Welcome to the School of Radiography at Marshfield Clinic. I am pleased that you selected our program as the entry point for your career in Imaging Sciences.

Our 22-month long certificate program is designed to assist you in becoming an excellent Radiography professional that provides the highest standards of patient care. The combination of didactic and clinical courses promotes development of radiographic competency, communication, problem-solving, and critical-thinking skills that will be invaluable in a future career. We accomplish this by providing opportunities throughout our program in the form of specialty taught courses, a well-balanced and thorough clinical experience, endless support from faculty, and hands-on experience in radiographic procedures.

This Program & Student Handbook will help you become familiar with the Marshfield Clinic Radiography Program by providing you with important information regarding our Radiography Program, including didactic and clinical components as well as academic and clinical policies and procedures. The information contained within is important to your success in our program. Our specific program policies and procedures are designed and implemented to provide you with a strong foundation for learning, and prepare you for a professional role as a Radiologic Technologists. In addition, program policies and procedures assure the safety and well-being of healthcare workers and the patients we provide care for.

Information contained in this handbook is reviewed and updated annually each July, and is subject to change. This handbook does not necessarily reflect policies and procedures throughout the entire two-year program. Students enrolled in the program will receive an updated handbook at the beginning of their second year in the program. Students will be apprised of changes in advance, when possible. Significant changes to the curriculum or program will generally take place prior to student enrollment unless circumstances dictate otherwise. All current and future students are encouraged to contact program officials in the event of questions regarding student expectations and compliance.

Please read the handbook and manual carefully to clarify any questions you may have.

The faculty and I wish you success in your pursuit of a career in Imaging Sciences.

Krista M. Lambert  MSSL, BSRT(R)(MR)  
Director, School of Radiography  
Office 715-387-9254 Fax 715-847-3811  
Lambert.krista@marshfieldclinic.org
### Student Supervision Policy – Clinical

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SECTION 1: GENERAL PROGRAM INFORMATION
Marshfield Clinic Health System School of Radiography does not discriminate on the basis of race, sex, sexual orientation, handicap, religion, age, national origin, or veteran status.

*All policies, procedures, and tuition costs associated with Marshfield Clinic School of Radiography are subject to change at any time per the discretion of the Program Director or Department of Education Director.*

Questions or concerns regarding any of the policies/procedures published in this handbook can be directed to the Marshfield Clinic School of Radiography Program Director.

**Sponsoring Institution/Program Officials**

Chief Executive Officer/President of Sponsoring Institution
Narayana Murali, M.D., Executive Director

Dean/Administrator
Matthew Jansen, M.D., FACP, Director, Division of Education

Program Director
Krista Lambert, MSSL, BSRT(R)(MR), Director, School of Radiography

Program Faculty
Sheila Gregorich, RT(R), Faculty and Clinical Instructor
Jess Ann Griesbach, RT(R), Clinical Instructor
Shana L. Knauf, RT(R)(M), Clinical Instructor
Vicki J. Larson, RT(R), Clinical Instructor

**Clinical Education Sites**

Marshfield Health System-Marshfield Medical Center
611 N. Saint Joseph Avenue
Marshfield, WI 54449
(715)387-7184
[https://marshfieldclinic.org](https://marshfieldclinic.org)

Marshfield Health System-Marshfield Clinic
1000 N. Oak Avenue
Marshfield, WI 54449
(715)387-9067
[https://marshfieldclinic.org](https://marshfieldclinic.org)
Program Accreditation

The Marshfield Clinic School of Radiography is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) in accordance with the Standards for an Accredited Educational Program in Radiologic Sciences (STANDARDS). The JRCERT promotes excellence in education by elevating the quality and safety of patient care through the accreditation of educational programs in radiography, and is the only agency recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA), for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry.

The Joint Review Committee on Education in Radiologic Technology STANDARDS for an Accredited Educational Program in Radiography are designed to promote academic excellence, patient safety, and quality healthcare. The STANDARDS require a program to articulate its purposes; to demonstrate that it has adequate human, physical, and financial resources effectively organized for the accomplishment of its purposes; to document its effectiveness in accomplishing these purposes; and to provide assurance that it can continue to meet accreditation standards. The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process helps to maintain program quality and stimulates program improvement through program assessment.

It is the policy of the Program that all students be made aware of the STANDARDS and the actions to be taken in the event that any student believes that the Program is not in compliance with the STANDARDS. A copy of the STANDARDS is available for review in the School of Radiography Learning Center, or can be viewing on the JRCERT website.

The Marshfield Clinic School of Radiography completed its most recent JRCERT Site Visit in 2018.

**Current Accreditation Award: 5 years. Next scheduled Site Visit: 2024**

Accreditation of an educational program provides students the assurance that the education they receive at Marshfield Clinic will provide them with the requisite knowledge, skills, and values to competently perform the range of professional responsibilities expected by potential employers nationwide. It also assures they will be eligible for licensure nation-wide.

**JRCERT**
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-5300
http://www.jrcert.org
## Academic Calendar

<table>
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<tr>
<th>Event</th>
<th>FALL 2019</th>
<th>FALL 2020</th>
<th>FALL 2021</th>
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<td>Aug 23</td>
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<td><strong>SEMESTER ONE</strong></td>
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<td>Labor Day Holiday</td>
<td>Sept 2</td>
<td>Sept 7</td>
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<td>Fall Semester Final Exams</td>
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<td>Dec 14-18</td>
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<td>Fall Semester Classes End</td>
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Program Overview

The Marshfield Clinic School of Radiography is a 22-month, 5-semester program offering the completion of a Certificate in Radiography, which provides its students an opportunity to become eligible for the ARRT national certification exam in Radiography, secure employment as a competent entry-level radiographer, instill professional values, and encourage lifelong professional growth.

The program will provide students with quality didactic and clinical education, and the community with quality and competent professionals of radiologic technology, through a curriculum that promotes the current practice, guidelines, and standards. Through over 1100 hours of didactic instruction and 1700 clinical hours in multiple departments of Marshfield Clinic Health System, a multi-specialty, trauma level 2 campus, the student will be well prepared for a career as a radiographer.

The School of Radiography curriculum is a unique combination of art and science designed to prepare students for an entry-level career as a radiologic technologist. It is designed to provide students with a fundamental radiographic imaging foundation, which fosters the importance of quality patient care and minimum radiation exposure. The program maintains a comprehensive curriculum, which includes verifying the competence and professionalism of our students. Faculty and staff work together to promote an optimal educational experience for all students, promoting diversity, critical thinking, leadership, and life-long learning and professional development.

Program Philosophy

Diagnostic radiography is among the most rapidly evolving technologies in an ever expanding global healthcare system. The use of x-rays to produce images for the diagnosis of disease requires a thorough knowledge and understanding of anatomy and biological effects of radiation exposure, and having the ability to utilize equipment and computer systems to select technical factors by which such exposures can be minimized, and exemplary images can be produced. In achieving this, our aim is to prepare students to be eligible to sit for the American Registry of Radiologic Technologists examination.

We believe the primary function of the Radiography Program is to produce qualified radiographers, capable of applying scientific and humanitarian knowledge, and able to use sound judgment and acquired skills to provide excellence in patient care, while performing diagnostic procedures and assisting the physician and/or radiologist in specialized diagnostic and therapeutic procedures.

We believe learning is the end product of education and results in observable changes in behavior, attitudes, skill, and understanding. We believe that motivation, readiness, and interest are essential to learning; and that learning occurs best in an atmosphere which provides for close, cooperative instructor-student relationship.
Program Mission Statement

Consistent with the Marshfield Clinic Mission to enrich lives through accessible, affordable compassionate health care, the Mission of the Marshfield Clinic School of Radiography is to prepare students to successfully complete the American Registry of Radiologic Technologist (ARRT) national certification exam in Radiography, and to provide the healthcare community with competent, compassionate, entry-level radiographers.

Program Goals

The mission of the Marshfield Clinic School of Radiography is accomplished through the following Program Goals and associated Student and Program Outcomes:

Goals

1. Students will demonstrate the clinical competency required of an entry-level radiographer.
2. Students will communicate effectively with patients and healthcare teams.
3. Students will demonstrate critical thinking and problem solving skills.
4. Students will model professional and ethical behavior.
5. The program will provide students with quality didactic and clinical education, and the healthcare community with competent entry level radiographers.

Outcomes

Student Learning Outcomes:

1. Students will demonstrate the ability to properly operate imaging equipment.
2. Students will determine proper exposure factors to obtain diagnostic quality radiographs.
3. Students will demonstrate proper positioning skills.
4. Students will demonstrate knowledge of radiation protection principles.
5. Students will demonstrate effective oral communication skills.
6. Students will demonstrate written communication skills.
7. Students will provide quality patient care.
8. Students will apply critical thinking skills in the practice of diagnostic radiography.
9. Students will effectively analyze/critique radiographic images for diagnostic quality.
10. Students will demonstrate ethical integrity consistent with the ARRT Code of Ethics.
11. Students will demonstrate professional behavior and values.

Program Outcomes:

1. Graduates of the program will successfully pass the ARRT national certification exam on the 1st attempt
2. Of those pursuing employment, graduates will be gainfully employed within 6 months post-graduation.
3. Students will complete the program within 24 months.
4. Students will be satisfied with their education.
5. Employers will be satisfied with the graduate’s performance.
Program Purpose
The Marshfield Clinic School of Radiography supports its mission by preparing graduates to provide quality patient care and assessment, competent performance of radiographic imaging procedures, and radiation safety and protection in the application of ionizing radiation to humans. The educational process is designed as a sequence of instructional and evaluation experiences based on objectives, outcomes, and goals to measure the competency of the learner.

Our purpose is to educate students with the most current knowledge and skills in the science of radiologic technology and to meet the ever changing and complex radiologic and health care needs of our community. We will provide a stimulating learning environment with a technological orientation across the curriculum, which maximizes individual potential and ensures that all students acquire and use knowledge, skills, and professional behaviors to function effectively and meet the challenges of radiologic technology. We are dedicated to ensuring a safe, positive, student centered climate which nurtures problem solving and encourages critical thinking as part of the learning process. Since education is a dynamic process, we will provide a structure which responds to change. Marshfield Clinic School of Radiography is committed to:

- Providing an educational experience that promotes characteristics associated with success.
- Providing a learning environment that recognizes individual differences and promotes caring behavior in the healthcare community.
- Promoting critical thinking skills to effectively address patient care concerns and to adapt to the rapidly changing challenges in healthcare.
- Developing and challenging the student's academic abilities, clinical skills, and their commitment to meeting the needs of others.
- Providing graduates with a strong educational foundation for lifelong personal and professional growth.

Program Curriculum & Course Sequence
The Marshfield Clinic School of Radiography Curriculum and Course Sequence is listed on the following page. This curriculum and subsequent program courses are evaluated yearly and are subject to change. The following curriculum reflects the most current academic course sequence at time of public posting.
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<th>Course Title</th>
<th>Class Hours Per Week</th>
<th>Lab Hours Per Week</th>
<th>Clinical Hours Per Week</th>
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**Total Hours in Program:**

| Class: 1132 | Clinical: 1782 |
**Program Course Descriptions**

**Introduction to Radiologic Sciences**
This course is designed to provide an overview of the foundations of Radiography and the radiographer’s role in the health care delivery system. Principles, practices, and policies of the health care organizations will be examined and discussed in addition to the professional responsibilities of the radiographer. Topical areas include organization of the radiology department, academic and administrative structure, key departments and personnel, credentialing, and professional development. Content also provides the basic concepts of radiographic quality, basic principles of radiation protection, and a foundation in ethics, ethical behavior, and ethical law related to the practice of medical imaging, and will examine a variety of ethical and legal issues found in healthcare. Pre-requisite: Program Admission; Co-requisite: Medical Terminology

**Radiographic Procedures I**
This course provides the student with a basic understanding of the practices and principles required to perform routine radiographic procedures of body systems. It introduces the student to basic positioning terminology to include general terminology, body planes and surfaces, positioning landmarks, and relationships related to the placement of anatomy to obtain a radiographic image. The student will develop the knowledge and skills of the structure, function and positioning procedures for the chest, abdomen, upper extremity, and shoulder girdle. This course deals with the principles needed to perform routine radiographic procedures of these systems. Anatomy, positioning techniques, technical factors, equipment usage, and film critique are included. This course consists of lecture and laboratory demonstrations concerning the systems covered. Co-requisite: Intro to Rad Sciences, Medical Terminology

**Medical Terminology**
This course provides a study of the principles of medical word building to help the student develop the extensive medical vocabulary used in health care occupations. Students receive a thorough grounding in basic medical terminology through a study of root words, prefixes and suffixes. The study focuses on correct pronunciation, spelling and use of medical terms. Co-requisite: Intro to Rad Sciences, Medical Terminology

**Radiographic Imaging I**
This course establishes a knowledge base in factors that govern the acquisition and production of a radiographic image. Content is designed to provide a basis for analyzing radiographic images, with an emphasis on image quality through presentations of prime technical exposure factors that can affect radiographic image quality. Included in this course is the importance of minimum imaging standards and discussion of a problem-solving techniques for image evaluation. Topics include density, contrast, detail, and distortion. For a thorough understanding of proper image quality, actual images will be included for analysis. Co-requisite: Intro to Rad Sciences, Medical Terminology

**Radiography Clinical Education I**
The first of five clinical education courses, this practical experience is designed to sequentially develop, apply, critically analyze, integrate, synthesize, and evaluate concepts and theories in the performance of radiologic procedures. Through structured, sequential, competency-based clinical assignments, students begin practicing and performing the clinical competency exams required by the American Registry of Radiologic Technologists (ARRT). Concepts of team practice, patient-centered clinical practice, and professional development are examined and evaluated. Students are assigned to various designated clinical education rotations designed to provide patient care and assessment, competent performance of radiologic imaging, radiation safety, and total quality management. Levels of competency and outcomes of each student will be measured preparatory to, during, and following the radiologic procedure. Co-requisite: Intro to Rad Sciences, Rad Procedures
Patient Care in Radiography
This course provides the concepts of optimal patient care practices, including consideration for the physical and psychological needs of the patient and family. The role of the radiographer in patient care, routine and emergency patient care procedures, and infection control procedures using standard precautions are identified. Content provides basic concepts of pharmacology, venipuncture, and administration of diagnostic contrast agents and/or intravenous medications. The appropriate delivery of patient care during these procedures is emphasized. Activities are provided to demonstrate basic concepts of patient transfer, vital signs, aseptic technique, infection control, and other subject matter pertinent to aiding the patient in their ascent to better health. Pre-requisite: Intro to Rad Sciences

Radiographic Procedures II
In this course the student will develop the knowledge and skills of the structure and function and positioning procedures for the shoulder girdle, lower extremity, and pelvis. This course deals with the principles needed to perform routine radiographic procedures of these systems. Anatomy, positioning techniques, technical factors, equipment usage, and film critique is included. This course consists of lecture and laboratory demonstrations concerning the systems covered. Pre-requisite: Rad Procedures I

Radiographic Physics
This course establishes the basic knowledge of radiographic physics. It introduces the fundamentals of atomic structure and terminology, and the principles of production, characteristics, and control of radiation applicable to diagnostic radiology. It includes the nature and characteristics of radiation and the fundamentals of photon interactions with matter. Topics also include electromagnetic radiation, electricity, magnetism, electromagnetism, radiation generators/circuitry, and the x-ray imaging system. Pre-requisite: Intro to Rad Sciences; Co-requisite: Rad Imaging I

Radiography Clinical Education II
The second of five clinical education courses, this practical experience is designed to continue to develop, apply, critically analyze, integrate, synthesize, and evaluate concepts and theories in the performance of radiologic procedures. Through structured, sequential, competency-based clinical assignments, students continue practicing and performing the clinical competency exams required by the American Registry of Radiologic Technologists (ARRT). Concepts of team practice, patient-centered clinical practice, and professional development are examined and evaluated. Students are assigned to various designated clinical education sites designed to provide patient care and assessment, competent performance of radiologic imaging, radiation safety, and total quality management. Levels of competency and outcomes of each student will be measured preparatory to, during, and following the radiologic procedure. Pre-requisite: Rad Clinical Education I

Radiographic Procedures III
In this course the student will develop the knowledge and skills of the structure and function and positioning procedures for the vertebral column, sacrum, coccyx, bony thorax, ribs, and biliary tract. This course deals with the principles needed to perform routine radiographic procedures of these systems. Anatomy, positioning techniques, technical factors, equipment usage, and film critique is included. This course consists of lecture and laboratory demonstrations concerning the systems covered. Pre-requisite: Rad Procedures II
Radiographic Imaging II
This course continues a knowledge base in factors that govern the acquisition and production of a radiographic image. Content includes scatter control, image receptor systems, and imparts an introduction to the components of digital imaging systems found in diagnostic radiology. The student will also explore radiation-producing equipment routinely used to produce diagnostic images. Emphasis is on x-ray production, general and digital fluoroscopy, automatic exposure control, grids, beam limitation devices, and digital image receptors. Upon completion, students should be able to demonstrate the principles of selection and usage of imaging accessories to produce quality images. Pre-requisites: Radiographic Physics, Rad Imaging I

Radiography Clinical Education III
The third of five clinical education courses, this practical experience is designed to continue to develop, apply, critically analyze, integrate, synthesize, and evaluate concepts and theories in the performance of radiologic procedures. Through structured, sequential, competency-based clinical assignments, students continue practicing and performing the clinical competency exams required by the American Registry of Radiologic Technologists (ARRT). Concepts of team practice, patient-centered clinical practice, and professional development are examined and evaluated. Students are assigned to various designated clinical education sites designed to provide patient care and assessment, competent performance of radiologic imaging, radiation safety, and total quality management. Levels of competency and outcomes of each student will be measured preparatory to, during, and following the radiologic procedure. Pre-requisites: Rad Clinical Education II

Digital Imaging Equipment & Analysis
This course continues a comprehensive understanding of the components, principles, and operation of digital imaging systems found in diagnostic radiology. Factors that impact image acquisition, display, archiving, and retrieval are discussed. It includes a study of the design and function of Computed Radiography (CR), Digital Radiography (DR), digital imaging workstations, and Picture Archiving and Communications Systems (PACS). Discussion also includes image acquisition procedures and methods of evaluating radiographic systems to assure consistency in the production of quality images. Pre-requisite: Principles of Imaging Equipment

Radiographic Procedures IV
In this course the student will develop the knowledge and skills of the structure and function and positioning procedures for the upper and lower gastrointestinal systems, urinary system, the paranasal sinuses, facial bones, and skull. This course deals with the principles needed to perform routine radiographic procedures of these systems. Anatomy, positioning techniques, technical factors, equipment usage, and film critique is included. Included in this course are modifications and critical thinking procedures used during emergency and trauma situations. This course consists of lecture and laboratory demonstrations concerning the systems covered. Pre-requisite: Rad Procedures III

Radiography Clinical Education IV
The fourth of five clinical education courses, this practical experience is designed to continue to develop, apply, critically analyze, integrate, synthesize, and evaluate concepts and theories in the performance of radiologic procedures. Through structured, sequential, competency-based clinical assignments, students continue practicing and performing the clinical competency exams required by the American Registry of Radiologic Technologists (ARRT). Concepts of team practice, patient-centered clinical practice, and professional development are examined and evaluated. Students are assigned to various designated clinical education sites designed to provide patient care and assessment, competent performance of radiologic imaging, radiation safety, and total quality management. Levels of competency and outcomes of each student will be measured preparatory to, during, and following the radiologic procedure. Pre-requisites: Rad Clinical Education III
Advanced Radiographic Imaging & QC
This course presents an overview of advanced topics in diagnostic and clinical imaging modalities with an emphasis on clinically relevant modalities. Modalities include fluoroscopy, computed tomography, nuclear medicine imaging, mammography, magnetic resonance imaging, ultrasound, interventional radiography, and positron emission tomography. This course is also designed to examine the effective functioning of a radiology department. Methods for evaluating quality, equipment testing and documentation will be discussed, as well as the role of the registered radiographer in maintaining quality.

Cross Sectional Imaging
This course is a study of human anatomy from a sectional perspective. The anatomy of the head, neck, thorax, abdomen, pelvis and vertebral column are studied. This anatomy is related to the use of computer-assisted imaging modalities. Instruction incorporates CT and MR images. Common pathological findings in each area are discussed.

Radiographic Pathology
This course will provide the student with the concepts of disease and its effects and etiological considerations on the human body. Pathology and diseases as they relate to various radiographic procedures and radiographs will be discussed along with the impact on exposure factor selection. Students will participate in an individual research project and presentation of a disease process approved by the course instructor. Pre-requisite: Rad Procedures IV

Imaging Analysis I-IV
These courses require students to analyze all technical aspects of radiographic image production and use problem-solving skills to determine proper corrections required for unacceptable radiographs. This course will provide the student with the knowledge to evaluate radiographic images. Requirements will focus on the ability to identify and recognize diagnostic quality. Advancement in examination difficulty and complexity will be reflected.

Radiography Clinical Education V
The last of five clinical education courses, this clinical course provides the student with the opportunity to function more independently in all areas of basic radiography, and begins to emphasize the development of independence, discretion, and judgment while performing basic radiographic procedures. It provides the student with the opportunity to function as a nearly registry-eligible radiographer. The student is expected to correlate all clinical and didactic experiences while demonstrating a high degree of proficiency and efficiency. Concepts of team practice, patient-centered clinical practice, and professional development are expected at highest levels and are evaluated accordingly. This clinical experience provides the final opportunity for an introduction to special imaging modalities by scheduling rotations through CT, MRI, Sonography, Nuclear Medicine, Cardiac Catheterization/Interventional Radiography, and Radiation Therapy. Levels of competency and outcomes of each student will be measured preparatory to, during, and following the radiologic procedure. Pre-requisite: Rad Clinical Education IV

Radiation Biology & Protection
This course provides an overview of the principles of the interaction of radiation with living systems and describes various radiation protection methods. Radiation effects on molecules, cells, tissues and the body as a whole are presented. Factors affecting biological response are presented, including factors affecting cell response to acute and chronic results of radiation. Cell survival, genetic mutation, somatic and genetic effects of radiation, response to radiation of various tissues, and radiation syndromes are covered. Content presents the responsibilities of the radiographer for patients, personnel and the public. Radiation health and safety requirements of federal and state regulatory agencies, accreditation agencies, and health care organizations are incorporated. Students will be complete a scholarly research paper on an approved radiobiological topic approved by the course instructor. Pre-requisite: Radiographic Physics
Comprehensive Registry Review
This is a capstone course learning experience offering a comprehensive review intended to serve as preparation for the national examination in Radiography given by the American Registry of Radiologic Technologists (ARRT). Review of the five categories specific to the ARRT’s content specifications for the exam in radiography will be presented through examination of text information and test results. Students will complete Content Area Examination (CAE) tests over each section of study presented in the ARRT registry certification and several composite “mock” ARRT exams that simulate the national examination covering the content specifications as determined by the ARRT. Pre-requisites: (All previous Core Courses)

Advanced Placement
Due to the sequential nature of all radiography didactic and clinical courses, as well as limited number of students, Marshfield Clinic School of Radiography does not accept transfer credits for radiography course work or clinical experience from any other radiography/radiologic technology program. If an individual that has completed credits from another radiography program and intends to apply to the Marshfield Clinic School of Radiography, they must apply for selection as all other applicants and complete all radiography courses and clinical in the same curriculum sequence.
A. Correlation Between Didactic and Clinical Instruction

The primary clinical affiliates of this program are Marshfield Clinic and Marshfield Medical Center. These sites provide an adequate number of radiographic rooms to ensure that the students can acquire expertise and proficiency in a wide variety of diagnostic radiographic procedures by applying classroom theory to the actual practice of technical skills on specified levels of competency.

The didactic component of radiographic procedures is taught through lecture and laboratory demonstration and practice. The lecture portion reinforces the anatomy involved with a particular exam and instructs the student in the proper methods of carrying out a particular exam, i.e. the various positions used, and the theory applicable to those positions. The laboratory portion of instruction is used to demonstrate proper methods and positioning, allowing students to practice positioning through role playing, and to demonstrate an acceptable level of competence to the instructor in these procedures.

Once the student learns a new exam category through didactic instruction and an acceptable level of competence in the new category is demonstrated both in the written classroom (cognitive), and in the lab setting (psychomotor), the clinical affiliate is informed that the students can perform the exams in that category under *direct supervision*. The Registered Technologist in which a student is assigned monitors that student’s performance. The technologist evaluated the student’s clinical competency when an exam is performed under their supervision. Each exam category has a set minimum number of competency evaluations that must be completed. The student must achieve an 85% or higher on each evaluation to establish clinical competence for that exam. With record of competence, the student may perform under *indirect supervision*. A list of exam categories and the date by which they must be successfully completed is provided in the Clinical Evaluation section of this handbook. In the clinical setting there is virtually constant supervision by the technologists so that film critique and evaluation of the students’ performance is continuous and noted.

Image Production and Evaluation is instructed both by lecture and by laboratory demonstration and practice. The lecture component of instruction is used to teach the correct theories and formulas for determining correct exposure factors and for correcting sub-optimal exposure factors. Laboratory instruction is used to demonstrate these theories and formulas, as they would apply to clinical situations, and to provide students with actual practice and experimentation in the use of these theories and formulas. In the clinical setting there is supervision by the technologists so that image critique and evaluation of the students’ performance is continuous and noted. It is a requirement of the clinical affiliation sites that the technologist monitoring the exam or reviewing the images, initial all images produced by students in the program.
Basic radiation protection measures are taught early in the program as part of program orientation, Radiographic Procedures I, and Introduction to Radiologic Sciences. This is designed to give the students a preliminary understanding of the principles for protecting the patient and him/herself and other staff in the clinical setting. Radiation protection instruction is an on-going process throughout Radiographic Procedures as well as student clinical rotations. Students are evaluated weekly on their consistency at following radiation protection guidelines. A class devoted to radiation biology and protection is included in the curriculum and is instructed in the second spring semester of the program.

B. Clinical Education
The clinical education portion of the program provides a means for the student to acquire the skills necessary to perform the duties of an entry-level technologist. The purpose of clinical assignments is to allow the student opportunity to apply theoretical principles of radiography, patient care, and department procedures to practical experience. The student will have the status of learner and will not replace department personnel.

Students will be scheduled for approximately 18 hours per week of clinical time during the first (1st) and second (2nd) semesters of the program, and approximately 24 hours per week of clinical time during the third (3rd), fourth (4th), and fifth (5th) semesters of the program. At no time will a student be scheduled more than 40 hours per week of combined clinical and didactic hours. Students will be required to attend early morning, day, afternoon, and evening shift clinical rotations while enrolled in the program. Students will also be scheduled weekend rotations during enrollment in the program. Students will not be required to complete more than 25% of their total clinical time during the evening/overnight hours of 7:00pm – 5:30am or weekend hours at any time during the program. No substitutions for clinical rotation times will be allowed. The Radiography Program reserves the right to make changes to clinical rotation times as deemed appropriate for quality clinical education, adequate procedure, and competency completion. Please see the Clinical Education Section for details on Clinical Rotations, Times, Expectations, and Grading.

C. Clinical Competency Development
The radiography curriculum is founded on principles of Competency-Based Education (CBE) and designed to develop knowledge, skills, and attitudes. The educational experiences are directed toward preparing individuals to perform pre-specified tasks of an occupation or profession under “real world conditions” and to perform these tasks at a level of accuracy and speed required of radiographers on the job. The goal of clinical educations is to allow students to achieve competence in the responsibilities of the profession before leaving the education program.
Clinical experiences are arranged in a sequential manner and proceed to a new experience only when the student has achieved the specified level of competence in the previous task. Continuous evaluation and reinforcement of student performance is critical in CBE. The students participate by: (1) assisting a practicing technologist and observing details of a procedure (2) performing various tasks after becoming familiar with them (3) progressing into more independent phase of performance. This means that the student will perform the task or procedure under supervision of the technologist. During each step, the student's ability and performance are evaluated.

a. A method of Competency Based Education is utilized. The method is based on cognitive, psychomotor, and effective (behavioral) domain instruction.

b. Students are assigned clinical competency categories of radiographic exams, which are intended to be completed in a prescribed period of time. The clinical competency categories are those clinical competency requirements adopted by the ARRT.

c. Competency achievement is noted when a student completes the required number of exams under direct supervision, with an 85% or higher score.

d. Verification of completion of a category will be by the Program Director.

e. Prior to completing any clinical category, the student must have completed the anatomy and positioning lecture and laboratory classes associated with the particular category and have attained a minimum grade of 85%, B, on both the written and laboratory exam.

f. The student will perform the designated number of examinations in each competency category under the supervision of a registered technologist.

**Student Maximum Hours**

Students in the Radiography program at no time will be scheduled more than 40 hours per week of combined clinical and didactic hours. In addition to day shift clinical rotations, students will also have scheduled rotations on weekends, as well as afternoon and evening shift work throughout their enrollment in the program. A schedule of clinical rotations will be provided to them in advance indicating their clinical rotations for each semester. Weekend and evening rotations provide students with the possibility for more exposure to trauma/mobile procedures and enables students to assess the various shift atmospheres in which they may be employed upon program completion. Weekend and evening hours will equal the same hours as a regular clinical day shift for that current semester.
Semester Weekly Schedules

The Marshfield School of Radiography Curriculum and Semester Schedules are reviewed annually and are subject to change. The current Semester Weekly Schedules reflect the most current academic term at time of public posting. This schedule is provided for the 2019-2020 academic year. Students are required to be present for all scheduled class and clinical rotations.

For the first and second semesters of the program, Junior students will be scheduled for academic classes on Monday, Wednesday, and Friday, between the hours of 7:00am and 5:00pm. Classes will total approximately 15-16 hours per week. Clinical rotations will be scheduled on Tuesday and Thursday. Individual rotation times will vary (see Clinical Education Section) but will be approximately 18 hours per week.*

For the third, fourth, and fifth semesters of the program, Senior students will be scheduled for academic classes on Tuesday and Thursday, between the hours of 7:00am and 5:00pm. Classes will total approximately 12-13 hours per week. Clinical rotations will be scheduled on Monday, Wednesday, and Friday. Individual rotation times will vary (see Clinical Education Section) but will be approximately 24 hours per week.*

*In the event a class cannot be held, program officials reserve the right to reschedule for a different day/time, or re-assign the academic time to clinical education.

![Junior Fall & Spring Schedule Table]

![Senior Summer, Fall, and Spring Schedule Table]
Certification/Licensure

American Registry of Radiologic Technologists (ARRT)
Upon completion of the program, graduates that have met the professional educational requirements for certification by the ARRT are eligible to sit for the national certification examination. Graduates apply for examination up to three months prior to program completion. When all program requirements have been at the end of the 22-month program, graduates can take the ARRT exam immediately following program completion (if they have been awarded their affiliate University degree). Graduates that have met the credential requirements, pass the ARRT examination, and are in compliance with all ethical standards, are awarded the credentials of R.T. (R) – Registered Radiologic Technologist.

The American Registry of Radiologic Technologists (ARRT) is the world’s largest credentialing organization that seeks to ensure high quality patient care in radiologic technology. Students may access exam pre-requisites, content specifications, and educational opportunities at:

ARRT
1255 Northland Drive.
St. Paul, MN 55120
(651)687-0048
https://www.arrt.org

General qualifications for certification eligibility by the ARRT also require that candidates be of good moral character. If an applicant has been convicted of misdemeanor charges, a felony offense, military court martial, or honor code violations, they may elect to visit the ARRT website and complete an “Ethics Review Pre-Application Packet.” This process will require court documents and evidence of having served the entire sentence, including probation and parole, with restoration of civil rights before being admitted to the certification exam. Students who have had previous convictions may apply to ARRT for precertification prior to program registration. Enrolled students may complete an ethics review up to six months prior to graduation. This review process assures that the learner will be eligible to sit for the certification examination upon program completion.

Wisconsin State Licensure
In 2010, Wisconsin enacted a law which establishes licensing and permitting requirements for those who perform medical radiography or provide medical radiographic services. The 2009 Wisconsin Act 106, Chapter 462 of the Wisconsin statutes, requires that any person, who performs radiography or operates an X-ray machine or X-ray equipment, shall obtain a license to perform radiography. Students enrolled in an accredited radiography program may operate X-ray machines under the supervision of a credentialed and licensed Radiographer. Students may not be employed to operate an X-ray machine during the education process. Upon graduation, the new ARRT registered technologist may apply for a state of Wisconsin license with proof of active ARRT certification and pay the required fees for the state license. Additional details can be found at http://dsps.wi.gov, Wisconsin Department of Safety and Professional Services, under Professions->Radiographer, Licensed.
Professional Memberships and Societies

American Society of Radiologic Technologists (ASRT)  
www.asrt.org

_The Community for Radiologic Technologists and Students._

The American Society of Radiologic Technologists is the premier professional association of people working in medical imaging and radiation therapy. The American Society of Radiologic Technologists (ASRT) organization offers various educational and scholarship opportunities.

ASRT student group membership is a requirement for the 2nd year students to utilize in their final semesters of the program. The ASRT provides student group memberships at a reduced membership fee. All 2nd year students will sign up for the ASRT organization after instructions are received through the program director or clinical coordinator. The ASRT offers students registry prep practice examinations and other study modules to prepare the student for successful completion of their radiography exam.

Student members of the ASRT are also provided opportunities in areas of a Job Bank, Grants and Scholarships, Salary Estimator and resources for specific disciplines, special discounts on uniforms and this is just the start! Educational publications are also available and the list goes on.

Students are encouraged to visit the ASRT web site to view all possibilities and opportunities provided. Students are also highly encouraged to become members as Juniors, but is not required.

Wisconsin Society of Radiologic Technologists (ASRT)  
Wisconsin Assoc. of Educators of Radiologic Technology (WAERT)  
www.wsrt.net

_“The Wisconsin Society of Radiologic Technologists shall advance medical imaging and therapy professionals by assisting in and maintaining high standards of education, advocacy, and communication to enhance the quality of patient care.”_

At the start of the program, students will be provided with information for opportunities as members of WSRT/WAERT.

Each spring, senior students are strongly encouraged to attend the Wisconsin Association of Educators in Radiologic Technology (WAERT) Annual Spring Student Symposium. While in attendance, students will participate in professional meetings. In addition, all students in attendance are encouraged to submit an exhibit or essay entry for the meeting, and encouraged to participate in a Student Quiz Bowl which prepares them for the ARRT Certification Examination.

There is a cost for the student symposium, which is a responsibility of each student. Specific amount for symposium costs will be disseminated to students as the information is received each spring.
Lambda Nu National Honor Society

Wisconsin Sigma Phi Chapter, Lambda Nu National Honor Society

Lambda Nu is the National Honor Society for the Radiologic and Imaging Sciences. Marshfield Clinic School of Radiography is proud to sponsor its own Chapter of the Lambda Nu, the Wisconsin Sigma Phi Chapter. The purpose of this Chapter is to:

- Foster academic scholarship at the highest academic levels
- Promote research and investigation in the radiologic and imaging sciences
- Recognize exemplary scholarship

Radiography students and alumni can qualify for membership according to the following standards:

- Enrollment in the MCHS School of Radiography program for a minimum of two consecutive semesters as a full-time student, and
- Completion of a minimum of two successive semesters with 3.5 GPA total, or higher, in MCHS radiography courses, and
- Evidence of professional commitment beyond minimum requirements of the program, including but not limited to (with prior Program Director approval):
  - Active INDIVIDUAL participation and completion of competition project at the WAERT (Wisconsin Association of Educators in Radiologic Technology) Student Symposium, as evidenced by the following:
    - Video, Essay, Presentation, Computer, or Scientific (admin approved in advance) and
    - Participating in the student quiz bowl completion
  OR
  - Two documented community service projects. (8 hours minimum total-4 hours each)
    - Events must be pre-approved by Program Director
    - 4 hours must be completed actively participating in the “event,” and does not include preparation, planning, etc. Must submit documentation and proof of active 4hr participation
  OR
  - Actively pursuing an independent research project with presentation.
    - Written Research: Eight (8) page body minimum, with proper citations. Pathology or procedure related to Radiology, and
    - Oral presentation: PowerPoint (Slide Presentation) to class, clinical preceptors, technologists at SOR meeting.

All members must register and pay national dues as well as meet all Chapter obligations.
Class Representatives

Each class elects a president and vice-president to serve as representation for the class. The representatives are elected by a majority and will serve as leaders for the class. The class representatives lead class activities, discussions, and serve as a chairperson in decision making, as well as other necessary functions. The class president will attend Advisory Committee meetings on behalf of the class. **If, at any time, a chosen class representative has been issued any kind of disciplinary action, he/she will be removed from their position, and a re-election will take place.**

Academic Advisory Committee

Marshfield Clinic School of Radiography’s Advisory Committee supports the mission of the institution and program. The committee is representative of clinical education agencies, academic interests, institutional representatives, communities of interest and/or radiography students.

The committee holds a minimum of two meetings per year. The Program Director distributes the agenda prior to the meeting, and the minutes are recorded and delivered to all members, present or absent. The Advisory Committee’s responsibilities are inclusive of program planning, evaluation, and external validation. The committee acts as an information resource.

The functions of the student class presidents/representatives are to:

1) Represent the student bodies;
2) Voice collective views and concerns that require the approval of the Academic Committee. Student presence at advisory meeting is **not to bring negative, derogatory, or unannounced complaints to the committee. It is not a venue for students to voice displeasure with homework, curriculum requirements, or strict rules.** It is a forum for students to request professional discussion, input, and/or approval on items that have been presented to the program and/or Director, but need further committee input or approval.
3) Report to their class the activities and/or decisions of the committee.

School of Radiography Meetings

School meetings are held each month, outside of clinical or class time. Meetings will **not** take the place of academic or clinical time. Students should expect one time each month they will be required to attend the mandatory school meeting at a time other than their scheduled clinic or class time. Meetings will be scheduled between the hours of 7:00am and 7:00pm, lasting approximately two (2) hours. If a student does not attend a meeting, he/she will have to make up the time and documented as disciplinary action.

The School of Radiography meetings are used to convey important information and updates, review and reiterate policies and procedures, promote communication between departments, and hold open forums and discussions on items and events. Meetings are attended by program officials, clinical instructors, students, clinical department management, and program faculty.
Student Records

In accordance with the Family Educational Rights and Privacy Act (FERPA), a student’s file is available to the student for his/her examination. Permission (by the student) to view his/her file cannot be denied and must be received from program faculty.

The Program Director is responsible for the completeness, accuracy, and safekeeping of each student’s file. Conferences are regularly scheduled at the mid-term of each semester for the purpose of reviewing the student’s academic progression status, and to allow the student the opportunity to review any part of their individual record. Students can also request to view their progress or student file at any time when faculty are present.

Confidential Student Academic Work

A student’s academic or clinical work is considered to be a part of his/her student record. This includes exams, assignments, clinical forms, time off requests, and any other academic or clinical form that has pertinent student information.

To maintain the security and confidentiality of this material, the following have been implemented:

- Placement of locked drop boxes in each clinical setting for submission/placement of grade-sensitive academic documents. Only program administration and faculty have access to the locks that operate the drop boxes.
- Doors to the Program Director and Program Faculty offices will remained locked at all times. Access is only granted by authorized security ID badges and limited to Program Administration.
- Student documents are maintained in the Program Director’s office which are locked at all times when not occupied. Student clinical evaluation documents are stored electronically and maintained for a period of eight years. All course final grades and academic information is stored electronically indefinitely.

Release of Student Directory Information

Pursuant to the Family Educational Rights and Privacy Act (FERPA), the School of Radiography has established policies governing privacy and release of student record information.

Directory Information

The School of Radiography has designated certain personally identifiable information as directory information, which may be released at the program’s discretion to anyone who makes a request. Marshfield Clinic School of Radiography considers the following information as directory information, subject to release:

1. Full Name
2. Dates of attendance
3. Academic Certifications received
4. Date of birth

Students may opt out of the release of directory information by written notification to the program director.

Non-Directory Information

The School of Radiography does not permit access to, or the release of education records, without proper authorization of the student with the following exceptions:

1. A student’s University affiliate, while enrolled
2. Faculty who require such records in the proper performance of their duties
3. Accrediting agencies
4. To comply with judicial order or lawfully issued subpoenas
Student Transcripts
A student can request the release of his/her official and/or unofficial transcript to be released to oneself, or a designee by completing and signing a Transcript Request Form, available from the program office or website.

Program Tuition and Segregated Program Fees

Effective July 1, 2019, Tuition for the School of Radiography 2019-2020 Academic Year is $6,000 per year (August 2019-July 2020).
Tuition costs are evaluated each July and subject to an annual increase at that time.

Effective July 1, 2019, Segregated Program Fees for the School of Radiography 2019-2020 Academic Year are $425.00 ($150 due the Fall of the first semester, $275 due the Fall of the fourth semester).
Segregated Program fees are evaluated each July and subject to an annual increase at that time.
Upgrades or additions to services are at the discretion of the Program Director and selected based on best practices for the success of the student.

Segregated Program Fees are required fees to be paid by each student and are associated with labs, computers, educational resources, and professional growth. These are not part of tuition costs, and are the financial responsibility of each student.

Optional Fees
Optional Additional fees are possible throughout the program to cover voluntary costs such as professional development and student events/conferences.

Student Resources

Financial Aid
The School of Radiography does not offer financial aid; however, university affiliation enrollment students may use their financial aid through their university to help pay for tuition.
Students are encouraged to contact their affiliate university financial aid office for information.

Students are also recommended to visit www.fastweb.com to search and apply for scholarship opportunities.

Academic Advising
The faculty members of the School of Radiography are available to serve as student academic advisers. They may be able to assist you with identification of program requirements, interpretation of procedures, and any other questions that may arise. Students or advisers may initiate a conference or meeting whenever needed.
Disability Services
The School of Radiography is limited in providing disability accommodations. We may approve and provide reasonable accommodations to ensure equitable and fair treatment with documentation of a physician’s note.

Accommodations will be determined by School of Radiography Program Administration. Such accommodations may include a different font size for written assignments and exams, longer time period allotted for test taking, and additional reasonable requests as determined by the Program Director.

Counseling Resources
Counseling service is available for enrolled students based on their affiliate university.

For those students enrolled independent of an affiliate university, students are referred to the local United Way 2-1-1 service. More information about this free service can be found on www.marshfieldareaunitedway.org/2-1-1.html.

UW-Oshkosh: Students are fully eligible for counseling services by virtue of paying their share of Segregated Fees. For more information, visit www.uwosh.edu/couns_center.

Marian University: Students are fully eligible for services at the Counseling Center. Their direct phone number is 920-923-8799. Students are also encouraged to contact the academic adviser at Marian directly, if preferred.

Saint Cloud State University: Students are encouraged to take advantage of the local United Way 2-1-1 service, as referenced above. Further information for SCSU specific counseling is available in the program director's office.
SECTION TWO:
ACADEMIC STANDARDS
Radiography Program Progression Standards

Marshfield Clinic Radiography students must follow the curriculum sequence. Students cannot withdraw from any Radiography course. In doing so, the student will no longer be eligible to continue in the program. In the event of a requested and approved program Leave Of Absence (LOA), students must resume at the start of the semester in which they withdraw, the following academic term. Program administration reserves the right to re-assess all previously completed subject areas, content, procedures, and competency as they determine is needed for successful progression. This can/may include re-assessing with final examinations, repeat competencies, etc.

The Marshfield Clinic Radiography student must meet the following criteria to continue enrollment at any time:

1. **Must complete each semester requirement completely before progressing to the next semester.** An incomplete in any course must be completed within 15 days of the start of the next semester, meeting all objectives. If a student does not meet the requirements for completion of semester within 15 days, the student will be withdrawn from the program. Students may choose to reapply to the program (as a new applicant) the following academic year, but must complete all courses in sequence again, and are not guaranteed acceptance.

2. **Must achieve a letter grade of “B” (85%) or above in each Radiographic Procedures and Lab, and Clinical Radiography, and a letter grade of "C" (77%) in all other courses in order to progress.** If a student fails to achieve this it will result in academic probation for the first offense (any course), and termination from the program for the second offense (any course). Radiography courses cannot be repeated if the minimum is not achieved. Students may choose to reapply to the program the following academic year, but must complete all courses in sequence again, and are not guaranteed acceptance.

3. **The student must demonstrate progression with clinical exam competencies.** The program requires a specified minimum number of competency completions per semester. If a student fails to complete the minimum competencies required in a given semester more than twice during the program at any time (2 semesters), the student will be placed on academic probation. If a student fails to complete the required competencies a third time (3rd semester) the student will be dismissed from the program.

4. **The student must demonstrate progression with written cognitive competency exams.** The program requires students to maintain a cognitive comprehension of the Radiography Curriculum, demonstrated by issuing a written competency exam at the end of each semester. The student must pass each written competency examination with a **minimum score of 77%**. In the event a student does not pass, the student is placed on academic probation and given the opportunity to take a repeat different, but comparable, test. The student must pass this repeat test with a **minimum score of 77%**. Successful completion of the repeat test is mandatory to remain in the program. Failure to pass the repeat test will result in dismissal from the program. A failing grade on a written comprehensive competency exam will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in termination of the program.

5. **The student must complete all required clinical hours as scheduled.**

6. **The student must complete all clinical and didactic objectives before progressing on to the next semester.**

7. **The student must exhibit ethical and professional conduct at all times as outlined in the professional code of ethics.**

8. **The student must abide by all program and clinical site policies and procedures.**

9. **The student must be eligible to participate and complete all clinical duties at all clinical education sites.** If a student is prohibited from attending clinical at any of the clinical education sites for any reason, they will be dismissed from the program.

10. **The student must maintain professional and behavioral standards appropriate to the profession in both the didactic and clinical setting.**
Technical Standards for Student Radiographers

The following requirements are necessary to perform as a Radiography student. All selected students in the Marshfield Clinic School of Radiography program must possess the following:

1. Sufficient verbal and written skills in order to respond to other members of the healthcare team.
2. Sufficient visual ability to view patient/exam orders, as well as additional patient information with charts (including electronic charts) and radiographic images. Sufficient vision required to observe patient conditions in regards to patient safety.
3. Must possess sufficient hearing in order to interact, communicate and respond to patients and hear audible sounds related to various medical equipment.
4. The ability to stand and remain ambulatory for approximately 80% of the clinical time.
5. Intellectual and emotional skills to exercise discretion in handling confidential medical information.
6. Cognitive ability to perceive and deal appropriately with environmental threats and stresses and continue to function safely and effectively during stressful situations.
7. The ability to protect self, patients and other members of the healthcare team from infectious disease by understanding the basic concepts of infection control/standard precautions.

The student must be able to perform all motor skills necessary to execute all radiologic examinations.

1. The student must be physically able to lift, move and transfer patients.
2. The student must be physically able to lift and carry image receptors.
3. The student must be physically able to manipulate and move all mobile x-ray units.
4. The student must be able to fulfill any additional physical requirements essential to complete the course of training.

Graduation Requirements

The Marshfield Clinic Health System Certificate Degree in Radiography is awarded to students with the below criteria:

1. The student must achieve a letter grade of “B” or above in each Radiographic Procedures/Lab and Clinical course comprising the program.
2. The students must achieve a letter grade of “C” or above in all other courses comprising the program.
3. The student must fulfill all program course requirements.
4. The student must complete all clinical assignments/hours as scheduled.
5. All American Registry of Radiologic Technology (ARRT) clinical competencies must be met.
6. Program completion must be within 150% of program length. If a student requests a leave of absence for non-academic reasons and the leave is approved, it will be for a total of one year. The student must resume attendance at the beginning of the semester in which the leave was granted and demonstrate continuous enrollment thereafter for completion. Competency of all previously completed subject areas, content, and procedures must be re-evaluated and successfully achieved with minimum requirements in order to resume.

Student will be required to be re-evaluated prior to re-entry and re-entry is dependent on available space; not to exceed class capacity. Approval for re-entry in the program following a Leave Of Absence will not be granted if the student was not in good academic standing prior to leave request.

The student must complete all program requirements for ARRT Radiography exam certification.
Grading Scale

All didactic (lecture/lab) and clinical education courses must be taken in sequence. A minimum grade of “B” is required in all Radiographic Procedures/Lab and Clinical courses, and a minimum grade of “C” is required in all other courses within the Radiography Program Curriculum.

The grading scale for the Radiography Program is as follows:
93% -100% = A
85% -92 = B
77% -84 = C
69% -76 = D
< 68% = F

Evaluating Competency

The Clinical Objective Evaluation (COE) is a 5 step format for evaluation of student competence.

1. Cognitive (Written Examination)

2. Psychomotor (Simulation Examination)

3. Clinical Participation (Under Direct Supervision)

4. Final Competency Examination (Under Direct Supervision)

5. Competency - Independent Clinical Performance (Under Indirect Supervision)

Cognitive & Psychomotor: These competency assessments involve written proficiency (cognitive) exams and laboratory simulation proficiency (psychomotor) exams, and occur simultaneously. The student will demonstrate mastery with a minimum performance level of 85% in both the cognitive and psychomotor domains before advancing to the clinical participation step. Failure to complete the minimum proficiency level in either step will require the student to repeat the particular proficiency examination (with highest possible score of 85% on repeat exam). Upon successful completion of the re-examination, the student may advance to the clinical participation step. If, upon completion of the re-examination the student still does not pass with proficiency, he/she will be placed on academic probation and will have a third (3rd), and final, opportunity to retake the examination. If the student passes the third (3rd) re-take, he/she will remain in the program under the conditions of their probation, and advance to the clinical participation step. If the student does not pass the re-take on the third (3rd), final, attempt, termination from the program will result. A failing grade (and remediation) in either of these steps will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure in either of these steps will result in termination of the program.
Clinical Participation: Upon successful completion of the cognitive and psychomotor proficiency exams/steps, the student will begin clinical participation by assisting registered technologists at the clinical site. This participation moves from the passive, observation mode to a more active mode, which includes assisting the technologist in the execution of procedures. The rate a student progresses is dependent on the student's ability to comprehend and perform the assigned procedures as well as the student's individual motivation. As the student becomes experienced in a given procedure, he/she will perform the procedure under DIRECT SUPERVISION of a registered radiologic technologist (RTR>1year). The RTR will evaluate the performance of the student using the evaluation form until the required number of procedures within the category has been completed. The student must demonstrate mastery with a minimum performance level of 85% on each evaluation before he/she can progress to the Final Competency Examination step. If a student fails to achieve an 85% he/she will continue in Directly Supervised clinical participation until passing proficiency is achieved.

Final Competency Examination: Upon successful completion of the required number of Directly Supervised procedures in each category (Clinical Participation), the student will request a Final Competency Examination Evaluation to complete the category. This procedure is completed exclusively by the student, under DIRECT SUPERVISION of the evaluation technologist (RTR>1year). Once the procedure is complete, a Clinical Instructor will evaluate the student’s proficiency of the Image Acquisition and Analysis. The student must demonstrate mastery with a minimum performance level of 85% on each Final Competency Examination evaluation. Upon successful completion, the student may now perform in this category with INDIRECT SUPERVISION. Failure to complete the minimum proficiency level in the Final Competency Examination step will require the student to repeat the particular final competency examination (with highest possible score of 85% on repeat exam). Upon successful completion of the re-examination, the student may now perform in this category with INDIRECT SUPERVISION. If, upon completion of the re-examination the student still does not pass with proficiency, he/she will be placed on academic probation and will have a third (3rd), and final, opportunity to retake the Final Competency Examination evaluation. If the student passes the third (3rd) re-take, he/she will remain in the program under the conditions of their probation, and can now perform in this category with INDIRECT SUPERVISION. If the student does not pass the re-take on the third (3rd), final, attempt, termination from the program will result. A failing grade (and remediation) in this step will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in termination of the program.

Any repeat examinations will require the presence of a RTR in the radiographic room with the student, and documentation of the repeat.
Maintaining Competency/Proficiency

To ensure that all students maintain the psychomotor comprehension of Clinical Competency categories, students will be assigned real patient and/or simulated procedures throughout their assigned clinical rotations to evaluate whether proficiency in completed categories and procedures is maintained. Four (4) times during each semester, students will randomly be “spot – checked” on live patients or simulated procedures, designated by the Clinical Instructor, to monitor the proficiency of prior achieved final competencies. Failure to pass any spot-check examination with an 85% or better will require the student to return to the Clinical Participation step in competency for re-evaluation of that category, and all previously earned clinical competencies in that category will be revoked. A failing grade on a spot-check procedure will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in the student being placed on academic probation.

To ensure that all students also maintain a cognitive comprehension of the Radiography Curriculum, the program administers a written comprehensive competency examination at the end of each semester. Each test will cover the material previously learned in all previous semesters.

The student must pass each written competency examination with a minimum score of 77%. In the event a student does not pass, the student is placed on academic probation and given the opportunity to take a repeat different, but comparable, test. The student must pass this repeat test with a minimum score of 77%. Successful completion of the repeat test is mandatory to remain in the program. Failure to pass the repeat test will result in dismissal from the program.

A failing grade on a written comprehensive competency exam will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in termination of the program.
SECTION THREE:
PROGRAM POLICIES AND PROCEDURES
Program Policies and Procedures

The Marshfield Clinic School of Radiography establishes policies and procedures that are designed to protect everyone involved in the daily activities and affiliations of the program. In addition to the hospital and clinic mandated policies and procedures, programs must also assure everyone involved in the program is abiding by the Joint Review Committee on Education in Radiologic Technology (JRCERT) policies as well. **The School of Radiography strictly enforces its policies and procedures with all students.**

The Marshfield Clinic School of Radiography requires a respectful and professional behavior exhibited by students at all times. Students are expected to follow professional standards and ethics as outlined by the American Registry of Radiologic Technologists (ARRT) when in the classroom, laboratory and clinical settings.

Faculty provide both oral and written feedback regarding professional behaviors of students during mid-semester and semester end. Students are expected to change unsatisfactory behaviors after receiving feedback from faculty; some examples of such behaviors are stated in this policy but faculty reserve the right to determine inappropriate professional behaviors if such is affecting all entities involved with the program. Serious deficits in professional behavior with no improvement may result in a probationary status or dismissal from the program. Disciplinary action and conduct associated with such is outlined in this handbook.

**Program Administration reserves the right to add, delete, or change content contained within this Handbook at any time. Notice will be given to students in an appropriate timeframe and documented.**

Immunization and Health Screening Data Requirements

Healthcare workers are required to keep their immunizations up-to-date and students preparing for those professions must also comply. Following acceptance into the Radiography program, new students will be provided instructional information to meet compliance with all immunization and CPR requirements prior to the start of clinical. Students enrolled in Marshfield Clinic School of Radiography participate in clinical training experiences as an essential part of their studies. Clinical training includes performing direct patient care through participation in clinical experiences at affiliated hospitals.

To protect the health of students, patients, employees and others, and to comply with standards established by the affiliated healthcare providers, the School of Radiography requires all students enrolled to provide dates of current immunization against certain vaccine preventable diseases, and date and results of current tuberculosis (TB) screening **before the student is eligible to participate** in clinical training, unless an exception applies.

Marshfield Clinic School of Radiography students must comply with both Wisconsin law and clinical facility requirements related to immunization and testing.
ARRT Code of Ethics

Ethical professional conduct is expected of every member of the American Society of Radiologic Technologists and every individual registered by the American Registry of Radiologic Technologists. As a guide, the ASRT and the ARRT have issued a code of ethics for their members and registrants. By following the principles embodied in this code, radiologic technologists will protect the integrity of the profession and enhance the delivery of patient care. **Marshfield Clinic School of Radiography has adopted these Code of Ethics for enrolled students and requires adherence to its standards.**

By exhibiting high standards of ethics and pursuing professional development opportunities, radiologic technologists will demonstrate their commitment to quality patient care.

The ARRT Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders 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 socio-economic 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 services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare 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 respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

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Conduct Subject to Program Discipline

The program reserves the right to dismiss any student whose conduct, health, or clinical practice makes it inadvisable for the student to remain in the program.

1. Program administration may place a student on probation if the student is habitually late for class or clinical or is demonstrating the probability of failing for exceeding Personal Time Off (PTO) as outlined in the attendance policy.

2. The student disciplinary procedure will be initiated due to substandard, unprofessional, disrespectful, unethical, or inappropriate conduct at the discretion of Radiography program faculty or program administration.

Program disciplinary action, suspension, probation, or dismissal may include, but not limited to the following reasons:

a. Discourteous treatment of patients, the public, employees or fellow students.
b. Disclosure of confidential information.
c. Threatening, bullying, intimidating or verbally/physically abusive conduct demonstrated toward, another person, and/or in the presence of patients, co-workers, visitors or others
d. Engaging in conduct determined to be in violation of Marshfield Clinic’s Harassment in the Workplace or Marshfield Clinic’s Workplace Violence policies
e. Unauthorized and/or improper use of computers within the school or clinical education sites.
f. Insubordination, which would include disrespect for patients, program officials, affiliated personnel, or other students in the program.
g. Falsification/Dishonesty with clinical documentation or clinical absence
h. Neglect of assigned clinical duties
i. Repeated tardiness and/or absenteeism
j. Unexcused absenteeism; failure to follow notification procedures as outlined in the attendance policy.
k. Failure to abide by program supervision and repeat policy
l. Unethical or unprofessional conduct in class or clinical setting.
m. Possession or use of alcohol or any mood altering chemical on the premises of MCHS or clinical education sites. This includes attending class or clinical education while intoxicated.
n. Theft or misappropriation of personal, clinical site or college property.
o. False statements on admission, identification or other official documents involving college, program or clinical education sites.
p. Using radiographic equipment in lab or clinical sites for personal use.
q. Probation may occur if student is receiving poor weekly evaluations demonstrating they are not meeting the criteria consistently.
r. Failure to achieve minimum program requirements
s. Insubordination to instructors, faculty, staff, program officials, clinical staff

It is difficult to outline all misconducts that will result in disciplinary action. Program faculty will determine the seriousness of any reported offense following investigative procedures for verification and determine the appropriate level of discipline.
3. Professional behaviors reflect the standards and ethics outlined by the American Registry for Radiologic Technologists. Such professional behaviors and attributes are necessary for success as a radiologic technologist in the clinical environment. Failure to demonstrate professional behaviors while enrolled in the program may result in probation or dismissal from the program, as deemed necessary by program officials. Students are advised that if a clinical education sites refuses to allow a student to participate in clinical activities in their department for any reason, the student will not be allowed to continue in the program.

Immediate dismissal from the program without verbal warning or probation status may result from, but not limited to, the following reasons:

   a. Possession or use of alcohol or any mood-altering chemicals on the premises, both campus and clinical education sites, or reporting to class or clinical intoxicated.
   b. Carelessness in regard to safety of patients, self and colleagues.
   c. Dishonesty, cheating or theft. This includes plagiarism.
   d. Release of confidential information regarding patients and/or clinical affiliate personnel or activities.
   e. Failure to abide by program supervision and repeat policies.
   f. Prohibited from performing clinical duties at any of the program clinical education sites due to ethical or professional violations.
   g. False information that would jeopardize patient and healthcare personnel safety.
   h. Sleeping or appearing to sleep while on duty.
   i. Insubordination
   j. Abuse, theft, or destruction of property belonging to the clinic, patients, visitors, peers or others
   k. Misrepresenting oneself to patients, program faculty, management or others.
   l. Using a Marshfield Clinic’s computer network resources to access, display or distribute material determined to be sexually explicit, pornographic or obscene in nature.
Disciplinary Procedure – Sequence for Professional Behavioral Reasons

The student disciplinary procedure will be initiated due to substandard, unprofessional, unethical, or inappropriate conduct at the discretion of the Program Director, Program Faculty, and/or clinical affiliates.

1. Upon notification of a student's inappropriate conduct, the Program Director and/or Faculty will meet with the student to discuss the matter and inform the student of the specific conduct deemed inappropriate, and the corrective action needed. If the behavior involves a clinical education site, the clinical instructor may also be included in the discussion. Depending on the seriousness of the offense the student may be:
   1) given a verbal warning initiating the disciplinary procedure (written record will be placed in student’s program file),
   2) given a written warning,
   3) placed on probation with a written improvement plan
   4) suspended
   5) dismissed immediately

*If a student is prohibited from performing clinical duties based on decisions from the clinical education site officials, the student will be dismissed from the program.*

2. If the student's conduct and behavior does not improve following the verbal and/or written warning, program faculty involved will meet or speak with the student again, at which time a written warning of probationary status is given with documentation of specific actions needed to improve performance. A copy of the documentation will be placed in the student file. The student will be provided a probationary timeline for definite measurable improvement to be demonstrated by the student.

3. If students are placed on probation for a specified period of time and satisfactory improvement is not demonstrated before the deadline, the student will be suspended from the program. The length of time of suspension will be determined by the Program Director. All clinical and class time must be made up for time missed caused by suspension. The student will forfeit any grades acquired during suspension, i.e. assignments, quizzes, tests.

5. If students that are suspended for a specified period of time and satisfactory improvement is not demonstrated before a deadline (determined by the Program Director), the student will be dismissed from the program.

*Everything outside of clinical competence/procedures is considered “behavior” related. Any warning that deals with any type of behavior will be included under the same disciplinary event/action.*

**Disciplinary action can be initiated at any level, as determined by the seriousness of conduct and the discretion of program administration.**

**Students dismissed from the Radiologic Technology program for behavioral reasons are not allowed to reapply for admission to the program.**
Disciplinary Action

Suspension: Student is suspended from class and clinical rotations for a specified amount of time, determined by the Program Director. All class and clinical time/rotations missed during suspension must be made up by the end of the semester. Any grades acquired during the suspension time are forfeited, i.e. assignments, quizzes, tests. Continued enrollment in the program is dependent upon improvement in behavior and/or performance during a specified period of time determined by program officials. Suspension status is provided to the student in writing, indicating the need to improve and where improvement is needed. The student must write a plan of action for improvement. Failure to achieve satisfactory progress at the end of the probationary period will result in dismissal.

Probation: Continued enrollment in the program is dependent upon improvement in behavior and/or performance during a specified period of time determined by program officials. Probation status is provided to the student in writing, indicating the need to improve and where improvement is needed. The student must write a plan of action for improvement. Failure to achieve satisfactory progress at the end of the probationary period will result in dismissal.

Dismissal: Students dismissed from the Marshfield Clinic School of Radiography for behavioral reasons or unethical and/or unprofessional actions, are not allowed to reapply for admission to the program. Students dismissed from the program due to academic reasons can reapply for admission the following year, but are considered the same as a new applicant. All courses must be completed including repeating those already completed while enrolled in the program prior to dismissal. Students being dismissed due to academics do not require previous disciplinary steps. In the event a student is being dismissed from the program, they will meet with program officials and at that time, a dismissal letter will be signed and dated by student and program officials.

Academic Probation

The student must meet the required academic criteria during the educational program for all didactic and clinical courses as stated in Section Two, Radiographic Progression Standards. In addition, students must meet required ethical and professional standards as stated in Section Three, Conduct Subject to Disciplinary Action. Failure to meet the required criteria may result in the student being placed on Academic Probation for a specified period of time with a plan to demonstrate improvement. A student may be placed on probation at any time throughout a semester and provided an academic improvement plan indicating areas the student must demonstrate improvement in by a specified time. The student will also be required to submit his/her own plan for demonstrating improvement. If at the end of the stated time satisfactory improvement has not been demonstrated, the student will be dismissed from the program.

Appeal of Program Dismissal

If a student intends to appeal program dismissal, they are required to follow Marshfield Clinic School of Radiography Appeal Policy. An action under this section may be appealed as outlined in Section Three, Student Complaints and Grievances/Appeal Policy of this handbook.
Withdrawal Policy

Students considering withdrawal from the program must schedule a meeting with the Program Director. Students will be required to complete a Program Withdrawal Form and Exit Assessment (accessible by enrolled students) and provide a signed copy to Program Director during the scheduled meeting.

Conditions for Readmission Following Voluntary Withdrawal

In the event a student voluntarily withdraws from the program, the following conditions exist:

1. Any student that voluntarily withdraws from the program and wishes to re-enter will be allowed to re-apply to start at the beginning of the semester following their last successfully completed semester. For example, if a student voluntarily withdraws at the end of the Second (2\textsuperscript{nd}) Semester, First Year Cohort, he/she can apply to restart one year later, on the next Third (3\textsuperscript{rd}) Semester, First Year Cohort, as the program must be completed within 150\% of published time.

2. Any student that voluntarily withdraws from the program and wishes to re-enter must notify the Program Director in writing and apply for readmission within 16 weeks of the point in the academic term in which they wish to re-enter. For Example, if a student voluntarily withdraws at the end of the Second (2\textsuperscript{nd}) Semester, First Year Cohort, he/she must notify the Program Director in writing, and apply for readmission within 16 weeks of the next Third (3\textsuperscript{rd}) Semester, First Year Cohort. (4 months prior to re-starting). Any intentions received after the 16-week/4-month point will not be considered.

3. The student must meet all program admission requirements.

4. The student must request readmission to the program director in writing, and submit a new application.

5. **Student acceptance for re-admission is not guaranteed and is only considered if there is space available at the time of re-entry. Space is not guaranteed.**

6. Readmission is only considered of those in good academic standing.

7. Program faculty will determine the appropriateness for readmission on a case-by-case basis, considering factors such as the student’s status at the time of exit from the program, reason for withdrawal, justification for readmission and adequacy of program space. The program is limited to 14 students.

8. If readmission is granted, the student will be required to follow the policies and procedures of the program consistent with the academic year he/she is readmitted.

9. If a student withdrew prior to a semester completion, the student would be required (if readmission was granted) to start at the beginning of such semester and comply with any and all course revisions and learner objectives at the time of readmission.

10. The student is responsible for maintaining the ability to satisfactorily perform all previously learned skills. **Demonstration of satisfactory performance will be required prior to readmission to the program. This means the student will be required to prove maintained competency of the content and procedures already completed.** This will include final examinations and competency examinations.

11. A student is allowed only one attempt for readmission to the program.

12. Students must have been in good academic and professional/ethical and behavioral standing at the time of program withdrawal in order to be considered for re-admission.
Student Complaints and Grievances Procedure/Appeal Policy

It is the policy of the Marshfield Clinic School of Radiography to work with students in finding a fair and just solution to problems that may arise, including grievances, questions, misunderstandings, or discrimination.

The School of Radiography Student Complaints and Grievances Procedure and Appeal Policy are procedures formed to identify an avenue for bringing resolution to disputes concerning academic or clinical issues. A student has the right to appeal a grade or academic decision that he/she believes has been made in error or is unfair, and/or to file a grievance if a student feels he/she has been treated unfairly or does not agree with a policy interpretation. If this should happen, the following procedural steps should be taken:

1. Students must first take their grievance to the Instructor of the course in which the concern occurred. This may include a didactic instructor or clinical instructor at a respective clinical site. The student must complete a Clinical/Didactic Concern Form (CDCF) located in the “Forms” section of the student handbook and submit to the instructor. If a technologist is involved, the clinical instructor may initiate or follow up with a discussion or meeting with the technologist and report back to the student within two (2) working days. (time may be longer if the involved technologist is not scheduled to work).

   If the student and instructor are unable to come to an agreement, the student can then follow the below steps for grievance/appeal within three (3) working days:

2. The student will submit an Appeal/Grievance Request Form (AGRF) located in the “Forms” section of the student handbook and discuss the complaint with the Program Director. The Program Director should reach a decision and communicate this to the student verbally within five (5) working days, and document on the GRF. If the matter is not resolved to the satisfaction of the student, the student may proceed to the next step within three (3) working days.

3. The student will submit a formal complaint in writing to the Director of the Department of Education. The student must include a copy of the completed Appeal/Grievance Request Form (AGRF) from Step 2 above. The department director will review the complaint and render a written decision within five (5) working days. If the matter is not resolved to the satisfaction of the student, the student may proceed to the next step within three (3) working days.

4. If the complaint should reach this level, the student must notify the Program Director in writing that he/she requests that the Program Committee (Program Director, Department Director, and Medical Director) meet to review the grievance/appeal. The program committee shall investigate and render a final written decision within five (5) working days of the receipt of the written meeting request and complaint. The decision of the Program Committee shall be final.*

5. The grievance/appeals process should not exceed thirty days.

Student wishing to discuss concerns regarding the program in general should be first addressed to the Program Director. If unresolved, the student should proceed with the grievance steps as outlined above. All complaints will be documented, including the projected outcome, and kept on file at the program facility. Students who have a concern or complaint regarding a clinical education site, clinical instructor, didactic instructor, or clinical site staff technologist, should address their concern to the Program Director. Students will be directed to complete the Clinical/Didactic Concern Form (CDCF) located in the “Forms” section of the student handbook. This form is required to track and assess the nature of any issues and attempts towards a timely resolution for all parties involved. If unresolved, the student should proceed with the grievance steps as outlined above. All complaints will be documented, including the projected outcome, and kept on file at the program facility.

*Please note: The program cannot change the grade assigned by an instructor unless presented with clear and convincing evidence that the grading procedure was biased, did not reflect sound educational practices, or was inconsistent with the common course outline and course syllabus.
JRCERT Standards – Noncompliance Reporting Procedures

Students must attempt to resolve complaints regarding concerns involving standards violations of the Joint Review Committee on Education in Radiologic Technology (JRCERT) directly with the program/institution officials by following the Student Complaints and Grievances Procedure as stated above. If, after following the grievance procedures, the student feels the issue has not been resolved, they may address the issue with the JRCERT. The JRCERT reporting process is accessible with the following link: http://www.jrcert.org/students/process-for-reporting-allegations/report-an-allegation/

Academic Integrity

Academic dishonesty or cheating includes, but is not limited to:

- Copying from another student’s quiz or test paper and/or collaboration during a quiz or test with any other person by giving or receiving information without authority; using materials during a quiz or test not authorized by the instructor.
- Stealing, buying, or otherwise obtaining all or part of a test or information about a test.
- Selling, giving, or otherwise supplying to another student for use in fulfilling an academic requirement, any theme, report, term paper; or submitting as one’s own, in fulfillment of an academic requirement, any theme, report, term paper, essay, or other work prepared totally or in part by another.
- Submitting nearly identical work that one has previously offered for credit in another course, without prior approval of the instructor.

Plagiarism and cheating in any form is subject to disciplinary action, including but not limited to a failing grade for the quiz, test, or assignment, a failing grade for the course, and/or probation, suspension, or termination from the Radiography Program.

Student Pregnancy Policy

Since ionizing radiation has been determined to be harmful to the developing embryo/fetus, the following recommendation and issues of compliance are required to protect the health of the student and child.

In accordance with the NRC's regulations at 10 CFR 20.1208, “Dose to an Embryo/Fetus,” radiation dose to an embryo/fetus during entire pregnancy will not be allowed to exceed 0.5 rem (5 millisievert) (unless that dose has already been exceeded between the time of conception and submitting letter of declaration).

If the student chooses to disclose her pregnancy, she may do so by informing the Program Director in writing. The student will be allowed to make an informed decision about continuing in the program based on her individual needs and preferences.
Radiation Monitoring For Pregnant Student

Declaration of pregnancy is a voluntary action of the pregnant student. If the student chooses not to declare her pregnancy, the School and its faculty will not recognize the student as being pregnant with regards to radiation protection. In the event that a student does wish to disclose her pregnancy, the Declaration of Pregnancy document must be completed and submitted to the Program Director, and the following actions are taken:

- The student will be issued a fetal monitoring radiation badge. The badge is to be worn under any lead apron used and exchanged promptly each month for accurate dose monitoring.
- The dose to the fetus will be limited to 0.5 rem (500 mrem) over the entire gestational period. The Radiation Safety Officer (RSO) will review the exposure history of the student and adjust working conditions, as necessary, so as to avoid a monthly exposure of more than 0.05 rem (50 mrem) to the fetus.

Pregnancy Leave Statement

The pregnant student will have two options if choosing to disclose her pregnancy:

1. Continue without modification or interruption. If a student chooses to remain in the program without modification or interruption, she will be required to fulfill all requirements of non-pregnant students (except those that risk radiation exposure, i.e. fluoro). If the student misses class or clinical, the Attendance Policy and/or Extended Leave Policy will apply. (Classes will not be carried out via computer or digital means.) Or,

2. Request a Leave Of Absence when either she or her physician feels she is no longer able to continue in the program without modification or interruption, unable to function in a manner conducive to learning, or the student does not believe she will be able to fulfill the requirements. If a student chooses to take a Leave Of Absence from the program, she will be allowed back into the program at the start of the academic semester she was in when she left. The student will be required to prove competency upon re-entrance (final exams, competencies, etc.) and continuation of knowledge. The student will not be allowed to continue with didactic courses during this one year leave of absence. If she chooses not to return within one year, her position in the program will not be reserved and she will have to re-apply to the program and start over if accepted. Acceptance into the program will be in accordance with the program selection process and will not be guaranteed. Leave of Absence forms are included in the Appendix of this Handbook.

The student may withdraw declaration of pregnancy at any time in a written format.

Two Forms related to student pregnancy:
1. Declaration of Pregnancy
2. Withdrawal of Declaration

Both forms are located in the appendix of this handbook and are also available upon request from program officials.
Student Pregnancy Guidelines

In the event that a student in the program declares her pregnancy, the following guidelines are recommended:

1. During the first trimester of pregnancy, the student will not be directly in the room during fluoroscopic procedures but may however participate in the exam before and after the fluoroscopic portion of the exam. After the first trimester, the student may participate in fluoroscopic procedures while maximizing distance from any sources of exposure (tube, patient etc). In the event the fluoroscopy time is excessive (greater than five minutes) or is anticipated to be excessive, the student shall chose to discontinue her participation in the exam only if she is unable to maximize distance from the source.

2. The pregnant student at no time during the entire gestation shall hold patients and/or equipment during non-fluoroscopic exams during their clinical training. Holding is not recommended for any student in the program.

3. The student may participate in surgery with the portable fluoroscopic unit after her first trimester. The student is reminded that at all times, she maximize her distance from the source as this is a principal in all fluoroscopic procedures. Once again if the fluoro time becomes excessive, the student may choose to discontinue participation in the exam only if she is unable to maximize distance from the source.

4. Once pregnancy is declared, the student will be required to wear a fetal dosimeter monitor. The fetal dosimeter shall be worn at waist level at all times during clinical rotation, but MUST BE WORN UNDER THE LEAD APRON AT WAIST LEVEL when the student is involved in fluoroscopic, mobile, and surgical procedures.

In the event a student feels her clinical education is being compromised by her pregnancy, she is strongly encouraged to notify program officials as soon as possible.

If dose limits reach ALARA Investigation Level II, 150 mrem/quarter, clinical reassignments and/or a leave of absence may be warranted.
Professional Appearance/Clinical/Class Dress Policy

In the interest of safety and professionalism, students are expected to adopt the following professional appearance guidelines at all class, clinical education sites, lab practices, field trips and conference attendance:

- No hats
- No clothing with offensive or inappropriate logo's and or advertising allowed.
- Neatly trimmed and clean nails (no acrylic, ceramic, or false of any type, allowed.)
- No excessive jewelry. One small ring per finger. Two stud-type earrings per ear lobe.
- No excessive makeup
- Hair must be clean and of natural coloring only
- No visible face or mouth jewelry/piercings
- No offensive body odor, including: smoke, or perfume/cologne/body lotion
- Neat, clean and appropriate clothing. See below for clinical and class dress policies.
- Gum chewing should not be noticeable.
- Tattoos must be completely covered.
- Neat and well-groomed hair and facial hair

Clinical Dress Policy

- **Marshfield Clinic ID/Security badge must be worn at all times.** They must be worn outside of clothing and easily read/seen at all times.
- **Scrub tops and bottoms must be navy blue.** They can be any brand, as long as the color is navy blue.
- Scrub tops must overlap pants at all times. If you bend over and your back is exposed, this uniform doesn’t meet the dress code and is unacceptable to wear.
- Low rise/hip hugger scrub pants are not allowed. Pants should not allow your back to be exposed when bending over.
- No torn, ripped, patched clothing of any time.
- Clothing must fit properly: too short, too low cut, or too tight will not be permitted.
- Shirts can be worn under your scrub top as long as it can be tucked in. Hoodies are not allowed to be worn under scrub tops. Tops worn underneath scrubs must be navy, white, or black. Students are not allowed to wear clothing with advertisement or descriptive pictures in the clinical setting.
- No shirts, jackets, or covers may be worn on top of scrub tops, unless it is a white lab coat or a Marshfield Clinic Logo jacket. Any solid white lab coat/jacket can be worn as long as it has no graphics, patches, or embroidery.
- Uniforms must be in good condition. Uniforms with stains, holes, faded, or fraying must not be worn.
- Comfortable closed-toe solid white tennis/fitness shoes or medical clogs must be worn with scrubs.
- **Artificial nails of any kind are prohibited. This is an OSHA Safety requirement.**
- Any hair length that touches the shoulder in any way must be pulled up at all times during all assigned clinical rotations. No hair color that is outside “normal hair color shades.”
- One small ring per finger; two small stud-type earrings per lobe. No hoops, cuffs, cartilage piercing, etc.
- No visible face or mouth jewelry/piercings. This includes tongue piercing.
- Tattoos must be completely covered at all times.
- No excessive make-up.
- No offensive body odor, including: smoke, or perfume/cologne/body lotion

If any student has questions regarding what is deemed allowable/appropriate for clinical dress, they must address this with the Program Director prior to doing it/wearing it. If students neglect to follow the policy, they will be dismissed from clinical until corrected, which will result in loss of clinical time and require the use of PTO. If the attire is not corrected according to policy, disciplinary action will result.
Class Dress Policy

Scrubs are not required for class but students are expected to dress appropriately. You are professionals representing a profession and a medical institution. Students are required to follow the below dress policy for class:

- **Marshfield Clinic ID/Security badge must be worn at all times.** They must be worn outside of clothing and easily read/seen at all times.
- **Business-Casual dress is required during class times.** This is defined as:
  - No torn, ripped, patched clothing of any time.
  - Clothing must fit properly: too short, too low cut, or too tight will not be permitted.
  - No jeans, denim, or sweat/jogging/wind/athletic pants permitted.
  - No leggings, spandex, or yoga pants permitted.
  - Low rise/hip hugger pants are not allowed. Pants should not allow your back to be exposed when bending over or sitting.
  - Shirts that show cleavage are not permitted. If you have to question it, its probably not a good idea.
  - No hoodies or sweatshirts. Covers must be of sweater or business-casual zip type.
  - No casual style t-shirts, sweatshirts, or jerseys.
  - No tube, halter, tank, or sleeveless tops.
  - No see-through or revealing tops.
  - No shorts.
  - No skirts or skorts above the knee; slits cannot go above the knee.
  - Flip-flop or open-toed shoes are not permitted; no bare feet.
- **Artificial nails of any kind are prohibited. This is an OSHA Safety requirement.**
- No hair color that is outside “normal hair color shades.”
- One small ring per finger; two small stud-type earrings per lobe. No hoops, cuffs, cartilage piercing, etc.
- No visible face or mouth jewelry/piercings. This includes tongue piercing.
- Tattoos must be completely covered at all times.
- No excessive make-up.
- No offensive body odor, including: smoke, or perfume/cologne/body lotion.

Identification Badges

All students are required to wear their Marshfield Clinic Health System issued identification/security badge at all times when on the premises of Marshfield Clinic, Marshfield Medical Center or other Marshfield Clinic Health System affiliated locations. In addition to general identification of the student, ID/security badges are required for entrance into secure buildings and departments, and are used to record/track Clinical Attendance.

Each student is provided with one identification badge free-of-charge as they start the program. Students are expected to wear their badge each and every day, to both class and clinical. In the event the student forgets his or her identification badge at home, he or she will be dismissed from class or clinical to obtain it. This time will be deducted from the student’s PTO. If the student no longer has PTO remaining, this time will need to be made up. If a student forgets his/her badge a second time, in addition to being dismissed to retrieve it, the student will be issued a disciplinary action.

If the student loses his or her identification badge, or damages it due to misuse, he or she will be required to pay $35.00 for a replacement badge, and will not be permitted to class and/or clinical until it is received. This missed time will be deducted from the student’s PTO.
Student Health Policy

In order to assure proper infection control, infectious/contagious diseases may require the student to be removed from his/her clinical assignment until he/she is determined by a physician to be non-infectious. Conditions that may require removal from the clinical assignment may include, but are not limited to the following:

1. Open draining lesions: The Program Director will remove a student from clinical until seen by a physician, diagnosed, treated, and determined by the physician to be non-contagious.
2. Streptococcal infection: Any student with a sore throat, especially accompanied by fever, should request to have a throat culture from their personal physician or other healthcare provider. If group A streptococci are found, the student will be removed from his/her clinical assignment until 24 hours after antibiotic therapy is started and is afebrile; the student is to be treated appropriately as prescribed by their physician.
3. Staphylococcal infection:
   a. Because of the ubiquitous nature of staph aureus, asymptomatic carriers are not isolated or treated.
   b. Students with active staph aureus infections may not attend clinical. If a student relates a diagnosis of staph aureus infection, the Program Director will require written verification from the student’s physician stating the circumstances under which the student may work to avoid transmitting infection.
4. Students with the following diagnosed conditions shall not be permitted to carry out their clinical assignment, or may require clinical work modifications:
   a. Respiratory tract infections: i.e., group A strep, any pneumonia, active pulmonary TB, influenza, mumps.
   b. Active exanthems (rashes): chicken pox, herpes zoster, measles, or rubella.
   c. Enteric infections: hepatitis, salmonellosis, shigellosis, amebiasis, giardiasis, vomiting and diarrhea of unknown etiology, until etiology is determined (and treated if appropriate), or symptoms abate.
   d. Herpes simplex: shall not care for immunosuppressed patients, including newborns as per hospital policy.
5. Standard precautions: all students are provided with initial education, and in-service education, regarding the practice of standard precautions and are expected to adhere to these procedures in order to prevent acquiring or transmitting infectious agents.

Common examples of conditions where students should not report to clinical and/or may be removed from clinical:

- Pink eye unless you have been on eye drops for 24 hours
- Strep throat unless you have been on antibiotics for 24 hours
- Oozing, weeping, draining open wounds; off if wound cannot be covered entirely/properly or if drainage is through the dressings
- Persistent diarrhea; off until symptom free for 24 hours
- Persistent vomiting; off until symptom free for 24 hours
- **Fever of 100 or greater**: off until symptom free for 24 hours
- Rash of unknown origin (upon return if rash is still present, you must provide a program official with a doctor note)
YOU ARE IN A MEDICAL FACILITY WITH SICK AND IMMUNOCOMPROMISED PATIENTS
Students with respiratory signs/symptoms will be required to wear a surgical mask while anywhere in the medical facility.

Faculty reserve the right to determine whether or not the student is allowed to attend class or clinical based on the health policies of Marshfield Clinic Health System. If students are not allowed to attend clinical due to illness, they will be required to utilize Personal Time Off (PTO), as detailed in the clinical Attendance Policy.

If a student presents with a high suspicion of infectious disease, such as a cough, fever, etc., action must be taken to minimize cross-infection. If a student voluntarily comes into the facility with a suspected illness and refuses to be sent home (insisting they are not sick), the student will be temporarily suspended and required to go to Urgent Care to verify (at the student’s expense) the presence or non-presence of the infectious disease. Upon a positive verification of illness, the student will be required to leave class/clinical. Upon a negative verification of illness, the student will be allowed to attend class/clinical obligations. The student will be required to use PTO for their time missed.

Student Insurance
Please be aware that Marshfield School of Radiography and clinical affiliation sites do not provide health insurance to students. It is advised that students carry their own health insurance during enrollment in the program. Some clinical sites may require students to carry health insurance while performing a clinical experience at their facility.

All students enrolled in the Marshfield Clinic School of Radiography are covered for professional liability insurance through Marshfield Clinic. This insurance provides liability coverage for unintended injury to patients or other students during on and off campus educational experiences. The insurance is paid as an agreement with affiliated universities.

Students are encouraged to purchase additional liability on their own should they desire additional coverage. Information on additional student liability insurance can be found at www.asrt.org

Information on Marshfield Clinic Student Liability Insurance can be obtained by request. Please contact the Program Director for more information.

CPR Requirements
All Marshfield Clinic School of Radiography students must be current in CPR certification. In order to ensure all students remain current throughout the program, the School of Radiography requires students to complete an American Heart Association Health Care Provider level CPR certification during program Orientation.
**Attendance Policy**

*Students are expected to be present and punctual every scheduled day of the program.*

Class and clinical begin promptly at the time scheduled. Students are expected to arrive a few minutes early and assume their class or clinical responsibilities on time – this includes already being “dressed” and ready for your shift. Students not dressed for their rotation and clocked in by their scheduled rotation time will be considered tardy. Changing clothes after clocking in is not allowed and in violation of the Attendance Policy.

**Clinical Rotation Clock In/Out Policy**

*Students are required to clock in/out for all Clinical Rotations utilizing the MCHS ID Badge system on site only (not for use with didactic classes).*

The Time-Clock used for “swiping” - aka clocking in and out – during Clinical Rotations is located in the **Hospital Radiology Department, located next to the Breakroom**. This is the **only authorized time clock for student use.** If any other device is used in a different location, time will not be credited, and the student will be required to make-up the time.

Students are required to clock:

- **In** – upon arriving to clinical education
- **Out** – upon going to lunch
- **In** – upon returning from lunch
- **Out** – upon leaving clinical education

*Students are required to be in their clinical education rotation site, ready for their shift, at the time indicated as their start time.* This means that students are to be changed, clocked in, and to their rotation site/department on time, at the designated scheduled start time. Students found clocking in before changing clothes or putting away personal items will be in violation of the policy.

If a student forgets his/her badge, they will be dismissed from clinical to retrieve it, and will be required to make up the time missed.

If a student forgets to clock in or out at any point during their rotation, he/she must complete a **Student Absent Form** indicating the date/time, and obtain a signature from a Clinical Instructor. Students will be issued a **warning for the first offense.** After the first warning, any occurrence thereafter will result in written disciplinary action and time will be deducted from PTO or made up for the timeframe there is no clocking info.
**Tardy**

Tardiness is described as not being present in the assigned area ready at start time. Any student who arrives to class or clinical any time after the scheduled time, is considered tardy. **If a student is late for class or clinic up to 15 minutes beyond their scheduled start time will be marked tardy.** The student will be required to stay late that same day 15 minutes to make up for their tardy. Anything over 15 minutes will be considered **absent** and will be required to deduct a minimum of 4 hours PTO and be required to follow the attendance policy/procedure.

In the event a student is tardy, he/she must:

1. **Call the clinical site department** and Clinical Instructor at his/her assigned clinical site if possible to report that he/she will be tardy.
2. Upon arrival, complete a **Student Absence Report (SAR)** form. This form must be completed, signed (by a Clinical Instructor), and submitted directly to a Clinical Instructor immediately.
3. Remain at the clinical site for the same amount of time (up to 15min) at the end of the shift to make up for the time missed upon arriving.

**Absent**

Absence is described as not being present in the assigned area within 15 minutes of the start time. Any student who arrives to class or clinical after 15 minutes will be considered **absent** and will be required to deduct a minimum of 4 hours PTO and be required to follow the attendance policy/procedure.

When **illness or emergency** dictates a student’s absence from **clinical**, he/she will (ALL 3 Steps):

1. **Call** the clinical site department at his/her assigned clinical site a **minimum of 30 minutes before** the start of his/her shift to report absence (partial or full day). The student is required to call the department until an answer is had. This will be documented at the clinical site. The student should record the time of call and who he/she spoke to.

2. The student must also notify all Clinical Instructors and Program Director by **email** a **minimum of 30 minutes before** the start of his/her shift to report absence (partial or full day).

3. The student must complete a **Student Absence Report (SAR)** form. This form must be completed, signed (by a Clinical Instructor), and submitted directly to a Clinical Instructor or Program Director within two days of return.
When illness or emergency dictates a student’s absence from class, he/she will (ALL 3 Steps):

1. Notify the instructor via phone or REMIND a minimum of 30 minutes before the start of class to report absence (partial or full day).

2. In the event a student cannot reach the instructor by phone or REMIND, the student must notify the Program Director via phone or REMIND a minimum of 30 minutes before the start of class to report absence (partial or full day).

3. The student must complete a Student Absence Report (SAR) form. This form must be completed, signed (by Instructor), and submitted directly to the Instructor or Program Director within two days of return.

When a student knows in advance they will be absent from clinical, he/she will (ALL 3 Steps):

1. The student must complete a Student Absence Report (SAR) form indicating the day and time of expected absence. The student must obtain a Clinical Instructor Signature, and turn in directly to that Clinical Instructor, making a copy for him/herself.

2. The student must notify all Clinical Instructors and Program Director by email the day or evening before the expected absence to remind them of the upcoming absence.

When a student knows in advance they will be absent from class, he/she will (ALL 4 Steps):

1. The student must complete a Student Absence Report (SAR) form indicating the day and time of expected absence. The student must obtain the Instructor’s Signature, and turn in directly to that Instructor or the Program Director, making a copy for him/herself.

2. The student must notify the Instructor and Program Director by email the day or evening before the expected absence to remind them of the upcoming absence.

With an extended illness, (requiring absence from more than two consecutive clinical days), students will be required to provide documentation, when appropriate, from a physician stating that the student can return to his/her clinical assignment.

Failure to comply with Attendance procedures will result in disciplinary steps.

Excessive tardiness or absences will result in disciplinary action.

Phone numbers for all clinical education sites and email addresses for all faculty/administration will be provided to all students. Students are encouraged to record clinical site and faculty contact numbers/email in their phone or utilize an additional resource for quick access.
**No Call/No Show**

If a student is absent and fails to contact the appropriate personnel and departments as listed in the attendance policy, that student will be considered a “No Call No Show.” This is not only a violation of policy and procedure, but a demonstration of complete lack of professionalism and respect for the program and clinical sites.

The first offense (day) this happens, the student will be issued a *written warning*.

**The second offense will result in termination from the program.**

A student that is absent and fails to contact the appropriate personnel and departments for 3 days in a row will be viewed as a voluntary withdrawal from the program and will not be permitted to continue. This student will also not be considered for re-entry.

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**Personal Time Off (PTO)**

Students will be allowed *40 hours during the course of the program to use as Personal Time Off for both class and clinical time.* PTO is utilized in 4-Hour/Half-Day increments only. Any hours absent in excess of the 40 hours, the student is responsible for making up the loss in clinical time in the semester it occurred. Clinical grade will be affected as indicated below under *Grade Status*. Students with time remaining to be made up at the end of the semester will receive an *Incomplete* for that class until the time is made up. The student must make this time up within 15 days of the end of the semester. If the student has not made up his/her time within 15 days, the student will not have met the requirements of the course, thus failing the course and will be dismissed from the program.

The 40 hours of PTO will include hours taken for both sick time and personal leave. **Time must be taken in increments of at least four (4) hours.** If a student is absent, they must first use their PTO available. Any time thereafter, will be required to be made up. Those additional hours absent following the 40 hours will affect their clinical grade status as indicated below under *Grade Status*.

If a student utilizes PTO during a *weekend or evening rotation*, they will be rescheduled to work this shift differential. Students must work the required p.m. and weekend rotations that they are scheduled for even if it requires changing the dates of that rotation. Working the various shift differentials is part of the clinical requirements. In addition, if a student has a conflict prior to their evening shift, they must take PTO and will not be allowed to work the day shift in place of the p.m. shift.

**Students are strongly encouraged to use their PTO wisely and not view these hours as vacation days. Students are not allowed to use PTO during Final Exam Weeks.** PTO must be used to cover all absences including: illness (personal & family), doctor and dental appointments (personal & family), car breakdowns, banking matters, overslept, and any needed personal time off. If a student misses clinical due to bad weather in their area of residence, they may use PTO or make the time up at the discretion of program officials. This will be monitored in reference to the number of occurrences. All make-up time must be completed within 15 days past the end of the semester.
Extended Time Off/ Extended Leave
Because the School of Radiography is a Competency-Based academic program, Extended Leaves carry the risk of not completing semester requirements as stated in the Progression Standards. If a student arrives at a situation that requires extended leave from class and clinical, the following policy/procedure applies:

1. If a student requires extended absence from class and clinical that is covered by a physician’s note/order, and can be covered by their PTO, and/or can be made up within the semester and/or within 15 days of the end of the semester, an Extended Leave can be requested. The student must be able to fulfill all semester progression requirements in order to advance to the next semester; this includes assessments, evaluations, competencies, exams, assignments, etc. The grade drop policy will not apply in this situation. If a student’s situation fits this criteria, he/she can apply for an Extended Leave with the Program Director. Extended Leave Forms can be found in the Appendix of this Handbook. Extended Leaves are not guaranteed approval.

2. If a student requires absence from class and clinical that cannot be covered by their PTO, and/or made up within the semester and/or within 15 days of the end of the semester, or the student will not be able to fulfill progression requirements in order to advance to the next semester, a student will need to request a Leave Of Absence. If this is required, the Leave Of Absence policy will apply. Leave of Absence Forms can be found in the Appendix of this Handbook.

Leave Of Absence
If a student needs to take a Leave Of Absence from the program, due to pregnancy or a medical-related issue identified by a physician, that cannot be covered by their PTO, and/or made up within the semester and/or 15 days of the end of the semester, or the student will not be able to fulfill progression requirements in order to advance to the next semester, he/she may qualify for a one year Leave Of Absence, with the possibility of being allowed back into the program at the start of the academic semester he/she was in when left. A student will need to request a Leave Of Absence by submitting a Leave Of Absence Form, which can be found in the Appendix of this Handbook.

In the event a student needs to request a Leave Of Absence from the program, the following conditions exist:

1. Any student that requests, and is approved, a Leave of Absence for one year will be allowed to re-enter the program at the beginning of the semester following their last successfully completed semester. For example, if a student requests a Leave of Absence at the end of the Second (2nd) Semester, First Year Cohort, he/she can request a Leave of Absence for one year, re-entering on the next Third (3rd) Semester, First Year Cohort, as the program must be completed within 150% of published time.

2. Any student that wishes to request a Leave of Absence must submit a Leave of Absence Request form directly to the Program Director.

6. Leave of Absences are only considered for those in good academic standing.

8. If Leave of Absence is granted, the student will be required to follow the policies and procedures of the program consistent with the academic year he/she is readmitted.
9. If a student requests a *Leave of Absence* prior to a semester completion, the student would be required (if approved) to start at the beginning of such semester and comply with any and all course revisions and learner objectives at the time of readmission.

10. The student is responsible for maintaining the ability to satisfactorily perform all previously learned skills. **Demonstration of satisfactory performance will be required prior to readmission to the program.** This means the student will be required to prove maintained competency of the content and procedures already completed. This will include, but not limited to, final examinations and competency examinations.

11. A student is allowed only one *Leave of Absence* while enrolled in the program.

12. Students must have been in good academic and professional/ethical and behavioral standing at the time of request in order to be considered for *Leave of Absence*.

13. Leave of Absences are not guaranteed approval.

The student will not be allowed to continue with didactic courses during this one year leave of absence. If he/she chooses not to return within one year, his/her position in the program will not be reserved and he/she will have to re-apply to the program and start over with semester one. Acceptance into the program will be in accordance with the program selection process and will not be guaranteed.
Inclement Weather Policy

**WEATHER STATEMENT** YOU LIVE IN WISCONSIN. You are WELL AWARE of weather and road conditions during the winter season. MC School of Radiography does not delay or close for every snow event.

Marshfield Clinic School of Radiography will determine if classes and/or clinical are canceled or postponed due to weather. Students will be notified via REMIND of Increment Weather Delays or Closures. It is each student’s responsibility to monitor their REMIND for notifications. Program administration will make every effort to notify students as soon as possible on a decision.

**DO NOT ASK ADMINISTRATION IF SCHOOL IS GOING TO CLOSE, OR BE CLOSED. WE WILL NOTIFY YOU IN THE EVENT.**

In cases of poor road conditions such as ice or snow etc., the student is advised to use their best judgment in regards to the driving to their scheduled clinical site. If you do not feel it is safe for you to drive, don’t.

**In the event of canceled clinical, clinical time must be made up. It is required.**

**In the event of canceled class, instructions on an assignment will be emailed to each student to complete in place of class.**

If classes and clinical are canceled, it will apply to all classes and all clinical shifts that day. If classes and clinical are on a delay, it will only affect those classes and shifts that were scheduled to start before the delay. Because classes and clinical shifts have varying times, we do not delay by a “number of hours,” we delay until a “time.” For example, if there is a delay, the Program Director will give a “Delay Start Time,” say, 10:00am. This means that for any classes and clinical that start before this time, you are delayed until 10:00am. For those classes and clinical shifts that are scheduled after 10:00am originally, there will be no additional delay. The same applies for an early-release. If an early-release time is given, those present in class or clinical will leave at that time; any class or shift beginning after that time does not have to report at all. All missed clinical time due to weather must be made up, or PTO used. An assignment will be issued for making up class time.

If a student chooses to travel to their scheduled clinical site in the event they were not aware of a campus closure, they will not receive credit for hours served. Students should not be traveling if travel is not advised, and are responsible for watching REMIND.

Weather and road conditions can vary between student’s home address, the campus, and the clinical sites. If students cannot make it to their clinical education site when no classes are cancelled or a late start is announced, students have the option to utilize PTO or make it up.

**Having the choice to use PTO or make up time is only offered for weather related absences.**
Clinical Absence – Grade Status

There will be a drop of **one letter grade for every sixteen (16) hours of clinical time absent**, when a student goes over their 40 hours of PTO. The letter grade drop or (drops) will occur in the semester in which the 16th hour is reached. This does not reset each semester. Students receiving a letter grade below “B” due to excessive absence will be subject to probation and/or termination from the program based on the Progression Policy. Although a student’s grade is not affected until the 16th hour, absences in excess of the 40 Hours of PTO is deemed excessive and may result in disciplinary action. Time missed for classes is subject to the instructor’s discretion, and will be according to that stated in each course syllabus. The default class attendance policy is as stated: **For every class time missed (any length of class time) above the 40hr PTO, the student will receive a 25% reduction in class average.** Students are responsible for missed content – classes will not be “retaught” due to an absence. All other policies resulting from absences will be stated in the course syllabus.

Funeral/Bereavement Leave

The Funeral Leave Policy is adopted from the Marshfield Clinic Funeral Leave Policy.

Upon notification to program faculty, students will be allowed a **maximum of three (3) days leave of absence for a death in the immediate family**. Students will be granted up a **maximum of one (1) day leave of absence for a death in the extended family**. The days off include travel time.

**Immediate family** includes the following:
- Parent*^
- Legal Guardian
- Sibling*
- Child*^
- Spouse

(*) Includes step family
(^) Includes spouse’s family

**Extended family** includes the following:
- Sibling-in-law
- Nieces & Nephews*
- Grandparent*
- Aunts*
- Uncles*

(*) Excludes step and spouse’s family

An absence due to bereavement does not count toward a student’s personal days. Students are responsible for making up missed course work according to the course syllabus. An obituary or funeral program is required. This must be submitted to program faculty within two days of return.
Jury Duty or Court Witness Policy

The Jury Duty or Court Witness Policy is adopted from the Marshfield Clinic Jury Duty/Court Appearance Policy.

Upon notification to program faculty, students will be afforded time off for jury duty or court witness. The student must present the jury summons or subpoena to receive the time off. The amount of time afforded will be determined by the Program Director.

If the court witness hours are subpoenaed for a phone testimony, the student will call program faculty after the phone conversation is completed to determine if he or she will need to return to class or clinical that day.

The absence due to jury duty or court witness does not count toward a student’s personal days. Students are responsible for making up missed course work according to the course syllabus.

Other Attendance Policies/Procedures

There is no banking of additional time.

If a student begins a clinical rotation early or stays late to complete an exam, and the time exceeds 15 minutes, credit for this time must be taken the following clinical day with approval from the Clinical Instructor at that respective clinical site. Students cannot “collect” time to be used at a later date. Students must complete the appropriate sections of the Student Absence Form and obtain a signature from the Clinical Instructor giving approval. A Student Absence Form must also be completed and signed the next day when the time is taken off and the student leaves early.

If a student chooses to be called to, or scheduled at clinical at any time outside of their daily schedule, for the possibility of gaining/completing a competency procedure, the student is choosing to do so on their own accord. This time/gesture is strictly volunteer by the student and will not be credited back. If a student takes the initiative to be proactive in completing competencies, that will be reflected positively in an evaluation and/or reference, and will not be exchanged for time off.

Attendance Make-Up Policy

Students must make up missed class and clinical time for any time missed beyond the allotted 40 Hours of PTO, in cases of inclement weather, in situations where a student was dismissed due to a policy violation, and/or time missed under the Extended Leave Policy. Clinical time must also be made up if certain mandatory rotations were missed, as determined by Program Administration.

If a student is required to make up time, he/she must REQUEST it with the Program Director or Program Faculty no later than three (3) days prior to the day that is being requested. The Program Director or Program Faculty will meet with Clinical Department preceptors and/or managers to get approval on the requested day/time. Requests made by the student are not guaranteed. Time/days approved for make up will be determined by program administration and communicated to the student.
Once a student’s make up time is scheduled/arranged, a student cannot request to change it anytime within three (3) days of the scheduled time. If a student is unable to accommodate his/her scheduled make-up time, he/she will be required to use remaining PTO. If PTO is not available, and re-scheduling must occur at this short of time, the student will receive disciplinary action. Students must be professional and respectful when accommodations are made for scheduling make up. Students are expected to be professionally responsible.

Once make up time is arranged and completed, students must complete a **Student Absence Form**, located in the Appendix of this Handbook. These forms are required to be completed to record time that is made up by a student, and submitted based on the requirements outlined in the Attendance Policy. If a student fails to complete and submit absence forms as required, disciplinary action will follow.

**If a student fails to make up their required miss time by the end of the semester, an incomplete will be documented on the student’s transcript. The student will have 15 days beyond the end of the semester to complete this time, and any associated progression requirements. If the student fails to complete the make-up time and/or progression requirements, the student will not pass the course, and will not progress to the next semester.**

**Job Interviews**
The program supports a senior students desire to complete job interviews as they approach graduation. Because the end goal of the student’s educational process is to obtain employment in the Radiographic Sciences, time off is given to the student to attend such interviews in the following manner:

- For interviews needing travel that occur **more than two (2) hours away from Marshfield Medical Center-Marshfield**, (one way)a student is awarded one (1) full, excused day. This time will not have to be made up (unless occurring during a mandatory rotation).
- For local interviews needing travel that occur **less than two (2) hours away from Marshfield Medical Center-Marshfield**, (one way) a student is awarded one-half (1/2) day. This time will not have to be made up (unless occurring during a mandatory rotation).
- If more time/days are needed for travel or preparation, a student must use PTO.
- Because “the time necessary to get ready” for an interview is different for each individual, this is not factored into the requirements listed above. If a student requires more time “to get ready,” he/she will need to use PTO.

1) To be granted approval for time-off for interviews, the student must submit a **School/Job Interview Form** within seven (7) days before the scheduled interview. This form can be found in the Appendix of this Handbook, and must include the required information as depicted on the form. If a student does not submit the request in the timeframe stated, or fails to provide any of the required information, an interview day will not be approved/granted.

2) During the scheduled interview, each student must have an **Interview Verification Form** (located in the Appendix) completed by the personnel completing the interview, and must return it to the Program Director within two (2) days of returning from the interview. If a student does not submit the verification in the timeframe stated, or fails to have the required information completed, and interview day will not be approved/granted.
**Health Insurance Portability and Accountability Act of 1996 (HIPAA)**

HIPAA requires confidentiality of all protected health information during all clinical education experience. Information obtained in the form of verbal, written, pictorial or electronic means are all covered as *protected health information*, or PHI. Students who require access to patient health information as part of the clinical experience, will protect the information in accordance with the policies and procedures of the site and Marshfield Clinic School of Radiography. Students will not disclose or request protected health information in a manner that violates policies and procedures of MC School of Radiography, the clinical affiliate, or state and federal law.

1. **Students who violate patient confidentiality will result in disciplinary actions and may be subjected to immediate dismissal from the program depending on the violation severity.**
2. HIPAA involves both civil and criminal penalties for violations. Prison time and fines are possible for violations.
3. Based on individual health care facility requirements, students may have to complete HIPAA training and sign confidentiality agreements at their clinical sites.
4. Clinical sites have the right to revoke all clinical privileges for any HIPAA violation.

**Radiation Safety**

The School of Radiography Radiation Safety Policy is adapted from the Marshfield Clinic Policy Occupational Radiation Dose Monitoring and the Marshfield Clinic policy Radiation Safety ALARA Program, which can be found in the Appendix.

**Radiation Safety Monitoring**

Students are issued and required to wear a Radiation Monitoring Device at all times during their clinical assignment or when required for laboratory experiments. This helps assure student radiation exposure is kept as low as reasonably achievable (ALARA).

The Radiation Monitoring Device is considered part of a complete uniform (see Dress Code policy). It should be worn in the area of the upper torso. When a lead apron is worn, the badge should be placed on the outside of the apron at the collar level. In the event the student forgets his or her Radiation Monitoring Device, he or she will be dismissed from clinical to obtain it. This time will be deducted from the student’s PTO. If the student no longer has PTO remaining, this time will need to be made up. If a student forgets his/her Radiation Monitoring Device a second time, in addition to being dismissed to retrieve it, the student will be given a written disciplinary action.

If the student loses his or her Radiation Monitoring Device, or damages it due to misuse, he or she will be required to pay $35.00 for a replacement device, and will not be permitted to clinical until it is received. This missed time will be deducted from the student’s PTO.

Leaded aprons, thyroid collars, and gloves are provided in the clinical environment and shall be worn whenever the student is in an examination when radiation exposure may occur.

Radiation monitoring devices are exchanged quarterly (every 3 months).
Contact Radiation Safety staff with any problems or questions regarding your monitoring device, dose reports, or viewing the electronic copy of your dose reports:

Chris Kessler
Radiation Safety Officer/Medical Physicist
kessler.christopher@marshfieldclinic.org
715-387-9214

Emily Bauer
Radiation Safety Technologist
bauer.emily@marshfieldclinic.org
715-387-5206

Viewing your Dose Reports
An annual radiation dose report for each student is received by the Program Director from the Radiation Safety Office, and distributed to students upon receipt of the report. A copy is kept in the student’s personal folder.

Students are expected to check their quarterly radiation exposure by signing in online:

1) Logon to www.myLDR.com
   a. Username: marshfield
   b. Password: 20!2 badges

2) Enter necessary information
   a. Account Number: 207382
   b. Serial Number: located on the back of the most recent badge you are issued (not a spare badge)

3) Your individual dose report history will be displayed. This may take 15-30 seconds to load. To protect your privacy, no personal information is displayed.

4) Click “View Details” to see the details of your individual badge reading.

5) New dose reports will post a week or two after badge exchange, depending on how quickly badges are returned to the Radiation Safety Office.

Annual Radiation Dose Limits

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<tbody>
<tr>
<td>Whole body</td>
<td>5000 mrem/year</td>
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<tr>
<td>Lens of the Eye</td>
<td>15,000 mrem/year</td>
</tr>
<tr>
<td>Extremities and Skin</td>
<td>50,000 mrem/year</td>
</tr>
<tr>
<td>Fetal</td>
<td>500 mrem/gestation</td>
</tr>
<tr>
<td>General Public</td>
<td>100 mrem/year</td>
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Radiation Doses Exceeding Normal Ranges

ALARA Investigation Level I
Any student with a whole body quarterly dose exceeding 125 mrem, lens exposure of greater than 375 mrem, or skin or extremity dose exceeding 1250 mrem will be reviewed by program faculty, the Radiation Safety Officer, and the Radiation Safety Committee. The investigation is to determine cause of the elevated level. At this time, program faculty will review safety practices to minimize further student exposure.
ALARA Investigation Level II

Any student with a whole body quarterly dose exceeding 375 mrem, lens exposure of greater than 1125 mrem, skin or extremity dose exceeding 3750 mrem, or dose to fetus exceeding 150 mrem will be reviewed by program faculty, the Radiation Safety Officer, and the Radiation Safety Committee. The student and faculty will work together to determine all clinical activities he/she was involved in for that quarter. Student and faculty will be required to meet to outline a plan and modification of behavior that will minimize further exposure. A required action and summary report will be distributed to the student, program director, radiation safety officer (to share with the radiation safety committee) and relevant clinical sites. The student will receive continued radiation dose monitoring to determine if the action plan is successful.

MRI Safety

Each student will have the opportunity to gain introductory clinical experience in MRI during his/her second year of the program. Prior to rotating through MRI, a MRI Safety Orientation will be conducted with every student to inform them of the essential safety practices utilized in the MRI suites. Each student is required to document that they have received this training. In addition, a safety screening form is completed by the student to determine if the student has any contraindications to the magnetic or radiofrequency hazards within the MR environment. Any contraindications for students entering the MR suites will be recognized during that time and appropriate accommodations will be made. Documentation of completion of the orientation and screening is maintained in the Program Director’s office.

Radiography Program Lab

Students are not allowed to take exposures in the lab without a faculty member present on campus. Students may practice positioning and/or work with equipment but the exposure switch will not be accessible. Available faculty member must be informed to unlock the secure exposure switch and permission granted for exposures to be taken with a faculty member on campus. Students are not allowed to perform radiographic exposures of humans or animals at any time in the radiography program laboratory.

Parking Policy

The Parking Policy is adapted from Marshfield Clinic Parking – Marshfield Clinic Facilities Policy. During their first week, students are informed of the correct lots to park via distribution of a parking map and a tour of the medical campus.

Violation of Parking Policy

i. 1st offense
   a. Clinic Security warning notice. This warning notice is non-expiring.

ii. 2nd offense
   a. City of Marshfield parking citation, and
   b. Notification of Program Director by Security, and
   c. Initiation of Disciplinary Action

iii. Further offenses
   a. City of Marshfield parking citation for each offense, and
   b. Notification of Program Director by Security for each offense, and
   c. Additional Disciplinary Action, which may include suspension and/or termination from the program
Substance Abuse Policy

The Substance Abuse Policy is adapted from the Marshfield Clinic Drug Free Workplace Policy and Marshfield Clinic Substance Abuse Policy.

Reporting to class or attending clinical education while under the influence of alcohol, controlled substances, prescribed medications, or over-the-counter medications that impair your ability to safely and effectively perform required student duties, as determined by the school officials or clinical staff, is prohibited.

Except as otherwise specified, prescribed and over-the-counter medications are not prohibited when taken in standard dosage and/or according to the prescription.

The following are prohibited while on the medical campus:

- Possessing and consuming alcoholic beverages
- Possessing, manufacturing, distributing, procuring, using, or receiving illegal drugs or drug paraphernalia
- Unlawfully possessing, manufacturing, distributing, procuring, using, or receiving controlled substances
- Illegally using or using in an unauthorized manner prescribed medications
- Diverting or stealing medication
- Attending classes or clinical under the influence of illegal drugs
- The presence of any detectable amount of any illegal drug in a student’s body system while in attendance will be construed as being under the influence of any such drugs, regardless of when the drug was ingested and regardless of the student’s appearance or behavior
- Attending classes or clinical while impaired by alcohol, controlled substances, or prescribed medications
- Switching or altering urine, blood or other sample used for testing, refusing to submit a sample without medical explanation justifying failure to produce urine, blood or other sample for testing when requested, or any other action evidencing a refusal to fully cooperate in the collection/testing process (including refusal to sign an authorization form for testing)

Consequences for Violating Policy

- A student who tests positive for illegal drugs or as being impaired by controlled substances is ineligible for attendance
- A student who violates or may have violated this policy will immediately be suspended until:
  - The student tests negative
  - Investigation reveals no violation of the policy
  - Student’s attendance ends
- Violations of this policy are subject to corrective action, up to and including termination, and referral to the appropriate law enforcement as determined by the school officials
- Use of illegal drugs will automatically result in immediate dismissal
- A student who has diverted medication or believed to have diverted medication will be terminated
Reasonable Belief Testing

This is conducted when there is information about a student's appearance, conduct or behavior that would cause a reasonable person to believe that the student may be impaired by alcohol, controlled substances, or the use of illegal drugs. Reasonable Belief testing may be conducted with the student after an investigation has been completed. This type of testing may be initiated by any clinical staff or program faculty. If possible, circumstances relating to reasonable belief testing should be witnessed by at least two individuals.

Complete documentation will include the basis for suspicion (appearance, behavior – speech and awareness, motor skills – balance, and any other observed actions or behavior – odor of alcohol on breath), time and date, and signatures.

The student will also be required to sign a Testing Consent Form, found in the Marshfield Clinic Health System Document Control System within the Substance Abuse Policy, as Appendix C.

The student is to be brought down to any Marshfield Clinic laboratory for immediate testing, at the student’s expense. The student will be sent home (with appropriate transportation arrangements) until the results are received. If the results are negative, the student may return to class or clinical. If the results are positive, the student will be notified and will be subject to corrective action, up to and including dismissal.

Personal Portable Devices Policy

The purpose of this policy is to address the use of personal and electronic portable devices [smartphones (i.e. iPhones, Androids), cell phones, and other electronic devices (i.e. iPads, iPods, MP3’s, Kindles, laptops etc.)] within the clinical rotation departments and classroom.

The use of personal and electronic portable devices and laptops for personal use (including homework, talking, texting, internet, videos, gaming, etc.) are not permitted in any areas during clinical education. This includes break rooms. Students may use their electronic devices only outside of the clinical rotation/department during lunches and breaks.

During scheduled clinical time, cell phones and other personal and electronic portable devices should be turned off and stored in a purse, backpack, or other secure location, and not be kept out or carried on person or present. If a student is found with a portable device on their person, they will be required to remove it, and disciplinary action will follow. If a student is wearing a smart watch of any kind, and is found/saw to be using it for other than time, he/she will be required to remove it and disciplinary action will follow.

During scheduled class time, cell phones and other personal portable devices must be turned off and stored, unless otherwise authorized. This does not mean on the desk/table. They must be stored away, out of sight. YOU WILL NEED A REGULAR CALCULATOR, phones will not be permitted for use as a calculator.

If a student fails to follow the Personal Portable Device Policy, disciplinary action will follow.
Emergency Phone Calls
If there is an emergency situation that someone must contact you while at the medical campus, please share the Student Program Reception’s phone number (715-387-9251).

Computer Usage
The computers located in the medical library and School of Radiography are provided for student educational purposes. Students may not use the computers for personal business at any time. Please be aware that any misuse of the computers will result in student privileges being removed and disciplinary action will be taken. Misuse of the computer includes, but is not limited to:

- Viewing Internet sites that contain pornography, gambling, or chat rooms.
- Sending inappropriate e-mail messages. These include, but are not limited to, sending e-mails containing vulgar, abusive or derogatory language, threats of violence (intended or implied).
- Viewing confidential information without clinical necessity.

The program reserves the right to supervise computer usage and determine behaviors that are deemed inappropriate.

Computers provided by Marshfield Clinic are for your use as a student while attending the School of Radiography. **The devices are to be used only on campus.**

Social Networking
All students should be aware that any information they post on social networking sites may be disseminated, whether intended or not, to a larger audience. What one says or delivers over such sites may be taken out of context. When posting content or images on social networking sites such as facebook or snapchat, students need to always remember that they are representing Marshfield Clinic Health System as a whole as well as the Radiography Program. In addition, they are representing their affiliation university and clinical education sites as well.

Some examples of networking sites in which inappropriate content could be dispersed would include Facebook, LinkedIn, blogs, wikis, twitter, Flickr, YouTube, Snapchat:

- Ensure that your social networking activity does not interfere with your school and clinical affiliations. Check with program officials if you have questions.
- When you participate in social media, you need to be careful about the information you provide and to distinguish personal from professional comments.
- At no time, should a student post any information regarding patients or activities related to their clinical experience. This could and most likely will result in immediate termination as this is a breach of confidentiality.
- When using social media, be aware that clinical affiliation policies regarding social media may apply to you as a student in our program.
- Consider your content carefully; a posting on the web lives forever. Be respectful and professional. A good rule of thumb is to post or communicate only those things you would want your future employer to see.
The below are some examples that may be deemed inappropriate by program officials as these incidents can affect a student’s ability to participate in clinical experiences at the programs affiliated clinical education sites:

- Online derogatory remarks regarding patients, clinical staff, program faculty or peers.
- Online depiction of illegal activity
- Discriminatory language or practices online
- Inappropriate images
- Posting patient radiographic images of any kind

Students involved in any breach of confidentiality, inappropriate behavior or comments related to the college and program affiliates will be subject to disciplinary action as outlined in the disciplinary procedures portion of this handbook.
SECTION FOUR:
CLINICAL EDUCATION PLAN
**Clinical Rotation Assignments**

All students will rotate through the program’s clinical education sites throughout their enrollment in the program, which ensures a wide variety of clinical experiences. The current clinical sites are **Marshfield Clinic** and **Marshfield Medical Center**, located at 1000 N. Oak Avenue, Marshfield, WI 54449. Each clinical education site has a designated clinical instructor/preceptor.

The clinical instructor for each site will provide rotation schedules for students, which may include general diagnostic radiography, pain care, surgery, fluoroscopy, orthopedics, ER/trauma, and/or tomography, as applicable to their respective site. **If at any time a student is prohibited from performing clinical duties at any of the program clinical sites, the student will no longer be eligible to continue in the program.**

Program administration determine schedule clinical site rotations and shift times. Students are provided with a schedule each semester, which is distributed in a timely manner, approximately two to three weeks prior to the start of each semester. Clinical rotation schedules are subject to change by the program director when there is a recognized need to do so based on staffing or department changes, procedure changes, competency needs, change in student numbers, individual student needs, or modality rotation needs. **Students are not allowed to change or switch clinical rotations days or times.**

Students will be scheduled for approximately **18 hours per week of clinical time** during the first (1st) and second (2nd) semesters of the program, on Tuesdays and Thursdays; and approximately **24 hours per week of clinical time** during the third (3rd), fourth (4th), and fifth (5th) semesters of the program, on Mondays, Wednesdays, and Fridays. Students will be required to attend early morning, day, afternoon, and evening shift clinical rotations while enrolled in the program. Students will also be scheduled weekend rotations during enrollment in the program. **Students will not be required to complete more than 25% of their total clinical time during the evening/overnight hours of 7:00pm – 5:30am or weekend hours at any time during the program.** In the event a class cannot be held, program officials reserve the right to re-assign the academic time to clinical education. However, **at no time will a student be scheduled more than 40 hours per week of combined clinical and didactic hours. No substitutions for clinical rotation times will be allowed.**
Modality Rotations
Throughout enrollment in the program, students are provided the opportunity to observe specialized Imaging areas (modalities) which include Nuclear Medicine, Radiation Therapy, Computed Tomography, MRI, Interventional Procedures, Mammography, and Ultrasound. Please refer to the policy below for mammography rotations.

The purpose of the modality rotations is to provide the students with an introductory experience to each related modality and provide a basic understanding as to how each modality plays a role in diagnostic and therapeutic imaging. In addition, students will be apprised to the advanced imaging career opportunities within the field of Radiography. Additional rotations will only be allowed if the student is meeting all clinical requirements and is in good academic standing in regards to clinical requirements and competencies.

**Mammography Rotation Policy**
The Marshfield Clinic School of Radiography has implemented a policy, effective Fall Semester 2019, regarding the placement of students in mammography clinical rotations to observe and/or perform breast imaging.

Under this policy, all students, male and female, will be offered the opportunity to participate in mammography clinical rotations. The program will make every effort to place a male student in a mammography clinical rotation if requested; however, the program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to female students. Male students are advised that placement in a mammography rotation is not guaranteed and is subject to the availability of a clinical setting that allows males to participate in mammographic imaging procedures. Male students must be aware that if they request a mammography rotation, it is likely this request will be denied by the programs current clinical education sites. The program will not deny female students the opportunity to participate in mammography rotations if clinical settings are not available to provide the same opportunity to male students.

The program’s policy regarding student clinical rotations in mammography is based on the sound rationale presented in a position statement on student mammography clinical rotations adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its April 2016 meeting. The JRCERT position statement regarding mammography rotations is available on the JRCERT Web site, www.jrcert.org, Programs & Faculty, Program Resources, and is referenced with permission given by the JRCERT.

Marshfield Clinic School of Radiography has implemented this policy to assure female students are not denied the opportunity to explore mammography imaging, due to the constraints of available clinical sites that would allow the same opportunity for males. In reference to the JRCERT position statement, demographic data indicates that less than 1% of the approximately 50,000 technologists registered in mammography by the American Registry of Radiologic Technologists (ARRT) are males. April - 2016
**Clinical Rotation Times**

Clinical rotation times are subject to change and are continually evaluated to meet the clinical needs of students. **Program officials reserve the right to change/revise/add/remove clinical rotation shift times as needed.**

Current **Clinical Rotation** times are as follows:

**First (1st) and Second (2nd) Semester, Tuesdays/Thursdays**
- 6:00am-3:30pm
- 7:00am-4:30pm
- 7:30am-5:00pm
- 9:00am-6:30pm
- 12:00pm-9:30pm

**Third (3rd), Fourth (4th), and Fifth (5th) Semester, Mondays/Wednesdays/Fridays***
- 6:00am-2:30pm
- 7:00am-3:30pm
- 7:30am-4:00pm
- 8:00am-4:30
- 12:00pm-8:30pm
- 2:30pm-11:00pm

*Above listed times are for Monday, Wednesday, and Friday with the exception of one (1) Weekend shift during the Senior Year

**General Clinical Objectives**

The main clinical objective is for students to develop job entry-level competencies in the performance of ARRT mandatory and elective radiographic procedures and to apply the appropriate theory to the various clinical situations that might be encountered. Components of Clinical Grading are 1) **Clinical Competency Examinations**, 2) **Weekly Technologist Evaluations**, 3) **Clinical Instructor Evaluations**, 4) **Spot-Check Competency Assessments**, and 5) **Required Weekly Procedure Totals**.

Detailed Clinical Objectives as well as Grading details are listed in each syllabus for each clinical radiography course.

**Modality Rotation Objectives**

Radiology Imaging Modalities are not a central part of the Radiography Program, which concentrates on General Diagnostic Radiography. However, the Marshfield Clinic School of Radiography feels it is important to introduce students to the opportunities in the Imaging Sciences after graduation.

The main clinical objectives for Modality Rotations are to:
- Recognize common procedures performed in each modality as well as general imaging considerations.
- Discover the contribution of modalities in regards to diagnostic/therapeutic aspects of healthcare.
- Familiarize with the clinical indications for requiring the use of the modalities.
- Discover benefits and limitations to each modality.
Student Supervision Policy – Clinical

Direct Supervision

Until the student achieves the program’s required competency level in any given procedure, all students will be **directly supervised** by a qualified radiographer. The term "**direct supervision**" shall be interpreted to mean that a qualified radiologic technologist is present in the exam room to supervise all student activities. A qualified radiographer is one that is registered with the ARRT. The required level of competency is achieved following the below criteria:

- Written and lab test out of body region and universal exam requirements
- Required number of completed competency assessments under direct supervision

1. The qualified radiographer reviews the request for examination in relation to the student’s achievement.
2. The qualified radiographer evaluates the condition of the patient in relation to the student’s achievement.
3. The qualified radiographer is present to assist the student as necessary.
4. The qualified radiographer reviews and approves all images.

A student must be directly supervised until final competency has been achieved.

This policy shall be interpreted to mean that any student (first or second year) requires direct supervision for any exam that the student has not proven competence through a documented, final evaluation check-off.

Indirect Supervision

Once the student achieves the program’s required level of competency in a given procedure the student may perform such exam with **indirect supervision**. It is defined as supervision 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 the radiographic procedure is being performed – within “hearing distance”. The term "**indirect supervision**" shall be interpreted to mean that a qualified radiologic technologist is within vocal range of the student so that if the student encounters problems he/she can vocally alert technologist and receive immediate assistance. With indirect supervision, supervision is provided by a qualified radiographer immediately when needed to assist students regardless of the level of student achievement. The use of pagers, intercoms, or phones is not permissible in defining “immediately available”. This availability applies to all areas where ionizing radiation equipment is in use.

This policy shall further be interpreted to mean that even after the student proves competence they cannot go to the hospital floors to do portable or surgical exams/procedures alone, because in doing so the technologist is not "immediately available". When students do portables after receiving a final competency check-off a qualified radiologic technologist must accompany them to the floor. The technologist does not need to go into the room, but must be within vocal range.
Image Repeat Policy

In the interest of radiation protection, all unsatisfactory images will be repeated only in the presence of a qualified radiographer (regardless of the competency level of the student, or the difficulty level of the exam), and will be documented by each student.

Repeat Policy Interpretation/Clarification

This policy explicitly states that all repeat images are to be done only if a qualified radiologic technologist accompanies the student into the room and directly observes and supervises corrective action. The qualified radiographer must be physically present during the repeat image and must approve the student’s procedure prior to re-exposure. This ensures patient safety and proper educational practices. The student is required to document this repeat in their Exam Log Book and have it signed off by the Technologist that directly supervised the repeat. This policy must be followed no matter how simple the corrective action may be, and no matter how competent the student may be. The onus of responsibility for making sure this policy is followed will be placed on the student. Technologists need to realize that students will refuse to go to the floor alone when doing portables, and will refuse to do repeat radiographs unless a technologist provides direct supervision; because, if any student is observed in violation of this policy, disciplinary action will be initiated.

Supervision Advisory Statements:
1. Program officials advise that students follow direct supervision when imaging a pregnant patient.
2. Program officials advise that students follow direct supervision when imaging a patient under the age of 18.

Holding During Radiographic Exams

Per JRCERT Accreditation Standards,
1. STUDENTS MUST NOT HOLD IMAGE RECEIVERS DURING ANY RADIOGRAPHIC PROCEDURE.
2. STUDENTS SHOULD NOT HOLD PATIENTS DURING ANY RADIOGRAPHIC PROCEDURE WHEN AN IMMOBILIZATION METHOD IS THE APPROPRIATE STANDARD OF CARE.

With this, it is our position as Administration of the Marshfield School of Radiography to issue this position statement on holding during radiographic procedures.

The Administration of Marshfield School of Radiography does not recommend students to hold patients for any radiographic procedure. We believe that students should not be used in place of immobilization methods.

If a student volunteers/chooses to hold a patient for an exam, this is saying that the student and the supervising technologist believe that there is NO OTHER OPTION of immobilization present. In doing so, the student must understand that this is their voluntary action and responsibility.

Students are not allowed to hold for phantom exposures and/or QA equipment testing at any time.
Radiation Safety Rules in the Clinical Setting

Students are required to follow department protocol for any additional radiation safety procedures that go beyond the general guidelines. This includes documentation requirements for patients of procreation age, shielding protocols, documenting inquiries for chance of pregnancy etc.

At all times in the clinical setting, the student will:

- Initiate all cardinal principles at all times: Time, Distance, and Shielding
- **Wear their provided dosimeter at collar level. If work requires a protective lead apron, like in the fluoroscopic setting, the dosimeter will be worn collar level, outside the protective apron.**
- Wear a protective apron at all times when working with mobile or stationary fluoroscopy.
- Follow department protocol for securing exam room access during exposures.
- Remain behind the control booth during exposures for non-fluoroscopic exams.
- No holding of imaging equipment or receptors during exposures.
- No sharing of dosimeters between students.
- Use radiographic and/or fluoroscopic equipment for patient procedures as intended. No imaging of self and/or any other individual is allowed for one’s own purpose.
- When working with mobile radiography, protective apron must be worn in addition to following the Cardinal Principle of distance.
- Follow all department protocols on patient shielding for procedures.
- Follow all department protocols on inquiring about chance of pregnancy regarding age and written documentation.

Radiographic Lead Gravity Identification Markers

Each student is issued one set (one “Left” and one “Right) of Radiographic Lead Gravity markers for use during clinical rotations. Students are required to have and use these markers every day, on all exams the perform during clinical rotations. If a student forgets his/her markers at any time, he/she will be sent home to retrieve them, and will be required to use PTO for the time missed. If a student loses or damages either or both markers at any time during enrollment, the student will be responsible for replacing them immediately. The student will not be permitted in clinical rotations until they have been received, and will be required to use PTO for the time missed.
Incident Reports

Any circumstance that occurs at the program’s designated clinical sites that requires the clinical education site to complete an incident report must be reported to the Program Director. The Program Director will require documentation to complete the incident report if applicable. This may include, but not limited to a patient fall, exposure to a communicable disease such as TB, performing procedure on incorrect patient, needle stick etc. If the student is working with a patient and an injury or unusual circumstance occurs, they are to report the incident immediately to their clinical instructor or a staff technologist if working under indirect supervision. Facility protocol will be followed following any incident. The student and/or clinical instructor will notify the Program Director within 24 hours following the incident and may be requested to provide a copy of the report.

When the need arises such as in cases of exposure to a communicable disease, the student will follow facility protocol.

Clinical Assessment Procedures/Grading

A conference with the student and the Clinical Instructors and either the Program Director or Program Faculty will take place at the mid and end of each semester. At that time, students will see their overall clinical grade derived from cumulative clinical evaluation tools.

The purpose of the conference is to provide feedback to the student regarding his/her clinical performance throughout the semester. Program faculty may also conduct a conference with a student randomly throughout a semester if needed to address performance or progression issues. All students can request to meet with any program faculty member at any time to discuss issues or concerns or simply to contribute input regarding their learning and experience.
ARRT Clinical Competency Requirements

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

There are core clinical competencies that all individuals must demonstrate to establish eligibility for ARRT certification. Listed on the following pages are the competency requirements for Marshfield Clinic School of Radiography, which include the minimum core clinical competencies necessary to establish eligibility for participation in the ARRT Radiography Examination. The ARRT encourages individuals to obtain education and experience beyond these core requirements, which is also the intent of the program.

As part of the educational program, students must demonstrate competence in the clinical procedures identified below:

- Ten mandatory general patient care activities;
- 51 mandatory imaging procedures;
- 12 elective imaging procedures selected from a list of 22 procedures;
- One of the 12 elective imaging procedures must be selected from the head section

All clinical competencies must be achieved with an 85%, B, or higher.

General Patient Care

Students will be CPR certified during the Orientation of the program, and will be required to demonstrate competence in the patient care activities listed below.

- Vital Signs: Blood Pressure, Temperature, Pulse, Respiration, Pulse Oximetry
- Sterile and Medical Aseptic Technique
- Venipuncture
- Transfer of Patient
- Care of Patient Medical Equipment (Oxygen Tank, IV Tubing)

Imaging Procedure Competencies

Students will be required to demonstrate competence in the following Radiographic Procedures.
### ARRT CLINICAL COMPETENCY PROCEDURES

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<tr>
<th>Chest</th>
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### Lower Extremity

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### Spine

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### Fluoroscopy

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<td>UGI Series, Single or Double Contrast</td>
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<td>Cystogram</td>
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<td>Small Bowel Series</td>
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<td>Esophagus (NOT Swallowing Dysfunction Study)</td>
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## Mobile Studies

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<td>Surgical C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection) (Hip, Knee, or Ankle)</td>
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## Electives: Pick 12 (1 Must Be From Head Category)

- Trauma is considered a serious injury or shock to the body and REQUIRES MODIFICATIONS IN POSITIONING and monitoring of
- Geriatric must be 65yrs or Older and PHYSICALLY OR COGNITIVELY IMPAIRED

## Imaging Procedure Competencies

Demonstration of competence will/must include: • patient identity verification • examination order verification • patient assessment • room preparation • patient management • equipment operation • technique selection • patient positioning • radiation safety • imaging processing and • image evaluation

Revised July 2019
<table>
<thead>
<tr>
<th><strong>ARRT CLINICAL COMPETENCY SEMESTER DEADLINES</strong></th>
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<tbody>
<tr>
<td><strong>Chest</strong></td>
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<td>PA &amp; Lateral</td>
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<td>Chest AP (Wheelchair or Stretcher)</td>
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<tr>
<td><strong>Abdomen</strong></td>
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<td>Abdomen Supine (KUB)</td>
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<td>Mobile Abdomen</td>
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<tr>
<td>Abdomen Decubitus</td>
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<tr>
<td>Intravenous Urography</td>
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<td>Thumb/Finger</td>
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<td>Wrist</td>
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<td>Shoulder</td>
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<td>Mobile Upper Extremity</td>
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<td>AC Joints</td>
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<td>Lower Extremity</td>
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<td>Cross-Table (Horizontal Beam) Lateral Hip (Pt Recumbent)</td>
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<td>Pediatric Lower Extremity (6yrs or Younger)</td>
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<td>Scoliosis Series</td>
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<td>Sacroiliac Joints</td>
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<td>Cystogram</td>
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<td>Barium Enema, Single or Double Contrast</td>
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## Mobile Studies

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<td>Surgical C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection) (Hip, Knee, or Ankle)</td>
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<td>Surgical Mobile C-Arm Orthopedic (Any Extremity)</td>
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## Head

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<td>Facial Bones</td>
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<td><strong>Pick One From Below</strong></td>
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<td>Orbits</td>
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<td>Zygomatic Arches</td>
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## Imaging Procedure Competencies

Demonstration of competence will/must include: • patient identity verification • examination order verification • patient assessment • room preparation • patient management • equipment operation • technique selection • patient positioning • radiation safety • imaging processing and • image evaluation
Evaluating ARRT Competency Procedures

Upon successful completion of the cognitive and psychomotor proficiency exams/steps, the student will begin clinical participation by assisting registered technologists at the clinical site. This participation moves from the passive, observation mode to a more active mode, which includes assisting the technologist in the execution of procedures. The rate a student progresses is dependent on the student’s ability to comprehend and perform the assigned procedures as well as the student’s individual motivation.

“Yellow Forms”
As the student becomes experienced in a given procedure, he/she will perform the procedure under DIRECT SUPERVISION of a registered radiologic technologist (RTR>1year). The RT will evaluate the performance of the student using the appropriate/designated Competency Evaluation Forms until the required number of procedures within the category has been completed. The student must demonstrate mastery with a minimum performance level of 85% on each evaluation before he/she can progress to the Final Competency Examination step. If a student fails to achieve an 85% he/she will continue in Directly Supervised clinical participation until passing proficiency is achieved.

“Blue Forms”
Upon successful completion of the required number of Directly Supervised procedures in each category (Clinical Participation), the student will request a Final Competency Examination Evaluation to complete the category. This procedure is completed exclusively by the student, under DIRECT SUPERVISION of the evaluation technologist (RTR>1year). Once the procedure is complete, a Clinical Instructor will evaluate the student’s proficiency of the Image Acquisition and Analysis. The student must demonstrate mastery with a minimum performance level of 85% on each Final Competency Examination evaluation. Upon successful completion, the student may now perform in this category with INDIRECT SUPERVISION. Failure to complete the minimum proficiency level in the Final Competency Examination step will require the student to repeat the particular final competency examination (with highest possible score of 85% on repeat exam). Upon successful completion of the re-examination, the student may now perform in this category with INDIRECT SUPERVISION. If, upon completion of the re-examination the student still does not pass with proficiency, he/she will be placed on academic probation and will have a third (3rd), and final, opportunity to retake the Final Competency Examination evaluation. If the student passes the third (3rd) re-take, he/she will remain in the program under the conditions of their probation, and can now perform in this category with INDIRECT SUPERVISION. If the student does not pass the re-take on the third (3rd), final, attempt, termination from the program will result. A failing grade (and remediation) in this step will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in termination of the program.
Competency Evaluation Steps

1. **The Clinical Competency Examination Form must be presented to the RT(R) before the exam is started.** Once the competency procedure has begun, the student is obligated to continue, and finish, even if the procedure is “less than desirable,” mistakes are made, or a failing grade is made. If a student fails to complete a competency procedure, he/she will be automatically issued a zero, and disciplinary action will follow.

2. Student must complete the top portion of form before the exam is started so the supervising technologist is aware of this information. (Name, Clinical Site, Comp Exam/Category, Date, and Patient Code)

3. The RT(R) will directly observe the procedure, evaluate the image, complete and sign the Competency Examination Form and return it to the student, or the Clinical Instructor. If the technologist returns it to the student, he/she must sign and submit to the Clinical Instructor. If the technologist returns it to the Clinical Instructor, the instructor will review it with the student for a signature.

4. All evaluations must be submitted to the Clinical Instructor regardless of pass/fail. If a student fails to submit a Competency Examination Form because he/she failed, disciplinary action will follow.

5. Final Evaluations in each category require a Final Competency Examination Form and are to be performed under the supervision of a technologist, but must be given to a Clinical Preceptor for Image Evaluation before a total score can be calculated.

6. Completed forms may be placed in the designated clinical lockboxes or given directly to a Clinical Instructor.

7. **The student is recommended to keep a copy** of his/her competency examinations. In the event there is a loss, the student will be required to repeat the examination if he/she does not retain a copy.

Demonstration of competence will/must include: • patient identity verification • examination order verification • patient assessment • room preparation • patient management • equipment operation • technique selection • patient positioning • radiation safety • imaging processing and • image evaluation
Criteria For Competency Evaluation

Criteria For Performance Evaluation

A. Evaluation of Requisition
Student was able to:

1. Identify procedures to be done.
2. Identify the patient information
3. Determine clinical history.

B. Physical Facilities Readiness
Student was able to:

1. Keep table clean.
2. Cabinets and table in order.
3. Have appropriate size IRs available.
4. Have emesis basins and drugs ready as necessary.
5. Locate syringes and needles as necessary.
6. Locate positioning aides when necessary.
7. Turn tube in position ready for exam.
8. Find and re-supply linens if necessary.

C. Patient – Technologist Relationship
Student was able to:

1. Select the correct patient.
2. Assist patient to radiographic room.
3. Assist patient from whatever his mode of travel to radiographic table.
5. Talk with patient in a gentle manner.
6. Give proper instructions for moving and breathing.
7. Have patient gowned properly.

D. Positioning Skills
Student was able to:

1. Position the patient correctly on table. (head at correct end of table, prone or supine)
2. Align center of part to be demonstrated to the middle of the IR/tube.
3. Center “CR” to the center of the part/IR.
4. Position part correctly.
5. Remove unnecessary anatomical parts from the radiographic area.
6. Makes appropriate adjustments/compensations if needed.
E. **Equipment Manipulation**
Student was able to:

1. Turn tube from horizontal to vertical (and vice versa)
2. Move the bucky tray and utilize lock.
3. Correctly identify and utilize tube locks.
4. Insert and remove IR from bucky tray if required.
5. Manipulate IR as needed
6. Select factors at control panel
7. Measure the patient.
8. Identify the film with correct marker ("R" or "L").
10. Direct mobile unit.
11. Operate controls for mobile unit.
12. Select proper IR for mobile.
13. Adapt for technique changes if FFD, Grid ratio, and collimation.

F. **Evidence of Radiation Protection**
Student was able to:

1. Cone or collimate to part.
2. Use gonad shields, if appropriate.
3. Wear lead aprons and gloves if appropriate.
4. Wear film badges as directed by institution.
5. Select proper exposure factors.
6. Adjust exposure techniques for motion.

**Criteria For Image Evaluation**

G. **Radiographs Demonstrate**
1. Anatomical Part(s):
   a. Part is shown in its proper perspective
   b. No motion present
2. Proper Alignment:
   a. IR Centered
   b. Part Centered
   c. Tube Centered
   d. Part rotated correctly

H. **Standard Radiographic Exposure**
3. Radiographic Techniques
   a. Correct exposure factors used
   b. Factors manipulated for pathology
4. IR Identification:
   a. Pt identification
   b. R or L identification
5. Radiation Protection
   a. Cone or collimation marks visible
   b. Gonadal shields in place
Clinical Grade Components

- Completed ARRT competencies
- Weekly Clinical Performance/Rotation Evaluations
- Clinical Instructor Evaluations
- Spot Check Assessments
- Radiographic Examination Completions

1. Scores of completed required competency procedures. If a student fails to achieve the required competencies in a given semester, the student will receive a zero for that competency. This competency will then be required the following semester, but for a lesser grade (maximum of 85%). If a student fails to complete the minimum competencies required in a given semester more than twice during the program at any time (2 semesters), the student will be placed on academic probation. If a student fails to complete the required competencies a third time (3rd semester) the student will be dismissed from the program. If a student fails a competency but is able to repeat the examination prior to the end of the semester, the student's grade for that competency will be the average of the two grades.

2. Weekly Clinical Performance Evaluations: Students are assessed by their supervising technologist on the following categories on a rubric scale 1-5:
   - Communication and Patient Care
   - Imaging Procedures
   - Equipment Operation
   - Radiation Protection
   - Independent judging/Critical Thinking
   - Initiative
   - Professionalism

3. Clinical Instructor Evaluations: Clinical Instructor evaluations are completed on each student by each clinical instructor at the clinical education sites once at the midpoint of the semester, and once at the end of the semester. The purpose of an overall clinical instructor evaluation is for students to recognize both strengths and weaknesses as perceived by clinical staff in order to improve clinical performance or recognition for stellar qualities. The following criteria are assessed:
   - Communication and Patient Care
   - Professionalism and Ethical Behavior
   - Initiative and Responsibility
   - Procedures and Protection

4. Students will be assigned patient and simulated procedures throughout their assigned clinical rotations to evaluate whether proficiency in completed categories and procedures is maintained. Four (4) times during each semester, students will randomly be “spot – checked” on live patients or simulated procedures, designated by the Clinical Instructor, to monitor the proficiency of prior achieved final competencies. Failure to pass any spot-check examination with an 85% or better will require the student to return to the Clinical Participation step in competency for re-evaluation of that category, and all previously earned clinical competencies in that category will be revoked. A failing grade on a spot-check procedure will only be allowed two (2) times during enrollment of the entire program. A third (3rd) failure will result in termination of the program.
5. Students will be required to complete a minimum number of radiographic procedures each semester. Grades for this component will be configured based on the percentage of the number met. If a student consistently fails to achieve the minimum number of procedures, the student will be placed on Academic Probation. If after a given time the student still does not perform to standard, the student will be dismissed from the program.

**Clinical Grading Scale**

*A minimum grade of “B” is required in all Radiographic Clinical courses within the Radiography Program Curriculum.*

The grading scale for the Radiography Program is as follows:
- 93% -100% = A
- 85% -92 = B
- 77% -84 = C
- 69% -76 = D
- < 68% = F
Appendix:

Forms