



**Charles R. Drew University of Medicine and
Science**

CDU

College of Science and Health

Radiologic Technology Program

Program Policies and Procedures Manual

2016 - 2017

**Charles R. Drew University of Medicine and Science
College of Science and Health**

**Radiologic Technology Program
Policies and Procedures Manual**

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Welcome

Welcome to the Radiologic Technology Program at Charles R. Drew University of Medicine and Science, College of Science and Health. Your education should be a rewarding experience leading to a satisfying and challenging career. Specific policies have been developed to foster your educational growth and workplace preparedness. These are meant to help you to make responsible decisions. If at any time you feel uncertain about program expectations, contact the Program Director or Clinical Coordinator at CDU for clarification.

Purpose

The purpose of this Policies and Procedures Manual is to provide the student with useful information regarding the organization and policies, as well as the academic and clinical components of the Radiologic Technology Program at Charles R. Drew University of Medicine and Science, College of Science and Health. At CDU it is felt that if students are given an incentive to learn, and guidance toward the grasp of principles underlying the art and science of Radiologic Technology, they have the opportunity to build toward a solid foundation for their future careers.

This handbook is designed to help the student who participates in the Radiologic Technology Program specifically. It can be used as a reference for students, faculty and staff. In general, this handbook presents the policies and procedures of the Radiologic Technology Program at this college.

Observation of the Rules and Regulations

Students who are enrolled in the Radiologic Technology Program are responsible to observe University rules and regulations as stated in the current University Catalog. In addition, the rules and regulations of each clinical education center must be observed. Although located separately, the clinical education centers are considered an integral part of the college campus.

The Radiologic Technology Program Faculty and University reserve the right to change, delete, supplement, or otherwise amend at any time the information, rules, and policies contained herein without prior notice. Changes shall go into effect whenever the proper authorities so determine and shall apply to present and prospective students.

It is the students' responsibility to secure a University Catalog. Students entering the Radiologic Technology Program must complete the required curriculum as stated in the University Catalog in effect at the time of acceptance.

Nondiscrimination

The Radiologic Technology Program adheres to the following University Policy: Charles R. Drew University does not discriminate on the basis of race, creed, ethnicity, color, sex, religion, national origin, marital status, sexual orientation, mental or physical disabilities, or age in any of its policies, practices, or procedures.

Charles R. Drew University of Medicine and Science
Radiologic Technology Program

SECTION I: UNIVERSITY AND PROGRAM OVERVIEW

I. The Radiologic Technology Program Description and Objectives

The Radiologic Technology Program at CDU is an accredited, associate degree program that provides equitable, accessible, relevant, and high-quality education. Through various delivery methods, the program prepares qualified students to apply radiation on humans in a health care setting in order to produce diagnostic images using radiographic equipment and imaging systems under the direction of a physician and certified radiologic technologists. By providing a comprehensive program of competency-based instruction in radiologic technology, the program promotes an atmosphere of life-long learning for the purpose of graduating competent radiographers able to function as radiologic science technologists in underserved and other health care communities.

II. Institutional Mission Statement

“To conduct education, research and clinical services in the context of community engagement to train health professionals who promote wellness, provide care with excellence and compassion, and transform the health of underserved communities.”

III. Program Mission Statement

“To educate entry-level radiologic technologists who assist in providing high quality healthcare with excellence and compassion by producing diagnostic images through the knowledge and application of radiologic science while maintaining the patient as their primary focus, and by administering the necessary radiation protection measures and quality patient care.”

IV. Program Goals and Student Learning Outcomes

Goal 1: Graduates will be clinically competent.

Student Learning Outcomes:

Students will apply accurate positioning skills
Student will select appropriate technical factors
Student will use appropriate radiation protection measures

Goal 2: Graduate students who will be able to demonstrate communication skills.

Student Learning Outcomes:

Students will demonstrate written communication skills
Students will demonstrate oral communication skills

Goal 3: Graduate students will demonstrate problem solving and critical thinking skills

Student Learning Outcomes:

Students will successfully complete all laboratory experiments
Students will adapt to non-routine positioning situations

Goal 4: Graduate students who are ethical and professional.

Student Learning Outcomes:

Graduates will demonstrate professionalism upon employment
Students will learn how to protect patient information
Students will develop a professional portfolio

V. Measurable Objectives

The measurable objectives for the radiography program are to achieve, within a 5 year period:

1. Student retention rate of at least 85%
2. Student attrition rate of not more than 15%
3. Graduation rate of at least 85%
4. Course completion rate of at least 85%
5. Average credentialing examination pass rate of at least 85%
6. Job placement rate of 85% within 12 months of graduation for graduates seeking employment.

VI. Accreditations/Approval/Affiliation Sponsoring Institution Accreditation

Western Association of Schools and Colleges (WASC)

Program Accreditation:

Joint Review Committee on Education in Radiologic Technology (JRCERT)

20 North Wacker Drive, Suite 2850

Chicago, Illinois 60606-3182

Tel: (312) 704-5300 Fax: 312.704.5304 Web Site <http://www.jrcert.org>

The Radiologic Technology Program has been continually accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) since 1971. The JRCERT affirms that the accreditation process offers both a means for public assurance of a program meeting accreditation standards and a stimulus to programmatic improvement. The program effectiveness data is available on the JRCERT website at <http://www.jrcert.org> and on the program website.

The JRCERT standards for an accredited educational program in radiologic sciences require the program to demonstrate clarity and appropriateness of its purpose as a postsecondary educational program; to protect learner and public; to demonstrate adequate human, financial, and physical resources effectively organized to accomplish those purposes; to document its effectiveness in accomplishing its purposes; and to provide assurance that it can continue to meet accreditation standards. Refer to appendix A.

Approval

American Registry of Radiologic Technologists (ARRT)

1255 Northland Drive

St Paul, Minnesota 55120-1144

Telephone: 651-687.0048/Web Site: <http://www.arrt.org>

Department of Public Health (CDPH) Radiologic Health Branch (RHB)

MS 7610

P.O. Box 997414

Sacramento, California

Affiliation

American Society of Radiologic Technologists (ASRT)
15000 Central Avenue SE
Albuquerque, New Mexico 87123-3917
Telephone: 505.298.4500 or 800.444.2778/Fax: 505.298.5063
Web Site: <http://www.asrt.org>

VII. Advisory Committee

The Radiologic Technology Program's Advisory Committee functions in accordance with institutional guidelines that support the missions of the institution and program. The committee is representative of clinical education facilities, academic interests, institutions, radiography students, and/or communities of interest.

The committee shall meet at least once a year. The committee chairperson distributes the agenda and the minutes are recorded, filed and shared. The Advisory Committee's responsibilities include program planning, evaluation, assessment review and external validation. The committee acts as an information resource. The committee periodically reviews the curriculum, program issues, and ensure that new techniques and procedures are reflected, revisits the program goals and outcomes, assists in exit and postgraduate evaluations of student capabilities, serves in a public relations capacity with the medical and allied health communities, and assists in the placement of graduates.

VIII. Certifications Requirements

Upon completion of all graduation requirements of the University and Program, students are eligible candidates for an Associate of Science degree. Upon passing a final comprehensive examination with a minimum 85% students may apply for the national certification in radiography administered by the American Registry of Radiologic Technologists (ARRT). ARRT examinations are available at Sylvan Technology Centers throughout the country. Graduates passing the ARRT examination are registered in radiography. The ARRT requires candidates to be of good moral character as well as graduates of an accredited program. In the ARRT Examinee Handbook, the ARRT states that a charge of a misdemeanor or felony indicates a lack of good moral character for Registry purposes. Those convicted of such a crime may be eligible for registration only if deemed appropriate by the ARRT. The ARRT may be contacted at (651) 687-0048 for individual consultation. Appendix C contains excerpts from the Examinee Handbook. The Program, College, and University are not responsible if a graduate is found ineligible to take the ARRT examination because of a conviction and will receive a letter for signature of attestation of this policy.

Graduates are required to apply to the State of California Radiologic Health Branch for state certification in order to work in California as a Certified Radiologic Technologist (CRT).

IX. Program Faculty

Eugene Hasson, MS, R.T., (R)	Program Director
Noel Rollon, BS, R.T., (R)	Clinical Coordinator
Louis Armstead, BS, R.T. (R)	Instructor
Enrico Rodrigo, Ph.D.	Instructor
Sergio Hernandez	Administrative Assistant

X. Code of Ethics

The Code of Ethics for the Radiologic Technologist is established by the ASRT (2003). “The Code of Ethics shall serve as a guide by which Registered Technologists and Applicants may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues and other members of the healthcare team. The Code of Ethics is intended to assist Registered Technologists and Applicants in maintaining a high level of ethical conduct and in providing for the protection, safety and comfort of patients” (see appendix D).

XI. Professionalism and Rules of Conduct

Because various health care agencies are affiliated with the University, students can participate in the clinical environment. Students are expected to demonstrate professional behavior at all times. This requires that students:

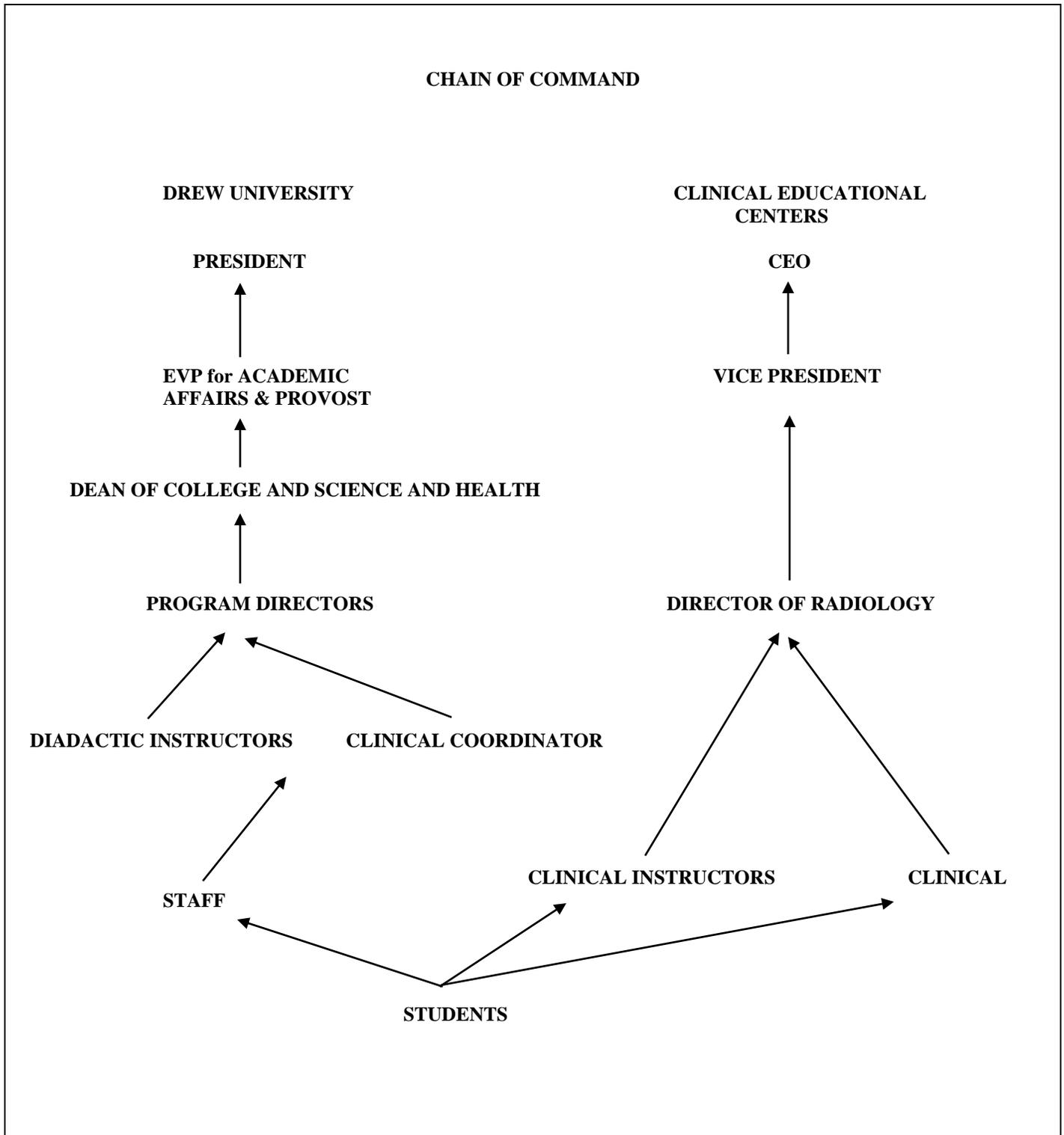
- a) be responsible for their own words and actions.
- b) abide by clinical agency standards, procedures, policies, rules, regulations, and attendance policies.
- c) exhibit a good attitude, maturity, responsibility, punctuality, initiative, and enthusiasm.
- d) ask questions of staff/instructors; questions should be constructive, asked in a tactful manner, and be geared to learning outcomes.
- e) refrain from gossip, spreading rumors, needless complaining, loud talking, boisterous laughing, gum chewing, and any other activities that could disturb patients and might be out of place in the clinical/university setting.
- f) no personal phone calls (cellular or landline) are permitted in unauthorized areas. Personal phone calls should be conducted during break time(s).
- g) take criticism constructively. Complaints of grievances should be discussed with the appropriate instructor. Hostile attitudes will not resolve conflicts. Energy should be focused to promote improvements in clinical competency.
- h) act in a manner indicative of someone eager to learn.
- i) maintain professional relationships with staff and affiliate staff at all times.
- j) not exhibit rudeness, lack of cooperation, flirting, nor overly friendly attention, as these behaviors are unacceptable.
- k) have patient-centered conversations in the presence of a patient. Other than the exchange of purely technical information, all remarks should be made with the patient’s comfort and sensitivities in mind.
- l) Permission from the Clinical Instructor must be received to remove images for classroom discussion. Patients’ unique identifiers (name, date of birth, account #, etc.) must be removed from the images before it is taken from the facility. **NO EXCEPTIONS.** Violations may result in a written warning and possible dismissal from the program.

XII. Health Insurance Portability and Accountability (HIPAA)

The HIPAA of 1966 further ensures confidentiality of patient records. Students must maintain patient confidentiality. Consequences of violating such confidence may include federal charges. Daily log sheets and radiographs must not contain patient identifiers. A HIPAA orientation and examination will be completed before entering the clinical aspect of the program. A HIPAA program must be completed before attending a clinical practice.

XIII. ORGANIZATIONAL CHART

**Charles R. Drew University of Medicine and Science, College of Science and Health
Radiologic Technology Program**



SECTION II: STUDENT RESPONSIBILITIES

I. Fidelity

An obligation to uphold the dignity and honor of your chosen profession exists in your personal and professional life. Achievement of professional and personal integrity will enhance and promote the status of this allied health profession. This implies that you will:

- a) practice radiologic technology in accordance with recognized and accepted criteria; identify yourself as a student technologist.
- b) support and cooperate with local, state, and national societies that strive to advance knowledge, understanding, and new developments in medical imaging.
- c) holistically embody physical and emotional health that affords maximum proficiency; consequently, personal, professional, social, and economic status will be enhanced.
- d) respect the dignity and individuality of every human, regardless of race, creed, nationality, color, economic, disability, or other status.
- e) interpret the art and science of radiography and its role and function to individuals and the public to promote understanding of radiologic technology.

II. Ethics/Morals

- a) Students accepted into the radiography program are expected to demonstrate professional behavior and demeanor that is expected of a health care provider. Professional behavior encompasses a broad range of expectations, including trustworthiness and at all times keeping the welfare of the individual receiving care as a priority.
- b) Any instance of student intent to misrepresent facts will be cause for immediate program dismissal. Misrepresentation of facts, verbal or written, includes but is not necessarily limited to the following situations:
 1. bribery in any form
 2. deliberate withholding of information about a patient, patient care, and/or self
 3. plagiarism in written reports/assignments
 4. presenting another student's work as one's own
 5. cheating in any form
 6. forgery or falsification of any document in any form
 7. harassment (sexual or otherwise)
- c) Students guilty of academic misconduct, either directly or indirectly through participation or assistance, must answer to the course instructor and program director.

III. Confidentiality of Patient Records and Information

In the process of performing one's assigned duty in the health care facility, it is possible to overhear information regarding patients, physicians, and/or hospital staff that must be considered confidential. You are directed not to discuss outside the health care facility or even with other health care facility students or employees these bits of information. Even casual conversation with other students may be overheard and thereby violate the right of privacy of others. Be particularly careful about your conversation in elevators, eating places, and other places of assembly within or outside the health care facility.

- a) Your discussion of patient information must occur only for the purpose of ful-

filling clinical assignments. Idle conversation regarding patient care is not exhibiting appropriate demeanor by health care professionals.

- b) The patient owns the information contained in the medical record and the health care facility owns the medical record document. Therefore, students cannot remove original, microfilmed, or photocopied medical records from the facility's premise. Any health data that identifies a patient, physician, or health care provider by name is considered to be confidential information.
- c) Confidential information is privileged information that may not be disclosed without proper, written authorization from the patient. Not only is medical information confidential; other identifying information, such as patient's age, address on discharge, and the service or medical unit on which the patient was hospitalized is also confidential. Unauthorized disclosure of health information is a breach of confidentiality punishable by state or federal law. Students who release health information without proper authorization are subject to dismissal from the program.

IV. Impaired Functioning

- a) The University must maintain a safe, efficient, academic environment for students and provide effective, safe patient care while students participate in the clinical setting. The presence or use of substances, lawful or otherwise, that interfere with student judgment or motor coordination poses unacceptable risk for patients, colleagues, the institution, and the health care agency. Therefore, unlawful use, manufacture, possession, distribution, or dispensing of alcohol or illegal drugs, misuse of legally prescribed or "over-the-counter" drugs, or being under the influence of such substances while engaged in any clinical or classroom experience poses an unacceptable risk and is strictly prohibited. For purposes of this policy, "being under the influence" is defined as meaning that the student's judgment or motor coordination is impaired due to the presence or use of any of the substances mentioned above.
- b) If a student appears to be under the influence of alcohol or drugs or is functioning in any impaired manner, faculty or agency personnel responsible for that student have the responsibility to dismiss the student from clinical or classroom experience that day. All time missed must be made up in accord with the Program Attendance Policy. A program meeting will be held to discuss the student's status in the program.
 - 1. **Alcohol:** Use of alcohol by a student while performing assigned responsibilities is prohibited. "Being under the influence" means that alcohol or drugs or a combination of drugs and alcohol, affects the student in a detectable manner that interferes with safe performance of duties. Symptoms of influence are not confined to those consistent with misbehavior or to obvious impairments of physical and mental ability (e.g., slurred speech or difficulty in maintaining balance). A determination of "influence" can be established by professional opinion, scientifically valid test, and, in some cases (such as alcohol), by a layperson's opinion.
 - 2. **Legal Drugs:** Being under the influence of a legal drug, prescribed or self-administered, while performing assigned responsibilities is prohibited if such use or influence may affect the safety of self, patients, co-workers, or the public. If it is determined that a student does not pose a safety threat to others and performance is not affected, the student will be allowed to carry out assigned responsibilities.
 - 3. **Illegal Drugs:** The use, sale, purchase, transfer, or possession by any student of an illegal drug (defined as a drug that is not legally obtainable or that is legally obtainable but has not been legally obtained) is

prohibited and constitutes grounds for dismissal from the program. This includes marijuana. The presence in any detectable amount of illegal drugs while performing assigned responsibilities is prohibited.

V. Student Responsibilities

a) To the Physician:

1. Competently carry out all orders of medical staff physicians.
2. Do not discuss or criticize a physician with a patient, the patient's family, and/or friends. The student should never express a personal preference for the services of any physician to the patient, patient's family, or friends.
3. Do not interpret radiographs or fluoroscopic images nor express an opinion of diagnosis or treatment to the patient, patient's family, or friends.
4. Accord health care team members with respect and consideration.

b) To the Patient:

1. Comprehend your responsibility to the profession and to the patient. Carelessness and neglect of any duty related to the treatment and care of patients is not tolerated.
2. Patients should be treated with compassion, dignity, and the right to privacy. The obligation of patient privacy extends from the onset of patient care to infinity. Under most circumstances you cannot divulge information concerning a patient's condition, state of affairs, or any other personal information.

c) To your Classmates:

1. Do not criticize or correct classmates in the presence of a patient during an examination. Procedural comments should not be made between one-another in the presence of visitors, vendors, or any other third party. Unsolicited comments are not permitted.

d) To the Supervising Radiologic Technologist:

1. Recognize and appreciate the technical expertise of radiographers.
2. Demonstrate tolerance and understanding of limitations or inadequacies of others.
3. Resist adverse criticism of staff. As your technical competency increases, you should rely less on others for their assistance.

VI. Faculty Expectations

The faculty has high expectations of students enrolled in an allied health program. The following areas highlight these general expectations.

- a) *Conduct:* Students are to refrain from gossip, needless complaining, smoking (except in designated areas), loud talking, boisterous laughing, gum chewing, flirting, and activities that could disturb patients or that are out of place in a clinical/ university setting. Kind and courteous behavior and consideration for patients, public, staff, and fellow students will enhance the professional image and afford personal satisfaction during the educational experience. Personal conversations should not be conducted in the presence of patients. Conversations in or around patient rooms, waiting areas, or any area where patients/families are present should be limited to matters concerning the patient.
- b) *Conflict of Conscience:* If requested or required to perform duties to which personal objection occurs because of religious or personal convictions, the student should discuss the matter with the instructor. If relief is not immediately available, the student will be expected to complete the assignment and then

bring the matter to the attention of the instructor. Resolution will be aimed to the mutual advantage of the clinical agency and the student.

- c) *Criticism*: Complaints and/or grievances should be discussed directly with the person to whom the complaint or grievance relates. This may involve the clinical instructor, clinical coordinator, didactic instructor, and/or program director. Hostile attitudes will not resolve conflicts. It is recommended that energy be used to promote improvements.
- d) *Ethics*: All individuals participating in health care share the responsibility of observing a code of ethics that requires truthfulness, honesty, and personal integrity in all human activities. Furthermore, all clinical students share in the responsibility to observe a code of ethics that regulates the activities of doctors, nurses, and allied health personnel. In general, the following applies to all clinical settings and students:
 - 1. All information concerning patients or the healthcare facility's business must be kept in strict confidence and not discussed with non-concerned parties. Confidential information should never be discussed with individuals outside the health care facility. Refer to confidentiality of patient records and information for additional description.
 - 2. A student's private as well as professional life should be conducted according to the highest moral standards. Students are not to burden patients or employees with their own personal problems.
- e) *Horseplay* is always out of place in the clinical environment. Such actions frequently result in neglect of duty and in unfortunate accidents or incidents. Students are expected to reflect the seriousness of their involvement by dignified and faithful performance of their duties.
- f) *Impaired Functioning*: Unauthorized possession or consumption of intoxicating drugs or beverages on the health care facility/university premises by students is prohibited. Students who report for clinical education in an intoxicated condition or use intoxicants during clinical experience are subject to disciplinary action that may include dismissal. Students should report incidents of apparent intoxication involving students or others to a clinical instructor, clinical coordinator, and/or program director. Drug possession and/or use are likewise prohibited. Refer to the section on impaired functioning for additional information (Student Responsibility, Section IV).
- g) *Language*: Boisterous or coarse language is always out of place in the clinical setting. Students are expected to use appropriate language in all conversations.
- h) *Personal Affairs*: Students should not discuss personal problems or business matters at a health care facility. It is inappropriate for students to unburden themselves to others at a clinical affiliate. Students should not approach physicians for attention to personal needs. Students requiring a physician's attention should make suitable arrangements; physicians should not be diverted by students' personal problems while attending to patients.
- i) *Strangers and Difficult Persons*: Proper handling of difficult persons is important in order not to disturb patients. In all cases, the clinical instructor or clinical supervisor should be notified immediately to secure help from qualified healthcare facility/university personnel. Students should not use force, except in self-defense, against other employees, students, patients, or visitors. Students should be aware of unauthorized persons loitering in or around the health care facility. Reporting the presence of suspicious persons to a supervisor, clinical instructor, clinical coordinator, security guard, or administrative personnel is required.
- j) *Telephone Courtesy*: Courtesy in using a telephone can make friends for the health care facility and make clinical experience more pleasant for the student and those interacting with the student. Appropriate telephone etiquette can en-

hance client/facility relationships. In using a telephone, students should keep in mind the following rules:

- Answer promptly
 - Identify oneself by name/department
 - Give accurate and careful answers
 - Read back messages for clarity
 - Transfer calls tactfully
 - Always say “please” and “thank you”
 - Use a helpful and pleasant tone of voice at all times
 - Hang up gently
- k) *Theft*: Since most clinical health care facilities are never closed, students should be alert to entry of unauthorized persons. Students should offer assistance to persons who do not appear as an employee or a student or who might be outside their work area. Employee and student cooperation is imperative to minimize theft. Students should ensure that supplies and equipment are stored in approved areas and that maximum security measures are observed. Bringing excessive amounts of money or valuables to the health care facility or university is not recommended. Health care facilities and CDU are not responsible for loss or theft of personal items. Clinical/ University property may not be removed from the premises except by written authorization from the department head or administrator in advance. Theft by students is cause for student dismissal from the program.
- l) *Tips and Gifts*: Acceptance of money by students from a patient or other persons with whom the health care facility does business is not permitted. Anyone wishing to make a donation or gift to the hospital should be referred to a supervisor or to administration. Solicitation of personal gifts or donations by students is prohibited.
- m) *Weapons*: Students are forbidden to bring firearms, knives or other weapons to the health care facility/university premises. Violation of this policy or engagement in violence of any type on the health care facility/university premises is subject to dismissal from the program.

VII. Injuries/Illness/Theft of Personal Property

Should an incident occur while a student is performing assigned clinical responsibilities, the student must adhere to the following policies:

- a) Supervising faculty and, if appropriate, clinical personnel must be notified immediately. Students (as stated in contractual agreements) are considered to be guests in the clinical agency and are, therefore, responsible for securing items and financing any medical treatment required as a result of accidental injury or illness. Students must realize that, although a medical facility may offer/suggest treatment within the facility, the student assumes responsibility for the charges for such service. Students are individually responsible for obtaining adequate health insurance or for bearing costs incurred for medical treatment while on campus or in assigned clinical facilities.
- b) For injuries or health problems occurring during a clinical assignment requiring treatment but not life threatening, options to consider are:
1. treatment from an independent physician and/or facility of the student’s choice at cost to the student; or
 2. treatment by the clinical agency’s emergency department at cost to the student.
- c) Supervising and program faculty and appropriate clinical personnel must be immediately contacted if any student is responsible for or involved in an unusual incident in the clinical area. Examples include but are not limited to:
1. unusual occurrences to self, patient, staff, or visitor

2. injury to self, patient, staff, or visitor
 3. formal complaints lodged against a student
 4. major equipment or supply damage attributed to student misuse, exposed film
 5. misadministration of pharmaceuticals or procedures to correct patient
 6. contamination of patient or environment
 7. any activity that may, or does, result in adverse consequences to patients or personnel.
- d) The student, clinical instructor and/or clinical coordinator must submit a completed report to the program director within 24 hours. Clinical facility's incident protocol procedures must also be strictly followed and necessary reports completed and properly signed.

VIII. Penalties

Radiologic Technology students must follow stated policies and procedures of the program, the University, and the clinical agencies. In the event of policy/procedure non-compliance, standing punitive protocol recognizes the following actions:

- a) Unprofessional and/or unethical conduct will be reviewed and assessed
- b) Student falsification of records, clinical or didactic (individually assessed)
- c) **When a student is going to report to the clinical facility later than the designated time, she/he must inform the Clinical Coordinator and/or the Program Director at the University no later than one hour prior to their scheduled time. The University will inform the clinical site of all student absences and tardies. Excessive absenteeism and/or tardiness may be cause for review of student status in the program.**
- d) **Two no-call no-show absences will be a cause for suspension or termination of enrollment in the program.**
- e) Excused and unexcused clinical absences must be made up at the end of the semester days of the absence. Each unexcused absence that is not compensated for in this time frame will result in 12% reduction in overall clinical grade.
- f) Students will receive a complaint form and a reduction of one whole letter grade in the overall clinical grade for leaving the clinical facility without approval from the appropriate personnel. A student may be subject to suspension, probation and/or dismissal for leaving a facility without approval.
- g) Any student found in a clinical session with an expired dosimetry badge or without his/her dosimetry badge will receive a complaint form and a reduction of one whole letter grade in the over-all clinical grade for a dress code/ethics violation. The student **WILL BE SENT HOME IMMEDIATELY** to retrieve the monitor. Students will not be allowed to return to clinical without a current dosimetry badge. Lost hours due to retrieving the badge must be made up appropriately and within the 7 day grace period. If the badge is not recovered, report the loss to the program. Students are responsible for replacement cost.

IX. Clinical Dress Code

This profession is one in which a person must maintain himself/herself in neat, professional, and conservative manner at all times during the clinical experience. Student must dress as follows:

a) Dress

Uniforms for male and female students are ordered/purchased from various vendors (i.e. Uniforms Unlimited) these include:

Male - (1) White scrub pants, (2) White scrub shirt, (3) White lab jackets (not

coat), (4) Solid white socks (no colored rings), (5) White, black, or dark brown soft-soled shoes or white leather athletic-style shoes are permitted (there shall be no colored emblems or sections on the athletic shoes). Drew shoulder patches must be attached to the left shoulder of lab jackets and scrub shirts at all times. Identification will be provided by the University.

Female - (1) White scrub pants, (2) White scrub tops, (3) White lab jacket, (4) White, non-textured stockings, knee highs, or solid white socks may be worn, (5) White, black, or dark brown soft-soled shoes or white leather athletic-style shoes are permitted (there shall be no colored emblems or sections on the athletic shoes). CDU shoulder patches must be attached to the left shoulder of lab jackets and scrub shirts at all times. Identification will be provided by the University.

Colored scrubs will only be worn when approved.

Footwear Requirements: California General Industry Safety Order #3291B states, “Footwear which is defective or inappropriate to the extent that its ordinary use creates the possibility of foot injuries shall not be worn”.

Safe footwear shall constitute shoes of construction of like strength that enclose the entire foot. They are to be sufficient in strength and construction to lessen the impact of dropped objects, broken glass, needle punctures, or the hazards of gurney and portable machine casters. Clogs and open-backed shoes do not provide sufficient support or flexibility to prevent turned ankles and injuries, and are prohibited in the clinical setting.

Each student should have at least two full uniforms to begin; additional uniforms may be purchased for the second year, when clinical rotations will include 3 full days per week. Only white garments are to be worn under white scrub tops. No off colors.

Every student must be attired in full uniform in order to enter the clinical area; NO EXCEPTIONS. If improperly attired, a student may be sent home for the day or allowed to change and return. If the student is sent home for the day, it will be documented as an absence in the clinical assignment.

Shoes must be polished and buffed regularly. Strings should be washed each time the shoes are polished. White shoes must be kept clean.

Depending on the clinical site, surgical scrub suits are required when assigned to the operating room and are normally furnished by the hospital. These uniforms are not to be taken from the hospital and are to be worn only when scheduled to work in the operating room.

b) Jewelry

1. Ear Rings: Two pair of stud-type ear rings are permitted. No costume type ear rings are acceptable. Foreign piercing (nose, eyebrow, or tongue) is not permitted.
2. Necklace: If a chain is worn, it must be worn under the uniform.
3. Bracelet: None is permitted.
4. Rings: Two sets of rings, one set on each hand, are permitted.

5. Watches: One wrist watch is permitted.

c) Grooming

1. Students must adhere to policies of the clinical affiliate.
2. Make-up should be worn only in moderation.
3. Perfume should be worn only in moderation.
4. Severe hair styles, ornamental clips, ribbons, or bows in the hair are not acceptable. If clips or hair bands are worn, they must be neutral in color, style, and design. Hair must be clean and neat, and must not extend beyond the shoulders (hair that would extend beyond the shoulders must be tied up).
5. Fingernails are to be cleaned at all times. False fingernails are not permitted. Fingernails should not exceed $\frac{1}{8}$ " beyond the fingertips.
6. Facial hair should be neat and trim.
7. No facial piercings or large visible tattoos permitted.

d) ID Badges

The student's clinical agency ID badge and University ID badge must be worn at all times while on duty. Badges must be worn within 10" of the shoulder, with the picture clearly visible. **CDU patch must be on the left shoulder on all uniforms.**

e) Dosimetry Badges

Radiation monitoring badges should be worn at collar level. Badges worn to monitor pregnancy will be worn at waist level under the lead apron (if worn). Film badges will be changed by the 15th of every month. Students are responsible for changing the film badge each month. **Lost badges must be reported immediately. Students are not allowed in clinic nor will a student receive clinical hour credit without a current dosimetry badge. A \$25 fee will be charged for lost dosimetry badges.**

X. Student Supervision

- a) All students must be supervised during clinical assignments according to the following standards:
 1. The clinical instructor along with the clinical coordinator shall assume responsibility for supervision and evaluation of the radiography student at each clinical affiliate.
 2. A qualified registered radiographer shall review the request for the radiographic examination to:
 - ◆ determine student capabilities to successfully complete the examination; or
 - ◆ determine whether patient condition contraindicates student performance of the examination; or
 - ◆ ascertain student competency for procedure performance.
- b) If any of the above is questionable or negative, the radiographer should be present in the radiographic room.
- c) The qualified registered radiographer must check and approve the images in reference to image quality prior to patient dismissal. Direct supervision regarding image critique is mandatory throughout the program.
- d) Prior to competency validation, the radiography student is under direct supervision of a registered technologist. Once competency is obtained and the above circumstances warrant such action, the student will be under indirect

supervision.

1. Direct supervision is defined by the JRCERT as student supervision by a qualified practitioner 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 procedure, and reviews and approves the procedure.
 2. Indirect supervision is defined by the JRCERT as student supervision by a qualified practitioner who is immediately available to assist the student, regardless of the level of student achievement. Immediately available is interpreted as physical presence of a qualified practitioner 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.
- e) **Under NO circumstances should a student perform mobile radiography without supervision or shielding. A technologist MUST ACCOMPANY any student during mobile radiography, regardless of competency level. A lead apron must be worn at all times by the student.**

XI. Repeating Final Examinations

Students will be allowed to repeat radiographic examinations one time only, and this must be performed with a registered radiologic technologist present in the radiographic room to assist. If the repeat examination is not satisfactory, the technologist must perform the additional images while the student observes.

Repeats will be recorded by the student in the appropriate portion of the Clinical Log Sheet. This document will be reviewed by program faculty and included in the written clinical objective grade.

XII. Absences Due to Emergency, Special Circumstances, or Illness

In the case of an appropriate emergency (e.g., death in the family or illness), absence from class and/or clinical may be excused, and the student will be allowed a reasonable opportunity to complete all assignments and tests missed. In such cases it is the responsibility of the student to explain the situation to the faculty member as soon as possible. The faculty member may require of the student additional verification of the emergency situation or illness. Students confined at home or in a hospital for an extended period of time should notify the faculty member from whose class/clinical site they will be absent so arrangements can be made for completion of assignments, if feasible. The number of such absences may not exceed stated policy for the class and the student must make arrangements to complete missed assignments and/or clinical education time. A leave of absence should be requested.

XIII. University-Sponsored Activities

Absences occasioned by university-sponsored activities absences must be excused by all faculty members as long as the number of absences does not exceed the number prescribed in an established and previously announced departmental policy and the faculty member has been informed in advance of the intended absence. An excused absence means only that students must be allowed a reasonable opportunity to complete assignments and tests missed because of the excused absence. It is the responsibility of the student and the faculty or staff sponsor of the activity to inform the faculty member in charge regarding the cause of the upcoming absence. The University will inform all clinical affiliates of required absences due to university-sponsored events. A mandatory university sponsored event is considered an excused clinical day.

XIV. Professional Activities and Day

Student involvement in professional organizations/functions is encouraged. Clinical time accumulated due to professional educational activities must be preapproved by the program director. The use of professional educational time requires 24-hour notice to the clinical coordinator. The clinical coordinator will inform the clinical affiliate of the student's intended participation in a professional activity.

Professional educational activities cannot be used to shorten program length or be scheduled during the last clinical week of the semester.

One professional day is available to each student during the program of study to use for advancement in the field (orientation, interviews, etc.). A request must be submitted in writing with appropriate documentation one week prior to the designated date to the program director and/or clinical coordinator. Each request will be reviewed and evaluated on an individual basis and professional merit. Activities reviewed as nonprofessional will be treated according to the unexcused absence policy.

XV. Appeal of Faculty Member's Decision Regarding Excused/Unexcused Absences

If the student has evidence that a faculty member has not excused an absence that should have been excused within the guidelines stated above, the student can appeal the decision of the faculty member to the program director. If a resolution is not reached, the student may file a grievance. (See Policy)

XVI. General Attendance Policy

Attendance is a contract between faculty and students. It is expected that students will attend class and clinical regularly and provide the faculty with a reason for any absence. ***Failure to attend classes or clinical regularly can affect grades and financial aid.*** Each department has the right to set the maximum number of absences (including absences due to university activities and illnesses) permitted during an academic term. See University Catalog, Policies, Attendance #6, pg. 21

- a) The program recognizes all breaks and holidays as published in the academic calendar.
- b) Absences due to university-sponsored activities are excused if they do not exceed course credit number and faculty members are informed in advance.
- c) Attendance at professional activities may be allowed in lieu of normal class attendance. Prior approval by the program director must be obtained.
- d) All students must abide by the attendance policy as stated in the university catalog.
- e) No delinquent clinical time is carried from one semester to the next unless approved by the Program Director.
- f) At least **80%** attendance is required to pass all professional courses. Because of the nature of the material covered and the length of semesters, the program guidelines place mandatory attendance in all professional courses. Student grades will be adjusted according to the class syllabus.
- g) Any excused absences must be accompanied by a printed document.

XVII. Didactic Attendance Policy

Protocol regarding student absence from RAD didactic courses is as follows:

- a) Attendance to all RAD didactic courses and labs is mandatory.
- b) The professor must be notified by phone or by e-mail one hour before class begins on the day of the absence.
- c) In the case of an emergency (example: death in the family or illness) absence from class may be excused if it does not exceed the number of credit hours.
- d) It is the responsibility of the student to get all notes from other class members in

- the case of absences.
- e) The individual instructor will state make-up test policy in the course syllabus. Unless notified otherwise, tests will be administered during the next class meeting in the event of absence or inclement weather.
 - f) Tardiness is not condoned.
 - g) The professor has the right not to allow a tardy student admission into the classroom if the professor feels that the tardy student will disrupt the continuity of the class (lectures, demonstrations, etc.).

XVIII. Clinical Attendance Policy

Protocol regarding student absence from the clinical area is as follows:

- a) Notify the clinical instructor or supervising technologist one hour prior to schedule time NO EXCEPTIONS.
- b) No-call/no-show absences will be cause for termination of enrollment in the program. The following attendance requirements and guidelines apply to all professional courses:
 - 1. The equivalent of 3 unexcused absences will necessitate a review of the student's status in the program. Students will be placed on program probation for the remainder of the semester. Any additional unexcused absences will be considered a breach of probation and constitute grounds for dismissal from the program. A program faculty meeting will be held to determine the student's status in the program. Students may be dismissed from the program for not making up missed clinical time. If a student has attendance issues (absences, tardies, behavior), the clinical site may request that the student be removed from the clinical rotation permanently. A meeting will be held between the program and the site coordinator. It is at the discretion of the site for the student to remain or be removed. When a clinical site request that a student be removed permanently, the student will not be placed at another clinical site. The student may be subject to dismissal from the program. The student has a right to exercise the student appeal /grievance process regarding dismissals from clinical sites.
 - 2. If a student acquires one no-call no-show, the student will be suspended from the program and placed on probation for the remainder of the program. Any additional no-call no-shows, the student will be subject to dismissal from the program.
- c) Excused and/or unexcused clinical absences must be made up by the end of the semester and must be approved by the clinical coordinator and clinical instructor. Excessive tardiness may result in the student being placed on program probation. Frequent tardiness may result in the student being dismissed from the program as stated in the attendance policy.
- d) The student is responsible to obtain clinical course notes missed during absence.
- e) The clinical coordinator will state make-up test policy.
- f) Each semester, the designated number of clinical hours must be completed according to the course outline. No delinquent clinical time will be carried over from one semester to the next, unless approved by the program director/ division chair.

XIX. Clinical Tardiness Policy

- a) Excessive tardiness is not tolerated. Tardiness is when any student reports to the clinical facility or classroom later than the scheduled time.
- b) When a student is going to report to the clinical facility or didactic class later than the designated time, he/she must inform the appropriate instructor. The program director and/or clinical coordinator must be notified one hour prior to

scheduled time. The University will inform the clinical site of the student's tardiness. The University may at its discretion advise the student to also contact the clinical site. One excused tardy/semester will not constitute a grade cut. Three days of tardiness equate to one absence, 6 days of tardiness equate to two absences, etc. (this applies to unexcused tardiness).

- c) Missed clinical time resulting from a tardy must be made up and scheduled (in writing) as approved by the clinical coordinator and clinical instructor.

XX. Clinical Assignments

Student clinical assignments criteria are as follows:

- a) The number of student seats in accordance to professional standards and clinical affiliate resources.
- b) Conflict of interest.
- c) Students may not perform clinical hours at any clinical site in excess of 10 hours/day and in combination with didactic courses 40 hours per week.
- d) Students may not alter their own clinical assignment rotations and/or discuss their clinical assignment rotations with the clinical affiliates.

The radiologic technology program cannot guarantee any student specific clinical affiliate site assignment (s). The program reserves the right to alter clinical education assignments as needs dictate.

XXI. Clinical Education Transfers

Due to the limited student enrollment according to professional standards and clinical resources, clinical site transfers are limited and require faculty approval. Clinical site transfer protocol is as follows:

- a) A written request, including rationale and justification and request to convene a faculty meeting, must be submitted to the program director. The program director will notify the student of the meeting date/time.
- b) The student will attend the scheduled faculty meeting and be allowed an opportunity to discuss rationale and justification for the request, addressing pertinent faculty questions and/or statements.
- c) The faculty, in closed discussion, will recommend transfer approval or non-approval.
- d) The program director and/or clinical coordinator will notify the student in writing of the faculty's decision regarding the transfer request.

XXII. Clinical Education Meals/Breaks

Meal and break times are inclusive of the scheduled clinical education hours. Meal and break times may vary at different facilities. Be flexible

XXIII. University as Provider of Malpractice Insurance

The University provides professional and general liability insurance for all employees and students currently enrolled in the program. A certificate of insurance is provided to each clinical affiliate.

XXIV. Clinical Education Compensatory Time

Missed clinical time must be made up by the end of the semester. It must be prearranged and approved by the clinical coordinator and clinical instructor, and documented utilizing the clinical make-up time form.

It is the student's responsibility to ensure that all time is recorded promptly and accurately on appropriate forms (kept by the clinical coordinator). Student

participation in clinical education is permitted only during scheduled hours. **At no time can a student participate in program activities that exceed ten (10) hours per day and total didactic and clinical time exceeding 40 hours per week. Clinical education hours cannot be accumulated prior to normal scheduling unless approved by the program director and clinical site instructor, and can under no circumstances be used to shorten program length. If a stipend is provided, no clinical competencies can be performed during paid hours.**

XXV. CPR Certification

All radiography students must successfully complete a course in Basic Life Support (BLS), which must be updated annually while in the program, and throughout the professional career. In order to participate in clinical, the student must:

- a) Make a copy of the CPR card (both sides if necessary).
- b) Print name and social security number plainly on the copy.
- c) Submit the document to the program director.
- d) Provide documentation of current CPR certification to continue participation in the clinical phase of the radiologic technology program. Failure to present such documentation will result in dismissal from clinical setting, and absence time must be made up by semester's end.

The only CPR course accepted currently is the following:

1. American Heart Association course for Health Professionals

XXVI. Lead Identification Markers

Radiography students must use their own initialed right and left lead markers to properly identify radiographic anatomy. These markers will be made available by the program. NOTE: These markers must be present on all images that the student performs for competency grading requirements. Student identification markers can be used only with the approval of the specific clinical affiliate. Students must purchase additional markers.

Charles R. Drew University of Medicine and Science
Radiologic Technology Program

SECTION III: STUDENT RIGHTS AND PROTECTION

I. Standard Precautions Communicable Disease Guidelines and Procedures

In the event of performing an examination or participating in a procedure on a patient with a history of an infectious disease, the student should observe the appropriate measures of infection control related to the specific disease (see Isolation Procedures Manual for that clinical site). This may include but not be limited to gowns, gloves, and masks. The clinical instructor, as well as the Isolation Procedures Manual of the clinical site, should guide the student as to the specifics for any given case.

If a patient's communicable disease had not been diagnosed at the time of the student's contact, the Infection Control Officer of the hospital will be responsible to notify the Director of the Radiology Department, who will then notify the Program Director regarding the personnel/students who were exposed and the measures to be taken. Should any unusual occurrence (e.g., needle stick, exposure to body fluids, exposure to TB) during clinical education, the following procedure should be followed:

- a) Immediately report occurrence to the Clinical Instructor and to the Clinical Coordinator and/or Program Director.
- b) The incident form must be completed as soon as possible, but in any case within 24 hours of the occurrence.
- c) The student is advised of affiliate protocol for management of the incident and encouraged to follow the physician's recommendations.
- d) The student, as any patient, is responsible for health care costs incurred and has the right to refuse treatment.

If a radiography student becomes infected with a communicable disease, the student will be required to provide a physician's documentation that the student is no longer contagious before he/she may return to scheduled assignments.

Disability Policy

If a student incurs a temporary disability, the Program Director will make every reasonable effort to accommodate the student. For disabilities of short duration, the Program Director and the student may attempt to reschedule the missed training. For disabilities of longer duration, the accommodation efforts may include but are not limited to the following:

- a) Rearranging the course schedule where possible, allowing the student to substitute courses that are less physically demanding. The missed courses are scheduled in a later semester if possible.
- b) Withdrawing from the program when rearranging the course schedule is not possible. This would allow the student to resume training in the next possible semester at the point at which the temporary disability occurred. Because RAD courses are only offered once a year and during the same semester every year, this may mean that the student must take a leave of absence for a full year in order to complete the program.

II. Health Requirements

All students entering this health science field are required to submit to a physical examination, tuberculin test or chest x-ray (once a year in June) and two MMR and rubeola results (one as an adult) and titers prior to admission. Immunization must be current and the HBV series must have been started. IF HBV is declined a written document must be submitted to the program. Influenza inoculations may be required at some clinical sites. Documentation certifying HBV completion is required. In addition, each student must complete an essential function analysis that involves walking, hearing, vision, and lifting.

III. Health Insurance Policy

Students must have health insurance. Hospitals agree to treat students for accidents/injuries sustained while in the clinic setting; however, it is the student's responsibility to pay for this treatment. Neither CDU nor the clinical affiliate assumes responsibility for absorbing the cost of treatment. Billing for treatment and/or services rendered shall be directly to the student or his/her insurance carrier.

IV. Student Employment Policy

Under no circumstances shall student employment interfere with clinical and/or didactic educational components. Students requiring financial assistance should contact the financial aid office at CDU.

Didactic or clinical schedules will not be altered to accommodate personal working schedules.

V. Student Records

The Radiography Program maintains student records in the following locations:

- a) A permanent student file is maintained in the University Admissions Office and a student file is maintained in the radiography program office for 5 years.
- b) A student clinical folder is maintained in the Clinical Coordinator's Office.
- c) The current semester clinical records are filed in the Clinical Instructor's Office at the clinical affiliate.
- d) Student rights to program records are described in the University Catalog.
- e). Student clinical records are accessible via the Trajecsys Clinical Management Software System.

Records are kept in file cabinets within a locked room or in a locked file cabinet to ensure privacy. Should a technologist complete a competency on a student during hours that a Clinical Instructor is not on staff, the technologist must ensure security of the document by placing it in a locked drawer or cabinet.

Tuberculin test must remain current throughout the term of the program. Expired TB test will necessitate removal from the clinical rotation. It is the student's responsibility to keep current all mandated vaccinations. Failure to comply will result in the student being removed from the clinical site without notice. Student will receive a written reprimand and temporary suspension until vaccinations are made current. University policy will be enforced regarding 3 consecutive absences.

VI. Energized Radiographic Laboratory Policy

An overview of radiation safety is provided throughout the program.

Under no circumstances shall students be allowed to operate ionizing equipment without supervision. All students must abide by the laboratory policies.

The purpose of the lab is to coordinate actual practice with didactic material. Labs may also be used for research purposes as long as theories are valid and of an educational nature (this must also be supervised).

VII. Radiation Protection Policy

- a) To ensure that all student radiologic technologists are learning in a safe working environment, the amount of radiation received is monitored. One dosimeter and holder will be issued to each student. The badge holder must be loaded and positioned for accurate radiation measurement. Each student must exercise care to use the badge correctly and prevent loss or damage to it. An extra badge or replacement badge may be ordered by contacting the clinical coordinator.
- b) It is the responsibility of each student to wear the assigned badge at all times in the clinical area or energized lab. The badge must be worn on the collar of the uniform. If wearing a lead apron, the student must wear the badge outside of the apron at the collar level.
- c) Any student found in a clinical setting without the film badge will be sent home to retrieve the monitor and will be issued a complaint form. This time must be compensated. Students are not allowed to participate in the laboratory component without a film badge.
- d) **Students are not allowed to hold patients during x-ray exposures.** They must stand completely behind a lead shield unless they are observing or assisting during fluoroscopy. Students are expected to practice the **ALARA** principle through recognized radiation safety strategies, as instructed in the program.
- e) Each month, new exposure badges are issued and badges for the previous month are collected. The old badges are taken to program director's office, which retains the results. The Radiation Safety Officer contacts the program director should any student receive a monthly exposure of 50 mrem or more. Should this occur, a conference will be conducted involving the student, clinical coordinator, radiation safety officer and/or program director.
- f) The student may request a record of a film badge reading from the Radiation Safety Officer, Program Director, or Clinical Coordinator's office.
- g) Each student must complete all radiation safety training.
- h) The program has a radiation safety and protection program in place. It is recognized by the State of California Radiologic Health Branch.
- i) Radiation safety is taught and practiced throughout the two year course of instruction.

VIII. Student Pregnancy Policy

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

The pregnant student may elect to notify the Program Director and/or Clinical Coordinator of the pregnancy. Once the pregnancy is declared, a conference will be held with the Program Director and/or Radiation Safety Officer to review radiation risks, dose limit guidelines, and the cardinal principles of radiation protection. The pregnant student will be administered a fetal badge. This badge will be worn at the waist with or without an apron. All students must meet the same clinical requirements for graduation; however, scheduling of clinical activities involving fluoroscopy, C-Arms, and portables may be rearranged as possible to accommodate minimal radiation exposure to the fetus. The pregnant student must maintain as much distance between the radiation source and her person as practical and remain well behind the control booth during radiographic exposures when possible. During fluoroscopy, portables, surgical procedures, and special procedures, the pregnant student must wear a 0.5 mm Pb equivalent apron. Under no circumstances will the pregnant student be allowed to hold patients during x-ray exposure.

The recommendations of the National Council on Radiation Protection Report #116 states that a dose to the fetus from occupational exposure of the pregnant mother shall not exceed .05 rem per month or 50 mrem for the entire gestational period.

The student may request a leave of absence when she, the physician, or the Program Director believes that it is no longer viable for her to function in a manner conducive to learning. The return of the student must be approved by her physician. Students seeking to resume coursework will meet with the Program Director and didactic faculty; decisions will be based on individual circumstances. The student will be rescheduled for missed class work and clinical hours will be rescheduled with the Clinical Coordinator.

The student will be informed of her options with regard to this policy prior to enrolling and again during program orientation.

Option I:

The student has the right to make voluntary disclosure that she is pregnant and she has the right to modify training.

Option II:

Once the pregnancy is declared, the student may elect not to have any modification made to her training.

Option III:

The student may elect to withdraw from the radiography program and return within 1 year and not lose their status in the program.

Option IV:

The student may elect to continue in the radiography technology program, fulfilling all program requirements as contained within the curriculum, and adhere to all radiation protection guidelines and recommendations as follows:

- a) The student will be provided an additional film monitoring device to monitor exposure to the fetus.
- b) The student will be required to adhere to the provisions of ALARA.
- c) No more than 5 mSv (0.5 Rem or 500 mrem) of exposure is to be received by the student during the pregnancy.
- d) The equivalent dose to the embryo-fetus in a month cannot exceed 0.5 mSv (.05 Rem or 50 mrem).

Option V:

The student may withdraw the declaration of pregnancy at any time. Refraction of the pregnancy declaration requires the student to abide by the general guidelines for radiation workers. Therefore, after pregnancy declaration refraction, the student will be monitored according to general guidelines for radiation workers as described by the Nuclear Regulatory Commission and State Laws.

Option VI:

The student may choose not to declare the pregnancy to the program.

IX.

**Charles R. Drew University of Medicine and Science
Radiologic Technology Program**

DECLARATION OF PREGNANCY FORM

I submit this notification of pregnancy to the Program Director of the Radiologic Technology Program at Charles R. Drew University of Medicine and Science, College of Science and Health.

I, _____,

Declare that I am pregnant

I Do Do Not,
chose to continue my enrollment in this program.

I wish to withdraw my declaration of pregnancy.

Conference Date: _____

Attended By: _____

Comments:

Signatures:

Student: _____ Date: _____

Program Director: _____ Date: _____

Radiation Safety Officer: _____ Date: _____

Charles R. Drew University of Medicine and Science
Radiologic Technology Program

SECTION IV: RADIOGRAPHY PROGRAM ADMISSION

I. Student Matriculation Requirements

A limited number of students are admitted annually. Each applicant is evaluated on the basis of academic record, clinical observation, and personal interview. To be granted an interview in April or June of the year of intent to enter the program, the prospective student must have completed the application process and must have been advised by the program director or clinical coordinator.

- a) To become a candidate for admission, the student must:
 1. Maintain a college GPA of 2.0 or better on a 4.0 scale.
 2. Complete required prerequisite general core curriculum and other allied health core courses as required obtaining a grade of C or better.
 3. Interview with program faculty.
- b) To be accepted to the program, the student must:
 1. Successfully complete the registration process with the program director.
 2. Provide verification of current CPR certification.
 3. Complete and submit the health verification form. Physical examination must be conducted by a licensed physician, resulting in a statement by the physician that the application is free of any physical limitations and restrictions.
 4. Attend the program orientation.
 5. Meet specific health and/or essential functions (technical standards).
 - (a) Lift 25 pounds without assistance.
 - (b) Provide copy of immunization record showing vaccination against measles, mumps, rubella (MMR), rubeola and varicella.
 - (c) Start the Hepatitis B Vaccination series or Have a Declination on file
 - (d) Provide proof of health care insurance.
 - (e) Provide evidence that visual and/or hearing impairments are correctable with appropriate corrective devices.
 - (f) Complete 24 hours of clinical observation in a radiology department.(if possible)

II. Program Completion Requirements

The radiologic technology student must meet the following requirements to graduate from the program:

- a) Successfully complete with a grade of C or better in every “RAD”, “Core” and “Elective” course. No “RAD” or radiologic specific course may be dropped. All general core courses completed during the program must be passed.
- b) Obtain a satisfactory rating on all Clinical Competency evaluations and Clinical Performance evaluations.
- c) Maintain a minimum of 2.0 GPA on a 4.0 scale.
- d) Exhibit ethical and professional conduct at all times.
- e) Comply with program policies regarding attendance, ethics, policies, and procedure
- f) Complete Clearance Verification form provided by the Office of Enrollment Management.

- g) Complete 50 hours of community service.
- h) Complete 2000 hours of clinical practice.
- i) Complete a minimum of four radiography program fund raisers.

III. Curriculum Policy

Radiologic Technology didactic and clinical courses have complementary educational objectives and are carefully designed to afford knowledge to the student in a structured and timely fashion. Therefore, if a student eliminates any part of the radiography curriculum, that student will be terminated from the program.

Upon approval of the radiography faculty and the program director, the curriculum is subject to change as needs dictate.

IV. Clinical Competency Evaluation Policy

The clinical instructor/clinical coordinator grades clinical competency examinations during each semester. These examinations will be practical in nature and a permanent part of the student's record. These examinations are based on clinical guidelines and requirements to be completed in a said period. A passing grade must be achieved on each competency before continuance to the next level. A student may be tested on previous competencies at the instructor's discretion.

V. Radiologic Technology Program Grade Policy

Due to close patient contact and radiographer responsibilities, mastery of academic material and technical competency are required. Therefore, the grading policy in all radiography courses is as follows:

See Appendix D

Students must maintain a grade of "C" or higher in each radiography course to remain in the program. Upon earning a grade of "C-" or below in any radiography course, the student will be terminated from the program. Students are responsible to seek academic counseling from the course instructor and/or the college counseling office located on the main campus.

Charles Drew University of Medicine and Science
Radiography Program

SECTION V: DISCIPLINARY PROCEDURES

I. Stipulations for Dismissal/Suspension

Administrative action will be initiated at the discretion of the Program Director AND/OR Clinical Coordinator following documented reports of substandard, unethical, or inappropriate conduct by the student. The program advisory committee will be polled in the event of program termination of a student. Immediate suspension, probation and possible termination may result for any of the following reasons:

- a) Earning a grade below 'C' in any radiography course
- b) Insubordination
- c) Possession of or use of alcohol or any mood-altering chemicals, or reporting for class/clinical under the influence of such substances
- d) Failure to accomplish didactic and/or clinical assignments, competencies and objectives
- e) Unprofessional and/or unethical conduct
- f) Breach of medical ethics
- g) Gross carelessness in regard to safety of patients or colleagues
- h) Dishonesty/cheating/theft
- i) Repeated absence/tardiness
- j) Falsification of sick time
- k) Falsification of records
- l) Release of confidential information regarding patients and/or hospital or clinic personnel or activities.
- m) Plagiarism
- n) **Excessive absences, two no-call/no-shows**
- o) Failure to report immediately, errors, accidents, incidents occurring on clinical premises.
- p) Harassment (Sexual or otherwise)

The participating clinical agencies retain the right to reject any student whose behavior may be hazardous to the agency.

II. Re-admission Criteria

- a) Students will be considered for readmission on a space-available basis.
- b) Applicants for readmission to the first semester must reapply and will be ranked with new applicants.
- c) A readmissions application form must be completed in the Office of Admissions and submitted one semester prior to readmission. The radiography program director must approve the application.
- d) If a student is out of the program curriculum more than two semesters, the student must audit courses passed and retake courses failed.
- e) Readmission applicants and program transfers applying for subsequent semesters are considered on space-available basis determined by the instructor/student ratio as recommended by the readmission screening committee.
- f) **Academic or behavioral dismissals will not be considered for program readmission.**

Students are considered for readmission in the following order:

- a) Withdrawal for justifiable personal reasons (nonacademic)
- b) Withdrawal for failure of completing prerequisite courses.
- c) Financial aid issues.
- d) **Academic or behavioral dismissals. (Will not be considered for readmission)**

III. Appeal Mechanisms

A system of due process is available to all students enrolled at CDU. For the appeal of final course grades, academic dishonesty, dismissal from academic programs, academic status, academic requirements, and alleged violations of students' rights, refer to the university catalog.

The radiography program has established a system of due process to appeal an unfavorable evaluation received from personnel at the clinical affiliate and/or the didactic instructor. After the student reviews the evaluation or grade and disagrees, the appeal protocol is as follows:

- a) The student must meet with the instructor and review the completed evaluation or grade.
- b) If the instructor deems the evaluation to be valid and the student is in disagreement, the student may request a meeting with the instructor within 5 working days of the occurrence. The instructor has the authority to review the evaluation/and or grade and reflect any warranted revisions if it is verified that the evaluation was completed arbitrarily, capriciously, or prejudicially.
- c) If the student is not satisfied with the instructor's decision, the student may request a meeting with the program director within 5 working days of the meeting with the instructor. The program director has the same authority as the instructor.
- d) If the student is not satisfied with the meeting with the program director, the student may request a meeting with the radiography faculty committee, who will make the final decision on the validity of the evaluation and/or grade.

IV. Radiologic Technology Program Student Grievance Procedure

It is the responsibility of the Radiologic Technology Program faculty to encourage and require students to be responsible and accountable for their own behavior. In the event that a student does not meet expectations of professional behavior or performance of duties, the student may be subject to disciplinary action. In the event that a student has been subject to disciplinary action by program faculty and the student disagrees with the decision, the student may activate the program grievance procedure. The Radiologic Technology Program prefers to solve problems by internal procedures within the department if at all possible before the College Student Grievance Procedure is activated.

a) Purpose

The purpose of this procedure is to provide the student with guidance as to the appropriate process of channeling student complaints against the Program or its faculty concerning the following:

1. Alleged discrimination on the basis of age, sex, race, handicap or other conditions, preferences or behavior, excluding sexual harassment complaints.
2. Sexual harassment complaints should be directed to the Office of the Dean. Because of the sensitive nature of this kind of complaint, a con-

ference with the Dean will replace the first step of the grievance procedure. The Dean will counsel with the student to determine the appropriate action that is required.

3. Academic matters, including individual grades.

b) Procedures

1. First Step: The student must go to the instructor where the alleged problem originated. An attempt will be made to resolve the matter equitably and informally at this level. The conference must take place within 5 working days of the incident that generated the complaint. In cases where the instructor is not the Program Director, a meeting with the Program Director may be requested after the student's initial meeting with the instructor if resolution of the complaint is not reached.
2. Second Step: If a satisfactory outcome has not been reached after the first step, the student may request a meeting with the Dean. If meeting(s) between student, program director, and faculty do not reach a satisfactory resolution, the program director may implement the "Second Step" of the College Student Grievance Procedure, which is to provide the student with an explanation of the formal grievance procedure and a copy of the grievance procedure.

The COSH Student Grievance Procedures are available to students in the Office of the Dean. If the student complaint is not resolved as outlined above, the student may activate the college grievance procedures by following the policy outlined in the university catalog.

The final step of the process does not include any individual directly related to the program, and it assures timely resolution. Records of grievances are kept in accordance with the institution's/program's retention policies/procedures.

- c) CDU Student Academic Performance, Promotion and Judiciary Committee
The Student Academic Performance, Promotion and Judiciary Committee is concerned with reviewing program and college policies concerning promotion, probation, suspension, dismissal, and graduation. It reviews program recommendations and determines candidates' eligibility for academic scholarships, honor societies, graduation, and the Dean's List and Honor Roll. This committee also exercises original jurisdiction over situations of discipline involving students enrolled in the College. The committee includes two student members elected by the general student body. (SAPPJC Grievance Policy)

V. JRCERT Noncompliance Policy

The Radiography Program:

- a) Follows due process upon written receipt of signed allegations indicating non-compliance with the standards of the JRCERT accreditation policies.
- b) Acts when alleged practices or conditions indicate substantial noncompliance with the standards or failure to follow JRCERT accreditation policies.
- c) Reports substantial complaints to the United States Department of Education or appropriate state agency regarding the accredited program.

The Radiography program director will facilitate investigation and resolution in determining whether said complaint relates to program compliance with the standards or established accreditation policies by carrying out the following actions:

- a) If no, notify the complainant within 20 days following receipt of the complaint.
- b) If yes, acknowledge the allegations to the complainant within 20 working days of receipt and provide the policy and procedures pertaining to investigation and resolution to the complainant by addressing the process for reporting allegations at: www.jrcert.org/pdfs/allegations_reporting_form.pdf
- c) Receive written, signed allegation(s) of noncompliance with standards or JRCERT accreditation policies.
- d) Maintain confidentiality of complainant's identity unless authorized to disclose identity by the complainant or if required legally to do so.
- e) Ensure that reasonable program and institutional efforts are made to resolve the complaint; if efforts are nonproductive, notify the JRCERT Executive Director of the substance of the allegations, requiring a written response to the finding submitted within a reasonable time period (30 working days).
- f) Provide to the program advisory committee and the sponsoring institution copies of the notification.
- g) May request further information/materials relative to complainant allegations, sponsoring institution, program, or other relevant sources.
- h) If allegations are determined to be unsubstantiated, unrelated to the standards or established accreditation policies, or without merit, notify the President of the University, the program director, and complainant of this determination within 10 working days.

If the investigation reveals program substantial compliance with the STANDARDS or may not be or may not have been following established accreditation policies one of two actions will result:

- The program will submit a report and documentation within 30 days of notification of the JRCERT determination, demonstrating that the substantiated allegations have been corrected. If the JRCERT and the complainant are notified of satisfaction, the university president, program director, and the complaint are notified of satisfaction and resolution of the matter.
- If the response is determined inadequate or lacking evidence of continuing substantial compliance with the standards or adherence to accreditation policies, the program may request a site visit as soon as feasible so that the investigation of the allegation of noncompliance with accreditation policies can occur.

VI. California Department of Health Services

Within 30 days after any of the following, an official of Charles R. Drew University shall, on forms furnished by the Department, inform the Department of:

- (a) Change in facility location or telephone number.
- (b) Change in course offerings.
- (c) Change of program director or faculty.
- (d) Change of affiliation agreements.

(e) Names and addresses of students who have been dismissed, suspended or who have voluntarily withdrawn from the clinical education.

(f) Names and addresses of students who have graduated.

(g) Approval of any school or on-the-job training program, which has been granted pursuant to section 30420 or 30428, may be revoked, suspended, limited or conditioned for any of the following reasons:

(1) Violation of any provision of the Radiologic Technology Act, as defined in Health and Safety Code section 27, or any regulation promulgated pursuant thereto; or

(2) If, at any time, fewer than 75% of the Department-approved examinations referenced in sections 30440, 30444, 30451 and 30455.1 and administered in the previous five years to graduates of the school have received a passing score.

(3) A plan of action will be implemented if the school fails to meet section 30436(a)(2).

a) CDU pursuant to section 30420 shall:

(1) Issue to each student who graduates or who successfully completes a required course of study, a certificate or diploma, which includes:

(A) The student's name;

(B) The name or the category listed in section 30442 or course of study completed by the student;

(C) The date(s) of attendance;

(D) The number of the certificate issued by the Department to the school; and

(E) The signature of the school's chief executive officer, dean or department administrator.

(2) Within 30 days of discontinuance of the school:

(A) Notify the Department of how all records kept pursuant to subsection (b) will be preserved and surrender the school approval certificate to the Department; or

(B) Notify the Department, transmit all records required to be kept pursuant to subsection (b) to the Department and surrender the school approval certificate to the Department.

(3) Within 30 days of discontinuance of instruction in any limited permit category notify the Department.

(b) Each school approved pursuant to section 30420 and each on-the-job training program approved pursuant to 30428 shall retain for at least five years:

(1) Records of attendance;

- (2) Proof of participation in clinical education;
- (3) Proof of performance of laboratory procedures;
- (4) Certificates or diplomas issued; and
- (5) Program transcripts.

**Charles R. Drew University of Medicine and Science
Radiologic Technology Program**

STATEMENT OF UNDERSTANDING

By signing below, you are verifying the following:

- a) I understand that all information regarding a patient or former patient is confidential and is to be used only for educational purposes in non-patient instructional settings.
- b) I understand that I am a guest in the affiliate education centers, and I will conduct myself accordingly. All known rules and regulations will be followed. When in doubt, I will contact my Clinical Instructor, Clinical Coordinator, or Program Director for clarification.
- c) I understand that the clinical education centers vary in location and that all students are expected to meet the same clinical requirements and that distance and weather do not change the program schedule unless the university closes.
- d) I understand that I will be assigned to a clinical affiliate. Placement at clinical affiliates is a privilege.
- e) I understand that I may not function independently as a staff technologist. The Clinical Instructor will determine appropriate supervision consistent with accrediting guidelines, and I will request a registered technologist to be present when I repeat any radiographs or when I perform surgical and portable procedures, regardless of my level of competency.
- f) I have reviewed this handbook, and I agree to abide by the statements above and the policies and procedures published herein. I understand that failure to meet program expectations may result in negative consequences via administrative actions.

Student Signature: _____ Date: _____

Print Name

Witness Signature: _____ Date: _____

Print Name

Title: _____

**Charles R. Drew University of Medicine and Science
Radiologic Technology Program**

PERSONAL DATA SHEET

Name: _____

Address: _____

Telephone Number: _____ Cell Phone Number: _____

Email Addresses: _____

How often do you check your email? _____

In Case of an Emergency, contact:

Name: _____

Address: _____

Telephone Number: _____ Cell Phone Number: _____

Should you move, change your phone number, or change your name, please inform the Office of Enrollment Services and the Radiologic Technology Program Secretary.

Thank you.



Eugene Hasson, M.S., R.T., (R)
Director, Assistant Professor
Radiologic Technology
Charles R. Drew University of Medicine and Science
College of Science and Health

APPENDIX A

JRCERT STANDARDS

Visit the website@
http://www.jrcert.org/acc_standards.html

APPENDIX B

**ARRT STANDARDS
OF ETHICS**

ARRT® Standards of Ethics



Last Revised: August 1, 2009
Published: August 1, 2009

PREAMBLE

The *Standards of Ethics* of the American Registry of Radiologic Technologists shall apply solely to persons holding certificates from ARRT who either hold current registrations by ARRT or formerly held registrations by ARRT (collectively, "Registered Technologists" or "Registered Radiologist Assistants"), and to persons applying for examination and certification by ARRT in order to become Registered Technologists ("Candidates"). Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular-interventional radiography, breast sonography, and radiologist assistant. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

A. CODE OF ETHICS

The Code of Ethics forms the first part of the *Standards of Ethics*. The Code of Ethics shall serve as a guide by which Registered Technologists and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Registered Technologists, Registered Radiologist Assistant, and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The radiologic technologist 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 the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socio-economic status.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

B. RULES OF ETHICS

The Rules of Ethics form the second part of the *Standards of Ethics*. They are mandatory standards of minimally acceptable professional conduct for all present Registered Technologists, Registered Radiologist Assistants, and Candidates. Certification is a method of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates and registrations issued by ARRT, it is essential that Registered Technologists and Candidates act consistently with these Rules of Ethics. These Rules of Ethics are intended to promote the protection, safety, and comfort of patients. The Rules of Ethics are enforceable. Registered Technologists, Registered Radiologist Assistants, and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

APPENDIX C

ASRT CODE OF ETHICS

APPENDIX D

A A-	4.00 3.67	The highest academic grade possible; an honor grade which is not automatically given to a student who ranks highest in the course, but is reserved for accomplishment that is truly distinctive and demonstrably outstanding. It represents a superior mastery of course material and is a grade that demands a very high degree of understanding as well as originality or creativity as appropriate to the nature of the course. The grade indicated that the student works independently with unusual effectiveness and often takes the initiative in seeking new knowledge outside the formal confines of the course.
B+ B B-	3.33 3.00 2.67	A grade that denotes achievement considerably above acceptable standards. Good mastery of course materials evident and student performance demonstrates a high degree of originality, creativity, or both. The grade indicates that the student works well independently and often demonstrates initiative. Analysis, synthesis, and critical expression, oral or written, are considerably above average.
C+ C C-	2.33 2.00 1.67	Indicates a satisfactory degree of attainment and is the acceptable standard for graduation from college (see specific program requirements for additional policies). It is the grade that may be expected of a student of average ability who gives to the work a reasonable amount of time and effort. This grade implies familiarity with the content of the course and acceptable mastery of course material; it implies that the student displays some evidence of originality and/or creativity, and works independently at an acceptable level and completes all requirements.
D+ D D-	1.33 1.00 0.67	Denotes a limited understanding of the subject matter, meeting only the minimum requirement for passing the course. It signifies work which in quality and/or quantity falls below the average acceptable standard for passing the course. Performance is deficient in analysis, synthesis, and critical expression; there is little evidence of originality, creativity, or both.
F	0.00	Indicates inadequate or unsatisfactory attainment, serious deficiency in understanding of course material, and/or failure to complete requirements of the course.

APPENDIX E

Radiation Protection Program ALARA Program & Reporting

The intent of ALARA program ("as low as reasonably achievable") is to maintain exposure to radiation at levels that are low as feasible. This radiation safety program is based on the premise that radiation exposure is not risk free and therefore, exposure should be kept to levels below the limits permitted by the State of California, The Nuclear Regulatory Commission and other regulation agencies. ALARA is critical to our radiation protection philosophy.

Dose Limits:

Whole body deep 5000 mrem/yr. 1250 mrem/qtr.

Level 1 investigation limit is:

Whole body deep 125 mrem to 374 mrem

Level 2 investigation limit is:

Whole body deep 375 mrem and higher

PROCEDURE

1. Every month radiation detection badges are returned for processing and reading.
2. All readings are recorded by a contracted company. Reports are forwarded to the Program Director and the Radiation Safety Officer and are checked to see whether or not an individual exceeded the quarter's ALARA levels.
3. If an individual exceeds the quarter's ALARA level, a notice will be generated by the company and forwarded to the program's RSO.

If the reading states that the exposure and the level has been exceeded:

4. The school will then send a notice to the individual informing him of the exceeded level. (see attachments)
5. If level two has been exceeded, a response from the individual is required.
6. If the dose limit is exceeded, the investigation must also include notification of the Department of Health Services, Radiologic Health Branch, Certification Unit with follow up required by Title 22.
 - a. Exposures above 1250 mREM and below 5000 mREM in a single quarter exposure are reported to the California Department of Health Services and the Radiation Safety Committee of the clinical site within 30 days.
 - b. Exposures above the 5000 mREM but less than 25 REM will be reported to the California Department of Health Services within 24 hours.
 - c. Exposure rates 5x in excess of the annual exposure dose limit will be reported to the California Department of Public Health immediately.
7. Copies of all notices, investigation, etc, will be maintained in the ALARA binder and the individual's personnel file.

Radiation Monitoring

Personnel Whole Body Radiation Dosimeters for radiation monitoring are furnished for Diagnostic and Fluoroscopy students. The film badge is to be worn at all times during activities where radiation is present. The exposure reports will be kept on file in the office where students may check their exposure levels. Social Security numbers and birth dates are removed from the reports.

Radiation Dosages - Evidence of Excessive Dose

All students' dosimeter reports will be monitored by the Radiation Safety Officer and Program Director for excessive radiation doses, and if a student exceeds 125 mRem during the fluoroscopy course, the faculty will investigate the causes for the excessive dose level. The investigation can include interviews with the student, the clinical education facility supervisor, the clinical coordinator and/or other relevant individuals. Previous reading for the student will be evaluated.

The objective of the investigation will be to learn why the student received the excessive dose and to determine what type of corrective action may be needed. A report of the information obtained from the interviews and other sources with subsequent recommendations will provide the corrective action. The corrective action will be enforced and the results of the investigation and corrective action will be placed in the student's file for future reference.

Name: Dates of monitoring:

Dosimeter Badge Type:

Radiation Quality (Photon, x-ray or gamma ray):

Total accumulated radiation measured in lifetime dose equivalent (MREM) is:

Deep (DOE) Eye (LDE) Shallow (SDE)

This is the accumulated dose received during time spent in the fluoroscopy certification program.

See

Website

WWW.AS

RT.ORG

Rules of

ings were reported to the radiography program by Landauer, Inc.

Excessive radiation dosage discovery/corrective action: Completed by the
Director, Clinical Coordinator and the Radiation Safety Officer