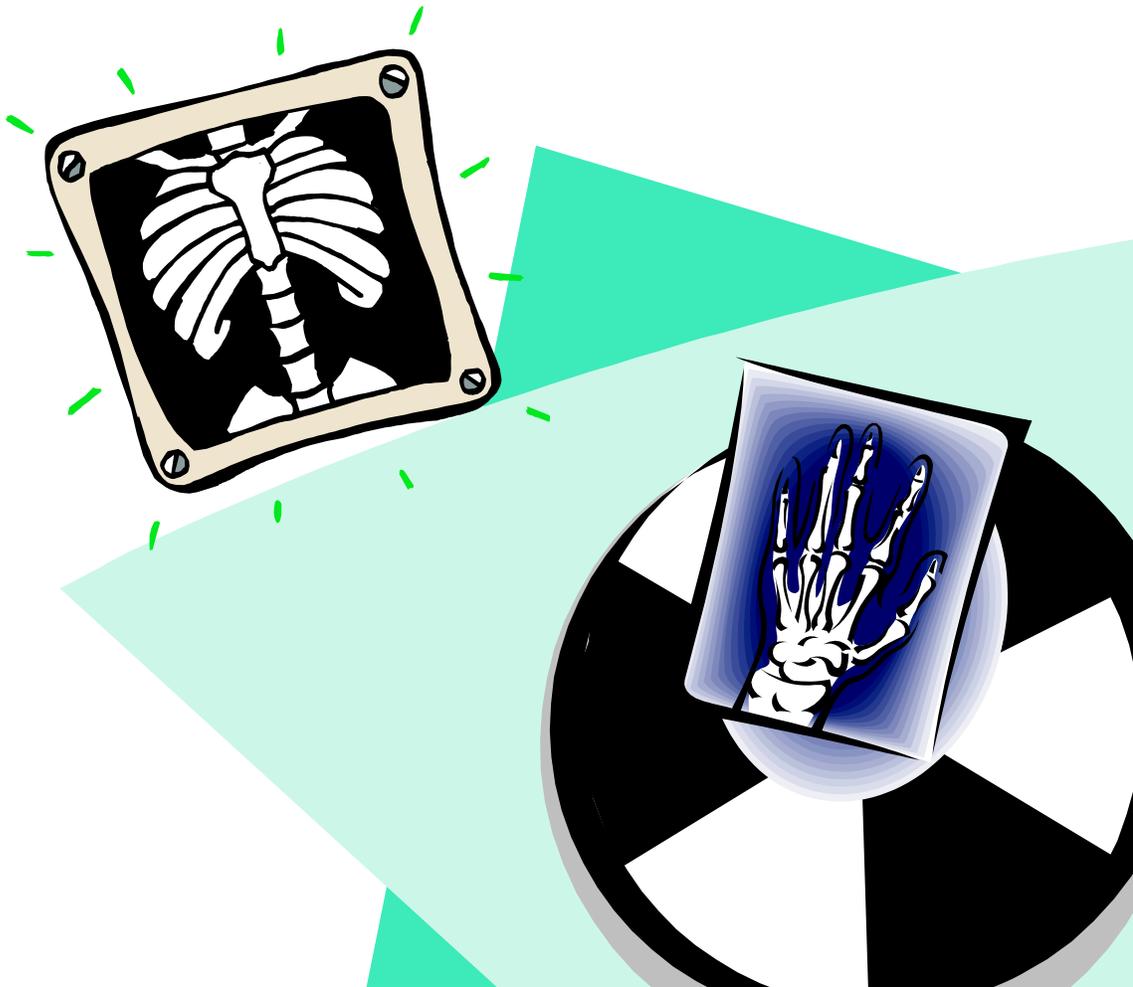


# HACC



**ASSOCIATE IN SCIENCE DEGREE IN  
RADIOLOGIC TECHNOLOGY  
STUDENT HANDBOOK**

2022

NAME \_\_\_\_\_



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## FOREWARD

This booklet is designed to acquaint students with a summary of the program policies, which govern their conduct in the Radiologic Technology program. It is presented to assist students in the pursuit of their educational objectives.

Welcome.....

to the HACC A.S. Radiologic Technology Program. We hope that you will find the next two years fulfilling, both educationally and personally.

As a student radiographer, you will be playing a vital role in the branch of medicine called Radiology. You will assist physicians known as Radiologists in utilizing x-radiation and diagnosing various injuries and diseases.

Because of the unique education process involved and the many responsibilities accompanying this role, we have designed this student handbook to help you become acquainted with the program. Our rules and regulations are also presented in this handbook. It is your responsibility to adhere to these rules in order to offer efficient and professional services to our most important consideration – the patient.

### **EQUAL EMPLOYMENT/EDUCATIONAL OPPORTUNITY**

It is the policy of Harrisburg Area Community College, in full accordance with the law, not to discriminate in employment, student admissions, student activities and student services on the basis of race, color, religion, age, political affiliation or belief, gender, national origin, ancestry, disability, place of birth, General Education Development Certification (GED), marital status, sexual orientation, gender identity or expression, veteran status, or any legally protected classification. HACC recognizes its responsibility to promote the principles of equal opportunity for employment, student admissions, and student services taking active steps to recruit minorities and women.

Inquiries should be directed to:

Title IX Coordinator/ College Diversity Officer  
HACC Lancaster Campus  
1641 Old Philadelphia Pike  
Lancaster, PA 17602  
Telephone (717) 358-2974

## **PHILOSOPHY**

The profession of Radiologic Technology is an art and a science dedicated to the health and needs of mankind.

Everyone is entitled to have the best health care services possible. Quality radiographic services with minimum radiation exposure should be provided. Therefore, education in Radiologic Technology is based on a specialized body of knowledge and skills, which focus on preparation of a competent health care professional.

The college and clinical education settings are crucial tools for the development and evaluation of educational goals.

Education is defined as the process of creating behavioral change. An institutional system should be responsive to relative, cognitive, affective and psychomotor education objectives. As the result of interaction with his/her environment, the student will undergo behavioral changes in the process of learning. An environment, which is conducive to learning, is necessary if the student is to acquire the knowledge and develop the skills necessary to achieve the desired goal.

It is the responsibility of the Radiology Technology Program to provide such an environment. During the educational process, to insure growth and development, every student should be encouraged to participate to his/her fullest capacity in the classroom setting and clinical environment. Students should have the opportunity to seek advice from program authorities. The Radiologic Technology Program should provide channels of communication with program authorities for the purpose of counseling and/or mediating problems.

## **CAREER DESCRIPTION**

Radiographers accurately demonstrate anatomical structures on a radiograph by applying knowledge of anatomy, positioning and radiographic techniques. Radiographers must also be able to recognize emergency patient conditions and initiate lifesaving first aid. Additional duties may include maintaining equipment, image acquisition, and image processing, keeping patient records and performing various office tasks. Radiographers may be required to perform some of these duties at the patients' bedside or in the operating room. The primary function of the professional in radiologic technology is to assist a physician, usually a radiologist, in using ionizing radiation in the diagnosis of disease. Radiographers operate radiologic equipment under the general direction of a physician.

Radiographers are qualified to provide patient services using imaging modalities, as directed by physicians qualified to order and/or perform radiologic procedures. Radiographers provide patient care essential to radiologic procedures; this includes exercising judgment when performing medical imaging procedures. When providing patient services, the radiographer adheres to the principles of radiation protection for the patient, self and others.

During this course of study, the student radiographer becomes competent in all areas of diagnostic radiography by using modern and sophisticated x-ray equipment while under the supervision of the program officials, staff radiographers, and radiologists at the clinical sites. Graduates of this program are prepared for a career in diagnostic radiography in a hospital, private practice, public health, military and other similar institutions or places of employment.

### **CURRICULUM DESCRIPTION**

The course follows a planned outline described in the Curriculum Guide for Programs in Radiologic Technology, published by the American Society of Radiologic Technologists.

Clinical instruction is accomplished by demonstrations, supervised practice and clinical assignments in general diagnostic radiology, fluoroscopy, computed tomography, mobile and surgical radiography and other specialized areas.

Clinical experience is provided in performing radiographic exposures, positioning patients, assisting radiologists, processing images, adjusting radiographic controls and maintaining medical records. Emphasis is placed on developing a broad knowledge of the organization and the day-to-day operations of an imaging department.

The curriculum for the Radiography Program has been designed to educate a diagnostic radiography student within a six-semester period. The Program consists of two distinct facets.

**Technical:** This facet deals with both the academic and clinical aspects of the Program.

**Ethical:** The ethical instruction governs the student's professional conduct. Enrollment in this program implies an agreement on the part of the student to comply with the rules of the Program. The Program reserves the right to dismiss any student who refuses to conform to Program regulations.

Student radiographers must have a personal investment in their education and the professional standards of the field. Therefore, they must respect the welfare of the patient and uphold the professional and ethical standards of radiologic technology.

## **PROGRAM DESCRIPTION & ACCREDITATION**

The program offers six semesters of classroom and clinical participation courses. During this time, the students will be attending classes and laboratory sessions as scheduled and will be rotated throughout the various sections of participating medical facilities for practical experience.

The clinical aspect of this program will consist of a transition from an observation or passive role to an active participatory one of assisting the radiologic technologist in various radiographic procedures.

After gaining observation experience on various procedures, the students will gradually move into a performance stage in which they will actually be performing the radiographic procedures under the direct supervision of registered technologists. *Direct supervision* means staff technologists or the clinical instructors are present in the room and at the control panel while the students are performing procedures. The staff technologists or clinical instructors are responsible for the students' actions and the patients' welfare during the procedures.

After the students have performed particular examinations satisfactorily under *direct supervision*, they will request competency evaluations. During these evaluations, they will demonstrate their skills and competency in those particular examinations. If the student fails the competency evaluations, remedial and additional instruction and experience in the examinations are required under the direction of the clinical instructors or staff technologists.

After successful completion of competency evaluations, the students will be allowed to perform the examinations with *indirect supervision*. The students will continue to perform these examinations, for which they have successfully completed competency evaluations, while preparing for the other competency evaluations. *Indirect supervision* means registered technologists are immediately available in the adjacent area to assist the students if necessary. The students will evaluate the finished radiographs in the presence of registered technologists. Final approval of the finished radiographs is the responsibility of the registered technologists.

The Program follows an approved program outline of the American Society of Radiologic Technologists (ASRT). The college is accredited by Middle States Association of Colleges and Schools. The program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) 20 N. Wacker Drive Suite 2850, Chicago IL 60606 ([www.jrcert.org](http://www.jrcert.org)) (312) 704-5300. Graduates of this program will be eligible to take the national certification examination offered by the American Registry of Radiologic Technologists. Upon successful completion of this voluntary examination, graduates are entitled to use the abbreviations R.T. (R) (ARRT) after their name.

## **ACADEMIC PROGRAM**

Academic instruction is divided into six (6) semesters, which vary in length from approximately twelve (12) to fourteen (14) weeks.

Class attendance is mandatory. Students must be on time and prepared for each class. Students are responsible for all work given in class. If a class is missed, students are responsible to request any make-up assignments from the instructor. Missed examinations or tests must be made up according to the instructor's policy outlined on the course syllabus.

Two hours of out of class preparation is the minimum suggested time for each hour of classroom instruction.

Submitting another's work for his/her own, including technical papers, homework assignments, and examinations, constitute a score of zero for that assessment. Specific procedures for handling academic dishonesty are contained in the shared governance policy (SGP 506). Falsification, tampering or misrepresenting of clinical documents or records is considered unethical and will result in disciplinary action. Unethical incidences in which the student intentionally falsifies documents (including procedures logs, time records, competencies, etc.) where inculpatory evidence of intention is verifiable, a failing clinical grade will be assigned to the student.

Students are required to purchase all textbooks and other required material for use in didactic and clinical education. Students should purchase an inexpensive pocket calculator for use in the various radiography and physics courses. All books, notebooks, calculators, etc. should be marked with the students' names to facilitate return of misplaced articles.

**CURRICULUM**  
**A.S. Degree in Radiologic Technology**  
**Course Sequencing starting Fall 2018 75 credits**

**“C” or Better Required**

**Fall**

FYS Elective	First-Year Seminar Requirement	1	
ENGL 101	English Composition I	3	Yes
MATH 103	College Algebra	3	Yes
BIOL 121	Anatomy & Physiology I	4	Yes
RADT 102	Introduction to Radiologic Tech	3	Yes
RADT 111	Introduction to Radiation Science	<u>3</u>	Yes
		17	

**Spring**

BIOL 122	Anatomy & Physiology II	4	Yes
COMM 203	Interpersonal communication	3	Yes
RADT 100	Intro to Radiographic Proced.	3	Yes
RADT 105	Radiation Protection and Biology	2	Yes
RADT 106	Radiologic Tech. Clinical Intro.	<u>3</u>	Yes
		15	

**Summer**

RADT 107	Radiographic Procedures I	3	Yes
RADT 108	Rad Characteristics & Production	3	Yes
RADT 109	Radiologic Technology Clinical I	<u>2</u>	Yes
		8	

**Fall**

Wellness	Wellness Elective	1	
SPAN 104	Spanish for Healthcare	3	
RADT 201	Radiographic Procedures II	3	Yes
RADT 202	Imaging Equipment	2	Yes
RADT 203	Radiologic Technology Clinical II	<u>3</u>	Yes
		12	

**Spring**

ENGL 102	English Composition II	3	Yes
Social/Behavioral	Social/ Behavioral Sci. Elective	3	
RADT 208	Imaging and Processing	3	Yes
RADT 209	Image Analysis	2	Yes
RADT 207	Radiologic Technology Clinical III	<u>3</u>	Yes
		14	

**Summer**

RADT 205	Radiographic Pathology	3	Yes
RADT 210	Introduction to CT	1	Yes
RADT 211	Radiologic Technology Clinical IV	3	Yes
RADT 212	Radiologic Technology Seminar	<u>2</u>	
		9	

## COURSE DESCRIPTIONS

A complete description of each course can be found in the college catalog.

### RADIOLOGIC TECHNOLOGY PROGRAM MISSION STATEMENT

HACC provides a program that creates opportunities and transforms lives to shape the future of medical imaging. We graduate leaders in the field who provide the community the highest standard of professional practice making them the first choice for employers.

### PROGRAM GOALS and LEARNING OUTCOMES

#### **Goal: Graduates will be clinically proficient radiographers**

Learning Outcomes:

1. Students will manipulate exposure technique in order to adhere to ALARA.
2. Students will demonstrate accurate positioning for radiographic exams.
3. Students will safely and accurately utilize equipment during the performance of procedures.

#### **Goal: Graduates will apply critical thinking skills**

Learning Outcomes:

1. Students will modify positioning to accommodate the patient's condition.
2. Students will improve performance and behavior through self-assessment and reflection.

#### **Goal: Graduates will model professionalism**

Learning Outcomes:

1. Students will integrate dependable and reliable behaviors in their didactic and clinical education.
2. Students will implement safety practices in the clinical environment.

#### **Goal: Graduates will employ effective communication skills**

Learning Outcomes:

1. Students will utilize effective written communication.
2. Students will utilize effective oral communication.
3. Students will utilize effective non-verbal communication.

#### **Goal: Graduates will model leadership qualities**

Learning Outcomes:

1. Students will collaborate effectively with peers and the healthcare team.
2. Students will respond positively to constructive feedback.

Note: Program effectiveness data is available on the program's website

(<http://www.hacc.edu/ProgramsandCourses/Programs/HealthCareers/Radiologic-Technologist.cfm>) and the JRCERT website ([www.jrcert.org](http://www.jrcert.org)).

## **HEALTH CAREER CODE OF ETHICS**

In order to promote excellence in patient care, the HACC Health Career student, while in their program, or in their clinical uniform, are to:

- Treat patients with respect for the dignity, rights, and value of each individual.
- Provide nondiscriminatory and equitable treatment for all patients.
- Promote and strive to protect the health, safety, and rights of each patient.
- Maintain confidentiality of patient information following privacy regulations required by law.
- Not reference any person, place or affiliated agency associated with the clinical experience in or on any form of social media including, but not limited to, blogs, networking (Facebook, MySpace, etc.), Twitter, or video sharing (YouTube, etc.). Information displayed on these formats is considered public and could be identified as a HIPAA violation.
- Perform procedures or functions within his/her level of education in the profession.
- Refuse to participate in any illegal, unethical, or incompetent acts.
- Disclose any illegal, unethical, or incompetent acts of others to the proper authority.
- Avoid any conduct that creates a conflict of interest.
- Demonstrate professional behavior that reflects integrity and a positive image of the profession and the college.
- Follow all principles of ethical and professional behavior, as identified in the code of ethics of his/her chosen health career.

Students shall be denied admission to a program for breaches in any of the above code of ethics. Students who are in a clinical program and breach the code of ethics will be dismissed from the program and denied access to any other health career program at HACC.

Approved December 5, 2018

## **ARRT CODE OF ETHICS**

The Code of Ethics forms the first part of the *Standards of Ethics*. The Code of Ethics shall serve as a guide by which 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 race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
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 health care team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The radiologic technologist 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.
11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

## HEALTH CAREERS ALCOHOL AND OTHER DRUG (AOD) SCREENING PROCEDURE

### Statement of Philosophy

HACC is dedicated to the safety of patients, students and the community. In order to ensure students engaged in clinical education are drug- and alcohol-free, HACC requires preadmission and annual screening of all health career clinical students. Additionally, HACC requires screening for suspicion if a student at a clinical site exhibits behaviors indicating he/she is under the influence of drugs or alcohol.

### Guidelines for Pre-Admission/Annual Screening

- Uniformity of screening will be maintained within the program
- A 12-panel drug and alcohol **urine** screen will be used for **annual** screenings
- The vendor used will be at the program's discretion
- Failure to meet the program due dates for drug and alcohol screening may result in admission being denied or dismissal from the program immediately.
- If any of the results are positive, the student will be refused admission to the program or dismissed from the program immediately.
- Students testing positive will be referred to HACC Counseling Services. AOD Letter (attached) is a form letter that may be used for referring students to counseling services.

### Guidelines For Screening For Suspicion Of Use Of Drugs Or Alcohol While In The Clinical Setting

When a student is suspected of being under the influence of drugs or alcohol:

- The student will be removed from patient contact immediately.
- An objective second opinion should be obtained.
- A "Reasonable Suspicion Documentation Form" (attached) should be completed and signed by **two** individuals having supervisory responsibilities for the college prior to the testing. (i.e., clinical instructor, preceptor, director of clinical education, program director, staff technologist, etc.). Note: If a second opinion is not available, continue with procedure.
- The clinical instructor or HACC representative (preceptor) should notify the program director immediately by phone or email.
- The student will be required, per policy, to submit to drug and alcohol screening.
  - For students suspected of being under the influence of drugs, **urine** testing will be required.
  - For students suspected of being under the influence of alcohol, either **blood** or **breath** testing will be required.
- If screening can be done at the clinical site, the student should be escorted to the screening. If it must be done off-site, arrangements should be made as indicated below\*.
- At the completion of the screening, if results are positive or pending, the student must be escorted home, as indicated below\*.

- Additionally, the actions taken related to the incident should be documented by the instructor or HACC representative on a Student Conference Form (attached) and submitted to the program director for inclusion in the student's file.
- The instructor or HACC representative should not let the student leave the site or, depending on results, the screening, without escort (see \*Transportation of Students).

### **Additional Information**

- The student has the right to refuse any of these requirements. Refusal will result in denial of admission or dismissal from the program.
- Any student with a positive screen will be denied admission or dismissed from the program and referred for appropriate counseling.
- Any questions regarding the accuracy of drug or alcohol screening should be directed to the testing agency. HACC cannot be responsible for discrepancies in third party testing.
- All costs associated with drug and alcohol screenings are the responsibility of the student.

### **\*Transportation of Students suspected or documented as under the influence of drugs or alcohol:**

The college assumes the responsibility for making transportation arrangements to have students under suspicion transported to a testing facility if onsite testing is unavailable. The college also assumes the responsibility for making arrangements to have the student transported home if test results are positive or are not immediately available. This responsibility falls on the program director or his/her designee. Each program should have a published "chain of command" that should be followed whenever the program director is unavailable to act.

Options for transportation to consider are:

- With the student's permission, an individual the student has identified as an emergency contact will be notified and asked to transport the student. (Programs should maintain a record of contacts. Permission from the student to contact the individual in the case of an emergency should be obtained at the start of the program). An Emergency Contact Form (attached) may be used for this purpose.
- Make arrangements to have the student transported via taxicab (Local taxicab companies can be found listed in the Yellow Pages. Some companies will accept charge cards.)

## **Health Careers Medical Marijuana Policy**

Students using medical marijuana will not be eligible for clinical placement in any HACC clinical program, due to the current discrepancy between state and federal law regarding Drug Free Work Place Act and the MMA. Businesses who are not in compliance with federal law are at risk for criminal or civil charges; and additionally may find issue with eligibility for federal contracts and grants. Additionally, Pennsylvania's Medical Marijuana statute specifically provides that an employer does not have to accommodate an individual in a safety sensitive position if that person is under the influence of medical marijuana. Most positions involving direct patient care will be considered safety sensitive positions.

Students should also understand that under current Pennsylvania State Board law, many health career licensing boards require drug screening at the time of application for licensure. Similarly, most health care employers will perform routine drug screening as a condition for employment, as these positions involve direct patient care, and are considered safety sensitive positions. This discrepancy between federal and state law allows our clinical partners to deny student placement for clinical experiences and the State of Pennsylvania to deny licensure.

In order to be transparent with this entire process, we recognize our responsibility to fully inform students of HACC's policy regarding the use of medical marijuana. Due to current laws we cannot provide admission to the clinical phase in any of our Health Career Programs and students who have been admitted and are later to be found positive for medical marijuana will be removed.

Approved December 5, 2018

## **STUDENT RADIOGRAPHER'S PROFESSIONAL CONDUCT**

As members of the Allied Health team, it is of utmost importance that student radiographers conduct themselves professionally at all times. The following are some of the guidelines for proper conduct. However, it is impossible to list all situations that you may incur. Therefore, we must rely on your maturity in handling each occurrence with professionalism.

1. All students must assume a professional attitude and appearance at all times.
2. Patients must be addressed in a respectful manner according to the facility policy. Members of the staff must be addressed by their professional title and last name, i.e., Dr. Jones, while in the presence of patients.
3. All patients must be crosschecked for positive ID (wrist band, name, date of birth).
4. Students shall not at any time administer water, medication or treatment of any kind, except under the direction of a physician. If a patient suddenly becomes ill or injured, a physician must be notified immediately.
5. Students may not accept gratuities from patients.
6. Loud talk and shouting down hallways, whistling, clowning and horseplay, or any other demonstration of unprofessional conduct, will not be tolerated.
7. No food or drink may be taken into the patient care area.
8. Students may not discuss their private affairs in public areas while at the clinical facilities. This includes but is not limited to any area of the institution where patients are likely to hear the discussion; common areas where peers, staff, and/or other hospital employees gather; corridors, elevators, and grounds where the public and employees have general access. Private affairs must be discussed in secured private locations on personal non-clinical time.
9. Patients must not be left alone or unattended while in the radiology department.
10. Never argue with a patient.
11. Never let the patient read his or her own chart.
12. Never give your personal opinion concerning the patient's condition, diagnosis or physician. Always be careful in giving information to a patient, make certain it is information that you are permitted to give out.
13. Students may not post, text, or discuss in any way outside of the sanctioned classroom environment or D2L without oversight of an instructor anything that occurs at a clinical site about anything relating to a patient, staff member, student or faculty.
14. Ask all female patients of childbearing age the date of the first day of their last menstrual period (LMP) and if there is a chance that they may be pregnant. Write the LMP on the request or other documentation in compliance with the policies and procedures of the clinical site. You must explain to the patient your reason for the question.

15. Never be abusive to a patient or their family (physical or verbal), regardless of the treatment you receive from the patient.
16. The use of profane language anywhere in the clinical setting is forbidden.
17. Always talk with the patient in a professional manner and explain the procedures in simple terms that the patient can fully understand.
18. Be empathetic to the situations of the patient and their family regardless of their behavior. Keep in mind that people act differently when they are apprehensive or frightened.
19. Chewing gum is not permitted in the clinical setting.
20. Smoking is not permitted in the clinical setting. Most hospitals have a no smoking policy; please adhere to the individual smoking policies at your assigned site.
21. Spare time is to be utilized wisely. Reading of anything other than clinical-related material is not permitted, as is any form of needlework, sewing or other unrelated activities.
22. Loitering in halls, control areas and processing areas will not be tolerated.
23. The use of alcoholic beverages or drugs while on duty, reporting to class or clinical setting with alcohol on breath or under the influence of alcohol or drugs will subject the student to disciplinary action in accordance with the College's Drug and Alcohol Policy.
24. Always talk respectfully and professionally with fellow staff members, clinic personnel, patients and their family members (everyone you come in contact with).
25. Always be open and receptive to constructive feedback from staff and faculty.
26. The use of personal electronic devices (i.e. cell phones, smart watches, laptops, smart devices or computers, etc.) is not permitted in the clinical setting unless pre-authorized by clinical faculty.
27. Shielding of all patients regardless of age unless it would interfere with the quality/integrity of the study or clinical site policy.
28. Students must avoid fraternizing (Conducting social relationships as if you are friends) with employees/associates of the clinical affiliates or affiliates of the program in order to avoid conflicts of interest. This includes all social media connections. Communication including but not limited to texting, phone calls, and emails outside of normal business hours and/or unrelated to clinical education is not permitted.
29. Students are not permitted to participate in or perform exams that do not have a proper practitioner order or authorization.
30. Any unauthorized computer access to clinical electronic medical records or clinical staff email accounts is strictly forbidden.

## **PROGRAM POLICIES & PROCEDURES**

### **Admission to the Clinical Phase**

Program Policy: Students enrolled in the college will be considered for admission to the clinical phase of the program after all preliminary requirements have been satisfied and a completed application has been submitted to the program director.

Procedure:

1. Students desiring to be considered for the next clinical class must submit an application to the program director by the published date of the year preceding the start date for the next clinical class.
2. All required developmental coursework (i.e. Biology 111, Math 051, Chemistry 100, English 051, placement test scores, if applicable) must be completed prior to the end of the preceding summer semester.
3. A minimum program of a 2.5 GPA is required for consideration.
4. Students are required to attend a mandatory information session during the spring semester prior to the application deadline.
  - Criteria for selection is based on program GPA and points earned from the program point scale as of the date of application and grades earned.
  - The point scale is available on the Health Careers Web Site under admissions criteria.  
(<http://www.hacc.edu/ProgramsandCourses/Programs/HealthCareers/Radiologic-Technologist.cfm>)
5. Students are required to sit for the Health Occupation Aptitude Examination as part of the application to the program. Points are awarded toward admission based on the student's percentile ranking. The test is offered at various campuses of HACC. More information can be found at <http://www.hacc.edu/ProgramsandCourses/Programs/HealthCareers/Radiologic-Technologist.cfm>
6. The Radiologic Technology Review Committee will review all eligible applicants' transcripts, and score the applicants based on the published point system selection criteria. The applicants are ranked based on the points earned.
7. Students with 75 points or higher are eligible to be considered for initial acceptance. Students with less than 75 points are eligible to be considered for an alternate position and should still apply. Applicants who are offered alternate status will be admitted into the pre-clinical courses (RADT 102 & 111) and based on their ranking in the RADT 102 course, may be admitted into the clinical program depending on available seats. The Radiologic Technology Admissions committee evaluates applicant rankings and applications and determines the total number of candidates accepted based on the number of clinical spaces available.

### **Withdrawal from the Program**

Program Policy: Students wishing to withdraw from the program for any reason must submit a letter of resignation. This will become part of the students' permanent record. Students failing to submit a letter of resignation will be ineligible for readmission to the program.

Students who withdraw from the program may be eligible for reapplication (see the policy for reapplication).

### **Withdrawn from the Program**

Program Policy: Students who are withdrawn from the program may be eligible to re-apply to the program (see policy regarding reapplication).

Note: Students who are unable to return within 12 months must retake and pass all program classes.

### **Withdrawn for Unprofessional Conduct or Unethical Behavior**

Program Policy: Students who are withdrawn from the program through failure of a clinical course due to unprofessional conduct are not eligible to apply for readmission to the program.

### **Leave of Absence**

Program Policy: Due to the nature of the program, leaves of absences must be tailored to the individual needs of the students. If a leave of absence is granted, the student will be withdrawn and will be eligible to return for up to 12 months after their last completed course, provided space is available. Students who are unable to return within 12 months must reapply to the program, as well as retake and pass all program classes.

Students on a LOA must demonstrate that they have maintained knowledge and competency through testing (written and skills) of previously taken courses.

Students on LOA are required to notify the program in writing of their intent to return at the start of the semester prior to their planned return (i.e. if you are returning in the fall, you must notify the program in writing at the start of the summer semester)

Procedure: Students must submit, in writing, a request for a leave of absence. This request must include the length and extenuating reason requiring the request for the leave. The request will be reviewed by the Education Advisory Committee for approval or disapproval. Students re-entering the program after a leave of absence will be required to have maintained clinical competency. Continued clinical competency is assessed through examination by the Assistant Clinical Instructor/Adjunct Clinical Faculty and/or Directors of Clinical Education. Students failing to prove that they maintained the prior competency/knowledge required must repeat and pass courses for which they did not demonstrate that they maintained competency and knowledge.

### **Returning Property after Withdrawal from the Program**

Program Policy: Students who have withdrawn from the program for any reason or length of time are required to return Program and Clinical Affiliate property within 15 days.

This includes but is not limited to:

- Dosimeter badge
- Badge Buddy identification tag
- Clinical site provided identification
- Clinical site provided markers
- Laminated inserts from the clinical notebook (Forbidden Fruits & 8 Indicators of Success)
- Procedures log book(s)
- Any items/tools lent to the student by the program and/or clinical site such as phantoms, QC test tools, calculators, books and other resources

Property may be returned to the Lancaster Campus of HACC RE207 or returned to any HACC campus and placed in the interoffice mail system to be returned to the program (Attn: Rad Tech RE 207). Items may not be mailed due to the potential radiation exposure of the dosimeter by the US postal system.

### **Readmission to the Program**

Students who have not been withdrawn for unprofessional conduct or unethical behavior will be eligible to return to the program one additional time within 12 months. Returning students must demonstrate that they have maintained competency in previously tested clinical exams and demonstrate that they have maintained prerequisite knowledge and skills. At a minimum, returning students will be required to audit the previous clinical course to demonstrate competency. Prerequisite knowledge and skills may be demonstrated through testing and/or auditing or repeating and passing previously taken coursework based on faculty recommendations.

Students who are unable to return within 12 months must reapply and be reaccepted to the clinical program, and retake and pass all program classes.

Students having 2 unsuccessful attempts in the clinical phase or RADT courses must submit in writing a request for the Readmissions Committee to review their application. Included in this application is the circumstances that constitute the reason(s) for their previous two unsuccessful attempts in the program. For example, progress was hindered because the student became very ill or was severely injured or experienced the death of a close relative.

If applying for a third attempt, the student must provide a copy of any documentation supporting their claim. It must also include a narrative explaining the measures they are going to take to be successful if readmitted.

The committee will consist of the radiologic technology Program Director, a radiologic technology faculty member, a HACC advisor, a faculty member outside of Health Careers and a faculty member within Health Careers (Non-Rad Tech).

## **Breaks**

Program Policy: The academic calendar identifies breaks during and between semesters.

## **Attendance**

Program Policy: Students are required to participate in all assigned classes and clinical assignments unless excused by the Adjunct Clinical Faculty, Director(s) of Clinical Education, or Program Director for reasons of documented illness or emergency. Students are required to be present for classroom hours and clinical rotation hours identified in the semester schedules.

Students who have responsibilities outside the program **WILL NOT** be given any special consideration as to the attendance requirements and are required to participate in all aspects of the program.

## **Clinical and Class Hours**

Students are scheduled for clinical or class between 7:00 AM and 5:30 PM semesters 1 through 5 and also between 1:00 PM and 9:30 PM for 2 weeks in semesters 5 and 6. Students are encouraged not to schedule outside commitments between those hours. The schedule varies each semester and at each clinical facility. The program does not offer any guarantee for a specific schedule within these time frames. If students schedule outside obligations during these time frames and there is a class or clinical conflict, it is the students' responsibility to make adjustments to their personal schedule. The program cannot adjust clinical or classroom schedules to accommodate personal obligations. This includes, but is not limited to, employment responsibilities.

Note: The noted hours do not include travel time to and from the clinical site or campus.

## **Absences**

Program Policy: Students are required to be present for all scheduled classes, labs and clinical activities. In the event that a student is unable to attend these scheduled activities, the student must advise the Director of Clinical Education, Adjunct Clinical Faculty and Assistant Clinical Instructor or classroom instructor of their absence by telephone, personal discussion, or as outlined in course syllabi. See course syllabus for specific policies regarding absences. Students with excessive absences may request a leave of absence. See Leave of Absence policy.

## **Funeral Leave**

Program Policy: In the event of a death in the immediate family (parent, spouse, child, sibling, parent-in-law, brother/sister-in-law, grandparent, legal guardian or significant other, or grandchild) the student will be granted up to three (3) (class/clinical) days leave immediately following the death or the two calendar days following the death plus the day of the funeral. In the event of a death in the extended family (niece, nephew, aunt, uncle, cousin, great-grandparent, or great grandchild), the student will be granted one (1) (class/clinical) day of leave immediately following the death or the one calendar day of the funeral. Funeral leave will only be granted upon notifying the Director of Clinical Education in writing prior to time off, and providing documentation of the death (obituary or death certificate) when the students returns.

### **Classroom Breaks**

While in the classroom, breaks will be scheduled at the discretion of the individual instructor.

The student will be responsible for the cost of their meals.

### **Class Days**

Students may be asked to attend additional instruction, practice sessions, testing or educational activities on class days. Students will be notified in advance and the required hours on campus outside of class and clinic will not exceed 12 hours per semester.

### **Inclement Weather Health Careers Policy**

#### **General Procedure**

In the event the college or campus where your course originates closes due to a snowstorm or other inclement weather, all health career students who are scheduled for class or a clinical experience that day will not report to class or clinical.

In the event of inclement weather and the college remains open, all students are expected to make every reasonable effort to attend class and clinical. However, **undue risk when traveling is to be avoided**. Students who believe it is not safe to travel should notify the clinical affiliate, Director of Clinical Education, and Adjunct Clinical Faculty of their absence per the course syllabus and/or Clinical Education Guidebook. Students are responsible for making up missed assignments or the clinical day per the course syllabus and/or student Clinical Education Guidebook.

In the event that the college announces a delayed opening:

- Students who are scheduled for classes on campus must follow the college delayed opening schedule per course syllabus.
- Students who are scheduled for clinical start time prior to 10:00AM must report at 10:00 AM. All other students report at the assigned time.
- Students scheduled for off-shift rotations must report as scheduled unless the Lancaster campus closes.

Program Director/Director of Clinical Education reserves the right to delay and/or cancel a clinical rotation even if the campus remains open.

*\*Students will be given the appropriate lunch break when operating on a delayed schedule.*

### **Weather Emergency Announcements**

Students scheduled to attend class on campus:

- Subscribe to E2Campus for the campus where classes originate and check emails/text messages for notices of cancellation/delay.
- Listen to designated radio/TV stations or refer to the HACC website at [www.hacc.edu](http://www.hacc.edu)

Students scheduled to attend clinical:

- Subscribe to E2Campus for the campus where classes originate and check emails/text messages for notices of cancellation/delay.

- Listen to designated radio/TV stations or refer to the HACC website at [www.hacc.edu](http://www.hacc.edu).
- Follow program procedure for clinical cancellation or delay as stated in the course syllabus and/or student clinical handbook. The Program will utilize a communication method (i.e. phone chain, recorded message on program voice mail, email or text message notification).
- **Students are responsible for maintaining accuracy of their contact information with the program.**

### **Holidays**

Program Policy: Radiography students are not assigned to class or clinical education on holidays observed by the college. The academic calendar identifies these holidays.

Individuals who observe religious holidays that are not part of the academic calendar need to make arrangements in advance with the instructor or Director(s) of Clinical Education for time off. Students may be required to make up the time at the discretion of the Program Director and/or Director of Clinical Education.

### **Authority Command**

Program Policy: Whenever the Program Director is not available, the following persons, in order, will assume that responsibility, and will have the right to make any decisions they deem necessary.

1. Director(s) of Clinical Education
2. Department Chair of Health & Public Service
3. Dean of Academic Affairs, Lancaster Campus

### **E-mail Communications**

#### **From Faculty to Student**

Program Policy: Radiography program faculty and staff will use HAWKmail for all e-mail communications with students. All registered students are given a HAWKmail e-mail account by the college.

Procedure: Students must check their e-mail account regularly and at a minimum every class or clinical day. It is expected that students read their emails and respond to program faculty and/or representatives within 48 hours. Students may forward their HAWKmail account to a personal e-mail account or may access their HAWKmail from the HACC Website ([www.hacc.edu](http://www.hacc.edu)).

#### **To Faculty from Student**

Program Policy: Radiography students wishing to send an e-mail to faculty must do so directly to the faculty's HACC e-mail.

Procedure: HACC e-mail addresses for faculty can be found on the HACC Website: Current students>College Services>Faculty & Staff Directory.

## **Radiation Safety Program Policies and Procedures (Reviewed 11/2021)**

*In compliance with the NRC Title 10 Code of Federal Regulations part 20.1502, the program shall monitor exposure to radiation and radioactive materials of faculty and students likely to receive in 1 year, from sources external to the body, a dose in excess of 10 percent (500 mrem) of the annual dose limits for adult radiation workers (5 rems). This includes all students attending clinical education as part of the clinical phase of the program, but does not include any pre-clinical students who would receive considerably less than this amount during their limited observational rotations in the imaging department.*

### **Disciplinary Actions**

Any infraction of the radiation safety program policies and procedures will result in disciplinary action, to be determined according to the severity of the infraction by the program officials. Minor infractions will, at a minimum, result in a verbal warning. Any infraction that results in the unnecessary radiation of a person (i.e. wrong patient or wrong part) will be considered a severe infraction and may result in suspension, probation or dismissal from the program.

### **General Procedures**

1. If the student is unlikely to exceed 500 mrem per year, a personal dosimeter is not required.
2. Students whose radiation exposure is not monitored through a personal dosimeter will be classified as part of the general population, whose annual dose limit is 100 mrem.
3. If a faculty member or a student in the clinical phase of the program is pregnant and declares her pregnancy in writing, the College will acquire a second dosimeter to be worn at the waist level. When lead apparel is appropriate, the second device will be worn under the lead apparel at waist level.
4. All students will receive basic radiation safety instruction prior to participation in clinical education.
5. Students are not permitted to hold patients or image receptors during any radiographic exposures.
6. Careful collimation must be utilized to restrict the x-ray beam to the size of the image receptor or area of interest, whichever is smaller.
7. The student must utilize the appropriate operator protection devices provided. (e.g. lead aprons, lead shields, etc.)
8. Appropriate shielding must be utilized on all patients except in cases in which this would interfere with the diagnostic quality of the image or clinical site policy prohibits it.
9. The student must adhere to any special radiation safety instructions relating to a specific machine or procedure.
10. Any unusual occurrence or apparent malfunction of the x-ray equipment, which may involve increased exposure to radiation, must be reported to the facility

supervisor and College faculty.

11. The student will NEVER be in the direct path of the x-ray beam. Students must always stand behind the control booth during any exposure.
12. Students are not to serve as “patients” for test exposures.
13. Use of ionizing radiation on human subjects may only be performed with an appropriately verified practitioner order.
14. Protective lead shielding must be worn during all fluoroscopic and OR procedures.
15. The student operator of a mobile x-ray unit must stand at least six (6) feet from the patient and the useful beam. In addition, the student operator must always wear protective lead apparel when directly involved with taking or assisting with taking the exposure. The student operator must reasonably protect individuals in the proximity of the x-ray beam through lead apparel or distance.
16. Patients must be asked prior to imaging if they have insulin pumps, continuous glucose monitors, and/or medication delivery pods. These medical devices must be removed prior to being exposed to an x-ray beam according to clinical site policy.

### **Energized X-ray Room Procedures**

1. The College has one laboratory room and one mobile machine with fully energized x-ray equipment. The energized lab shall comply with the pertinent regulatory requirements of the PA CODE 25, Environmental Protection, Chapters 219, 220 and 221.
2. Posted outside the entrance of the energized lab is a red light “caution x-ray” sign which is energized when the x-ray machines are energized. The lab instructor is responsible to inspect the light signs and make sure they are in proper working order each semester before using the labs. The lab instructor is also responsible to maintain the posted signs and make sure they have not been removed.
3. Students will not be allowed in the energized x-ray lab unless supervised by a faculty member.
4. Students will not be permitted to participate without a dosimeter in lab or clinical rotations at any time when there is potential for ionizing radiation to be used.
5. The energized x-ray laboratory equipment is on an annual routine preventative maintenance program. Additionally, repairs of the x-ray equipment are made as deemed necessary. The lab instructor or lab assistant will schedule the preventative maintenance on the energized and non-energized x-ray equipment annually.

## **ALARA Program & Reporting Program Policies**

The intent of the ALARA (As Low as Reasonably Achievable) program is to maintain exposure to radiation at levels that are as low as reasonably achievable. This radiation safety program is based on the premise that radiation exposure is not risk free. Therefore, exposure should be kept to levels below the limits permitted by the State of Pennsylvania, The Nuclear Regulatory Commission, and other regulation agencies. ALARA is critical to our radiation protection philosophy. The dose limits for faculty and students in the clinical phase are:

### **Effective Dose Limits (Threshold Dose)**

1. Occupational whole body deep dose 5,000 mrem/year; 1,250 mrem/quarter.
2. **ALARA whole body dose limit:** 500 mrem/year; 125 mrem/quarter
3. **ALARA's Level 1 investigation limit is:** Whole body deep dose 125 mrem/quarter to 374 mrem/quarter
4. **ALARA's Level 2 investigation limit is:** Whole body deep dose > 375 mrem/quarter and to 499 mrem/quarter
5. **ALARA's Level 3 investigation limit is: Whole body is greater than 500 mrem/quarter.**
6. **Declared pregnancy level:** Fetal dosimeter limit is 500 mrem/per gestation period or 50 mrem/month

## **Personal Radiation Monitoring Program Policies**

It is the policy of the HACC Radiologic Technology Program to evaluate exposure to personnel and students on a quarterly and accumulative basis.

### **Materials and Methods**

1. All students in the clinical phase of the program will be issued a personal dosimeter.
2. The dosimeter will be worn at all times when ionizing radiation is being used in the energized lab and at the assigned clinical site.
3. The dosimeter shall be positioned on the front of the body at the collar level; if lead apparel is worn, the device shall be positioned on the collar outside of the lead apparel.
4. All dosimeters are to be exchanged quarterly with program officials according to the assigned due date, which will coincide with scheduled didactic classes.
5. If a student loses or damages his/her dosimeter device, the director of clinical education (clinical coordinator) or program director will be contacted prior to the students reporting to assigned clinical site.

### **Procedures**

1. Every 3 months dosimeters are returned to the program and sent for processing to an approved NVLAP (National Voluntary Laboratory Accreditation Program) facility.
2. When the dosimeter reports are received, they will be reviewed by a Director of Clinical Education (Clinical Coordinator) and/or the Program Director.
3. All readings will be monitored for levels exceeding the effective dose limits.

4. If any faculty or student reading exceeds the level one effective dose limit, a Director of Clinical Education (Clinical Coordinator) or Program Director will meet with the faculty member or student to determine possible reasons for the exceeded level and review radiation safety practices. The student conference form will be used to document the advising session of the student.
5. Additionally, if any faculty or student reading exceeds the level two or the fetal dose limit, the Program Director or designee will investigate the causes for the excessive dose level. The objective of the investigation will be to learn why the faculty member or student received the excessive dose and to determine what type of corrective action may be needed. A written report of findings with recommendations will be provided. Based on the written report, corrective actions will be determined and documented on the student conference form and letter to the campus vice president for faculty. Additionally, if any faculty's or student's reading exceeds 1250 mrem/quarter or 5000 mrem/year, the investigation must also include notification to the Pennsylvania Department of Environmental Protection (DEP) Radiation Control Division.
6. Copies of all notices, investigations, etc. will be maintained in the ALARA binder and in the student's, individual advising file or faculty employee file.

### **Radiation Monitoring Reports**

1. Social Security numbers and birth dates are removed from the reports.
2. The exposure reports will be forwarded by the Program Director or designee to the respective Director of Clinical Education (Clinical Coordinator). The Director of Clinical Education (Clinical Coordinator) will arrange for students to review and sign the report and return them to the Program Director or designee.
3. The exposure reports will be maintained in the Program files.
4. A copy of the termination report will be provided to the student upon termination or graduation.

### **Energized Laboratory - Irradiation of Human Subjects**

Program Policy: Irradiation of human subjects is strictly forbidden. Any student or employee who intentionally irradiates a human subject with or without the subject's permission will be subject to disciplinary actions.

Procedure: Only authorized employees will have keys to the energized laboratory. Students are to be supervised by an instructor at all times while in the energized lab.

### **Student Pregnancy**

Program Policy: Students, who become pregnant while enrolled in the Radiologic Technology Program, have the option as to whether or not to inform the Program. Students electing to inform the Program must notify the Program Director in writing. In the absence of any voluntary disclosure of pregnancy, students are not considered to be pregnant. Students who wish to withdraw their declination of pregnancy may do so anytime by notifying the Director in writing.

Upon confirmation of pregnancy from a healthcare provider, students have the following options.

1. Provided the student is in good academic standing, the student can be granted an immediate leave of absence for up to one year and will be eligible for re-admission the following year provided an opening exists. In the event an opening does not exist, the student will be eligible for re-admission the following year.
2. If the student wishes to remain in the program, a conference will be held with the program director, and/or a director of clinical education to discuss possible health risks of exposure to radiation during pregnancy. At that time the student will continue the educational program without modification.
  - a. Upon completion of the initial visit with their healthcare provider, the student must be cleared to participate in clinical/didactic education.
  - b. The Program Director or DCE will review the radiation dosimetry report quarterly.
  - c. The student is expected to make up any course work or clinical rotations missed due to pregnancy.
  - d. All clinical objectives, clinical competencies and didactic courses must be completed to be eligible for graduation.

### **Lab Rules**

1. Be on time and ready to learn – sign in using initials
2. Dress appropriately for lab – HACCC uniform, appropriate shoes
3. Have all necessary items – Markers, Dosimetry badge, pen, RadNotes ® pocket guide
4. Come prepared. Review procedural videos as assigned prior to reporting to lab.
5. Be respectful of instructor and other students - No foul language or inappropriate comments will be tolerated
6. Pay attention and follow directions the first time they are given – some information is only given one time
7. Please clean up the lab before you leave – return any items to the proper place and take ALL of your belongings with you
8. Do not fold lead shields
9. Students are not permitted in the energized lab without supervision – If the instructor leaves the lab for any reason, students will be required to leave as well – NO exceptions!

A skills check and/or comprehensive lab skills check is a lab test assessing the skills necessary to perform an exam(s). When in the role of “patient” during a skills test, assisting the student whom is in the role of “technologist” and is being tested is considered academic dishonesty and is subject to the disciplinary actions according to the syllabus. The student assisting will receive a score of zero for their skills test. This includes assisting in a manner that is not consistent with what a typical patient would do such as correcting positioning or removing artifacts without being instructed to do so by the “technologist”.

### **Magnetic Resonance Imaging (MRI) and Ferromagnetic Safety Policy**

Students are advised that although the majority of their observation and clinical experience will be in general diagnostic radiology, there may be opportunity to observe, tour, or complete a special rotation in the Magnetic Resonance Imaging (MRI) department. In order to ensure student safety, and the safety of others in the department, it is important that students respect the following rules at all times while in the MRI environment:

1. Each student will be screened upon acceptance to the HACC Radiologic Technology program. The screening form is reviewed by the Program Director or designated individual and kept on file. Students are required to update this form if there are any changes. I.e., after a surgery.
2. Each facility's MRI clinical and safety policies and screening requirements must be followed and/or completed prior to observing or entering the MRI suite.
3. Do not enter the MRI suite (Zones 3 and 4) unless **cleared** and **accompanied** by an MRI technologist.
4. Assume the magnet is always ON.
5. Carrying ferromagnetic items or equipment into the MRI suite is strictly prohibited because these items can become projectiles, causing serious injury or death and/or equipment failure. These items include, but are not limited to, most metallic items such as: oxygen tanks, wheelchairs, carts, monitors, IV poles, laundry hampers, tools, and furniture. MRI-compliant medical equipment is available for use in the MRI department; do not borrow or use this equipment for general use in other areas of the medical imaging department.
6. Personal ferromagnetic items must be removed prior to entering the MRI room. These include the following: Purse, wallet, money clip, credit cards or other cards with magnetic strips, electronic devices such as beepers or cell phones, hearing aids, metallic jewelry (including all piercings) and watches, pens, paper clips, keys, nail clippers, coins, pocket knives, hair barrettes, hairpins, shoes, belt buckles, and safety pins.
7. If applicable, disclose or ask about all known indwelling metallic device(s) or fragment(s) to the supervising technologist or program faculty prior to entering an MRI scan room to prevent internal injury as described below.
8. In addition to the personal items listed, students are advised that any metallic implants, bullets, shrapnel, or similar metallic fragment in the body pose a potential health risk in the MRI suite because they could change position in response to the magnetic field, possibly causing injury. In addition, the magnetic field of the scanner can damage an external hearing aid or cause a heart pacemaker to malfunction.

Examples of items that may create a health hazard or other problems in the MRI examination room include:

- Cardiac pacemaker, wires, heart valve(s) or implanted cardioverter defibrillator (ICD)
- Neurostimulator system

- Aneurysm clip(s)
- Metallic implant(s) or prostheses
- Implanted drug infusion device
- History of welding, grinding or metal injuries of or near the eye
- Shrapnel, bullet(s), BB's, or pellets
- Permanent cosmetics or tattoos (if being scanned)
- Dentures/teeth with magnetic keepers
- Eye, ear/cochlear, or other implants
- Medication patches that contain metal foil (i.e., transdermal patch)

The presence of in-dwelling or external ferromagnetic devices or objects does not disqualify a student from entering the radiography program. However, accepted students will be required to complete an MRI Safety Clearance Form as part of the pre-clinical paperwork to verify that it is either: 1) Safe for him or her to enter the scan room's magnetic field, or 2) Ensure that a radiography student with any indwelling or external ferromagnetic devices or objects is not inadvertently placed at risk during their clinical rotations while in the program. Prior to a special rotation in MRI, each facility may require additional medical screening (such as a radiograph of the orbits), which may require a physician's order. For more information regarding MRI Safety, please refer to the American College of Radiology's MR Safety Guidelines available at:

<https://www.acr.org/Quality-Safety/Radiology-Safety/MR-Safety>

### **Discipline & Conduct**

**Program Policy:** Failure to follow rules of conduct and regulations of the College, Program, and/or clinical sites constitutes grounds for warning, probation, suspension, and/or clinical failure. Written disciplinary action must be signed by the student and one or more of the following: The Program Director (PD), Director of Clinical Education (DCE), or Adjunct Clinical Faculty (ACF). This becomes part of the student's personal file and permanent record.

**Procedure:** Students will be advised with respect to appropriate conduct. When necessary, the PD, DCE or ACF will administer disciplinary action for infractions of rules. Disciplinary action will reflect the seriousness of the misconduct. It may consist of verbal or written warnings, probation, suspension, or clinical failure at the discretion of the program director, director of clinical education, or adjunct clinical faculty.

### **Misconduct**

Examples include, but are not limited to the following:

1. Serious infractions of civil or institutional regulations that threaten personal safety or property of individuals.
2. Abuse, mistreatment or neglect of patients.
3. Theft or possession of clinical site equipment or personal belongings of the patients, employees or fellow students without the consent of the owner.
4. Alcohol detection or use upon reporting for class or clinical assignment.

5. Drug detection or use upon reporting for class or clinical assignment.
6. Falsification of school application, transcript of grades, clinical records, or other documents.
7. Irradiation of a human subject while in the energized laboratory.
8. Insubordinate behavior or actions toward any supervising personnel.
9. Breach of patient confidentiality or patient information. Breach of confidentiality of clinical site or employee information. Attempting to access confidential records of patients, clinical site employees, or fellow students without a legitimate “need to know” for the performance of medical procedures.
10. Failure to comply with the student supervision policies and/or repeat radiograph policy.
11. Sleeping on duty
12. Unauthorized inquiry into files, desks and/or administrative material or release of such information.
13. The use of cell phones other than during breaks or at the request of program faculty.
14. Sharing or posting information about or relating to a clinical facility or experience on any public forum including social media (Facebook, Twitter, Instagram, blogs, etc.).
15. Violation of safety rules
16. Willful destruction, misuse or defacing of clinical site property. This includes tampering with the clinical site computer system
17. Violation of the Health Careers or ASRT/ARRT code of ethics.
18. Inconsiderate treatment of patients, employees or fellow students.
19. Gambling on duty.
20. Excessive absences which exceed the allowed amount without documentation of extenuating circumstances.
21. Repeat tardiness or abuse of sick leave privileges.
22. Accepting tips/gratuities from patients.
23. Smoking in areas where smoking is not permitted.
24. Willful failure to perform duties of a student radiologic technologist.
25. Leaving the clinical site premises without permission.
26. Unprofessional conduct or unprofessional discourse at the clinical site.
27. Making disparaging remarks about the program and affiliated institutions or persons is detrimental to student progress and will not be tolerated. Legitimate concerns and issues must be addressed through the proper channels.
28. Taking photographs in the clinical setting without prior written approval.

29. When participating in the role of the “patient” and assisting in a manner that is not consistent with typical patient behavior (i.e. correcting positioning, removing artifacts, etc.) without being directed to do so. In testing situations, this is considered academic dishonesty.

**Student Conference Forms**

Program Policy: Student conference forms will be used for any of the reasons mentioned below. Documentation of conferences or formal communication between students and faculty or Assistant Clinical Instructors for any reason.

Examples include:

1. Advising
2. Reviewing students’ progress
3. Remediation plans
4. Notification of policy violations
5. Notification of Program actions

Procedure: Students will meet with faculty to discuss the reason of the conference and will be given an opportunity to respond. A copy of the signed conference form will be provided to the student and another copy will be kept in the student’s file. Students must sign the conference form to indicate that they have been made aware of the report. Students who feel they have been treated unfairly may follow the procedures described in the Students Grievances and Appeal of Academic Decisions of this handbook.

**Academic Didactic and Clinical Grading Policies**

Program Policy: Grades will be recorded as a numerical average, point earned or letter grade equivalent on graded assignments.

The didactic grading scale for the radiologic technology program is as follows:

<u>Percentage Range</u>	<u>Letter Grade</u>	<u>Quality Point Equivalent</u>
100-93	A	4.0
92-83	B	3.0
82-75	C	2.0
74-70	D	1.0
<69	F	0.0

The clinical grading scale for the radiologic technology program is as follows:

<u>Percentage Range</u>	<u>Letter Grade</u>	<u>Quality Point Equivalent</u>
100-95	A	4.0
94-90	B	3.0
89-85	C	2.0
84-70	D	1.0
69-0	F	0.0

At the end of each semester the Program Director reviews student grades. Students enrolled in the program are expected to maintain a minimum cumulative grade point average (GPA) of 2.0 to be considered in good standing and eligible to advance to the next semester

**Note: Students MUST earn a C or higher in all radiologic technology courses (RADT) to continue in the program.**

### **Failing Grades**

Program Policy: Failure of a major course will result in withdrawal from the Radiologic Technology Program.

Procedure: Students failing a major course will be withdrawn from the program. Students may be eligible to reapply for admission. For more information about readmission see the policies titled “Withdrawn from the Program” and “Readmission to the Program” previously outlined in this handbook.

Reapplication into the program does not guarantee acceptance. (See: Readmission to the Program)

Students who are unable to return within 12 months must retake and pass all program classes.

### **Major Courses**

- RADT 102 Introduction to Radiologic Technology
- RADT 100 Introduction to Radiographic Procedures
- RADT 105 Radiation Protection & Biology
- RADT 106 Radiologic Technology Clinical - Introduction
- RADT 107 Radiographic Procedures I
- RADT 108 Radiation Characteristics & Production
- RADT 109 Radiologic Technology Clinical I
- RADT 111 Intro to Radiation Sciences
- RADT 201 Radiographic Procedures II
- RADT 202 Imaging Equipment
- RADT 203 Radiologic Technology Clinical II
- RADT 205 Radiographic Pathology
- RADT 207 Radiologic Technology Clinical III
- RADT 208 Imaging & Processing
- RADT 209 Image Analysis
- RADT 210 Basic Principles and Procedures of Computed Tomography
- RADT 211 Radiologic Technology Clinical IV
- RADT 212 Radiologic Technology Seminar

### **Academic Dishonesty**

The academic dishonesty shared governance policy (SGP 506) regarding disciplinary action for academic dishonesty can be found at the following link:

<https://drive.google.com/drive/u/0/folders/15TwUwBWlwOh-AG8DclOjnS1s8FcOHtxr>

### **Student Grievances and Appeal of Academic Decisions**

The following administrating procedures related to students' grievances and appeals of academic procedures can be found on myHACC under the Student tab, in the third column at the bottom, under "Select Main Category" select procedures. Under "Select Sub Category", Select All – then hit search documents. Procedures are all listed in numerical order.

- SGP 608 (AP 663): Appeal of Academic Decisions,
- SGP 500 (AP 513): Financial Aid Satisfactory Academic Progress,
- SGP 505 (AP 592): Student Disciplinary Action,
- SGP 401 or SGP 601 (AP 641): Refund Procedure - Credit and Non-Credit Courses
- SGP 825 (AP 875): Harassment,
- SGP 828 (AP 879): Bullying

### **Due Process for Appealing Academic Decisions (Academic/Clinical Grades)**

Policy: Students have the right to appeal academic decisions that they believe are inaccurate, misleading or violates the privacy rights of the student.

Procedure: The procedure for appealing academic decisions can be found in the Shared Governance Policy 608 on myHACC.

### **Students Complaints**

When students have complaints outside of those that require invoking the grievance procedure, the students should perform the following:

1. Submit a written complaint to the Program Director
2. The Program Director will make arrangements to meet with the student within 5 days in an attempt to come to a resolution.
3. If the student is not satisfied with the proposed resolution, the student may meet with the Campus Dean.

### **Student Services**

The college has many services available to students to help them achieve success and reach their educational goals. Detailed information about non-financial student services can be found under the "current students" tab on the HACC home page or directly at <http://www.hacc.edu/Students/index.cfm>. Information about financial aid services can be found by clicking on "Pay for School" at the top of the HACC homepage then choosing "Getting started with Financial Aid" or directly at <http://www.hacc.edu/Paying/index.cfm>.

The program has highlighted a few student services below, which are frequently used by students in the program and prove to be very helpful.

### **Learning Center**

Every campus has a learning center with services to assist students in their academic achievements. The Program connects with the Lancaster Campus Learning Center regularly and encourages students to use their services throughout the program. They offer tutoring, academic coaching, and online how to videos.

The direct link is <https://libguides.hacc.edu/learningcommons/tutoring>

The clinical phase of the program is unique and students often experience barriers that hinder their success. Therefore, all Radiologic Technology clinical students are strongly encouraged to visit the Lancaster Tutoring Center, talk with them about the services they offer, and consider connecting with an academic coach. The academic coach will assist students in developing action steps and utilizing tools to help overcome barriers to their academic success. This is very important in a clinical allied health program.

### **Rad Tech Academic Mentoring**

Students identified as being at risk in didactic or clinical courses will be assigned a mentor to provide the student guidance and recommendations for utilizing HACC provided resources, tutoring, study tools, etc. Students being mentored will be asked to set goals and determine actions to meet those goals throughout the semester.

### **Student Counseling Services**

HACC has entered into a contract with Mazzitti & Sullivan EAP Services to provide mental health counseling services to our students. Mazzitti & Sullivan has over 3,000 providers nationwide who are able to assist individuals in need of mental health or drug/alcohol counseling. Sessions may be face-to-face, by telephone, or through a secure online platform. Interested students are encouraged to contact Mazzitti & Sullivan EAP Services at 1-800-543-5080 or through its website, [www.mseap.com](http://www.mseap.com)

### **Student Access Services**

The Student Access Services (formerly Disability Services) coordinates accommodations for students.

Student Access Services has multiple purposes.

- Help students achieve educational objectives
- Offer support services
- Provide academic accommodations
- Promote a supportive learning environment
- Promote student independence, program accessibility and a psychologically-supportive environment

The direct link is <http://www.hacc.edu/Students/DisabilityServices/index.cfm>

Students who have been granted accommodations through Student Access Services will need to contact SAS again at the beginning of their 5th semester in the Rad Tech Program. This communication is necessary in order to start the accommodation process needed for the ARRT National Registry exam.

### **Student Feedback and Evaluations**

Program Policy: Feedback regarding the students' competence and performance is conducted throughout the radiography program.

Procedure: Students will receive and participate in ongoing clinical feedback and evaluation by the Assistant Clinical Instructor, clinical staff, Adjunct Clinical Faculty, and Director(s) of Clinical Education while in the clinical area. A final clinical progress report will be written by the Adjunct Clinical Faculty and Director(s) of Clinical Education at the end of each semester. The students will review the final clinical progress report at the end of each semester. This evaluation will be available to the students in the CMS and become part of their permanent file.

### **Open Practice Labs**

Students are encouraged to sign up for open lab sessions to practice positioning skills, equipment usage, etc. The purposes of these practice labs are to give the students the opportunity to practice radiographic procedures or other related laboratory skills. A sign-up sheet is available electronically and will be sent via email. Time slots are filled on a "first come first serve" basis, however students need to be considerate of others when signing up for open labs.

### **Transportation**

Program Policy & Procedure: Radiography students are responsible for arranging and paying for transportation to and from all classes and clinical assignments.

### **Eligibility for ARRT Registry Examination**

Program Policy: Upon satisfactory completion of the program, the radiography students may apply for eligibility to participate in the American Registry of Radiologic Technologists Certification Examination.

Procedure:

- Successful completion of the program, which includes all didactic and clinical portions.
- Endorsement from the Program Director is required before eligibility can be completed.
- Poor ethical behavior, as previously documented, can be reason for non-eligibility according to ARRT.

### **JRCERT Compliance**

A copy of the JRCERT standards can be found in all three program laboratories on campus (East room 216, 224, & 226) or at <http://www.jrcert.org/programs-faculty/jrcert-standards/>.

**Policy:** The Radiologic Technology Program will assure timely and appropriate resolution of complaints regarding allegations of non-compliance with JRCERT Standards.

**Procedure:** Complaints must be made in writing to the Program Director. The Program Director will maintain a record of complaints and their resolution.

The Program will investigate documented allegations of non-compliance with the Standards in the following manner:

1. Upon receipt of an allegation of non-compliance with the Standards, the Program Director has **five** business days to investigate the allegation. This may include, but is not limited to, discussion with faculty, clinical staff, administration, and /or other persons involved.
2. The Program Director will respond in writing to the person(s) filing the complaint within **ten** business days from the receipt of the complaint. The response will include the Program's position regarding the alleged area of non-compliance. If the allegation of non-compliance is found to be valid by the Program Director, the Program Director will include an action plan to correct the non-compliance. If the Program denies the allegation, supporting documentation/evidence will be included in the response.
3. In the event the person(s) filing the complaint are not satisfied he/she/they should follow the college wide Shared Governance Policy 608.
4. The JRCERT will be contacted by the Program Director for discrepancies in interpretation of the Standards. Upon response of the JRCERT, a written explanation of the JRCERT's interpretation will be provided to the parties involved.

If the person(s) filing the complaint is/are not satisfied he/she/they may contact:

**JRCERT**  
20 N. Wacker Drive  
Suite 2850  
Chicago, IL 60606-2901  
(312) 704-5300  
[www.jrcert.org](http://www.jrcert.org)

5. The record log of complaints of non-compliance with JRCERT Standards will be maintained in the Program Director's Office

STUDENT HANDBOOK ACKNOWLEDGEMENT

Print Student's Name: \_\_\_\_\_

I hereby acknowledge receipt of the Radiologic Technology Student Handbook. I realize that the handbook contains certain rules, regulations, policies and procedures, but is not intended to be a complete and exhaustive explanation of the same. I also understand this is subject to change, that I am to familiarize myself with its contents, and that I am to abide by the rules and regulations as stated herein or as subsequently changed. I further understand and agree that this booklet does not constitute a contract.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



HACC Lancaster Campus  
Radiologic Technology Program  
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Lancaster PA, 17602

