	4	15	4 lecture
RSR 136 Clinical Rad II	2	15	No more than 24 Hrs.
Total	10		34 Hrs.
Second Summer			
RSR 140 Positioning III	2	8	2 lecture/4 lab
RSR 146 Clinical Rad III	1	8	No more than 24 Hrs.
Total	3		30 Hrs.
Second Fall			
RSR 203 Positioning IV	4	15	2 lecture/4 lab
RSR 206 Digital Radiography	3	15	3 lecture
RSR 221 Clinical Rad IV	2	15	No more than 24 Hrs.
Total	9		33 Hrs.
Second Spring			
RSR 229 Image Analysis	1	15	2 Hrs. lab
RSR 231 Radiation Bio and Protection	3	15	3 lecture
RSR 235 Clinical Rad V	2	15	No more than 24 Hrs.
RSR 240 Radiation Outcomes Analysis	1	15	1 lecture
Total	7		30 Hrs.
Program Total	66		

Grading Policy and Grade Scale:

Students must earn a "C" or better in SCI 141 pre-requisite requirement and maintain a grade of "C" or better in all radiology courses, BIO 211, BIO 212, and MAT 113 requirement to remain in and graduate from the program. The math requirement must be completed by the end of the first fall semester in order to continue in the program.

Radiologic Sciences Program Grade Scale:

The grade scale is:

A	=	100	–	92
B	=	91	–	83
C	=	82	–	75
D	=	74	–	65
F	=	Below 65		

General Policies

College Policies and Disclaimer

All college policies in regard to academic and non-academic misconduct are binding. Please read these policies, which can be found in the front of the college catalog. In addition, program policies as specified in the student manual must be followed. In all cases, without exception, the process for grievances regarding grades, use of class time, and/or disciplinary procedures must be followed. The grievance procedure is set forth in the college catalog in the section entitled Student Services and Policies, Student Code of Conduct and Academic Grievance Procedures.

**Program policies are subject to change in the college's sole discretion and without notice*

Active Shooter Procedure

Chesapeake College conducts active shooter drills. In the event of a drill, or a live active shooter situation, radiologic science students will convene in the HPAC-229B x-ray lab. Chesapeake College Public Safety personnel are trained law enforcement professionals. In the event of an emergency, first dial 9-1-1 then contact public safety at: 410-758-7275.

Academic Grievance

Students seeking information on how to resolve issues that may occur between the student and the College are encouraged to seek guidance from counselors in the Office of Student Services, Academic Vice President, academic advisors, classroom instructors, the College catalog, or any appropriate professional employee of the College.

Please refer to the college catalog for details regarding the Academic Grievance Procedure.

JRC/ERT Grievance Procedure

If an individual feels the RSR program at Chesapeake College is in non-compliance with accreditation standards set forth by the JRC/ERT, they may submit an allegation of non-compliance. Prior to submitting an allegation, individuals should first attempt to resolve the complaint in accordance with the college Academic Grievance Procedure found in the college catalog; <https://ecatalog.chesapeake.edu/content.php?catoid=18&navoid=1832#grievance>

If the individual believes their complaint is unresolved by program/institution officials, or is not been properly addressed, they may submit allegations of non-compliance to the JRC/ERT:

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

Individuals seeking additional information on reporting allegations, or to obtain an Allegations Reporting Form, can visit the accreditor's website: <https://www.jrcert.org/accreditation-for-students/allegations/>

Program Requirements

Clinical facilities that have agreements with Chesapeake College related to opportunities for clinical education set the requirements for students to enter their facilities for hands on education, including those related to vaccinations. Chesapeake College is required by each clinical affiliation agreement to abide by the requirements of participating clinical facilities. Hands on education in clinical facilities is a key component of health care education and students cannot attain required student learning outcomes or complete the health care program of study without this component of their education. Different clinical experiences meet different student learning outcomes and students need to experience clinical at different clinical facilities to meet program outcomes.

Health Examination and Immunizations

In order to practice in the clinical environment, all students are required to obtain a health examination performed by the medical entity of their choice and at their own expense after acceptance to the program. Lab work must be obtained and students must show evidence of immunity to **Hepatitis B, rubeola, mumps, rubella, and varicella**. All students are required to show evidence of the results of a PPD or Quantiferon Gold test for TB or the results of a chest x-ray examination if PPD results are positive.

Students may wish to have the vaccination for Hepatitis B due to the risk of exposure to blood or accidental needle sticks at their own expense. Vaccination for Hepatitis B is highly recommended but not required. If a student declines the Hepatitis B vaccination, the student must complete and submit a signed Hepatitis B waiver. All students are required to obtain flu vaccinations annually or they may not attend clinical in cases of a flu outbreak and restrictions on access to hospitals are imposed by the Centers for Disease Control. Additional vaccinations may be required. Students will be informed if the immunizations requirements change.

COVID-19 Vaccination Attestation Policy

In order to meet the required student learning outcomes, students must comply with clinical facility requirements or must withdraw from the program. Students must at all times follow safety requirements set forth by the college and the clinical facility. All clinical facilities associated with the RSR program require COVID-19 vaccination status to be documented for infection control purposes. At this time the COVID-19 vaccination is not mandated by our clinical partners, however if this changes, students must comply in order to continue participating in clinical activities. Students who cannot participate in clinical activities will not be able to progress in the program.

Drug Screening

All applicants who are accepted into the RSR program will be required to undergo a drug screening as part of the admission process. The results of the drug screen may be shared with clinical facilities as needed. Additionally, students in the RSR program may be subject to random drug screenings if a faculty member or clinical facility representative has reason to believe that the student is under the influence of drugs and presents a potential risk to patients or others. If a student is unable to fulfill the requirements of the program because of denied access to a clinical site due to drug screening results, they may be dismissed from the program. This includes any student who tests positive for cannabis use.

CPR

All students are required to obtain and show evidence of American Heart Association certification in cardiopulmonary resuscitation for adults, children, and infants (**CPR for Healthcare Providers**) given by the **American Heart Association**. Minimum level requirement is Basic Life Support (BLS), and class must have both didactic and a practical hands-on component. Students must have this certification by August 15th and maintain certification by the American Heart Association during the course of the program.

Identification Badge

All students are required to have a University of Maryland Shore Regional Health picture identification badge that identifies them as a Chesapeake College student and allows entry into the hospital and applicable doors to complete clinical assignments and rotations. Arrangements will be made for the badges to be processed in Human Resources of University of Maryland Shore Regional Health. If the badge is lost it must be replaced and a fee will be assessed. The identification badge(s) must be returned on the last day of finals at the end of the program or when the student withdraws. Failure to return the identification badge to program faculty will result in reporting of the activity to the Human Resources department and a hold placed on the student's account at the college until the badge is returned.

Program Specific Policies

Cell Phones, Texting, Camera Use, and Recording

Calculators will be provided by faculty. The use of cameras to record in the classroom, lab, or clinical sites is a violation of personal privacy and HIPAA requirements and is strictly forbidden. Students may be disciplined and/or dismissed from the program for taking pictures of class, lab, or clinical events. If students wish to record classes, they must first obtain a letter of accommodations from the Accessibility Services Specialist.

Cell Phones and smart devices must be silenced during class and clinical activities. No texting is permitted during classes and cell phones must be put away. Answering cell phones or responding to text messages during class or clinical must be discussed with the instructor in advance.

Communicable Disease Policy

During the course of the student radiographer's work, it is possible to provide care for a patient with communicable disease or one who has little or no immunity to a communicable disease. Students who have developed a communicable disease may pose a risk to patients, hospital personnel or others and are required to notify the clinical coordinator immediately. A list of communicable diseases that may require the student to be absent from clinical or class include, but is not limited to: COVID-19, Conjunctivitis, Diarrhea, Salmonella, Hepatitis A, Rubella, Mumps, Pertussis, Rubella, Scabies, Staphylococcus Aureus skin lesions, Streptococcal disease (Group A), post exposure contact with shingles, and Varicella (chickenpox). If any of these communicable diseases is contracted, the student must provide documentation from a doctor stating it is permissible for them to return to clinic/class. In this case, the student would be permitted to make-up the lost time and not need to take an absence.

If the student has a temperature greater than 100.4 degrees F, is vomiting and/or has diarrhea they must refrain from clinical/class attendance and take an absence. If a student cannot attend clinical because of a communicable disease or is sent home by a clinical supervisor it is considered an absence.

Inclement Weather Policy

Inclement weather or other events may necessitate emergency cancellation of classes and closing campus. Students should look on the college's website at chesapeake.edu for the most up-to-date status during inclement weather events. Campus closure may also be announced on local radio and television stations no later than 6:30 am. When evening classes must be cancelled due to inclement weather, these stations will begin announcements at 3:30 pm.

If college campus is closed, students do not report for scheduled classes or clinical activities. In the event of closure on Saturday due to inclement weather conditions, clinical rotations on both Saturday and Sunday will be cancelled.

Student Participation in Assessment and Governance

All students are provided with a generic course and instructor evaluation for each College course at least once a year. Students must complete an evaluation of the clinical staff and clinical sites in the fall and spring semesters. A Graduate Exit Survey of the program must be completed during the last spring semester of the program. Students are encouraged to provide comments in person or in writing. Written praise and concern cards may be completed on E*Value at any time. A graduate will be asked to represent the students as a member of the Radiologic Sciences Program Advisory Committee (PAC) to provide a student perspective on program analysis and development.

Pregnancy Policy

A student who becomes pregnant during the course of the program is encouraged to notify program faculty, but are not required to do so. The program policies regarding attendance and completion of clinical and course work must be completed under the same attendance rules regardless of pregnancy status. The student, clinical coordinator, and program director will jointly devise a plan of action to finish course and program requirements should a leave of absence be required. If necessary, the student may apply for an incomplete for the semester. A student who voluntarily declares pregnancy in writing will be given a copy of the NRC regulations concerning prenatal radiation exposure, receive counselling by the program director, and be provided a second monitoring dosimeter to track fetal dose. The student may withdraw a declaration of pregnancy in writing at anytime. Students who become pregnant while enrolled in the program may continue without modifications. For more information on NRC regulations regarding embryo/fetal dose during pregnancy, please visit the following website; <https://www.nrc.gov/reading-rm/doc-collections/cfr/part020/part020-1208.html>

Program Disciplinary Policies

The goal of the program is to graduate competent and caring radiographers who exhibit professional affective behaviors. Due to the medical professions emphasis on customer service and teamwork, affective behaviors such as professionalism, attitude, discretion and judgment, honesty, confidentiality, reliability, punctuality, responsibility, and empathy toward the patient are extremely important. Students must be aware that negative affective behaviors will result in disciplinary action and possible expulsion from the clinical affiliate and the radiologic sciences program.

Code of Conduct (Adhering to Safe Practice in all Settings)

Students are expected to follow the Chesapeake College Student Honor Code and Code of Conduct as detailed in the Chesapeake College Catalog and Chesapeake College Student Guide. In addition, radiologic sciences students are expected to follow The American Registry of Radiologic Technologists (ARRT) Standards of Ethics and The American Society of Radiologic Technologists (ASRT) Practice Standards for Medical Imaging. For purposes of clarity, the Chesapeake College Honor Code and the ARRT code of ethics and ASRT code are presented for the reader:

Chesapeake College Code of Honor

Students of Chesapeake College agree to demonstrate academic and personal integrity.

Chesapeake College students are persons of integrity:

- They stand for that which is right. They tell the truth and ensure that the full necessary truth is known. They do not lie.*
- They embrace fairness in all actions. They ensure that work submitted as their own is their own, and that assistance received from any source is authorized and properly documented. They do not cheat.*
- They respect the material and intellectual property of others and ensure that others are able to benefit from the use of their own property. They do not steal.*

**Adapted from the US Naval Academy Code of Honor*

Therefore, each student at Chesapeake College pledges to:

- Submit assignments that reflect his/her own work.
- Cite and properly acknowledge the thoughts and work of others.
- Complete all tests and other work in class assignments using his/her own thoughts.
- Reject the use of materials acquired illegally.
- Respect the rights and property of others.

Those found to be in violation of this code agree to disciplinary sanctions and appeal processes outlined within the Chesapeake College Student Code of Conduct; <https://www.chesapeake.edu/students/student-code-of-conduct>

ARRT Code of Ethics may be found here: <https://www.arrt.org/pages/earn-arrt-credentials/initial-requirements/ethics/ethics-requirements>

ASRT Practice Standards may be found here: <https://www.asrt.org/main/standards-and-regulations/professional-practice/practice-standards-online>

Code of Conduct Policy

Prohibited Conduct: The following actions are strictly prohibited:

- Unauthorized possession, use, sale or distribution of alcoholic beverages or any illegal or controlled substance.
- Unauthorized use, possession, or storage of any weapon.
- Physical and/or psychological abuse, threat or harassment of any patient, visitor, hospital employee, student or faculty member.
- Conduct which threatens or endangers the health, safety, physical or psychological well-being of another person.
- Theft, abuse, misuse or destruction of another person's, college, or hospital property.
- Unauthorized disclosure, removal, or misuse of confidential information about any patient, student, hospital employee or clinical site.
- Cheating, falsifying or misrepresenting clinical documentation and time plagiarism, or violation of program and clinical site social media.

Consequences: Engaging in prohibited conduct will result in immediate dismissal from the program. Students who are immediately dismissed will receive a failing grade for the course and may not be eligible for readmission.

Other Prohibited Conduct: The following, non-exclusive, actions are also prohibited:

- Insubordination and/or refusal to obey orders.
- Sleeping while on duty at a clinical affiliate site.
- Leaving a clinical assignment without expressed approval from a faculty member.
- Denying, covering-up, or not reporting own errors in clinical practice.
- Inconsiderate treatment of patients, visitors, hospital employees, students, or faculty members.
- Failure to perform responsibilities or to exercise reasonable care or judgment in the performance of responsibilities.
- Failure to follow established policies issued by the clinical affiliate.
- Failure to follow safety regulations or use safety equipment provided.
- Unauthorized use of equipment.
- Unauthorized soliciting, vending or distribution of written or printed matter.
- Failure to follow program policies regarding direct and indirect supervision while performing radiographic exams and/or repeat radiographs.
- Behavioral issues.
- Excessive tardiness or absence.
- Repeated failure to arrive at the clinic prepared and in proper uniform.
- Removing protected health information (PHI) from the clinic.
- Violating the supervision policy.
- Not following the competency process.

Consequences of Other Prohibited Conduct: Faculty members may immediately dismiss the student from the learning activity. A plan for corrective action will be developed in collaboration with the program director, which may include probation.

Disciplinary Process

If it is determined that a student is not performing to the standards expected by program faculty, the following disciplinary process will be followed:

1. Verbal Warning

A verbal counseling is a verbal admonition to the student to correct a deficiency. An immediate change is expected.

2. Written Warning

A written warning with counseling is given to a student if the verbal counseling has been unsuccessful in reminding the student to make a correction. The student will be asked to indicate their knowledge of this action and the warning will be placed in the student's permanent file.

3. Probation

If no progress is seen, the student may be placed on probation with a written plan that specifies criteria and/or activities the student must meet in order to improve the behavior or change the unsatisfactory behavior. The probation period may extend throughout the duration of the semester, or into the next semester as determined by the program director.

4. Dismissal

Subsequent violations while on probation will result in failure of the course and dismissal from the program. If a student is dismissed, they are required to return their hospital I.D. card and dosimeter to the health professions department.

Documentation of all the steps described above will be placed into the student's permanent file. Radiologic Sciences program faculty reserves the right to modify the disciplinary process to best fit each student's circumstances, including determining which level of disciplinary sanction to apply. Discipline need not follow each step of the disciplinary process where justified based on the underlying conduct and applicable policies. If the student feels that they were treated unfairly, they may put the student complaint procedure into effect pursuant to the Student Code of Conduct.

Student Complaint Procedure

If a student contests a disciplinary decision made by a faculty member, the following procedure must be followed. If the student attempts to escalate the issue without following each step successively, they will be asked to refer to the policy and follow the process as written:

1. Discuss the issue with the faculty member
A student must first discuss the matter with the program faculty member (within five (5) school days from its occurrence). The discussion should be professional, respectful, and scheduled for a time/place conducive for thoughtful discussion.
2. Meet with the program director
If the informal discussion with the faculty member does not resolve the problem to the mutual satisfaction of the student and the program, the student shall prepare a written complaint and file it with the program director if they wish to continue to contest the disciplinary decision. The student must state the problem, provide complete details, and what corrective action the student would like taken. Then, upon receipt of the complaint, the program director must schedule a meeting with the complainant to be held within five (5) business days to discuss the complaint. Within five (5) business days after the discussion, the program director shall issue the decision to the complainant in writing.
3. Department chair, health professions director
If the complainant is dissatisfied with the decision of the program director, an appeal can be made to the department chair. The appeal must be made within five (5) business days of receiving the decision from the program director.
4. Workforce dean
If a satisfactory decision is still not reached, the final step is for the complainant to escalate the issue to the workforce dean. The complaint must be escalated within five (5) business days of receiving a decision by the department chair. The dean will review all documentation and schedule a time to meet with the student. It will be at the dean's discretion to include senior administration when formulating a final decision.

Addressing Concerns about a Class, Clinic, or Grades

In demonstrating professionalism, students should keep program issues, concerns with faculty, clinical sites, or other students confidential in all settings. Program concerns may include, but not be limited to: course or clinical work, instructors, clinical staff, incidents in the clinical setting, program policies, or the program in general. Program faculty will not discuss student issues with anyone other than clinical managers, program faculty, college administrators, or the persons directly involved.

Students have five (5) business days from the time any assignment is returned to discuss any issues with the activity and/or points earned for that activity. After five (5) business days, there will be no further opportunity to discuss the assignment or points earned on that activity. In the event that a student has concerns about any learning activity or grade within any radiologic sciences course, the line of communication will be followed as outlined below. It is important to follow this path, so that all appropriate persons are apprised of the situation:

1. Meet with the RSR program faculty member with whom you have the concern.
2. If the situation is not resolved through informal discussion, the student may formally request a hearing with the program director.
3. The student will provide the program director with written documentation of the concern and suggested change. Please be advised the director cannot change policy (such as alter grading scales or permit rounding). The director will fully review all documentation, meet with the student to discuss the situation and confer with those involved as appropriate. The director will forward their decision to the student and faculty member, in writing, within five (5) business days of meeting with the students about the concern.
4. If the student is not satisfied with the decision of the program director, they will refer to the College's Appeal Procedures fully outlined in the Chesapeake College Catalog (2022-2023).

Use of Artificial Intelligence (AI) by Students

The use of artificial intelligence (AI) by students can be a great way to enhance learning and critical thinking skills as long as it is used ethically and responsibly. Examples of acceptable AI tools may include language processing software, natural language generation tools, machine learning algorithms, and intelligent tutoring systems. It is important to address the potential issue of plagiarism and abuse, as AI can make it easier for students to copy and paste information without fully understanding it.

Definition of AI: any software or technology that can perform tasks that would normally require human intelligence, such as learning, decision-making, problem-solving, or composition.

Expectations when using AI:

- You may not copy and paste an AI response verbatim and submit it as your own work.
- If you choose to use AI, you must submit the prompt you used and the original output along with your own modified document.
- Cite artificial intelligence (AI) in academic work by acknowledging the specific tools, algorithms, or models used to produce the results (e.g. ChatGPT was used as a learning tool for this assignment)

Precautions:

- False information: submitting false information based on AI without researching the output, the student is fully responsible for what they submit
- Over-reliance: relying too heavily on AI tools leading to a lack of critical thinking and independent learning

Any student found to be in violation of this policy will be subject to disciplinary action, including but not limited to; 1) receiving a failing grade on the assignment, 2) receiving a failing grade in the course, 3) program dismissal.

Program Attendance Policies

Punctuality and attendance at all classes, labs, and clinical rotations are expected for each radiologic sciences course. Students have an obligation to demonstrate professional behavior. Absences or tardiness in excess of the allowed number will earn penalties regardless of the reason for the absence (except for extraordinary circumstances as defined). Students are encouraged to schedule appointments for hours other than class or clinical time.

A tardy occurs if the student is more than five minutes late for their scheduled start time for; class, lab or clinic (example: clinical shift begins at 8:00 am, and the student clocks-in at 8:06 am).

Class Attendance

If missing class time is unavoidable, please contact each instructor prior to the start of the class. Failure to notify prior to class time will be assessed -2% points from the final grade for each occurrence. The student is responsible for contacting the instructor and make up any missed work.

If Tardy for Class:

Two tardies are permitted per semester for each class.

1. Third tardy will result in -3% off the final grade and a written warning.
2. Fourth tardy will result in an additional -5% off the final grade and the student will be placed on probation.
3. Fifth tardy while on probation is grounds for dismissal.

If Absent for Class:

Two absences are permitted per semester for each class.

1. Third absence will result in -5% off the final grade and a written warning.
2. Fourth absence will result in an additional -7% off the final grade and the student will be placed on probation.
3. Fifth absence while on probation is grounds for dismissal.

Summer Semester Class: Due to the brief nature of the summer session, only one absence and one episode of tardiness are allowed without penalty for the class.

Clinical Attendance

If missing clinical time is unavoidable, please contact the Clinical Coordinator via text message before the start of your shift. Failure to notify prior to the scheduled clinical time will be assessed - 2% points from the final grade for each occurrence.

First Year Students (Tardy and Absence)

1. Two tardies are permitted without penalty.
 - a. Third tardy will result in -3% off final grade and written warning.
 - b. Forth tardy will result in additional -3% off final grade and the student will be placed on probation.
 - c. Fifth tardy while on probation is grounds for dismissal.
2. Two absences are permitted without penalty.

Any missed time beyond two absences must be made up at the clinical site where the student was originally scheduled.

 - a. Third absence will result in -5% off final grade and written warning.
 - b. Forth absence will result in additional -5% off final grade and the student will be placed on probation.
 - c. Fifth absence while on probation is grounds for dismissal.

First Year Students Friday Lab (Tardy and Absence)

Friday lab during the first year of the program is part of the clinical grade. Attendance at Friday lab is captured independent of clinical attendance, and students are permitted one tardy and one absence per semester without penalty. Subsequent absence/tardy from Friday lab beyond the allotment follows the same format as outlined above.

Second Year Students (Tardy and Absence)

1. Three tardies are permitted without penalty.
 - a. Forth tardy will result in -3% off final grade and written warning.
 - b. Fifth tardy will result in additional -3% off final grade and the student will be placed on probation.
 - c. Sixth tardy while on probation is grounds for dismissal.
2. Three absences are permitted without penalty.

Any missed time beyond three absences must be made up at the site where the student was originally scheduled.

 - a. Forth absence will result in -5% off final grade and written warning.
 - b. Fifth absence will result in additional -5% off final grade and the student will be placed on probation.
 - c. Sixth absence while on probation is grounds for dismissal.

Summer Semester Clinic: Due to the brief nature of the summer session, only two absences and two episodes of tardiness are allowed without penalty for clinic.

Disability or Extraordinary Circumstances

Extraordinary circumstances are described as those situations beyond the control of the student that would result in the student missing five (5) or more consecutive business days including class and clinical (1 week). These include, but are not limited to:

- Extended illness of the student
- Extended hospitalization of the student
- Death in the student's family or a friend
- Extended illness or hospitalization of an immediate family member for whom the student is sole caregiver

**A normal pregnancy (i.e. one without complication) is not considered an extraordinary circumstance.*

Students who miss lecture classes due to extraordinary circumstances will be required to make up all work, quizzes, and exams. If additional time is required to complete the work for the course, the student may apply for an incomplete grade. Students who miss three (3) or more weeks of clinical days due to extraordinary circumstances should apply for an incomplete grade. The student must still complete all requirements for the course. Missed time, due to extraordinary circumstances may be made up at the discretion of program faculty. Time missed over three (3) weeks of a semester may not be made up.

In cases of illness or disability, prior to returning to the clinical setting, the student's physician must complete a care plan verifying the ability of the student to participate fully in the clinical portion of the program. The care plan must be submitted to the program director in writing prior to implementation of any make up time.

Early Release Policy/ Provision for Late Completion

All students must attain the didactic, clinical competency, and affective behaviors required of entry-level radiographers before graduating from the program. Early release from RSR-235 Clinical V, is based on the successful attainment of all program clinical competency exams, goals and course objectives as verified by the Clinical Coordinator. The student may petition the Clinical Coordinator for a clinical release after April 1st of the second spring semester. Early release applies solely to RSR-235, students must still complete all the requirements of RSR 231, RSR 240, and any other college courses required for graduation. If extraordinary circumstances apply, students must repeat the last clinical semester, or apply for and be granted an incomplete grade for RSR 235 by the Academic Vice President, to complete the program. Early release from RSR 235, Clinical Practice V may be requested if the student meets the following criteria:

- Achieve at least a "B" in RSR 221 (fall clinical course).
- Successfully complete all program clinical competency requirements including simulations.
- Maintain at least a "B" in RSR 235 (spring clinical course) at the time of submitting the request.
- Not exceeding 3 absences and/or 3 episodes of tardiness in RSR 235.
- Not currently on probation.

Clinical Education Policies

The complex role of a radiographer in preparing for, executing, and evaluating the quality of radiographic procedures requires a commitment by both program faculty and clinical affiliates. Clinical experience is designed to correlate with the didactic objectives of the program. The student and the clinical preceptor form an imaging team. They are partners who accomplish the tasks of patient care, examination, and learning together. Students work under the direction of departmental supervisors and clinical preceptors.

1. First year students must be directly supervised regardless of their level of competency.
2. Only second year students may practice under indirect supervision after they have achieved competency.
3. All students must be directly supervised by a preceptor during repeat exposures.
4. All students must be directly supervised by a preceptor for mobile and OR procedures.
5. Students are not allowed to cover the department or be used as an employee.
6. Students must respect the fact that they are a learner not an expert. The clinical preceptor is the hospital employee who is legally responsible for the exam. Students must follow the directions of supervisors and clinical preceptors in regard to assignments and cases.
7. Students must discuss any personal differences with preceptors or staff courteously and privately. Any problems in the clinical setting need to be discussed with the clinical coordinator and the program director immediately. Use concern cards to document these situations.
8. Students are not to perform a case together. Only one student should be in a room with a patient at a time.
9. Students are expected to learn what supplies are needed in each room and keep rooms stocked and clean during downtime.
10. Students are taught national standard positioning criteria but should identify how these criteria are applied in each clinical setting and where to find information regarding institutional protocols.
11. Students should observe and learn about exams that have not yet been studied in class.
12. Students should learn radiology department protocols, procedures, and radiologists' preferences.
13. Students must use their own personal markers, and may not lend them to anyone else.
14. All images must be approved by a clinical preceptor who is a registered technologist with the institution prior to sending the images to PACS or dismissing the patient.
15. All case information must be logged prior to leaving for the day. Any case information not entered may be left in a secure location designated at each facility.
16. It is illegal and unethical to add a projection to a patient exam which was not originally ordered by the provider to meet the student's clinical competency requirement.

Clinical Supervision Policies

Direct Supervision

Direct supervision assures patient safety and proper educational practices. 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 conduct of the procedure
- Reviews and approves the procedure and/or image.

Students must be directly supervised during the entire first year of the program. Once a student enters the second year, they still must be directly supervised when;

1. competency has not been achieved
2. repeat projection needed (regardless of level of competency)
3. performing any mobile procedure, including both xray and fluoroscopy

Indirect Supervision

Indirect supervision promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. "Immediately available" is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Students are permitted to operate under indirect supervision when

1. enter the second year of the program
2. competency is achieved

Transportation of patients by student radiographers

- Direct supervision will be required for transport of in house patients to their rooms according to facility policy
- Transportation of patients by students to and from the emergency room should follow institutional policy

Clinical Review of Requisition, Images, Repeats, Transportation of Patients

- A registered radiographer must review the request and evaluate the condition of the patient in relation to the student's ability to do the exam.
- A registered radiographer must review and approve the images prior to the patient being released.
- Direct supervision is required when radiographs are repeated regardless of the student's level of achievement.

Clinical Competency Policy

Clinical competency must be assured through classroom instruction, image analysis, lab demonstration, clinical practice, and finally competency examination. Successfully achieved competencies are rechecked at random by program faculty during the second year of the program. Competency may be demonstrated either by performing the study on a patient, or under simulation. Every effort should be made to achieve competency on patients rather than by simulation. All required examinations on the master competency list must be completed prior to graduation. The ARRT sets minimum requirements for registry eligibility, however, students will meet the expectations for competent performance of program faculty.

Minimum Number of Competencies per Semester

All competencies must be completed by the end of the second spring semester to graduate from the program. The minimum competency requirements per semester are designed to assist students to complete all program competency requirements prior to graduation. A lack of demonstrated clinical progress may result in consultation with faculty and affect the student's clinical grade.

Suggested schedule for competency completion

1 st Fall	2	approximately 3% (2)
1 st Spring	12	approximately 22% (14)
2 nd Summer	9	approximately 36% (23)
2 nd Fall	18	approximately 64% (41)
2 nd Spring	23	100% (64)

Competency process

1. Didactic education in classroom including image analysis
2. Pass lab exam including written quiz
3. Achieve required number of practices on patients
4. Successfully perform competency with the clinical preceptor
5. Review competency and images with program faculty

Procedure for initiating and attempting competencies

1. The student must complete the first three steps in the competency process before initiating and attempting competency.
2. The student will communicate to the preceptor that they are ready to attempt competency, and initiate the process by logging the attempt in the clinical management system for the preceptor to complete.
3. After finishing the attempt, the preceptor will complete the form.
4. If the preceptor passes the attempt, the student will meet with a faculty member who will review the competency and certify as pass/fail.
5. If the preceptor fails the first competency attempt, the second year student may proceed with a second attempt without faculty review. First year students must review all attempts with faculty before proceeding.
6. If the preceptor fails the second attempt, the student may not proceed for a third attempt until meeting

with program faculty to identify the problem(s) that have occurred.

7. If the student is unsuccessful on the third attempt, remediation will take place with faculty by demonstrating positioning skills, before proceeding with a fourth attempt.
8. If after remediation the student is unsuccessful on the fourth attempt, they will be placed on probation for not making progress in clinical course.
9. If the student is unsuccessful on the fifth attempt while on probation, they will receive a failing for the clinical course and may not proceed in the program.

Tasks to be evaluated

1. Correctly identified the patient.
2. Asked if pregnancy was a possibility when appropriate.
3. Confirmed patient history and exam to be performed.
4. Used the correct L/R marker.
5. Provided appropriate shielding to the patient.
6. Did not perform any repeats.
7. Clinical preceptor did not need to intervene.

Other considerations

- It is the students' responsibility to declare competency after evaluating the patient and before the procedure starts.
- Students cannot check their book or phone or use any other assistive device prior to or during competency exam performance.
- Clinical preceptors must not provide any assistance except for moving help.
- If there is a problem that jeopardizes the success of the exam, or if the patient's condition precludes the student performing the exam the evaluation will stop, the preceptor will assist to complete the exam.
 - the competency must be attempted again on another patient
 - the decision to interrupt the competency is at the discretion of the preceptor
- Students must use their own personal markers on all examinations and the entire marker must be visible
- All competency exam attempts must be accurately logged in the clinical management system regardless of outcome.

Definition of Terms Used on Clinical Forms

Observed	The student observes an R.T. doing exams, providing any help possible.
Assisted	The student may do some part or all of the procedure – positioning, technique, pre or post processing, etc.
Performed	The student sets the panel, manipulates equipment, performs the positioning, and completes all phases of the exam with minimal R.T. assistance
Trauma	The ARRT defines “trauma” as a serious injury to the body and must include a modification to standard protocol. Modifications may include variations in positioning, minimal movement of the body or part, adjustment of the tube/part/IR relationship, and/or technique modification.
Geriatric Patient	Patient who is 65 years of age or older and requires modification of the exam due to either physical or cognitive impairment. This is not just an elderly patient but one who is impaired by age related changes in terms of their ability to cooperate.
Pediatric	New born to 6
Adolescent	7 to 18
Diagnostic Image	Within diagnostic acceptance limits. An image that has flaws but a repeat exposure is not needed.
Optimal Image	An image that provides the maximum amount of information. The image demonstrates National Standard Review Criteria for marker placement, part position, IR centering and/or angulation, anatomy demonstrated, and exposure quality as enumerated in the text. Optimal images are required for competency.

Designated Clinical Supervisors

Clinical Supervisors are present at each facility and are a contact person for the student during the clinical rotation.

Easton	DIC	Cambridge	Chestertown	Shock Trauma	TOC	SMP	QAED	Luminis
Amy Brittingham	Maria Craver	Lisa (Dawn) Deneau	Susan Herr	Shawn Phipps	Angela Spishock	Susan Herr	Susan Herr	Denise Moore

Professional Appearance Policy

The intent of this policy is to present a professional appearance to patients, co-workers and the general public. Each student will have a standard uniform consisting of: 1) personal dosimeter, 2) two sets of anatomical markers, 3) hospital issued identification.

1. All clothing must be of the approved style and color approved by program faculty. The student must present a neat, clean appearance. Clothes must be ironed, in good repair, and appropriate for clinical activities (i.e. no leggings or spandex).
2. The following jewelry is allowed:
 - A watch, wedding and/or engagement ring
 - One small, dignified necklace may be worn.
3. Tattoos must be covered.
4. No piercings and jewelry except for small earrings may be worn or visible.
5. Cleanliness and good personal hygiene must be practiced.
6. Hair will be clean, neatly trimmed and properly groomed. Its length and style must be such that it can be controlled so that it in no way interferes with job performance or presents a hazard to the patient or student. If long, it must be pulled back when rendering patient care or when in patient care areas.
7. Compliance with the appearance policy requires that the program approved uniform, the personal radiation dosimeter and hospital identification badge are worn in the clinical setting. Students will be sent home and charged with an absence when not in uniform.

Safety Policies

Incident Reporting

If an injury as specified occurs an incident report must be filed with both the clinical facility and the college. All the requirements of the clinical facility must be followed regarding any of the incidents specified.

1. Report incident immediately to clinical instructor and clinical department supervisor.
2. File a completed facility incident report within 24 hours of the incident.
3. Obtain and complete a college incident Form
4. Turn incident report copy and college incident form in to the program director.

Radiation Safety Policy

The objective of radiation protection is to minimize the risk of adverse effects as a result of radiation exposure during a diagnostic imaging procedure. Established guidelines are to be used each semester to minimize radiation exposure to the patient, the student, and others. These guidelines follow the ALARA principle of time, distance and shielding. Other radiation protection standards include;

1. Follow the procedure for imaging females of child-bearing age according to the clinical site LMP policy.
2. Shielding should be used for patients when indicated to minimize unnecessary exposure from scatter radiation generated during a procedure. Protective shielding must be used by personnel for ALL procedures where the student cannot remain behind a protective barrier while the beam is energized (such as fluoroscopy and mobile procedures).
3. Students and faculty may never hold patients while the x-ray exposure is being made. A family member or non-technical personnel must do this and be provided with lead shielding.
4. Personal radiation dosimeter will be issued to the student and must be worn at the collar level when in the clinical setting at all times. The dosimeter must also be worn whenever a student is working on campus in the energized x-ray lab. The radiation levels will be monitored by program faculty.

ALERT LEVELS/MONTH

Annual occupational exposure limit is 50 mSv (5 rem). Below are investigatory levels that if reached, will be investigated by the program director.

ALARA I	5 mSv (50 mrem)
ALARA II	25 mSv (250 mrem)

MRI Safety Policy

Magnetic Resonance Imaging (MRI) utilizes a powerful magnet that cannot be turned off. While the primary focus of the RSR program is to prepare you as a radiographer, there may be instances in your clinical education that require you to enter the MRI suite (e.g. moving a patient). Students are prohibited from entering the MRI suite without being accompanied by an MRI technologist. All students will complete an MRI safety training session in addition to an MRI safety screening form. The form is designed to ensure student safety while working around an MRI unit. *(adopted from the ACR; Safety Screening Form for MR Procedures)*

Before entering the MRI suite, all personnel are required to remove any items that are ferromagnetic including, but not limited to: body piercings, hair accessories (e.g., bobby pins, barrettes, clips), jewelry including watch/fitness tracker, eye glasses, hearing aid, dentures, false teeth, partial dental plates. If this is not possible, please notify the clinical preceptor and do not enter the suite.

For more information, please refer to the MRI Safety manual from the American College of Radiology found here: <https://www.acr.org/Clinical-Resources/Radiology-Safety/MR-Safety>