



SOUTH SUBURBAN COLLEGE

RADIOLOGIC TECHNOLOGY PROGRAM

# Student Clinical Education Handbook

RADIOLOGIC TECHNOLOGY PROGRAM

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## **Student Clinical Education Handbook**

© Radiologic Technology Program  
South Suburban College  
15800 S. State Street • South Holland, IL  
Phone 708.596.2000 • Fax 708.210.5792  
E mail  
[www.southsuburbancollege.edu](http://www.southsuburbancollege.edu)

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# Chapter 1

## Introduction to Clinical Education

*In order to insure effective clinical education in the Radiologic Technology Program at South Suburban College, each student participating in clinical education must have a full understanding of the responsibilities and considerations involved with a competency-based system of evaluation. It is the intent of the competency-based system to provide an objective and uniform method of evaluating the clinical performance of students in the program.*

This handbook has been designed to provide the student with the necessary information regarding standards, procedures and expectations which govern the students enrolled in clinical education.

This handbook may not be considered a complete statement of all standards at South Suburban College or the Division of Allied Health Sciences. More complete information is provided in the South Suburban College Catalog and the Radiologic Technology Program Student Handbook. The Student Clinical Education Handbook is meant to be a guide to assist the student in reaching their goal to become a competent radiographer.

This handbook is subject to change or may be amended at the discretion of the Radiologic Technology Program. Please read the following pages and ask for further explanation on points you feel need clarification.

# Faculty and Administration

The faculty and administration would like to extend to you their congratulations on your acceptance into the program and wish you high levels of success in the semesters to come.

The following personnel are identified:

- Dean of Health Professions & Science                      Dr. Jeffery J. Waddy DrPH, MCHES
- Program Director    John McGreevey, M B.A. Ed., R.T.(R)(MR)
- Clinical Coordinator    Kimberly Marks, BS, R.T.(R)(MR)
- Clinical Instructors
  - Ingalls Memorial Hospital    Angel Powell, R.T.(R)
  - Ingalls Family Care Center, Calumet City    Judy McCarthy, R.T.(R)
  - Ingalls Family Care Center, Flossmoor    Janet Leoni, R.T.(R)
  - Ingalls Family Care Center, Tinley Park    Tina Oostema, R.T.(R)
  - St. Catherine Hospital    Gus Uribe, R.T. (R)
  - St. James Olympia Fields Campus    Susan Riggle, R.T.(R)
  - Roseland Hospital    Conrad Brown, R.T.(R)

## **Clinical Education Centers**

- **Ingalls Memorial Hospital**  
One Ingalls Drive  
Harvey, IL 60426  
708.333.2300
- **Saint Catherine Hospital**  
4321 Fir Street  
East Chicago, IN 46321  
219.392.1700
- **Saint James Hospital, Olympia Fields Campus**  
20201 Crawford Avenue  
Olympia Fields, IL 60461  
708.747.4000
- **Ingalls Family Care Center, Calumet City**  
1600 Torrence Avenue  
Calumet City, IL 60409  
708.730.1300
- **Ingalls Family Care Center, Tinley Park**  
6701 West 159<sup>th</sup> Street  
Tinley Park, IL 60477  
708.429.3300
- **Ingalls Family Care Center, Flossmoor**  
19550 Govenors Highway  
Flossmoor, IL 60422  
708.799.8400

## Overview of Clinical Education

The clinical education course work helps to integrate the cognitive aspect with the psychomotor and affective skills required of a student radiographer in the Radiologic Technology Program. Clinical education involves three phases: observation, assistance and performance.

The student begins clinical education by assisting a radiographer in the execution of duties. This participation moves from a passive mode of observation to a more active mode of assisting the radiographer in radiographic examinations. The rate at which the student progresses is dependent upon the ability of the student to comprehend and perform the various assigned tasks.

As experience is gained in the various examinations, the student moves to an independent clinical performance stage. At this point, the student is actually performing the examination under direct supervision of a radiographer. Direct supervision means that the qualified radiographer:

1. reviews the request for the examination in relation to the student's achievement;
2. evaluates the condition of the patient in relation to the student's achievement;
3. is present during the conduct of the examination, and
4. reviews and approves the radiographs.

After demonstrating competence in performing a specific radiographic procedure, the student may be permitted to perform procedures under indirect supervision. Indirect supervision means that the qualified radiographer reviews, evaluates and approves the procedure as indicated above and is immediately available to assist the student regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

### Note

According to the "Standards for an Accredited Educational Program in the Radiologic Sciences", 1997 edition, the supervising radiographer **MUST** be present in the radiographic room if any repeat exposures are made.

During clinical education, the student's performance is evaluated primarily by the clinical instructors on an on-going basis. The student is evaluated on specific radiographic examination competencies, proficiencies, film critiques, clinical seminar, and case studies, which will be discussed later.

# Chapter 2

## Clinical Rotation Master Plan

*During the five semesters of the program, students experience at least two clinical rotations. Students attend clinical education two days per week during the first two semesters and three days per week during the third through fifth semesters. Students may be scheduled for clinical education four days per week during the summer semester.*

This handbook has been designed to provide the student with the necessary information regarding standards, procedures and expectations which govern the students enrolled in clinical education. This facilitates understanding and scheduling for students and the clinical education centers. As much as possible, the beginning and/or end of the clinical rotation is set to coincide with the academic semester. The exception is the first semester of the program.

The first rotation begins the first summer semester and concludes at the end of the spring semester. This rotation encompasses clinical courses RAD-100, RAD-125 and RAD-126 for a total of 34 weeks (approximately 480 clinical hours).

The second rotation begins with the summer semester and concludes at the end of the fall semester. This rotation includes clinical courses RAD-127, and RAD-225 for a total of 24 weeks (approximately 576 clinical hours).

The third rotation begins with the final spring semester and ends at the conclusion of that semester. This rotation includes clinical course RAD 226 for a total of 16 weeks (approximately 384 clinical hours).

Students are informed at least four weeks in advance of the site of the next clinical rotation. This schedule is distributed to students, the clinical education centers, and is posted on the student information bulletin board in the campus radiography classroom.

1. Clinical instructors determine the student room rotations at a particular institution based on the direction of the College. The room rotation schedules are posted at the clinical education center.

## Master Plan

A Clinical Rotation Master Plan exists which is intended to provide the student with a variety of clinical experiences at the clinical education centers affiliated with the Radiologic Technology Program. The Plan includes all five semesters of clinical education course work and consists of a series of specific rotations as outlined below.

### **RAD 100 Fundamentals of Radiologic Technology 1 credit hour**

Summer Semester, 1<sup>st</sup> Year  
one day per week for 8 weeks = 8 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
transportation	arranged	arranged
office procedures	arranged	arranged
dark room	arranged	arranged
routine radiography	arranged	arranged
fluoroscopic procedures	arranged	arranged
seminar	8	8
finals	1	arranged

### **RAD 125 Introduction to Clinical Practice 2 credit hours**

Fall Semester, 1<sup>st</sup> Year  
two days per week for 12 weeks = 24 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
transportation	arranged	arranged
office procedures	arranged	arranged
dark room	arranged	arranged
routine radiography	arranged	arranged
fluoroscopic procedures	arranged	arranged
seminar	16	16
finals	1	arranged

### **RAD 126 Clinical Education 1 3 credit hours**

Spring Semester, 1<sup>st</sup> Year  
two days per week for 16 weeks = 32 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
routine radiography	18	144
fluoroscopic procedures	8	64
portables/surgery	4	32
seminar	16	16
finals	1	arranged

**RAD 127 Clinical Education 2 3 credit hours**

Summer Semester, 1<sup>st</sup> Year

three days per week for 8 weeks = 24 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
routine radiography	8	64
fluoroscopic procedures	6	48
portables/surgery	6	48
seminar	8	32
finals	1	arranged

**RAD 225 Clinical Education 3 4 credit hours**

Fall Semester, 2<sup>nd</sup> Year

three days per week for 16 weeks = 48 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
orientation	3	24
routine radiography	13	104
fluoroscopy	3	72
portables/surgery	6	48
seminar	16	16
finals	1	arranged

**RAD 226 Clinical Education 4 4 credit hours**

Spring Semester, 2<sup>nd</sup> Year

three days per week for 16 weeks = 48 days

<u>assignment</u>	<u>days</u>	<u>hours</u>
routine radiography	13	104
fluoroscopy	9	72
portables/surgery	6	48
electives	arranged	arranged
seminar	16	16
finals	1	arranged

## Assignment of Rotations

Students rotate through several clinical education centers throughout the duration of the Radiologic Technology Program. Each student is assigned to a minimum of two clinical education centers during the two-year program. This procedure is designed to increase learning experiences by exposing the student to a wide variety of administrative styles, diagnostic procedures and imaging equipment.

Students are assigned their first clinical rotation in the fall semester of their first year. The second rotation begins the fall semester of the second year. Each student will be assigned to at least two rotations. Additional rotations may be assigned to assure a well-rounded clinical experience.

### Note

Approximately five weeks before the new rotation, students are requested to name their four choices of clinical education centers. Every possible attempt is made to accommodate these choices. Students are informed at least four weeks in advance of the next clinical rotation. The final decision of clinical education center assignment is made at the discretion of the program director.

Solely the Radiologic Technology Program and South Suburban College will determine the length and nature of the clinical rotations. Also, the Program and the College will determine the total number of clinical hours required of each student for each rotation and/or academic semester.

Clinical instructors determine the student room rotations at each clinical education center based on direction from the Radiologic Technology Program. The room rotation schedules are posted at the clinical education center.

Students may request additional optional rotations in the following special modalities once the required clinical competencies have been completed:

- computed tomography
- nuclear medicine
- magnetic resonance
- ultrasound
- radiation oncology
- cardiovascular interventional radiography

These rotations are permitted up to a total of two weeks per modality. Special modality rotations are by request of the student on a first come, first serve basis.

## Clinical Education Matriculation

As previously mentioned, the clinical education of the students in the Radiologic Technology Program is distributed over the two years (six semesters) that the student is enrolled in the Program. Clinical course expectations can be divided into five clinical experience courses. The first clinical semester includes an orientation to the Radiology Department. Semesters two through four require students to demonstrate competency in the performance of routine radiographic procedures. The final semester may be used to experience specialized radiographic procedures such as CT, MRI, ultrasound, etc.

### Note

In order to continue in the program, students are expected to achieve a minimum level of performance each semester in order to progress to the next clinical course. The minimum requirements are published on the clinical course syllabus distributed at the beginning of each semester.

This matriculation plan was designed for the average student enrolling in the Radiologic Technology Program. The faculty recognize that students do not all progress at the same rate. Guidelines have been set to assist the student in matriculating through clinical education and to facilitate graduation in May in the spring semester of the second year.

Students who progress at a slower than average pace would be eligible for a delayed graduation. If a student does not meet the expectations for May graduation, an individualized clinical rotation plan will be designed to assist the student in accomplishing the clinical goals. A student will have two semesters from the time an incomplete is issued to complete clinical expectations.

# Chapter 3

## Clinical Education Schedules

*Day to day scheduling and room or technologist assignments will be made by the clinical instructor at each clinical education center as best meets the educational needs of the student.*

Starting time for the clinical education centers are set by the clinical instructors at their specific institution. A clinical shift is typically eight hours between 7:00 A.M. to 3:30 P.M. Students should be allowed the same time as staff radiographers in the institution for coffee and lunch breaks.

All changes in clinical schedules must be cleared with the clinical instructor at the appropriate institution in advance. Clinical instructors should not change clinical schedules without at least four weeks notice to students. Clinical schedules may be changed to accommodate required courses at the College when advance notice of at least two weeks is given to the program director. Clinical schedules will **NOT** be changed to accommodate student work schedules.

### Record of Clinical Education Time

Students may attend clinical education for only the number of days (credits hours) for which they are registered. Time records are used at all clinical education centers. The clinical instructor at that institution will distribute time sheets/cards.

All students are required to be present in their assigned areas for clinical education during the hours established with the clinical instructor. Students may not leave the radiology department or clinical education center without notifying the clinical instructor or the clinical instructor's designee.

Time of arrival and departure must be recorded appropriately. Clinical instructors will require students to make up time that is not accurately recorded. Students who falsify time records will have charges of misconduct brought before the South Suburban College Committee on Misconduct.

## Absence from Clinical Education

Regular attendance is an essential expectation of a radiographer in order to provide quality patient care. Students are expected to report promptly for clinical education on all scheduled clinical days.

In the event a student cannot attend clinical education, that student must call in to the clinical education center and speak to the clinical instructor or the clinical instructor's designee. All absences from clinical education are classified as excused, unexcused, or tardy.

### Excused Absence

Excused absences include holidays granted by the college according to the academic calendar and days when classes are canceled by the college due to inclement weather. Cancellation of classes due to weather will be announced on the television and radio. In either case, the clinical education center does not have to be notified of your absence, although a courtesy call would be appreciated.

### Excused absences that do not have to be made up

Bereavement - Students shall be allowed funeral leave, up to 3 clinical days for the death of:

- Parents
  - Siblings
  - Spouse- child – step-child, residing in the household
- Funeral leave up to 1 clinical day for the death of:
- Step-parent
  - Step- child
  - Grandparents
  - In-laws

If a student requests to attend a funeral of an extended family member (e.g. aunt or uncle), or a friend, the absence will not be counted as an occurrence, but all missed time will need to be made up prior to the end of the semester. Students should notify the clinical instructor in advance of the absence and provide appropriate documentation.

First-year students granted 3 sick / personal days for first 12 **months**. Second-year students may be granted a total of /4 sick or personal days for the last 2 semesters in the program. If additional time is used, it will be made up before the end of the semester in which it was missed or extension in program will result.

Court mandated or faculty-approved absences – If a student has a documented, court mandated appearance, or faculty-approved absence, the absence will not be counted as an occurrence, but all missed time will need to be made up prior to the end of the semester. Students should notify the clinical instructor in advance of the absence and provide appropriate documentation.

**For illness**, you must contact the clinical instructor before 8 a.m. by phone and the program director by 9 a.m., via email or phone. **For all other absences**, contact the Program Clinical Coordinator for approval then the Clinical Coordinator will contact the clinical instructor to notify them of the absence. Always communicate directly with the clinical instructor in your clinical department.

Any time missed from the clinical site should be made up at that clinical site.

Excused absences do have to be made up. Clinical grading deadlines will be extended for excused absences only.

### **Unexcused Absence**

If a student is absent for any reason other than those listed above, the absence is considered unexcused. Absenteeism develops an undesirable trait that is unfortunately very difficult to change and, therefore, must be kept to a minimum. Excessive or unwarranted absences will result in the following corrective action protocol per semester:

The following policies govern unexcused absences for each individual clinical course: Absences within the semester

<u>Instance</u>	<u>Action</u>
1-2 occurrences of absence within the semester	Minor Infraction Time made up
The 3-5 occurrence of absence	Documented 1 <sup>st</sup> Level Infraction verbal warning documented on clinical incident form student all time made up plus 1 additional day
The 5-7 occurrence of absence	Documented 2 <sup>nd</sup> level infraction written warning documented all time made up plus 2 clinical days
8 Occurrences or greater	Documented 3 <sup>rd</sup> level infraction student will receive a failing grade for the class

If a student fails the clinical they must follow the re admission process outlined in the handbook

### **Tardiness**

Tardiness is defined as more than 6 minutes late or Tardiness of one hour or more is considered an unexcused absence. Excessive or unwarranted tardys will result in the following corrective action protocol per semester:

If Student is not tardy all semester they will be able to take a day off from clinical in the last week of the semester or bank that day for the following semester. For purposes of counting toward time off the student must clock in at the clinical at or before the scheduled time

For discipline purposes tardiness is defined as clocking in 6 minutes or more after scheduled time

1. The following policies govern Tardiness for each individual clinical course: Tardiness

<u>Instance</u>	<u>Action</u>
1-2 occurrences of tardiness within the semester	Minor Infraction (no time made up)
The 3-5 occurrence of tardiness within the semester	Documented 1 <sup>st</sup> Level Infraction (1 clinical day added)
The 5-8 occurrence of tardiness within the semester	Documents 2nd level Infraction (2 additional clinical days)
Occurrences of tardiness greater than 8 within the semester	Documented 3 <sup>rd</sup> level Infraction 5 days of clinical time must be made up

#### Note – Banking of Clinical Hours

Students are allowed to bank time or use the excused time off as allowed above in anticipation of missing clinical time during a pregnancy/surgery only. Permission will not be granted for any other circumstances.

## Vacations

Vacations during clinical courses are not allowed. Personal vacations should be scheduled during academic breaks.

# Chapter 4

## Clinical Education Conduct

*Students are expected to conduct themselves in a professional manner at all times during clinical education. These rules simply indicate the exact elements of professional behavior and conduct for South Suburban College radiologic technology students.*

The clinical education experience is designed to encourage responsibility in a professional and ethical environment and this includes behavior such as cooperation, accepting constructive criticism and dependability.

Students are expected to consider all aspects of the Radiologic Technology Program in the clinical education center and the patient to be totally confidential. These aspects are not to be discussed with other students, friends or family outside of the clinical education center. Violation of this professional trust will result in charges of misconduct brought before the South Suburban College Committee on Misconduct.

Refrain from making personal telephone calls on institutional telephones except in the case of an emergency. Public phones are to be used for all non-institutional business.

No smoking by students is permitted in the clinical education centers; clinical education centers are considered to be smoke free environments.

Visiting friends and family who are patients must be according to hospital rules and regulations during non-clinical education hours unless visiting according to hospital policy. Remember that students are not permitted in hospitals during non-clinical education hours unless visiting according to hospital policy.

## Official Uniform

The official Radiologic Technology Program uniform shall be worn at all times when engaged in clinical education as a member of the South Suburban College Radiologic Technology Program. This uniform is not to be worn for purposes other than South Suburban College clinical courses. This includes employment of any type at any health care facility.

The uniform consists of a royal blue scrub top and pants. All uniform tops must have the official South Suburban College uniform emblem embroidered on them.

A white lab coat with the South Suburban College uniform emblem patch sewn on the right sleeve two inches down from the shoulder seam may be worn with the uniform.

Footwear consists of solid white legwear or socks and solid white tennis or clinical shoes. Shoes with other colors on them or shoes that light up are not permitted.

Failure to wear an appropriate uniform will result in corrective action as described in the Student Handbook. At the discretion of the clinical and campus faculty, other dress may be appropriate to an individual department (white sweater, etc.).

## Name Badge

Each student is required to wear the official Radiologic Technology Program name badge. The name badge will identify the student by their picture and name. The words “student radiographer” as well as the official college logo will be present on the badge.

During the first few weeks of the first semester, the student’s picture will be taken with a digital camera. Within a week a personal name badge will be available for purchase at the South Suburban College Bookstore.

The South Suburban College Radiologic Technology Program name badge must be worn at all times while at the clinical education center. The badge is never to be worn outside of the assigned clinical education center for employment or any other reasons.

## Grooming

As radiographers are in close proximity with patients, personal hygiene must be maintained at all times. A clean and wrinkle-free uniform should be worn. Cosmetics should be worn in moderation. Long hair should be tied back or put up. Facial hair should be kept neat and trimmed. Inappropriate undergarments visible through the uniform are prohibited. Loud or flashy jewelry should not be worn with the uniform at any time. All jewelry should be in moderation at all times, as it can cause injury to the student and/or to the patient.

## Lead Markers

Each student is required to purchase at least one set of left and right lead markers with embedded initials. Purchase information is provided at the orientation session each year.

All work done by a student must be identified with their personal markers. A student will not receive clinical competency credit for any work that is not properly identified.

Students may use lead markers outside of clinical education.

## ARRT Code of Ethics

Students are expected to follow the American Registry of Radiologic Technologists Code of Ethics.

This code shall serve as a guide by which Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, other members of the medical care team, health care consumers, and employers. The Code is intended to assist radiologic technologists in maintaining a high level of ethical conduct.

- 1.** The Radiologic Technologist conducts himself/herself 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 principle 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 services unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination regardless of sex, race, creed, religion, or socioeconomic status.
- 4.** The Radiologic Technologist practices technology founded upon the theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purposes for which they have been 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 management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
- 7.** The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self, and other members of the health care team.
- 8.** The Radiologic Technologist practices ethical conduct appropriate to the profession, and protects the patient's right to quality radiologic technology care.
- 9.** The Radiologic Technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual of the community.

**10.** The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues, and investing new and innovative aspects of professional practice. One means available to improve knowledge and skill is through professional continuing education.

## The Patient's Bill of Rights

Students are expected to cooperate with the American Hospital Association's Patient's Bill of Rights.

The Patient's Bill of Rights was designed to inform patients of their rights while in a hospital. As a student radiographer who will be experiencing clinical education in several hospitals, you are obligated to respect these rights.

- 1.** The patient has the right to considerate and respectful care.
- 2.** The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms of the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person on his behalf. He has the right to know, by name, the physician responsible for his care.
- 3.** The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited to, the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
- 4.** The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his action.
- 5.** The patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in his care must have permission of the patient to be present.
- 6.** The patient has the right to expect that all communications and record pertaining to his care should be treated as confidential.
- 7.** The patient has the right to expect that within its capacity, a hospital must make reasonable response to the request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, patient may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.

- 8.** The patient has the right to obtain information as to any relationship of his hospital to other health care and educational institutions insofar as his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him.
- 9.** The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to refuse to participate in such research projects.
- 10.** The patient has the right to expect reasonable continuity of care. He has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that the hospital will provide a mechanism whereby he is informed by his physician or a delegate of the physician of the patient's continuing health care requirements following discharge.
- 11.** The patient has the right to examine and receive an explanation of his bill, regardless of source of payment.
- 12.** The patient has the right to know what hospital rules and regulations apply to his conduct as a patient.

# Chapter 5

## Student Responsibilities

*All students are subject to the rules and regulations established by the affiliating clinical education center, as well as the Program and College rules.*

Due to increasing concern about the care of patients with infectious diseases, students are strongly advised to be educated about and responsible for their interactions with infectious patients.

### Infectious Diseases

Infectious diseases of primary concern in today's health care environment include hepatitis B, acquired immune deficiency syndrome and tuberculosis. Students are advised to follow the exact procedures established by the clinical education centers, primarily isolation techniques, in caring for patients.

Students should report any contact with communicable disease in accordance with the policies of the clinical education center in which the contact occurs.

Additionally, Occupational Safety and Health Act (OSHA) amendments suggest that all individuals who are involved in clinical education in acute-care or long term care facilities should be vaccinated for Hepatitis B. The exception is for pregnant individuals. After delivery, the student should seek vaccination as soon as a physician gives permission.

Prior to the start of clinical education the student must do one of the following:

1. Seek Hepatitis B vaccination from a physician or other primary source of health care and submit documentation to the program director.
2. Prove previous Hepatitis B vaccination and submit documentation to the program director.
3. Sign a waiver of liability form provided by the program director, declining Hepatitis B vaccination and submit to the program director.

In addition, prior to the start of clinical education and thereafter annually, students must show documentation of TB testing.

Students with an infectious disease, other than a common cold, may not attend clinical education. The student should inform the clinical instructor and the program director immediately upon diagnosis. They may not return to clinical education until a doctor's release has been presented to the program director.

## **Health Services**

All students must have a current South Suburban College physical examination on file with the Radiologic Technology Program prior to beginning clinical education.

Emergency medical services will be provided by the clinical education centers when needed but students are responsible for payment for all services rendered by the institution.

## **Health Insurance**

Neither the clinical education center nor South Suburban College assumes responsibility for medical expenses that may be charged for incidents occurring during clinical education (i.e. puncture wounds from contaminated needles, contagious diseases, etc.).

It is recommended that the student obtain some type of health insurance coverage prior to attending clinical education. Verification of health insurance or a signed waiver must be on file prior to clinical education.

## **Malpractice Insurance**

All students must be covered under a malpractice insurance policy prior to beginning clinical education. South Suburban College provides professional liability insurance for students while engaged in student clinical learning activities. The College malpractice insurance plan does not cover a student who may work in institutions outside of scheduled clinical education time

## **Notices**

Students are responsible for all information posted on the bulletin boards in 4470 and on clinical education center bulletin boards designated for South Suburban College.

## **Transportation**

Students are responsible for their own transportation to and from the clinical education center, as well as all personal needs while at the institution.

## **Americans with Disabilities Act**

The Radiologic Technology Program acknowledges and adheres to the Americans with Disabilities Act (ADA) of 1990. It is the responsibility of the student to contact the program director and request the desired accommodation. Any student requiring an accommodation must have a documented disability.

## **Incidents**

It is very important that hospitals have a record of all incidents in case of litigation. Students are responsible for following this prescribed format for reporting incidents:

- An institutional incident report and a college significant incident report must be filled out immediately.
- A copy of the institutional incident report and a college significant incident report must be forwarded to the Program Director immediately.
- Students are subject to corrective action for failure to follow this procedure.

## Overview

All students are required to have on file during clinical education:

- current physical
- current annual TB test
- valid basic CPR certification
- verification of health insurance
- verification of HBV vaccine or waiver
- background check completed
- annual flu shot

# Chapter 6

## Radiation Protection and Monitoring

*Students in the Radiologic Technology Program at South Suburban College are expected to conform to the Illinois Department of Nuclear Safety regulations. All students shall practice appropriate radiation safety procedures in protecting themselves, their patients and other personal from unnecessary exposure.*

**S**tudents will not operate fluoroscopic equipment of any type at any time under any circumstances when human subjects are involved unless directly supervised by a physician or qualified radiographer who is physically present in the room.

Students are not to be involved in holding patients during routine radiographic procedures and should not be present in the room during a routine radiographic exposure.

### Direct Supervision

Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under direct supervision of qualified radiographers. The parameters of direct supervision:

1. A qualified radiographer reviews the request for the examination in relation to the student's achievement;
2. A qualified radiographer evaluates the condition of the patient in relation to the student's achievement;
3. A qualified radiographer is present during the conduct of the examination, and
4. A qualified radiographer reviews and approves the radiographs.
5. A qualified radiographer must accompany the student when performing portable examinations.

### Indirect Supervision

After demonstrating competence in performing a specific radiographic procedure, the student may be permitted to perform procedures under indirect supervision. Indirect supervision means that the qualified radiographer reviews, evaluates and approves the procedure as indicated above and is immediately available to assist the student regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is

being performed. This availability applies to all areas where ionizing radiation equipment is in use.

#### Note

According to the “Standards and Guidelines of an Accredited Educational Program in Radiologic Sciences”, 1997 edition, the supervising radiographer **MUST** be present in the radiographic room if any repeat exposures are made.

## Dosimeter

All students in the Radiologic Technology Program will wear a dosimeter at the collar at all times when using ionizing radiation during clinical education and energized laboratory procedures. During fluoroscopy, the dosimeter will be worn outside the lead apron at the collar. If a thyroid collar is worn, the dosimeter should be worn outside the collar.

Dosimeters are to be worn only during clinical education or during college labs. Students may not wear college dosimeters during outside employment for any reason. Students not having a dosimeter will be assigned to non-radiographic areas or duties for the day.

Dosimeters are to be changed on the first day of class after the end of the monitoring period printed on the dosimeter or notification by the program. Failure to change the dosimeter after the second class day after notification will result in corrective action. Sickness or excused absences do not relieve students of responsibility for changing the dosimeter on schedule. New dosimeters will be distributed from the office of the program director.

Each student is responsible for his or her dosimeter. Loss or accidental exposure of a dosimeter shall be reported to the program director immediately. A telephone message shall be left the day of the incident with a significant incident report to follow in person as soon as possible. If the dosimeter is lost or damaged, the student will not be allowed to continue clinical education until a new dosimeter is issued. This could result in considerable loss of clinical time and will result in corrective action. Students will be assessed for all loss dosimeter charges. Dosimeters should never be left in your car!

The Program Clinical Coordinator is the Radiation Safety Officer.

Dosimeter reports are reviewed by the clinical coordinator, the program director and the student. The student will initial the report to acknowledge the reading. High readings are investigated following the ALARA guidelines, discussed with the student and documented by the program director. Any reading of .5rem or more in any month will be considered an excessive dose. The student will be placed on probationary status for one month. This could result in considerable loss of clinical time and will result in corrective action.

## Pregnancy

The student has the right to declare or not to declare a pregnancy at anytime. A pregnancy must be declared to the program director in order to activate the pregnancy policy options. Once declared, and depending on the option the student chooses, specific government regulations are activated. If the student decides to declare a pregnancy, the student is required to present to the program director

a written statement from her physician indicating the expected date of delivery and her fitness level for clinical education. A student may un-declare a pregnancy at any time.

#### Note

The first trimester of a pregnancy is the most critical time as far as exposure to ionizing radiation is concerned. It is preferred that students suspecting the start of a pregnancy give notice to the clinical instructor and the program director as soon as possible to allow clinical education assignments to be modified to minimize fetal exposure during this critical time.

#### Option 1

The student may continue in the Radiologic Technology Program without restriction.

#### Option 2

The student may continue in the Radiologic Technology Program with restrictions being imposed on clinical rotations. The pregnant student will not participate in fluoroscopic, portable or surgical procedures. Pregnant students are also restricted from procedures involving radium-implant patients.

Substitute clinical rotations will not be provided. All clinical rotations missed by the students will be made up by the end of the program. This may result in the delayed completion of the program.

In addition to the clinical restriction, the pregnant student will be expected to complete all requirements for didactic courses in which she is enrolled prior to enrolling in the next sequential semester course work. This is necessary since the course in which the student is enrolled may be a prerequisite for the following class.

It is the students' responsibility to continually check the dosimetry reports. As with any other student the pregnant student should initial the dosimetry report to verify that they have checked the dose rate and total accumulated exposure close.

Pregnant students may bank clinical time in anticipation of missing clinical time during the pregnancy. Please refer to the Student Handbook.

#### Option 3

A pregnant student may request a leave of absence not to exceed one year and wither withdraw from or attempt to complete the course she is currently enrolled in. There would be a place reserved for the student in the next accepting class. It would be necessary to submit another application for admission to the program.

#### Option 4

A pregnant student may request to withdraw from the program for an indefinite period of time. If she wished to be reinstated, she must submit an application for admission and compete for admission to the program. Any previous course work would be reevaluated at the time of readmission to assure competency has been maintained.

According to the Student Handbook, the student choosing *option 2* of the pregnancy policy may continue her clinical education. She will be expected to participate in all clinical assignments and/or duties with the exceptions of surgical radiography, mobile radiography and fluoroscopy.

The student's total accumulated exposure during her pregnancy shall not exceed 0.5 rem, not to exceed 50 mR in any month. In the event this exposure is exceeded, the student shall be barred from any clinical education for the remainder of the pregnancy. It is the student's responsibly to continually check the film badge reports. The student shall initial the film badge reports to verify that she has checked the total accumulated exposure dose.

A student will be allowed to make up any clinical time missed due to pregnancy or immediate post partum care. Make up time will be structured to compensate for loss of clinical experiences during pregnancy. Students are allowed to bank time in anticipation of missing clinical time due to pregnancy. See the section on banking of clinical hours for details.

### EXTEND ILLNESS POLICY

Students with an extended illness, who incur an injury during the course of the Program, or with extenuating circumstances that may limit their abilities to fully perform the functions required in the clinical education course, meet the total attendance requirements and/or accomplish the stated objectives, have two options:

1. Receive an Incomplete (I) grade in the clinical education course for the semester in which the illness/injury occurred. All course requirements and objectives must be made up by the end of the following semester of the first year for the first year students and prior to successful Program completion for second year students. Failure to complete all requirements and objectives may result in the failure of the clinical education course. In addition, a physician's completed release of the student must be granted in order for the student to return and continue in the Program. A Return from Illness Form must be filed with the Clinical Instructor and responsible Program faculty member.
2. Withdraw from the Program and re-enter at a later date. Students considering this option should be aware that voluntary withdrawal from the Program holds no guarantee for re-entry or former clinical assignment.

# Chapter 7

## Clinical Evaluation Program

*Radiographers must be competent in both the art and science of radiography. The art of radiography is the ability of the radiographer to accurately and consistently position and care for the patient. It is practiced in the clinical setting. South Suburban College Radiologic Technology Program will evaluate the student's skill in this art through a clinical evaluation system.*

The concept of competency based education is firmly established in the Radiologic Technology Program's clinical evaluation system. According to a student's demonstration of clinical competency, a student may complete clinical requirements either on time or later than the projected date of graduation or completion of didactic classes.

Students must successfully complete all required clinical assignments prior to graduation from the Radiologic Technology Program and are strongly encouraged to complete as many assignments as possible beyond the minimum requirement for graduation.

Radiographers must have the ability to care for patients in a professional and ethical manner. To assist you in developing these skills, the South Suburban College Radiologic Technology Program conducts a clinical advising system in conjunction with the clinical evaluation system. Clinical grades are not affected by the advising results; however, students may be subject to corrective action due to failure to comply with advising suggestions.

## Clinical Course Syllabi

The specific objectives and requirements of each clinical course are stated in each clinical course syllabus. The syllabus will be distributed at the beginning of each clinical semester during the first meeting of the clinical seminar. Students should refer to these documents for course content and objectives. Successful completion of RAD 125, RAD 126, RAD 127, RAD 225, and RAD 226 is required for graduation. Also, each clinical course must be successfully completed in this stated order to continue and successfully complete the Radiologic Technology Program.

Any combination and/or all of the following components of clinical education may be required each semester; competencies, film critiques, seminar, proficiencies, clinical test outs and case studies.

## Competencies

Clinical competencies are achieved by performing radiographic procedures on patients at the clinical education center. A student must continue to attempt each specific procedure until that procedure is mastered. The number of attempts before mastery does not affect the clinical grade.

A student may not attempt a competency until the procedure is taught and tested at the college. Not more than one competency will be granted for the same procedure. For example, a portable wrist will not count as a wrist and a portable orthopedic. Film critiques must be completed on all clinical competency forms and student lead markers must appear on all radiographs submitted for competency.

Students are responsible for arranging for an evaluator to be present during the competency. Clinical instructors, registered staff radiographers or college faculty may do the observation and evaluation of the student's procedural skills during the competency. Competencies may be rejected by the faculty if deemed necessary due to failure of evaluators to note errors during the competency (gross positioning errors, wrong markers, etc.)

There are thirty-six (36) mandatory competencies and eighteen (18) elective competencies available for a total of fifty-four (54) clinical competencies. Each semester the minimum number of competencies required for passing the semester will be printed in the clinical syllabus. Students are encouraged to complete more competencies than required per semester so as to gain graduation requirements as soon as possible.

All required competencies for the semester must be completed at the assigned clinical education center prior to a new rotation.

### Note

Simulation of infrequent or limited volume examinations is at the discretion of the program director after reviewing current radiography practice at the assigned clinical education center.

## **Film Critiques**

Film critiques must be completed for all competencies and must be completed with the actual radiographs produced for the original competency. The only exception is when there is documented proof by the clinical instructor of missing films. In this case, students may substitute films from the same procedure on another patient for the film critique portion of the competency. Film critiques must be reviewed within one month of the performance of the examination.

All portions of the procedure must be critiqued even though they are not part of the required competency projections or positions.

Film critiques may be filled out during clinical time only with permission of the clinical instructor. When the caseload is heavy, students are expected to be actively involved in performing or assisting with radiographic procedures.

## **Proficiencies**

A student must first be competent in a procedure before proficiency may be obtained. Proficiencies are designed to encourage students to strive for continued improvement in radiographic skills even though competency has already been achieved. Proficiency is not required for a specific procedure, but rather is required for a group of procedures. For example, there may be two proficiencies required for the axial skeleton in a given semester.

## **Case Study**

A single case study may be required during the semester. The case study is presented during the clinical seminar. Students must utilize the case study form for their presentation. A score of 78% must be achieved in order to successfully complete this portion of the clinical evaluation.

## **Seminar**

Clinical seminar is conducted on a weekly basis. A syllabus will be distributed solely for seminar. An overall score of 78% must be achieved in order to successfully complete this portion of the clinical evaluation.

## **Clinical Advising**

All students enrolled in radiographic clinical education are evaluated and advised regarding their ability to care for patients in a professional and ethical manner. The advising program is conducted via several documents.

## **Significant Incident Form**

This form is utilized by anyone to document any positive or negative educational experiences of the student. In most cases students are expected to assist in obtaining positive experiences while negative experiences are usually documented by hospital or college staff.

## **Attitude and Behavior Form**

This form is used by staff radiographers to give students and faculty an opinion of the students' trends in professional attitudes and behavior. Students do not see these actual forms, but are supplied with a composite each term.

## **Self Evaluation Form**

Self-evaluation forms are issued to students near the beginning of each academic semester. The form requires students to assess their current skills in various procedures, professional abilities, overall ability and recent progress. Students complete the form prior to a scheduled advising session at the clinical education center. Students must establish one goal to be discussed during the advising session. An instructor will conduct the advising session, which is designed to ascertain that both student and faculty have similar perceptions of the ability of the student.

## **Student Evaluation of Clinical Education Center Form**

This form is completed by the student following the end of each clinical rotation. The form is designed to allow the student to offer constructive criticism with a view to improve clinical education conditions for future students. A compilation of these forms is forwarded to the administration of the clinical education center radiology department as well as to the clinical instructor. When only one student is in attendance during a clinical rotation, this evaluation will not be done.

Clinical grades are not affected by advising results, however, students may be subject to corrective action including incomplete or failing course grades due to failure to comply with advising suggestions or making unsatisfactory progress toward goal completion.

All clinical advising records will be destroyed after graduation except those which document mandatory advising sessions or dismissal from the program.