TRINITY HEALTH

Trinity Health Radiologic Technology Program

Policy Manual, Clinical Education Plan and JRCERT Standards

Revised 2024

Adopted: 1996
Reviewed: Annually
Revised: 1999, 2000, 06, 09, 10, 11, 12, 13, 15, 16, 17, 18, 19, 20, 21
Approved: Advisory Committee 6/1996, 7/1999, 6/2002, 7/2005, 6/2010, 3/2015, 6/2019, 6/2022

Policy and Procedure Agreement

This Manual is intended to be a description of the policies, academic processes, degree requirements and course offerings in effect for the 2024-2026 academic year for our program. The Trinity Health Radiologic Technology Program reserves the right to change any of the policies and procedures described in this Policy Manual as deemed necessary. Students shall read the Policy Manual, shall have the opportunities to ask questions and have their questions answered. Students are required to comply with the policies, rules and regulations of the Trinity Health Radiologic Technology Program and Trinity Health. Upon completion of the Policy Manual review, the student will read and sign a form stating they received a copy of, read and had opportunity to seek clarifications on any policies, procedures or standards. This form will become a part of the student's permanent file.

Table of Contents

Career of Radiologic Technology

Radiologic Technology is a science combining advanced technology and human compassion. Radiologic Technologists (radiographers) use their knowledge of physics and human anatomy to create permanent medical images to diagnose disease. The radiologic technologist is qualified to provide patient services using various types of imaging equipment. The radiologic technologist works under the direction of a Radiologist — a medical physician with extensive training in performing radiologic procedures and interpreting medical images. This is a profession which requires a dependable personality with a mature, caring nature and an ability to exercise independent judgment. For additional information on career opportunities, explore the ASRT website at: https://www.asrt.org/main/careers/careers-in-radiologic-technology

Trinity Health

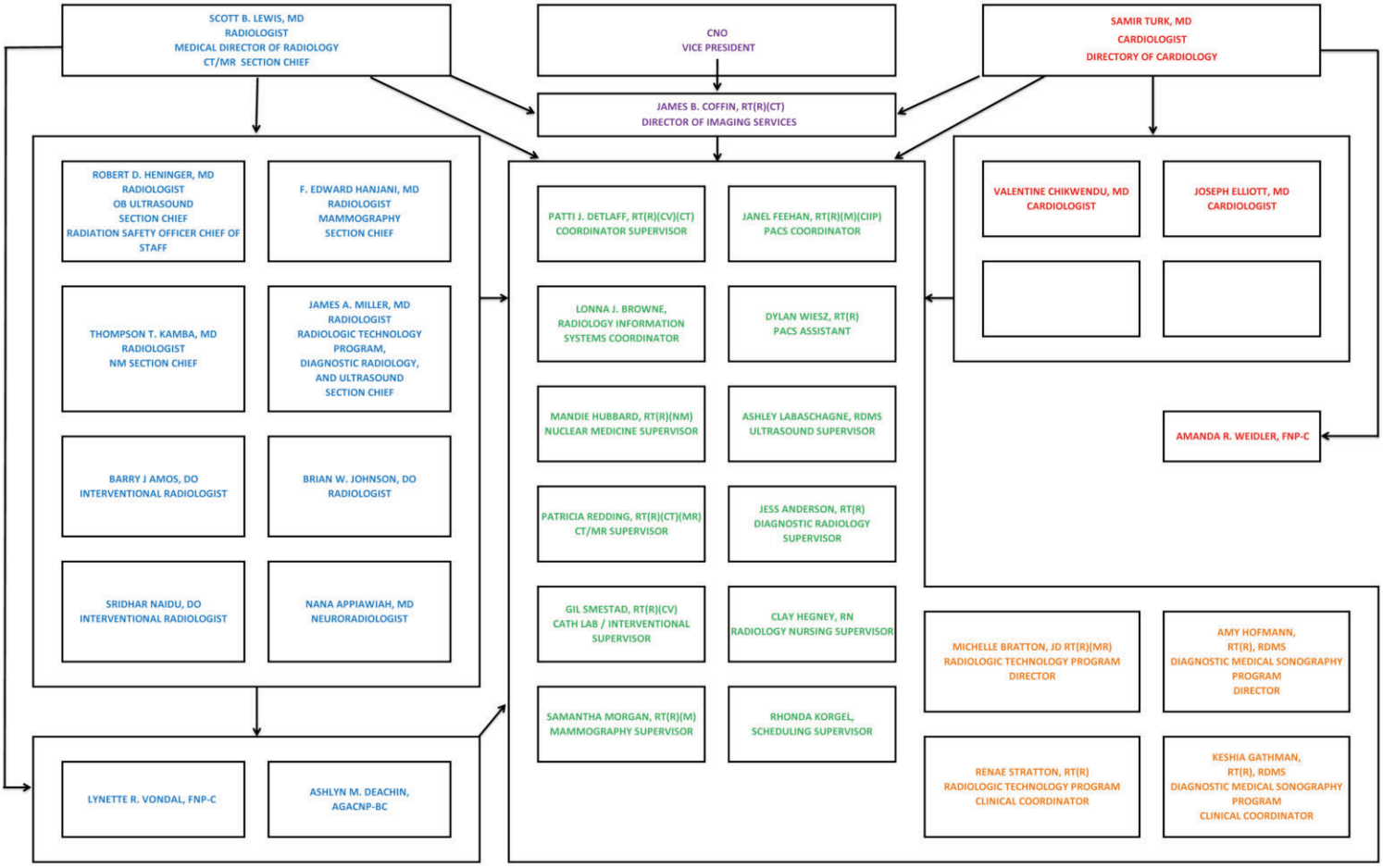
Founded in 1922, Trinity Health is a not-for-profit, integrated healthcare system serving northwestern North Dakota. Trinity Health has three hospitals, one long term care facility, and a physician medical group of 18 clinics. Trinity Health also supports one retail vision center, one pharmacy, and three durable medical equipment locations.

Trinity's brand new, state of the art Healthcare Campus and Medical District includes the region's only Level II Trauma Center and a vast array of tertiary services. Trinity offers a state-of-art cancer care center, comprehensive heart services, including open heart surgery, and advanced neurosurgical care.

Trinity Health is staffed by more than 2,800 employees. Trinity Medical Group is a regional network of more than 250 providers representing over 40 primary care and specialty services.

A teaching hospital, Trinity sponsors the University of North Dakota School of Medicine residency program.

Organizational Chart



Trinity Health Radiologic Technology Program

Trinity Health Radiologic Technology Program, hereinafter referred to as the "Program," has an excellent reputation of graduating professional Radiologic Technologists (Radiographers) of high academic excellence and above average entry level technical skills. Our graduates typically score above the 90th percentile on the American Registry of Radiologic Technology (ARRT) national registry exam to become certified Radiographers.

The Program is a 21 month certificate program accredited by the Joint Review Commission on Education in Radiologic Technology (JRCERT), 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182, 312-704-5300, (website: www.jrcert.org) (e-mail: jrcert@mail.idt.net). For more information contact the Program Director at phone number: 701-857-2316 or mailing address: Trinity Health Radiologic Technology Program, PO Box 5020, Minot, ND 58702-5020. Additional Information can be found on the program website, trinityhealth.org/radiology_school

The Program is an outcome-based educational program with the primary focus on competency achieved through a mastery learning system. Integration of classroom and clinical education is also an important element to the success of the Program and its graduates. The student benefits from hospital and clinic radiology patient care environments, state-of-art imaging equipment, highly skilled staff of Registered Technologists, a small enrollment and educators with years of clinical and teaching experience. The clinical experience is designed to maximize patient contact in performance of radiography procedures. All students are supervised while in their clinical training by ARRT registered and JRCERT approved Clinical Preceptors. Upon completion of this program, graduates will be eligible to take the ARRT registry exam and upon successful completion, be recognized as professional, competent entry level Radiographers.

Mission Statement, Goals and Student Learning Outcomes

MISSION STATEMENT:

The mission of the Trinity Health Radiologic Technology Program is to provide a comprehensive, quality education in the art and science of radiologic technology. The program strives to prepare service-oriented, knowledgeable entry-level radiographers who demonstrate qualities of excellence in critical thinking, professionalism, patient care, safety and ethical behavior in serving their patients, healthcare community and the profession.

GOALS and STUDENT LEARNING OUTCOMES (SLO's):

Goal 1– Students will demonstrate effective verbal and written communication skills.
SLO 1.1 Students will effectively communicate with patients.
SLO 1.2 Students will demonstrate effective verbal communication skills.
SLO 1.3 Students will demonstrate effective written communication skills.
Goal 2– Students will demonstrate critical thinking skills in professional practice.
SLO 2.1 Students will exhibit necessary critical thinking when performing routine and nonroutine procedures.
SLO 2.2 Students will demonstrate the ability to critically evaluate radiographs for quality.
Goal 3– Students will demonstrate clinical competence as entry level radiographers.
SLO 3.1 Students will competently operate equipment to produce quality images exhibiting accurate positioning and acceptable technique.
SLO 3.2 Students will use appropriate radiation safety practices for patients, self and others.
Goal 4– Students will exhibit ethical and professional behaviors suitable to entry level radiographers.
SLO 4.1 Students will use appropriate discretion and exhibit professionalism.
SLO 4.2 Students will be dependable and work efficiently with healthcare team members.
SLO 4.3 Student will exhibit confidence under stress and gracefully accept feedback.

ACHIEVEMENT OF GOALS:

To accomplish these goals we believe correlation of didactic and clinical education must exist. We believe that through a mastery and competency based education, the student will learn to function decisively, independently and correctly.

The following ***COMPETENCIES*** have been established as essential and minimum for the student to function adequately in a modern health care system. These competencies also serve a multifold purpose as a working structural model for our program.

This includes but is not limited to the following purposes:

1. serve as a curriculum guide
2. serve as a guideline to develop performance indicators for clinical and didactic courses
3. serve as criteria for measuring student learning outcomes, through testing and grading

Competency #1

Apply knowledge of the principles of x-ray production and appropriate usage of radiation production equipment to provide safety for the patient, themselves and other health care professionals.

- Explain x-ray production.
- Identify the properties of x-ray.
- Distinguish between electromagnetic radiation and particulate radiation.
- Define types of radioactivity.
- Utilize and understand the fundamental units of radiation.
- Explain x-ray interactions with matter.
- Explain the biologic effects of radiation to the human body.
- Explain the necessity and importance of radiation protection for the patient, self and others.
- Identify factors that will result in an increase or decrease in radiation exposure to patient and self.

- Apply methods of radiation protection in the clinical setting which will result in minimal exposure to self, patient and others while preserving the quality of radiographic exam.
- State the National Council on Radiation Protection guidelines and dose equivalence limits.
- Demonstrate proper and safe manipulation of x-ray equipment in the clinical setting.
- Apply knowledge of electrodynamics to the x-ray circuit.

Competency #2

Apply knowledge of anatomy, physiology, pathology and positioning to accurately demonstrate structures for radiologic exams.

- Define and utilize medical terminology.
- Identify the anatomy of the body systems.
- Understand physiology as it relates to radiography.
- Define pathologic conditions and identify them radiographically.
- Understand and utilize radiographic positioning terminology and landmarks.
- Explain and demonstrate the radiographic positions and projections necessary to demonstrate and evaluate body anatomy and pathology, radiographically.
- Exercise discretion and judgement, in clinical situations, to utilize alternate positioning and examination methods to better demonstrate anatomic structures when limited by the condition of patient.
- Make appropriate adjustments in positioning and procedures to perform pediatric examinations.
- Identify radiologic contrast medias, their usages and indications.
- Select, prepare, assist and administer appropriate contrast media to patients.

Competency #3

Determine proper exposure factors which will achieve optimum radiographic quality.

- Apply knowledge of mathematical formulas to calculate and adjust exposure factors to compensate for equipment and technique changes.
- Apply knowledge to determine the effects of altering quality and quantity of the x-ray beam on the radiographic image.
- Understand the primary and secondary influences on radiographic quality and how they alter radiographic quality.
- Differentiate between additive and destructive pathologies and how to vary exposure technique appropriately.
- Apply knowledge and understanding of how body habitus affects exposure techniques and equipment utilized.
- Adjust necessary exposure factors for pediatric radiography.
- Understand and utilize proper exposure factors for patient protection.

Competency #4

Examine radiographic images for the purpose of making judgmental decisions concerning positioning, technical factors, pathology factors and radiation protection aspects.

- Utilize evaluation criteria to identify if radiographic image includes all anatomical structures necessary.
- Utilize evaluation criteria to determine between acceptable and unacceptable patient positioning to demonstrate necessary anatomy.
- Discriminate between acceptable and unacceptable exposure technique and exposure indices on radiographic image.
- Understand and demonstrate the ability to make the proper changes required to successfully repeat an unsatisfactory image.
- Identify proper legal information on a radiographic image (markers, name, date, etc.)
- Perform appropriate image manipulation techniques before transferring and saving the images.

Competency #5

Provide appropriate patient care.

- Understand the importance of providing for the physical and psychological needs of patients in all age groups and various ethnic backgrounds.
- Understand the importance of, and provide for, proper patient/technologist communication.
- Provide appropriate patient education.
- Demonstrate an understanding of the functions of the various specialty areas of radiology.
- Understand and practice the Code of Ethics for the Profession of Radiologic Technology and the “Principles of Professional conduct for the Radiologic Technologist”.
- Demonstrate proper body mechanics for maximum patient safety and personal safety.
- Apply and demonstrate the consistent use of Standard Precautions, on all patients.
- Apply and demonstrate the principles of aseptic technique.
- Apply and demonstrate the principles of sterile technique.
- Recognize emergency situations and demonstrate appropriate and necessary response.
- Become CPR certified.

Competency #6

Understand and apply human interactions in the medical domain.

- Understand the organizational structure of the hospital, clinical sites and department of radiology.
- Understand the function of a radiographer/radiologic technologist in the medical domain.
- Apply principles of appropriate communications in interactions with all personnel.

ADMISSION PROCESS & REQUIREMENTS Updated 5/24

The Trinity Health Radiologic Technology Program ("the Program") subscribes to laws of the state of North Dakota and federal government pertaining to civil rights and equal opportunity. The Program's policies prohibit discrimination on the basis of race, gender, religion, age, color, creed, national or ethnic origin, marital status or disability in the recruitment and admission of students and the employment of faculty, staff and students and in the operation of all program activities and services. Evidence of practices which are inconsistent with this policy should be reported to the Program Director and/or Human Resource Director.

The Joint Review Committee on Education in Radiologic Technology **(JRCERT)** has approved the Program for up to a total of 14 students at a time. However, the Program reserves the right to admit only those applicants who meet established minimum requirements for age, education, physical and personal skills. The Program does not accept transfer students from other clinical radiography programs, accommodate part time students or offer advance placement. The Program will review official college course credits to assess whether an applicant has fulfilled the prerequisites for admission. If accepted into the Program, a criminal background check will be conducted on the student as part of processing the student into Trinity Health's human resource system.

MINIMUM REQUIREMENTS

I. ***Age:*** Applicants must be at least 18 years of age in compliance with the National Council on Radiation Protection and Measurements (NCRP) effective dose limits for occupational exposure in persons under 18.

II. ***Education:*** The American Registry in Radiologic Technology (ARRT) is the only US certifying agency offering credentials in medical imaging. The ARRT allows candidates to apply for the radiography exam only if they
   1) possess at least an associate degree, and
   2) have completed an ARRT-approved clinical educational program.

In accordance, all applicants to the Program must demonstrate evidence of:
   1) having earned an associate or baccalaureate degree; or
   2) current enrollment in a degree program that will earn the applicant an associate or baccalaureate degree before beginning the Program.

III. **Prerequisite College Courses:** The Program requires applicants to be enrolled in or have completed the following university courses to be considered for admission to the Program:

Required Post-Secondary Courses

- 1 semester advanced level math (College Algebra, Precalculus, or Statistics)
- 2 semesters/1 full year of Anatomy and Physiology
- 1 semester of Physics
- 1 semester of Medical Terminology
- 1 semester of social/behavioral science course (Psychology, Sociology, Ethics)
- 1 semester of Oral Communication/Speech
- 1 semester of English Composition

IV. ***GPA:*** The applicant must have a minimum cumulative college GPA of 2.75 at the time of application.

V. ***Technical:*** Applicants must possess the following skills to participate in the Program and meet the physical demands of a radiologic technologist:

- Fine and gross motor coordination to respond promptly and manipulate equipment
- Verbal and written communication skills to effectively communicate in English
- Hearing skills to assess patient needs and communicate effectively with other healthcare team members
- Visual acuity to observe patients, manipulate equipment and evaluate radiographic image quality
- Ability to accomplish moderate lifting at a minimum of thirty pounds to ensure patient safety
- Satisfactory intellectual and emotional functions to exercise independent judgement and discretion in the safe technical performance of medical imaging procedures

These specifications will be documented by the applicant during the application process. All applicants accepted into the Program must present documentation that they possess these physical requirements by a Licensed Independent Practitioner on a Health Evaluation form provided by the Program.

VI. ***Personal:*** Applicants must be of good moral and ethical character to include ability to:

- Reason and exercise good independent judgement
- Exhibit responsible, accountable and professional behaviors
- Work under stressful conditions
- Independently organize a work plan and meet deadlines
- Communicate effectively with patients and healthcare team members
- Exhibit professional discretion with confidential information
- Attest to integrity of academic performance

These requirements will be assessed by application documents, references and the personal interview. The ARRT establishes and enforces Rules of Ethics requiring applicants for certification to be of good moral character. Generally, the conviction of a crime or felony involving moral turpitude, violations of academic honor codes or suspension/dismissal from an educational program may render a person ineligible to take the ARRT certification exam. While conviction of a crime or academic sanction is not an absolute ban to admission to the Program, the ARRT makes the final decision on eligibility to take the certification exam. Applicants with concerns regarding ARRT eligibility should talk to the Program Director about contacting the ARRT at:

ARRT
1255 Northland Drive
St. Paul, MN 55120
www.arrt.org

THE APPLICATION PROCESS

The Program application deadline is January 1, with class beginning the following August. **All application forms** can be found at **www.trinityhealth.org/radiology_school** or by contacting the Program Director at

Trinity Health Radiologic Technology Program
P.O. Box 5020, Minot, ND, 58701
701-857-2316
michelle.bratton@trinityhealth.org.

Detailed steps for completing an application- where possible submit all documents at once:

1. Return the completed/signed **Application Form** by mail/fax/email/hand delivery;
2. Mail/hand deliver a non-refundable **application fee** of $35.00 (cash, check/money order to Trinity Health);
3. **Return 3 completed Reference Forms** following these instructions:
    1. Submit 3 references (1 employment, 1 academic & 1 personal) from non-relatives who know you well and will give honest feedback about you. Scores from references make up part of the applicant's admission points.
    2. Applicant must review the Applicant's Option to Waive on the Reference Form and determine whether to sign the waiver before giving the forms to your references.
    3. Applicant must give Reference Forms to references, ask them to complete it, seal it in an envelope with their signature across the seal and return to you. **Applicants must mail or hand deliver the references directly to the Program.** *Your application will not be considered complete if all 3 References are not returned as set forth.*
4. **Order official college transcripts.** If the applicant is still attending classes, an unofficial transcript should be submitted with the application (either electronically or in print form). However, an official transcript must be submitted after fall grades have posted. Electronic transcripts should be emailed directly to the Program Director. The applicant should inform the Program Director to expect an electronic transcript. Your application will not be considered complete if your official transcripts are not returned as set forth.
5. **Order/request official high school transcripts** and ensure they are mailed to the Program.

When **all** required documents have been received, the Program Director will contact the applicant. ***If confirmation is not received***, applicants should contact the Program Director to inquire about their

application status. Complete applications are scored as set forth below. Candidates who meet the Program's minimum requirements are contacted via email or phone to setup an interview in mid-January.

THE ADMISSIONS COMMITTEE PROCEDURES/SCORING PROCESS

The Admissions Committee consists of the Program Director, Clinical Coordinator and Clinical Preceptor(s) but may also include lead technologists or the radiology director. Student representatives also attend the interviews but will not score applicants or be involved in the final ranking of the applicants for admission to the Program. Applicants are offered positions in the Program based on points, which are determined as follows:

1. ACADEMIC EVALUATION:

An applicant **must** have a minimum **cumulative college GPA of 2.75** to be offered an interview. If an applicant's transcript is too low, the applicant will be notified that they are not eligible for admission.

For eligible applicants:

Points are assigned for the prerequisite courses as documented by the official transcripts. Optional coursework completed and evidenced in a transcript is also scored. Course points are determined by multiplying the course credits by the grade achieved (see ***Academic Scoring below***). Range 0-131 points

2. REFERENCES EVALUATION:

An applicant's personal references are pre-scored by program officials and awarded 0-4 points per reference. Range 0-24 points.

3. HEALTHCARE LICENSURE/WORK EXPERIENCE, VOLUNTEERING & JOB SHADOWING:

0-3 hours of job shadowing (2 pts); relevant volunteer work (0.5-3 pts); documented healthcare/licensure (CNA, LPN, EMT; CPR/BLS certification does not quality) (4 pts); part or full time healthcare work experience with direct patient contact (1-6 pts-Part time (PT) 3 months = 1 pt; Full time (FT) 3 months = 2 pt; PT 6 months = 3 pt; FT 6 months = 4 pt; PT year = 5 pt; FT year = 6 pt) Range 0-15 points.

4. APPLICANT PROFILE QUESTIONNAIRE:

The applicant will write an essay during the interview process which is scored by program officials. The essays evaluate the applicant's ability to communicate in written form, organization, basic mechanics, grammar and handwriting and insight to an applicant's background. Range 0-16 points.

5. BASIC MATH & ALGEBRA TEST:

Applicants are given a short basic math/algebra test. Range 0-8 points.

6. INTERVIEW EVALUATION:

During the interview, applicants are asked the same series of questions to assess personal qualities of intellect, motivation, personality, knowledge of the profession and verbal communication skills. 1-5 points in 9 categories. Range 9-45 points.

7. FINAL APPLICANT REVIEW:

After each interview, the admissions committee reviews the entire application for scoring accuracy. The highest scoring applicants are offered positions in the program in order until the class is full.

ACADEMIC TRANSCRIPT SCORING

Academic ability is an extremely important aspect of the application process. University transcript grades select courses are a valid indicator of the applicant's future performance. Classes scored reflect general university requirements for a bachelor's degree in radiologic technology and the Program's educational requirements.

REQUIRED COURSES	OPTIONAL COURSES
ADVANCED LEVEL MATH	
1 sem Advanced Math (Algebra, Precalculus, Statistics)	1 sem Advanced Math
PHYSICS	
1 sem Physics	1 sem Physics II
NATURAL SCIENCES	
2 sem of Anatomy and Physiology	1 sem Kinesiology 1 sem Chemistry or 1 sem Biology/Microbiology
MISC. GENERAL EDUCATION	
1 sem Medical Terminology	1 sem Allied Health course
1 sem Speech	1 sem Information Systems or
1 sem English Composition	1 sem Computer Science
1 sem Social/Behavioral Science (Psychology, Sociology, Ethics)	

- Prerequisite course credit hours are multiplied by the grade: A=3, B=2, C=1, D=0, F=0, P=2, W (withdrew)= -1.
- Repeated courses are averaged.
- Completed optional courses from an official transcript are also scored.
- Projected grades - required courses enrolled in for the Spring semester (as evidenced by an official transcript) will receive a projected grade score based on the 1st semester in that course or on overall performance of similar courses.

During the interview, the applicant will receive a copy of the Program's Policy Manual, Clinical Plan and JRCERT Standards to review and have an opportunity to ask questions to their satisfaction. On the day of the interview the applicant can expect:

1. To be given a brief tour of the radiology department;
2. To review a copy of the Policy Manual;
3. To be given time to complete a brief math test and essay for scoring;
4. To be escorted to the personal interview with the Admissions Committee.

ACCEPTANCE INTO THE TRINITY HEALTH RADIOLOGIC TECHNOLOGY PROGRAM

After the interview, the applicants are ranked by final point scores. The Program is allowed 14 students in the program at any given time. The Program Director will notify the selected applicants by phone or email within a week of completion of all interviews. Several alternates will be chosen in the event that a position opens before class begins in August. Final acceptance to the Program is based on successfully completing the entire application process and not on any single criterion. Each applicant is considered individually.

Applicants who are offered a position in the program:

1. Have **48 hours** from the date of the offer to officially accept a position in the Program;
2. Must send a $300 non-refundable deposit for program fees/textbooks.
3. Must have a licensed practitioner complete the Pre-Entrance Health Evaluation prior to the first class day.
4. Must successfully complete the background check conducted by Trinity Health. Note that a background check may take longer to obtain for international students.

International students may require additional documentation, see additional notes below.

International Students

Because accepted students are processed as non-paid employees, applicants must complete Trinity Health Human Resource requirements for any paid employee.

International students in the US on a student visa who are offered a position in the Program must inform the Program Director in order to ensure timely onboarding when the program begins.
Final acceptance into the Program requires international applicants to also complete the following:

1. Contact their University's International Office to get permission for off campus training;
2. Complete forms required by the University's International Office;
3. Provide necessary forms to Trinity Health's Human Resource department to avoid delays in the hiring process, which may include obtaining
    1) a U.S. Social Security Number and
    2) a U.S. bank account.

International student applicants are responsible for ensuring these steps are complete by the start date to ensure final acceptance into the Program.

General Program Information (updated 10/21)

STUDENT HIRING PROCESS
Trinity Health students are classified as Category I (involved in direct patient care) and therefore must complete the same health and safety requirements as Category I employees. Requirements include:

1. Tuberculosis test (QuantiFERON blood test or skin PPD test) within 12 months of starting the Program (to be answered in the Pre-Entrance Health Evaluation). If this is not done, employee health will test students during the hiring process;
2. Proof of COVID-19 vaccination or valid exemption submitted and approved by Trinity Health Human Resources.
3. General hospital orientation that includes an overview of Trinity Health general, safety and infection control policies;
4. Annual safety/infection control/general policy education modules as assigned, which at a minimum includes: fire, chemical/hazardous materials (OSHA) and emergency safety procedures, security, infection control/standard precautions, HIPAA, patient privacy, sexual harassment, workplace violence, latex allergies, age specific competencies and radiation and MRI safety.

Trinity Health offers students the Hepatitis B series free of charge.

Trinity Health provides students training to become BLS certified free of charge. This must be completed within 30 days of beginning the Program and before students can transport patients.

Students are required to complete these steps prior to admittance in clinical areas and annually thereafter.

Trinity Health also provides students with Workforce Safety Insurance. More information can be found through the Human Resource department.

ADVISORY COMMITTEE
The Program has an established Advisory Committee to oversee and maintain program quality and continued program improvement. The committee is chaired by the Program Director. Other members include the Clinical Preceptor(s), CNO/VP of Patient Care, Director of the Radiology Department, Lead Diagnostic Radiologic Technologists, Program Medical Director, Student representative and at least one or more members from the community. The committee will meet at least once a year to review student learning objectives and assessment outcomes and to make recommendations for changes to the program. The committee or a special Assessment Committee will meet at least biannually to review and review the overall Assessment Plan to ensure and support compliance with JRCERT Standards for accreditation. The committee may also be called up in situations of student grievances and/or student disciplinary action.

Student Tuition, Fees and Services

FINANCIAL AID

The Program does not provide any financial aid. Students attending universities that offer financial aid must seek it through their college of enrollment. The Program is recognized by the United States Department of Education through the JRCERT accreditation process. Costs to students are determined to be reasonable and will be accurately stated and published. Policies and processes for student withdrawal and tuition refund will be fair, published and made known to all applicants. Other student resources include applying for grants or scholarships as members of the ASRT and NDSRT. Also, the Trinity Health Foundation awards an annual scholarship to a senior student author of a scientific research paper.

STUDENTS ELIGIBLE FOR US GOVERNMENT EDUCATIONAL ASSISTANCE

The Program is an approved program under Title 38 of the United States Code that provides educational assistance to eligible veterans and/or their spouses/dependents. Eligibility for educational assistance is determined by the Department of Veterans Affairs. Students who are deemed eligible under Title 38 U.S.C. (Montgomery and GI Bills®) must timely submit to the Program Director a certificate of eligibility for entitlement to educational assistance, a Statement of Benefits, or the like, issued by the appropriate government agency. These students are deemed self-pay, but the Program will certify to the Veteran's Administration the student's enrollment every semester to seek tuition payment in accordance with the student's eligibility determination. The Program will permit the student to continue to attend and have access to classes, libraries and clinical experiences without penalty or late fees even if funding from said benefits is delayed. The student remains responsible for timely payment per semester of any remaining tuition not covered under his or her Title 38 U.S.C. benefits. Note that the payment option used when seeking Title 38 U.S.C. benefits is payment by semester.

AFFILIATED UNIVERSITIES AND TUITION AGREEMENTS

The Program has tuition affiliation agreements with Minot State University and University of Mary in Bismarck. These joint students enroll in the clinical course each semester as directed by their university and credits earned in our Program fulfill the required university clinical course credits needed to earn a bachelor's degree in radiologic technology. These co-enrolled students continue to pay tuition directly to their university and their university will award their bachelor's degree to them upon completion of our Program. The universities reimburse the Program for a portion of the tuition paid (MSU 85% and Univ. of Mary 80%) under the terms of tuition affiliation agreements with the Program. For specific questions regarding the university coursework required for a degree or tuition requirements contact your university advisor directly.

TUITION

Students not co-enrolled in an affiliated university are deemed self-pay and will pay total tuition of $7,000 for the entire program. Tuition is payable directly to the Program in 5 increments of $1,400 per semester (due within 30 days of a semester start date), or $3,500 for the first year (due by August 15) and $3,500 for the second year (due by August 15).

STUDENT WITHDRAWAL FROM THE PROGRAM

A student wishing to withdraw from the Program must submit an official written declaration to program officials. The official date of withdrawal is the date the written withdrawal is received by a program official.

TUITION REFUNDS

Students paying tuition to a university are bound by the tuition refund policies of their university and in accordance with the tuition affiliation agreements if they choose to withdraw from the Program. A self-pay student who withdraws from the Program may request a tuition refund according to the Pro Rata Refund table below. Weeks completed will be calculated by that student's academic calendar and a week runs from Sunday to Saturday. A week is considered complete if a student was in attendance on the last day of the week in his or her scheduled class or clinical area.

Weeks completed	Semester	% Tuition RETAINED	% Tuition REFUNDED
0-8	1	25%	75%
9-20	1	50%	50%
21 or more	2	100%	0%

BOOKS
Students are responsible for the cost of the textbooks required by the program, some books will be ordered by the Program and students will be responsible for others. The cost of text books for the entire program averages $850-1000. The $300.00 deposit will be credited toward the total cost of books and fees.

STUDENT EXPENSES
Before entering the Program
- Application fee ($35)
- Deposit towards student fees ($300) used for
    - Trajecsys access for entire program
    - Registry review access to RadTechBootCamp for 6 months before graduation
    - ASRT membership senior year
- Black scrubs (2-3 sets) and shoes - $175 – 250
- Textbooks – approximately $800 for entire program

Other expenses during and After the Program
- ARRT exam application fee - $225
- ND temporary license and application - $65 (if staying in ND)
    - Fingerprints - $0-$40
    - Criminal record check fee - $41.50
- Convert temporary license to full license - $110

UNIFORMS
Students are to wear appropriate scrubs while in the clinical environment and are responsible for providing their own. Trinity Health Radiology staff are assigned the color BLACK.
Surgical attire, when required for a clinical rotation area, will be provided by the hospital.

PROFESSIONAL ORGANIZATIONS
Students are required to become members of a national professional organization, the American Society of Radiologic Technologists (ASRT) www.asrt.org. Senior students are also required to become a member of the state professional society, North Dakota Society of Radiologic Technologists (NDSRT). Total dues are approximately $35.00 per year.

ENTRANCE HEALTH EVALUATION
All students ACCEPTED into the program must submit a completed health examination form along with a record of immunizations and TB testing completed within twelve months of the program start date. This expense is incurred by the student. Evidence of good health and ability to meet the technical and physical demands of the program is the final requirement for acceptance into the program.

HEALTH INSURANCE
All students are required to carry personal health insurance. The student will be enrolled for state Workforce Safety Insurance, the cost of which shall be paid by Trinity Health.

STUDENT SERVICES PROVIDED BY TRINITY HEALTH
- Free parking in designated areas
- Discounted cafeteria meals and community discounts through Trinity Health
- BLS certification in first month and recertification in 2nd year
- Vaccinations for Hepatitis B series, influenza, COVID-19
- TB testing
- ID badges, lead markers & personnel radiation dosimeter (replacement charges apply if lost)
- OSHA and hospital in-service training
- Limited Worker's Compensation coverage
- Trinity Health Employee Assistance Program (EAP) access that includes counseling, legal and financial consultation, work-life and crisis intervention services
- Locker for personal belongings and surgical scrubs for those rotations
- Medical library access
- Internet access for school related purposes in classroom and various hospital locations
- Use of classroom for studying
- Use of anatomical and skeletal models for testing and studying
- Scholarship opportunity for research paper (awarded to a senior in 4th semester)

Program Schedule, Breaks, Time Off

ACADEMIC CALENDAR

The student will complete five consecutive semesters during the 21-month program including a limited number of weekend and evening clinical rotations.

Class starting 2024/Graduating 2026

Semester	Starts	Ends	Days off	Semester Break
1st	**08/19/24**	**12/20/24**	09/02; 11/28-29	12/21/24 – 01/05/26
2nd	**01/06/25**	**05/23/25**	03/08-16; 04/18	05/24 – 06/01
3rd	**06/02/25**	**08/15/25**	06/28 – 07/06	08/16– 09/01
4th	**09/02/25**	**12/19/25**	11/27-28	12/20/25 – 01/04/26
5th	**01/05/26**	**05/14/26**	03/14-22; 4/3	**05/14/26** Graduation

Class starting 2025/Graduating 2027

Semester	Starts	Ends	Days off	Semester Break
1st	**08/18/25**	**12/19/25**	09/01; 11/27-28	12/20 - 01/04/26
2nd	**01/05/26**	**05/22/26**	03/14 - 22, 4/3	05/23 - 31
3rd	**06/01/26**	**08/14/26**	06/27– 07/05	08/15 – 9/8
4th	**09/08/26**	**12/18/26**	11/26 - 27	12/19 - 1/3/27
5th	**01/04/27**	**05/13/27**	03/13 - 21, 3/26	**05/13/27** Graduation

The Program school week runs from Sunday through Saturday. Hours vary according to student assignment but are generally from 8:00 a.m. to 4:00 p.m. Students will spend an average of 12 hours per week in didactic class, 3 hours per week in scheduled clinical lab and the remainder in clinical rotations. The student schedule is designed to never exceed 40 hours per week (Sunday – Saturday) of combined clinical and didactic class time and clinical assignments do not conflict with regularly scheduled didactic or clinical labs. Weekend and evening clinical rotations are scheduled accordingly as to avoid conflict with regularly scheduled class.

Didactic Classes are held daily Monday through Thursday in the classroom. Hours are 9:00 a.m. to 3:00 p.m., with up to one hour break for lunch.

Clinical Classes that include demonstrations, laboratories, and clinical testing are scheduled once during the week from 1:00 p.m. to 4:00 p.m. Juniors are scheduled for clinical class on Wednesday afternoon and seniors on Tuesday afternoon. Lunch break on clinical days is 30 minutes.

The general weekly student schedule is as follows:

	Monday	Tuesday	Weds	Thursday	Friday
Juniors					
Clinical hours	*7:00am-9:00pm		*7:00am-9:00pm		*7:00am-9:00pm
Class hours		9:00am -3:00pm		9:00am -3:00pm	
Seniors					
Clinical hours		*7:00am-9:00pm		*7:00am-9:00pm	*7:00am-9:00pm
Class hours	9:00am -3:00pm		9:00am -3:00pm		

*Clinical hours vary depending on clinical area assignment/lunch is taken before clinical classes when necessary.

Total Didactic & Clinical Hours

What follows is a general breakdown of program hours, noting that the Program recognizes the same holidays as Trinity Health, therefore students are not scheduled on those or the traditionally observed holidays.

When scheduled for an evening rotation, the hours are from 1 pm to 9 pm, Monday through Friday. When scheduled for day weekend rotations, the student is in clinical rotation 7 am to 3 pm Saturday and Sunday. Students are scheduled off the Friday before and Friday after a weekend rotation. On evening weekend rotations, the student is scheduled from 1 pm to 9 pm. Didactic and clinical class hours and clinical rotation hours will not exceed 40 hours per week.

Program Didactic and Clinical Hours by Semester
(subject to revision)

Semester	Didactic Hours	Clinical Hours	**TOTAL HOURS** including PM & weekend	PM Hours	Weekend Hours
1	269	304	**573**	0	0
2	226	472	**698**	24	32
3	64	344	**408**	40	32
4	174	344	**518**	24	16
5	210	416	**626**	40	32
TOTALS	943	1880	**2823**	128	112
Deducted time for all holidays that students are off					
Weekend PM shift included in PM count only					
Clinical day is 8 hours, Didactic day is 6 hours					
PM weeks counted as 24 hours, weekends counted as 16 hours					
Total Weekend/PM Clinical hours = 240 hours					

JRCERT Approved Clinical Sites

Master clinical rotation schedules for a whole year are provided to the students several months in advance. Schedules are designed to provide equitable clinical rotations with adequate time to achieve completion of all required competencies. The following Trinity Health clinical sites are JRCERT approved for student rotations:

1. Trinity Health HCMD Hospital
2. Medical Office Building - attached to Trinity HCMD Campus
3. Trinity Health Medical Arts
4. Trinity Health –Town & Country (Advanced Imaging Center)
5. Trinity Health South Ridge

Sites 3-5 are physically detached from the main Hospital and students are expected to drive to those sites when assigned to those rotations. All clinical sites are within 3 miles from the main Hospital. More detailed information on each clinical site can be obtained in Appendix A – the Clinical Education Plan.

Semester Breaks / Holidays, Funeral Leave, Lunch Breaks

SEMESTER BREAKS and HOLIDAYS OFF

Students get a 1-2 weeks off between each semester (see the Academic Calendar for exact dates):

2 weeks between the 1st and 2nd semester, which includes Christmas and New Years.
1 week between the 2nd and 3rd semester, which includes Memorial Day.
2 weeks between the 3rd and 4th semester, which includes Labor Day.
2 weeks between the 4th and 5th semester, which includes Christmas and New Years.

In addition, students are given the following days off:
Labor Day: Monday (1st semester)
Thanksgiving Break: Thursday and Friday (1st and 4th semesters)
Easter Break: Good Friday through Easter Sunday (2nd and 5th semesters)
Spring Break: a week in mid-March (2nd and 5th semesters)
The week of July 4 (3rd semester)

FUNERAL LEAVE

Students will be granted up to two excused days funeral leave for the death of an immediate family member which includes:

- parents and step parents
- children and stepchildren
- grandparents and great grandparents
- brothers, sisters, step brothers, step sisters
- spouse

If the funeral is not for an immediate family member, the student will be given the day of the funeral off. CTO or PTO must be used for time in excess of the day.

Should extended time off be needed due to a family member's death, the Leave of Absence policy will be followed.

COFFEE AND LUNCH BREAKS

Dining room areas are provided for coffee and lunch breaks during clinical rotations. Students may purchase cafeteria meals at reduced employee rates or bring a lunch. Coffee breaks are limited to 15 minutes, lunch breaks are 30 minutes. The classroom provides a microwave and eating space for the one hour lunch break or students may leave for lunch during that time.

Personal Time Off (PTO)

It is important to remember that you are entering a career as a healthcare professional. Just as your future employer and co-workers expect and depend on you to show up to work as scheduled, we expect you to attend didactic and clinical hours as scheduled. All absences, both excused and unexcused, are reported in your permanent file and attendance record.

Trinity Health Radiologic Technology Program provides Personal Time Off (PTO) to be utilized for sick leave and personal time off. The following are guidelines as to how PTO may be used and accumulated. These guidelines are not all inclusive, the program recognizes that extenuating circumstances do arise, and will do our best to make accommodations on a case by case basis.

PERSONAL TIME OFF (PTO) (EXCUSED TIME OFF)
Students are allowed 80 hours of PTO while in the program to be utilized for both personal time-off and sick leave. (Use your time wisely!) These hours are used for excused time off and do not need to be made up. The students have opportunities throughout the program to accumulate additional hours of time they may request as excused time off.

PTO BANK RULES
A student cannot make up time in advance in attempt to bank hours as PTO. A student's PTO bank can show negative hours, meaning hours will need to be made up or reearned before the Program will consider granting an unexcused PTO request.

All PTO requests are subject to approval by program officials prior to taking time off, otherwise leave will be considered an unexcused absence. (An unexcused absence must be made up and the Discipline and Dismissal Policy will be followed.)

If absent for an entire day

1. It will be counted as an absence in your permanent file/attendance record
2. An absence on a class day will deduct 6 hours of PTO
3. An absence on a clinical day will deduct 8 hours of PTO

Seniors – PTO will not be granted during classroom time the last few weeks of the program. The registry review course is crucial in preparing for the registry exam and attendance is mandatory.

REQUESTING PTO

1. PTO requests must be submitted by entering your request in Trajecsys.
2. Submit the PTO request as early as possible
   - At least 1 week notice if requesting an entire day off
   - 24 hour advance notice if requesting a couple hours off
     (DO NOT call/text the morning of to ask if you can take an hour to sleep in)
3. The use of PTO is discouraged during clinical weekends, evenings, and advanced imaging rotations. The time spent in these rotations is minimal, therefore missing hours reduces the clinical experience gained during these rotations. Student may be allowed to trade rotations with another student with prior approval from program officials.
4. The use of PTO is discouraged during clinical demonstration labs. Demonstrations in clinical lab classes are performed only once. No make-up sessions will be held.
5. The use of PTO is discouraged on class days except for unplanned illness or events. Students must schedule appointments and other activities outside class and clinical time hours whenever possible. It is highly disruptive to the class schedule when students are absent, arrive late or leave early from class for non-urgent reasons.
6. Again, all PTO requests are subject to approval by program officials prior to taking time off, otherwise leave will be considered an unexcused absence. (An unexcused absence must be made up and the Discipline and Dismissal Policy will be followed.)

ILLNESS

1. It is the responsibility of the student to notify the appropriate program official of an illness. This notification process must occur on a daily basis if the student is ill for more than one day. Notification may take place in the form of a phone call to program officials office phone or personal cell phone. Using text or email is NOT acceptable. (Failure to notify program officials will result in an unexcused absence. An unexcused absence must be made up and the Discipline and Dismissal Policy will be followed.)
2. If a student is sick during a weekend rotation, they must call and/or leave a message on program official's cell phone as well as notify the department staff.
3. If a student misses 3 consecutive days due to illness, a physician's note must be turned in to program officials prior to their return.
4. Students who abuse the PTO/sick leave policy without proper documentation of illness may be subject to a verbal warning from program officials and may be required to forfeit banked hours when program officials must spend time assisting the student with material they missed (See below).

REQUESTING PERSONAL TIME/SICK TIME AFTER ALLOTTED HOURS HAVE BEEN USED (UNEXCUSED TIME OFF)

1. If a student requests PTO but has already used their allotted PTO hours, the Program is under no obligation to allow the student time off. This is considered unexcused time off.
2. However, should the unexcused PTO be granted on a clinical day, the student must make up all the clinical hours they were absent. Clinical Preceptors will determine the scheduled make-up time in relation to the student's level of clinical competency completion. The student will ideally be rescheduled for make-up time during the week of absence to avoid exceeding the JRCERT limit of 40 hours per school week or during the next scheduled break immediately following the absence.
3. If unexcused PTO is granted on a class day, it is the student's responsibility to ensure they are prepared for the next class day, including being ready for any quizzes, assignments or exams scheduled that day. The Program Director is under no obligation to rearrange their own or the other students' schedules to accommodate such a request. If additional time outside of a regularly scheduled class time is necessary for the Program Director to review missed material with a student or proctor a missed exam, PTO hours may be deducted from the student's bank at the Program Director's discretion. If clinical time is used to make up missed class time activities, the student must make up those clinical hours at the discretion of the Clinical Preceptor.
4. Students who call in sick after allotted PTO hours are gone will be required to make up hours as noted above.

PTO ACCUMULATION

At the Program Director's discretion, students may accumulate additional time towards their PTO bank. Some examples that accumulate at a 1:1 ratio are:

1. Donating Blood (must submit documentation of date/time of event, signed by phlebotomist)
2. Remaining in the clinical rotation area greater than 10 minutes after shift to observe, assist or perform a radiologic examination.
3. Participating in NDSRT or ASRT designated activities or committees.
4. Participating in educational activities related to radiologic technology (completing ASRT quizzes), health care, patient advocacy, public speaking or Trinity Health community or employee service events.

PTO DEDUCTIONS

Program officials may, in their discretion, deduct time from a student's hours for various reasons, including, but not limited to:

1. Turning in late advanced modality assignments - 30 minutes/1-5 days late and 60 minutes/week until the assignment is turned in.
2. For time program officials spend assisting student with material they missed during an unexcused absence.
3. Tardiness to clinicals or class (See Tardiness on following page)
4. Misuse of cell phone during clinical or class hours.

Medical Appointments

Students are encouraged to make medical appointments outside of school hours. However, if this is not possible, medical appointments should be scheduled so they do not interfere with scheduled didactic class and clinical lab periods. **The student must request a signed verification from the provider and turn into Program Director upon return**. If the medical appointment exceeds one hour, the student must take CTO time. Abuse of this policy will be considered an infraction and dealt with in accordance with the Discipline and Dismissal Policy.

Tardiness

Time missed due to tardiness will be deducted from the student's PTO bank. For every 5 minutes the student is late, 15 minutes will be deducted from their PTO bank. The clock used to determine "on time or late" is at the discretion of program officials.

During clinical time, "on time" means in the assigned clinical area ready to participate. If the student is in a clinical area that requires hospital surgical scrubs, they should plan to arrive a few minutes early to allow for the extra time needed to change.

"On time" in the classroom means at your desk and prepared with the necessary items for the class period. Note if a student is late due to the performance of a clinical competency, the program officials will notify each other and the student will be exempt from the time penalty.

The only exception to tardiness is inclement weather. In the interest of student safety, if driving conditions are poor, weather will be taken into consideration. Please refer to the Inclement Weather policy.

Jury Duty

The Trinity Health Radiologic Technology Program believes in fulfilling the obligation of jury duty and will allow students who are summoned to participate in this civil duty. Upon receiving a summons for jury duty, the student must notify the program director of the days of obligation and work with faculty to reschedule student class or clinical activities.

Jury duty will not count against personal time. In most cases, jury duty lasts one week or less. Students are given up to 24 hours of excused time to fulfill their civic obligation. If more time is needed, the circumstances will be reviewed on an individual basis and the student may be required to make up time. Students must show evidence on the time of jury duty by bringing in a letter from the court, which gives the dates and hours served each day, upon returning to school.

Leave of Absence & Long Term Disability

Any student absent from the program for a period exceeding one month should withdraw and reapply the following year. The student will be considered a new applicant and will be part of the applicant pool for that year.

A student with an excused absence of less than one month will be allowed to use personal leave days to cover all or a portion of the time missed and may be required to complete the remaining hours immediately after established graduation date of their class.

PROCEDURE:

1. Student must be in good academic standing
2. Request must be submitted to the Program Director. A document will then be drafted to include the following:
   - reason for leave, if for medical leave, student must provide documentation of physicians written leave recommendation
   - length of leave and date student will return to program
   - requirements which must be met by student to complete the program
   - time limitation that student has to complete program requirements, following return to program. Due to JRCERT enrollment limitations, the maximum time allowed will be through the fourth week of July.
3. Request must be approved by the Program Director in consultation with the Advisory Committee.
4. The student will review written request with Program Director then sign it, indicating acceptance of leave plan. A copy of request will be given to student and a copy placed in their personal file.

RATIONALE:

The requirements for completion of this educational program are based on 21 months of full time study, with the components of the curriculum being offered once per year. The program reserves the right to handle and formulate leaves of absences on a case by case basis. It is almost impossible to formulate policies which are applicable to each and every case. In the case of leave of absence due to illness or pregnancy, one cannot accurately predict when one will leave or return to the program. The intent of this policy is to provide a plan for the students to complete his/her education following a brief or extended absence due to reasons beyond the control of the student.

NONCOMPLIANCE:

A student who has been granted a leave of absence and does not comply with guidelines set forth is subject to dismissal from this program.

Reasonable Accomodation Policy

The Program abides by the policy set forth by Trinity Health on reasonable accommodations. The policy is set forth below:

Under the law, Trinity Health will provide reasonable accommodation to qualified employees and applicants with disabilities, as defined by the ADA/Rehabilitation Act and ADA Amendments Act of 2008 *(ADAAA),* unless to do so would pose a direct threat to health or safety or would cause undue hardship *(e.g., too costly, too extensive, too substantial, too disruptive).* All references to "disability" in this policy refer only to those impairments that meet the ADA/Rehabilitation Act definition of "disability" as amended by the ADA Amendments Act of 2008 *(ADAAA)*. Trinity Health is committed to providing reasonable accommodations to qualified employees and applicants for employment to ensure that individuals with disabilities enjoy equal access to all employment opportunities. We provide reasonable accommodations:

- when an applicant with a disability needs an accommodation to have an equal opportunity to compete for a job;
- when an employee with a disability needs an accommodation to perform the essential functions of the job or to gain access to the workplace; and
- when an employee with a disability needs an accommodation to enjoy equal access to benefits and privileges of employment *(e.g., training, company events, etc.)*

ACCOMMODATIONS

Employees or applicants who require a reasonable accommodation MUST request an accommodation by contacting HR.

An HR Representative will handle all accommodation needs. For the purposes of this policy, the "HR Representative" may be the HR Director, VP of HR, or other HR representative designated to assist with reasonable accommodation requests and can be reached at 701-818-8050.

Managers and supervisors who receive an accommodation request from an employee **MUST** consult HR about accommodation needs. The HR Representative will work with the employee's supervisor on appropriate reasonable accommodations to meet the individual's disability-related needs and enable them to perform the functions of the position.

As part of the accommodation interactive process, the HR Representative will obtain and evaluate documentation supporting an accommodation request *(such as medical documentation demonstrating that the requestor is an individual with a disability),* whenever the disability or need for accommodation is not obvious. If an individual has previously submitted medical documentation, the individual should immediately inform the HR of this fact.

Management personnel will be a crucial part of the accommodation process and therefore must be familiar with this policy.

THE INTERACTIVE PROCESS

After a need for accommodation is known, your HR Representative will want to discuss ideas to help with an accommodation. Communication is important to us in finding out the precise nature of the problem that is generating the request, how a disability is prompting a need for an accommodation, and alternative accommodations that may be effective in meeting an individual's needs. If the disability is obvious *(e.g., the requestor is blind or has paraplegia)* or already known to TH *(e.g., the requestor previously asked for an accommodation and information submitted at that time showed a disability existed and that there would be no change in the individual's medical condition),* we may or may not need further medical documentation.

The HR Representative may need to consult with other TH personnel *(e.g., an employee's supervisor,*

Information Technology staff) or outside sources to obtain information necessary to make a determination about your accommodation need.

The HR Representative will advise you of the decision regarding your workplace accommodation need. If it has been approved, an implementation plan will be set in place to support your request. If it is not approved, an explanation for the basis of the denial and information on next steps will be offered.

QUESTIONS

Additional information may be found in the following policies:

- Family and Medical Leave or FMLA
- WSI – Workforce Safety and Insurance and Injuries
- Equal Employment Opportunity

An individual dissatisfied with the resolution of their need for reasonable accommodation may consult the VP of Human Resources within 10 business days of receiving a final response.

General Curriculum Sequence and Course Descriptions

TRINITY HEALTH RADIOLOGIC TECHNOLOGY PROGRAM CURRICULUM (updated 5/24)
Trinity Health sponsors the Program, which has small class sizes and instructor to student ratios. Because many of our students are working towards a bachelor's degree from an affiliated university, our curriculum is structured in both clock hours and credits to comply with the affiliated universities' credit requirements for clinical coursework to earn a degree. Students complete didactic courses concurrent with clinical rotations and testing in an accelerated, immersive fashion. This format has been extremely successful for our students.

CLOCK HOUR TO CREDIT HOUR CONVERSION
Clock hours and clinical hours are calculated utilizing guidelines from the North Dakota University System Academic Credit Matrix and the U.S. Department of Education Credit System. A clock hour is 50 minutes of class time instruction where students prepare a minimum of 2 hours outside of class for each hour in class. To convert clock hours to credits, clock hours are divided by the number of weeks in the semester, which can vary per calendar year. The Program utilizes a scale of approximately 100-120 clinical hours = 1 credit.

CURRICULUM: DIDACTIC AND CLINICAL COURSE SEQUENCING
Course Units are Subject to Revision per Calendar Year

1st Semester

Course #	Course Name	Clock Hours	Credits
300	Fund of Radiologic Science & Protection (Orientation*)	45	2.0
304	Medical Terminology	28	1.5
306	Radiation Physics I	54	3.0
316	Positioning I	86	5.0
322	Introduction to Pathology	16	1.0
328	Basic Patient Care	40	2.0
350	Clinical I §	304	3.0
	TOTAL HOURS/CREDITS	573	17.5

2nd Semester

Course #	Course Name	Clock Hours	Credits
305	Professional and Medical Ethics	28	1.5
308	Radiation Physics II	40	2.0
318	Positioning II	108	6.0
329	Advanced Patient Care	18	1.0
330	Introduction to MRI	10	0.5
331	Scholarly Research Paper *	22	
352	Clinical II §	472	4.0
	TOTAL HOURS/CREDITS	698	15.0

3rd Semester

Course #	Course Name	Clock Hours	Credits
310	Image Production and Quality	32	2.5
312	Anatomy & Physiology I	12	1.0
320	Positioning III	12	1.0
331	Scholarly Research Paper *	8	
354	Clinical III §	344	3.0
	TOTAL HOURS/CREDITS	408	7.5

4th Semester

Course #	Course Name	Clock Hours	Credits
403	Digital Imaging and Equipment	56	3.5
416	Intro to Computed Tomography	15	1.0
418	Intro to Mammography	15	1.0
420	Radiobiology	64	4.0
440	Clinical IV §	344	3.0
460	Registry Review *	24	
	TOTAL HOURS/CREDITS	518	12.5

5th Semester

Course #	Course Name	Clock Hours	Credits
410	Radiation Protection II	40	2.0
412	Anatomy & Physiology II	70	4.0
442	Clinical V §	416	4.0
470	ARRT Registry-Comprehensive Review *	100	
	TOTAL HOURS/CREDITS	626	10.0

* Clock hours that were not used to calculate credits
§ Clinical hours listed are actual hours in clinical areas

COURSE DESCRIPTIONS

300 ORIENTATION/FUNDAMENTALS OF RADIOLOGIC SCIENCE *Prerequisite(s): None*
Unit I orients new students to policies/procedures of the program, department and hospital, provides an overview of radiography, its role in health care delivery and lays the foundation of imaging principles and terminology. Unit II (Radiation Protection) provides students with the theory and application of basic principles of radiation protection and how to implement them in clinical environment and is a prerequisite to beginning clinical rotations.

304 MEDICAL TERMINOLOGY *Prerequisite(s): None*
This course reinforces and reviews the meaning of medical word parts, how to combine them and break them down to understandable terms, enabling the student to communicate in the medical world.

305 PROFESSIONAL AND MEDICAL ETHICS *Prerequisite(s): None*
This course provides an understanding of the medical imaging technologist's professional scope of practice, ethical and medicolegal issues in the healthcare environment and patient rights.

306 PHYSICS I *Prerequisite(s): None*
This course introduces the history of x-rays, sources of radiation and the appropriate units of measure, a basic understanding of mathematical concepts, atomic structure and in depth understanding of EMR.

308 RADIATION PHYSICS II *Prerequisite(s):306 Physics I*
This course covers the imaging system circuit and components, x-ray tube, x-ray production, the x-ray emission spectrum and factors affecting x-ray beam characteristics of quantity and quality.

310 IMAGE PRODUCTION AND QUALITY *Prerequisite(s): 308 Physics II*
This course explores interactions with matter, optimizing radiographic spatial and contrast resolution, controlling scatter with beam restricting devices and grids. It also discusses AEC, APR, technique charts and other quality factors.

312 ANATOMY/PHYSIOLOGY I *Prerequisite(s): 304*
This course covers human anatomy, physiology and pathology of the endocrine and reproductive systems, including imaging of the reproductive system.

316 POSITIONING I *Prerequisite(s): 300*

318 POSITIONING II *Prerequisite(s): 316 Positioning I*

320 POSITIONING III *Prerequisite(s):318 Positioning II*
Positioning courses include anatomy, physiology, pathology, radiographic positioning, trauma modifications and radiation protection in the following areas: Semester 1: skeletal system, respiratory, upper and lower extremities; Semester 2: spinal column, digestive system, skulls/facial bones, urinary system; and Semester 3: bony thorax. Clinical labs are conducted in conjunction with the didactic courses. Image evaluation with an emphasis on radiographic quality and positioning to produce optimal images is also discussed.

322 INTRODUCTION TO PATHOLOGY *Prerequisite(s): None*
This course provides students with the concepts of disease, effects on human body and considerations for radiographic procedures.

328 BASIC PATIENT CARE *Prerequisite(s): None*
This course focuses on knowledge and skills required to provide safe, quality patient care in medical imaging, including infection control, workplace safety, patient transfers, assessment and vital signs, working with pediatric and geriatric patients, and applying the learned competencies in the radiology department, emergency, trauma, surgery and advanced imaging areas. Prior to rotating in advanced imaging areas, student must complete an advanced modality unit that introduces the daily workings, types of exams, equipment used, patient protection and safety issues in CT, MRI, CVI, Interventional Radiology, Nuclear Medicine/PET, Ultrasound, Mammography and Radiation Therapy.

329 ADVANCED PATIENT CARE *Prerequisite(s): 328*
This course introduces students to patient care in advanced procedures, aseptic technique, pharmacology, drug administration and venipuncture.

330 INTRO TO MAGNETIC RESONANCE IMAGING *Prerequisite(s): None*
This course introduces the basic principles of MRI, equipment operation, image production and safety, as well as some cross-sectional anatomy. The course also includes clinical rotations.

331 SCHOLARLY RESEARCH PAPER *Prerequisite(s): None*
Junior students chose a medical imaging topic to research and prepare a scientific paper to compete for the Michelle Keller Scholarship, a long standing tradition in our program. Students submit the same paper to the North Dakota Society of Radiologic Technologist annual scientific research paper contest. Time is allotted the 3rd through 5th semesters to work on the paper and oral presentation for the NDSRT conference. This paper is assessed in a rubric for the Student Learning Outcomes Assessment Plan.

350 CLINICAL I *Prerequisite(s): 300*

352 CLINICAL II *Prerequisite(s): 350*

354 CLINICAL III *Prerequisite(s): 352*
Clinical rotations in the first year include hospital, radiology and program orientation in the classroom and clinical areas. Students rotate through general radiography, orthopedics, fluoroscopy, surgery & portables. Once students have passed the didactic and laboratory testing of a positioning course they are able to perform exams under direct supervision; after demonstrating competency they can perform exams under indirect supervision.

After students have completed the advanced modality unit in basic patient care, they are scheduled in observational advanced modality rotations. Students also complete reading assignments, worksheets, learning objective checklists and/or papers for each advanced modality. *See below.*

403 DIGITAL IMAGING *Prerequisite(s): 310*
This course presents fundamental principles and components of computers used in digital medical imaging, including hardware and software, digital imaging equipment, digital radiography, computed radiography, image intensified and digital fluoroscopy, monitors, acquisition and archiving of images, radiation monitors and equipment QA/QC.

410 RADIATION PROTECTION *Prerequisite(s): 300*
This course reviews the principles of radiation protection followed by in-depth discussion of occupational and patient radiation protection, including dose monitoring, x-ray room design, National Council on Radiation Protection and Measurements regulations and CFR-Title 21 requirements.

412 ANATOMY/PHYSIOLOGY II *Prerequisite(s): 312*
This course includes units on the central and peripheral nervous systems, the circulatory system, including identification of human anatomy and physiology of those systems, as well as an in-depth unit on cross sectional anatomy of common body structures.

416 INTRODUCTION TO COMPUTED TOMOGRAPHY *Prerequisite(s): 403*
The basic principles of equipment operation and image production in computed tomography are introduced. The course also includes clinical rotations.

418 INTRODUCTION TO MAMMOGRAPHY *Prerequisite(s): None*
This course presents breast anatomy and pathology with an introduction to routine positioning of breast tissue in mammography. This course also includes a clinical rotation.

420 RADIOBIOLOGY *Prerequisite(s): None*
This course explores human biology of cells and the effect of radiation on the body, including the radiosensitivity of tissues and organs from the DNA level to total body response, concentrating on early and late tissue responses and stochastic effects of radiation.

440 CLINICAL IV *Prerequisite(s): 354 Clinical III*

442 CLINICAL V *Prerequisite(s): 440 Clinical IV*
Clinical rotations in the second-year include general radiography, orthopedics, fluoroscopy, surgery & portables and students must complete all clinical proficiencies, objectives and assignments to be eligible to graduate. Second-year students rotate through advanced modality areas and have elective weeks.

460 REGISTRY REVIEW EXAMS *Prerequisite(s): completion semesters 1, 2 & 3*

In semesters 4 & 5 students take begin taking multiple choice "mock" exams in class with extensive review of the questions/answers.

470 ARRT REGISTRY REVIEW *Prerequisite(s): Successful completion of all coursework*

This course assists the student to prepare for the ARRT certification and registration examination and to become a member of the radiologic technology workforce. The course reinforces knowledge from the program curriculum with intensive use of registry materials, including review websites, worksheets and mock exams.

PREREQUISITES TO CLINICAL ROTATIONS IN ADVANCED MODALITIES:

Modality	**Prerequisites /Assignments**
Radiation Therapy	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 30, pp 431-458; worksheets; paper/case study, clinical objectives and evaluations)
CT	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 25, pp 205-224, 237-244 and worksheets; paper/case study, objectives and evaluation)
Cath Lab/IR	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 27, pp 273-294; worksheets; paper/case study, objectives and evaluation).
MRI-AIC	Courses 328 & 330 (Intro to MRI); Review MRI Screening sheet; clinical assignments, objectives and evaluation.
NM/PET	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 29, pp 387-410, 428-430 and worksheets; paper/case study, objectives and evaluation)
DEXA	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 19, pp 465-502 and worksheets, objectives and evaluation)
US	Course 328; Clinical Assignments and Objectives (Merrill's Ch. 28, pp 357-386; worksheets, paper/case study, clinical objectives and evaluation)
Mammo	Course 328 & 418 (Intro to Mammography); Clinical assignments, objectives and evaluation

Academic Standards

To promote higher standards of professional achievement in the field of radiologic technology, the Program requires students to maintain academic excellence. Students are required to maintain at least an 80% average in didactic assignments, tests, clinical testing, clinical performance evaluations and their cumulative didactic and clinical grades. Students not meeting academic standards will be subject to disciplinary action including warnings, dismissal and not graduating unless these academic standards are met.

DIDACTIC STANDARDS OF PROGRESS

1. Didactic course grades are calculated upon completion of a course and students may view these grades privately with the Program Director at any time. Failure to achieve at least 80% in an exam in a course will result in review of the subject matter, remedial counseling and possibly a repeat examination at the Program Preceptor discretion. A verbal warning is given for failing to achieve an 80% or higher on the repeat exam. The final course grade is calculated from the initial test score.

2. Failure to maintain at least an 80% cumulative didactic grade average will result in a student receiving a written warning. Dismissal may result if the cumulative average is not raised to 80% within a three month probationary period.

CLINICAL STANDARDS OF PROGRESS

1. Failure to achieve at least 80% on a single clinical lab test will result in review of the positioning, remedial counseling and repeat testing. A verbal warning is given for failing to achieve an 80% or higher on the repeat exam.

2. Failure to be adequately prepared for clinical lab testing will result in a grade point reduction.

3. Failure to maintain an 80% cumulative clinical performance grade will results in a student receiving a written warning. Dismissal may result if the cumulative average is not raised to 80% within a three month probationary period.

4. Failure to make progress towards the required clinical competencies each semester will result in written warning and may delay a student's graduation date.

Grading Policy

The grading policy supports our academic standards policy and the Program's goals to provide a high quality education and graduate competent entry level radiologic technologists. Students can review posted academic and clinical grades upon request with program officials. Students also receive copies of their didactic and clinical grades during private semester evaluations with program officials.

SCALE FOR CALCULATING DIDACTIC & CLINICAL COURSE GRADES

Using the scale below, students earn grade percentages for each credited course. Semester and Final GPA's are calculated by multiplying the number of credits/course with the grade points earned, then dividing that number by the total credits in that semester.

Grade %	Grade	Grade Points
100-94	A	4.0
93-86	B	3.0
85-80	C	2.0
< 80	F	---

Pass = or > 80. No GPA awarded for Pass/Fail

DIDACTIC GRADING

Students typically take quizzes and unit exams in each didactic course with average quiz scores counting for 25% and unit exam(s) counting for 75% of the course grade. However, the syllabus for each didactic course states how any course assignments will be weighted in the final course grade.

CLINICAL GRADING

1. 90% Clinical Performance Grade
   - Clinical performance accounts for all clinical lab testing, competency evaluations, proficiency rechecks and final testing.
2. 10 % Professional Development
   - Professional development is an evaluation of the student's affection behavior while in the clinical setting. It includes both the professional development evaluation done by the Clinical Preceptor as well as technologist evaluations.

*See the Clinical Education Plan for more detailed clinical grading policies.

SEMESTER CONFERENCES

Program officials objectively determine performance ratings and keep the students informed of their individual progress through private semester evaluation conferences where students receive appropriate recognition for their semester performance and are counseled on needed improvements. The student is also allowed to evaluate the Program, program officials, instructors and the clinical sites during the conference.

BIMONTHLY CONFERENCES

The Clinical Coordinator/Preceptor meets with the students bimonthly to discuss individual progress and counsel on needed improvements. During this private conference, the student is also allowed to evaluate the Program, instructors and clinical sites, and address any issues that may arise. Additional evaluation conferences are scheduled if the need arises to address specific issues.

Probation & Student Conduct Policy

Students enrolled in their first semester of the program are probationary students. This probationary period is two-fold, it allows time for the program officials to determine whether or not the student is performing satisfactorily and allows time for the student to decide whether or not he/she is satisfied with the Program and their career choice. The student may be eligible for a partial refund if they choose to drop out of the program during the first semester and prior to completing 20 weeks of the program. (Refer to STUDENT EXPENSES section in this Manual under Tuition Refunds.)

It should be noted that the student can again be placed on probation following the initial probationary period, however no tuition refund will be issued. Students may be placed on probation for inappropriate conduct and/or academic failure. Probation is initiated at the discretion of the Program Director, in compliance with the DISCIPLINE AND DISMISSAL POLICY.

Discipline & Dismissal Policy

Trinity Health is a service organization, dedicated to providing quality healthcare for their patients and the community. The Program is an important part of this mission and therefore students must maintain high standards of academic achievement and ethical behaviors as well as continued professional development. The ARRT requires students applying for certification exam to sign statements related to Codes of Ethics and Honor, which are included in this document and can be found on the ARRT website at https://www.arrt.org/earn-arrt-credentials/requirements/ethics-requirements.

Students are expected to assume responsibility for their own education. They should demonstrate initiative, maturity, perseverance and intellectual curiosity, in order to master the practice of radiography. The hospital and school are committed to providing a well-rounded and high quality intensive course of study. The student must also assume their role in this commitment.

Whenever the conduct and or academic record of a student does not meet the minimum standards, or if the student is considered disruptive to the hospital, disciplinary action will be taken. In case of severe or extraordinary offenses, immediate dismissal from the program will result. When failure of standards is less severe, disciplinary measures are progressive in nature. The objective of disciplinary measures is to correct or modify performance which is unacceptable and or inappropriate. Disciplinary action is not intended to be punitive. Emphasis is placed on counseling.

The response to a student's particular behavior will be guided by the nature of the behavior, circumstances surrounding the event, review of the student's records, discussions with involved parties, and how it affects their status to sit for the ARRT Certification exam. The response will take into consideration the student's openness over the matter, and willingness to correct the behavior. Actions may be, but not limited to, consultation/verbal correction, documented consultation, probation, grade reduction, or a dismissal not necessarily preceded by probation. Documentation of each infraction will become a part of the student's permanent file and may be required to be reported to the ARRT on student's application for boards. Reportable Honor Code infractions required by ARRT are denoted with an asterisk, however this does not include all infractions that may be reported.

The following are descriptions of progressive disciplinary actions, in increasing order of severity.

NOTE: An asterisk by an infraction indicates it must be reported to ARRT.

I. VERBAL WARNING

A discussion of the nature of the failure of standards is held in private between the student and the Program Director. Documentation of the verbal warning will be placed in the student's file. Verbal warning will be given on the first offense of the following professional standards of conduct.

- evidence of careless performance of tasks assigned
- absence from assignments without permission
- abuse of PTO policy
- extended lunch or breaks
- plagiarism* — "Plagiarism" means using someone else's ideas or words without using quotation marks and/or giving credit by citation of source(s).
- disrespectful or discourteous actions or behaviors
- failure to follow the dress code or hygienic standards
- unexcused tardiness
- using inappropriate/offensive language
- unauthorized use of cell phone, including texting, during class or while in clinical areas
- other minor infractions deemed inappropriate in accordance with school/hospital policy

II. WRITTEN WARNING/PROBATION

Continued failure to meet standards of progress (both professional and academic) following the issuance of a verbal warning or a breach of the standards of conduct listed below, will result in the student being given a written warning and being placed on probationary status for a period to not exceed three months. Note this action may be reported to the ARRT and may render the student ineligible to take certification exam.

Written warning applies to the first offense of the following professional standards of conduct.

- failure to meet academic standards
- violation of Codes of Ethics and Honor*
- cheating* — Examples of Cheating: Copying / submitting another person's work as your own, unauthorized use of someone else's work, using unauthorized notes, text or equipment including programmable calculators during an examination, stealing an examination or using a stolen examination, allowing another student to have access to your work, thereby enabling that student to represent the work as his or her own
- sleeping during assignments
- disorderly conduct on school or hospital grounds*
- refusal to perform tasks assigned
- dishonesty, misrepresentation, or making false statements*
- failure to demonstrate improving efficiency in the performance of clinical and/or didactic assignments
- revealing confidential information*
- absence from class or clinical assignments (second offense)
- unauthorized duplication or inspection of testing material(s)
- leaving clinical site while on clinical time without proper authorization
- sexual harassment*
- illegal, inappropriate, unethical actions or behavior*
- continued breaches of verbal warning(s)
- breach of HIPAA regulations*
- practicing in an unsafe manner or outside the scope of professional training*
- other evidence of unprofessional conduct or breech of standards in accordance with hospital/school polices*

Procedure:

1. The written warning is prepared by the Program Director, stating the specific standards not being met and the length of the probationary period.
2. A conference is held between the student and the Program Director. Goals are set for the student to meet to rectify the failure of the standards of progress and given notice of the length of the probationary period. The student is informed that if he/she has not met the standards and goals by

the end of the probation period, he/she will be dismissed from the program.
3. The student signs the written warning and given a copy. The original is placed in the student's file in the Program Director's office.
4. If the student is co-enrolled in an affiliated university, the Program Director will inform the student's university advisor(s) of the probationary period and that the student may be dismissed or be allowed to voluntarily withdraw if the issue is not remedied.

III. DISMISSAL

Dismissal is the forced withdrawal of a student enrolled in the program. It results when a student has not met the standards of progress following a probationary period or for willful violation of the standards of conduct listed below.

Final dismissal means the student discontinues attendance and is not eligible for reentrance at a later date.

Students being dismissed would be offered the option of withdrawing voluntarily so that their record would not reflect a forced dismissal.

A student who has been dismissed for a nonacademic related issue may be entitled to initiate may initiate a Grievance Procedure according to the school's Grievance Policy. Pending the outcome of the grievance, the student would not be allowed to attend class or report to their clinical assignments.

If the grievance is successful and the student reinstated, they would resume attendance and would be required to complete all assignments and competencies missed before being allowed to graduate. If the grievance is not successful, the student is not allowed reinstatement and the dismissal would be final.

The procedure to inform the student of her/his dismissal is as follows:
1. A Notice of Dismissal is prepared by the Program Director, outlining the reasons for dismissal.
2. A conference is held between the student and the Program Director to inform the student of the reasons for dismissal, and to explain the Grievance Procedure available to them.
3. The Program Director will inform the student's university advisor(s) of the dismissal if the student is co-enrolled with an affiliated university.

Dismissal on the first offense without verbal or written warning will be enforced for the following professional standards of conduct.

- willful violation of safety regulations or intentional carelessness in regard to the safety of patients, co-workers or student*
- deliberate abuse of another person*
- willful destruction of property*
- theft*
- falsification of school or hospital records*
- failure to attend class or clinical assignments on more than three consecutive days without notifying the Program Director
- reporting to class or clinical assignment while under the influence of alcohol or a controlled substance (refer to this school's Drug Policy)*
- possession of a controlled substance*
- conviction of a felony or misdemeanor showing a lack of sound moral judgement*
- carrying a concealed lethal weapon
- any gross unethical or unprofessional conduct in offense of school/hospital policy*

Cell Phone Usage Policy

Cell phones must be **turned off** while the student is in the classroom or in clinical areas. Cell phones may only be used at break time or meal time. If someone urgently needs to contact a student during class or clinical hours they are instructed to call Trinity Radiology at 818-8100 and 857-2316 during classroom hours.

Patient Transport Safety Policy

A patient's condition can change very rapidly, so it is important that a patient transporter be able to handle emergency situations that could occur. In fairness to the patient, the patient's family, the technologists and our students, the following policy will be adhered to:

No student shall transport a patient ALONE until they are BLS certified. A student who is not certified may assist in patient transport with a certified technologist, transporter or senior student. All new students shall become BLS certified within one month of the Program start date.

Student Employment Policy

Students who seek outside employment or who are employed during the Program are cautioned to avoid excessive work schedules that may interfere with their academic and clinical performance. Adjustments to the student schedule to accommodate outside employment will not be made.

Any paid employment by Trinity Health during the term of the student's enrollment is beyond the control of the Program and is thus a separate entity from the structured clinical experience. The Program will not be held liable for any incident that may occur while the student is a paid employee for Trinity Health.

Student Records Policy

The following records are maintained while the student is enrolled in the Program:

- student application
- pre-entrance physical examination
- vaccination record
- didactic and clinical grades
- occupational radiation exposure on file with Radiation Protection Officer (RSO)
- disciplinary actions taken
- attendance records

Students are free to examine their records at any time, with the exception of two (2) portions of their application–personal references (if the waiver was signed) and personal interview data.

The following records are maintained on a permanent basis.

- program transcript, which includes clinical and didactic grades, verification of ARRT registry results (pass/fail) and attendance
- student application
- pre-entrance physical
- vaccination record

- final occupational radiation exposure report on file with Radiation Protection Officer
- written disciplinary actions (evidence of verbal warnings will be destroyed)

Permanent records will be released with written permission from the former student, in accordance with the Buckley Amendment.

Inclement Weather Policy

INCLEMENT WEATHER POLICY

The program administration recognizes that under certain extreme weather conditions, students cannot and should not attempt to come to campus or clinical sites. However, if classes are not officially cancelled, it is the responsibility of each student to decide if he/she feels safe driving in the inclement weather. This is a decision that must ultimately be made by each individual. Students must assume responsibility for deciding if weather conditions are too hazardous to permit safe driving regardless of school announcements. Safety and personal judgment are required in each individual case. Caution is urged! Even though safety is the first concern, students must avoid any abuse, or potential abuse, of this situation.

CLINICAL DECISION BY 6:00AM

The decision to cancel or delay class or clinicals during inclement weather is the responsibility of the Program Director or his/her designated representative. A decision concerning class/clinical will be made by 6:00 a.m. and Program officials will let the students know if class or clinical time is cancelled. The absence of an announcement should alert students that clinicals will operate on a regular schedule.

If class or clinicals are cancelled due to inclement weather, make up time will be arranged. If the school closes early after the start of class/clinical, the Program Director will notify other program officials to dismiss the students from clinical at the time of the closing. If inclement weather policy has not been invoked and the school is open, but the road conditions where the student lives preclude safe travel and the student elects to not report to class or to clinicals, the student must follow the program policy for reporting of the absence. The absence will be documented. In the event of any absence due to inclement weather, make-up time will be added to the semester to ensure students receive the full hours of clinical instruction that are required for the course.

Limited Early Release & Delayed Program Completion Policy

The Program requires a student to complete the full 21 month program. However, since it is a competency based program, the following provisions have been made.

LIMTED EARLY RELEASE

Subject to Program Director's approval and availability, a student may be declared clinically competent and be eligible for limited early release from other assigned clinic areas in order to spend remaining clinical hours in a specific radiographic rotation or advanced imaging modality of their choice.

The student must meet the following criteria to be eligible:

- enrolled in their last semester of the Program
- completed all required clinical competencies with a cumulative grade of 80%
- maintained satisfactory didactic grades (determined by Program Director)
- deemed to have the clinical knowledge of an entry level graduate technologist (determined by Clinical Preceptor(s))

A student who has been deemed clinically competent may elect to spend the remainder of their clinical hours in advanced imaging or radiologic modalities. The modality choices will be determined by the Program Director, in consultation with the student and will be based on individual student requests or needs.

The student's eligibility and this policy are subject to the following stipulations:

- the student will not be released to cover hospital or clinic staffing shortages
- the student must first complete final competency testing
- the student must attend didactic class
- the student must maintain their achieved didactic GPA

Failure to abide by this these stipulations will result in re-evaluation of the student's eligibility and possible revocation of elective privileges.

DELAYED RELEASE

A student who has not completed all didactic and clinical requirements of the Program by graduation date will not be confirmed to take their ARRT certification exam. The student will be offered the option to stay in the program and given until the fourth week of July of that year to complete needed requirements. Once the student has satisfactorily completed the program's requirements, the ARRT will be notified of their eligibility. If the student has not completed program requirements in stated time frame, they will be dismissed. The time frame is necessary due to the limited student capacity as set forth by the JRCERT to ensure proper student supervision.

Graduation Requirements

To graduate from the Trinity Health Radiologic Technology Program, the student must fulfill all the following requirements.

1. Complete all didactic courses with a cumulative grade of no less than 80%.
2. Complete all clinical testing with a cumulative grade of no less than 80%.
3. Complete all competencies and proficiencies with a cumulative grade of no less than 80%.
4. Complete all clinical checkoffs, papers, worksheets, clinical safety log and miscellaneous assignments.
5. Complete all ARRT clinical and didactic requirements.
6. Pay all tuition and book fees in full.
7. Return all tests and quizzes.
8. Return all hospital and school property.
9. Turn in TLD's
10. Complete an exit interview with the Program Director.
11. Submit a completed application to ARRT for registry exam. Processed application will generate student exam notification window period. Student must then schedule a date, time and location for testing with the ARRT designated testing service.

If the above requirements have been met, the student is then awarded a certificate of completion from the program. Graduation is usually held the second week of May. Students enrolled in a university degree program will have a statement of completion forwarded to the university upon completion of the program requirements to graduate. Credit hours awarded by the university are at the discretion of the individual university.

All students successfully completing the program are eligible to apply for and take the American Registry of Radiologic Technologists (ARRT) national certification examination. Upon successful completion of this exam, students receive the right to use the credential Registered Technologist in Radiography — R.T.(R)(ARRT) after their name.

Student Rights / Responsibility Policies

1. Students have the right to institutional policies and procedures safeguarding the freedom to learn. Students are responsible for knowledge and application of the policies and procedures.

2. Students have the right to admission without discrimination on basis of race, religion, color, age, national origin, sex, marital status, veteran status or any other status or condition protected by applicable state or federal laws. Students have the responsibility to accept others without discrimination on the basis of race, creed, sex, or marital status.

3. Students have the right to take reasonable exception to data or views offered in any course of study and to reserve judgment. Students are responsible for knowing material offered in any course study in which they are enrolled.

4. Students have the right to orderly procedures of academic evaluation without prejudice. Students are responsible for maintaining standards of academic performance for each course in which they are enrolled.

5. Students have the right to confidentiality by all employees of the Program. Students have the responsibility for corresponding confidentiality.

6. Students have the right to a carefully considered policy regarding the information which is part of the student's permanent educational and financial record and the conditions of their disclosures. Students are responsible for maintaining confidentiality of their records.

7. Students have the right to discuss appropriate issues and to express opinions. Students are responsible for maintaining positive public relations for the Program and Trinity Health.

8. Students have the right to participate in the formulation of institutional clarification of standards of behavior which is considered essential in appropriate situations. Students are responsible to know these policies and may be disciplined for violations of these policies.

9. Students have the right to printed institution clarification of standards of behavior which are considered essential in appropriate situations. Students are responsible to know these policies and may be disciplined for violations of these policies.

10. Students have the right to adequate safety precautions within the Program and its clinical areas. Students are responsible for practicing safety measures within the Program and its affiliates.

11. Students have the right to participate with faculty in periodic review of the grading system. Students are responsible for seeking clarification or assistance from faculty regarding academic status.

Codes of Ethics & Honor

As part of the application process for admission into this program, applicants are asked to answer the following questions to ensure the applicant's awareness of the ARRT requirements well in advance of applying for the certification exam.

The ARRT is the entity that will determine a student's eligibility to take the required certification exam to become a registered radiologic technologist. As such, students who may have answered "yes" to any of the questions on the Code of Ethics and Honor (summarized again below) must personally contact the ARRT and complete a pre-application to determine whether they are eligible to attempt the required certification exam for radiologic technologists.

Contact information:

ARRT
1255 Northland Drive
St. Paul, MN 55120-1155
Phone (651) 687-0048
www.arrt.org

The health care profession is held to a higher standard of integrity than many non-healthcare professions. As a student in our school of radiologic technology, you will learn to be a health care professional. As such, society's ethical principles and laws to safeguard the health of the public should guide your behavior.

The American Registry of Radiologic Technologists (ARRT) requires you to sign the following statement before being allowed to take your registry exam to become a Radiologic Technologist.

"Have you ever been convicted of a misdemeanor or a felony? _____

Note: Charges or convictions resulting in any of the following must also be reported:
–pleas of guilty, – pleas of no contest, – withheld or deferred adjudication, – suspended or stay of sentence
–pre-trial diversion, –military court martial, – drug or alcohol related charges
DO NOT report misdemeanor charges or convictions that occurred while a juvenile and that were processed through the juvenile court system.

Also due to the higher standard of integrity that society places on healthcare professionals, the ARRT expects students to also academically conduct themselves in a moral and ethical manner, and not to act in any manner that is punishable by law or ethical misconduct.

The ARRT requires you to sign the following two statements before you are allowed to take your registry exam.

1. *"Have you ever been suspended, dismissed, or expelled from an educational program that you attended in order to meet ARRT certification requirements?*_____
2. *"Have you had any license, registration, or certification denied, revoked, suspended, placed on probation, or subjected to discipline by a regulatory authority or certification board (other than the ARRT)?*_____

Applicants or current students of the program with questions about this should seek clarification from the ARRT well in advance of preparing to apply for the certification exam so that there is ample time for allow the ARRT to determine their eligibility to take the exam based on information provided by the student/applicant.

Student Grievance Policy

DEFINITION OF A GRIEVANCE: any academic or nonacademic problem resulting from an alleged unfair, inequitable or interpretation, application or implementation of a policy or procedure. A grievance can also result from an issue that may initiate from a nonspecific policy or procedure. An academic grade is not an issue for grievance.

The student who has an academic or nonacademic grievance as a result of a specific event or circumstance must follow the student grievance process. A student may seek outside legal counsel; however, the legal counsel may not represent them at the grievance hearing, as it is a closed hearing.

GRIEVANCE PROCEDURE

If a student feels they were treated unfairly because of the application of a policy or program decision, the student has a right to make it known to the program and has the responsibility to do it in a timely, non-disruptive manner. The following process is recommended when addressing these types of issues.

GUIDELINES:

1. The student discusses the issue with the person involved within 48 hours. If satisfactory solution IS achieved, student will inform program officials of the problem and how it was resolved within 24 hours.
2. If the student is not satisfied with the response in guideline 1, they are to state the issue and requested resolution in writing to a program official. A Grievance Resolution Form is available for this purpose. Program officials will review the information and investigate further, if necessary, and will provide the student with a written response to their concern. All information is considered confidential and is discussed with only those who have a need to know.
3. If the student is not satisfied with the response in step 2, the grievance may be presented to the Director of Radiology and/or the Vice President that oversees radiology in accordance with Trinity Health Problem Solving Procedures. A final decision will be made at this step and will not include officials directly involved in the program. All efforts will be made to assure that a timely response within 48-72 hours is made from the time the written grievance is submitted to program officials.
4. Discrimination complaints are to be filed directly with Human Resources at Trinity Health.

TIME LINES:

Students have the responsibility to present problems and concerns in a timely manner. During this process program officials reserve the right to revise the student's rotations if necessary for the safety of patients, the student or staff. If changes are made to the student's schedule, all efforts will be made to ensure the student time to make up clinical or class time missed as necessary for the completion of the program.
In the event that an enrolled student should have a grievance related to compliance with the JRCERT standards, they should contact the JRCERT directly —

JRCERT
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312-704-5300
website: www.jrcert.org

Grievance Resolution Form

GRIEVANCE RESOLUTION FORM

Student name:_____

Date of incident:_____ Time:_____

Location:_____

Person(s) directly involved in the incident:_____

_____

Other person(s) with information regarding the incident:_____

_____

Detailed description of the incident:_____

_____

_____

_____

_____

_____

_____

_____

_____

Detailed description of what steps have been taken to resolve the incident to date:_____

_____

_____

_____

_____

_____

_____

Signature of the student_____ Date/Time_____

Signature of Program Official receiving the complaint_____

Date/Time received:_____

Student Complaint Policy

The following form may be used to document student complaints that are not covered under the formal Student Grievance Policy so as to provide a record of the complaint and to ensure that a satisfactory resolution is provided to the student and program officials.

STUDENT COMPLAINT FORM

Student name:_____ Date of report:_____

Description of the complaint_____

_____

_____

_____

_____

_____

_____

_____

_____

Description of resolution sought by student (if any)_____

_____

_____

_____

Description of actions taken_____

_____

_____

Was the issue resolved satisfactorily? **Y** or **N** If yes, the sign and file complaint as a record to be purged 1 year after the student graduates.

If no, then what steps are to be taken? (attach a new form if necessary)_____

_____

_____

Student signature_____ Date/Time_____

Signature of Program Official _____

Health Services Policy

OBJECTIVES:

1. To provide a program designed to promote overall student health.
2. To advise and assist the student when a health problem is present.

POLICY:

1. All students are required to carry personal health insurance.
2. All students must have a complete physical exam before final admission to the program. Health Evaluation forms will be provided and must be returned to Program Director.
3. Students must have one TB test prior to start date, and a chest x-ray if prior positive reaction. (Subject to change, based on Trinity Health Employee policies)
4. Student immunizations must be current prior to admission. Immunization to Rubella will be evidenced if the student can show proof of immunization at or after the age of 15 months or by having an immune rubella titer. Students born in or after 1957 can show immunity to Rubella by one of the following:
   1) documentation of physician diagnosed measles
   2) prior serologic evidence of measles immunity
   3) two live measles vaccinations on or after the first birthday
5. COVID-19: Students must follow all Trinity Health policies implemented while they are in the Program regarding COVID-19, which may require students to be vaccinated for COVID-19 in order to enter or remain in the Program unless an exemption is submitted and approved by Trinity Health Human Resources. Trinity will provide vaccinations for students who wish to be vaccinated against COVID-19 prior to beginning the Program.
6. Students will be offered the Hepatitis B immunization, free of charge at the beginning of enrollment in the program.
7. Student health records are kept on file in the office of the Program Director.
8. Students must notify the Program Director when they are ill.
9. Students may seek urgent care at Trinity's Emergency Trauma Center. Non-urgent care is provided at Trinity Health FirstCare. Expenses for office visits and related medical care are the student's responsibility.
10. If the student is unable to meet the objectives of the Program because of illness, the Student Leave of Absence Policy and Long Term Disability Policy will be followed.
11. All injuries occurring during clinical assignments must be reported on the appropriate hospital incidence forms. Needle stick / blood contamination incidents must be reported and followed up in the Emergency Room. Initial charges are waived. Costs of prescriptions or subsequent medical care required are the responsibility of the student.
12. Students must adhere to Trinity Health and the Program's" Communicable Disease Policy.
13. Students are provided Limited Workers Compensation coverage by Trinity Health.
14. Because of the small ratio of student to faculty, faculty members become personally acquainted with the students. Students are encouraged to seek counseling from the instructor of their choice. Spiritual guidance and counseling is also available, free of charge, from the Trinity Health Chaplain Service. Mental health and drug addiction services are also available through Trinity Mental Health Services at the student's expense.

Compliance Policy

Noncompliance with the Program or hospital policies will be dealt with in accordance with established discipline and dismissal policy, hospital policy, and/or grievance policy.

Safety Event Reporting Policy

In the event that a student is involved in or observes a safety event at Trinity Health involving the facility, patients, staff or visitors, the student is directed to utilize the Safety Risk Management (SRM) procedures as found on Trininet. Details about filing an SRM are covered when students are oriented to Trinity Health's policies.

Drug Policy

Students agree by their enrollment to abide by Trinity Health's drug policies and the provisions of this policy. Violations of these policies will result in disciplinary actions up to and including dismissal from the Program. (See Discipline and Dismissal policy.)

PURPOSE:

1. To establish a safe and healthy environment for students, faculty, patients and employees of Trinity Health.
2. To ensure the quality of education provided by the Program.
3. To promote the health and wellness of the students by discouraging the abuse of alcohol and the use of illegal drugs.

POLICY:

1. Students must abide by drug policies set forth by Trinity Health, including any changes to policies that are implemented during their time in the program.
2. Students are prohibited from reporting to class or clinical activities while under the influence of alcohol or illegal drugs. Improper use of prescription medication will not be tolerated. Violations of this provision may result in dismissal. Students suspected of being under the influence will submit to drug and alcohol testing.

   Refusal of testing will be considered as a failure to comply with the Program or Trinity Health policies and may result in disciplinary action, up to and including dismissal.
3. The sale, distribution, transfer or purchase of illegal drugs on school or hospital properties is strictly prohibited. Students in violation of this provision are subject to dismissal.
4. A student whose use of alcohol or drugs results in excessive tardiness, absenteeism, or poor performance is subject to disciplinary action, including dismissal.
5. Illegal activities will be reported to the proper law enforcement agencies and the student involved may be subject to criminal prosecution and penalties.

   The student may also be deemed to be in violation of Rules of Ethics by the ARRT and may temporarily or permanently be barred from taking the registry exam. Refer to code of Ethics and Honor in the policy manual.

Transportation & Parking Policy

Students are responsible for transportation to and from class and clinical assignments. Parking regulations of Trinity Health must be followed. Any traffic violations or parking fines are the responsibility of the student.

- Students will be issued a Trinity Health parking sticker.
- All students reporting to Trinity Healthcare Campus and Medical District are required to park their vehicles in staff parking areas located on the far east side of the lot for the main hospital and north of the lot for the medical office building.
- Students parking at the Trinity Hospital St. Joseph's and Health Center Medical Arts campus are restricted to the top level of Lot N, the 3rd Street parking ramp, located off Burdick Expressway.
- Students and faculty are not authorized to park in the reserved lots (customer or staff) while conducting school-sponsored, cooperative activities.
- Students parking in violation of the above policy will be subject to Trinity Health parking violation code and also may be issued tickets by the Minot Police Department.
- Students who have been issued more than one violation will lose 1 hour of PTO for every parking infraction thereafter.

Student Professionalism Policy (updated 10/21)

The purpose of this policy is to provide the student guidelines concerning professional conduct and appearance. Students not in compliance with the provisions of this policy are subject to disciplinary procedures.

PROFESSIONAL CONDUCT

Your conduct reflects on the entire Trinity Health system and healthcare in general. As a health professional, you should be aware of the impression you make on patients, relatives, co-workers and community members. In addition, students must at all times conduct themselves in a professional and mature manner in accordance with the Code of Ethics for the Profession of Radiologic Technology, including the following:

The Student Technologist:

1. Functions efficiently and effectively demonstrates conduct and attitudes befitting the profession.
2. Acts to advance the principle objective of the profession to provide services to humanity with full respect to the dignity of mankind.
3. Provides medical services to patients without discrimination.
4. Practices technology founded on scientific fact.
5. Exercises care, discretion and judgment in the practice of the profession.
6. Provides the physician with pertinent information related to diagnosis and treatment management of the patient.
7. Responsibly protects patient, self and others from unnecessary radiation.
8. Practices ethical conduct befitting the profession.
9. Respects confidence entrusted in the course of professional practice.
10. Abides by the student supervision policy and does not exceed the professional Scope of Practice.
11. Uses time in clinical areas for the benefit of patients and/or educational experience as required by the Program. Use of internet for personal use is prohibited. Use of personal cell phones while at work or in clinical areas is prohibited except for break times and in discrete non-patient areas.

PROFESSIONAL APPEARANCE

All Trinity Health employees, volunteers, physicians, students and contract/agency staff must maintain a professional, well-groomed appearance at work in clinical areas. Clothing and grooming should create to a positive impression of the organization while contributing to a safe and efficient work environment. In the interest of infection control it is necessary for all employees to maintain good personal hygiene and cleanliness at all times.

General dress code of Trinity employees are as follows:

- Clothing must be clean and in good condition. Radiology students wear black scrub sets, coverup jackets should

be black as well.
- Clothing must fit properly and not drag on the floor or expose torso, midriff and/or buttocks.
- Underwear must be worn and not be visible.
- Undershirts in any color may be worn under colored scrubs but must be tucked in and not visible below the outer scrub tops. No advertisement logos should be worn.
- When hospital scrubs are worn for surgery or portable rotations, the scrubs are not to be worn outside the building or taken home.
- Socks/hosiery must be worn at all times.
- No open-tie shoes or shoes with large ventilation holes are allowed. Shoes must be clean and in good condition.
- Hospital identification badges must be in good condition and not defaced or self-edited and worn at chest level.

Grooming:
- Maintain personal cleanliness and hygiene at all times.
- In the interest of patient and coworker safety and comfort, no perfume, cologne, aftershave or heavily scented lotions are permitted while on duty in patient or non-patient care areas.
- Hair longer than shoulder length must be pulled back and off your face, headbands may be worn but should be discrete. No other decorative hair accessories are allowed.
- Beards and mustaches shall be short, neat and trimmed. Facial hair that impedes the fit of an N-95 mask may have to be removed.
- Nails must be a reasonable length, clean and well-manicured. Nail polish must not be chipped or peeling. When involved in patient care, having acrylic or ornamental nails my be limited by program officials.
- Tattoos and/or body art must be conservative* and/or covered while on duty.

Jewelry:
- Earrings should be small.
- No gauged ears without plugs.
- Rings should be limited to one on each hand.
- Necklaces should be small without elaborate pendants.
- Bracelets are not permitted with the exception of Medical Alert bracelets.
- Facial jewelry should be removed or discrete.

Trinity Health management and program officials reserve the right to define conservative and to ask a student to go home and change clothing or other violations of these policies. The Professional Conduct and Appearance policies reflect minimum standards and disciplinary actions may result from continuous violations of these policies.

Communicable Disease Policy (updated 10/21)

All students are required to complete Infection Control training programs during their orientation period, which will be reinforced throughout the Program in didactic and patient care courses, clinical training and mandatory hospital in services.

Due to the recent pandemic of COVID 19, Trinity Health requires all employees, which includes students, to wear a mask while in clinical areas and when arriving and leaving its facilities. Students are to comply with all Trinity Health policies related to COVID and other communicable diseases while in the Program.
Any questions concerning communicable disease and infection control related to student illness and/or contact with ill patients will be referred to the Infection Control Officer. Any actions taken will be based on their recommendations and in compliance with existing infection control policies.

A student who is not feeling well or has contracted a communicable disease as further defined in Trinity Health's Infection Control Program policies, is to report the condition to program officials for instruction. Students may be required to see a provider and be absent from class and/or clinical areas until the contagious stage of the disease passes. The student is required to obtain a note from a provider stating that he/she may return to patient contact areas. If the student is unable to meet the deadlines of the Program due to a communicable disease, the Long Term Disability policy may be followed.

To prevent the spread of infectious disease, CDC Standard Precautions (Trinity Health Policy 51.12) below are enforced:

A. **Hand Hygiene** – (full procedure below)
   - Before and after each patient encounter including the patients surroundings. Strict adherence to hand hygiene is expected of all personnel.

B. **Gloves** -
   - Gloves should be worn when potential contact is going to be made with blood or other body fluids, mucous membranes or non-intact skin.

C. **Gown** -
   - Wear a gown (fluid resistant gown) to protect skin and prevent soiling of clothing during procedures and patient-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions or cause soiling of clothing.

D. **Mask, eye protection, face shield** -
   - Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose and mouth during procedures and patient-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.
   - Personal eye glasses are not considered eye protection.
   - Use of masks for insertion of catheters or injection of material into spinal or epidural spaces via lumbar puncture procedures is recommended.

E. **Patient-care equipment** -
   - Handle used patient-care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other patients and environments.

F. **Linen** -
   - Handle and transport used linen soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and avoids transfer of microorganisms to other patients and environments.
   - Do NOT carry linen in your arms against your uniform or scrubs.
   - Wear gloves if handling linen contaminated with infectious material.

G. **Handling of sharps** -
   - Take care to prevent injuries when using, handling, and disposing needles, scalpels, and other sharp instruments or devices.

- Do NOT recap used needles, if necessary to recap, use a device designed for holding the needle sheath or use a one handed scoop technique. Do NOT remove used needles from disposable syringes by hand.
- Utilize provided safety devices whenever possible.
- Do NOT bend, break, or otherwise manipulate used needles by hand.
- Place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers immediately after use
- In the event of a needle stick, student shall immediately wash area with soap and water, inform program officials and then report to the Emergency Trauma Center where hospital protocol will be followed.

H. **Safe Injection Practices** -
- Refer to Policy Safe Injection, Infusion, and Medication Vial Practices, 51.32.

I. **Respiratory Hygiene/Cough Etiquette** -
- Instruct symptomatic persons to cover mouth/nose when sneezing/coughing;
- use tissues and dispose in no-touch receptacle;
- perform hand hygiene after soiling of hands with respiratory secretions;
- wear surgical mask if tolerated or maintain spatial separation of > 3 feet if possible.

J. **Resuscitation** -
- Use mouth pieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.
- Pocket masks may be available at the bedside in acute care settings

Hand washing is the most effective means of controlling the spread of disease and students are to follow Trinity Health's policy for Routine Handwashing as set forth below.

Hand Washing Procedures (Trinity Health Policy 51.27A)

1. Keep nails short, polish is discouraged but can be used if there are no chips in the polish.
2. Artificial nails are not permitted, this includes extenders, tips, or any other nail product glued or adhered to the natural nail
3. GLOVES are single use only and do not replace the use of hand hygiene by any Trinity staff.
    a. Wear gloves when it is anticipated or known that HCW will have contact with blood or other body fluids, mucous membranes or non-intact skin.
    b. Change gloves when moving from one contaminated body site to another body site on the same patient, such as doing mouth care, change gloves then wound care.
    c. Gloves must be removed after use, NEVER reuse gloves.
    d. ***Hand hygiene must be performed:***
        i. ***Before donning gloves***
        ii. ***After removal of gloves***
4. Hands must be washed with soap and water when:
    a. Visibly dirty
    b. Visibly soiled with blood or body fluids
    c. After using the restroom
    d. Caring for a patient suspected or know to be infected with a spore-forming pathogen such as C. difficile or Norovirus
5. Alcohol based hand rub (ABHR, Waterless hand cleaner, Hand sanitizer) is the preferred means for hand hygiene in all other clinical situations not listed in #4.
6. Perform hand hygiene:
    a. Before and after touching the patient
    b. Before handling any invasive device for patient care regardless of glove use
    c. After contact with any:
        i. Body fluids
        ii. Blood
        iii. Excretions/Secretions

iv. Mucous membranes
v. Non-intact skin
vi. Wound drainage

d. Moving from a contaminated body site to another body site during care of the same patient
e. After contact with inanimate surfaces and objects in the immediate vicinity of the patient
f. After removing gloves
g. Before handling medication
h. Before handling food

7. Hand Hygiene Technique
    a. ABHR (alcohol based hand rub) (Section 1A):
        i. Apply a palmful of ABHR and cover all surfaces of the hands.
        ii. Rub hands until dry
    b. Soap and Water (Section 1B):
        i. Wet hands with water and then apply soap
        ii. Cover all surfaces of the hands
        iii. Rinse with water and dry thoroughly
        iv. Use towel to turn off tap/faucet

Pandemic/Unusual Safety Situations

Infection control is of utmost importance for the safety of our students, coworkers, patients and visitors. The COVID-19 crisis of 2020 changed the face of healthcare and how such situations may be handled in the future. Should such a situation arise that affects or excludes students from clinical rotations or didactic class for any reason, including but not limited to a pandemic, shortages of personal protective equipment, concern for student safety or under orders from Trinity Health or affiliated universities/state/federal officials, students may be rescheduled to non-patient care areas until it is safe to resume clinical rotations or in person class time. If students or program officials are quarantined to stay home for any reason, students are expected to complete didactic courses via phone/video conferencing if possible until restrictions are lifted.

Students are required to follow Trinity Health employee guidelines when returning to the class room or clinical areas, included pre-screening before entering, wearing proper personal protective equipment and any other guidelines set fort by Trinity Health, state or federal officials as it concerns safety.

Under such circumstance, pursuant to this policy and the Early Release policy, if senior students are able to complete didactic coursework and the required ARRT clinical competencies set out by the Program despite having fewer clinical hours than previously scheduled, program officials will determine if and how many clinical hours need to be made up after restrictions are lifted on a case by case basis.

Educational/Work Safety Policies

WORKPLACE VIOLENCE POLICY

Trinity Health promotes a safe and nonviolent environment for employees, patients and visitors, and has "Zero Tolerance" towards all expressions of violence, including harassment, intimidation, coercion and other disruptive behavior. Students who engage in violent acts or such behaviors will be subject to disciplinary action, up to and including expulsion from the Program. If necessary, the Program will also report the behavior to the Trinity Health Response Team as established in its Policy 52.55.

Students are educated on workplace violence during orientation and are responsible for reporting acts or violence of threatening behavior to program officials or Trinity Health security immediately.

SEXUAL HARASSMENT POLICY

Students have a right to receive an education in a professional environment free of sexual discrimination or disrespectful or offensive behavior of a sexual nature. The purpose of this polity is two-fold. First, to protect students from sexual harassment and second, to protect patients, employees and visitors from experiencing sexual harassment as a result of student conduct.

Sexual harassment may be verbal, physical, written or visual. Conduct that may constitute harassment includes but is not limited to sexual or suggestive comments, jokes or propositions, sexist remarks, unwanted sexual advances or touching, staring or leering, pressure for sexual favors in return for special treatment, or any other actions of a sexual nature, implicit or explicit that create a hostile environment.

If a student believes that they have experienced such behavior or have knowledge of sexual harassment occurring, they have a duty to report it to program officials and/or the Director of Radiology, as well as the Corporate Compliance office, Corporate Compliance hotline (7-3400) or Human Resources.

If a complaint is against a Trinity Health employee (including program officials), Corporate Compliance Officer and/or Human Resources should be notified.

Any student in the Program engaging in actions deemed to be sexual harassment towards another may be subject to discipline, including expulsion from the Program, as well as being subject to Trinity Health policies and any actions listed thereunder on the same.

If a sexual harassment complaint involves another student in the Program, a meeting with the Advisory Committee and Human Resources/Corporate Compliance Officer will be convened privately. The Committee has the authority to 1) dismiss the complaint, 2) take disciplinary action under Program policies including expulsion, and 3) take any action which in the opinion of the Advisory Committee and Trinity Health Human Resource and Corporate Compliance representatives deem necessary.

NON-FRATERNIZATION POLICY

The Program is committed to maintaining an environment which fosters and encourages student development of high ethical standards. Thus, the Program strongly discourages romantic, sexual or exploitative relationships between a student and another student in the Program, a radiologic technologist, radiologist or health care provider employed by Trinity Health.

In any event, the following guidelines will be enforced:

1) "Involved student" is not allowed to submit a Performance Evaluation for grading or for completing any checklists while being supervised by the "involved technologist, radiologist or health care provider."

2) "Involved technologist" cannot grade any exam or complete any checklist for any "involved student."

DISCRIMINATION

Trinity Health and the Program are committed to utilizing practices that protect students from illegal discrimination, or any other form of discrimination based on race, creed, religion, sex, gender identity, national origin, sexual orientation, veteran status, marital status, age or disability.

If a student believes other students, program officials, or any Trinity Health employee, subcontractor or agent is discriminating against them, they should report it to program officials, the Director of Radiology, Human Resources or Corporate Compliance Officer.

Pregnancy Policy (updated 4/21)

The National Council of Radiation Protection and Measurements Report #116, a series of reports on basic radiation protection criteria and dose limits aimed at controlling exposure, states that once a pregnancy has become known, "exposure of the embryo-fetus shall be not greater than 0.5 mSv (.05 rem) in any month (excluding medical exposure)." The purpose of our Program's pregnancy policy is 1) to provide for the well-being of the unborn by following NCRP recommendations and 2) to ensure the quality of the education provided to the pregnant student is not affected.

A student who is or becomes pregnant during the Program is not required to declare their pregnancy but is encouraged to voluntarily inform the Program Director so she can be educated on radiation and pregnancy and so appropriate action to monitor and limit monthly embryo-fetus dose complying with NCRP regulations is undertaken. Whether a student declares her pregnancy or not, the student will be treated equitably by the Program. (A non-declared pregnant student is not considered to be pregnant and cannot ask for special considerations due to health status unless pregnancy is declared.)

If the student chooses to declare her pregnancy, she must:

1. Provide written notice on the form provided by the Program Director; and
2. Meet with Trinity's Radiation Safety Officer (RSO) for radiation safety counseling. The student must sign a statement that she understands any radiation risks involved. Information regarding the pregnant student will be held in strict confidence by the RSO, Program Director and Clinical Preceptor(s). A student may also withdraw a declaration of pregnancy at any time by providing a written statement to the Program Director.

Once a pregnancy has been declared the student has several options:

1. Continue the educational program without modification or interruption,
2. Seek leave of absence from the Program (see Leave of Absence policy).

In most cases where good radiation safety techniques are practiced, no change in the clinical situation is necessary. The student will be issued a second radiation monitor that is worn at waist level under any protective shielding and changed monthly.

After declaring a pregnancy, program officials will work with the student individually to keep up with coursework and plan for missed clinical time. A physician's note is required for the student to return to clinical rotations postpartum. 4-6 weeks is a typical timeframe for returning postpartum, but each situation is different.

Students must complete all Program clinical/didactic requirements to be eligible for graduation and the ARRT registry exam, and these requirements cannot be skipped or shortened due to pregnancy status. Although the Program's policy is in place to offer the utmost in radiation protection to the student, neither the Program or Trinity Health are responsible for any perceived injury to the mother or the embryo-fetus due to radiation exposure during pregnancy.

_____ _____

Name Date

I have read the above policy, understand it and agree to adhere to it.

Radiation Safety Policy

In accordance with ALARA and Standard 4 of the JRCERT Standards for an Accredited Educational Program in Radiologic Science, the Program has set the following radiation protection guidelines.

A student is required to exercise sound radiation protection practices at all times. At no time may a student participate in a procedure using unsafe protection practices. Unsafe practices are grounds for dismissal from the program. This includes, but is not limited to:

1. Taking exposures, intentionally or unintentionally, on another student or while another student is in a radiographic room. All exposures are to be taken for a medically valid reason only and must be ordered by a physician or licensed independent practitioner.
2. Attempting any procedure under indirect supervision until competency has been achieved. (When competency is achieved indirect supervision is appropriate.)
3. Repeating exposures without the direct supervision of a registered technologist, regardless of competency level.

A student will always wear their assigned personnel radiation dosimeter or TLD (thermoluminescent dosimeter)" while in the clinical setting and adhere to following guidelines.

1. The TLD shall be placed appropriately at the neck level. During fluoroscopy the TLD shall be on the outside of protective shields.
2. The TLD shall be changed quarterly, on the date required.
3. The TLD shall not be worn if undergoing a diagnostic procedure as a patient.
4. If a student loses their TLD, or intentionally or unintentionally misuses them, the student must report it (in writing) to the Radiation Safety Officer and the Program Director and will be charged for replacement. (Approximately $10)
5. Quarterly exposures are monitored by the RSO, Program Director, and student. Upon receipt of Quarterly exposure report by RSO it is reviewed and sent to Program Director. Program Director will review and post in classroom for students to review and initial within 30 days. In accordance with the RSO's guidelines the following limit for exposure should not be exceeded:
   - total dose equivalence
   - 3.75 mGy (375mrem) per quarter = 0.015 Gy/yr (1.5 rem/yr)

   In the rare event that a student exceeds these limits it will be investigated, reported appropriately and the student will be counseled.
6. Permanent exposure records are maintained by the RSO.

STUDENT RADIATION PROTECTION

1. Student shall wear protective lead aprons while performing portable radiography and fluoroscopy procedures.
2. Student shall wear a thyroid shield during fluoroscopy procedures.
3. Student shall wear lead gloves if the student's hands are in the primary beam during a fluoroscopy procedure.
4. Student shall not hold an Image Receptor during any radiographic procedure.
5. Student shall not hold patients during any radiographic procedure when an immobilization method is the standard of care. In the rare event that a student would need to hold a patient, the student shall follow above guidelines 1, 2 & 3, and make every effort to not be in the direct path of the primary beam.

Patient radiation protection is also a serious obligation and should never be taken lightly. Any unsafe radiation practices that expose a patient to unnecessary radiation are also grounds for dismissal. This includes but is not limited to:

1. Failing to follow Trinity Health or the Program's Radiation Safety Policies.
2. Taking exposures without questioning females, within reproductive age, about possibility of pregnancy.
3. Taking additional exposures, not requested by the radiologist, medical physician, or licensed independent practitioner.

MRI Safety Training Policy

The American Society of Radiologic Technologists (ASRT) recognizes the concept of ALARA to include energies used for magnetic resonance. New students will receive classroom instruction on basic MRI safety during the first week of the Program and complete a confidential MRI screening sheet to determine if they are eligible to participate in this portion of clinical education. Students unable to enter the MRI scan room will have an alternative clinical experience assigned.

Both junior and senior students must complete mandatory annual HealthStream a MRI safety module. Further, all employees at Trinity Health must fill out an employee screening form that is kept on file in MRI and is updated annually prior to entering the MRI suite. Just prior to any MRI rotations, program officials also review MRI safety with students, as well as the screening forms. Lastly, a staff MRI technologist also reviews the student screening forms and safety before admitting them into the MRI imaging area during their rotation.

MRI Safety Signature Page
(For enrolled students only)

My signature below indicates that I have received a copy of the MRI safety policy and screening procedures of the Trinity Health Radiologic Technology Program and answered screening questions to the best of my knowledge. I have also been given an opportunity to ask questions regarding my participation in clinical education in the MRI environment. I acknowledge that it is my responsibility to communicate with program and clinical officials if I need to make a change regarding any information related to program policies and request explanations or clarifications of policies as needed.

I _____ agree to adhere to all policies of the Program and Trinity Health.
(print name) For enrolled students only

_____ _____ _____
Signature Date Time

Signature Page
(For enrolled students only)

I have received a copy of the policies and procedures of the Trinity Health Radiologic Technology Program, Clinical Education Plan, and the JRCERT Standards. I have also been given an opportunity to question any policies or standards and was given further explanations or clarifications as needed.

I _____ agree to adhere to all policies of the Program and Trinity Health.
(print name) For enrolled students only

_____ _____ _____
Signature Date Time

TRINITY HEALTH

Trinity Health
Radiologic Technology Program

Clinical Education Plan

Revised 2023

Glossary

(The following terms are common place in radiologic technology programs. Students should become familiar with the following terminology.)

Direct Supervision:	Radiologic Technologist remains with student during every phase of the examination.
Indirect Supervision:	Radiologic Technologist is immediately available to assist the student during every phase of the examination.
Laboratory:	A work area/time scheduled for demonstration of clinical skills and practicing of those skills by the students.
Integration:	The system by which the didactic and clinical objectives are designed to correlate, and complement each other to enhance student learning.
Course Outcomes Assessment:	A statement of the specific outcome the student is expected to achieve. Achievement is attained through the completion of "performance indicators."
Performance Indicators:	A listing of the specific knowledge that a student is expected to perform, achieve and retain (ie. goals).
Student Learning Outcome:	The grading and/or assessment of the student. Learning outcomes are assessed through the following mechanisms: 1) Clinical lab testing — a method of assessing and grading the student's learning of clinical skills, problem solving ability and critical thinking skills performed in simulation without exposures being made. Must be passed before the student is allowed to perform this exam on patients. 2) Competency evaluation — a method of assessing and grading the student's ability to perform radiologic examinations on patients in accordance with the clinical objectives, and also assessing the resulting images produced. The Program requires each student to complete the same number of competency evaluations. The specific number and type of exams are set forth in this plan. 3) Professional development — tools to assess and grade the affective domain in the clinical setting. This grade is incorporated into the semester evaluation assessment. This grade is based on both the Clinical Preceptors professional development evaluation and the supervising technologists evaluations. 4) Final testing — mastery level testing which challenges the students previously learned knowledge and critical thinking skills performed in the student's final two semesters. 5) Didactic testing — written testing designed to assess cognitive knowledge of course content, problem solving and critical thinking abilities.
ARRT Competencies:	The American Registry of Radiologic Technologists requirements for certification eligibility. These competencies are incorporated into the curriculum and this clinical plan.
Mandatory ARRT Procedure:	Students must demonstrate competency in all 36 Radiological Procedures identified as mandatory. Procedures should be performed on patients whenever possible. A maximum of ten mandatory procedures may be simulated if demonstration on patients is not feasible.
Elective ARRT Procedure:	Students must demonstrate competency in 15 of the 35 elective Radiological procedures. Elective procedures should be performed on patients whenever possible, but electives may be simulated if demonstration on patients is not feasible. Of the 15 elective procedures: one must be selected from the head section, and 2 must be selected from the fluorosocopy section.

Clinical Education Plan

STUDENT LEARNING OUTCOME

The Radiologic Technology Program is a learning outcomes, competency-based program. Our goal is, upon successful completion of this 22 month program, that the graduate will function at or beyond the career entry level. To accomplish this goal, the student must successfully complete all required program outcomes. All clinical courses have an outcomes assessment statement that is evaluated through the student's achievement of the course performance indicators.

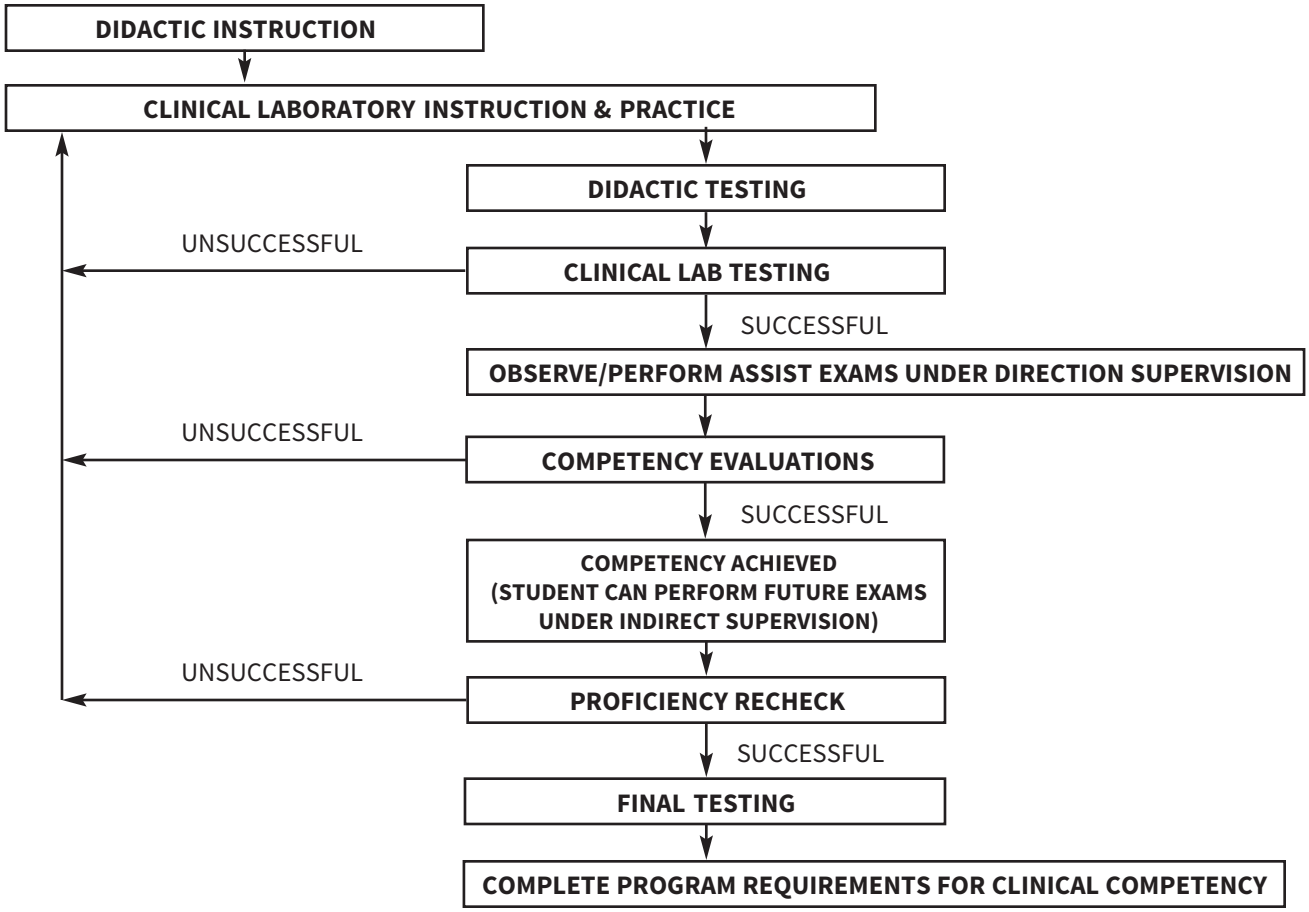
The primary learning outcome of clinical education is to develop student competence in the practice of radiologic technology. The following performance indicators apply to all clinical courses.

PERFORMANCE INDICATORS

The student will:

1. Observe / Assist / Perform radiographic examinations in the assigned clinical area, in accordance with the level of competency achieved.
2. Present a professional appearance.
3. Display professional conduct, and be able to act with discretion.
4. Demonstrate the ability to work and communicate effectively with fellow students, technologists, and others in the clinical area.
5. Adhere to department and hospital rules.
6. Demonstrate punctuality and efficiency in clinical assignments.
7. Consistently utilize radiation protection procedures and devices.
8. Provide for the physical and psychological needs of the patient.
9. Provide for differences in age specific competencies and ethnic and cultural diversity.
10. Demonstrate initiative, intellectual curiosity, and adaptability in the mastery of skills and performance of procedures.
11. Recognize his/her limitations in knowledge and seek assistance as required.
12. Adhere to supervision policy. The student is responsible for insuring they are supervised properly. If proper supervision is not available the student is not allowed to perform examinations.

Clinical Education Flow Chart



Clinical Assessment

Integration of didactic instruction and clinical experience is essential to the success of the student and the program. In correlation with didactic instruction of required Anatomy and Positioning units, the student attends clinical laboratory instruction. During lab periods, the Clinical Preceptor will demonstrate each projection and provide time for simulated practice of demonstrated skills. Following successful didactic testing, the student is allowed sufficient time to practice positioning skills in simulated clinical lab settings, prior to beginning the process of student clinical learning outcomes assessment.

CLINICAL LAB TESTING

The first step in student clinical assessment is clinical lab testing, which is accomplished in a simulated laboratory setting by the Clinical Preceptor. Students are tested on their cognitive, critical thinking and psychomotor clinical skills by simulating the performance of radiographic examinations. No actual exposures are made.
Achieving an 80% or better on the clinical lab test is required before students are allowed to perform the radiographic examination on patients. If a student fails a simulated clinical test, the student is given remedial clinical instruction, time for practice and then retested. Upon successful completion of clinical lab testing, the student will advance to observing, assisting and performing the examinations under direct supervision. (See *Clinical Lab Testing* for evaluation criteria)

COMPETENCY EVALUATIONS

Following Clinical Lab Testing, the student is given sufficient time to assist and perform an exam under direct supervision. When a student feels confident to perform an exam for competency, the supervisingtechnologist must be notified prior to the start of the exam. The student must be able to complete the exam with minimal help from the supervising technologist. It is up to the judgement/discretion of the supervising technologist whether to allow the student to perform an exam for competency for reasons such as, but not limited to, patient condition or time constraints. Competency Evaluations are designed to grade the cognitive, psychomotor and affective domains.
Competency evaluation is comprised of two components:
1) Technologist component (see *Competency Evaluation* – Tech for evaluation criteria)
2) Clinical Preceptor component (see *Competency Evaluation* – CP for evaluation criteria)
The student's clinical abilities, critical thinking skills and the resulting images are evaluated in Trajecsys by the supervising registered technologist. The student is required to meet with the Clinical Preceptor following each competency exam for image analysis as well as review positioning and anatomy. Students must come prepared to discuss the analysis criteria. Students must achieve 80% or better to pass the Competency Evaluation. Since failure is part of any learning process, all failures are dealt with as a learning tool. Unsuccessful competency evaluation for a particular radiographic examination results in remedial clinical instruction.
Students must maintain an 80% or better cumulative average on their competency evaluations.

PROFICIENCY RECHECKS

Proficiency rechecks are assigned by the Clinical Preceptor after competency has been achieved and student has had the opportunity to perform the exam under indirect supervision to prove continued competency. The areas to be rechecked are selected by the Clinical Preceptor.
Proficiency is a requirement which must be met prior to final testing and before graduation.
Proficiency rechecks will be evaluated using the same evaluation criteria as competency evaluations. Students must achieve 80% or better to pass a proficiency recheck. (see *Competency Evaluation – Tech and Competency Evaluation* - CP for evaluation criteria)

FINAL COMPETENCY TESTING

During the last two semesters, the student is required to perform final competency testing to prove entry level competency, problem solving ability, and critical thinking skills. These areas are selected by the Clinical Preceptor. Final testing is mastery level and is a requirement that must be met for graduation.
Students must achieve 80% or better to pass final testing. (see *Final Competency Testing* for evaluation criteria)

CLINICAL LAB TESTING REQUIREMENTS

RESPIRATORY-THORAX
Chest
PA
Left Lateral
Decubitus
Wheelchair / Stretcher
AP & Lateral
Portable
40" and 72"
Ribs
PA Chest
Above Diaphragm-Uprt
AP
RPO & LPO
PA
RAO & LAO
Below Diaphragm
AP recumbent
RPO & LPO
Sternum
RAO
Lateral
SC Joints
PA
RAO & LAO
Soft Tissue Neck
AP
Lateral
UPPER EXTREMITY
First Digit
PA
AP
Oblique
Lateral
Second Digit
PA
Oblique
Lateral
Hand
PA
Oblique
Lateral (fan, extension, and flexion)
Wrist
PA
Oblique
Lateral
Scaphoid-PA
Scaphoid- Stecher

Forearm
AP
Lateral
Elbow
AP
Lateral
Medial Oblique
Lateral Oblique
Axio-lateral-Coyle
Humerus
AP
Lateral
Shoulder
AP-Internal
AP-External
Axillary
Y-view
Y-View-Neer Method
Transthoracic
Glenoid Fossa-Grashey
Clavicle
AP
AP Axial
PA Axial
Scapula
AP
Lateral
A/C Joints
AP w/o weights
AP w/ weights
LOWER EXTREMITY
Toes
AP
Oblique
Lateral
Foot
AP
Medial Oblique
Lateral
Calcaneus
Axial
Lateral
Ankle
AP
Mortise
Medial Oblique
Lateral

Low Leg
AP
Lateral
Knee
AP
Lateral
Camp-Coventry
Beclere
Settegast
Femur
AP
Lateral
Hip
AP
Lateral w/ horizontal CR
Frog-lateral
Pelvis
AP
Inlet
Outlet
Judet
RPO
LPO
DIGESTIVE SYSTEM
UGI
PA
RAO
LPO
Right Lateral
Contrast Enema
AP Axial
AP
RPO/LAO
LPO/RAO
Left Lateral
Left Lateral Decubitus
Right Lateral Decubitus
PA
PA Axial
Esophgram
AP
LAO
RAO
Right Lateral
Small Bowel
AP Scout
PA 0-minute
PA 30-minute

CLINICAL LAB TESTING REQUIREMENTS (continued)

Abdomen	**SKULL-FACIAL BONES**	**URINARY**
AP Recumbent	**Skull**	**IVU**
AP Upright	PA	KUB
Lt Lateral Decub	PA Axial-Caldwell	Kidney cone down
Bladder	AP-Axial Towne	RPO-KUB
VERTEBRAL COLUMN	Right Lateral	LPO KUB
Cervical Spine	Left Lateral	**Cystogram - test**
AP Axial	SMV	AP axial-15 degree
Odontoid	**Facial Bones**	RPO-60 degree
Lateral-neutral	PA Axial-Caldwell	LPO- 60 degree
Lateral-flexion	Parietoacanthial	Lateral
Lateral-extension	Parietoacanthial-modified	
LPO/RAO	Right Lateral	
RPO/LAO	Left Lateral	
Swimmers	**Nasal Bones**	
Trauma C-Spine	Parietoacanthial	
AP-Axial recumbent	Right Lateral	
Fuchs	Left Lateral	
Lateral w/ horizontal CR	**Sinuses**	
Swimmers	PA Axial-Caldwell	
Thoracic Spine	Parietoacanthial	
AP	Parietoacanthial-modified	
Lateral	Lateral	
Swimmers	**Mandible**	
Lumbar Spine	PA	
AP	PA Axial-Haas	
RPO	Axiolateral-Right	
LPO	Axiolateral-Left	
Lateral	**Orbits**	
Lat L5-S1 Conedown	Parietoacanthial-modified 50	
Sacrum	degree	
AP Axial	PA Axial 30 degree	
Lateral	Lateral	
Coccyx	**TMJ's**	
AP Axial	AP Axial	
Lateral	Axiolateral-Schuller	
Sacroiliac Joint	Axiolateral modified Law	
AP Axial	**Trauma Views**	
RPO/LPO	AP	
RAO/LAO	AP Axial - Reverse Caldwell	
	AP Axial Towne	
	Lateral-Cross-table	
	Acanthioparietal	
	Acanthioparietal-modified	

Clinical Lab Testing Evaluation

PATIENT CARE

- Assist patient to table, chest stand, etc.
- Explain the procedure
- Give proper instructions for moving and breathing

EQUIPMENT UTILIZATION

- Manipulate the tube / bucky adequately
- Manipulate control counsel
- Proper SID employed

POSITION OF PATIENT / PART

- Correct patient position
- Correct part position
- Patient obliqued correctly (if applicable)

CENTRAL RAY

- CR centered correctly
- Correct CR angulation

RADIATION PROTECTION

- Cone or collimate to part
- Shield patient when appropriate
- Select proper exposure factors

WORK EFFICIENCY

- Organized progression of projections
- 5 minutes allowed / projection
- All appropriate supplies for exams obtained

IMAGE RECEPTOR

- Correct placement
- Use of grid / bucky (if applicable)

IDENTIFICATION

- Annotation / markers properly placed
- Annotation / markers not obscuring anatomy

GRADING SCALE FOR THIS SECTION

0 = Fails to meet minimum expectations
2 = Needs Improvement
3 = Meets expectations; minor help needed
4 = Meets expectations; no help needed
N/A = Not Applicable to this exam

Clinical Requirements

	ARRT Status	Date
Respiratory		
Chest Routine (2V)	M	
Chest Portable	M	
Chest WC or Stretcher 2V	M	
Optional		
Chest Lateral Decubitus	E	
Upper Extremity		
Clavicle	M	
Elbow	M	
Forearm	M	
Hand	M	
Humerus	M	
Portable - Any UE	M	
Shoulder	M	
Thumb or Finger	M	
Trauma Shoulder/Humerus (Scapular Y or Transthoracic) * & ***	M	
Trauma Upper (Non-Shoulder) * & **	M	
Wrist	M	
ARRT Electives (Choose 1)		
AC Joints	E	
Scapula	E	
Lower Extremity		
Ankle	M	
Femur	M	
Foot (recumbent)	M	
Foot (wt bearing)		
Hip- AP	M	
Hip - Cross-Table Lateral ***	M	
Knee (4V recumbent)	M	
Knee (Upright)		
Pelvis	M	
Portable - Any LE	M	
Tib/Fib	M	
Trauma Lower Extremity * & **	M	
ARRT Electives (Choose 2)		
Calcaneous	E	
Patella	E	
Toes	E	
Vertebral		
Cervical Spine	M	
Lateral Spine - Cross-Table Lateral ***	M	
Lumbar Spine	M	
Thoracic	M	
ARRT Electives (Choose 2)		
Sacrum and/or Coccyx	E	
Scoliosis Series	E	
Sacroiliac Joints	E	
Head		
ARRT Electives (Choose 3)		
Faical Bones	E	
Mandible	E	
Nasal Bones	E	
Orbits	E	
Sinuses	E	
Skull	E	
TMJ	E	

	ARRT Status	Date
Bony Thorax		
Ribs	M	
Optional		
SC Joints	E	
Sternum	E	
Upper Airway (Soft Tissue Neck)	E	
Abdomen		
Abdomen Portable	M	
Abdomen Supine	M	
Abdomen Upright	M	
Abdomen Decubitus	E	
Optional		
IVU	E	
Fluoroscopy		
Esophagram	E	
Modified Esophagram		
Small Bowel Series	E	
UGI	E	
ARRT Electives (Choose 3 of the following)		
Arthrogram (combo of arthro & inj)	E	
Contrast Enema	E	
Cystography (Cystogram) or Cystourethrograpphy (VCUG)	E	
ERCP	E	
Hysterosalpingogram	E	
Myelogram	E	
C-arm Studies		
C-arm (2+ Projections)	M	
C-arm (Cysto)		
C-arm (Sterile Field)	M	
C-arm (SR - Pain Injection)		
**Pediatric (6 or Younger) ** **		
Abdomen	E	
Chest Routine (2V)	M	
Lower Extremity	E	
NICU Chest		
Mobile (Portable)	E	
Upper Extremity	E	
Geriatric (65 and Phys/Cogn Impaired)		
Chest Routine (2V)	M	
Hip or Spine	E	
Lower Extremity	M	
Upper Extremity	M	
General Patient Care Procedure		
CPR/BLS Certified	M	
Vital Signs- Blood Pressure	M	
Vitals Signs - Temperature	M	
Vital Signs - Pulse	M	
Vital Signs - Respiration	M	
Vital Signs - Pulse Oximetry	M	
Sterile and Medical Aseptic Technique	M	
Venipuncture	M	
Assisted Patient Transfer	M	
Care of Patient Medical Equipment	M	

* **Trauma** requires modifications in positioning due to injury with monitoring of the patient's condition.

** **Trauma & Pediatric** can be assisted/performed under direct supervison, but not Comp'd until 3rd Semester

*** Cross-Table (Horizontal Beam) Lateral (Patient Recumbent)

M = Mandatory ARRT

E = Elective ARRT Procedure

Competency Evaluation - Technologist Component

COMMUNICATION

- Identified patient using two identifiers
- Identified self and staff to patient/family
- Verified correct exam with patient/family
- Able to explain and answer questions in an age and developmentally appropriate manner
- Communicated relevant information to others (e.g. MD's, RN's, other Technologists)
- Communicated any exam delays to waiting patient/family/caregiver

0 - Struggles to communicate in all areas
2 - Needs prompting and assistance in all areas
3 - Needed only minor prompting and assistance in some areas
4 - Was able to communicate well on all levels with no assistance
N/A

CRITICAL THINKING

- Correctly positioned patient to demonstrate desired anatomy using anatomical markers
- Selected appropriate geometric factors (e.g. SID, OID, FS, tube angle)
- Able to adapt and adjust according to patient condition and location
- Able to modify exposure factors for varying patient conditions or outside factors
- Followed protocols for patients with communicable diseases and for handling and disposing of bio-hazard materials
- Able to recognize and communicate the need for prompt medical attention when needed

0 - Did not know how to do exam or how to follow protocols
2 - Struggled with adapting and making changes to do exam; did not have a clear idea of how to follow protocols
3 - Needed minor prompting on how to do exam, follow protocols and how to adapt to changing conditions
4 - Able to adapt to changing conditions; follow protocols and to choose equipment needed based on patient condition
N/A

EQUIPMENT

- Selected equipment and accessories (e.g. grid, filters, shields) for exam
- Stored and handled IR's to minimize damage
- Demonstrated ability to move overhead tube and bucky with ease
- Able to use Portable equipment correctly
- Able to set-up rooms correctly in preparation for exams

0 - No preparation done prior to exam and used equipment incorrectly
2 - Some preparation incomplete at start of exam; needed assistance with equipment
3 - Some preparation incomplete at start of exam; able to handle equipment safely
4 - Selected all necessary equipment prior to start of exam and handled equipment in a safe manner
N/A

RADIATION PROTECTION

- Screened for pregnancy and used shielding when exam allowed
- Restricted beam to the anatomical area of interest
- Set technical factors to produce diagnostic images, reduce repeats and adhere to ALARA
- Restricted unnecessary personal from being in area at time of exposure
- Provided shielding for those who needed to be in area

0 - No screening or shielding; ALARA not followed
2 - Needed reminding to screen and shield; collimation inadequate and images repeated
3 - Screening and shielding done; collimation inadequate and 1-2 repeats needed
4 - Screening and shielding done; ALARA followed; collimation used; no repeats
N/A

Competency Evaluation - Technologist Component **(continued)**

IMAGE ANALYSIS

- Evaluated image for diagnostic quality and able to make corrections as needed, to include positioning and adjusting technique
- Able to identify image artifacts and make appropriate corrections
- Annotation and markers correctly placed
- Images sent to PACS in correct orientation for viewing

0 - Unable to identify artifacts or make corrections; sent to PACS incorrectly
2 - Help needed to make corrections and to identify artifacts; sent to PACS with help
3 - Able to adjust technique and positioning errors on repeats; sent to PACS correctly
4 - Images of diagnostic quality, no changes needed; sent to PACS correctly
N/A

POST PROCEDURE

- Gave post procedure instructions following RELATE principal
- Cleaned and disinfected room/equipment in prep for next exam
- Completed all electronic documentation

0 - Room not cleaned and documentation not done
2 - Needed reminding to clean room; help needed with documentation
3 - Room cleaned and some help needed with documentation
4 - Room cleaned and all documentation done correctly
N/A

Competency Evaluation - Clinical Preceptor Component

POST PROCEDURE ELECTRONIC DOCUMENTATION

- Room, equipment, technique used, and personnel (including Physician assignment) correctly documented.
- Correct exam and supplies charged and exam documentation done in Power Chart as needed.

IMAGE EVALUATION

- Image(s) correctly displayed on viewing monitor
- Markers/Annotation used correctly
- Accurate positioning showing desired anatomy and exam protocols followed.
- No artifacts/radiopaque materials or annotation in or near ROI
- Evidence of radiation protection (e.g. collimation, shielding)
- Images of diagnostic quality (e.g. exposure index)

STUDENT IMAGE ANALYSIS (VERBAL)

- Positioning Review
- Identify Anatomy

GRADING SCALE FOR THIS SECTION

0 = Fails to meet minimum expectations
2 = Needs Improvement
3 = Meets expectations; minor help needed
4 = Meets expectations; no help needed
N/A = Not Applicable to this exam

Final Competency Testing Evaluation

PERFORMANCE EVALUATION:

Evaluation of Requisition

- Identified procedure(s) to be performed.
- Identified the patient's name and age.
- Identified patient location and mode of transportation.
- Acknowledged any pathological conditions.
- Acquired appropriate clinical patient history.

Physical Facilities Readiness

- Verified that equipment is operational.
- Provided a clean and orderly work area.
- Obtained appropriate supplies for examination.

Patient Care

- Verified the correct patient using two patient identifiers.
- Introduced himself/herself and technologist to patient and briefly explained the procedure.
- Requested last menstrual period (LMP) date for female patients within childbearing years.
- Transported patient to appropriate imaging area.
- Verified if patient is properly prepared for the examination.
- Identified, when appropriate, that there are no contraindications for performing exam.
- Provided safe storage for patient's belongings.
- Provided appropriate assistance to radiographic table based on patient's condition.
- Maintained patient dignity and modesty using proper gowning and covering for the patient.
- Talked to patient in a concerned, professional manner.
- Applied standard precautions as established by the Centers for Disease Control.
- Provided proper instructions for moving and breathing.
- Checked patient's condition at regular intervals.
- Provided a safe and secure environment for the patient.

Equipment Operation

- Maneuvered the x-ray tube and bucky utilizing appropriate controls and locks.
- Selected the proper IP/IR.
- Used grids appropriately
- Selected the appropriate SID.
- Manipulated image receptor, as appropriate, for accurate imaging.
- Measured the patient.
- Used immobilization devices, as needed.
- Referred to technique chart.
- Selected exposure factors.
- Did not exceed recommended safety guidelines for equipment.

Positioning skills

- Positioned the patient.
- Aligned the region of interest to the center of the IR.
- Set the correct tube angle.
- Set the correct SID.

Provide Evidence of Radiation Protection

- Collimated to part.
- Used gonadal shields, if appropriate.
- Demonstrated use of lead apron, gloves and lead blockers, if appropriate.
- Selected proper exposure factors.
- Adjusted exposure factors for motion, pathology or patient size when appropriate.

Final Competency Testing Evaluation (continued)

IMAGE EVALUATION:

Anatomical Part(s)

- Part shown in proper position.
- Adequate detail (no motion visible).
- Identified anatomical structures.

Proper Alignment

- IR centered.
- Part centered.
- Tube centered.
- Patient aligned correctly.

Radiographic Techniques

- Technical factors chosen achieve optimal image quality.
- Compensation of exposure factors for pathology.
- Technique chosen reflects if a screen or grid is used, SID and OID.

Image Identification

- Right and left markers properly displayed. Annotations allowed only when markers are not able to be used.
- Accessory marker/annotation visible, if required (minute, hour, directional).
- Patient information and date identified.
- Image displayed correctly on monitor.

Radiation Protection

- Evidence of collimation.
- Gonadal shields in place, if required.
- No repeats.

GRADING SCALE FOR THIS SECTION

0 = Fails to meet minimum expectations
2 = Needs Improvement
3 = Meets expectations; minor help needed
4 = Meets expectations; no help needed

Student Supervision Policy

In support of professional responsibility, the provision of quality patient care and radiation protection, the following rules are established for the supervision of Trinity Health radiography students. This policy is based on the 2021 JRCERT Standards objective 4.4, which mandates that the number of students assigned to a clinical setting must not exceed the number of radiographers assigned to the same setting; i.e., a 1:1 student to technologist ratio must always be maintained.

The following policies are in place to ensure the 1:1 ratio is maintained.

1. Program officials determine the students' clinical assignments by utilizing the number of technologists available per shift at approved clinical sites and ensure that a 1:1 ratio is maintained. (See Clinical Site Rooms and Number of Techs that follows.)
2. Program officials will check in daily at each clinical site to ensure the ratio of 1:1 will be maintained, and if necessary will reassign a student to another clinical area where the ratio will be 1:1 (for example, in the event of a sick or absent technologist).
3. In the unusual event that the technologist to student ratio at a clinical site exceeds 1:1 (for example, a student is assigned to a site when a technologist is absent/ill) andProgram Officials have not yet checked in with that site, the student and lead technologist(s) have a duty to inform program official that a reassignment must be made to maintain the 1:1 ratio.
4. New radiography students are informed of this policy the first day of class, and it is enforced that they are also responsible for ensuring a 1:1 tech to student ratio is maintained by reporting any issue with the same to program officials immediately.
5. Program officials ensure that this policy is presented to all new technologists and that their understanding is documented; further the policy is reviewed annually with all diagnostic technologists as a mandatory Trinity Health module.

GENERAL GUIDELINES FOR SUPERVISION OF RADIOGRAPHY STUDENTS:

1. Students shall not take the responsibility or the place of paid, qualified staff.
2. Supervision of students must be provided by a registered radiologic technologist.
3. A registered technologist must always be immediately available to assist a student *regardless* of their level of competency or length in the program.
4. Any repeat images performed by a student shall be done only in the presence of a registered technologist ***(direct supervision)***, regardless of a student's level of achievement.
5. Students will be supervised according to their level of competency.
6. Lists of student completion of competency evaluations will be available and regularly updated to assist technologists and students in determining the proper level of supervision required.

The following guidelines have been established for determining the required supervision level under the 2021 JRCERT Standards objective 5.4, which defines direct and indirect supervision.

DIRECT SUPERVISION

Students who have not completed the required number of competency evaluations for a particular exam shall carry out the examination/assignment under the direct supervision of a registered technologist.

JRCERT's definition of ***direct supervision*** of a radiography student is:

A qualified radiographer

- will review the procedure in relation to the student's achievement;
- evaluate the condition of the patient in relation to the student's knowledge;
- will be physically present during the conduct of the procedure, including for **ALL MOBILE and SURGICAL** procedures for the entire length that a student is in the program;
- will review and approve the procedure(s) and/or image(s).

INDIRECT SUPERVISION

Students who have successfully completed the required number of competency evaluations for a particular exam/assignment are allowed to perform under ***indirect supervision*** of a registered technologist.

JRCERT's definition of ***indirect supervision*** of a radiography student:
A qualified radiographer is immediately available to assist the patient and/or student, regardless of the level of competency, which means the radiographer will be adjacent to the room or location of the radiographic procedure where ionizing radiation is used on patients at all hospital and clinical sites.

Clinical Site Details

Locations & Rooms	Details / Equipment	Day Shift	Evening Shift	Weekend & Evening
Trinity Hospital (2305 37th Ave SW)		5 Technologists	3 Technologists	2 Techs per shift
RF1	GE Discovery RF180			
RF2	GE Discovery RF180			
Gen Rad 3	GE 656			
Trauma Rm 4	GE 646			
Portable	2 - Carestream DRX-Revolution			
	AMX-4 / KM DR			
Surgery	2 - OEC 9800			
	2 - OEC 9900 Elite			
	OEC Mini C-arm			
	O-Arm			
ON	Weekend			7am - 3pm
PM			12pm - 8pm	
Night	Optional in 5th Semester			
Choice	Student choice with approval by Program Officials			
RAD	Follow/Observe Radiologist			
Advanced Modalities:				
CT-H				
MRI-H				
NM	Nuclear Medicine			
US	Ultrasound			
CL	Cath Lab			
IR	Intervential Radiology			
Trinity Health Medical Office Building (2305 37th Ave SW)		3 Technologists		
MOB1	GE 656			
MOB2	GE 646			
MOB3	GE 646			
Advanced Modality:				
US-MOB				
Trinity Health Medical Arts (400 Burdick Expy E)		1 Technologist	1 Technologist	
A Room	GE 646			
B Room	GE 646			
Late MAC			10am - 6pm	
Advanced Modalities:				
US-MA	Ultrasound			
Mammo	Mammography			
DEXA				
Trinity Health South Ridge (1500 24th Ave SW)		2 Technologists		
SR - Gen Rad	Phillips / KM DR			
Pain Center	2 - OEC 9800			
Trinity Health Town & Country (831 S Broadway)		1 Technologist		
AIC - Gen Rad	Phillips / KM DR			
Advanced Modalities:				
Radiation Therapy	Cancer Care Center			
CT-AIC				
MRI-AIC				
PET				
US-AIC	Ultrasound			

Clinical Processes

Trajecsys Report System:
Each student, when they enter the program, is enrolled in the Trajecsys Report System. An orientation is given to the student on Trajecsys by the Clinical Preceptor when the Clinical Plan is reviewed during the student's first month of class. The student only has access to the tracking system during their time enrolled in the program.

The Trajecsys Report System is used to:

1. Monitor the students in/out punches to clinical sites to validate hours spent in clinical areas.
2. Request PTO.
3. Provide a Log of exams observed/assisted/performed.
4. Provide a Skill Summary of exams done for competency and proficiency.
5. Provide the student access to clinical assessments and evaluations.
6. Provide a weekly clinical schedule.
7. Provide access to clinical documents.

Time Keeping:

1. Students are required to clock in and out of Trajecsys using a Trinity Health computer to validate hours spent in the clinical areas. *Reminder that during clinical time, "on time" means in the assigned clinical area ready to participate.*
2. Students must select the correct clinical site when clocking in. If the student clocks in to the wrong clinical site, the student must notify Clinical Preceptor so that it can be corrected.
3. In the rare event that a computer is not available, the student will be allowed to clock in/out using their cell phone. When using a cell phone to clock in/out, the GPS function must be enabled. Using a cell phone instead of a Trinity Health computer to clock in should not become habitual or the Discipline and Dismissal Policy will be followed.
4. If the student forgets to clock in/out, the student must use a Time Exemption. If this becomes habitual, the Discipline and Dismissal Policy will be followed.
5. If a student comes in late or leaves early because they are using PTO, the student must enter a Time Exemption stating the reason why, and how many hours PTO are being used.

Exam Log Book:
At the start of each semester, each student will be given an Exam Log Book. This book is used to keep track of all exams assisted and performed, exposures taken, as well as any repeats.

The Exam Log Book must be completed and turned in to the Clinical Preceptor at the end of each semester.

****Failure to complete or turn in the Exam Log Book as indicated may result in reduction of your clinical grade.*
****All exams performed to achieve competency must also be entered into the students Trajecsys Log.*

Semester Objective Assignment Book:
At the start of each semester, each student will receive a Semester Objective Assignment Book. The Semester Objective Assignment Book contains the check-offs each student must complete as well as other assignments pertinent to that semester's clinical rotations. Each week the student will work on completing these assignments.

The Semester Objective Book must be completed and turned in to the Clinical Preceptor at the end of each semester.

*** *Failure to complete or turn in your Semester Objective Book as indicated may result in reduction of your clinical grade.*
***The student is responsible for verification of their own Trajecsys Log/Skill Summary as well as their Competency Record as posted by the Clinical Preceptor.

COMPETENCY EVALUATIONS:

1. All exams assisted and performed to achieve competency must be entered in both the Student's Exam Log Book and Trajecsys Log. All subsequent exams performed after competency has been achieved only need to be logged in the student's Exam Log book.
2. For all exams done to achieve competency the student must complete the Student Competency Evaluation in Trajecsys. A competency evaluation slip must also be filled out and given to the supervising technologist to complete in Trajecsys.
3. The supervising technologist is responsible for reviewing the images and completing the competency evaluation in a timely manner. When the student is at a clinic site, it is the student's responsibility to make sure that the technologist has finished their competency evaluation before turning in the evaluation slip to the Clinical Preceptor.
4. Evaluation slips must be turned in on a weekly basis to the Clinical Preceptor to complete the image analysis portion and review positioning & anatomy.
5. All evaluation slips must be accounted for and turned in prior to the end of each semester.

****Failure to turn in evaluation slips as indicated may result in reduction of your clinical grade.*

STUDENT CONFERENCES

Conferences relating to clinical performance will be held on an as need basis between the student and Program Officials. The student is encouraged to discuss questions and concerns at any time or arrange a conference for further discussion. The objective is to provide timely feedback on clinical performance and progression, as well as discuss any issues or concerns that may arise.

Clinical Expectations:

- The importance of well utilized clinical time cannot be stressed enough. It is expected that any downtime in the clinical areas will be used for discussing procedures or analyzing images with a technologist, becoming familiar with equipment, or practicing simulated procedures.
- Study material and homework in the clinical areas should be limited to technologist discrepancy. Students are expected to actively participate in exams, assist with cleaning rooms, restocking supplies, and other departmental duties.
- Take advantage of opportunities to learn. Do not be afraid to attempt exams. It is not the technologist's position to convince students to perform exams but supervise and assist as needed. Technologists recognize that students are learning and do not expect perfection but a willingness to attempt and learn.

Standards for an Accredited Educational Program in Radiography

EFFECTIVE JANUARY 1, 2014

Adopted by:

The Joint Review Committee on Education in Radiologic Technology - October 2013

Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312.704.5300 ● (Fax) 312.704.5304
www.jrcert.org

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

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

Introductory Statement

The Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiography** are designed to promote academic excellence, patient safety, and quality healthcare. The **STANDARDS** require a program to articulate its purposes; to demonstrate that it has adequate human, physical, and financial resources effectively organized for the accomplishment of its purposes; to document its effectiveness in accomplishing these purposes; and to provide assurance that it can continue to meet accreditation standards.

The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process helps to maintain program quality and stimulates program improvement through program assessment.

There are six (6) standards. Each standard is titled and includes a narrative statement supported by specific objectives. Each objective, in turn, includes the following clarifying elements:

- **Explanation** - provides clarification on the intent and key details of the objective.

- **Required Program Response** - requires the program to provide a brief narrative and/or documentation that demonstrates compliance with the objective.

- **Possible Site Visitor Evaluation Methods** - identifies additional materials that may be examined and personnel who may be interviewed by the site visitors at the time of the on-site evaluation to help determine if the program has met the particular objective. Review of additional materials and/or interviews with listed personnel is at the discretion of the site visit team.

Following each standard, the program must provide a **Summary** that includes the following:

- Major strengths related to the standard
- Major concerns related to the standard
- The program's plan for addressing each concern identified
- Describe any progress already achieved in addressing each concern
- Describe any constraints in implementing improvements

The submitted narrative response and/or documentation, together with the results of the on-site evaluation conducted by the site visit team, will be used by the JRCERT Board of Directors in determining the program's compliance with the STANDARDS.

Standards for an Accredited Educational Program in Radiography

Table of Contents

Standard One
Integrity

Standard One: **The program demonstrates integrity in the following:**

- **Representations to communities of interest and the public,**
- **Pursuit of fair and equitable academic practices, and**
- **Treatment of, and respect for, students, faculty, and staff**.

Objectives:

In support of **Standard One**, the program:

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

1.2 Provides equitable learning opportunities for all students.

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

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

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

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

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

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

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

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

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

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

1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.

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

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

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

Explanation:
High ethical standards help assure that the rights of students, faculty, and staff are protected. Policies and procedures must be fair, equitably applied, and promote professionalism.

Required Program Response:
- Describe the procedure for making related policies and procedures known.
- Provide copies of policies and procedures that assure equitable treatment of students, faculty, and staff.

Possible Site Visitor Evaluation Methods:
- Review of student handbook
- Review of employee/faculty handbook
- Review of course catalog
- Review of student records
- Interviews with faculty
- Interviews with students
- Interviews with staff

1.2 Provides equitable learning opportunities for all students.

Explanation:
The provision of equitable learning activities promotes a fair and impartial education and reduces institutional and/or program liability. The program must provide equitable learning opportunities for all students regarding learning activities and clinical assignments. For example, if an opportunity exists for students to observe or perform breast imaging, then all students must be provided the same opportunity. If evening and/or weekend rotations are utilized, this opportunity must be equitably provided for all students.

Required Program Response:
Describe how the program assures equitable learning opportunities for all students.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of master plan of education
- Review of course objectives
- Review of student clinical assignment schedules
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Programs must have a process in place to provide timely, appropriate, and educationally valid clinical experiences to all students admitted to the program. Students must have sufficient access to clinical settings that provide a wide range of procedures for competency achievement including mobile, surgical, and trauma examinations. Clinical settings may include hospitals, clinics, specialty/imaging centers, orthopedic centers, and other facilities. With the exception of observation site assignments, students must be provided the opportunity to complete required program competencies during clinical assignments. Clinical placement must be non-discriminatory in nature and solely determined by the program.

A meaningful clinical education plan assures that activities are educationally valid and prevents the use of students as replacements for employees. The maximum number of students assigned to a clinical setting must be supported by sufficient human and physical resources. The number of students assigned to the clinical setting must not exceed the number of clinical staff assigned to the radiography department. The student to radiography clinical staff ratio must be 1:1. However, it is acceptable that more than one student may be temporarily assigned to one technologist during uncommonly performed procedures.

Students assigned to advanced imaging modalities, such as computed tomography, magnetic resonance, angiography, and sonography, are not included in the calculation of the authorized clinical capacity (unless the clinical setting is recognized exclusively for advanced imaging modality rotations). Once the students have completed the advanced imaging assignments, the program must assure that there are sufficient clinical staff to support the students upon reassignment to the radiography department.

The utilization of clinical assignments such as file room, reception area, and patient transportation should be limited.

Additionally, traditional programs that require students to participate in clinical education during evenings and/or weekends must assure that:

- students' clinical clock hours spent in evening and/or weekend assignments must not exceed 25% of the total clinical clock hours.
- program total capacity is not increased through the use of evening and/or weekend assignments.

The JRCERT defines the operational hours of traditional programs as Monday - Friday, 5:00 a.m. - 7:00 p.m.

Programs may permit students to make up clinical time during term or scheduled breaks; however, they may not be assigned to clinical settings on holidays that are observed by the sponsoring institution. Program faculty need not be physically present; however, students must be able to contact program faculty during makeup assignments. Also, the program must assure that its liability insurance covers students during these makeup assignments.

Required Program Response:

- Describe the process for student clinical placement.
- Provide current student assignment schedules in relation to student enrollment.
- Describe how the program assures a 1:1 student to radiography clinical staff ratio at all clinical settings.
- Describe how the program assures that all students have access to a sufficient variety and volume of procedures to achieve program competencies.
- Submit evening and/or weekend rotation(s) calculations, if applicable.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review listing of enrolled students in relation to clinical assignments, including evening and/or weekend, if applicable
- Review of clinical placement process
- Review of student clinical records
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with students

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

Explanation:
This limitation helps assure that students are treated ethically. For the safety of students and patients, not more than ten (10) clinical hours shall be scheduled in any one day. Scheduled didactic and clinical hours combined cannot exceed forty (40) hours per week. Hours exceeding these limitations must be voluntary on the student's part.

Required Program Response:
- Describe the process for assuring that time limitations are not exceeded.
- Provide documentation that required student clinical assignments do not exceed ten (10) hours in any one day and the total didactic and clinical involvement does not exceed forty (40) hours per week.

Possible Site Visitor Evaluation Methods:
- Review of master plan of education
- Review of published program materials
- Review of student schedules
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Appropriately maintaining the security and confidentiality of student records and other program materials protects the student's right to privacy. Student records must be maintained in accordance with the Family Education Rights and Privacy Act (Buckley Amendment). If radiation monitoring reports contain students' dates of birth and/or social security numbers, this information must be maintained in a secure and confidential manner.

Required Program Response:
Describe how the program maintains the security and confidentiality of student records and other program materials.

Possible Site Visitor Evaluation Methods:

- Review of institution's/program's published policies/procedures
- Review of student academic and clinical records
- Tour of program offices
- Tour of clinical setting(s)
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

Explanation:
A grievance is defined as a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. The program must have procedures to provide students an avenue to pursue grievances. The procedure must outline the steps for formal resolution of any grievance. The final step in the process must not include any individual(s) directly associated with the program (e.g., program director, clinical coordinator, clinical instructors, diagnostic imaging department director). The procedure must assure timely resolution. The program must maintain a record of all formal grievances and their resolution. Records must be retained in accordance with the institution's/program's retention policies/procedures. The records must include information on how the grievance was resolved and assurance that there are no trends that could negatively affect the quality of the educational program.

Additionally, the program must have a procedure to address any complaints apart from those that require invoking the grievance procedure. The program must determine if a pattern of complaint exists that could negatively affect the quality of the educational program (e.g., cleanliness of the classroom).

Required Program Response:
Describe the nature of any formal grievance(s) that would jeopardize the program's ability to meet its mission.
Describe the nature of any complaint(s) that would jeopardize the program's ability to meet its mission.
Provide a copy of the grievance procedure.
Provide a copy of any formal grievance(s) resolution.

Possible Site Visitor Evaluation Methods:
- Review of institutional catalog
- Review of student handbook
- Review of formal grievance(s) record(s), if applicable
- Review of complaint(s) record(s), if applicable
- Interviews with faculty
- Interviews with students

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

Explanation:
The program must assure students are cognizant of the **STANDARDS** and must provide contact information for the JRCERT.

Students have the right to submit allegations against a JRCERT-accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

Contact of the JRCERT should not be a step in the formal institutional/program grievance procedure. The individual must first attempt to resolve the complaint directly with institution/program officials by following the grievance procedures provided by the institution/program. If the individual is unable to resolve the complaint with institution/program officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance directly to the JRCERT.

Required Program Response:
- Describe the procedure for making students aware of the **STANDARDS**.
- Describe how students are provided contact information for the JRCERT.

Possible Site Visitor Evaluation Methods:
- Review of program publications
- Interviews with faculty
- Interviews with students

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

Explanation:
Maintaining published information regarding the program's current policies, procedures, and offerings provides interested parties with an accurate overview of program requirements and expectations.

Required Program Response:
Provide program publications that reflect program policies, procedures and offerings.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student handbook
- Interviews with faculty
- Interviews with students

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

Explanation:
The institutional and/or program policies must be published and made readily available to students, faculty, and the general public on the institution's/program's Web site to assure transparency and accountability of the educational program. For example, requiring the general public to contact the institution/program to request program information is not adequate. Policy changes must be made known to students, faculty, and the general public in timely fashion. It is recommended that revision dates be identified on program publications.

The institution and/or program must establish and publicly disclose the criteria used when determining the transfer of credit earned from other institutions and/or programs. Also, programs must publicly disclose a list of institutions with which the program has established an articulation agreement.

The program's academic calendar must be published and, at a minimum, identify specific start and end dates for each term, holidays recognized by the sponsoring institution, and breaks.

Student clinical obligations (e.g., drug screening, background checks, and associated fees) must be clearly identified in appropriate program publications. Additionally, if evening and/or weekend clinical assignments are required or if students must travel to geographically-dispersed clinical settings, this information must also be included.

Required Program Response:
- Describe how institutional and/or program policies are made known to students, faculty, and the general public.
- Provide publications that include these policies.

Possible Site Visitor Evaluation Methods:
- Review of institutional materials
- Review of published program materials
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with Registrar
- Interviews with students

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

Explanation:
Program accountability is enhanced by making its mission statement, goals, and student learning outcomes available to the program's communities of interest on the institution's/program's Web site to assure transparency and of the educational program. Requiring the general public to contact the institution/program to request program information is not adequate.

Example:

Mission:
The mission of the radiography program is to prepare competent, entry-level radiographers able to function within the healthcare community.

Goal: Students will be clinically competent.
Student Learning Outcomes: Students will apply positioning skills.
Students will select technical factors.
Students will utilize radiation protection.

Goal: Students will demonstrate communication skills.
Student Learning Outcomes: Students will demonstrate written communication skills.
Students will demonstrate oral communication skills.

Goal: Students will develop critical thinking skills.
Student Learning Outcomes: Students will adapt standard procedures for non-routine patients.
Students will critique images to determine diagnostic quality.

Goal: Students will model professionalism.
Student Learning Outcomes: Students will demonstrate work ethics.
Students will summarize the value of life-long learning.

Required Program Response:
- Describe how the program makes its mission statement, goals, and student learning outcomes available to students, faculty, administrators, and the general public.
- Provide copies of publications that contain the program's mission statement, goals, and student learning outcomes.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of institutional and/or program Web site
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

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

Explanation:
Communities of interest are defined as institutions, organizations, groups, and/or individuals interested in educational activities in radiography. Obtaining formal feedback on program operations, student progress, employer needs, etc. from communities of interest allows the program to determine if it is meeting expectations and assures continuous program improvement. The program can use a variety of tools to obtain this feedback.

Required Program Response:

- Describe the process of obtaining feedback.
- Provide representative samples of appropriate meeting minutes, evaluations (e.g., course and faculty), and surveys (e.g., graduate and employer).

Possible Site Visitor Evaluation Methods:

- Review of meeting minutes
- Review of evaluations
- Review of surveys
- Interviews with members of various communities of interest

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

Explanation:
Non-discriminatory practices assure applicants have equal opportunity for admission. Statistical information such as race, color, religion, gender, age, disability, national origin, and any other protected class may be collected; however, this information must be voluntarily provided by the student. Use of this information in the student selection process is discriminatory.

Required Program Response:
- Describe how admission practices are non-discriminatory.
- Provide institutional and/or program admission policies.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with students

1.13 Has student recruitment and admission practices that are consistent with published policies of the sponsoring institution and the program.

Explanation:
Defined admission practices facilitate objective student selection. In considering applicants for admission, the program must follow published policies and procedures.

Required Program Response:
- Describe the implementation of institutional and program admission policies.
- Provide institutional and program admission policies.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Interviews with faculty
- Interviews with Admissions personnel
- Interviews with students

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

Explanation:
Recruitment and employment practices that are non-discriminatory assure fairness and integrity. Equal opportunity for employment must be offered to each applicant. Employment practices must be applied equitably to all faculty.

Required Program Response:
- Describe how non-discriminatory employment practices are assured.
- Provide copies of employment policies and procedures that assure non-discriminatory practices.

Possible Site Visitor Evaluation Methods:
- Review of employee/faculty handbook
- Review of employee/faculty application form
- Review of institutional catalog
- Interviews with faculty

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

Explanation:
Programs that offer distance education must have processes in place that assure that the students who register in the distance education courses are the same students that participate in, complete, and receive the credit. Programs must verify the identity of students by using methods such as, but not limited to: secure log-ins, pass codes, and/or proctored exams. These processes must protect the student's privacy. Student costs associated with distance education must be disclosed.

Required Program Response:
- Describe the process for assuring the integrity of distance education courses.
- Provide published program materials that outline procedures for maintaining integrity of distance education courses.
- Provide published program materials that identify associated fees for students enrolled in distance education courses.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review the process of student identification
- Review of student records
- Interviews with faculty
- Interviews with students

Summary for Standard One

1. List the major strengths of **Standard One**, in order of importance.

2. List the major concerns of **Standard One**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Standard Two:
Resources

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

Objectives:

In support of **Standard Two**, the program:

Administrative Structure

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

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

2.3 Provides faculty with opportunities for continued professional development.

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

Learning Resources/Services

2.5 Assures JRCERT recognition of all clinical settings.

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

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

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

Fiscal Support

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

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

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

Explanation:
The program's relative position in the organizational structure helps facilitate appropriate resources and assures focus on the program. To operate effectively, the program must have sufficient institutional administrative support. Both organizational structure and administrative support enable the program to meet its mission and promote student learning.

Required Program Response:

- Describe the program's relationship to the organizational and administrative structures of the sponsoring institution and how this supports the program's mission.
- Provide institutional and program organizational charts.

Possible Site Visitor Evaluation Methods:

- Review of organizational charts of institution and program
- Review of meeting minutes
- Review of published program materials
- Review of master plan of education
- Interviews with faculty and institutional officials
- Interviews with clinical instructor(s)

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

Explanation:
An adequate number of faculty promotes sound educational practices. A full-time program director is required. Faculty teaching loads and release time must be consistent with those of comparable faculty in other health science (allied health) programs in the same institution.

Additionally, a full-time equivalent clinical coordinator is required if the program has more than five (5) active clinical settings or more than thirty (30) students enrolled in the clinical component. The clinical coordinator position may be shared by no more than four (4) appointees. If a clinical coordinator is required, the program director may not be identified as the clinical coordinator. The clinical coordinator may not be identified as the program director.

The program director and clinical coordinator may perform clinical instruction; however, they may not be identified as clinical instructors.

A minimum of one clinical instructor must be designated at each recognized clinical setting. The same clinical instructor may be identified at more than one site as long as a ratio of one full-time equivalent clinical instructor for every ten (10) students is maintained.

Required Program Response:
- Provide, if available, institutional policies in relation to teaching loads and release time.
- Describe faculty teaching loads and release time in relation to a comparable health science (allied health) program within the institution.
- Describe the adequacy of the number of faculty and clinical staff to meet identified accreditation requirements and program needs.

Possible Site Visitor Evaluation Methods:
- Review institutional policies in relation to teaching loads and release time
- Review of master plan of education
- Review of position descriptions
- Review of clinical settings
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

2.3 Provides faculty with opportunities for continued professional development.

Explanation:
Continued professional development results in more knowledgeable, competent, and proficient faculty. Opportunities that enhance and advance educational, technical, and professional knowledge must be available to program faculty.

Required Program Response:
Describe how continued professional development opportunities are made available to faculty.

Possible Site Visitor Evaluation Methods:

- Review of institutional and program policies
- Review of program budget or other fiscal appropriations
- Review of evidence of faculty participation in professional development activities
- Interviews with administrative personnel
- Interviews with faculty

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

Explanation:
Clerical support services necessary to assist in meeting educational, program, and administrative requirements of the program must be provided as appropriate.

Required Program Response:
Describe the availability and use of clerical support services.

Possible Site Visitor Evaluation Methods:

- Review of program's staffing plan
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

2.5 Assures JRCERT recognition of all clinical settings.

Explanation:
JRCERT recognition helps assure an appropriate learning environment for student clinical education. All clinical settings must be recognized by the JRCERT. Recognition of a clinical setting must be obtained prior to student placement. A minimum of one (1) clinical instructor must be identified for each recognized clinical setting.

An observation site is used for student observation of the operation of equipment and/or procedures. If the program uses observation sites, these sites do not require recognition by the JRCERT. These sites provide opportunities for observation of clinical procedures that may not be available at recognized clinical settings. Students may not assist in, or perform, any aspects of patient care during observational assignments.

Facilities where students are participating in service learning projects or community-based learning opportunities do not require recognition.

Required Program Response:
- Assure all clinical settings are recognized by the JRCERT.
- Describe how observation sites, if used, enhance student clinical education.

Possible Site Visitor Evaluation Methods:
- Review of JRCERT database
- Review of clinical records
- Interviews with faculty
- Interviews with clinical instructors
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Learning environments are defined as places, surroundings, or circumstances where knowledge, understanding, or skills are studied or observed such as classrooms and laboratories. Learning environments must be consistent with those of comparable health science programs in the same institution. Provision of appropriate learning environments facilitates achievement of the program's mission. Although a dedicated classroom and/or laboratory are not required, scheduled accessibility to facilities conducive to student learning must be assured. Faculty office space should be conducive to planning and scholarly activities. Space should be made available for private student advisement.

Required Program Response:
Describe how classrooms, laboratories, and administrative and faculty offices facilitate the achievement of the program's mission.

Possible Site Visitor Evaluation Methods:

- Tour of the classroom, laboratories, and administrative and faculty offices
- Interviews with faculty
- Interviews with students

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

Explanation:
The review and maintenance of learning resources promotes student knowledge of current and developing imaging technologies. The program must provide learning resources to support and enhance the educational program. These resources must include:

- a print or electronic library with a variety of materials published within the last five years,
- computer access, and
- additional learning aids (e.g., educational software, classroom/laboratory accessory devices, etc.).

The JRCERT does not endorse any specific learning resources.

Required Program Response:

- Describe the available learning resources.
- Describe the procedure for review and maintenance of learning resources.

Possible Site Visitor Evaluation Methods:

- Tour of learning facilities
- Review of learning resources
- Review of surveys
- Review of meeting minutes
- Interviews with faculty
- Interviews with students

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

Explanation:
The provision of appropriate student services promotes student achievement. At a minimum, the program must provide access to information for:

- personal counseling,
- requesting accommodations for disabilities as defined by applicable federal (Americans with Disabilities Act) and state laws, and
- financial aid.

Additional student services may be provided at the discretion of the program. These services should be sufficient to assure student learning.

All services provided must be made known to students and the general public.

Required Program Response:

- Describe the students' access to student services.
- Provide published program materials that outline accessibility to student services.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Interviews with faculty
- Interviews with students

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

Explanation:
Adequate, ongoing funding is necessary to accomplish the program's mission and to support student learning. The sponsoring institution must demonstrate ongoing financial commitment to the program and its students by providing adequate human and physical resources.

Required Program Response:
- Describe the adequacy of financial resources.
- Provide copies of the program's budget and/or expenditure records.

Possible Site Visitor Evaluation Methods:
- Review of program budget and/or other fiscal appropriations
- Interviews with administrative personnel
- Interviews with faculty

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

Explanation:
A gatekeeper is defined as an agency holding responsibility for oversight of the distribution, record keeping, and repayment of Title IV financial aid. The program must comply with USDE requirements to participate in Title IV financial aid.

If the program has elected to participate in Title IV financial aid and the JRCERT is identified as the gatekeeper, the program must: maintain financial documents including audit and budget processes confirming appropriate allocation and use of financial resources, have a monitoring process for student loan default rates, have an appropriate accounting system providing documentation for management of Title IV financial aid and expenditures, and inform students of responsibility for timely repayment of Title IV financial aid.

Required Program Response:
- Provide evidence that Title IV financial aid is managed and distributed according to the USDE regulations to include:
    - recent student loan default data and
    - results of financial or compliance audits.
- Describe how the program informs students of their responsibility for timely repayment of financial aid.

Possible Site Visitor Evaluation Methods:
- Review of records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

Summary for Standard Two

1. List the major strengths of **Standard Two**, in order of importance.

2. List the major concerns of **Standard Two**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Standard Three
Curriculum and Academic Practices

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

Objectives:

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

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

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

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

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

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

3.6 Maintains a master plan of education.

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

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

3.9 Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.

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

Explanation:
The program's mission statement should be consistent with that of its sponsoring institution. The program's mission statement should clearly define the purpose or intent toward which the program's efforts are directed. Periodic evaluation assures that the program's mission statement is effective.

Required Program Response:
- Provide a copy of the program's mission statement.
- Provide meeting minutes that document periodic reevaluation of the mission statement.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of meeting minutes
- Review of master plan of education
- Interviews with faculty

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

Explanation:
The well-structured curriculum must be comprehensive, appropriately sequenced, include current information, and provide for evaluation of student achievement. A competency-based curriculum allows for effective student learning by providing a knowledge foundation prior to performance of procedures. Continual refinement of the competencies achieved is necessary so that students can demonstrate enhanced performance in a variety of situations and patient conditions. In essence, competency-based education is an ongoing process, not an end product.

Programs must follow a JRCERT-adopted curriculum. An adopted curriculum is defined as:

- the latest American Society of Radiologic Technologists professional curriculum and/or
- another professional curriculum adopted by the JRCERT Board of Directors following review and recommendation by the JRCERT Standards Committee.

Use of a standard curriculum promotes consistency in radiography education and prepares the student to practice in the professional discipline. At a minimum, the curriculum should promote qualities that are necessary for students/graduates to practice competently, make good decisions, assess situations, provide appropriate patient care, communicate effectively, and keep abreast of current advancements within the profession. Expansion of the curricular content beyond the minimum is at the discretion of the program.

The program must submit the latest curriculum analysis grid (available at www.jrcert.org).

Required Program Response:

- Describe how the program's curriculum is structured.
- Describe the program's competency-based system.
- Submit current curriculum analysis grid.
- Describe how the program's curriculum is delivered, including the method of delivery for distance education courses.
- Identify which courses, if any, are offered via distance education.
- Describe alternative learning options, if applicable (e.g., part-time, evening and/or weekend curricular track).

Possible Site Visitor Evaluation Methods:

- Review of master plan of education
- Review of didactic and clinical curriculum sequence
- Review of analysis of graduate and employer surveys
- Interviews with faculty
- Interviews with students
- Observation of a portion of any course offered via distance delivery
- Review of part-time, evening and/or weekend curricular track, if applicable

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

Explanation:
The program must provide learning opportunities in current and developing imaging and/or therapeutic technologies. It is the program's prerogative to decide which technologies should be included in the didactic and/or clinical curriculum. Programs are not required to offer clinical rotations in developing imaging and/or therapeutic technologies; however, these clinical rotations are strongly encouraged to enhance student learning.

Required Program Response:
Describe how the program provides opportunities in developing technologies in the didactic and/or clinical curriculum.

Possible Site Visitor Evaluation Methods:

- Review of master plan of education
- Interviews with faculty
- Interviews with students

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

Explanation:
Program length must be consistent with the terminal award. The JRCERT defines program length as the duration of the program, which may be stated as total academic or calendar year(s), total semesters, trimesters, or quarters.

Required Program Response:
Describe the relationship between the program length and the terminal award offered.

Possible Site Visitor Evaluation Methods:

- Review of course catalog
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

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

Explanation:
Defining the length of didactic and clinical courses facilitates student transfer of credit and the awarding of financial aid. The formula for calculating assigned clock/credit hours must be consistently applied for all didactic and all clinical courses, respectively.

Required Program Response:

- Describe the method used to award credit hours for lecture, laboratory and clinical courses.
- Provide a copy of the program's policies and procedures for determining credit hours and an example of how such policy has been applied to the program's coursework.
- Provide a list of all didactic and clinical courses with corresponding clock or credit hours.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

3.6 Maintains a master plan of education.

Explanation:
A master plan provides an overview of the program and allows for continuity among, and documentation of, all aspects of the program. In the event of new faculty and/or leadership to the program, the master plan provides the information needed to understand the program and its operations.

The plan should be evaluated annually, updated, and must include the following:

- course syllabi (didactic and clinical courses) and
- program policies and procedures.

While there is no prescribed format for the master plan, the component parts should be identified and readily available. If the components are not housed together, the program must list the location of each component. If the program chooses to use an electronic format, the components must be accessible by all program faculty.

Required Program Response:

- Identify the location of the component parts of the master plan of education.
- Provide a Table of Contents for the program's master plan.

Possible Site Visitor Evaluation Methods:

- Review of master plan of education
- Interview with program director
- Interviews with faculty

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

Explanation:
Appropriate advisement promotes student achievement. Student advisement should be formative, summative, and must be shared with students in a timely manner. Programs are encouraged to develop written advisement procedures.

Required Program Response:
- Describe procedures for advisement.
- Provide sample records of student advisement.

Possible Site Visitor Evaluation Methods:
- Review of students' records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

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

- Full-time Program Director:

  Assures effective program operations,

  Oversees ongoing program assessment,

  Participates in budget planning,

  Maintains current knowledge of the professional discipline and educational methodologies through continuing professional development, and

  Assumes the leadership role in the continued development of the program.

- Full-time Clinical Coordinator:

  Correlates clinical education with didactic education,

  Evaluates students,

  Participates in didactic and/or clinical instruction,

  Supports the program director to help assure effective program operation,

  Coordinates clinical education and evaluates its effectiveness,

  Participates in the assessment process,

  Cooperates with the program director in periodic review and revision of clinical course materials,

  Maintains current knowledge of the discipline and educational methodologies through continuing professional development, and

  Maintains current knowledge of program policies, procedures, and student progress.

- Full-time Didactic Program Faculty:

  Prepares and maintains course outlines and objectives, instructs and evaluates students, and reports progress,

  Participates in the assessment process,

  Supports the program director to help assure effective program operation,

  Cooperates with the program director in periodic review and revision of course materials, and

  Maintains appropriate expertise and competence through continuing professional development.

- Part-time Didactic Program Faculty:

Prepares and maintains course outlines and objectives, instructs and evaluates students, and reports progress,

Participates in the assessment process, when appropriate,

Cooperates with the program director in periodic review and revision of course materials, and

Maintains appropriate expertise and competence through continuing professional development.

- Clinical Instructor(s):

  Is knowledgeable of program goals,

  Understands the clinical objectives and clinical evaluation system,

  Understands the sequencing of didactic instruction and clinical education,

  Provides students with clinical instruction and supervision,

  Evaluates students' clinical competence,

  Maintains competency in the professional discipline and instructional and evaluative techniques through continuing professional development, and

  Maintains current knowledge of program policies, procedures, and student progress.

- Clinical Staff:

  Understand the clinical competency system,

  Understand requirements for student supervision,

  Support the educational process, and

  Maintain current knowledge of program policies, procedures, and student progress.

Explanation:
The clear delineation of responsibilities facilitates accountability. Faculty and clinical staff responsibilities must be clearly delineated and must support the program's mission.

Full- and part-time status is determined by, and consistent with, the sponsoring institution's definition. At all times when students are enrolled in didactic and/or clinical components, the program director and/or clinical coordinator must assure that their program responsibilities are fulfilled.

Required Program Response:
Provide documentation that faculty and clinical staff positions are clearly delineated.

Possible Site Visitor Evaluation Methods:
- Review of position descriptions
- Review of handbooks
- Interviews with faculty and clinical staff to assure responsibilities are being performed
- Interviews with students

3.9 Evaluates program faculty and clinical instructor performance and shares evaluation results regularly to assure instructional responsibilities are performed.

Explanation:
The performance of program faculty and clinical instructor(s) must be evaluated minimally once per year. Evaluation assures that instructional responsibilities are performed and provides administration and faculty with information to evaluate performance. Evaluation promotes proper educational methodology and increases program effectiveness. Evaluation results must be shared minimally once per year with the respective program faculty and clinical instructor(s) being evaluated to assure continued professional development. Any evaluation results that identify concerns must be discussed with the respective individual(s) as soon as possible.

Required Program Response:
- Describe the evaluation process.
- Describe how evaluation results are shared with program faculty and clinical instructor(s).
- Provide samples of evaluations of program faculty.
- Provide samples of evaluations of clinical instructor(s).

Possible Site Visitor Evaluation Methods:
- Review of program evaluation materials
- Review of clinical instructor evaluation
- Interviews with administrative personnel
- Interviews with program faculty
- Interviews with clinical instructor(s)
- Interviews with students

Summary for Standard Three

1. List the major strengths of **Standard Three**, in order of importance.

2. List the major concerns of **Standard Three**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Standard Four
Health and Safety

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

Objectives:

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

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

4.2 Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:

- Written notice of voluntary declaration,
- Option for student continuance in the program without modification, and
- Option for written withdrawal of declaration.

4.3 Assures that students employ proper radiation safety practices.

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

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

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

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

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

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

Explanation:
Appropriate policies and procedures help assure that student radiation exposure is kept as low as reasonably achievable (ALARA). The program must maintain and monitor student radiation exposure data. This information must be made available to students within thirty (30) school days following receipt of data. The program must have a published protocol that identifies a threshold dose for incidents in which dose limits are exceeded. Programs are encouraged to identify a threshold dose below those identified in NRC regulations.

Required Program Response:
- Describe how the policies are made known to enrolled students.
- Describe how radiation exposure data is made available to students.
- Provide copies of appropriate policies.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with students

4.2 Has a published pregnancy policy that is consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:

- **Written notice of voluntary declaration,**
- **Option for student continuance in the program without modification, and**
- **Option for written withdrawal of declaration.**

Explanation:

Appropriate radiation safety practices help assure that radiation exposure to the student and fetus are kept as low as reasonably achievable (ALARA). The policy must include appropriate information regarding radiation safety for the student and fetus. The program must allow for student continuance in the clinical component of the program without modification. The program may offer clinical component options such as: (1) clinical reassignments and/or (2) leave of absence.

Required Program Response:

- Describe how the pregnancy policy is made known to accepted and enrolled female students.
- Provide a copy of the program's pregnancy policy.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

4.3 Assures that students employ proper radiation safety practices.

Explanation:
The program must assure that students are instructed in the utilization of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure to patients, selves, and others. These practices assure radiation exposures are kept as low as reasonably achievable (ALARA).

Students must understand basic radiation safety practices prior to assignment to clinical settings. Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care. As students progress in the program, they must become increasingly proficient in the application of radiation safety practices.

The program must also assure radiation safety in energized laboratories. Students' utilization of energized laboratories must be under the supervision of a qualified radiographer who is readily available. If a qualified radiographer is not readily available to provide supervision, the radiation exposure mechanism must be disabled. Programs are encouraged to develop policies regarding safe and appropriate use of energized laboratories by students.

Required Program Response:
- Describe how the curriculum sequence and content prepares students for safe radiation practices.
- Provide the curriculum sequence.
- Provide policies/procedures regarding radiation safety.

Possible Site Visitor Evaluation Methods:
- Review of program curriculum
- Review of radiation safety policies/procedures
- Review of student handbook
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Direct supervision assures patient safety and proper educational practices. The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

- reviews the procedure in relation to the student's achievement,
- evaluates the condition of the patient in relation to the student's knowledge,
- is physically present during the conduct of the procedure, and
- reviews and approves the procedure and/or image.

Students must be directly supervised until competency is achieved.

Required Program Response:

- Describe how the direct supervision requirement is enforced and monitored in the clinical setting.
- Provide documentation that the program's direct supervision requirement is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:

- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Indirect supervision promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. "Immediately available" is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Required Program Response:
- Describe how the indirect supervision requirement is enforced and monitored in the clinical setting.
- Provide documentation that the program's indirect supervision requirement is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

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

Required Program Response:
- Describe how the direct supervision requirement for repeat images is enforced and monitored in the clinical setting.
- Provide documentation that the program's direct supervision requirement for repeat images is made known to students, clinical instructors, and clinical staff.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Review of meeting minutes
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

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

Explanation:
Appropriate sponsoring institutional policies and procedures assure that students are protected. These policies must, at a minimum, address emergency preparedness, harassment, communicable diseases, and substance abuse. Policies and procedures must meet federal and/or state requirements as applicable. Enrolled students must be informed of policies and procedures.

Required Program Response:
Provide program policies that safeguard the health and safety of students.

Possible Site Visitor Evaluation Methods:
- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students

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

Explanation:
Appropriate orientation assures that students are cognizant of clinical policies and procedures. The policies and procedures must, at a minimum, address the following: hazards (fire, electrical, chemical), emergency preparedness, medical emergencies, HIPAA, and Standard Precautions.

Required Program Response:
- Describe the process for orienting students to clinical settings.
- Provide documentation that students are apprised of policies and procedures specific to each clinical setting.

Possible Site Visitor Evaluation Methods:
- Review of orientation process
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with students

Summary for Standard Four

1. List the major strengths of **Standard Four**, in order of importance.

2. List the major concerns of **Standard Four**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Standard Five
Assessment

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

Objectives:

In support of **Standard Five**, the program:

Student Learning

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

Program Effectiveness

5.2 Documents the following program effectiveness data:

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

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

Analysis and Actions

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

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

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

Explanation:
Assessment is the systematic collection, review, and use of information to improve student learning and educational quality. An assessment plan helps assure continuous improvement and accountability. Minimally, the plan must include a separate goal in relation to each of the following: clinical competence, critical thinking, professionalism, and communication skills. The plan must include student learning outcomes, measurement tools, benchmarks, and identify timeframes and parties responsible for data collection.

For additional information regarding assessment, please refer to www.jrcert.org.

Required Program Response:
Provide a copy of the program's current assessment plan.

Possible Site Visitor Evaluation Methods:
- Review of assessment plan
- Review of assessment tools
- Interviews with faculty

5.2 Documents the following program effectiveness data:

- **Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,**
- **Five-year average job placement rate of not less than 75 percent within twelve months of graduation,**
- **Program completion rate,**
- **Graduate satisfaction, and**
- **Employer satisfaction.**

Explanation:

Credentialing examination, job placement, and program completion data must be reported annually to the JRCERT. Graduate and employer satisfaction data must be collected as part of the program's assessment process.

Credentialing examination pass rate is defined as the number of student graduates who pass, on first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination or an unrestricted state licensing examination compared with the number of graduates who take the examination within six months of graduation.

Job placement rate is defined as the number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences. The JRCERT has defined not actively seeking employment as: 1) graduate fails to communicate with program officials regarding employment status after multiple attempts, 2) graduate is unwilling to seek employment that requires relocation, 3) graduate is unwilling to accept employment due to salary or hours, 4) graduate is on active military duty, and/or 5) graduate is continuing education.

Program completion rate is defined as the number of students who complete the program within 150% of the stated program length. The program must establish a benchmark for its program completion rate. The program specifies the entry point (e.g., required orientation date, final drop/add date, final date to drop with 100% tuition refund, official class roster date, etc.) used in calculating program's completion rate.

Graduate and employer satisfaction may be measured through a variety of methods. The methods and timeframes for collection of the graduate and employer satisfaction data are the prerogative of the program.

Required Program Response:

Provide actual outcome data in relation to program effectiveness.

Possible Site Visitor Evaluation Methods:

- Review of program effectiveness data
- Interviews with faculty

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

Explanation:
Program accountability is enhanced by making its effectiveness data available to the program's communities of interest and the general public. In efforts to increase accountability and transparency, the program must publish, at a minimum, its five -year average credentialing examination pass rate, five-year average job placement rate, and program completion rate data on its Web site to allow the public access to this data. The program effectiveness data should clearly identify the sample size associated with each associated measure (i.e., number of first time test takers, number of graduates actively seeking employment, number of graduates).

Additionally, the JRCERT will post five-year average credentialing examination pass rate, five-year average job placement rate, and program completion rate data at www.jrcert.org. The program must publish the JRCERT URL (www.jrcert.org) to allow the public access to this data.

Required Program Response:
- Provide copies of publications that contain the program's program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate).
- Provide samples of publications that document the availability of program effectiveness data via the JRCERT URL address from the institution's/program's Web site.

Possible Site Visitor Evaluation Methods:
- Review of program publications
- Review of institutional and/or program Web site
- Interviews with faculty
- Interviews with students

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

Explanation:
Analysis of student learning outcome data and program effectiveness data allows the program to identify strengths and areas for improvement to bring about systematic program improvement. This analysis also provides a means of accountability to communities of interest. It is the program's prerogative to determine its communities of interest.

The analysis must be reviewed with the program's communities of interest. One method to accomplish this would be the development of an assessment committee. The composition of the assessment committee may be the program's advisory committee or a separate committee that focuses on the assessment process. The committee should be used to provide feedback on student achievement and assist the program with strategies for improving its effectiveness. This review should occur at least annually and must be formally documented.

For additional information regarding assessment, please refer to www.jrcert.org.

Required Program Response:
- Describe how the program analyzes student learning outcome data and program effectiveness data to identify areas for program improvement.
- Describe how the program shares its student learning outcome data and program effectiveness data with its communities of interest.
- Describe examples of changes that have resulted from the analysis of student learning outcome data and program effectiveness data and discuss how these changes have led to program improvement.
- Provide a copy of the program's actual student learning outcome data since the last accreditation award. This data may be documented on previous assessment plans or on a separate document.
- Provide documentation that student learning outcome data and program effectiveness data has been shared with communities of interest.

Possible Site Visitor Evaluation Methods:
- Review of student learning outcome data and program effectiveness data to support the assessment plan
- Review of representative samples of measurement tools used for data collection
- Review of aggregate data
- Review of meeting minutes related to the assessment process
- Interviews with faculty

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

Explanation:
Identifying and implementing needed improvements in the assessment plan leads to programmatic improvement and renewal. As part of the assessment cycle, the program should review its assessment plan to assure that assessment measures are adequate and that the assessment process is effective in measuring student learning outcomes. At a minimum, this evaluation must occur at least every two years and be documented in meeting minutes.

For additional information regarding assessment, please refer to www.jrcert.org.

Required Program Response:
- Describe how this evaluation has occurred.
- Provide documentation that the plan is evaluated at least once every two years.

Possible Site Visitor Evaluation Methods:
- Review of meeting minutes related to the assessment process
- Review of assessment committee meeting minutes, if applicable
- Interviews with faculty

Summary for Standard Five

1. List the major strengths of **Standard Five**, in order of importance.

2. List the major concerns of **Standard Five**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Standard Six

Institutional/Programmatic Data

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

Objectives:

In support of **Standard Six**, the program:

Sponsoring Institution

6.1 Documents the continuing institutional accreditation of the sponsoring institution.

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

Personnel

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

Clinical Settings

6.4 Establishes and maintains affiliation agreements with clinical settings.

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

Program Sponsorship, Substantive Changes, and Notification of Program Officials

6.6 Complies with requirements to achieve and maintain JRCERT accreditation.

6.1 Documents the continuing institutional accreditation of the sponsoring institution.

Explanation:
The goal of accreditation is to ensure that the education provided by institutions meets acceptable levels of quality. The sponsoring institution must be accredited by:

- an agency recognized by the United States Department of Education (USDE) and/or Council for Higher Education Accreditation (CHEA),
- The Joint Commission (TJC), or
- equivalent standards.

Required Program Response:
Provide documentation of current institutional accreditation for the sponsoring institution. This may be a copy of the award letter, certificate, or printout of the institutional accreditor's Web page.

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

Explanation:
Compliance with applicable laws promotes a safe environment for students and others. Records of compliance must be maintained for the program's energized laboratories.

Required Program Response:
Provide certificates and/or letters for each energized laboratory documenting compliance with state and/or federal radiation safety laws.

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

- Full-time Program Director:

  Holds, at a minimum, a master's degree,

  Is proficient in curriculum design, program administration, evaluation, instruction, and academic advising,

  Documents three years clinical experience in the professional discipline,

  Documents two years of experience as an instructor in a JRCERT-accredited program, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).

- Full-time Clinical Coordinator:

  Holds, at a minimum, a baccalaureate degree,

  Is proficient in curriculum development, supervision, instruction, evaluation, and academic advising,

  Documents two years clinical experience in the professional discipline,

  Documents a minimum of one year of experience as an instructor in a JRCERT-accredited program, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).

- Full-time Didactic Program Faculty:

  Holds, at a minimum, a baccalaureate degree,

  Is qualified to teach the subject,

  Is knowledgeable of course development, instruction, evaluation, and academic advising,

  Documents two years clinical experience in the professional discipline, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the program is located).

- Part-time Didactic Program Faculty

  Holds academic and/or professional credentials appropriate to the subject content area taught and

  Is knowledgeable of course development, instruction, evaluation, and academic advising.

- Clinical Instructor(s):

  Is proficient in supervision, instruction, and evaluation,

  Documents two years clinical experience in the professional discipline, and

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the clinical setting is located).

- Clinical Staff:

  Holds American Registry of Radiologic Technologists current registration in radiography or equivalent (i.e., unrestricted state license for the state in which the clinical setting is located).

Explanation:
Appropriate knowledge, proficiency, and certification (if appropriate) provide a foundation that promotes a sound educational environment.

Faculty and staff must possess academic and professional qualification(s) appropriate for their assignment. Clinical instructors and clinical staff supervising students' performance in the clinical component of the program must document ARRT registration (or equivalent) or other appropriate credentials. Appropriate credentials, other than ARRT registration (or equivalent), may be used for qualified health care practitioners supervising students in specialty areas (e.g., registered nurse supervising students performing patient care skills, phlebotomist supervising students performing venipuncture, etc.).

Required Program Response:
- For all program officials not previously identified on the program's database , submit a request for recognition of program officials including a current curriculum vitae and documentation of current registration by the American Registry of Radiologic Technologists* or equivalent.
- For all currently recognized program officials [program director, educational coordinator (if applicable), full-time didactic faculty, and all clinical preceptors], submit a current registration by the American Registry of Radiologic Technologists* or equivalent.

*These may be copies of current registration cards or "ARRT Identification" page available at www.arrt.org.

6.4 Establishes and maintains affiliation agreements with clinical settings.

Explanation:
Formalizing relations between the program and the clinical setting helps assure the quality of clinical education by delineating appropriate responsibilities of the program and the clinical setting. An appropriate termination clause assures that students will have an opportunity to complete the clinical education component. The JRCERT defines an affiliation agreement as a formal written understanding between an institution sponsoring the program and an independent clinical setting.

An affiliation agreement must identify the responsibilities of all parties and, specifically, must address student supervision, student liability, and provide adequate notice of termination of the agreement. An affiliation agreement is not needed for clinical settings owned by the sponsoring institution; however, a memorandum of understanding between the clinical setting and the sponsoring institution is recommended. At a minimum, the memorandum should address responsibilities of both parties and student supervision.

Required Program Response:
Provide copies of current, signed affiliation agreements with each clinical setting.

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

Explanation:
Compliance with applicable laws promotes a safe environment for students and others. Records of compliance must be maintained for each clinical setting. Clinical settings may be recognized by The Joint Commission (TJC), DNV Healthcare, Inc., Healthcare Facilities Accreditation Program (HFAP), or an equivalent agency, or may hold a state-issued license.

Required Program Response:
Provide letters, certificates, or printouts of Web pages demonstrating the current recognition status of each clinical setting.

6.6 Complies with requirements to achieve and maintain JRCERT accreditation.

Explanation:
Programs must comply with JRCERT policies and procedures to maintain accreditation. JRCERT accreditation requires that the sponsoring institution has primary responsibility for the educational program and grants the terminal award.

Sponsoring institutions may include educational programs established in vocational/technical schools, colleges, universities, hospitals, or military facilities. The JRCERT also recognizes a consortium as an appropriate sponsor of an educational program. A consortium is two or more academic or clinical institutions that have formally agreed to sponsor the development and continuation of an educational program. The consortium must be structured to recognize and perform the responsibilities and functions of a sponsoring institution.

The JRCERT does not recognize branch campuses. The JRCERT requires that each program location have a separate accreditation award.

Additionally, the JRCERT will not recognize a healthcare system as the program sponsor. A healthcare system consists of multiple institutions operating under a common governing body or parent corporation. A specific facility within the healthcare system must be identified as the sponsor.

The JRCERT requires programs to maintain a current and accurate database. Updates should be reflected within thirty (30) days of effective change date. Additionally, the JRCERT requires notification of substantive changes within thirty (30) days of implementation.

Required Program Response:
- Report any database changes.
- Report any substantive change not previously submitted.

Summary for Standard Six

1. List the major strengths of **Standard Six**, in order of importance.

2. List the major concerns of **Standard Six**, in order of importance.

3. Provide the program's plan for addressing each concern identified.

4. Describe any progress already achieved in addressing each concern.

5. Describe any constraints in implementing improvements.

Awarding, Maintaining, and Administering Accreditation

A. Program/Sponsoring Institution Responsibilities

1. Applying for Accreditation

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

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

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182

2. Administrative Requirements for Maintaining Accreditation

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

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

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

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

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

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

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

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

B. JRCERT Responsibilities

1. Administering the Accreditation Review Process

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

The accreditation process includes a site visit.

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

The JRCERT is responsible for recognition of clinical settings.

2. Accreditation Actions

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

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

All other JRCERT accreditation actions are final.

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

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

accreditation:

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

curriculum:

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

certification:

American Registry of Radiologic Technologists
1255 Northland Drive
St. Paul, MN 55120-1155
(651) 687-0048
www.arrt.org

JRCERT
20 North Wacker Drive
Suite 2850
Chicago, IL 60606-3182
(312) 704-5300
(312) 704-5304 (fax)
mail@jrcert.org (e-mail)
www.jrcert.org