

Arrowhead Regional Medical Center



School of Radiologic Technology

Student Handbook 2025-2026

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PREFACE

The faculty and staff of ARMC School of Radiologic Technology have incorporated into this student manual information that will assist you during the program.

This manual is prepared as a guide to aid you in identifying your responsibilities in the areas of patient care, academic endeavor, professional development and research. The policies and procedures in this manual are provided to prepare the Radiography Student for entrance into the Radiologic Sciences.

Any questions or problems that may arise should be directed to the Program Faculty:

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MISSION AND VISION STATEMENTS

MISSION STATEMENT OF THE ARROWHEAD REGIONAL MEDICAL CENTER

***In an environment of learning and innovation, to
serve our diverse community with high-quality
compassionate care.***

VISION STATEMENT OF THE ARROWHEAD REGIONAL MEDICAL CENTER

***To improve the health of the community by being the
provider of choice for health care delivery and education.***

GUIDING PRINCIPLES OF THE ARROWHEAD REGIONAL MEDICAL CENTER

The guiding principles of the Arrowhead Regional Medical Center are to:

- *Deliver the highest quality of care which meets or exceeds the patient's expectations by requiring that the patient, to the fullest extent possible, make all decisions concerning his or her care.*
- *Respect and support cultural, spiritual, and health care needs of the community through innovative clinical and educational programs with a patient focused orientation.*
- *Ensure the safety of its patients, staff, and community by providing a well-maintained physical plant, secure campus, and by respecting the environment.*
- *Measure the effectiveness of care by comparing the performance of the Medical Center to national standards.*
- *Improve access to health care for our community by providing a continuum of care utilizing the full range of health care practitioners and various delivery models with multiple points of service.*
- *Maintain, assure, and improve the professional competence of all staff by periodically assessing competence and providing education.*
- *Increase the efficiency and productivity of the organization by empowering employees to make improvements and strive to provide a work environment which meets or exceeds the employees' expectations.*
- *Provide accurate, accessible, and timely information and preserve the confidentiality of information, where appropriate, by utilizing the latest information systems, technology and efficient manual systems.*
- *Educate graduate and postgraduate medical students and other allied health professionals by maintaining the Academic Health Center as the premier resources for such education.*
- *Conduct all of the affairs of the Medical Center in an ethical manner by adopting and enforcing a strict code of ethical behavior.*

ARMC SCHOOL OF RADIOLOGIC TECHNOLOGY PROGRAM MISSION AND VISION STATEMENT

The mission of the ARMC School of Radiologic Technology is to provide the educational environment necessary to prepare graduates who are competent in diagnostic radiography and possess the professional ethics and practices associated with quality patient care.

The vision of the ARMC School of Radiologic Technology is to be Southern California's leading educational program for those who are seeking a career in Radiologic Technology.

Program Goals and Student Learning Outcomes

Fulfillment of the program's mission is assessed by the degree the program achieves the following goals and student learning outcomes (SLO's):

GOAL #1 - Graduate students who are clinically competent.

- Students will apply proper patient care and positioning techniques.
- Students apply proper use of radiation safety devices and employ the ALARA principle.

GOAL #2 - Graduate students with problem solving and critical thinking skills.

- Students will modify routine imaging parameters based on patient's condition.
- Students will demonstrate acceptable image evaluation during competency.

GOAL #3 – Graduate students who demonstrate effective communication skills.

- Students will present an oral report of their research project.
- Students will demonstrate written communication on their reports.



STATEMENT OF NON-DISCRIMINATION

The Arrowhead Regional Medical Center School of Radiologic Technology grants full consideration to all applicants for admission without regard to age, race, color, national origin, sex, religion, veteran status, creed, or qualified handicap.

PRIMARY PROGRAM OBJECTIVES

ARMC School of Radiologic Technology provides education in Radiography, combining clinical and didactic practices in a 22.5-month program.

PRIMARY OBJECTIVES

1. Cognitive knowledge
2. Incremental / progressive skills: basic, intermediate, advanced
3. Clinical proficiency
4. Empathetic patient care

Students Will Perform Radiographic Procedures By:

1. Applying knowledge of anatomy and physiology, positioning, physics, radiographic exposure and protection in order to obtain optimum quality radiographic images for the purpose of Radiologic diagnosis and interpretation.
2. Interacting and communicating with patients in a professional manner, providing assistance and comfort as needed during radiographic procedures.
3. Using independent judgment to provide optimum quality patient care; demonstrating initiative, compassion, and understanding of patient needs.
4. Becoming acquainted with radiographic evaluation and critique through review of both excellent and poor quality radiographic images.
5. Developing a good rapport with patients, co-workers, and other members of the medical team.
6. Using protective measures to shield patients, self, and personnel from unnecessary radiation.

ETHICS

THE RIGHTS OF PATIENTS

Technologists continually face the danger of infringing on patients' rights and becoming legally liable as a consequence. The American Society of Radiologic Technologists House of Delegates issued a strong reminder on that point when it adopted the following at its 1990 meeting.

Respect for Patient: The patient has the right to considerate and respectful care consistent with his dignity as a human.

Disclosure of Attending Physician: The patient has the right to know the name of his physician(s) responsible for his overall care. He has the right to meet him, speak with and to discuss his problems with him. When the condition of the patient prevents his being able to obtain and understand this type of information, it may be given to his spouse, next of kin or legal guardian.

Disclosure of Medical Information: The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved and the probable duration of incapacitation. When medically significant alternatives for care or treatment exist or when the patient requests information concerning medical alternatives, the patient has the right to know the names of the persons responsible for the procedure and treatment.

Refusal of Treatment: Consistent with the institution's corporate obligation and policies and its moral and religious beliefs, the patient has the right to refuse treatment for himself to the extent permitted by law and to be informed of the medical consequences of his actions.

Confidentiality of Medical Care: The patient has the right to consideration of his privacy concerning his own medical care. Case discussions, consultations, examination and treatment are matters of personal concern and should be conducted discreetly. All information regarding the patient's medical care should be rated as privileged information, held in confidence and used only for his well-being.

Confidentiality of Communication: The patient has the right to expect that all communications and records pertaining to his care be treated as confidential.

Acceptance of Religious Rights: The patient has the right to expect that institution, consistent with its corporate obligation and policies and its moral and make a reasonable response to the request of the patient for service.

Disclosure of Experimental Treatment: The patient has the right to be advised if the treatment ordered or rendered by his physician is, in any sense, on an experimental basis.

Continuity of Care: The patient has the right to expect reasonable continuity of care, to be advised as to the appointment times and places.

Examination of Billing: The patient has the right to examine and receive an explanation of his bill for hospital services regardless of source of payment.

Disclosure of Hospital Rules: The patient has the right to be apprised of general rules of the hospital that apply to him and his visitors, and to be instructed in various regulations relating to his treatment and the preparation for them that will enhance his overall care and physical well-being.

ETHICAL STANDARDS IN RADIOLOGY

The following are the ethical standards for students in the ARMC Radiography Program.

1. Each female patient will be questioned about the possibility of pregnancy prior to any x-ray procedure. If pregnancy is confirmed, or suspected in any way, a Radiologic Technologist shall be contacted for advice on how to proceed.
2. Information regarding patients is strictly **confidential** and is **not** to be discussed either in or out of the hospital, with anyone not directly involved with the patient's care and treatment.
3. Patient's charts, records, images must **never** be shown or released to the patient or family without the attending physician or Radiologist's permission.
4. Eating, drinking and smoking should take place **only** in designated areas.
5. Radiation Protection standards must always be maintained in and outside of the Medical Imaging Department.
6. A professional attitude is expressed in demeanor and ways of dressing and grooming; and must be maintained.
7. Students should not give patients the results of their radiographic procedures. This should be handled by the Radiologist or the patient's physician.
8. Conversations of any type should not take place at inappropriate times around patients or other staff.
9. Two patient identifications **shall** be used to verify that the correct patient is being examined.
10. Requisitions must be carefully checked to make certain that the patient receives the examination that has been requested. Any questions regarding the requisition should be called to the attention of the technical supervisor and/or Radiologic Technologist.
11. Any incident out of the ordinary **shall** be reported to the Program Director, Clinical Coordinator or supervisory personnel immediately.
12. Proper discretion in asking questions or making statements in patient areas, or other areas, should always be maintained.
13. Personal matters should be kept out of the school and work area.

AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGIST CODE OF ETHICS

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.
5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.
11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

STUDENT SERVICES

FEES AND EXPENSES

Purchase of Uniforms:

Students are required to wear **Royal Blue** scrub style uniforms during all hours of school. If the student wishes to wear an additional garment over the scrub top (for warmth, as an example) it must be a scrub jacket of the same uniform color. Students may also wear a jacket approved by the program. Long sleeve T-shirts may be worn under the scrub top but they must not have any graphic design showing on the sleeve. Long underwear tops, "thermals", are **not** to be worn.

An exception will be made for the students on the O.R. rotation. They will wear O.R. scrubs from surgery. The O.R. scrub jacket may be worn.

Tuition Fees:

Students accepted into the Arrowhead Regional Medical Center School of Radiologic Technology must be enrolled at Crafton Hills College for the RT courses. The fees for registration are set by the college and are listed on the college website. All students are responsible for college fees.

Additional Fees:

ARRT National Radiography Exam	\$225.00
ARRT National Mammography Exam	\$225.00
ARRT National Computed Tomography Exam	\$225.00
California CRT License	\$112.00
California Fluoroscopy License	\$112.00

FINANCIAL AID

Radiography Students who enroll at Crafton Hills College may apply for financial aid. All inquiries should be addressed to the financial aid office on the campus of CHC.

REFUND POLICY

See Crafton Hills College Catalog.

FLU AND ANNUAL TB SCREENING

The hospital Employee Health Department provides flu and annual TB screening as required by the hospital.

COUNSELING AND GUIDANCE SERVICES

Counseling and guidance are designed to assist students toward increasing self-understanding and effective self-direction. There are several sources for counseling: The Program Director and other faculty members, as well as the Crafton Hills College Counseling/Learning Resource Center, (CHC enrollment required) are available for academic counseling.

BOOKS

Books and E-books shall be purchased by the student prior to the start of each semester. The list of books will be provided to the student.

LIBRARY FACILITIES

CHC Library

ATTENDANCE

DIDACTIC ATTENDANCE

Students will be enrolled in several courses during each semester. Regular attendance in all didactic sessions is critical for success in the Radiologic Technology Program.

Students are allowed up to 3 class days of absence per semester without penalty. Absences beyond 3 class days require appropriate documentation (e.g., doctor's note) to be excused. Failure to provide documentation for absences beyond 3 days may result in grade deductions and possible disciplinary action. Students must notify their instructor and the clinical coordinator as soon as possible, and preferably before class begins, if they will be absent.

Failure to notify the instructor and the clinical coordinator in a timely manner may result in the absence being treated as a professionalism concern, which can negatively affect the student's grade and may lead to disciplinary action.

Students are responsible for obtaining any missed material and completing assignments in a timely manner.

CLINICAL ATTENDANCE

Students are allotted 16 hours of personal and sick leave per semester to be used for clinical absences. It is the student's responsibility to notify both the department and the clinical coordinator before the start of their scheduled shift if they will be absent or unable to attend clinical.

Failure to provide notification prior to the shift may result in the absence being considered a professionalism violation, which can negatively impact clinical evaluations and may lead to disciplinary action.

Students are responsible for making up any missed clinical time as directed by program faculty.

ATTENDANCE INCIDENTS

Tardy: Clocking in 5 or more minutes after shift start time

3rd tardy = 1 incident + 8 hours of makeup time

4th tardy = 1 incident

5th tardy = 1 incident

6th tardy = 1 incident + 8 hours of makeup time

Leave Early: Clocking out 1 or more minutes before the scheduled leave time

2nd leave early = 1 incident

Every leave early thereafter = 1 incident

Absence: Student did not attend shift as scheduled

3rd absence = 1 incident

Every absence thereafter = 1 incident

Missed time punch: Missed clocking in or clocking out

3rd missed time punch = 1 incident

Every missed time punch thereafter = 1 incident

No Call/No Show: Failure to follow the call-in procedure if 30+ minutes late or absent

1st NCNS = 1 incident

Every NCNS thereafter = 1 incident

If a student is tardy, they must stay the additional minutes they were late that day, or points will be deducted from their clinical grade. It is the student's responsibility to know how many minutes late they clocked in. (Ex: Shift starts at 8am, student clocks in at 8:10am, the student cannot clock out until 4:40pm or later).

ATTENDANCE DEDUCTIONS

- First incident = 1% grade deduction
- Second incident = 5% grade deduction, verbal warning
- Third incident = 10% grade deduction, written warning
- Fourth incident = 15% grade deduction, probation
- Five or more incidents result in a failing course grade and the student may be subject to dismissal from the program

CALL-IN PROCEDURES

Notification of any tardy, leave early, or absence must be reported on the day of the incident. Students are responsible for notifying both the Clinical Coordinator and PACS.

- Absence and tardy notifications must be made within 30 minutes of the start of clinical. Failure to do so will result in a no call/no show.
- Over 3 days of absence with no call-in or program withdrawal notification may result in program dismissal.

Notification:

1. Contact PACS by phone, include your first and last name.

909-580-1581

2. Contact the Clinical Coordinator by phone or email (include the name of the employee in PACS or the time you left a voicemail).

909-580-3897

TIME RECORDS

Students should be ready to work with their belongings put away, prior to clocking in.

- Students are not permitted to clock in more than 7 minutes prior to the start of their shift. Clocking in too early will count as a missed time punch.

- If anyone other than the individual student completes a time punch, it is considered falsification of records and will result in dismissal from the program.
- Students should maintain professional conduct and complete any exam they have started, even if it means clocking out late.
- Students may occasionally stay late for rare exams or required competencies.

SCHEDULING CLINICAL MAKEUP DAYS

Makeup days can only be scheduled on weekends or holidays, as students are already scheduled for class and clinical rotations Monday through Friday. These are the only available times for makeup hours to be completed.

- Makeup time must be completed in full 8-hour increments (no partial days).
- Students may not exceed 40 total hours in any given week, including makeup hours.
- Students requiring makeup days will be required to schedule makeup days with the Clinical Coordinator before the end of the semester.
- The attendance policy will apply during the makeup days.
- Any makeup days that fail to be made up before the end of the semester will result in a 20-point deduction per missed day.
- If a student has absences that cannot be made up before the end of the semester, the student may be required to make up those days during a fall, winter, spring, or summer break.

DAILY BREAKS

In accordance with JRCERT standards, students must be provided with appropriate rest and lunch breaks during clinical assignments.

- Students are allowed one 30-minute lunch break for any shift greater than 5 hours.
- Students are allowed two 15-minute rest breaks per shift, 1 before lunch and 1 after lunch. Students may not combine their breaks or add additional time to their provided lunch break.
- Students are expected to take their breaks independently, using good judgment and without waiting for instruction.
- However, if a technologist or staff member directs a student to take a break or lunch at a specific time due to workflow or patient care needs, the student is expected to comply with that instruction.
- Students should not delay, skip, or wait to be told to take breaks unless otherwise instructed.
- Students should not clock out for these designated breaks.
- Excessive breaks may result in disciplinary action.
- Students are not to leave the clinical campus during their scheduled shift. If the student does leave campus during their shift, the student must clock out and back in. Attendance policy applies.
- Proper notification must be made to the supervising technologist prior to going on lunch/break and the student must write their name on the board and the time they left for lunch/break.

- If the student is unable to be found regularly during their shift, it may result in disciplinary action.
- Failure to follow break expectations may be considered a professionalism issue and may result in corrective action.

BREAKS/LEAVES OF ABSENCE

HOLIDAYS

The following are recognized as legal holidays:

January 1st	November 11th
Third Monday in January	Thanksgiving Day
Third Monday in February	Day after Thanksgiving
Last Monday in May	December 24th
June 19 th	December 25th
July 4th	December 31st
First Monday in September	Second Monday in October

Students will not be assigned on holidays. Students will never be scheduled more than 40 hours per week or 10 hours in one day.

VACATION / PERSONAL LEAVE

Students are granted the following scheduled time off each year:

- All 13 San Bernardino County-recognized holidays
- 4 personal days total (2 per semester)
- 4 weeks of vacation, allocated as follows:
 - 2 weeks during the Winter Break (Christmas/New Year)
 - 1 week during Spring Break
 - 1 week during Summer Break (between the end of the Spring semester and the beginning of the Fall semester for junior students)

Note: The summer vacation does not apply to graduating students following their final semester in the program.

Personal days may be taken both for scheduled events and unforeseen circumstances including sick time, doctor appointments, and events with family, etc. The time may be used in increments of one quarter-hour. This leave will also be used to account for any time missed from classes and clinical due to tardiness or any other circumstances.

REQUESTING TIME OFF

If a student has 8 or more hours of personal time remaining, they may request a day off from clinic. To do so, the student must email the Clinical Coordinator at least 48 hours in advance.

Upon approval, the student may take the requested day off and must record their name and the date of the absence on the board in Control.

If a student has fewer than 8 hours of personal time remaining, they cannot request a clinic day off using personal time. Instead, they may request to switch a weekday shift for a weekend shift within the same week to avoid an unexcused absence. This option is available only if the student does not have sufficient personal time available.

If a student's request for a day off is not approved, they are not permitted to be absent on that date. If the student is absent after being denied time off, 20 points will be deducted from their clinical grade and the absence will be subject to disciplinary review.

SWITCHING ROTATIONS

Students may request to switch clinical shifts with a classmate by sending an email to the Clinical Coordinator. All shift change requests must be approved in advance by Clinical Coordinator.

Failure to obtain prior approval before switching shifts will result in disciplinary action for both students involved.

Students may not request to switch shifts if they are assigned to Fluoroscopy, the Operating Room (OR), or P1 rotations, unless they have a documented reason (e.g., medical, legal, or personal emergency).

ACERT CONFERENCE

The Program encourages students to attend the Annual ACERT Conference in Las Vegas each February. The objectives of this educational experience include:

1. To develop within the student, a broader knowledge of the profession through attending guest lectures on a wide variety of topics.
2. To provide a means of social interaction with professionals and students from this profession.
3. To gain a national perspective on subjects such as testing strategies, time management, the benefits of multitasking and various other topics, specifically addressing the student radiographer.
4. When attending the ACERT conference, the student is expected to follow clinical guidelines.

BEREAVEMENT LEAVE

In the unfortunate event of a death in your **immediate family** – defined as a student's spouse, child, stepchild, parent, step-parent, guardian, ward, parent-in-law, brother, sister, step-brother, step-sister, grandparent or grandchild – you may use up to three consecutively scheduled school days for bereavement without penalty. One additional day may be granted if the student must travel over 500 miles from their residence to the funeral service. (You may be asked to show proof of an immediate relative's funeral.)

JURY DUTY

If a student gets a jury summons, see the Program Director or Clinical Coordinator. **The student will be given a letter asking for postponement of service due to the hardship of missing valuable clinic and didactic hours.**

MILITARY OBLIGATIONS

Students who are reservists or members of the National Guard and are required to attend special retraining periods (summer camp, cruise, etc., or call for emergency service) are to use personal leave and vacation time to fulfill their military commitments. Students that fit this particular military status must notify the Program Director during orientation. Arrangements will be made on an individual basis and must be approved by the Program Director/Advisory Committee.

WITHDRAWAL

Program withdrawal occurs when a student is in good-standing but is unable to continue in the program with their cohort group due to personal circumstances (e.g. change in career path, financial hardship, health issues, etc.). A student in good standing is regarded as someone who has complied with all policies, procedures and obligations while not being subject to dismissal or any other disciplinary sanctions. This type of withdrawal does not need to be reported for an ethics review with the ARRT when applying for a license. Withdrawal deadlines and policies can be found in the Crafton Hills Community College Academic Calendar. Students needing to withdraw must submit a program withdrawal letter to the Program Director within 3 days of absence from the program. Students are encouraged to evaluate their situation carefully before submitting a withdrawal, as it cannot be retracted, and results in the immediate removal of the student from the program/cohort group. Students wishing to return to the program after withdrawing are required to follow the re-entry process.

RE-ENTRY

Re-entry occurs when a student has withdrawn but wishes to join a future cohort group. Candidates should be aware that re-entry to the program is not guaranteed, may be delayed, and may involve repetition of courses, which cannot be skipped or audited.

Students who wish to re-enter must immediately contact the Program Director, who will provide the student with a re-entry form and associated deadlines and information. The following conditions must be met for the candidate to be considered for re-entry:

1. Candidate is in good standing with the college and program. A student in good standing is regarded as someone who has complied with all policies, procedures and obligations while not being subject to dismissal or any other disciplinary sanctions.
2. Candidate must have an average exam score of 75% or higher in all courses taken.
3. No more than 1 year has transpired since program withdrawal.

Re-entry eligibility determinations are primarily based on prior student conduct/performance, GPA, financial holds, etc. If deemed eligible for re-entry, the candidate will interview with the Program Director and Clinical Coordinator. The Program Director will make the final determination as to whether the student will be granted re-entry. Re-entry determinations may be based on the re-entry interview, prior student conduct/performance, GPA, financial holds, etc. Re-entry may involve a variety of requirements, such as, but not limited to, signing a re-entry contract and successful completion of an admissions screening process (e.g.

background/drug screen, etc.). Failure to meet re-entry requirements or denial of re-entry will deem the student ineligible to re-enter or re-apply to the program. Students wishing to appeal re-entry decisions may follow the grievance/appeal procedure.

GRIEVANCE POLICY

Policy Purpose

The purpose of this policy is to outline the procedures for student readmission following dismissal from the ARMC Radiologic Technology Program, and to establish a formal grievance process in alignment with Crafton Hills College policies.

The ARMC Radiologic Technology Program holds students to rigorous academic, clinical, and professional standards. Dismissal from the program is a decision made after thorough documentation, intervention, and failure to meet established expectations. Readmission is not automatic and will be considered only under exceptional circumstances.

Grounds for Dismissal

Students may be dismissed from the program for, but not limited to:

- Failure to meet academic and/or clinical standards
- Inability to demonstrate clinical competence
- Unprofessional behavior or violations of program policies
- Repeated probation with no meaningful improvement
- Unsafe or unethical clinical practices

Dismissal decisions are made collectively by program faculty following a comprehensive review of student performance and behavior.

Grievance and Appeal Procedure

Students who have been dismissed may file a formal grievance under the following conditions:

1. **Timeline:** A written grievance must be submitted within 10 business days of the date of dismissal.
2. **Submission:** The grievance must be submitted in writing to the Faculty Co-Chairs of the Allied Health Department at Crafton Hills College.
3. **Contents of Grievance:** The student must clearly state:
 - The basis for their appeal
 - Any alleged procedural errors or policy violations
 - Supporting documentation or evidence
4. **Review Process:**

- The Faculty Co-Chairs will review the grievance and may meet with the student and ARMC program faculty if necessary.
- The review will focus solely on procedural fairness and policy adherence, not on subjective claims or external influence.

5. Decision:

- The Faculty Co-Chairs' decision is final.
- If no procedural error is found, the dismissal stands.
- If a policy was not followed, the student may be granted an opportunity to reapply for readmission only at the discretion of the Faculty Co-Chairs, and not as a guarantee.

READMISSION POLICY

The ARMC Radiologic Technology Program does **not guarantee** readmission to any student who has been dismissed.

Eligibility for Readmission Consideration:

- Readmission will be considered only if the Faculty Co-Chairs at Crafton Hills College determine that a procedural error occurred.
- Readmission will not be granted based on personal circumstances, external advocacy, or administrative pressure.
- Students who were dismissed for clinical incompetence, failure to meet minimum academic standards, or unprofessional conduct are generally not eligible for readmission.

Reapplication Requirements (if permitted):

- The student may be required to reapply to the program and repeat all prior coursework and clinical training.
- Readmitted students will be subject to a strict probationary period and must meet specific performance benchmarks to remain in the program.

One-Time Readmission Policy:

- A student may be granted only one readmission opportunity, regardless of the circumstances.

Final Authority

- All decisions regarding readmission rest solely with the Crafton Hills College Faculty Co-Chairs. ARMC program staff do not make independent decisions regarding readmission once a grievance is filed. This ensures an impartial, policy-driven process.

Program Integrity

- This policy is intended to protect the integrity of the Radiologic Technology Program and ensure that only students who meet academic, clinical, and professional standards are permitted to continue, return, or graduate.

ACADEMIC POLICIES

MINIMUM ACCEPTABLE ACADEMIC PERFORMANCE

A student is required to maintain a minimum grade letter of “C” or better in each course. If a student falls below 75% in any class during mid-semester, the student will be counseled and given a verbal warning. If the student is unable to get above 75% by the end of the semester, the student, would have failed the course and may be dropped from the program. If this occurs in another semester, the student will receive a written warning and will be placed on probation for the remainder of the program and may be subject to termination. Please reference the Academic Flow Chart in the appendix.

GRADING SCALES

100 - 92 = A
91 - 83 = B
82 - 75 = C
Below 75 = Fail

STUDENT ACCESS TO RECORDS

The program maintains academic records for the students and will provide copies of their transcripts upon request.

Under the federal law addressing student records, the Family Educational Rights and Privacy Act, students who are 18 years of age or above have the right to:

- A. Inspect all recorded information about them maintained in any form by the school office (except personal notes maintained by an instructor or other official which he/she does not disclose to anyone else);
- B. Obtain copies when information is released to a third party or when denial of copies would effectively deny the right of inspection;
- C. Give or withhold written consent prior to disclosure to third parties, with certain exceptions (most notably school officials, within the Program who have legitimate educational interest, the program or college to which a student is transferring their records, and in response to a lawful subpoena or court order);
- D. Challenge information in the records by requesting amendment or deletion, obtaining a hearing, and/or adding a statement to the file.

Students do not have a right to view letters of recommendation from those individuals who submitted them for their acceptance into the Program.

CLINICAL POLICIES

CLINICAL PERFORMANCE OBJECTIVES

Competency Based Clinical Education Plan

These four steps illustrate the sequential development of the RT student in the Radiologic Technology Program.

- **Novice:** The novice learns the rules related to a given skill.
- **Advanced Beginner:** The advanced beginner starts to understand how to apply the rules.
- **Competence:** Students develop competence after considerable clinical experience.
- **Proficient:** The result of increased exposure to a wider variety of examinations that permit the student to practice the application of their competency skills quite often with intuition.

CLINICAL AREAS

Students shall remain in assigned clinical areas when not in class or involved in school activities. Students shall keep the supervising technologist informed of their whereabouts. Students must report to the clinical area immediately upon the completion of class. Lunch breaks will be scheduled by the supervising technologist.

RADIOGRAPHY CLINICAL COMPETENCY REQUIREMENTS

The student must meet the clinical competency requirements to take the American Registry of Radiologic Technologists exam.

CLINICAL COMPETENCY

Students must demonstrate competency for various radiographic procedures on patients and will be graded by staff technologists and faculty to ensure all objectives are met. As part of this assessment students will be graded on image evaluation and structure recognition. Students are required to complete a minimum number of competencies as outlined in the clinical internship syllabus.

In order to successfully complete the Radiologic Technology Program, students must rotate through all required clinical areas and demonstrate the ability to work under the supervision of registered technologists.

If five (5) or more supervising technologists express documented concerns regarding a student's performance or behavior, and those concerns impact the student's ability to be safely and effectively supervised, the program may determine that the student is ineligible to complete clinical requirements at ARMC.

Concerns may include, but are not limited to:

- Demonstrated clinical incompetence
- Patient safety concerns
- Consistently mismarking images, or other errors that could lead to misdiagnosis or harm
- Failure to follow clinical protocol or professional standards
- Inability or refusal to accept corrective feedback
- Behavior that places a technologist's professional license at risk
- Unprofessional conduct that disrupts the clinical learning environment

All concerns must be documented and reviewed by program faculty. Affected students may be subject to dismissal based on inability to meet clinical education objectives. All decisions will follow established program procedures, including appropriate documentation and due process.

1. General Patient Care

Requirement: Students must demonstrate competence in all six patient care activities listed below.

- CPR/BLS Certified
- Vital signs
- Sterile and aseptic technique
- Venipuncture
- Transfer of patient
- Care of patient medical equipment

2. Imaging Procedures

Requirement: Students must demonstrate competence in all 36 procedures identified as mandatory. Procedures should be performed on patients; however, up to 10 mandatory procedures may be simulated if demonstration on patients is not feasible.

Students must demonstrate competence in 15 of the 35 elective procedures. Students must select one elective procedure for the head section. Students must select either Upper GI or Barium Enema plus on other elective from fluoroscopy section.

Determination of competency of a student is performed by a qualified Radiology Technologist. All competencies will be reviewed with the student by the Clinical Coordinator.

Only ONE competency may be completed per patient.

Trauma views: Any deviation from standard protocol that would require you to manipulate the tube more than your patient can be considered a trauma view.

FAILED COMPETENCY REMEDIATION

If there is documentation that the student is frequently failing their competency attempts or there is indication of multiple repeats, the student may be required to meet with the Clinical Coordinator or Program Director to discuss their performance, which may result in the student being placed on clinical probation.

CLINICAL EVALUATIONS

Students will be evaluated throughout their clinical experience. Staff technologists and Faculty can evaluate students based on their clinical experience. It is the student's responsibility to ask clinic staff technologists to complete evaluations on them. Students will be evaluated based on their performance in the following categories:

- Patient care
- Professionalism and appearance
- Organization and dependability
- Image quality and radiographic skills
- Interpersonal and communication skills
- Radiation protection practices
- Initiative and attitude
- Critical thinking

EVALUATION SCORING

The student will be put on clinical probation if any of the following occur:

- Average evaluation score of 85% or lower by midterm or end of first semester
- Average evaluation score of 90% or lower by midterm or end of second-fourth semester

INITIATIVE

Judgments about student initiative are constantly being made by staff, including hiring managers. Negative perceptions of student initiative can be formed within seconds and have long-term damaging effects. Such perceptions not only affect the student's ability to find employment, but also reflect poorly on the college. Therefore, staff and instructors will report students who fail to meet the following expectations:

- Students should be **standing up**, alert, attentive and ready to work at all times.
- **Sitting is not permitted** during down-time. If a student is given permission to sit, the student should politely state that they prefer to stand.
- Constructive activities such as cleaning, stocking, practicing, etc. should be done during down-time.
- If constructive activities are complete and the student wishes to study during down-time, approval must be obtained from lead tech prior to studying. Only pocket-size study materials may be used (notecards, small handbooks/notebooks).
- Students should **never demonstrate reluctance or disinterest** in doing exams or other work duties.
- If assigned to an area where procedures are occurring, students must stay in that area and participate in all procedures

CLINICAL SUPERVISION

All Radiography students shall have the appropriate supervision during clinical education at all times. The level of supervision will be determined by the completion of competency evaluations of the student. All students must have direct supervision for every procedure performed until a successful competency evaluation has been achieved. Upon successful completion of a competency evaluation, students may perform procedures under indirect supervision. **All surgical and mobile procedures, including mobile fluoroscopy, and repeat radiographs must be directly supervised regardless of the student's level of competency.** All images which were repeated must be recorded on the student's repeat log. The radiographer who directly supervised the repeat shall sign the repeat log. **Students must have all radiographic images approved and documented by a qualified technologist. Failure to conform to the above-mentioned will result in loss of clinical points.**

Direct Supervision

Under State Law, the radiographer is in the same room with the student observing all aspects of the examination. "Supervision" means responsibility for, and control of, quality, radiation safety and technical aspects of all x-ray examinations and procedures.

Defined by JRCERT as a student under the following parameters:

- 1) A qualified radiographer reviews the procedure in relation to the student's achievement
- 2) A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge
- 3) A qualified radiographer reviews and approves the procedure and/or image
- 4) A qualified radiographer is physically present during the conduct of the procedure

Direct supervision requires that the **radiographer be physically present and observing** the entire procedure, and is required for:

- exams that have not been comped
- surgical procedures
- mobile procedures
- repeat imaging

Indirect Supervision

Once the student has achieved competency, the student may perform procedures under indirect supervision. The supervision is provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. **Repeats must be under direct supervision and all images must be approved by a radiographer before the release of the patient.**

1:1 RATIO

All students and technologists must practice a 1:1 ratio. The number of students assigned to a clinic site shall not exceed the number of staff technologists assigned to the department. When working together there should be no more than one student working with a technologist. It may be temporarily acceptable that more than one student is assigned to a staff technologist during unusual procedures.

FLUOROSCOPY

Students enrolled in the RT Program are permitted to activate the fluoroscopy unit only under direct supervision. All students are expected to be able to fully operate all equipment related to fluoroscopy by the completion of training. Students must document at least 40 hours of clinical training in fluoroscopy. **NOTE:** Before setting up for a Fluoroscopy exam, check the list of updated Fluoroscopy License of Supervisor & Operator for name and expiration date. If the name is not on the list or the license is expired, check <http://rhbxray.cdph.ca.gov/> for current updates. If the information is not there or updated, **STOP!! LET THE TECHNOLOGIST(S) KNOW OF THE SITUATION.**

DISCIPLINE

Any student who breaches the rules and regulations as stated in the Student Manual is subject to disciplinary action. Disciplinary action may involve probation or dismissal.

EXAMPLES OF CORRECTIVE ACTION OFFENSES

The following list serves as a guide and by no means as an all-inclusive list of violations. Comparable offenses will be dealt with according to these guidelines.

Minor Offenses

1. Excessive absence or tardiness (see Attendance Policy).
2. Failure to follow direction of clinical supervisors (Program Director, Clinical Coordinator, Clinical Instructor) and radiologic technologists.
3. Failure to adhere to the Dress Code Policy.
4. Minor inadvertent damage to hospital equipment.
5. Sleeping on duty.
6. Personal phone calls and/or cell phone use which constantly interfere with quality patient care.
7. Violation of Medical Imaging Policy and Procedures.

8. Use of cell phones during class. Phones must remain off or on vibrate.
9. Repeated exiting and entering of the classroom while instruction and/or testing is in progress.
10. Failure to practice ALARA
11. Carelessness, indifference, disregard for peers, staff, patients, or visitors
12. Insubordination.
13. Failure to report an incident involving a patient and/or on-the-job injury.
14. Uncooperative attitude or unkind handling of patients.
15. Misrepresentation of facts surrounding an incident/occurrence.
16. Horseplay which could or does inflict bodily injury.
17. Failure to collimate and/or shield patient when possible (i.e. Abdomen, pelvis, and lumbar spine)

Major Offenses

Major offenses are violations of Program Policies and Procedures, and violations of personal conduct that may result in immediate termination without regard to student's prior record of conduct or status (length of time) in the Radiography Program.

1. Failure to use two patient identifiers prior to performing a radiographic examination.
2. Sending radiographic images without approval from a licensed radiologic technologist.
3. Consistent inability to correctly demonstrate technical skills.
4. Consistently using an incorrect marker on radiographic images.
5. Failure to maintain completed competencies.
6. Failure to verify for pregnancy of childbearing patients
7. Repeated or continued violations of minor offenses.
8. Failure to meet academic and clinical standards as set forth by the Radiography Program (see academic policies)
9. Improper performance of duty, neglect, or any malpractice.
10. Unprofessional behavior.

11. Falsifying records or school related documents.
12. Willful destruction of hospital property.
13. Abandonment of school without authorized permission.
14. Making inaccurate or non-factual defamatory statements about any one or more students, employees, supervisory personnel, patients or visitors.
15. Use of vile, or abusive language.
16. Improper conduct of any kind might result in discredit to the school.
17. Revealing confidential information about a patient's condition, or employees, without authority.
18. Unauthorized possession or removal of hospital property or another's personal property.
19. Failure to meet probationary conditions regarding academic and clinical standards (see Academic Policy).
20. Intoxication or consumption of illegal drugs immediately before and/or during school hours; possessing or selling illegal drugs or other intoxicants during school hours, on school or hospital premises and/or school events.
21. Convictions of a criminal act or jail sentence while a student.
22. Cheating on class or written clinical examinations will constitute automatic termination.
23. Failure to report absences for two consecutive days will constitute automatic termination.
24. Chronic absenteeism and/or tardiness (see Attendance Policy).
25. Sexual harassment toward a patient, student, employee, or visitor.
26. Unauthorized possession of weapons, firearms, or explosives on the premises.
27. Fighting, threatening, or inflicting bodily injury to another student, employee, patient or visitor.
28. Unsafe practices in the clinic, classroom, or any hospital area during the student's presence at ARMC.

CORRECTIVE ACTION

The ARMC School of Radiologic Technology utilizes verbal counseling, written counseling/probation, and dismissal as the means of corrective action for breaches in

hospital / program policies and procedures. The circumstances and severity of the action, will determine the measure to be taken.

VERBAL WARNING

A verbal counseling session will be conducted by program staff utilizing written documentation indicating the circumstance(s) that prompted the minor infraction of the Radiography Program's policy and procedures. This verbal session will include a reference to the specific breach in policy/procedure which has been violated, any adverse consequences resulting from the violation(s), and the type of behavior expected in the future. The verbal counseling document is then signed by the program staff and student, indicating that the information has been discussed and brought to his/her attention. A copy of the document will be provided to the student. The program staff member will maintain a copy for their records.

WRITTEN/PROBATION

The Program Director will initiate a written reprimand for a repeated infraction(s). If a student is placed on probation for a particular incident, the student will remain on probation until the end of the program for that particular incident. The documentation for placing a student on probation will include the policy or procedure which has been violated, consequences resulting from the violation, the type of behavior expected during the probationary period, and the terms of probation. This will be signed and dated by the student and program official. The original will be placed in the student's permanent file. Copies will be provided to the student.

DISMISSAL

Program dismissal occurs when a student or candidate is no longer eligible to continue in the program due to inability to meet requirements or expectations. A student may be subject to termination for repeated minor violations or for first-time major offenses. In some circumstances a student may be terminated without either advance notice or previous corrective action, or both, based on the determination that the incident warrants such a dismissal. Dismissal must be reported for an ethics review with the ARRT when applying for a license. Dismissal may occur due to a variety of reasons, which include, but are not limited to:

- Non-compliance with admissions or orientation requirements.
- A failing grade of less than 75% in any program course. This includes final grades and current grades at the time of withdrawal.
- Violations of the ARMC Student Manual, ARMC Hospital Policy, or ARRT Student Code of Ethics.
- Violation of course syllabus policies or failure to adhere to program guidelines.
- Violations of the terms of a probationary period.
- Non-compliance with physical and health requirements set by the program.
- Dismissal from a clinical site.
- Excessive absenteeism (over three days of absence without prior notification or failure to withdraw properly).

- Failure to pass a background check or drug screen as required by the program.
- If five or more radiologic technologists decline to work with a student due to concerns about licensure risk, safety, or other valid professional reasons.
- Failure to meet program goals and student learning outcomes as outlined in the Student Handbook at any point during the program.
- Unprofessional behavior or conduct that disrupts the learning environment or violates professional standards.
- Failure to demonstrate clinical competency or essential skills in patient care, safety, or imaging practices as evaluated during clinical rotations.
- Failure to follow program deadlines, such as for assignments, paperwork, or documentation, which may impact the progress of the program.

APPEALS PROCESS

A student who has been dismissed from the program has the option to appeal for reinstatement within 30 days of the dismissal date. To begin this process, the student must complete and submit an Appeal for Reinstatement Form, along with any necessary documentation, to both the ARMC School of Radiologic Technology Program Director and the Faculty Co-Chairs of Allied Health Services at Crafton Hills Community College. Copies of the school policies and relevant dismissal documentation will be provided to the Faculty Co-Chairs for their review. The Faculty Co-Chairs will assess the information provided and make a final determination on whether the students' situation justifies full reinstatement, probationary reinstatement, or continued dismissal.

GRIEVANCE PROCEDURE

In accordance with Board Policy 5530, a student may initiate grievance proceedings against a college employee for any of the following reasons:

- Any act or threat of intimidation, harassment, discrimination or physical aggression.
- Any arbitrary action or imposition of sanctions without proper regard to due process as specified ed in college procedures.

Every effort shall be made to resolve a student complaint at the lowest level possible. A student must first attempt to resolve the issue directly by contacting the college employee most closely related to the origin of the alleged problem. Students not satisfied with the results of this attempt may then confer with the successive supervisors, Faculty Chairs, most closely related to the problem. The supervision succession to follow is generally the faculty chair, coordinator or supervisor, the appropriate dean, and then the appropriate vice president. If the alleged problem is still unresolved, the student may request a formal hearing by submitting a written request to any manager or employee in any area for delivery to the Vice President of Student Services who will assess which manager or vice president is to oversee the grievance process.

READMISSION POLICY

If the student is eligible for reinstatement after dismissal, the following steps must be completed:

COMPLAINTS OF PROGRAM NON-COMPLIANCE WITH JRCERT STANDARDS

The program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). A copy of the JRCERT standards will be made available to any student upon request. If a student has an allegation regarding the program being in non-compliance with the Standards it should be directed in writing to the program director. The program director will have ten (10) working days to respond to the allegation. If the response does not satisfy the complaint, the program director will have ten (10) additional working days to call a special meeting of the Advisory Board. At the end of this period the Advisory Board will respond to the allegation. If the complaint is not satisfied the program will send the complaint to the JRCERT along with the programs responses that have been given to the student.

Students may directly contact the JRCERT at:

20 North Wacker Drive, Suite 2850

Chicago Illinois 60606-3182

Tel: (312) 704-5300 E-mail: mail@jrcert.org Web site: <http://www.jrcert.org>

DISABILITY

If a student requires disability leave at any time during the program, they must provide documentation to the Program Director. Their ability to continue or return to the Program will be assessed individually based on the nature and severity of the disability. This assessment will consider verification or recommendations from a physician or relevant specialist regarding the student's capacity to resume studies. The final decision will be made by the Advisory Committee.

REASONABLE ACCOMMODATION

If a student has a disability either before or during their enrollment in the program and needs reasonable accommodations, they can choose to inform the Program Director and/or Clinical Coordinator. This information will be recorded in the student's file. Every effort will be made to reasonably accommodate the student's needs. Additionally, the student will be referred to Student Accessibility Services at Crafton Hills College for further support.

STUDENT PREGNANCY

Pregnancy is not considered a disability.

PROCEDURES

1. Female students in the radiologic technology program who become pregnant may voluntarily notify the Program Director in writing as to their pregnancy and the estimated date of delivery. They must provide a doctor's note confirming the pregnancy. **If the student chooses, after voluntarily informing the Program Director in writing of her pregnancy, she may voluntarily withdraw that declaration by written request. *With this written withdrawal of declaration the student will NOT be considered pregnant.* The student may also choose not to declare the pregnancy at all.**

A student who declares her pregnancy while in the program has the following options:

1. Declare the pregnancy in writing and continue in unmodified clinical rotations.
2. Declare the pregnancy in writing and request a modification of the clinical rotations to avoid fluoroscopy and portable rotations.
3. Declare the pregnancy in writing and take a leave of absence from the clinical portion, continuing the didactic portion only.
4. Declare the pregnancy in writing and take a leave of absence from the program completely and return when the gestation period and recovery is over.

2. Should the student choose options 2, 3, or 4, any clinical and/or didactic training missed must be made up before the certificate of completion is issued. The student will be given the option to make up clinical training in a manner agreed upon by the student and the program director. The student will not be required to be in clinical training more than 40 hours per week. Didactic work will be made up by arrangement with each instructor and the director's approval. Program completion may not occur within the normal two-year time frame.

The student may use the form letter provided on the following page to declare the pregnancy and indicate which option they choose. They may also change to a different option as the pregnancy progresses, but this must be resubmitted in writing to the Program Director. For example; the student chooses option 1 at the beginning of the pregnancy and then in the 6th month of gestation change to option 3 for the remainder of the pregnancy. Again, all clinical and didactic training must be completed before a certificate is issued.

FORM LETTER FOR DECLARING PREGNANCY

This form letter is provided for your convenience. To make your written declaration of pregnancy, you may fill in the blanks in this form letter or you may write your own letter.

To: _____
Radiography Program Director

I am declaring that I am pregnant. I believe I became pregnant in the month of _____, _____. I understand that the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem. I also understand that my clinical training can exclude higher dose areas such as portables, surgery, fluoroscopy and special procedures (option 2 - recommended) and that this portion of my clinical training will be postponed until after the pregnancy. This may delay the date of my graduation from the program.

I select the following option:

- 1. Declare the pregnancy in writing and continue in unmodified clinical rotations.
- 2. Declare the pregnancy in writing and request a modification of the clinical rotations to avoid fluoroscopy and portable rotations.
- 3. Declare the pregnancy in writing and take a leave of absence from the clinical portion, continuing the didactic portion only.
- 4. Declare the pregnancy in writing and take a leave of absence from the program completely and return when the gestation period and recovery is over.

I have read and understand this policy and wish to continue in the program.

Your signature

Date

Your Printed Name

STUDENT CONDUCT

DRESS CODE

Dress codes may seem overly rigid to some; however, if one understands the nature of the Hospital setting, this will not be the case. All health care students must recognize that they represent the medical center to both the patient and his/her family. Given the emotional stress associated with illness, it is easy to see the need for neatness and good taste in one's dress and manner. The students must comply with all hospital and department guidelines and regulations.

The following are general guidelines. When a question arises as to appropriateness of dress, the supervisor will decide the issue.

- A. Mustaches and beards are to be kept trimmed at all times. Long hair is to be tied back in such a manner to not fall below the shoulders.
- B. Proper body hygiene requires a clean body, including teeth, fingernails and daily use of deodorant. Acrylic nails cannot be worn.
- C. Excessive use of perfume and cologne, cosmetics and jewelry is to be avoided.
- D. Uniforms must be clean, pressed and in good repair.
- E. All students are required to wear uniforms approved by the Program Director. Always look professional. Uniform pants must be worn so as to cover undergarments. No "sagging" is allowed.
- F. No sandals, open-toed shoes, platforms, crocs, or shoes without back-straps or a flexible sole will be allowed.
- G. All students are required to wear their Medical Center ID, radiation badge and have in their possession: right and left markers and ink pen.
- H. Students must adhere to all Hospital and Medical Imaging Department policies for dress and personal appearance. **Any tattoos must be covered and not visible. Facial or tongue piercing jewelry are NOT to be worn during school hours.**
- I. Students must wear "Royal Blue" scrub style uniforms at all times.
- J. **OR scrubs may only be worn by students when they are assigned to the OR day or evening rotation.** If a student is wearing OR scrubs and they are not assigned to the OR they will be sent home to change. The only exception will be if their student uniform was soiled during a procedure and they need to change in order to finish their

shift. If this occurs, the student shall inform the Program Director or Clinical Coordinator that they had to change.

IDENTIFICATION BADGES

All students will be issued an ARMC ID badge. You must wear this ID on your uniform at all times while in the clinical areas. You must wear the badge so that the picture faces forward and shall not put any adhesive stickers on the badge that may cover the picture or name. It may be necessary to show this badge from time to time upon entering the hospital premises. Should you lose your ID badge, please notify the school officials immediately. Human Resources will issue a replacement ID badge at the cost of \$10.00.

RADIATION BADGES/ LEAD MARKERS

Radiation monitoring badges are supplied by ARMC and must be worn at all times during clinical and didactic education. It is the student's responsibility to turn in their badge at the end of each quarter and replace it with the current one.

One set of Right and Left image markers with your initials will be supplied by the school. Any replacement cost is the responsibility of the student. Students and staff are required to mark each image taken. It is mandatory that you have a set of image markers at all times. It is highly recommended that the student buy a second set of markers. As students, the markers must be the same colors as the original set of markers. **Red for right and blue for the left.**

PROFANITY

Use of profane language will not be tolerated and may lead to disciplinary action and lowering of the clinical grade. A report reflecting the situation in which the student used profanity or language inappropriate to the workplace will be placed in the student's file. Professionalism is mandatory.

SMOKING/VAPING

Smoking or vaping is prohibited in all areas of the Medical Center. Students and all others including employees and patients who wish to smoke/vape must do so outside the building, in the designated areas. (See Standard Practice Manual in the Radiology Manager's office.)

USE OF ALCOHOL OR DRUGS

Reporting to work or school related events under the influence of alcohol or drugs shall lead to **automatic termination without probation**. For further details, see the standard practice manual, which is located in the Radiology Manager's office.

TELEPHONE USAGE

Personal phone calls should be limited to scheduled break time except for an emergency. Personal telephone calls are to be kept to a minimum. **Telephone calls are to be returned at times that will least interfere with the operation of the department. Students are not to leave class to answer any phone calls. Cell phones shall be on vibrate in the classroom.** NO personal phone calls are to be made or taken in patient care areas. Cell phones may be used during class time but only for educational purposes. **Students found to be abusing cell phone use during clinical will have clinical points deducted.**

PERIOD OF PROBATION

All students accepted into the Program will be on probation for the first semester. If any offenses listed under Examples of Corrective Action Offenses occur during this probation period the student may be subject to termination from the program.

DOCTRINE OF PERSONAL LIABILITY

According to the legal Doctrine of Personal Liability; "Every competent person is responsible for his own negligent acts or omissions." When the individual is a *specialist*, he/she is expected to exercise that degree of skill and knowledge which is ordinarily possessed by other similarly trained and educated specialists.

A student, for example, as an individual, can be held liable for his/her own negligent actions, irrespective of the presence or absence of co-defendants, such as the hospital, radiologist or other physicians and staff. The key emphasis for the student radiographer is to follow prescribed school & department policies, and to only work within their scope of knowledge and skill.

HOSPITAL AND MEDICAL IMAGING DEPARTMENT POLICIES

Students are subject to the policies of ARMC and the Medical Imaging Department. Policy manuals are available in the department in the manager's office, in the diagnostic supervisor's office, in Radiology Tools folder under Policy and Procedures, and on the ARMC Intranet under Policies. These policies are subject to change as dictated by the hospital. Students will comply with these policies.

HEALTH STREAM

Students will follow the same procedures as hospital employees in regard to completing continuing education on the hospital system. The students are responsible for completing all assignments under the **TO DO** list. If there is a delinquent in completing any assignment, points will be deducted from the clinical grade during that semester.

RADIATION MONITORING

You will be issued a radiation monitor badge from Landauer® Laboratory that is to be worn on your uniform in a position that is exposed to prevailing radiation, preferably at the collar level. You must wear the badge at all times while you are at school. Badges are issued once per quarter. It is the student's responsibility to change their badge each quarter for the current badge. New badges will be placed on the student bulletin board in control when they become available on the 1st of each quarter. A lost badge will result in points lost in clinical.

To insure proper measurement of the radiation badge, the following precautions should be taken:

- Do **not** leave the radiation monitor in hot car or sun.
- Do **not** launder the radiation monitor.

Upon completion of the laboratory measurement, a quarterly report will be posted in the control area of the department. **The student must check the report and initial next to their name indicating that they have reviewed their badge reading.** This must be done within 10 days of the report being posted. The Department Radiation Safety Officer and the

Program Director and/or Clinical Coordinator will review all badge readings and discuss any high reading with the individual student. If the badge reading is higher than Level I (pg 23), the Director will report the high reading to the Radiation Safety Officer, (RSO) who will report it to the Radiation Safety Committee and it will be determined if a report should be filed with the California Department of Public Health - Radiologic Health Branch.

A few simple rules of conduct and the presence of adequate protection in the physical set-up will greatly reduce unnecessary radiation and keep exposure

As Low As Reasonably Achievable - **ALARA**:

1. Close all examining room doors during radiographic procedures.
2. Limit the amount of time spent in the room.
3. Wear protective shields such as lead aprons, gloves, etc., during fluoroscopic examinations or examinations requiring you to be in the room during exposure.
4. Remember that distance is the best protection from radiation. Always stand as far as possible from the direct beam.

RADIATION PROTECTION IN THE CLINICAL AREAS

STUDENTS MUST NEVER HOLD PATIENTS OR IMAGE RECEPTORS DURING ANY RADIOGRAPHIC EXPOSURE

No excuse will be acceptable for not taking the proper radiation safety precautions when performing portable exams or any other radiographic procedure. Lead aprons **must** always be worn when in the room when ionizing radiation is being produced. Please take notice of the California Department of Public Health form 2346 posted in the department. The "Notice to Employee Standards for Protection Against Radiation" also applies to students.

The mechanism for reporting accidents, incidents, and/or errors related to radiation safety is in accordance with Title 10 Code of Federal Regulations, Part 20, Subpart B, section 20.1101 and Subpart C, section 20.1201 which is as follows:

1. *If a student has a higher than Level I badge reading, Landauer will advise us in their report. The RSO, upon review of this report quarterly, will contact the student immediately to investigate a possible cause for the high reading. **If a report is made to CDPH-RHB, the student will be pulled from clinical training in fluoroscopy and portable rotations until CDPH-RHB responds. Corrective action will be taken with the student to ensure against recurrence and a review of the ALARA principles will be completed.***

2.

Description	Level I	Annual Limit
Total Effective Dose	1,250 (mRem)/quarter	5,000 (mRem)
Deep Dose Equivalent (DDE)	12,500 (mRem)/quarter	50,000 (mRem)
Lens Dose Equivalent (LDE)	3,750 (mRem)/quarter	15,000 (mRem)
Shallow Dose Equivalent (SDE)	12,500 (mRem)/quarter	50,000 (mRem)

Embryo/fetus (entire pregnancy)	125 (mRem)/quarter	500 (mRem)
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MAGNETIC RESONANCE IMAGING (MRI) SAFETY PRECAUTIONS

Standards and monitoring are necessary to assure the safety of students rotating through the MRI division.

Due to the safety precaution of the magnetic resonance environment, students are required to complete the Arrowhead Regional Medical Center Department of Radiology – MRI Patient History and Screening Questionnaire during orientation. These are the same questionnaire that the patients fill out before entering the MRI environment. Students are also required to complete the Annual Employee Update which includes MRI safety as one of the categories. Students with a medical history from the listing below may not be allowed to enter the magnet room and should limit their observation to the control area outside the magnetic field:

Medical history of:

- a. aneurysm or surgical clips
- b. cardiac pacemakers
- c. middle ear prosthesis (hearing aid)
- d. ocular metallic foreign body

Due to safety precautions and the ability of the magnet to deflect metallic particles it is advised that any student with an identified medical history adhere to the above mentioned restriction during this rotation. A student may also ask to be excused from the MRI rotation based on their medical history.

Students are to notify the Program Director or Clinical Coordinator to discuss this matter and decide on an alternate clinical rotation.

WORK RELATED INJURY FOR R.T. STUDENTS

Students registered for clinical are covered for work related injuries. If a student is injured during clinical, the student must notify the Clinical Coordinator or Program Director immediately. If the injury occurs on the evening shift, the control supervisor will assist the student.

Acute injury: Needle stick, laceration, a fall causing possible fracture, etc. These types of injuries will be addressed through the ARMC Emergency Department. An incident report is to be completed by the student and supervising technologist.

Non-acute injury: Neck or back strain, injury to a joint, etc. These types of injuries will be addressed through SBCCD Human Resources Department. If an injury occurs and the

student prefers not to have medical care, it must still be documented, in case symptoms arise in the future.

The student must complete required forms provided by the Clinical Coordinator or Program Director. If anyone witnessed the incident, that individual must fill out a report. The forms that must be filled out by the student are:

- Employee Report of Injury/Illness
- Authorization for Medical Treatment
- Workers' Compensation Claim Form (DWC 1)

The form that must be filled out by the witness (if applicable) are:

- Witness Report of Injury/Illness

INFECTION CONTROL

The watch word of any infection control program should be prevention. Disease specific and universal precautions should be followed at all times. See the Infection Control, Section III, located in the Radiology Manager's office. Personal Protective Equipment (PPE) is provided to all students.

REPORTING COMMUNICABLE DISEASES

Students who have been diagnosed as having any communicable disease(s) should immediately contact the Program Director and/or Clinical Coordinator. Arrangements will be made with appropriate health care professionals concerning any special precautions that need to be taken. The procedure outlined in the Medical Center's Policy Manual for Infection Control will be followed. A copy of this manual is kept in the office of the Radiology Manager. Student confidentiality will be maintained.

GRADUATION REQUIREMENTS

GRADUATION

Graduation is held at the end of the twenty-two-and-a-half-month program. The graduate will earn a certificate/diploma indicating successful completion in Radiologic Technology from ARMC and an Associate of Science degree from Crafton Hills College.

The school shall not permit those students to graduate, or to be certified as eligible for registration by the ARRT/CRT, who have failed to satisfactorily complete all the courses required, and have not been checked off on all required radiographic examinations and laboratory assignments.

All students who have completed all graduation requirements are eligible to take the registry examinations certified by the ARRT and CRT.

Graduation requirements are as follows:

- All classes listed in the school curriculum must be completed with a passing grade of "C" or better.
- All laboratory assignments shall be completed and signed off by the instructor.
- All clinical hours must be completed. The student must demonstrate clinical competency by passing clinical evaluations administered by the Clinical Coordinator.

The certificate of completion will be held until all hours are made up. Authorization for ARRT license will be withheld until such time that all hours are completed, including all make-up hours.

All students should participate in student fundraisers, fieldtrips and graduation ceremonies.

Student records of attendance and course grades, (transcripts) will be maintained by the program indefinitely.

All ARRT and state exam pass rates will be recorded and provided as requested by Accreditation officials.

GRADUATION AWARDS

There are three types of awards that **may** be presented at graduation.

1. **Clinical Achievement Award:** This award will be the result of voting by all Radiology Staff members.
2. **Academic Achievement Award:** This award will be the result of the **highest number of points** during the program.
3. **Cristi Hall/Michael Scott Award for Excellence:** Awarded to a student for “All Around Excellence”. Selection is made by the Program Director and Clinical Coordinator

To qualify for an award, graduates must meet the given award criteria:

Clinical Achievement Award:

1. Superior clinical cognitive evaluation scores
2. Commendable attendance record
3. Superior performance evaluation scores
4. Clinical Instructor/Faculty recommendations.

Academic Honor Award:

1. Presented to the student(s) who are recognized for their academic excellence in their didactic education.
2. This award will be based on the **highest number of points earned** over the 22.5-month program length.
3. Commendable attendance will also play a role in the presentation of this award.

Cristi Hall/Michael Scott Award of Excellence:

This award is given in memory of Cristi Hall, RT(R) She exemplified what it is to be a “care giver” and a “team player”. The recipient of this award is one who portrays those same characteristics.

STUDENT HANDBOOK ACKNOWLEDGEMENT



I have read the Arrowhead Regional Medical School of Radiologic Technology Student Handbook and understand the policies and procedures contained therein. I understand that I will be subject to all policies found in this handbook, the Arrowhead Regional Medical Center Policies and Procedures, and all course syllabi.

Printed Student Name

Student Signature

Date