RADIOLOGIC TECHNOLOGY

Student Handbook 2017-2018
Delaware Technical Community College, Jack F. Owens Campus
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I. Mission Statement
Delaware Technical Community College

College Mission Statement

Delaware Technical Community College is a statewide multi-campus community college committed to providing affordable, open admission, postsecondary education that is relevant and responsive to labor market and community needs. The College offers comprehensive educational opportunities that contribute to the economic vitality of the State, including career, general, developmental, and transfer education; workforce development; and lifelong learning. The College respects its students as individuals and as members of diverse groups and is committed to fostering student success in higher education as a means to economic and personal advancement.

Radiologic Technology Program Mission Statement

The Radiologic Technology Program provides comprehensive, educational experiences that enable qualified students to acquire the knowledge, skills and behaviors necessary to be eligible for certification by the American Registry of Radiologic Technologists (ARRT) and employment as radiologic technologists.

Program Goals (Program Graduate Competencies – PGC’s)

The Radiologic Technology Program prepares qualified graduates to successfully pass the national registry examination administered by the American Registry of Radiologic Technologists (ARRT). The Radiologic Technology Program will achieve its mission through the following goals:

1. Graduates demonstrate clinical competence by performing a full range of radiologic procedures on all patient populations.
2. Graduates professionally utilize verbal, nonverbal and written communication in patient care intervention and professional relationships.
3. Graduates demonstrate professional growth and development by practicing the profession’s code of ethics and comply with the profession’s scope of practice.
4. Graduates demonstrate critical thinking and problem solving skills in the performance of radiographic procedures.

Program Effectiveness

The effectiveness of the Radiologic Technology Program, Owens Campus, will be assessed through the following outcomes:

1. (Annual) Program completion rate: Graduate retention rate of 50%.
2. Credentialing examination pass rate: Graduates have a five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six-months of graduation.
3. Job placement rate: Graduates actively seeking employment will have a five-year average job placement rate of not less than 75 percent within twelve months of graduation.
4. **Graduate satisfaction**: Graduates report an overall program satisfaction of 3 or higher on a 5 point scale.

5. **Employer satisfaction**: Employers report an overall program satisfaction of 3 or higher on a 5 point scale.

**Goals & Student Learning Outcomes**

**Goal / PGC 1: Demonstrate clinical competence by performing a full range of radiologic procedures on all patient populations.**

Students competently perform a full range of radiologic procedures.
Students set safe and effective technical factors.
Students practice radiation safety.

**Goal / PGC 2: Professionally utilize verbal, nonverbal and written communication in patient care intervention and professional relationships.**

Students demonstrate effective written communication skills.
Students demonstrate effective oral communication skills.
Students demonstrate appropriate nonverbal communication skills.
Students are culturally competent in patient interaction.

**Goal / PGC 3: Demonstrate professional growth and development by practicing the profession’s code of ethics and comply with the profession’s scope of practice.**

Students demonstrate professionalism.
Students demonstrate knowledge of ethical issues.
Students demonstrate knowledge of advancement in the field.

**Goal / PGC 4: Demonstrate critical thinking and problem solving skills in the performance of radiographic procedures.**

Students adapt standard procedures for non-routine patients.
Students demonstrate the ability to alter techniques in a variety of non-routine situations.
Students demonstrate critical thinking skills.
Students appropriately evaluate images.
II.

Profession Requirements
A. ACREDITATION

The Radiologic Technology Program is voluntarily accredited by the Joint Review Committee on Education in Radiologic Technology. The JRCERT is the only agency recognized by the United States Department of Education and the Council on Higher Education Accreditation for the accreditation of programs in radiography. The JRCERT awards accreditation to programs demonstrating substantial compliance with STANDARDS established by the JRCERT. A copy of the STANDARDS is included in this handbook (Appendix A).

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Dr., Suite 2850
Chicago, IL 60606-31892
312-704-5300
mail@jrcert.org
www.jrcert.org

B. ARRT CERTIFICATION

The radiography credentialing examination is administered by the American Registry of Radiologic Technologists (ARRT). Radiologic Technology students who successfully complete all academic and clinical requirements, as determined by the program director, are eligible to sit for this exam.

Any student who has a felony or misdemeanor charge on their record will be required to disclose that information to the ARRT. A request can be made for an ethics review through the ARRT (www.arrt.org). The ARRT will determine if the student is eligible to sit for the exam.

C. GRADUATION REQUIREMENTS

All academic and clinical requirements must be satisfied by each student for graduation eligibility. Students must maintain a grade of C (2.0) or higher in each course to be eligible for graduation, and the ARRT certification exam. Should a student fail to meet these requirements, graduation will be delayed until all requirements are met. Reference the graduation policy found in the DTCC student handbook.

D. STATE LICENSURE

The State of Delaware requires that all persons who operate x-ray equipment (excluding students in training) be certified by the state.

Certification can be obtained by:

a. successfully passing the state licensure exam
b. successfully passing the ARRT Exam, submitting an application, and paying a fee

Further information can be obtained by contacting:

Delaware Division of Public Health
Office of Radiation Control
417 Federal Street
Dover, DE 19903
(302) 744-4546
http://www.dhss.delaware.gov/dhss/dph/hsp/orc.html
Graduates seeking licensure in the state of Maryland, may contact:

Maryland Board of Physicians
4201 Patterson Avenue
Baltimore, MD  21212
1-410-764-4777 or 1-800-492-6836
www.mbp.state.md.us

E.  ETHICAL STANDARDS AND PROFESSIONAL TITLES

Radiologic Technologist, Radiographer, and RT(R) are terms and letter designations that may be used by persons having successfully completed the credentialing exam administered by the American Registry of Radiologic Technologists (ARRT).

No student, hospital employee or other person, whether State of Delaware licensed or not, is entitled to use these professional designations or initials indicating successful completion of the ARRT examination.

Radiologic Technology students wearing identification or using these designations as a student, employee or in any other capacity will be immediately suspended from the educational program in Radiologic Technology until it can be determined that the practice has been discontinued.

Students should be aware that such practices as herein described may result in a violation of the ARRT Standards of Ethics. If it is determined that the student is in violation of the Standards, eligibility to sit for the ARRT examination may be jeopardized.
III.

Program Faculty & Advisement
A. CURRICULUM SEQUENCE

The Radiologic Technology Program curriculum assesses affective, cognitive and psychomotor domains and is based on objectives established by the American Society of Radiologic Technologists (ASRT). The course sequence sheet (see Appendix B) lists core and support courses by semester. Refer to the ASRT website www.asrt.org for curricular requirements.

B. ACADEMIC COUNSELING AND ADVISEMENT

College counseling services are outlined in the DTCC Student Handbook. Students in the Radiologic Technology curriculum are advised and guided through the steps to achieve the AAS degree by the Program Director and Faculty.

C. FACULTY

Program Director / Department Chair

Kristie (Hellens) Bentley, M.Ed., RT(R)(CV)
(302) 259-6680
khellens@dtcc.edu

Clinical Coordinator

Terri Hitchens, M.Ed., RT(R)
(302) 259-6681
terri.hitchens@dtcc.edu

Didactic Instructor

Morgan Jones, B.S., RT(R)(M)
(302) 259-6682
morgan.jones@dtcc.edu

D. SYLLABI & LEARNING MANAGEMENT SYSTEM

Students are provided course syllabi at the beginning of the semester. Lesson plans and course schedules detailing the course plan for the semester are also provided. Course descriptions are found in Appendix G.

The learning management system is utilized by each instructor for all RAD courses. Students are expected to access the LMS on a continual basis to receive relevant course information and documents.
E. PROGRESSION IN THE PROGRAM

The student is expected to maintain enrollment and complete all RAD courses. Each RAD course has required prerequisites as listed on the Course Sequence Sheet. The student is responsible for fulfilling prerequisite requirements before progressing through the curriculum.

Failure to register in a scheduled clinical RAD course will forfeit a student’s place in the program.

While enrolled in the program, if a student withdraws or fails a course that is a prerequisite for the next semester, it is the student’s responsibility to contact the Program Director to discuss readmission procedures.

Any student that withdraws or fails must return the program issued radiation monitor and identification markers to the Program Director. Failure to do so will result in a data hold being placed on the student’s college account.

The Radiologic Technology Program Director may require repetition of any courses in which the student’s competencies have not been maintained.

All returning students must repeat the clinical course of the semester which they are returning, regardless of previous grade earned. Clinical competencies achieved in previous semesters may need to be repeated if deemed necessary by the program. The student will be placed in a clinical rotation at the discretion of the program.
IV.

Attendance Philosophy
A. ATTENDANCE PHILOSOPHY

Each student is expected to attend class and clinic regularly in order to achieve the maximum benefit from educational activities. Each student is responsible for all class work missed regardless of the reason for absence. The student must be aware that class/lab absences may adversely affect the student’s ability to perform successfully in clinic due to the correlation of classroom theory to clinical application of skills. The standards of performance are defined throughout this handbook and in the course syllabi.

A student who stops attending class and does not follow the steps to officially withdraw will receive an unofficial withdrawal (“U” grade) for the course. An unofficial withdrawal (“U” grade) is calculated in the student grade point average the same as a failure (“F” grade). An unofficial withdrawal (“U” grade) may affect financial aid or veteran’s benefits eligibility. The college is required by law to submit attendance reports on students who are funded by veteran’s benefits, social security payments, and other state, federal, and private scholarships programs.

Radiologic Technology, like other health professions, is different from most service industries in that illness has no concept of time and thus requires round the clock availability of personnel. Diagnostic imaging also has the potential to affect the well-being of patients since medical diagnosis and treatment often rely on radiographic findings.

Attendance at clinic internship during regularly scheduled hours is critically important since appropriate supervision of the student to accomplish the learning and performance objectives in accordance with guidelines can be completed only when certain supervisory and teaching personnel are present. Also, proper rotation and variety of studies are available primarily during these times. Students, whether first or second year, are assigned specific internship days and times. All instances when a student is not on site during the assigned days and times will be considered occurrences.

Students cannot miss planned experiences and gain the knowledge needed to complete course objectives and requirements. The acquisition of knowledge and skill in radiologic technology is cumulative both in theory and lab/clinical education; therefore, attendance and participation are expected.

Primary consideration of an employer when deciding on the desirability of a prospective employee is dependability. Therefore, specific attention is given to the punctuality and attendance of students, in both classes and clinic. Dependability in these areas is considered an important part of the program to develop responsible and professional diagnostic imaging professionals.

Students are never scheduled in excess of 40 hours per week combined for courses and clinic.
CLINICAL ATTENDANCE

The following policy will apply to all clinical internship rotations.

**OCCURRENCE:** Any instance when a student is not present during their assigned clinical days/times.

The following instances will be considered an occurrence.

- **Absence:** Failure to report to clinical site for entire day.
- **Tardiness:** Arrival to clinic after the assigned time.
- **Leaving early:** Leaving clinic before designated departure time.

Students are scheduled for clinic 256 hours during RAD160 and RAD161; 400 hours during RAD162; 384 hours during RAD260 and RAD261.

Any student who fails to complete 94% of his/her assigned clinical time each semester will receive an “F” grade for clinic.

1. If an occurrence is unavoidable, it MUST be reported to the **clinical site, Program Director, Mrs. Bentley, and Clinical Coordinator, Mrs. Hitchens** one hour prior to the student’s scheduled time.

   - Mrs. Bentley: khellens@dtcc.edu
   - Mrs. Hitchens: terri.hitchens@dtcc.edu

2. All occurrences not reported to the **clinical site, Program Director, and Clinical Coordinator** one hour prior to the time the student is scheduled for clinic will result in a reduction of student’s clinical grade. A letter grade reduction for each unreported occurrence will take place.

It is impossible for the program to create grading scales for all possible scenarios. It is the program’s expectation that clinical occurrences DO NOT happen.

All instances where a student misses assigned clinical time (including tardiness and leaving clinic early) will be calculated to determine the actual percentage of clinical time completed. **Failure to complete a minimum of 94% of the assigned time will result in an “F” grade for the clinical course.**

**INCLEMENT WEATHER:** Students are not required to report to clinic when the *Owens Campus* is CLOSED for inclement weather, however failure to report to clinic when the *Owens Campus* is OPEN will result in an occurrence. When the Campus opening is delayed (ex: opens at 10 a.m.) students are required to report to clinic at that time, and if the Campus closes early for inclement weather, students will be dismissed from clinic at that time.
EVALUATION OF PROFESSIONALISM: The student’s grade for Professionalism will be significantly impacted by occurrences.

SERIOUS INJURY or ILLNESS: If a student has multiple occurrences due to a serious injury or illness, a statement from a healthcare provider verifying that the student can return to clinic will be required. The program faculty will determine if the student will be able to meet clinical objectives based on time missed or extent of illness or injury. The student may request a medical withdraw through the Dean of Instruction.

ATTENDANCE RECORDS: Incomplete or falsified attendance records may result in an “F” grade for that semester regardless of student’s performance in other internship areas due to expectations in regards to professional behavior and in accordance with the ASRT Code of Ethics.

MISCELLANEOUS POLICIES:

1. Discretionary Time
   Discretionary Time is NOT allowed. This is defined as any internship time that is a variation of a student’s regularly assigned internship schedule.
   Examples of Discretionary Time not allowed are: “a student wanting to leave internship early or come in early, and clinic instructor or other radiology staff personnel giving student permission to vary internship time other than that which has been assigned.”

2. Banking Time
   Banking Time is NOT allowed and is defined as follows: When a student chooses to do internship time in advance of an anticipated occurrence.

3. Internship Shift
   Internship shifts may vary at the discretion of the clinic instructor between an early shift, 7:00 a.m. to 3:30 p.m. to a late shift, 8:30 a.m. to 5:00 p.m. However, during an internship shift a student must be in attendance at the clinic site for not less than eight hours, excluding lunch.

4. Voluntary Time
   Students will NOT be permitted to attend clinic on voluntary time (ex: holidays, winter break, weekends, spring break, etc.).

5. Lunch Breaks
   Students will be given a 45 minute lunch break during internship. Lunch schedules will be determined by the clinical instructor or department supervisor on a daily basis.

DISMISSAL FROM CLINIC: If a student is dismissed from clinic by the clinical instructor and/or staff, the Program Director must be contacted immediately! A reason for the dismissal must be documented and the student’s clinical grade shall be affected adversely. If a student leaves clinic early due to any reason, the Program Director and Clinical Coordinator MUST be contacted as stated in item #1 under “Clinical Attendance”.

Revised 7/22/09, 6/1/10, 6/15/11, 7/26/13, 1/6/16, 6/1/2017
V.
Clinical Education Plan & Program Policies
A. CORRELATION OF CLINICAL & DIDACTIC EDUCATION

The clinical experience is correlated with didactic instruction. Each student will rotate through a variety of radiographic rooms each semester. Students are assigned room rotations and/or assigned to a technologist on a rotating basis.

The students’ psychomotor skills are evaluated by their performance in both clinical and laboratory experiences; including practice exams, competencies, and simulations.

The students’ cognitive skills are evaluated in the classroom through exams, projects, and written and oral reports. Clinical education incorporates all concepts taught in theory in the classroom. It is imperative that the knowledge and skills acquired in the classroom are reinforced and applied in the clinical setting. The clinical coordinator supervises and assesses students on their ability to correlate clinical and didactic education. Clinical instructors and staff technologists also play a critical role in providing feedback on students’ progress.

A student may not attempt to document practices or achieve clinical competency until he/she has successfully passed lab check off in the appropriate Procedures course (i.e. RAD130, RAD131, RAD230) for a given examination. (See Appendix E)

B. DIRECT AND INDIRECT SUPERVISION

JRCERT Standards 4.4, 4.5, and 4.6, provide the following policies for direct and indirect supervision. (See Appendix A)

1. Direct Supervision: Student supervision by a qualified radiographer, who; reviews the procedure in relation to the student’s achievement, evaluates the condition of the patient in relation to the student’s knowledge, is present during the conduct of the procedure, and reviews and approves the procedure and/or image.

   a. Students must be directly supervised until competency is achieved.

   b. A qualified radiographer reviews the examination request and evaluates the condition of the patient to ensure that the procedure falls within the student’s level of achievement.

   c. A qualified radiographer remains with the student at all times during the procedure.

   d. A qualified radiographer reviews and approves the finished radiographs/images.

   e. All portable radiographic exams will be performed under the direct supervision of a qualified radiographer, regardless of level of competency achieved by the student.
• This applies to all portable exams regardless of their proximity to the imaging department.

f. All fluoroscopy exams (real-time fluoro) will be performed under direct supervision of a qualified radiographer, regardless of level of competency achieved by the student.

g. All pediatric exams (0-5 years of age) will be performed under the direct supervision of a qualified radiographer, regardless of level of competency achieved by the student.

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

   a. Once competency has been achieved, the student may perform radiographic procedures under indirect supervision.

   b. All radiographic images, regardless of the level of student competency, will be reviewed and approved by a qualified radiographer.

   c. If it is documented that a student has violated this policy and it is the first offense, a meeting will be held between the program director, clinical coordinator, and the student explaining the serious nature of the offense and the potential consequences of a second offense under this policy.

   d. If it is documented that a student has violated this policy and it is the second offense, a meeting will be held between the program director, clinical coordinator, and the student. At this meeting the program director will, in writing, explain again the serious nature of the offense and may recommend to the college that the student be dismissed from the program. A written record of proceedings will be kept in the student’s file.

C. **STUDENT REPEAT RADIOGRAPH POLICY**

The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must be physically present during the conduct of a repeat image and must approve the student’s procedure prior to re-exposure, regardless of student’s level of competency.

Specific parameters are as follows:
1. If it is determined by a qualified radiographer that a repeat radiographic image must be taken, the student shall repeat only with instruction from, and in the presence of the qualified radiographer.

2. If a student is asked to repeat a radiographic image without the presence of qualified radiographer, he/she is to respectfully refuse, explaining that it is not allowed by program policy.

3. If it is documented that a student has violated this policy and it is the first offense, a meeting will be held between the program director, clinical coordinator, and the student explaining the serious nature of the offense and the potential consequences of a second offense under this policy.

4. If it is documented that a student has violated this policy and it is the second offense, a meeting will be held between the program director, clinical coordinator, and the student. At this meeting the program director will, in writing, explain again the serious nature of the offense and may recommend to the college that the student be dismissed from the program. A written record of proceedings will be kept in the student’s file.

D. MAGNETIC RESONANCE (MR) SAFETY

MR images are acquired utilizing a very strong magnetic field and radiofrequencies. The MR system’s magnet is always on, and therefore poses potential workplace hazards. Radiofrequencies are capable of heating metal objects, on or inside of patients, and may cause burns.

Radiography students will complete an observation in MRI during RAD260 or RAD261, and potentially access the MR environment prior to that semester/assignment. To assure safety for patients, staff, and students, an MR safety module (http://www.ismrm.org/smrt-basic-mri-safety-video/) and a screening form (Appendix I) will be completed by all students prior to clinical internship.

The Clinical Coordinator will review the screening form and discuss any areas marked “yes” with the appropriate clinician.

E. CLINICAL GRADING

Clinic grades are computed using the following assessments dependent upon semester:

1. Affective and Technical Skills Evaluation
2. Evaluation of Professionalism
3. Clinic Positioning Objective Evaluation (see Appendix E);
4. C-arm competency (Appendix F)
5. Clinical Assignments
6. Written exams
7. Formative/Summative Assessments
8. Projects

Appendix H: Clinical Competency Requirements

**Clinical grading scale**

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<th>Grade</th>
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<tr>
<td>92 – 100</td>
<td>A</td>
</tr>
<tr>
<td>83 – 91</td>
<td>B</td>
</tr>
<tr>
<td>75 – 82</td>
<td>C</td>
</tr>
<tr>
<td>0 – 74</td>
<td>F</td>
</tr>
</tbody>
</table>

**Competency grading**

Students are required to successfully achieve a minimum number of competency exams each semester as outlined in the Clinical Competency Requirements (Appendix H). The minimum score for passing a competency exam is 85%. Students that fail to meet the required number of competencies as listed in the Clinical Competency Requirements will receive an “F” grade for the clinical course due to inability to meet course objectives. A maximum number of competencies has been established for each semester.

**F. EVENING EXPERIENCE**

During the second year, students will be scheduled for evening hours to enrich the total internship experience. Evening hour experiences apply only to the fall and spring semesters of the second year (RAD 260 and RAD 261).

The following guidelines shall define hours other than day shift:
1. The experience shall exclude Saturday, Sunday and Holidays.
2. The experience shall be limited to one student per shift assignment.
3. The student shall be assigned only when a qualified radiographer is on duty and in attendance for direct and indirect supervision.
4. Shift assignments shall be limited to 12:30 p.m. through 9:00 p.m.
5. All students shall have equal opportunity for evening shift experience.
6. A minimum of at least one evening shift per student will be scheduled for both fall and spring semesters (RAD 260 and RAD 261).
7. The total number of hours per week shall not exceed those regularly scheduled (24 hours per week).
8. Second year students interested in additional evening experience may be scheduled at the discretion of the program.

Objectives and evaluation tool for the clinic evening experience are found in Appendix D.

**G. CT / SPECIAL IMAGING AREAS EXPERIENCE**

During the second year, students will be scheduled for special imaging area rotations to enrich the total internship experience. Special imaging area experiences apply only to the fall and spring semesters of the second year (RAD 260 and RAD 261).
The following guidelines will apply to this experience:

1. The experience shall be limited to one student per imaging area.
2. The student shall be assigned to a special imaging area only when a qualified technologist is on duty and in attendance for direct supervision for that particular imaging modality.
3. All students shall have equal opportunity for special imaging experiences.
4. Two eight (8) hour rotations per student will be scheduled in each of the following imaging modalities: Magnetic Resonance Imaging (MRI), Ultrasound (US), and Nuclear Medicine (NM). Students will rotate through each of the 3 areas in the fall semester (RAD260) and in the spring semester (RAD261).
5. Special imaging area experiences will be observation only.
6. Students will rotate through CT for one week (3 days) in the fall semester (RAD260) and for one week (3 days) in the spring semester (RAD261).

Objectives for the CT / special imaging areas are found in Appendix C.

*Note: Students are required to complete an MR safety module and screening form (Appendix I) prior to attending clinical internship.

H. MAMMOGRAPHY

Standard One - Objective 1.2 of the JRCERT Standards requires a program to document that it “provides equitable learning opportunities for all students.” The JRCERT notes that equitable means dealing fairly with all concerned; it does not necessarily mean equal.

With regard to mammography, the program will make every effort to place a male student in a mammography rotation if requested; however, the program is not expected to attempt to override clinical site policies that restrict mammography rotations to female students. Male students are advised that placement in a mammography rotation is not guaranteed and, in fact, would be very unlikely.

I. WORKPLACE HAZARDS / INJURY / ILLNESS

Any student that has experienced an injury and/or illness while attending clinic must have documentation by the clinical facility submitted to the program. The program must be notified in a timely manner of the incident. If the injury and/or illness warrants medical attention, the student must follow the procedures of the clinical facility and submit documentation of treatment to the program. The student is responsible for all costs incurred as a result of injury or illness, and must carry their own medical insurance.

The clinical facilities follow procedures in accordance with the Occupational Safety and Health Administration (OSHA). Each facility maintains protocols to follow for the health and safety of staff and students.

Any student who is ill or potentially infectious should take into consideration the implications of being in contact with patients, especially those who are immuno-compromised.
J. **COMMUNICABLE DISEASES**

The program will follow the policy for Communicable Diseases as stated in the DTCC Student Handbook, as well as, any policies set forth by the clinical facilities in regards to students with communicable diseases.

K. **STANDARD PRECAUTIONS**

Occupational exposure to blood borne and other pathogens are possible in the healthcare facilities. Standard Precautions are designed to reduce the risk of transmission of pathogens in healthcare institutions. Use Standard Precautions for the care of all patients.

Standard Precautions apply to:
1. blood
2. all body fluids
3. secretions and excretions
4. nonintact skin
5. mucous membranes

The following guidelines will reduce transmission of microorganisms:

1. **Handwashing**
   a. Wash hands before and after touching blood, body fluids, secretions, excretions and contaminated items, whether or not gloves are worn.
   b. Wash hands immediately after gloves are removed, between patient contacts, and when otherwise indicated to avoid transfer of microorganisms to other patients or environments.

2. **Gloves**
   a. Wear gloves when touching blood, body fluids, secretions, excretions and contaminated items.
   b. Put on clean gloves just before touching mucous membranes and nonintact skin.
   c. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms.
   d. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces and before touching another patient.
   e. Wash hands immediately after use.

3. **Face Protection**
   a. Use face protection during procedures when splashes or sprays of bodily fluids is probable.

4. **Gown**
   a. Wear a gown to protect skin and clothing when soiling is probable.
b. Remove gowns promptly after use.

5. Patient Care Equipment
   a. Handle used equipment in a manner that reduces transfer of microorganisms.
   b. Reusable equipment is to be cleaned and reprocessed appropriately.
   c. Discard single-use items promptly.

6. Environmental Control
   a. Adequately clean routine patient care areas with the appropriate solutions provided by the facility.

7. Linen
   a. Handle soiled linen in a manner that reduces the transfer of microorganisms to other areas and non-contaminated items.

8. Occupational Health and Bloodborne Pathogens
   a. Handle sharp instruments with care to prevent accidental sticks.
   b. Never recap used needles.
   c. Do not remove needles from disposable syringes by hand.
   d. Place used sharps in the appropriate puncture-resistant biohazard containers.
   e. Use mouthpieces, resuscitation bags or other ventilation devices as an alternative to mouth-to-mouth resuscitation.

L. CLINICAL ORIENTATION REQUIREMENTS

The following criteria are part of the orientation requirements that must be completed prior to attending and/or continuing clinical internship:

1. BLS
2. Health History
3. Documented Immunizations (influenza and TB annually)
4. Criminal Background / Fingerprints
5. Drug Screening
6. Technical Standards Verification
7. Online Clinical Education (site specific)
8. Hospital Orientation
9. Checklist of Radiation Safety Devices (first week of clinical orientation)

The college faculty will verify the student’s completion of the aforementioned requirements. Students will not be eligible for clinic, or permitted to continue, until all requirements are met.
M. CLINICAL COMPETENCIES

1. Consistency:
Successful clinical competencies documented in Trajecests may be declared void if the student is unable to perform in a consistent manner following competency. Voiding a previously completed positioning objective may only be done using the following procedure:

The clinical coordinator or clinical instructor, in writing, declares that the student has performed a previously successful clinical positioning objective, in an unsatisfactory manner 2 times during the same semester.

This declaration is to be completed for EACH of the 2 unsatisfactory performances of the objective in question, and must include the following:

a. be in writing and include the date the examination was performed, and patient/exam number;

b. include specific reasons why the examination was declared unsatisfactory;

c. be approved by the clinical coordinator.

2. Submission of Clinical Competencies:
All Clinic Positioning Evaluations will be documented according to the following guidelines:

a. All competencies and practices must be documented in Trajecests WITHIN 24 HOURS of completion. For example, a competency performed on Monday, October 1, must be submitted no later than Tuesday, October 2. Completed competencies submitted after 24 hours will not be accepted.

b. Clinical competency requirements checklist will be updated on a weekly basis by the clinical coordinator.

N. CLINICAL COMPETENCY SIMULATIONS

Clinical competency simulations are reserved for RAD 261 Clinical Radiography V. During RAD 261, simulations will be permitted only with College Faculty approval. Failure to complete clinical competencies may delay completion of the program and graduation.
O. PREGNANCY POLICY

Radiologic Technology is safe when appropriate precautions are taken for protection from potentially harmful ionizing radiation. Disclosure of pregnancy to the program is strictly voluntary. In the absence of voluntary, written disclosure, a student cannot be considered pregnant.

A student voluntarily and in writing making notification to the program director that she is pregnant may:
- provide a physician’s note to continue in the program without modification
- re-enter the program at a later date if she chooses to delay completion
- submit a written withdrawal of declaration.

However, because the human fetus is sensitive to ionizing radiation, the declared pregnant student, who provides a physician’s note to continue in the program without modification, is encouraged to request an additional monitoring badge that will be worn on the torso.

If a student voluntarily declares in writing that she is pregnant, then a meeting will be scheduled with the Program Director, Clinical Coordinator and student to discuss the best options for the student.

The NCRP (National Council on Radiation Protection and Measurements) Report No. 116 recommends an annual dose limit for education and training exposures of 1 mSv (100 mrem). In situations where student badge readings approach the 1 mSv annual dose limit, the student will be counseled and corrective action will be taken if deemed necessary. Radiation monitoring reports are made available to the student.

All clinical facilities and the program adhere to the ALARA “as low as reasonably achievable” principle in keeping exposure limits well below the maximum allowable limits. Adhering to the stated protocols of ALARA and the NCRP poses minimal risk to the pregnant student.

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P. RADIATION SAFETY / MONITORING REPORTS

To keep radiation exposure to the student and patient as low as reasonably achievable, the following guidelines must be adhered to:

1. Students are not permitted in the radiographic suite while radiographic exposures are being made except for portables, surgery, and procedures requiring fluoroscopy.

2. When it is necessary for the student to be in the radiographic room during an exposure noted in (1) above, the appropriate protective apparel must be worn.
3. Students are not permitted to hold image receptors during any radiographic procedure.

4. Students are not permitted to hold patients during any radiographic procedure. Immobilization methods are the appropriate standard of care.

5. Regardless of the level of student competency, repeat radiographic images are performed only under direct supervision by a qualified radiographer.

6. Radiation monitoring devices are to be worn at all times during clinical internship and energized lab activities. Failure to wear radiation monitor to clinic or lab will result in the student being dismissed, and only permitted to return when radiation detection devices are on their person.

7. The radiation monitoring reports are maintained by the program director, who also serves as the Radiation Safety Office (RSO). Reports are made available to students within 30 days of receipt. All students will initial the report to verify that doses have been reviewed.

8. In situations where a student’s badge reading approaches the annual threshold dose limit of 1 mSv (100 mrem) the student will be counseled to determine the source of excessive exposure. Corrective action will be taken if deemed necessary. The student may be placed in a low dose area.

9. Monitoring devices are replaced each calendar quarter. All monitoring devices must be turned in and exchanged for a new one in a timely manner. Students will incur a $15 fee for badge that is lost or damaged.

Q. **RIGHT TO APPEAL**

If a student is dismissed from a clinical affiliate for disciplinary reasons, the student may appeal the decision through the Program Director. The Program Director will investigate the matter on the student’s behalf. However, the affiliate shall have priority in determining if a student is permitted to return to the clinical portion of the program at that institution.
R. ROTATION GUIDELINES

The practice of Diagnostic Imaging contains a wide variety of elements; therefore, learning the art and science of the profession at the actual working level requires significant demonstration, discussion, and more supervised clinical experience than most Allied Health Professions. To obtain ample and varied experience in diagnostic procedures, students rotate through all four major clinical affiliates, located in Seaford (Nanticoke Health Services), Milford (Bayhealth), Lewes (Beebe Healthcare), and Dover (Bayhealth).

Although rotation through these affiliates may, at times, be difficult due to geographic location and personal obligations, the necessary experiences gained through site diversity outweighs the possible inconveniences. Transportation to clinical affiliates is the student’s responsibility.

Students are scheduled in areas that include routine, fluoroscopic, mobile and surgical procedures. Special imaging areas and evening rotations are included during second year internship.

The method for determining clinical rotations is as follows: Upon completion of RAD105, first year students are given an opportunity to select a clinical rotation. If the number of students requesting a particular rotation is larger than the number allowed for that facility, or unbalanced, the program will assign students at its discretion. Every effort is made to accommodate student requests while providing an equitable clinical experience.

During the course of the program, students may be reassigned to a different clinical rotation in order to provide an equitable learning experience.

Reassignment of students to other clinical sites or groups for personal, group or clinical issues will not be permitted.

Students reentering the program due to withdrawal or failure of previous courses will be placed in a clinical facility at the discretion of the program. The student must repeat the clinical course of the semester in which they are returning, regardless of previous grade earned. The student will be placed according to space availability and equitable educational experience for all students concerned.

S. SCHEDULE

Students are not scheduled for clinic during the following:
1. Winter Break
2. Spring Break
3. Observed Holidays
4. Weekends
5. College closings
Student clinical hours are scheduled as follows:

**FIRST YEAR**
Fall Semester
16 hrs/week (Tuesday & Thursday)
Spring Semester
16 hrs/week (Tuesday & Thursday)
Summer
32 hrs/week (Monday through Thursday, 12 weeks)

**SECOND YEAR**
Fall Semester
24 hrs/week (Monday, Wednesday & Friday)
Spring Semester
24 hrs/week (Monday, Wednesday & Friday)

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**T. UNIFORMS**

Professionalism includes personal appearance and therefore the following policy has been established:

Uniforms will be hunter green tops and black pants. Shoes will be all black. Shoes are to be closed toe and closed heel. Uniforms are to be clean and pressed. Undergarments should not be visible in any manner.

1. Lab coats or jackets, if worn, must be hunter green in color.
2. Shoulder length hair must be tied back; beards and moustaches must be clean and neatly trimmed.
3. Extremes in hairstyles and/or color (pink, purple, green, etc.) and adornments (beads, sequins, etc.) are prohibited.
4. Jewelry must be minimal, earrings should not dangle and are limited to 2 piercings per ear; limited to one ring per hand.
5. In consideration of the patient, colognes, perfumes and after-shave lotions should not be used.
6. Uniforms are to be worn only during internship, lab check-offs, and while in transit.
7. Body piercings not commonly seen in a professional environment (example: nose, tongue, lip, eyebrow), will not be allowed during internship. Large holes/spacers in the ear are not permitted.
8. Nails will be kept short (1/4”) and well maintained; no chipped polish; single color. Artificial nails are prohibited for infection control and safety reasons. Gel polish is prohibited.

9. Body tattoos must be covered.

10. Radiation monitoring devices and identification must be worn at all times.

Violation of the personal appearance parameters stated above will result in dismissal from clinic until the student corrects the deficiency. Time missed from clinic will be considered an occurrence and adversely affect the student’s clinical grade.

U. CLINICAL AFFILIATES

Kent General Hospital - Bayhealth Medical Center
640 South State Street
Dover, DE 19901
(302) 744-7054
Contact: Aliesha Goicoechea RT(R)
Courtney Lingeman RT(R)

Milford Memorial Hospital-Bayhealth Medical Center
P.O. Box 199, Clark Avenue
Milford, DE 19963
(302) 430-5676
Contact: Beth Eastburn RT(R)

Beebe Healthcare
424 Savannah Road
Lewes, DE 19958
(302) 645-3616
Contact: Courtney Phillips RT(R)

Beebe Health Campus
1894 John J. Williams Highway
Rehoboth, DE 19971
(302) 645-3010, ext. 2454
Contact: Scot Williamson RT(R)

Nanticoke Health Services
801 Middleford Road
Seaford, DE 19973
(302) 629-6611, ext. 2389 or 2107
Contact: Shawna Brunskill RT(R)

Nanticoke Health Services-Immediate Care Seaford
100 Rawlins Dr.
Seaford, DE 19973
(302) 629-6611; ext. 8620
Contact: Karen Sturgeon RT(R)
V. COUNSELING AND ADVISEMENT PROCEDURES

1. COUNSELING

Student Affairs’ academic counselors provide a variety of counseling services to students.

The program understands the challenges student’s face in completing a college degree. It is the program’s philosophy and intent to provide an environment conducive to student learning and to support the student in successfully completing the program. The student may make appointments with the program faculty at any time to discuss issues or concerns. If necessary, outside referral options will be given to the student for counseling beyond the program’s or college’s expertise.

2. ADVISEMENT PROCEDURES

Students enrolled in the Radiologic Technology program are expected to adhere to the policies and procedures of the program, college, and clinical affiliates. This includes, but is not limited to academic and clinical policies, and professional behaviors. Students who are not functioning in accordance with the stated policies, or are not meeting academic requirements, will be advised by the appropriate program faculty.

Procedure for Academic Advisement:
- Class grades will be posted in the learning management system’s gradebook. Individual assessment grades and weighted totals will be available to students on an ongoing basis.
- Students who receive below 75% on individual assessments will receive an email from the instructor requesting a meeting to discuss progress.
- Midterm progress emails are generated through the Banner system. Students whose average is below 80% at midterm will be identified as “unsatisfactory” and required to meet with the instructor to identify areas of weakness and discuss a plan for improvement.

Procedure for Clinical Advisement:
- Students will receive “weekly evaluations” from clinical instructors.
- Midterm clinical evaluations will be presented by clinical instructors and the clinical coordinator with each student. If significant areas of improvement are noted, the student will be required to develop an action plan.

Procedure for Behavioral Advisement:
- A counseling form will be submitted via Trajecsys for any student who exhibits unprofessional behavior, whether on campus or during clinical.
- Evaluation of Professionalism will be completed by each faculty member at midterm,

In all situations, the student will be made aware of the implications their actions or behavior may have on their clinical or didactic progress. When the advisement procedures above are not effective, disciplinary action on the following page(s) will be implemented.
W. MAJOR INCIDENCES / INFRACTIONS

An “F” grade may be given for clinical courses if an infraction is severe enough to warrant that the patient’s safety is in jeopardy or the student blatantly disregarded program policies.

The following infractions will impact clinical grading:
1. Disregard of personal appearance policy
2. Failure to accurately document clinical attendance
3. Leaving assigned area without permission
4. Failure to give notice of absence
5. Disregard of clinical supervision policies
6. Breach of confidentiality
7. Breach of professional ethics/behavior
8. Disregard of safety/fire and smoking regulations
9. Refusal to carry out assignment
10. Disregard of radiation safety policies / ALARA principles
11. Disregard of Standard Precautions
12. Violation of JRCERT STANDARDS

The following infractions may result in dismissal from the program:
1. Dishonesty
2. Falsifying, altering records
3. Academic dishonesty
4. Fraudulent statements
5. Unauthorized release of confidential information
6. Second violation of JRCERT STANDARDS

The following will result in dismissal from the program:
1. Clinical failure
2. Academic failure
3. Severe disciplinary problems
4. Multiple infractions (cumulative or within the same incident)
5. Blatant disregard of program policies
6. Endangering the welfare of others
7. Unauthorized use or removal / theft of property belonging to clinical sites / college
8. Possession or under the influence of alcohol or drugs
9. Fighting, assault, intent to harm

This list of infractions is not all inclusive. Any infractions or problems that arise that are not listed will be evaluated on a case by case basis by the program faculty. Effects on clinical grading will be based on the severity of the infraction.

*Refer to the Standards of Student Conduct, DTCC student handbook.*
X. GRIEVANCE PROCEDURE

A grievance is defined as a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. Any student that feels that a violation has occurred is encouraged to use the following procedure to pursue grievances:

1. The student is encouraged to first meet with the person accused of violating the student’s rights to seek satisfactory resolution in an informal manner through discussion.

2. In the opinion of the student, if satisfactory resolution is not reached in Step 1, the student shall meet with the Program Director or Faculty to discuss and facilitate a resolution to the complaint.

3. In the opinion of the student, if satisfactory resolution is not accomplished in Step 2, the student shall file a written complaint with the Program. The written complaint shall be submitted within five (5) days after all other meetings have concluded. The complaint shall be specific including the name of the person accused, a statement of the specific right or rights alleged to have been violated by the accused, and the manner in which the right or rights is alleged to have been violated.

4. The Program Director, after reviewing the complaint, will forward a copy of the complaint to the accused who will have five (5) days to respond. The Program will investigate the allegations and notify the student and accused of his/her determination.

5. If all efforts to reach a resolution have been exhausted, and the student is not satisfied with the determination in Step 4, the student may follow through with the complaint to the Dean of Student Affairs. The student shall receive a response, in writing, of the Dean’s determination within ten (10) days from the date the written complaint was submitted.

*Reference the Procedure For The Resolution of Complaints By a Student, DTCC student handbook.

Y. CHEMICAL IMPAIRMENT

Delaware Tech is a drug/alcohol free environment (see student handbook). Any student suspected of being under the influence of drugs/alcohol during classroom/lab activities or at a clinical site will not be permitted to participate in the scheduled activity.

The Radiologic Technology faculty requires that radiology students provide safe, effective, and supportive patient care. To fulfill this purpose, radiology students must be free of chemical impairment during participation in any part of the radiologic technology program including classroom, laboratory, and clinical settings.

The radiologic technology faculty defines the chemically impaired student as a person who, while in the academic or clinical setting, is under the influence of, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal drugs or prescribed medications.
This health problem must be proactively addressed when identified with the radiologic technology student population. The radiologic technology faculty will intervene with the chemically impaired student as outlined in the procedure as follows:

1. Remove the student to a private area. Discuss the sign(s) and/or behavior(s) observed and allow the student to provide an explanation. When impairment signs/behaviors are observed during a clinical/lab/classroom session, the student is removed from the area and relieved of further radiologic technology responsibilities. The student is instructed to arrange for transportation home. College policy, as well as, the policies of the affiliating institutions will be considered.

2. A report of observed student behavior is prepared by the involved faculty member and is submitted to the Radiologic Technology Program Director. Documentation listing the behaviors observed will be provided to the student.

3. A group conference will be convened. The conference group consists of the involved student and faculty member, the clinical coordinator, and the Radiologic Technology Program Director. Disciplinary actions resulting from the clinical impairment will be addressed.

4. If it is determined that the student is in violation of this policy, dismissal from the program may occur.

This policy is in place to ensure the safety of students and patients.

*Refer to the Student Handbook Drug-Free School and Workplace Policy.

Z. ENERGIZED LABORATORY POLICY

1. Students are not permitted to use the energized lab unless an instructor is available. All students must log energized lab use accordingly.

2. All students must wear their radiation monitors to all class and lab sessions. Students will not be permitted to participate in lab sessions if radiation monitors are not worn which may adversely affect the student’s grade. Get into the habit of bringing your monitor to class with you each day!

3. The doors to the x-ray / c-arm room must be completely closed while exposures are being made with the equipment.

4. Exposures are to be made ONLY on the x-ray manikin or other imaging devices deemed appropriate by the program. Under no circumstances can exposures be made on human beings! Any student found in violation of this policy will result in immediate dismissal from the program.
5. The x-ray room is to be clean and orderly after each use. Please respect the value of the resources.

6. Student images are confidential. Students are to review only the images that they have produced.

7. The lab is for the benefit of all students in the Radiologic Technology Program. The program encourages the students to utilize the lab, especially outside of regularly scheduled class time.

AA. LOST MARKER / RADIATION MONITOR POLICY

The Radiologic Technology Program will issue left/right markers and radiation monitors to all students prior to the first day of clinic. If a student loses their markers or monitor, it is the student’s responsibility to contact the Program Director to order new ones at a cost of $21 for markers and $15 for badges. This cost will be the responsibility of the student. Payment will be made to: Delaware Technical Community College and submitted to the Business Office.

BB. MARKER USE POLICY

Students are not permitted to use their left/right markers assigned by the program during hospital/facility paid job assignments. There must be a clear delineation between clinical time, as assigned by the program, and non-program job responsibilities as assigned by the facility. A student found in violation of this policy may be dismissed from the program.

CC. PROGRESS/GRADING SCALE; ACADEMIC

1. The Radiologic Technology Student Academic Progress Policy shall be the same as that stated in the College’s Student Handbook.

2. The grading scale for Radiologic Technology students is as follows:

   - 92 – 100 = A
   - 83 – 91 = B
   - 75 – 82 = C
   - 0 – 74 = F

3. Within the Radiologic Technology department, 20% or more of all classroom examinations are in writing. Specifically, long or short answer, essay, explanation, compare and contrast questions or definitions will be used to meet this criterion.

4. Extra credit work is not given to help a student’s classroom grade. Students may not repeat a classroom evaluation to improve their grade. This includes all evaluations whether written or oral; including exams, simulations, papers, or projects. Classroom grades are determined by evaluations as shown in the Course Schedule/Expectations provided to students at the beginning of each semester.

5. Students whose average on all evaluations for a given classroom course is below 75% will receive an “F” grade. Failure in a course that is a prerequisite for another, will delay registration for that course until the prerequisite is successfully completed. and may be given an opportunity, on a space available basis, to repeat the course the next time it is offered.
DD. RE-ENTRY POLICY

To ensure that students who have previously withdrawn from, or failed a Radiologic Technology program course, are adequately prepared for re-entry into the same technology, the following policy will be applied:

1. Students are required to, in writing, request re-entry to the Program Director one semester in advance of re-entry. A formal letter documenting the student’s request should be received by June 1st for fall re-entry; September 1st for spring re-entry; and February 1st for summer re-entry.

2. Re-entry can be considered only if a seat is available and within the year of withdrawal or failure. Students who previously withdrew with passing grades will be considered first. If there are more students requesting re-entry than seats available, the RAD “interest” matriculation date will be utilized.

3. A cumulative re-entry exam must be taken to include content from all Radiologic Technology courses that were successfully completed. A minimum score of seventy-five percent (75%) must be achieved to be considered for re-entry.

4. Current criminal background check, drug screening, and immunizations are required for re-entry. The complete list of requirements will be based on academic year of re-entry. This may be different from the original requirements for acceptance.

5. The student re-entering must retake the current semester clinical course and will be placed in a clinical rotation at the discretion of the program.

6. The Program Director will be responsible for advising the student who has submitted a written request for re-entry.

   a. Upon re-entry, it is recommended that students retake all technology courses. This will allow for strengthening any weaknesses and becoming a stronger candidate for successfully completing the national certification exam.

   b. If technology courses previously passed with a “C” grade or better are not retaken, the student is strongly encouraged to enroll in the courses as a listener.

7. Students will be considered for re-entry no more than one time. Students who are unsuccessful after the second attempt in the program will be required to reapply by following the Allied Health Competitive Admissions Process and, upon acceptance, will be required to start the RAD courses from the beginning.

EE. RESPONSIBILITIES, RIGHTS AND CONDUCT

As members of the college community, all students have certain responsibilities, rights, and standards of conduct that must be met while on campus and at the clinical affiliate; these, along with the
mechanism for student appeal of judicial committee decisions, are outlined in the College’s Student Handbook.

*Refer to Student Rights and Standards of Student Conduct, DTCC Student Handbook.

**FF. WEATHER; INCLEMENT**

When DTCC Owens Campus is closed or delayed for inclement weather, student internship is affected the same as the college schedule. For example, if the college is closed for the entire day, students need not report to the clinic for that entire day. If college is delayed, students need not report to clinic until the college opens. Missed internship time due to college closing or delay does not affect the student’s grade. For notifications of college closings and delays, make sure that personal settings are updated on the Delaware Tech Alert system.

**GG. CELL PHONE AND ELECTRONIC DEVICE POLICY**

This policy is implemented in order to maintain a productive, safe learning environment and applies to both incoming and outgoing cellular calls.

Cell phones and electronic devices shall be turned off or set to silent or vibrate mode during classes, conferences, and in other campus locations where their use would cause a distraction to the learning environment.

Cell phone and electronic device use is prohibited during all testing and assessment activities.

The College strictly prohibits the use of camera phones and other recording devices in any manner which violates or compromise norms of personal conduct or the expectation of privacy that individuals have a reasonable right to expect.

**HH. SOCIAL NETWORKING POLICY**

Social networking/social media includes, but is not limited to, networking sites such as Facebook, LinkedIn, Twitter, Instagram, etc.

Students are prohibited from accessing social networking sites while using hospital owned/leased electronic equipment, and are prohibited from accessing social networking sites while on clinic time, including accessing through personal cell phones or personal electronic media devices.

Students are prohibited from using personal electronic media devices while on clinic time to conduct personal social networking activities. Personal cell phones and personal electronic media devices may only be used for the purpose of completing clinical requirements, or in designated areas during break times.

Students are prohibited from taking pictures on any of the hospital campuses. Students are prohibited from posting any photographs online.

*Reference Electronic Mail and Other Network Activity (Use of Internet) Policy, DTCC Student Handbook.
II. TUTORING POLICY
The Radiologic Technology faculty support the success of the students enrolled in the program. In order to accommodate student learning, the faculty will be available for tutoring for all program courses.

The following criterion is the responsibility of the student and must be met prior to requesting a tutoring session:

1. The student must read and study the material prior to requesting tutoring.

2. The student must be prepared with questions. The instructor is not going to instruct all material again.

3. The tutoring session cannot be requested if the student was not in attendance for the initial instruction of material. The tutoring session is not a “make-up” period.

4. The student must take responsibility for their own learning.

5. A sign-up sheet will be placed on the bulletin board in the classroom. Any student requesting tutoring must give the instructors ample time to prepare. The student must include the course, topic, date and time of session requested. The program will make every effort to accommodate the requested time.

6. Tutoring will be provided by all program faculty. The instructor providing the tutoring may not necessarily be the instructor for the course.

JJ. JRCERT ALLEGATIONS OF NON-COMPLIANCE

The Radiologic Technology Program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Accreditation with the JRCERT assures the public that the program meets JRCERT STANDARDS and pursues programmatic improvement.

If a student feels that the program is non-compliant with JRCERT STANDARDS, the following procedure will be implemented:

1. The student is encouraged to first meet with the program director to seek satisfactory resolution of the complaint in an informal manner through discussion.

2. If satisfactory resolution is not reached in the opinion of the student, the student may file a written complaint to the program that details the allegations of non-compliance. The written complaint shall be submitted within five (5) days of the alleged incident of non-compliance.
3. The program will respond to the student within five (5) days of the submitted written complaint.

4. If all efforts to reach a resolution to the complaint have been exhausted and the student is still not satisfied with the outcome, the student may follow through with the complaint to an external mediator (Dean of Student Affairs and/or Dean of Instruction). After investigating the allegation, the Dean(s) will have ten (10) days to provide a written response of his/her determination to the student.

5. If the student feels that the complaint has not been resolved by the College, the student may contact the JRCERT at 20 N. Wacker Dr, Suite 2850, Chicago, IL 60606-31892; 312-704-5300; mail@jrcert.org.

6. The program will maintain a record of complaints and their resolutions.

All students are provided a copy of the JRCERT STANDARDS in the Student Handbook. The handbook is reviewed with all students upon entry into the program. Students sign a receipt of information.

**KK. OTHER POLICIES**

The following policies and procedures can be referenced in the DTCC Student Handbook.

- Admission Policies
- Academic Advisement
- Academic Calendars
- Academic Dishonesty
- Academic Policies
- Civil Rights
- Communicable Diseases
- Drug-Free School and Workplace Policy
- FERPA Policies
- Grading Policies
- Graduation Policy
- Harassment
- Immunization Policy
- Refund Policy
- Student Rights and Standards of Student Conduct
- Student Services
- Transfer Credit
- Tuition and Fees
VI.
Pre-Admission Policies and Forms
Pre-Acceptance Information:

- Admission Policy
- Welcome Letter
- Criminal Background Check and Drug Screening
- Latex Allergy Guideline
- Requesting Accommodations
- Acknowledgement and Authorization
- FERPA form
- Pregnancy Policy
- Responsibility for Pre-Admission Data
- Health and Immunizations Record
The Radiologic Technology Program requires that all students participate in prearranged clinical experiences at selected healthcare facilities. In order to participate in the clinical experience, students must meet specific requirements established by the healthcare facilities. All applicants to the Radiologic Technology Program must meet these clinical requirements in order to be granted full admission, and to continue coursework in the Radiologic Technology Program. The clinical requirements include, but are not limited to, the following:

1. Criminal background check demonstrating no felonies or misdemeanors
2. Negative drug screening
3. Current CPR certification (Healthcare Provider)
4. Current immunizations and PPD screening
5. Physical examination
6. Hospital orientation(s)

A student who has been convicted of a misdemeanor or felony should also submit a Pre-Application Review of Eligibility for Certification to the American Registry of Radiologic Technologists (ARRT) for an ethics review. Information may be accessed through the ARRT website www.arrt.org.

When applying for certification, students will be required to report to the ARRT:
- charges or convictions that were stayed, withheld/deferred, set aside, or suspended;
- any plea of guilty, Alford plea, or plea of no contest;
- court supervision, probation, or pre-trial diversion.
- Do not report juvenile convictions processed in juvenile court.
- Do not report traffic citations UNLESS they involved alcohol or drug use.

A student who tests positive on a drug screening may be required to forfeit his/her seat (program) acceptance. Students may repeat a drug screening to attempt to produce negative results within one week of initial drug testing. If a negative result is not obtained, the student will forfeit his/her seat.

The College’s Substance Abuse Policy can be found in the Student Handbook at http://www.dtcc.edu/academics/student-handbook.

The purpose of the aforementioned requirements is to provide a safe environment for patients, clinical site employees, and students. Criminal Background checks are forwarded to the respective clinical sites. Background checks are reviewed based on program-specific profession’s state laws, rules and regulations, licensure application restrictions, clinical site regulations, accreditations, and additional information according to the profession. The implications of this review to the program applicant include, but are not limited to: request for an ethics review (if available in professional guidelines); request for additional information; additional review by a clinical site or college representative; and/or delay, withdrawal of program acceptance (seat) offer, or forfeiture of program final acceptance.
Written documentation of: 1) a criminal background check demonstrating no felony or misdemeanor convictions; 2) negative drug screening; 3) current CPR certification; 4) current immunizations and PPD results; 5) physical examination, and 6) hospital orientation(s) together with any other clinical requirement of an applicable healthcare facility, in order for students to be offered admission to the Radiologic Technology Program. The student will forfeit his/her seat if specific requirements are not completed within the designated timeframe.

Adult and child abuse registry checks may be required by healthcare facilities at a later date, after admission to the Radiologic Technology Program. The adult and child abuse registry checks are obtained just prior to the student’s attendance at the designated clinical site. The facility will make the determination regarding each student’s ability to participate in clinical experiences at that particular facility. Students whose registry checks do not meet the facility’s requirements will not be able to participate in clinical experiences at that facility and therefore, will be unable to meet the clinical objectives of the radiology course and will be withdrawn from the Radiologic Technology Program.

While enrolled in the Radiologic Technology Program, subsequent drug tests, background checks, or additional qualifications imposed by a particular healthcare facility may be required of students as a condition of participation in the clinical experience. A clinical radiology student who fails to satisfy any of these requirements will be withdrawn from the Radiologic Technology Program.

Acceptance into the Radiologic Technology Program or permission to participate in the clinical experience by a healthcare facility does not guarantee eligibility for certification. A student with any criminal history may be denied licensure by the American Registry of Radiologic Technologists (ARRT).
Dear Radiography Student:

Welcome to the Radiologic Technology Program at Delaware Technical Community College, Jack F. Owens Campus. As a Radiologic Technology pre-acceptance student, you should begin working on several details NOW in preparation for summer and fall courses and clinical internship. The following is a list of important information and certain preparations that must be completed prior to DATE/TIME for entry into the program.

1. **Criminal Background Check and Drug Screening** – All students must complete this requirement. The approximate fee is $108.75. The service is provided by [https://mycb.castlebranch.com/](https://mycb.castlebranch.com/) through CastleBranch. The information regarding this requirement is enclosed in the pre-acceptance information.

   Students MUST login and begin the background process no later than DATE.

   Drug screenings must be completed during the week of DATE-DATE. NO EXCEPTIONS!

2. **Health Physical and Proof of Immunizations** – Health examinations must be completed by a qualified physician (DO or MD). A health physical form is included with the pre-acceptance information.

3. **Patient Care Skills (CPR)** – All Radiologic Technology program students must have a current CPR certification for Basic Life Support at the Healthcare Provider Level. CPR is a 2 year certification. Students are encouraged to schedule their skills check after May xx, 20xx so the certification is valid for the course of the entire program. A copy of the CPR card is due to Mrs. Bentley by DATE. Students who do not comply with the CPR requirement will not be eligible for the fall semester.

   
   (Venipuncture) – Students will be required to complete a venipuncture competency. This competency will be offered during the summer YEAR semester at an approximate fee of TBD.

4. **Hospital Orientation(s)** – Required by clinical facilities. The orientation(s) will be completed prior to the start of the fall semester. Bayhealth orientation will be held on DATE/TIME/LOCATION.

5. **Pregnancy Policy** – Radiologic Technology is safe when appropriate precautions are taken. To assure that students understand the implications of working near ionizing radiation when
pregnant, all female students must read and return a signed copy of the policy to the program director.

6. **Technical Standards Form** – This form will assist students in understanding the level of physical capability needed to work in the profession. Read carefully, sign, and return form to the program director.

7. **FERPA Form** – Students must give permission for the Program to forward information related to criminal background results, drug screening, and immunizations to clinical affiliates. Clinical institutions will make determination regarding each student’s eligibility to participate in the clinical experience. Students who are not cleared by the clinical sites will not be eligible to enroll in the Program.

8. **Accommodations** – Students with disabilities who wish to request academic adjustments must see the campus Disabilities Counselor.

9. **Uniforms** – Students will need to purchase uniforms prior to the start of the Fall semester. A minimum of two (2) uniforms must be purchased. Uniforms are hunter green tops (no other shades of green are acceptable) and black bottoms. Lab jackets are to be hunter green, as well. Shoes must be all black with closed toe and heel. If you have questions regarding uniform requirements, please ask before purchasing them!

10. **Student Photo ID** – All Rad Tech students will be required to display their Delaware Tech “student” ID while attending clinic. You do NOT need to obtain a new ID.

11. **Clinical Internship** – Students will participate in internship at four clinical affiliates. It is a 2:1:1:1 rotation as follows:
   - **First Site**: RAD160 and RAD161: (Tuesdays and Thursdays; 16 week semester)
   - **Second Site**: RAD162 (Summer): (32 hours per week for 12 week semester)
   - **Third Site**: RAD260 (Mondays, Wednesdays and Fridays; 16 week semester)
   - **Fourth Site**: RAD261 (Mondays, Wednesdays and Fridays; 16 week semester)

Clinical sites include, Beebe Healthcare and Beebe Health Campus, Nanticoke Health Services and Nanticoke Health Services-Immediate Care Seaford, Kent General Hospital-Bayhealth Medical Center, and Milford Memorial Hospital-Bayhealth Medical Center. Internship rotations will be decided at the end of the RAD105, Intro to Patient Care & Radiography.

If you are attending the Radiologic Technology pre-acceptance meeting and have been offered a seat in another allied health program or at another campus, you must contact the Program Director, Kristie Bentley, by DATE to confirm or decline your seat.

Kristie (Hellens) Bentley, M.Ed., RT(R)(CV)
Program Director, Radiologic Technology
khellens@dtcc.edu
302-259-6680
INFORMATION REGARDING CRIMINAL BACKGROUND CHECK  
AND DRUG SCREENING

Delaware Tech, Owens Campus, Radiologic Technology Program has partnered with Castle Branch at www.CastleBranch.com to provide criminal background checks and drug screening for incoming Radiologic Technology students. The background check will include a check of all counties the student has lived in during the last seven years and an FBI fingerprint search.

The basic fee for performance of these requirements is TBD payable directly online to Castle Branch. This price includes a background check for the three counties in Delaware and the FBI fingerprint search. If the student has lived in other counties or states within the last seven years he/she will be notified online that there will be an additional fee.

Please see the instruction forms for the criminal background checks and drug testing located in the Radiologic Technology program requirements materials. Follow the instructions carefully.

Results from the **background check** must be available online to the Radiologic Technology Program before meeting with the Program Director to review all pre-acceptance paperwork. Reminder: The deadline to meet with Ms. Hellens is **DATE/TIME**. NO EXCEPTIONS!

This process may take several weeks, so you MUST start this process IMMEDIATELY so that results are available by the deadline.

**Drug screening** MUST be completed between **DATE and DATE**. NO EXCEPTIONS!

Students should retain the instruction forms so that the website and information can be accessed at a later date.

Delaware Tech and the Radiologic Technology Program are not responsible for results of the tests performed or services rendered by Castle Branch. If students have questions or concerns regarding results or services, the student must contact Castle Branch directly.

7/14/16
REQUESTING ACADEMIC ACCOMMODATIONS

Radiologic Technology is a practice discipline with cognitive, sensory, affective and psychomotor performance requirements. In order to comply with the 1992 Americans with Disabilities Act, the Radiologic Technology program defines a “qualified individual with a disability” as one who, with or without reasonable accommodation or modification, meets the technical function requirements for participation in the Radiologic Technology Program. Radiography students will be required to meet the performance criteria for the technical functions required for the Radiologic Technology program. **It is the student’s responsibility to inform the Radiologic Technology program of any disability before entering any RAD courses.**

Students with disabilities who wish to request academic adjustments must see the campus ADA contact.

Students seeking academic adjustments must request the same at least 4 weeks prior to the start of each semester for which academic adjustments are sought.

Academic adjustments requested by students who fail to follow these procedures may be denied or may not be available prior to the start of classes.

The campus ADA contact will evaluate the request and engage in an interactive process to determine what, if any, academic adjustments are warranted.

Students should provide the campus ADA contact with documentation of their disability. The information may include diagnosis of disability, functional limitations, psycho-education testing results, most recent IEP (if available), and any other information that may provide insight, clarification or support of the student’s condition and how that may impact the student’s ability to perform in an academic setting.

**Providing documentation is the obligation of the student, at the student’s expense.**

The student and the campus ADA contact (together with such other parties as may be designated by the campus ADA contact) will discuss which academic adjustments are appropriate for the student’s individual situation and coursework.

If the Radiologic Technology program is not clear about the request or thinks the accommodation cannot be met, the Assistant Dean of Instruction will be consulted to assist in making a decision.
DELWARE TECHNICAL COMMUNITY COLLEGE  
Jack F. Owens Campus  
Radiologic Technology Program

STUDENT ACKNOWLEDGEMENT AND AUTHORIZATION

This is to verify that I, _____________________, have received a copy of the Radiologic Technology Pre-Acceptance Information for Delaware Technical Community College, Jack F. Owens Campus. I understand that it is my responsibility to read this information. I have been informed of the Associate Degree Radiologic Technology Program curriculum requirements. Students are expected to adhere to the Delaware Technical Community College and Institutional policies. I hereby agree to abide by these policies while enrolled in the Radiologic Technology Program.

I hereby grant permission for inspection and use of my information for educational purposes.

I hereby grant permission for the posting of information, including but not limited to, my name and enrollment status in the Radiologic Technology program, etc. for educational purposes.

I also grant permission for use of my photographic image to be used by the Radiologic Technology Program.

My acceptance into the Radiologic Technology program is contingent upon registration prior to the start of classes for the semester I am to start the RAD course (s). Failure to do so will result in forfeiture of my seat in the program.

I understand that I will be required to complete a CPR certification for HealthCare Providers, a history and physical (including immunizations and PPD), a personal criminal background check and drug screening, and a hospital orientation (TBD) in order to be accepted/continue in the Radiologic Technology Program.

All pre-acceptance information with appropriate signatures are due by DATE/TIME.

SIGNATURE: ________________________________

DATE: ________________________________
Delaware Technical Community College
Authorization to Release Non-Directory Information

Student Name: ___________________________________________ ID: _____________________

The Family Educational Rights and Privacy Act (FERPA) prohibits Delaware Technical Community College from releasing non-directory information to anyone other than the student. However, the student may voluntarily waive the right to privacy to the person(s) identified in the statement below. By completing this form, the student grants the named person(s) access to information in the student’s educational records.

Directory information is defined as: Name, Address, Field of Study, Full or Part-time Enrollment Status, Dates of Attendance, Degrees & Awards, Honors (President’s/Dean’s List, Academic Recognition and Honor Societies), Participation in Officially Recognized Activities and Sports, Date of Birth, Previous Schools Attended, Photographs, Weight & Height of Athletes.

I hereby waive my rights under the Family Educational Rights and Privacy Act (FERPA) by authorizing Delaware Technical Community College to share any requested information concerning:

_______ Academic history, to include grades and other non-directory information
_______ Financial Aid, to include application, awards and other information
_______ Student account information, to include all fines, fees, refunds or balances due
_______ Register and modify course schedule(s)
_______ Other [Please Specify] Criminal Background, drug screening, immunizations, and health history

Requests, Recommendation Letters, Criminal Background and Drug Screening results, etc]

The above information may be released to:

_Bayhealth Medical Center_____________________________________________
Print Name

_Beebe Healthcare_____________________________________________________
Print Name

_Nanticoke Health Services_____________________________________________
Print Name

_______________________________________________________________________________
Print Name

This release shall remain in effect until it expires on _____ ______ 20____. I officially request the authorization be revoked. To be valid, student must sign the form in the presence of a Delaware Tech representative. Proof of identification may be requested.

_______________________________________ ______________
Signature of Student Date

I hereby revoke the authorization to release my personal information to any third party. To be valid, student must sign the form in the presence of a Delaware Tech representative. Proof of identification may be requested.

_______________________________________ ______________
Signature of Student Date

TO THE OFFICE OF THE REGISTRAR IMMEDIATELY
Radiologic Technology is safe when appropriate precautions are taken for protection from potentially harmful ionizing radiation. **Disclosure of pregnancy to the program is strictly voluntary.** In the absence of voluntary, written disclosure, a student cannot be considered pregnant.

A student voluntarily and in writing making notification to the program director that she is pregnant may:

- provide a physician’s note to continue in the program without modification
- re-enter the program at a later date if she chooses to delay completion
- submit a written withdrawal of declaration.

However, because the human fetus is sensitive to ionizing radiation, the declared pregnant student, who provides a physician’s note to continue in the program without modification, is encouraged to request an additional monitoring badge that will be worn on the torso.

If a student voluntarily declares in writing that she is pregnant, then a meeting will be scheduled with the Program Director, Clinical Coordinator, and the student to discuss the best options for the student.

The NCRP (National Council on Radiation Protection and Measurements) Report No. 116 recommends an annual dose limit for education and training exposures of 1 mSv (100 mrem). In situations where student badge readings approach the 1 mSv annual dose limit, the student will be counseled and corrective action will be taken if deemed necessary. Radiation monitoring reports are made available to the student.

All clinical facilities and the program adhere to the ALARA “as low as reasonably achievable” principle in keeping exposure limits well below the maximum allowable limits. Adhering to the stated protocols of ALARA and the NCRP poses minimal risk to the pregnant student.

Student Name (print) _______________________

Student Name (signature) _____________________

Date ______________

Revised 6/16/17
DELAWARE TECHNICAL COMMUNITY COLLEGE
Jack F. Owens Campus
Radiologic Technology Program

STUDENT ACKNOWLEDGEMENT OF RESPONSIBILITY FOR
PRE-ADMISSION DATA

This is to verify that I ______________________________, have received a copy of the Student Health and Immunization Requirements for preliminary acceptance into the Radiologic Technology Program at Delaware Technical Community College, Owens Campus. I have been informed that it is my responsibility to complete my health history and to have my health care provider complete all portions of the Immunization Requirements and the Health Evaluation. I have also been informed that I must have a current PPD (updated yearly), certification in Basic Life Support for Healthcare Providers (updated every two years), an online personal criminal background check and drug screening, and attend a hospital orientation.

Having received the above information and having assumed responsibility for completion of my pre-admission data, I understand that I will forfeit my seat in the Radiologic Technology Program at Delaware Technical Community College, Owens Campus for the 2016-2017 academic year if all of the following requirements are not complete and submitted to Kristie Hellens, Radiologic Technology Program Director by 12:00 noon on DATE. I will also forfeit my seat if a negative drug screening is not obtained between DATE and DATE.

I understand that an appointment must be made with Ms. Hellens between the hours of 8:30 a.m. and 4:30p.m. prior to the DATE deadline for submission of the completed pre-acceptance paperwork.

- Personal History – see Student Health form
- Immunization Requirements including current PPD – see Student Health form
- Health Physical – see Student Health form
- Criminal background check – see instruction form provided by Certified Background
- Drug screening – see instruction form provided by Certified Background and dates above
- All other required forms presented in the pre-acceptance information packet with appropriate signatures

Make a copy of all information for your files prior to submitting it to the Radiologic Technology program.

Signature _________________________________
Date ________________________________

Rev: 03/08/07, 4/16/09, 5/19/10
Student Health and Immunization Record

Owens Campus Radiologic Technology

(302) 259-6680

□ Male □ Female Age: _____ Student ID Number: _______________

Social Security Number Last Name First Name Middle

Home Address (Number and Street) City or Town State Zip Code Date of Birth
( ) ( ) ( ) ( )

Home Telephone Number Cell number Work Telephone Number

Student is responsible for completing Personal History on this page. Answer ALL questions by checking the appropriate box. Comment on all positive answers on additional sheet and attach.

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<th>HAVE YOU HAD? Do you have?</th>
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<td>Rubella- (German Measles, Three day measles)</td>
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<td>Rapid or irregular heart rhythm or rate</td>
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<td>Rupture, Hernia</td>
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<td>Varicella- (chicken pox)</td>
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<td>Gallbladder Trouble or Gallstones</td>
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<td>Hepatitis or other blood born disease</td>
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<td>Rheumatic Fever or Heart Murmur</td>
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<td>Pacemaker or ICD</td>
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<td>Recent Gain or Loss of Weight</td>
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<td>Frequent Depression</td>
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<td>Dizziness, Fainting</td>
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<td>Frequent Urination</td>
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<td>Tumor, Cancer, Cyst</td>
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<td>Asthma or difficulty breathing</td>
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<td>Disease or Injury of Joints</td>
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<td>Albumin/Sugar in Urine</td>
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<td>Endocrine disorders (diabetes, thyroid)</td>
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<td>Chronic Cough</td>
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<td>Trick Knee, Shoulder, etc.</td>
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<td>Addiction to drug, alcohol, tobacco</td>
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PLEASE PRINT (Attach additional sheet as necessary)

A. Has your physical activity been restricted during the past five years? (Give reasons and durations.)

B. Have you received treatment or counseling for a nervous condition, personality or character disorder, developmental, or emotional problems? (Give details.)

C. Have you had any illness or injury or been hospitalized other than already noted? (Give details.)

D. Have you consulted or been treated by clinics, physicians, healers, or other practitioners within the past five years? (Other than routine checkups.)

E. Have you been rejected for or discharged from military service because of physical, emotional, or other reasons? (If so, give reasons.)

F. If you are under a doctor's care for any disease or disorder, please indicate.

G. List any medications you take regularly or frequently.

H. List all allergies to medications, food, latex, etc.

I. If yes to any of the above, is there any reason why you cannot meet the Technical Functions of a Delaware Tech Owens Campus Rad Tech Student? (see attached)

Student Signature __________________________ Date ________________
The EXAMINING Health Care Provider is required to complete physical examination and document immunizations. Please comment on all positive answers. Please indicate date of disease, immunization or results of lab tests on the next page and sign at bottom of this page.

Student Last Name  First Name  Middle

BP / Height _____ in.  Corrected Vision
Weight _____ lbs.  Right 20/  Left 20/

Are there abnormalities of the following systems? **Describe any abnormalities and current treatments in the space below:**

<table>
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<tr>
<th></th>
<th>NO</th>
<th>YES</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>Head, Ears, Nose or Throat</td>
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<tr>
<td>2.</td>
<td>Respiratory</td>
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<td>3.</td>
<td>Cardiac</td>
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<td>4.</td>
<td>Vascular</td>
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<td>5.</td>
<td>Gastrointestinal</td>
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<tr>
<td>6.</td>
<td>Hernia</td>
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<td>7.</td>
<td>Eyes</td>
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<td>8.</td>
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<td>9.</td>
<td>Musculoskeletal</td>
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<td>10.</td>
<td>Metabolic/Endocrine</td>
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<td>14.</td>
<td>Lymph Nodes</td>
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<tr>
<td>15.</td>
<td>Allergies (Latex, etc.)</td>
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(Attach additional sheet as necessary)  NO  YES  Explain

<p>| | | | |</p>
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<tr>
<td>Is there loss or seriously impaired function of any organ, hand, or limb?</td>
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<tr>
<td>Are there any back impairments or lifting restrictions?</td>
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<tr>
<td>Do you have any recommendations for any physical restrictions?</td>
<td></td>
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<tr>
<td>Do you have any recommendations regarding the care of the student?</td>
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<tr>
<td>Is the patient now under treatment for any medical or emotional condition?</td>
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</tr>
<tr>
<td>If yes to any of the above, is there any reason why the student cannot meet the Technical Functions of a DTCC Rad Tech Student? (see attached)</td>
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</table>

Health Care Provider Signature: ________________________________

Address: ____________________________________________________

Print Last Name: __________________________  Date: __________

Student Name: ____________________________  Date: __________
REQUIRED IMMUNIZATIONS

The Delaware State Board of Health and clinical institutions require students to show evidence of immunity and/or screening for certain diseases. **PLEASE ATTACH LABORATORY DOCUMENTATION IF TITER WAS DONE:**

1. **Measles, Mumps, & Rubella Immunizations**
   
   MMR# 1 ________ (date)  MMR# 2 ________ (date)

   If dates of MMR immunizations are not known, one of the following criteria must be met in each of the disease categories.

   **MEASLES IMMUNITY:**
   
   ________  (a) Persons born prior to January 1, 1957; or
   ________  (b) Date of disease; or ________ (date)
   ________  (c) **Attach** copy of serological confirmation of mumps immunity (titer)

   **MUMPS IMMUNITY:**
   
   ________  (a) Persons born prior to January 1, 1957; or
   ________  (b) Date of disease; or ________ (date)
   ________  (c) **Attach** copy of serological confirmation of measles immunity (titer)

   **RUBELLA IMMUNITY:**
   
   ________  (a) Persons born prior to January 1, 1957; or
   ________  (b) Date of disease; or ________ (date)
   ________  (c) **Attach** copy of serological confirmation of rubella immunity (titer)

2. **VARICELLA – (chicken pox)**
   
   ________  (a) Date of disease; or ________ (date)
   ________  (b) Date of vaccination (2-shot series); or ________ (date) ________ (date)
   ________  (c) **Attach** copy of serological confirmation of varicella immunity (titer)

3. **HEPATITIS** - Immunization series for Hepatitis B
   
   List all 3 dates:
   
   ________ ________ ________

4. **Tetanus - Tdap (must be after 2006)** ________ (date)

5. **INFLUENZA** (documentation only necessary during active flu season)
   
   Verification of influenza vaccine must include the student’s first and last name, date of birth, location of where they received the vaccine [e.g. local pharmacy, primary care physician, etc.] and date of vaccination.

   OR a letter of declination signed by student’s healthcare provider; note: will be required to wear a mask.
REQUIRED SCREENING

TUBERCULOSIS

Radiologic Technology students are required to have ANNUAL tuberculosis screening. Initially, 2 PPDs in total: Negative PPD results within the last 12 months can be accepted in place of 1 PPD. A current PPD must be provided within last 3 months as the second PPD. If no PPDs were completed within last year, the student must complete 2 PPDs.

Step # 1:  PPD _______ Date  Negative  Positive

Step # 2:  PPD _______ Date  Negative  Positive

Step # 3: If PPD is positive, the student must have a chest x-ray and preventive therapy must be started.

A copy of the chest x-ray report (read specifically for a positive PPD) must be attached to this form and dates for preventive therapy provided.

Chest x-ray    Date _______

Preventive therapy started    Date __________

At the conclusion of the course of preventive therapy, the student must obtain confirmation from the physician that includes a statement that the student is without symptoms of TB at that time and is cleared to participate in the Radiologic Technology program.

The information stated above is true to the best of my knowledge.

Student Signature: _______________________________ Date: ____________

Health Care Provider Signature: _______________________________ Date: ____________

Print Last Name: _______________________________

Address: _______________________________
APPENDIX A
Standards for an Accredited Educational Program in Radiography

EFFECTIVE JANUARY 1, 2014

Adopted by:
The Joint Review Committee on Education in Radiologic Technology – October 2013

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is dedicated to excellence in education and to the quality and safety of patient care through the accreditation of educational programs in the radiologic sciences.

The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council on Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. The JRCERT awards accreditation to programs demonstrating substantial compliance with these STANDARDS.

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Standard One

Integrity

Standard One: The program demonstrates integrity in the following:
- Representations to communities of interest and the public,
- Pursuit of fair and equitable academic practices, and
- Treatment of, and respect for, students, faculty, and staff.

Objectives:
In support of Standard One, the program:

1.1. Adheres to high ethical standards in relation to students, faculty, and staff.

1.2. Provides equitable learning opportunities for all students.

1.3. Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.

1.4. Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

1.5. Assures the security and confidentiality of student records, instructional materials, and other appropriate program materials.

1.6. Has a grievance procedure that is readily accessible, fair, and equitably applied.

1.7. Assures that students are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of non-compliance with the STANDARDS.

1.8. Has publications that accurately reflect the program’s policies, procedures, and offerings.

1.9. Makes available to students, faculty, and the general public accurate information about admission policies, tuition and fees, refund policies, academic calendars, academic policies, clinical obligations, grading system, graduation requirements, and the criteria for transfer credit.

1.10. Makes the program’s mission statement, goals, and student learning outcomes readily available to students, faculty, administrators, and the general public.

1.11. Documents that the program engages the communities of interest for the purpose of continuous program improvement.

1.12. Has student recruitment and admission practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.
1.13. Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.

1.14. Has program faculty recruitment and employment practices that are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, national origin, and any other protected class.

1.15. Has procedures for maintaining the integrity of distance education courses.
Standard Two:

Resources

Standard Two: The program has sufficient resources to support the quality and effectiveness of the educational process.

Objectives:

In support of Standard Two, the program:

Administrative Structure

2.1. Has an appropriate organizational structure and sufficient administrative support to achieve the program’s mission.

2.2. Provides an adequate number of faculty to meet all educational, program, administrative, and accreditation requirements.

2.3. Provides faculty with opportunities for continued professional development.

2.4. Provides clerical support services, as needed, to meet all educational, program, and administrative requirements.

Learning Resources/Services

2.5. Assures JRCERT recognition of all clinical education settings.

2.6. Provides classrooms, laboratories, and administrative and faculty offices to facilitate the achievement of the program’s mission.

2.7. Reviews and maintains program learning resources to assure the achievement of student learning.

2.8. Provides access to student services in support of student learning.

Fiscal Support

2.9. Has sufficient ongoing financial resources to support the program’s mission.

2.10. For those institutions and programs for which the JRCERT serves as a gatekeeper for Title IV financial aid, maintains compliance with United States Department of Education (USDE) policies and procedures.
**Standard Three**  
*Curriculum and Academic Practices*

**Standard Three:** The program’s curriculum and academic practices prepare students for professional practice.

**Objectives:**
In support of **Standard Three**, the program:

3.1. Has a program mission statement that defines its purpose and scope and is periodically reevaluated.

3.2. Provides a well-structured, competency-based curriculum that prepares students to practice in the professional discipline.

3.3. Provides learning opportunities in current and developing imaging and/or therapeutic technologies.

3.4. Assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

3.5. Measures the length of all didactic and clinical courses in clock hours or credit hours.

3.6. Maintains a master plan of education.

3.7. Provides timely and supportive academic, behavioral, and clinical advisement to students enrolled in the program.

3.8. Documents that the responsibilities of faculty and clinical staff are delineated and performed.

3.9. Evaluates program faculty and clinical instructor performance regularly to assure instructional responsibilities are performed.
Standard Four

*Health and Safety*

**Standard Four:** The program’s policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

**Objectives:**
In support of **Standard Four**, the program:

4.1. Assures the radiation safety of students through the implementation of published policies and procedures that are in compliance with Nuclear Regulatory Commission regulations and state laws as applicable.

4.2. Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:
   - Written notice of voluntary declaration,
   - Option for student continuance in the program without modification, and
   - Option for written withdrawal of declaration.

4.3. Assures that students employ proper radiation safety practices.

4.4. Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.

4.5. Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.

4.6. Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.

4.7. Assures sponsoring institution’s policies safeguard the health and safety of students.

4.8. Assures that students are oriented to clinical education setting policies and procedures in regard to health and safety.
Standard Five
Assessment

Standard Five: The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.

Objectives:
In support of Standard Five, the program:

Student Learning

5.1. Develops an assessment plan that, at a minimum, measures the program’s student learning outcomes in relation to the following goals: clinical competence, critical thinking, professionalism, and communication skills.

Program Effectiveness

5.2. Documents the following program effectiveness data:
   - Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
   - Five-year average job placement rate of not less than 75 percent within twelve months of graduation,
   - Program completion rate,
   - Graduate satisfaction, and
   - Employer satisfaction.

5.3. Makes available to the general public program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

Analysis and Actions

5.4. Analyzes and shares student learning outcome data and program effectiveness data to foster continuous program improvement.

5.5. Periodically evaluates its assessment plan to assure continuous program improvement.
Standard Six

Institutional/Programmatic Data

Standard Six: The program complies with JRCERT policies, procedures, and STANDARDS to achieve and maintain specialized accreditation.

Objectives:
In support of Standard Six, the program:

Sponsoring Institution

6.1. Documents the continuing institutional accreditation of the sponsoring institution.

6.2. Documents that the program’s energized laboratories are in compliance with applicable state and/or federal radiation safety laws.

Personnel

6.3. Documents that all faculty and staff possess academic and professional qualifications appropriate for their assignments.

Clinical Education Settings

6.4. Establishes and maintains affiliation agreements with clinical education settings.

6.5. Documents that clinical education settings are in compliance with applicable state and/or federal radiation safety laws.

Program Sponsorship, Substantive Changes, and Notification of Program Officials

6.6. Complies with requirements to achieve and maintain JRCERT accreditation.
Awarding, Maintaining, and Administering Accreditation

A. Program/Sponsoring Institution Responsibilities

1. Applying for Accreditation

   The accreditation review process conducted by the Joint Review Committee on Education in Radiologic Technology (JRCERT) can be initiated only at the written request of the chief executive officer or an officially designated representative of the sponsoring institution.

   This process is initiated by submitting an application and self-study report, prepared according to JRCERT guidelines, to:

   Joint Review Committee on Education in Radiologic Technology
   20 North Wacker Drive, Suite 2850
   Chicago, IL  60606-3182
   312.704.5300
   mail@jrcert.org
   www.jrcert.org

2. Administrative Requirements for Maintaining Accreditation

   a. Submitting the self-study report or a required progress report within a reasonable period of time, as determined by the JRCERT.

   b. Agreeing to a reasonable site visit date before the end of the period for which accreditation was awarded.

   c. Informing the JRCERT, within a reasonable period of time, of changes in the institutional or program officials, program director, clinical coordinator, full-time didactic faculty, and clinical instructor(s).

   d. Paying JRCERT fees within a reasonable period of time.

   e. Returning, by the established deadline, a completed Annual Report.

   f. Returning, by the established deadline, any other information requested by the JRCERT.

Programs are required to comply with these and other administrative requirements for maintaining accreditation. Additional information on policies and procedures is available at www.jrcert.org.

Program failure to meet administrative requirements for maintaining accreditation will lead to being placed on Administrative Probationary Accreditation and result in Withdrawal of Accreditation.
B. JRCERT Responsibilities

1. Administering the Accreditation Review Process

The JRCERT reviews educational programs to assess compliance with the Standards for an Accredited Educational Program in Radiography.

The accreditation process includes a site visit.

Before the JRCERT takes accreditation action, the program being reviewed must respond to the report of findings.

The JRCERT is responsible for recognition of clinical education settings.

2. Accreditation Actions

JRCERT accreditation actions for Probation may be reconsidered following the established procedure.

JRCERT accreditation actions for Accreditation Withheld or Accreditation Withdrawn may be appealed following the established procedure. Procedures for appeal are available at www.jrcert.org.

All other JRCERT accreditation actions are final.

A program or sponsoring institution may, at any time prior to the final accreditation action, withdraw its request for initial or continuing accreditation.

Educators may wish to contact the following organizations for additional information and materials:

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

curriculum: American Society of Radiologic Technologists
15000 Central Avenue, S.E.
Albuquerque, NM  87123-3909
(505) 298-4500
www.asrt.org

certification: American Registry of Radiologic Technologists
1255 Northland Drive
St. Paul, MN  55120-1155
(651) 687-0048
www.arrt.org
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JRCERT
20 North Wacker Drive
Suite 2850
Chicago, IL  60606-3182
(312) 704-5300
(312) 704-5304 (fax)
mail@jrcert.org (e-mail)
www.jrcert.org
APPENDIX B
# COURSE SEQUENCE SHEET

**Curriculum:** Radiologic Technology  
**Curriculum Code Designation:** AHTAASRAD  
**Effective:** 2018-21  
**Campus Location:** Wilmington, Georgetown

## CAMPUS LOCATION: Wilmington, Georgetown  
### COURSE SEQUENCE SHEET  
#### Curriculum: Radiologic Technology  
##### Curriculum Code Designation: AHTAASRAD  
###### Effective: 2018-21  

### Name:  
#### ID#:  

### Matriculation Date: 

### SSC 100 is a prerequisite for all developmental and 100 level courses.

### COURSE NUMBER AND TITLE  
<table>
<thead>
<tr>
<th>COURSE NUMBER AND TITLE</th>
<th>Credits</th>
<th>Lecture</th>
<th>Lab</th>
<th>Offered</th>
<th>Completed</th>
<th>Grade</th>
<th>PREREQUISITES</th>
<th>CO-REQUISITES</th>
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<td></td>
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<td>CHM 110 General Chemistry</td>
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<td>MAT 020 and ENG 090 or ENG 091</td>
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<td><strong>8</strong></td>
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### SIXTH SEMESTER (SPRING)  
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<th>Grade</th>
<th>PREREQUISITES</th>
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<td>ENG 090 or ENG 091</td>
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<tr>
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### GRAND TOTAL  
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<th>Lab</th>
<th>Offered</th>
<th>Completed</th>
<th>Grade</th>
<th>PREREQUISITES</th>
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<td><strong>57</strong></td>
<td><strong>120</strong></td>
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APPENDIX C
DELAWARE TECHNICAL COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
Jack F. Owens Campus

Special Imaging Area Objectives
(MRI, US, NM)

The student will:

A. Observe in each of the three imaging areas for an 8 hour shift during the fall and an 8 hour shift during the spring semester (RAD 260 & 261).

B. Describe the basic means of image acquisition for each imaging area.

C. Name at least one common exam performed in each imaging area.

D. Report the following for at least one exam in each area:

1. MRI:
   a. Procedure:
   b. Date of procedure:
   c. Reason for study:
   d. Protocol for study:
   e. Patient preparation:
   f. Type, dosage and route of contrast material (if applicable):
   g. Purpose for using contrast (if applicable):

2. US:
   a. Procedure:
   b. Date of procedure:
   c. Reason for study:
   d. Protocol for study:
   e. Patient preparation:

3. NM:
   a. Procedure:
   b. Date of procedure:
   c. Reason for study:
   d. Protocol for study:
   e. Patient preparation:
   f. Type, dosage and route of radioisotope injection:
   g. Purpose for using radioisotope:
Evaluation Criteria / Policies:

1. In order to achieve the maximum benefit from the special imaging areas rotations, the student is responsible for actively participating/observing in the clinical experience and completing objectives.

2. Students will demonstrate proficiency on these objectives by submitting completed objectives to the Clinical Coordinator.
Basic Principles of Computed Tomography Objectives

The student will:

A. List and briefly describe the Computed Tomography Generations.

B. List and describe the components of the CT imaging system.

C. List the CT computer data processing steps.

D. Explain the difference between reconstructing and reformatting an image.

E. Define the following terms:
   1. Algorithm
   2. Raw Data
   3. Image Data

F. Describe the application of the following terms to CT:
   1. Pixel
   2. Matrix
   3. Voxel
   4. Linear attenuation coefficient
   5. CT/Hounsfield number
   6. Partial volume averaging
   7. Window width (ww) and window level (wl)
   8. Spatial resolution
   9. Contrast resolution
   10. Noise
   11. Annotation
   12. Region of interest (ROI)
   13. Standard vs. volumetric data acquisition

G. Name the common controls found on CT operator consoles and describe how and why each is used.

H. Identify the types and appearance of artifacts most commonly affecting CT images.

I. List and describe current data storage techniques used in CT.

J. Name the radiation protection devices that can be used to reduce patient dose in CT and describe the correct application of each.
K. Observe the following exams and report the items listed.

1. CT Head:
   a. Date of procedure:
   b. Reason for study:
   c. Protocol for study:
   d. Patient preparation:
   e. Type, dosage and route of contrast material:
   f. Purpose for using contrast:

2. CT Thorax:
   a. Date of procedure:
   b. Reason for study:
   c. Protocol for study:
   d. Patient preparation:
   e. Type, dosage and route of contrast material:
   f. Purpose for using contrast:

3. CT Abdomen:
   a. Date of procedure:
   b. Reason for study:
   c. Protocol for study:
   d. Patient preparation:
   e. Type, dosage and route of contrast material:
   f. Purpose for using contrast:

**Evaluation Criteria / Policies:**

A. In order to achieve the maximum benefit from the computed tomography rotation, the student is responsible for actively participating/observing in the clinical experience and completing objectives.

B. Students will demonstrate proficiency on these objectives by submitting completed objectives to the Clinical Coordinator.

February 2008/May 2009
Evening Shift Objectives
Student Clinical Rotation
12:30-9:00p.m.

The student will:

1. Develop teamwork skills by assisting staff with smooth operations during the evening hours.

2. Demonstrate independent judgment such as prioritizing radiographic examinations, and modifying procedures due to patient condition.

3. Demonstrate knowledge of the flow of radiographic procedures that differ during evening assignments.

4. Exhibit versatility in technical capabilities by performing a variety of radiographic examinations under direct or indirect supervision in accordance with progress in competency program.

5. Participate in the performance of examinations on ER/Trauma patients. (Trauma Codes - with direct supervision).

6. Participate in the performance of routine radiographic examinations on non-trauma patients.

7. Exhibit speed, as well as, accuracy in the performance of radiographic examinations commiserate with experience.

8. Report to clinic appropriately equipped and attired as defined by the student handbook.

9. Participate in evening hour assignment from start of shift to completion of shift.

Evaluation Criteria / Policies:

1. In order to achieve the maximum benefit from the evening shift rotation, the student is responsible for actively participating in the clinical experience and completing objectives.

2. Students will demonstrate proficiency on these performance objectives by submitting a completed evaluation rubric to the Clinical Coordinator that has been signed by the supervising technologist during the evening rotation.

Evening Shift Objectives 5/1/09
## CLINIC POSITIONING OBJECTIVES EVALUATION FORM

**Radiologic Technology Program**  
**Delaware Technical Community College – Owens Campus**

**Student:** __________________  
**Signature:** __________________

**Evaluator:** __________________  
**Signature:** __________________

**Procedure:** __________________  
**Grade:** __________________

**Patient / Exam Number:** __________  
**Date:** __________

<table>
<thead>
<tr>
<th>Preparation A</th>
<th>0</th>
<th>2</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Properly interprets exam request</td>
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<tr>
<td>2. Provides appropriate image receptors, positioning aids, etc.</td>
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<tr>
<td>3. Prepares appropriate contrast media</td>
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<tr>
<td>4. Has patient properly gown (removes appropriate articles of clothing, etc.)</td>
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<tr>
<td>5. Assists patient in a safe manner</td>
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<tr>
<td>6. Assesses patient condition and takes appropriate action</td>
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<td></td>
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<tr>
<td>7. Assists physician and/or technologist as needed (vital signs, administration of contrast, etc.)</td>
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<tr>
<td>8. Communicates appropriately with the patient</td>
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<tr>
<td>9. Completed in a timely manner expected at his or her level</td>
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<table>
<thead>
<tr>
<th>Procedure B</th>
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</thead>
<tbody>
<tr>
<td>1. Sets up the control panel for manual / AEC exposures</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Manipulates tube, table, and bucky locks appropriately (CR/DR/Mobile)</td>
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<tr>
<td>3. Selects appropriate image receptor / FOV and places properly</td>
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<tr>
<td>4. Follows department protocol for the exam</td>
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<tr>
<td>5. Positions the patient properly</td>
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<tr>
<td>6. Properly aligns the tube, part, and IR</td>
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<tr>
<td>7. Gives appropriate breathing instruction</td>
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<table>
<thead>
<tr>
<th>Radiation Protection C</th>
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<tbody>
<tr>
<td>1. Uses gonadal shielding when possible</td>
<td>A / F</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Utilizes ALARA principles (shields self, time, distance, appropriately collimates, etc.)</td>
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<tr>
<td>3. Asks women of childbearing age about the possibility of pregnancy</td>
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<table>
<thead>
<tr>
<th>Image/Exam Evaluation D</th>
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<tbody>
<tr>
<td>1. Satisfactory exposure reference numbers</td>
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<tr>
<td>2. Evidence of appropriate collimation</td>
<td></td>
<td></td>
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<tr>
<td>3. Appropriately utilizes computerized technology to access information</td>
<td></td>
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<tr>
<td>4. Identifies anatomy necessary for the study</td>
<td></td>
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<tr>
<td>5. L/R marker and student ID clearly identified on images</td>
<td>A / F</td>
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</tr>
<tr>
<td>6. Properly orients images</td>
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<tr>
<td>7. Clearly explains procedure</td>
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<tr>
<td>8. Critiques images for improvement of overall radiographic quality as appropriate</td>
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</table>

**PEDIATRIC STUDY:** YES ___ NO___  
**TRAUMA STUDY:** YES ___ NO___

Comments: ____________________________________________________________

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GRADING INSTRUCTIONS:

FOR EACH ITEM SELECT THE APPROPRIATE NUMBER USING THE EVALUATION CRITERIA BELOW:

2 = EXCELLENT: Performance level is high, tasks completed correctly, with confidence and in a timely manner.

0 = BELOW STANDARD: Task was not performed, or the student needed extensive assistance, or performance was not acceptable.

ITEMS ARE DIVIDED INTO FOUR CATEGORIES AS FOLLOWS:

A = Preparation: Consider the student’s patient management skills and ability to perform appropriately.

B = Procedure: Consider the student’s knowledge of the mechanics of the examination as well as his or her performance ability.

C = Radiation Protection: Consider the student’s radiation safety habits. Does he or she try to minimize the dose received by the patient AND him or herself; applying the ALARA principle?

D = Image Evaluation: Consider the diagnostic quality of the radiograph. Also take into account the student’s ability to critique his or her work.

AUTOMATIC POINT DEDUCTIONS: The point values listed below are deducted from the FINAL grade if the following is checked:

- 5 pts for one repeat

AUTOMATIC FAILURE: The evaluation should be discontinued and the student given a grade of “0” if any of the following are checked:

- wrong patient
- failure to shield appropriately
- more than one repeat
- attempted wrong exam or wrong side
- patient’s safety is in jeopardy
- anatomical markers/student I.D. not identifiable on all images
- incorrectly marked image(s)

SCORING: To obtain the final grade divide the total number of points earned by the total number of points possible (this will change from evaluation to evaluation because not all items will always be applicable) and then make any necessary automatic point deductions. Minimum passing grade is 85%.

All objectives completed under simulated conditions will receive a maximum grade of 85%.

VOIDING A COMPETENCY: If in the opinion of college faculty reviewing a completed competency evaluation form, there are significant deficits, the competency may be voided.

Effective Fall 2008
Rev. 9/5/08, 7/13/12, 12/10/15, 6/3/16
GENERAL GUIDELINES
FOR COMPLETING POSITIONING OBJECTIVE EVALUATIONS

Completed Clinic Positioning Objective Evaluation Forms are legal documents. The evaluator and student may be held legally responsible for the accuracy of these documents. Also, to maintain the quality of clinical education, patient safety and continuity of grading, the following guidelines are to be followed:

1. Competency evaluations must be written at the time the Positioning Objective is performed. It is not acceptable for the evaluator to “write it up later”.

2. When a competency evaluation has begun, the form must be completed. This is to be done even if the student was given an automatic failure due to any of the items listed on the back of the form under “Automatic Failure” or failure to achieve a grade of 85%. The completed form must be submitted to the program indicating the reasons for failure. It is not acceptable for the evaluator to disregard completing the competency form simply because the student failed to pass the competency.

3. The technologist whose name appears on the “Evaluator” line must be directly supervising the student during the entire exam (this means be physically present).

4. Only ARRT registered technologists that have attended a technologist inservice/program update are permitted to complete the Clinic Positioning Objective Evaluation Forms.

5. Prompting students is not permitted. If students require any prompting during the exam, the competency must be graded accordingly. For example, if the protocol for trauma knee requires AP, obliques, lateral, tunnel and a tangential projection, but the student needs to be prompted to do the tunnel, it should be graded as if the student did not do the tunnel.

6. When a digital image appears on the monitor, it is considered the same as “hard copy film” and is graded as such. For example, deleting or manipulating the image for any reason is considered a repeat.

7. Student L/R markers and I.D. (Item D5) must be identified on all images and appropriately placed. This applies to all images the student actively assists with or performs under indirect or direct supervision.

8. ALL REPEATS are performed under direct supervision.

Note: College faculty is ultimately responsible for the final grades of all competencies and the clinical grading, as a whole. If competencies are reviewed by faculty and it is determined that the competency was not graded in accordance with the grading criteria, the competency grade may be lowered or voided. Faculty would then counsel the student regarding grade changes and discuss grading with the clinical instructor at the facility. If in the opinion of college faculty the student is not consistently performing exams under indirect supervision once competency is achieved, the student may be required to be reevaluated for any exam the faculty deems necessary. If the clinical instructor at the facility reviews competencies and determines that the grade should be lowered or the competency voided, this is to be discussed with college faculty first. A decision will be made regarding the grading with the clinical instructor and college faculty.
SPECIFIC GUIDELINES
FOR COMPLETING POSITIONING OBJECTIVE EVALUATIONS

NOTE: In cases where General and Specific guidelines as outlined in this document are not followed, the completed competency may be voided by the program. This means the competency must be reevaluated, not simply rewritten.

STUDENT LINE:
The “Student” line and the “Patient/Exam Number” line are the only lines the student is permitted to write on.

PROCEDURE LINE:
UNLESS TWO COMPLETE SEPARATE EXAMS ARE ORDERED, ONLY ONE COMPETENCY IS PERMITTED TO BE GRADED FOR EACH EXAM. For example, if a student performs a foot on a 5 year old, it could be documented as an “extremity age 6 years or younger” or “foot” competency; one or the other, not both. Another example would be, if a “knee” exam is ordered and the protocol includes a patellar projection then either a “knee” OR “patella” competency is evaluated, not both.

What is written on the “Procedure” line is important and is the determinant for which competency will be documented as being completed. The exact terminology indicated on the check-off list is required. If an exam is written on the “Procedure” line that does not duplicate what appears on the check-off list, the competency will not be accepted.

When one projection is written on the “Procedure” line, for example “Patella” or “Y” projection, all projections required by protocol for the entire study will be evaluated. For example, if “Patella” is written on this line, the AP, lateral, oblique and tunnel projections are also evaluated (if that is the protocol), even if the student has previously achieved competency on a knee study.

N/A: If an item does not apply for the exam being evaluated, mark an N/A for that item.

GRADING:
A “2” is Excellent. It indicates that the student’s performance level is high and tasks are completed correctly with confidence in a timely manner. Please grade students according to their level of proficiency and competency.

COMMENTS:
When a student needs constructive criticism or tips for improvement, please document in the comments section. Any item receiving a “0” must have documentation for reasons of Below Standard performance.

AUTOMATIC FAILURE:
Items marked on the back of the competency form as an Automatic Failure should include an explanation in the Comments section reasons for failure.

PEDIATRIC STUDY:
This item will be marked “yes” if the patient is 6 years or younger.

TRAUMA STUDY:
This item will be marked “yes” if the procedure requires modifications for performance of the exam due to traumatic injury.
Section A: Preparation

A1. PROPERLY INTERPRETS EXAM REQUEST
Student must be able to interpret the requisition to perform the competency in accordance with hospital protocol and patient diagnosis code. The student must assure that the exam request matches the order requisition.

A2. PROVIDES APPROPRIATE IMAGE RECEPTORS, POSITIONING AIDS, ETC.
All cassettes and all positioning aids, if used, must be acceptable to the evaluator without the student being prompted.

A3. PREPARES APPROPRIATE CONTRAST MEDIA
If the study requires the use of contrast media, the student must prepare the media for the exam in accordance with hospital/radiologist protocol.

A4. HAS PATIENT PROPERLY GOWNED
If a patient has undergarments/clothing that would create an artifact on the image, the student will be given a 0 for this item if the clothing articles were not removed for imaging. All articles that would interfere with the exam, create artifacts or affect patient diagnosis must be removed in order for this item to be graded a 2.

A5. ASSISTS PATIENT IN A SAFE MANNER
If patient safety was in jeopardy, it is a major infraction and an Automatic Failure should be given.

A6. ASSESSES PATIENT CONDITION AND TAKES APPROPRIATE ACTION
If patient requires assistance with moving, gowning or requires non-routine care, the student must assist in an appropriate manner. If student does not meet all patient “perceived” needs, this item should be graded a 0.

A7. ASSISTS PHYSICIAN AND/OR TECHNOLOGIST AS NEEDED (vital signs, administration of contrast, etc.)
The student must be able to anticipate the assistance required during the exam if a physician or radiologist is present to provide efficient patient care and expedite exam/procedure.

A8. COMMUNICATES APPROPRIATELY WITH THE PATIENT
The student must speak clearly in a voice that can be heard and understood by the patient at the patient’s level of cognition and age. For example, communicating patient breathing instructions too fast or slow, speaking inappropriately to the level of knowledge of the patient (pediatrics, adolescents, elderly, etc.), disregarding patient verbal/nonverbal needs, etc. should be graded a 0.

A9. COMPLETED IN A TIMELY MANNER EXPECTED AT HIS OR HER LEVEL
If the exam was done well but slower than expected at the students level of education, the grade should be a 0, NOT a 2.
Section B: Procedure

B1. SETS UP THE CONTROL PANEL FOR MANUAL / AEC EXPOSURES
If the control panel is set up correctly without prompting, the grade should be a 2. If one or more factors were set incorrectly or had to be corrected by the evaluator, the grade should be a 0.

B2. MANIPULATES TUBE, TABLE AND BUCKY LOCKS APPROPRIATELY (CR/DR/MOBILE)
If a student is hesitant or requires assistance with manipulation of equipment, this item should be graded a 0.

B3. SELECTS APPROPRIATE IMAGE RECEPTOR / FOV AND PLACES PROPERLY
For computed radiography, this means that the placement of the IR is appropriate for proper orientation of the image, once processed. For digital radiography, this means that the correct field of view and orientation of the FOV is appropriate.

B4. FOLLOWS DEPARTMENT PROTOCOL FOR THE EXAM
A student should know ALL protocols for ALL circumstances (for example: trauma, specific physician preference, etc.).

B5. POSITIONS THE PATIENT PROPERLY
Proper positioning of the patient should be performed in accordance with college instruction and acceptable “textbook” interpretation. This cannot be graded as “technologist preference” or interpreted on an individual basis.

B6. PROPERLY ALIGNS THE TUBE, PART AND IMAGE RECEPTOR
Student must be able to properly align and détente equipment unassisted.

B7. GIVES APPROPRIATE BREATHING INSTRUCTION
If the breathing instructions are inappropriate, a 0 will be given. The breathing instructions are to be in accordance with “textbook” and college instruction. For example, if an upright abdomen is being performed, the appropriate breathing instruction is to expose the patient on exhalation for proper diaphragm placement. If the hospital protocol differs, that MUST be noted on the competency form and a reason for the alteration in breathing instruction provided. Failure to do so will result in the competency being voided or lowering of the grade.
**Section C: Radiation Protection**

C1. **USES GONADAL SHIELDING WHEN POSSIBLE**
Graded 2 or Automatic Failure. If the student fails to shield appropriately, it is an Automatic Failure.

*EXCEPTION:* Specific protocol at certain facilities does not require shielding for particular exams because of radiologist preference. In these cases, the student will not be penalized for failure to shield. However, in these cases, the item should be marked N/A and not be included in grading.

C2. **UTILIZES ALARA PRINCIPLES** (shields self, time, distance, appropriately collimates, etc.)
The student must utilize all ALARA principles that are applicable to the exam being performed. If the student does not appropriately collimate, provide shielding to patient, self and others or appropriately utilize the concepts of distance and time, this item should be marked a 0.

C3. **ASKS WOMEN OF CHILDBEARING AGE ABOUT THE POSSIBILITY OF PREGNANCY**
If the student does not ask a woman of childbearing age (ages 12 through 55) about the possibility of pregnancy, the item should be given a grade of 0. If the patient is male, this item should be marked N/A.
Section D: Image / Exam Evaluation

D1. SATISFACTORY EXPOSURE REFERENCE NUMBERS
Exposure reference numbers may be affected by inappropriate technical factors, centering, collimation, tube/part/IR placement or multiple exposures per IR. If exposure reference numbers are out of range, then the student must be graded a 0 for this item, as well as, any other item causing the exposure error.

If all images show brightness and contrast (without significant quantum mottle) that result in no repeats and **NO IMPROVEMENT IS NEEDED**, this item should be graded a 2.

D2. EVIDENCE OF APPROPRIATE COLLIMATION
If the evaluator cannot see collimation on any of the images, this item should be graded a 0. A grade of 2 may be given only if evidence of collimation is seen on **ALL** images.

**NOTE**: “Evidence of Collimation” means collimation **before** manipulation. It does not refer to digital manipulation of the image after it appears on the CRT screen.

D3. APPROPRIATELY UTILIZES COMPUTERIZED TECHNOLOGY TO ACCESS INFORMATION
The student must be able to access information to proceed with the exam and navigate through the computerized technology pertinent to the exam being performed. The student must also access the appropriate patient identification and information. The student must be familiar with digital imaging software options.

D4. IDENTIFIES ANATOMY NECESSARY FOR THE STUDY
If a student can identify all anatomy requested by evaluator, a grade of 2 should be given. If a student cannot identify all anatomy requested by evaluator, a grade of 0 should be given. “All anatomy requested” should be all anatomy needed for that exam. **STUDENTS SHOULD ALWAYS BE ASKED TO IDENTIFY ANATOMY ON IMAGES.**

D5. L/R MARKER AND STUDENT ID CLEARLY IDENTIFIED ON IMAGES
All L/R markers must be anatomically correct and student I.D. must be identified on all images. If one or more L/R markers are not anatomically correct and/or the student I.D. is not clearly identified on all images, this is an automatic failure for the entire exam. For example, if you observe a student placing the L/R marker and it cannot be seen because it was placed in a high or low density area or the marker comes off during the process of positioning the tray, this also is an automatic failure. If a student does not have the markers provided to them by the program, THE STUDENT MAY NOT BE EVALUATED. There are no exceptions.

D6. PROPERLY ORIENTS IMAGES
The student must be able to properly orient the image prior to sending the study to PACS. This includes proper orientation, annotation and any other pertinent manipulation of image. If a student does not properly orient the image, a grade of 0 must be given. This is critical due to radiologist interpretation and proper diagnosis!
D7.  CLEARLY EXPLAINS PROCEDURE
The student must be able to clearly explain the exam/procedure to the patient and evaluator. The student must be able to verbalize and explain the entire procedure as though they are capable of “teaching” the exam/procedure to someone else. This includes clearly explaining the procedure to the technologist once the exam is complete during image review.

D8.  CRITIQUES IMAGES FOR IMPROVEMENT OF OVERALL RADIOGRAPHIC QUALITY AS APPROPRIATE
The student must be able to determine if proper positioning, tube-part-alignment, collimation, and technical factors were employed during the procedure. The student must be able to communicate to the supervising technologist how their images meet the appropriate evaluation criteria.
Lab Check Off and Simulation Evaluation Form
Radiologic Technology Program

Student: ____________________________
Evaluator: __________________________
Procedure: __________________________
Date: ________________ Grade: ____________

<table>
<thead>
<tr>
<th></th>
<th>Satisfactory</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Properly interprets exam request</td>
<td>_______</td>
</tr>
<tr>
<td>2.</td>
<td>Provides appropriate image receptors, positioning aids, etc.</td>
<td>_______</td>
</tr>
<tr>
<td>3.</td>
<td>Has patient properly gowned</td>
<td>_______</td>
</tr>
<tr>
<td>4.</td>
<td>Completed in a timely manner expected at his or her level</td>
<td>_______</td>
</tr>
<tr>
<td>5.</td>
<td>Sets up the control panel for manual / AEC exposures</td>
<td>_______</td>
</tr>
<tr>
<td>6.</td>
<td>Manipulates tube, table, and bucky locks appropriately</td>
<td>_______</td>
</tr>
<tr>
<td>7.</td>
<td>Selects appropriate image receptor / FOV and places properly</td>
<td>_______</td>
</tr>
<tr>
<td>8.</td>
<td>Positions the patient properly</td>
<td>_______</td>
</tr>
<tr>
<td>9.</td>
<td>Properly aligns the tube, part, and IR</td>
<td>_______</td>
</tr>
<tr>
<td>10.</td>
<td>Gives appropriate breathing instruction</td>
<td>_______</td>
</tr>
<tr>
<td>11.</td>
<td>Uses gonadal shielding when possible</td>
<td>_______</td>
</tr>
<tr>
<td>12.</td>
<td>Evidence of appropriate collimation</td>
<td>_______</td>
</tr>
<tr>
<td>13.</td>
<td>Identifies anatomy necessary for the study</td>
<td>_______</td>
</tr>
<tr>
<td>14.</td>
<td>L/R marker and student ID clearly identified on images</td>
<td>_______</td>
</tr>
<tr>
<td>15.</td>
<td>Properly orients images</td>
<td>_______</td>
</tr>
<tr>
<td>16.</td>
<td>Clearly explains procedure</td>
<td>_______</td>
</tr>
</tbody>
</table>

Comments:
GRADING INSTRUCTIONS:

SATISFACTORY: Performance level is high, tasks completed correctly, with confidence and in a timely manner.

UNSATISFACTORY: Task was not performed, or the student needed extensive assistance, or performance was not acceptable.

AUTOMATIC POINT DEDUCTIONS:
The point values listed below are deducted from the FINAL grade if the following is checked:

- 5 pts per repeat

AUTOMATIC FAILURE:
If any of the following are checked, the student will receive a grade of 0%

- failure to shield appropriately
- attempted wrong exam or wrong side
- anatomical markers/student I.D. not identifiable on all images
- incorrectly marked image(s)

SCORING: To obtain the final grade divide the total number of points earned by the total number of points possible (this will change from evaluation to evaluation because not all items will always be applicable) and then make any necessary automatic point deductions.

MAKE-UP: All failed check offs must be made up within one week for a maximum score of 75%. A second unsuccessful attempt at check off will result in a grade of 0% and will require remediation prior to documenting practices or achieving competency.
# C-ARM COMPETENCY FORM

## CLINIC POSITIONING OBJECTIVES EVALUATION FORM

Radiologic Technology Program  
Delaware Technical Community College-Owens Campus

<table>
<thead>
<tr>
<th>Student: ____________________________</th>
<th>Signature: ____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluator: __________________________</td>
<td>Signature: ____________________________</td>
</tr>
<tr>
<td>Procedure: __________________________</td>
<td>Grade: ____________________________</td>
</tr>
<tr>
<td>Patient / Exam Number: ________________</td>
<td>Date: ____________________________</td>
</tr>
</tbody>
</table>

### Preparation

<table>
<thead>
<tr>
<th>Preparations</th>
<th>0</th>
<th>2</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>A 1. Properly sets up C-arm.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Properly enters patient and procedure information.</td>
<td></td>
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<tr>
<td>3. Maneuvers C-arm safely and properly.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Identifies and operates all C-arm locks.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Procedure

<table>
<thead>
<tr>
<th>Procedure</th>
<th>0</th>
<th>2</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>B 1. Maintains a sterile field.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Properly aligns C-arm to part.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3. Operates C-arm in a timely manner as expected at his/her level.</td>
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<tr>
<td>4. Ensures operating room personnel are notified before the first exposure.</td>
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<tr>
<td>5. Communicates appropriately with physician, staff, and technologist</td>
<td></td>
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</tr>
<tr>
<td>6. Proper orientation of image as directed by physician.</td>
<td></td>
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<tr>
<td>7. Uses critical thinking skills to perform procedure</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Radiation Protection

<table>
<thead>
<tr>
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<th>0</th>
<th>2</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 1. Wears personnel monitoring device.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Appropriate placement of personnel monitoring device.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3. Wears lead apron throughout exam.</td>
<td></td>
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</tbody>
</table>

### Image Evaluation and Completion

<table>
<thead>
<tr>
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<th>0</th>
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</tr>
</thead>
<tbody>
<tr>
<td>D 1. Manipulates image density, contrast and detail.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Accesses stored images / exams.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3. Utilizes DICOM and sends images to PACS.</td>
<td></td>
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</tr>
<tr>
<td>4. Identifies necessary anatomy.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5. Annotates images appropriately.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6. Properly cleans C-arm equipment after procedure.</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Tech Comments:**

______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

**Student Self Assessment Only**

<table>
<thead>
<tr>
<th>Student Self Assessment Only</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affective Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Student feels competent with performing study independently.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Student exhibits confidence with performing study.</td>
<td></td>
<td></td>
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<tr>
<td>3. Student accepts responsibility for performing study independently in the future.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Student can identify weaknesses and/or strengths with performing study.</td>
<td></td>
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<tr>
<td>5. Student can create a plan of improvement for future studies.</td>
<td></td>
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</tr>
</tbody>
</table>

**Student Comments:**

______________________________________________________________________________________________

January 2007; March 2011, January 2016
COURSE DESCRIPTIONS

RAD105
This course introduces the fundamentals of radiologic science and its relation to healthcare. The radiographer’s role in providing patient care to all patient populations is examined. Medical ethics and law are discussed.

RAD130
This course provides the student with the knowledge and skill necessary to perform standard radiographic procedures of the chest, abdomen, upper extremity, lower extremity, shoulder girdle and pelvic girdle, as well as identification of the anatomy demonstrated. Energized laboratory experience supports the lecture portion of this course.

RAD131
This course provides the student with the knowledge and skill necessary to perform standard radiographic procedures of the bony thorax, vertebral column, urinary, biliary, and gastrointestinal systems, as well as, identification of the anatomy demonstrated. Mobile, surgical, and trauma radiography are discussed. Energized laboratory experience supports the lecture portion of this course.

RAD140
This course provides the student with an overview of radiographic principles that include radiographic physics, x-ray production, interactions with matter, and scatter radiation control relative to basic imaging.

RAD141
This course provides the student with an in-depth knowledge of radiographic principles that include image quality factors, anatomic/pathologic variances, exposure systems, and image acquisition methods.

RAD150
This course provides the student with an overview of the principles of radiation protection for the radiographer, patients, other personnel, and the public. Radiation effects on biological molecules and organisms and factors affecting biological response are also presented.

RAD160
This clinical course, the first in a series, provides the student with exposure to the practice of radiography and takes place in various diagnostic imaging departments. The student develops and refines skills in patient management, equipment manipulation, positioning, technical factors selection, and image evaluation.
RAD161
This clinical course, the second in a series, provides the student with exposure to the practice of radiography and takes place in various diagnostic imaging departments. The student develops and refines skills in patient management, equipment manipulation, positioning, technical factors selection, and image evaluation.

RAD162
This clinical course continues to provide the student with exposure to the practice of radiography and takes place in various diagnostic imaging departments. The student develops and refines skills in patient management, equipment manipulation, positioning, technical factors selection, and image evaluation.

RAD222
This course is a review of program content in preparation for the American Registry for Radiologic Technologists (A.R.R.T) examination. The student will focus on content areas that are relevant to the registry and identify areas where remediation may be necessary.

RAD240
This course provides the student with knowledge of equipment and operating principles for radiographic, fluoroscopic, and mobile imaging. Skills in digital image acquisition and processing are enhanced. Digital image display, quality control, and quality assurance are also discussed.

RAD250
This course provides the student with an introduction to the concepts of disease. Pathology, as it relates to various radiographic procedures, is discussed.

RAD260
This clinical course continues to provide the student with exposure to the practice of radiography and takes place in various diagnostic imaging departments. The student develops and refines skills in patient management, equipment manipulation, positioning, technical factors selection, and image evaluation.

RAD261
This clinical course, the final in a series, provides the student with exposure to the practice of radiography and takes place in various diagnostic imaging departments. The student develops and refines skills in patient management, equipment manipulation, positioning, technical factors selection, and image evaluation.
APPENDIX H
RADIOGRAPHY CLINICAL COMPETENCY REQUIREMENTS  
Radiologic Technology Program, Owens Campus

*Students must demonstrate competency in all 40 of the MANDATORY procedures and at least 15 of the 34 ELECTIVE procedures.  
*Students must select 1 elective procedure from the head section. 
*Students must select either upper GI or Contrast Enema plus 1 other elective from the fluoroscopy section.  
*Simulations are allowed only with permission of responsible college faculty.

Demonstration of competence must include patient identity verification, exam order verification, patient assessment, room preparation, patient management, equipment operation, technique selection, patient positioning, radiation safety, image processing, and image evaluation.

<table>
<thead>
<tr>
<th>Imaging Procedure</th>
<th>Mandatory or Elective</th>
<th>Date Completed</th>
<th>Patient or Simulated</th>
<th>Competency Grade</th>
<th># of Attempts</th>
<th>Competence Verified By</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Chest and Thorax</strong></td>
<td></td>
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<tr>
<td>Chest Routine</td>
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<tr>
<td>Chest AP (wheelchair or stretcher) to include lateral</td>
<td>M</td>
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<tr>
<td>Ribs</td>
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<tr>
<td>Chest Lateral Decubitus</td>
<td>E</td>
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<tr>
<td>Sternum</td>
<td></td>
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<tr>
<td>Upper Airway (Soft-Tissue Neck)</td>
<td>E</td>
<td></td>
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<tr>
<td><strong>Upper Extremity</strong></td>
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<tr>
<td>Thumb or Finger</td>
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<tr>
<td>Hand</td>
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<tr>
<td>Wrist</td>
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<tr>
<td>Forearm</td>
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<tr>
<td>Elbow</td>
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<tr>
<td>Humerus</td>
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<tr>
<td>Shoulder</td>
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<tr>
<td>Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*</td>
<td>M</td>
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<tr>
<td>Clavicle</td>
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<tr>
<td>Scapula</td>
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<tr>
<td>AC Joints</td>
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<tr>
<td>Trauma: Upper Extremity (Nonshoulder)*</td>
<td>M</td>
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<tr>
<td><strong>Lower Extremity</strong></td>
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<tr>
<td>Foot</td>
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<tr>
<td>Ankle</td>
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<tr>
<td>Knee</td>
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<tr>
<td>Tibia-Fibula</td>
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<tr>
<td>Femur</td>
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<tr>
<td>Trauma: Lower Extremity *</td>
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<tr>
<td>Patella</td>
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<tr>
<td>Calcaneus (Os Calcis)</td>
<td>E</td>
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<td>Toes</td>
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<td>Imaging Procedure</td>
<td>Mandatory or Elective</td>
<td>Date Completed</td>
<td>Patient or Simulated</td>
<td>Competency Grade</td>
<td># of Attempts</td>
<td>Competence Verified By</td>
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<td>--------------------------------------------------------</td>
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</tr>
<tr>
<td>Head - Students must select at least one elective procedure from this section.</td>
<td></td>
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</tr>
<tr>
<td>Skull</td>
<td>E</td>
<td></td>
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<tr>
<td>Paranasal Sinuses</td>
<td>E</td>
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</tr>
<tr>
<td>Facial Bones</td>
<td>E</td>
<td></td>
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<tr>
<td>Orbits</td>
<td>E</td>
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<tr>
<td>Zygomatic Arches</td>
<td>E</td>
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<tr>
<td>Nasal Bones</td>
<td>E</td>
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<tr>
<td>Mandible</td>
<td>E</td>
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<tr>
<td>Temporomandibular Joints</td>
<td>E</td>
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</table>

<table>
<thead>
<tr>
<th>Imaging Procedure</th>
<th>Mandatory or Elective</th>
<th>Date Completed</th>
<th>Patient or Simulated</th>
<th>Competency Grade</th>
<th># of Attempts</th>
<th>Competence Verified By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spine and Pelvis</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Cervical Spine</td>
<td>M</td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Thoracic Spine</td>
<td>M</td>
<td></td>
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</tr>
<tr>
<td>Lumbosacral Spine</td>
<td>M</td>
<td></td>
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<tr>
<td>Cross-Table (Horizontal Beam) Lateral Spine</td>
<td>M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pelvis</td>
<td>M</td>
<td></td>
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</tr>
<tr>
<td>Hip</td>
<td>M</td>
<td></td>
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<tr>
<td>Cross Table (Horizontal Beam) Lateral Hip</td>
<td>M</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Sacrum and/or Coccyx</td>
<td>E</td>
<td></td>
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<tr>
<td>Scoliosis Series</td>
<td>E</td>
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</tr>
<tr>
<td>Sacroiliac Joints</td>
<td>E</td>
<td></td>
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</tr>
</tbody>
</table>

| Abdomen                                                |                       |                |                      |                  |              |                        |
| Abdomen Supine (KUB)                                   | M                     |                |                      |                  |              |                        |
| Abdomen Upright                                        | M                     |                |                      |                  |              |                        |
| Abdomen Decubitus                                      | E                     |                |                      |                  |              |                        |
| Intravenous Urography                                   | E                     |                |                      |                  |              |                        |

<table>
<thead>
<tr>
<th>Fluoroscopy Studies - Students must select either Upper GI or Contrast Enema plus one other elective procedure from this section.</th>
<th></th>
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<tr>
<td>Upper GI Series (Single or Double Contrast)</td>
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<tr>
<td>Contrast Enema (Single or Double Contrast)</td>
<td>E</td>
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<tr>
<td>Small Bowel Series</td>
<td>E</td>
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<tr>
<td>Esophagus</td>
<td>E</td>
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<tr>
<td>Cystography/Cystourethrography</td>
<td>E</td>
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<tr>
<td>ERCP</td>
<td>E</td>
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<tr>
<td>Myelography</td>
<td>E</td>
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<tr>
<td>Arthrography</td>
<td>E</td>
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<tr>
<td>Hysterosalpingography</td>
<td>E</td>
<td></td>
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<tr>
<td>Imaging Procedure</td>
<td>Mandatory or Elective</td>
<td>Date Completed</td>
<td>Patient or Simulated</td>
<td>Competency Grade</td>
<td># of Attempts</td>
<td>Competence Verified By</td>
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<tr>
<td>Mobile C-Arm Studies</td>
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<tr>
<td>C-Arm Procedure (Requiring Manipulation to obtain more than one projection)</td>
<td>M</td>
<td></td>
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<tr>
<td>C-Arm Procedure (Requiring Manipulation to obtain more than one projection)</td>
<td>M</td>
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<tr>
<td>Surgical C-Arm Procedure (Requiring Manipulation around a sterile field)</td>
<td>M</td>
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<tr>
<td>Surgical C-Arm Procedure (Requiring Manipulation around a sterile field)</td>
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<tr>
<td>Chest</td>
<td>M</td>
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<tr>
<td>Abdomen</td>
<td>M</td>
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<tr>
<td>Orthopedic</td>
<td>M</td>
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<tr>
<td>Pediatric Patient (age 6 or younger)</td>
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<tr>
<td>Chest Routine</td>
<td>M</td>
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<tr>
<td>Chest Routine (pigg-o-stat)</td>
<td>M</td>
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<tr>
<td>Upper Extremity</td>
<td>E</td>
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<tr>
<td>Lower Extremity</td>
<td>E</td>
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<td>Abdomen</td>
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<tr>
<td>Mobile Study</td>
<td>E</td>
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<tr>
<td>Geriatric Patient (Physically or Cognitively Impaired as a result of aging; age 75 or older)</td>
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<tr>
<td>Chest Routine</td>
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<tr>
<td>Upper Extremity</td>
<td>M</td>
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<tr>
<td>Lower Extremity</td>
<td>M</td>
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</tbody>
</table>

* Trauma is considered a serious injury or shock to the body. Modifications may include variation in positioning, minimal movement of the body part, etc.

Note: The ARRT requirements specify that certain clinical procedures may be simulated. Simulations must meet the following criteria: (a) the student is required to competently demonstrate skills similar as circumstances permit to the cognitive, psychomotor, and affective skills required in the clinical setting; (b) the program director is confident that the skills required to competently perform the simulated procedure will transfer to the clinical setting; and, if applicable, the student must evaluate related images. Examples of acceptable simulation include: demonstrating CPR on a mannequin; positioning a fellow student for a projection without actually activating the x-ray beam, and performing venipuncture by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.
General Patient Care

**Requirement:** Candidates must demonstrate competence in all six patient care activities listed below. The activities should be performed on patients; however, simulation is acceptable (see endnote) if state or institutional regulations prohibit candidates from performing the procedures on patients.

<table>
<thead>
<tr>
<th>General Patient Care</th>
<th>Date Completed</th>
<th>Verified By</th>
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</thead>
<tbody>
<tr>
<td>CPR Certified</td>
<td></td>
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<tr>
<td>Vital Signs (blood pressure, temperature, pulse, respiration, pulse oximetry)</td>
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<tr>
<td>Sterile and medical aseptic technique</td>
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<tr>
<td>Venipuncture</td>
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<tr>
<td>Transfer of patient</td>
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<tr>
<td>Care of patient medical equipment (e.g., oxygen tank, IV tubing)</td>
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</table>

<table>
<thead>
<tr>
<th>Special Imaging Areas</th>
<th>Date</th>
<th>Objectives completed</th>
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<tr>
<td>CT (Fall - RAD 260)</td>
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<td>CT (Fall - RAD 260)</td>
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<td>CT (Fall - RAD 260)</td>
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<td>CT (Spring - RAD 261)</td>
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<td>CT (Spring - RAD 261)</td>
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<td>NM</td>
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<td>MRI</td>
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<tr>
<td>US</td>
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</table>

<table>
<thead>
<tr>
<th>Evening Rotation</th>
<th>Date</th>
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<tbody>
<tr>
<td>Fall</td>
<td></td>
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<tr>
<td>Spring</td>
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</tbody>
</table>
The following minimum and maximum number of practices/competencies that MUST be completed each semester are placed in parentheses for each clinical course. Failure to complete the minimum number of practices/competencies will result in an “F” grade for the clinical course. Students will not be eligible to progress in the program if the minimum number of required clinical competencies are not completed by the end of each semester. The exams listed under each clinical course are procedures/projections that will be covered in the procedures courses by the end of each semester. The student is responsible for actively seeking opportunities for completing practices/competencies as outlined.

**RAD 160 – 1st Fall (41 Practice Exams)**
- Chest Routine (15) (minimum of 2 must be AP WC/stretcher to include lateral)
- Mobile Chest (10)
- Abdomen Supine (KUB) (3)
- Abdomen Upright (3)
- Upper Extremities (5)
- Lower Extremities (5)

**RAD 162 – Summer (min 22/max 25)**
- Extremities
- Pelvis/Hip
- Chest Routine Pediatric
- Spine
- Mobile Orthopedic
- Mobile Abdomen
  - Surgical
  - Fluoroscopy electives

**RAD 161 – 1st Spring (min 12/max 15)**
- Chest Routine
- Mobile Chest
- Abdomen Supine (KUB)
- Abdomen Upright
- Extremities
- Pelvis/Hip

**RAD 260 – 2nd Fall (min 12/ max 15)**
- Chest with pigg-o-stat
- Ribs
- Surgical
- Head elective

**RAD 261 – 2nd Spring Semester**
Refine skills and complete all remaining competencies: mandatory and electives. Failure to do so will result in an “F” for RAD 261. Elective competencies will be completed throughout all semesters.

*Effective May 2008; August 2011
Revised: 05/04/09; 06/01/10; 05/04/11; 06/03/13; 05/27/15; 2016; 2017*
APPENDIX I
Radiologic Technology – MRI Screening Questionnaire

Student Name: __________________________ Date: __________________________

MR images are acquired utilizing a very strong magnetic field and radiofrequencies. The MR system’s magnet is always on, and therefore poses potential workplace hazards. Radiofrequencies are capable of heating metal objects, on or inside of patients, and may cause burns.

Students may potentially access the MR environment very early in their education. To assure safety, answer the following questions to the best of your knowledge.

---

**IMPORTANT! Do you have any of the following?**

<table>
<thead>
<tr>
<th>Check Answer</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Cardiac Pacemaker</td>
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<tr>
<td>Neurostimulator</td>
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<td>Artificial heart valve</td>
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<td>Insulin Pump</td>
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<td>Hearing aid</td>
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<tr>
<td>Cochlear Implant</td>
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<tr>
<td>Defibrillator</td>
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<tr>
<td>Brain surgical clips</td>
<td></td>
<td></td>
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<tr>
<td>Carotid Surgical Clips</td>
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<td></td>
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<tr>
<td>Metal fragments in or removed from eye</td>
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<td></td>
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<tr>
<td>Joint Replacement</td>
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<tr>
<td>Dentures / Partial</td>
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<tr>
<td>Artificial eye</td>
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<tr>
<td>Medicine Patch</td>
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<td>Body piercing</td>
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<tr>
<td>Pregnancy</td>
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<tr>
<td>IUD (intrauterine device)</td>
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<tr>
<td>Are you a nursing mother?</td>
<td></td>
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<tr>
<td>Any other Metal in body / bullets, shrapnel, implants, Prosthetic limbs or devices</td>
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</tr>
</tbody>
</table>

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**DO NOT ENTER THE SCANNING ROOM WITH ANY OF THE FOLLOWING:**

- Wallets
- Credit Cards
- Watches
- Hair pins
- Cell phones
- Electronic Devices
- Jewelry

*(A secured area is available for these items)*

---

I have read the above questions and answered them to the best of my knowledge. I understand that failure to disclose the presence of any of the above listed items could seriously jeopardize my safety, or the safety of others.

X __________________________ Date, Time __________________________

This form has been reviewed with the student.

Clinical Coordinator signature __________________________ Date __________

*Areas marked “yes” have been discussed with the appropriate clinician. _____ (Initials)*
Code of Ethics

1. The radiologic technologist conducts herself or himself 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 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 purpose 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.

Revised and adopted by the American Society of Radiologic Technologists and the American Registry of Radiologic Technologists, February 2003
Respect
Your instructor has the rights and responsibilities to protect all students’ rights to a productive learning environment.

- DO speak in a soft voice
- DO use kind and courteous words
- DO use a positive attitude
- DO be polite in your speech and manners
- DO turn off your cell phone and all other electronic devices

DON’T tell your instructor how to teach his or her class
DON’T interrupt others
DON’T dominate classroom discussion
DON’T text message during class
DON’T pack, zip, and close your materials before the class or lecture is completely finished
DON’T chat with your neighbor

Listening is as important as talking!

Performance
There are consequences to your choices!

- DO submit organized, neat, and completed work
- DO read and follow instructions
- DO take notes during class
- DO communicate with your classmates (talk about assignments and coursework)

DON’T work on assignments with classmates (unless instructed)
DON’T submit crumbled paper and messy work

Preparation

- DO come to class prepared by bringing ALL textbooks, paper, pens, and pencils
- DO attend to personal needs before entering the classroom
- DO complete ALL homework assignments for the scheduled class
- DO submit work on time

DON’T complete other assignments during class
DON’T complete homework during class
DON’T submit late work

“Success is simple. Do what is right, the right way, at the right time.”

-Arnold Glasgow

Distributed by: Developmental Studies Department
Created: January 2007
APPENDIX L
<table>
<thead>
<tr>
<th>COURSE</th>
<th>REQUIRED TEXTBOOKS</th>
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</thead>
<tbody>
<tr>
<td>RAD 130</td>
<td>Radiographic Procedures I&lt;br&gt;Merrills Atlas of Radiographic Positioning &amp; Procedures by Ballinger, Volumes 1, 2, and 3&lt;br&gt;Radiographic Anatomy, Positioning &amp; Procedures Workbook by Hayes</td>
</tr>
<tr>
<td>RAD 140</td>
<td>Principles of Radiographic Imaging I&lt;br&gt;Radiographic Imaging &amp; Exposure by Terri Fauber&lt;br&gt;Principles of Radiographic Imaging “An Art and A Science” by Richard Carlton and Arlene Adler</td>
</tr>
<tr>
<td>RAD 160</td>
<td>Clinical Radiography I&lt;br&gt;Same Requirement as RAD 130&lt;br&gt;Student Handbook, Owens Campus</td>
</tr>
<tr>
<td>RAD 105</td>
<td>Intro to Patient Care &amp; Radiography&lt;br&gt;Patient Care in Radiography with an Introduction to Medical Imaging by Daly, Ehrlich and McCloskey</td>
</tr>
<tr>
<td>RAD 131</td>
<td>Radiographic Procedures II&lt;br&gt;Same Requirement as RAD 130</td>
</tr>
<tr>
<td>RAD 141</td>
<td>Principles of Radiographic Imaging II&lt;br&gt;Same Requirement as RAD 140</td>
</tr>
<tr>
<td>RAD 150</td>
<td>Radiation Protection &amp; Biology&lt;br&gt; Radiation Protection in Medical Radiography by Visconti and Ritenour</td>
</tr>
<tr>
<td>RAD 161</td>
<td>Clinical Radiography II&lt;br&gt;Same Requirement as RAD 130</td>
</tr>
<tr>
<td>RAD 162</td>
<td>Clinical Radiography III&lt;br&gt;Same Requirement as RAD 130</td>
</tr>
<tr>
<td>RAD 230</td>
<td>Radiographic Procedures III&lt;br&gt;Same Requirement as RAD 130</td>
</tr>
</tbody>
</table>
RAD 240 Radiographic Imaging Equipment
Radiographic Imaging & Exposure by Terri Fauber

Principles of Radiographic Imaging “An Art and A Science” by Richard Carlton and Arlene Adler

RAD 260 Clinical Radiography IV
Same Requirement as RAD 130

RAD 222 Selected Topics
Reference all program required textbooks

RAD 250 Radiographic Pathology
Radiographic Pathology for Technologists by Mace and Kowalczyk

RAD 261 Clinical Radiography V
Same Requirement as RAD 130

*Recommended textbooks will be announced by individual instructors.*
APPENDIX M
DELAWARE TECHNICAL COMMUNITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM

Organizational Chart

Vice President / Campus Director
Bobbi Barends, Ph.D.

Vice President Academic Affairs
Justina Sapna, M.Ed.

Dean of Instruction
Christy Moriarty, M.Ed.

Program Director
Kristie Bentley, M.Ed., RT(R)(CV)

Didactic Instructor
Morgan Jones, B.S., RT(R)(M)

Clinical Coordinator
Terri Hitchens, M.Ed., RT(R)

Clinical Instructors

Clinical Preceptors
June 16, 2017

Copyright materials and any Delaware Technical Community College documents have been included in this Handbook at no charge.

All policies and documents included in this handbook are reviewed and revised with each new addition. Revisions that are made throughout the year are reviewed with all students and staff. Updates are provided to students and staff, as appropriate.

Kristie Bentley
Program Director
The contents of this 2017-18 Radiologic Technology Student Handbook have been reviewed with me. I understand the policies and procedures contained within, and the impact policy violations will have on my grade and/or enrollment in the Radiologic Technology program.

Print Name ______________________________

Sign Name ______________________________

Date ______________________________