

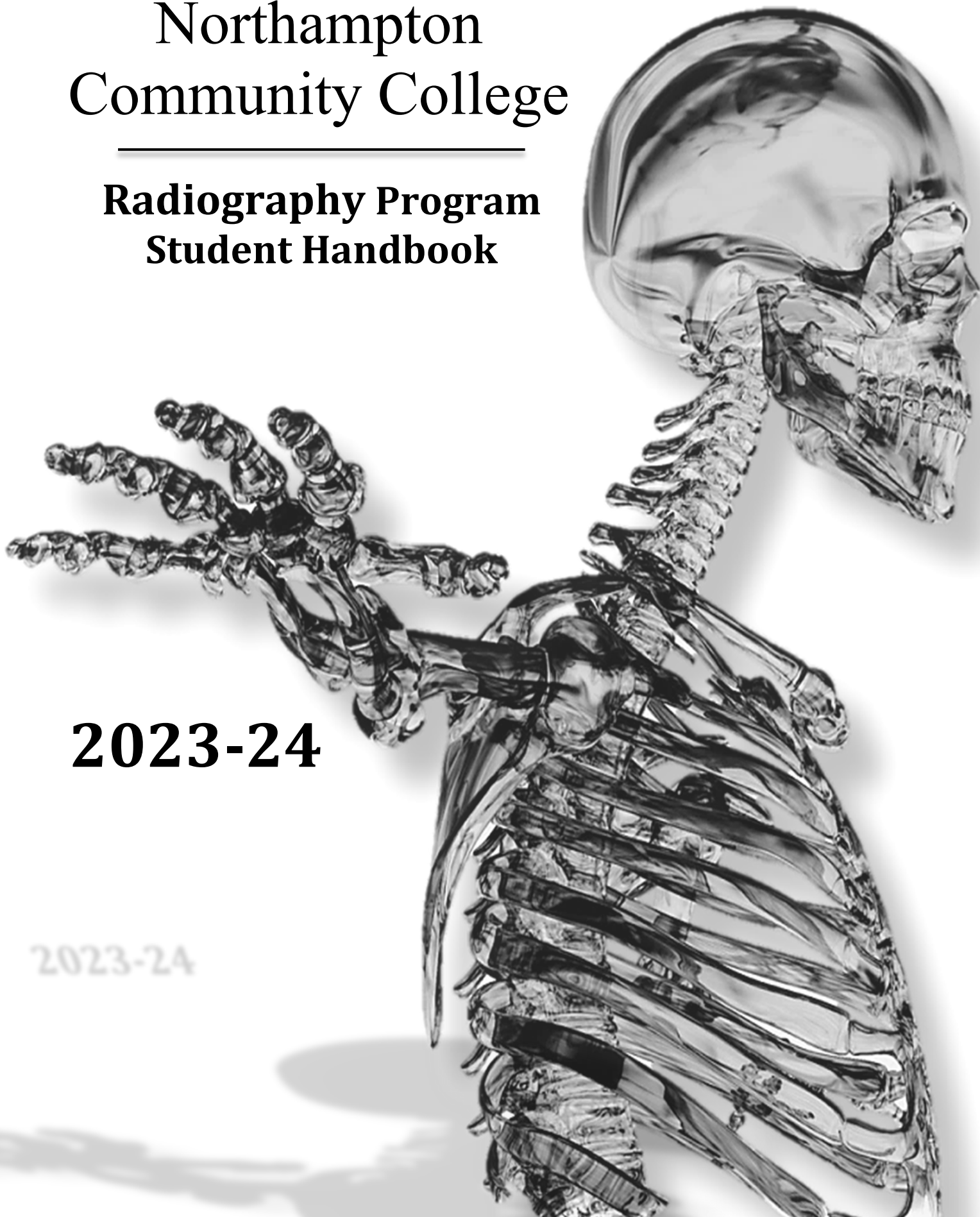
# Northampton Community College

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## Radiography Program Student Handbook

**2023-24**

2023-24



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## Introduction

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The Northampton Community College (NCC) "Radiography Program Student Handbook" is intended to be used as an information source and a reference for the program's policies and procedures.

To keep abreast of changes in the College's policies and procedures, the reader is referred to either the College Catalog or the NCC Student Handbook for the most current information.

All the items listed in the "Radiography Program Student Handbook" are to be adhered to by each student during their radiography education. For this reason, each student is required to read and understand the contents of the document. If something is not understood, it is the **student's responsibility** to ask for clarification. A signed paper verifying that the student has read and understands the contents of the "Radiography Program Student Handbook" will be placed in their program file.

In a dynamic academic environment, the policies, procedures, and college/program information are subject to review and revision on a regular basis. The program's timeline for revising the "Radiography Program Student Handbook" is yearly. However, if there is a change in any information prior to the online posting or paper distribution of a new edition, you will receive a memorandum, addendum and/or new handbook describing the revisions.

The Radiography Program Advisory Committee endorse the "Radiography Program Student Handbook."

## Accreditation

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### Joint Review Committee on Education in Radiologic Technology (JRCERT)

The Radiography Program at Northampton Community College is accredited, and has been awarded the maximum accreditation term of 8 years, by the:

Joint Review Committee on Education in Radiologic Technology (JRCERT)  
20 North Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
(312) 704-5300  
email: [mail@jrcert.org](mailto:mail@jrcert.org)

The JRCERT Accreditation Standards for Radiography and the Program's Effectiveness Data may be found online at [www.jrcert.org](http://www.jrcert.org). The program is due for its next accreditation in 2024.

### Middle States Commission on Higher Education (MSCHE)

Northampton Community College is accredited by the Middle States Commission on Higher Education (MSCHE), 3624 Market Street, Philadelphia, PA 19104, 267.284.5000. The Commission on Higher Education is an institutional accrediting agency recognized by the U.S. Secretary of Education and the Commission on Recognition of Postsecondary Accreditation.

### Pennsylvania Department of Education (PDE)

Northampton Community College is authorized as an institution of higher education by the state of Pennsylvania.

### State Licensing & SARA (State Authorization Reciprocity Agreement)

If you are a Northampton Community College [student living outside of Pennsylvania](#) or intending to complete an internship or clinical placement outside of the state in a NCC program leading to professional licensure, you should review requirements on the state board website to make sure that the program qualifies.

Licensure requirements vary from state to state, and you may require additional authorization from the professional licensing agency in that state. Participating in a program from outside of Pennsylvania, if not properly authorized by that state's professional licensing board, could result in loss of licensing eligibility. If you need help or have questions, please contact the Radiography Program Director for more information.

Most states accept American Registry of Radiologic Technologists (ARRT) Certification and Registration for licensure purposes. Some states have additional exams for procedures e.g., fluoroscopy in California. View state licensure information here: [Individual State Licensure Information](#)

## Mission, Vision, and Statement of Values of NCC

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### NCC Mission

Recognizing that students are the primary reason that Northampton Community College exists, we seek to provide excellent, accessible, and comprehensive learning experiences in partnership with the dynamic, diverse communities we serve.

### NCC Vision

As one of the leading community colleges in the nation, we will:

- Promote the highest level of student success in achieving academic, personal, and professional goals.
- Provide state-of-the-art education and training in every community we serve.
- Be the college of choice for innovative programming.
- Encourage every member of our community to have a lifelong connection to the college.

Respect and affirm the dignity of all people.

### NCC Statement of Values

We believe that learning thrives when there is a sense of curiosity and excitement about the world in which we live. As such, we value:

**Excellence:** Quality in the educational and training experiences that we provide, which is based on our dedication to teaching and learning

**Innovation:** Creative problem solving, responsiveness, entrepreneurship, and our ability to adapt quickly to a changing world

**Sustainability:** Commitment to the long-term health of the institution, the community, the economy, and the environment

**Accountability:** Institutional and individual responsibility for our actions, growth, and development

**Integrity:** Academic and personal honesty, fairness, ethical conduct, and respect for others in our learning and working environments

**Diversity, Equity, and Inclusion:** An environment that fosters and values every person's contribution, celebrating the ways in which cultures, identities, and backgrounds enrich the college community and enhance our academic excellence.

**Engagement:** Involvement in and collaboration with the college, local and global communities

## Mission, Goals, and Learning Outcomes: Radiography

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### NCC Radiography Program Mission

Our mission is to provide student radiographers with an innovative and educationally sound program that will enable them to deliver quality patient-centered care, use radiation judiciously and display professionalism throughout their career.

### NCC Radiography Program Mission with Clinical Education Settings

Through mutual respect, in a learner-centered environment, we will collectively educate students to embrace the following components of the profession:

- Effective communication
- Problem solving
- Professionalism
- Radiation safety
- Technical competency and proficiency

### NCC Radiography Program Goals (G) and Learning Outcomes (O)

To graduate students who:

1. Are clinically competent (G)

The students will be clinically competent when they are able to:

- A. Position accurately and in a timely fashion to visualize the appropriate anatomical structures (O)
- B. Select technical factors that will produce an optimal image (O)
- C. Employ principles of radiation protection (O)

2. Communicate effectively through word choice, level of explanation, and method of delivery. (G)

The students will be able to communicate effectively when they are able to:

- A. Write an accurate patient history. (O)
- B. Communicate effectively in written and oral formats with patients, members of the health care team, and the community. (O)
- C. Listen, understand, and evaluate what the speaker is saying. (O)
- D. Speak using effective word choice, appropriate terminology, level of explanation and method of delivery. (O)

3. Analyze situations using critical thinking to foster better patient care. (G)

- A. Employ critical thinking skills to use appropriate alternative patient positioning and equipment configurations based on patient condition. (O)
- B. Critique the image and evaluate radiographic quality. (O)
- C. Manipulate exposure factors to compensate for patient and image variability while minimizing patient dose. (O)

4. Employ the five components of being a true professional: character, attitude, excellence, competency, and conduct. (G)
  - D. Demonstrate professional attitude, ethics, and sound judgement. (O)

### **American Registry of Radiologic Technologists (ARRT) Standards of Ethics**

This Code shall serve as a guide through which Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, other members of the medical care team, health care consumers, and employers. The Code is intended to assist radiographers in maintaining a high level of ethical conduct. For the ARRT Code of Ethics, see the [ARRT Standards of Ethics](#) .

### **Practice Standards by the American Society of Radiologic Technologists (ASRT)**

Please refer to the following link to read about the profession's practice standards for radiographers: [ASRT Practice Standards, Glossary & Advisory Opinion Statements](#)

### **Certified and Registered Radiographer**

The use of the term "Certified" in this handbook denotes that the individual has satisfied The American Registry of Radiologic Technologists (ARRT) standards for initial certification (met the education, ethics, and exam standards) as well as the standards for continued registration.

## **NCC Radiography Program Committee and Clubs**

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### **Radiography Program Advisory Committee**

The Radiography Program Advisory Committee reviews and evaluates the program's assessment plan and outcomes. In addition to academic matters, the committee advises the director on matters of interest regarding the program e.g., student and staffing issues, clinical site technology changes etc.

The committee is composed of the Program Director, Program Faculty, the Program's Medical Advisor, Radiologists, Radiology Administrators, Clinical Preceptors, the current CHARTS President (or a representative CHARTS' officer) and an Alumnus of the program.

One meeting is held each Fall semester and a program update is sent electronically in the Spring semester.

Student input to the Advisory Committee is welcomed and is directed through the student's CHARTS organization via the current CHARTS President of each class (or a representative CHARTS' officer). As stated in the CHARTS' by-laws, student issues should be submitted in writing to the Program Director two weeks prior to the meeting to place the item(s) on the agenda for distribution to the members.

### **College and Hospital Association of Radiologic Technology Students (CHARTS)**

According to the [CHARTS by-laws](#), each Radiography Program student is automatically a member of CHARTS (College and Hospital Association of Radiologic Technology Students). The objectives and purposes of this club are to:

- Improve and enhance the radiography student's college and clinical education.
- Develop a cooperative relationship between CHARTS, NCC, and the affiliate hospitals.
- Advance the Allied Health profession of radiography.

CHARTS has been named and nominated more than once for club of the year. Involvement is crucial for its success for the following:

- To be used by the student as a vehicle to affect change in both the didactic and clinical components of the Radiography Program.
- To perform both campus and community service activities through either fundraisers or volunteer service.
- To sponsor a trip to a student/educator seminar each academic year.

### **Lambda Nu (ΛN) National Honor Society for the Radiologic and Imaging Sciences**

For more information than what follows: please visit [Lambda Nu Website](#). Scholarships are awarded to members of Lambda Nu: [Lambda Nu Scholarship](#). Click on the following for [Lambda Nu by-laws](#) included in this handbook.

## Admission and Placement Policies

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### Transferring In Non-Radiography Credits

Northampton Community College will accept non-radiography credits when transferring from another institution if one or more of the following criteria are met:

Credits earned from:

- U.S. colleges and universities that are regionally accredited. (Coursework from other institutions not regionally accredited will be reviewed on a case-by-case basis).
- Foreign institutions that are evaluated by a member of a recognized evaluation agency like World Education Services Inc. or Educational Credential Evaluators Inc. and a copy of the evaluation sent directly to NCC. (For more information concerning an evaluation service provider, please contact the NCC Admissions Office).
- The military provided the College on the official DD295 form, AARTS, or Joint Services transcript.
- The course grade is C or better. Courses taken on a pass/fail basis may be accepted only if the official transcript states that a "pass" grade is equivalent to a C or above.
- The course content is equivalent to a Northampton course.
- The course is applicable to the student's Northampton program.

Official transcripts are mailed or sent electronically to the Admissions Office directly from the student's previous college, university, or other post-secondary educational institution.

Admissions determines transferability of credits for new students and change of majors into the allied health majors; the Registrar determines all other transferability of credits. Please refer to "*Transferring In*" in the current [NCC College Catalog/Student Handbook](#) for details.

### Radiography Coursework from Other Programs

Radiography specific coursework (courses coded RADT) must be completed in the Northampton Community College Radiography program. Clinical, lab, and lecture coursework is synchronized throughout the duration of the program. This ensures that our graduates have satisfied all the components required to take the Registry examination.

### College Level Examination Program (CLEP) and Challenge Exams

Students may earn credit through CLEP or Challenge Exams. Please refer to "*Advance Placement Policy*" in the [NCC College Catalog/Student Handbook](#)

### Housing

Space is available on campus for students in the residence hall. There is also a list of off-campus housing opportunities available in the Student Activities/Housing Office, College Center 252, 610-861-5324 or visit their website: [NCC Housing & Residence Life](#)

## Before Admission

### Radiography Special Admission Requirements

The following is information taken from "Special Admission Requirements" in [NCC College Catalog /Student Handbook](#):

- Completion of high school diploma or equivalent
- High school biology with lab with "C" or better (Or BIOS 115 with "C" or better) and two units of Algebra (OR MATH 022 and MATH 026, OR MATH 028) with "C" or better
- Minimum overall GPA of 2.5
- Complete Career Assessment Form (CAF) after virtual shadowing in radiography
- Information session and interview for competitive applicants

## After Admission

### Radiography Essential Admission Requirements

Upon acceptance into the program, students will be given a Radiography Acceptance Checklist Packet that provides a timeline for completion of the essential program admission requirements. Subsequent sections describe in further detail for each requirement.

- [State, FBI, and Child Abuse Background Check](#)
- [Verification of Student Release of Information Form for Allied Health Clinical Sites](#)
- [Verification that Medical Marijuana Policy is understood](#)
- [Basic Life Support \(BLS\) certification for Health Care Providers: CPR](#)
- [Health insurance](#)
- [Physical Exam and Required Immunizations and Titters](#)
- [Drug screen](#)
- [Verification that the Essential Functions Technical Support Standards can be met](#)
- [Verification that Health Insurance Portability and Accountability Act of 1996 is understood](#)
- [Verification of Magnetic Resonance Imaging \(MRI\) Safe Practices](#)

### Introduction: Health and Wellness Center

The [Health and Wellness](#) Center, located in College Center 120, 610-861-5365, is managed by St. Luke's Hospital and offers professional health care services to students and staff. Visit NCC [Health and Wellness](#) website for current hours: [NCC Health and Wellness Center](#). Any emergencies at other hours should be referred to [Public Safety](#) at 610-861-5588.

Medical documentation is uploaded into a secure site, myRecordTracker©, for review by the [Health and Wellness](#) Center's Professional Health Staff. Non-medical documentation is uploaded for review by the Program Director.

The Nurse at the Health and Wellness Center reviews the health forms and medical documentation to ensure that the medical/immunization requirements have been satisfied prior to the start of clinical rotations. This information is strictly confidential. Personal medical questions should be addressed to the



Nurse. General questions related to the health requirements may be addressed to the Nurse, Radiography Professional Clinical Student Supervisor, and/or the Radiography Program Director.

### Failure to Comply with After Admission Requirements

Failure to comply is a violation of the affiliation agreement with the Radiography clinical sites. The Radiography Program Director and NCC Health Department work together to ensure all required documents are updated, uploaded, and approved by various deadlines. It is the student's responsibility to comply with the published deadlines to ensure their seat in both the program and the clinical site.

The following can occur if the Radiography student is non-compliant:

- Forfeiture of seat in Radiography Program
- Withdrawal of housing privileges if occupant in Residence Hall
- A "hold" placed on registration process
- Suspension from clinical practice program
- Withdrawal from Radiography Program

### Address, E-mail, and Telephone Number Changes

It is imperative to update your mailing address, e-mail address, or telephone number for the departments to contact you. These items are populated through the Workday© application. A delay of communication may forfeit your seat into the program. If concerned, please contact the records department and the Radiography Department Secretary for any changes.

### Criminal Background Check

After acceptance into the Radiography Program, a criminal background check for each student (State, FBI & Child Abuse) is required as stipulated by both the College and the affiliated hospitals. All documents are to be uploaded into the myRecordTracker© system with hard copies submitted to the Radiography Program Director.

Accepted students who submit a report reflecting "no record" (no conviction) can consider themselves as "**fully**" accepted into the Radiography Program. Anyone with incidents that have not been adjudicated or anyone on probation are not accepted into the program.

If there is a criminal record, the student will be **conditionally accepted** until a decision is made by the Allied Health Review Committee followed by the approval from the assigned Hospital Site.

The Allied Health Review Committee will require a written explanation from the applicant describing the offense that led to the conviction. Upon receipt of the statement, the Allied Health Review Committee will consider the report and make a recommendation to the Program Director regarding the applicant's acceptance into the program.

Conditional applicants will be notified of their status within 3 days following the committee's review. The applicant may appeal the decision in writing within 5 working days of the decision to the Vice President for Academic Affairs whose decision is final.

However, the hospital's criteria (same as the criteria for hiring an employee) may be more stringent than the College's. There are affiliation agreements, between the hospitals and the College, that mandates hospitals to be informed of any criminal record of incoming students. The clinical sites have the right to deny access to any student with a criminal record based on their institution's criteria. A hospital decision to deny clinical access would override that of the Allied Health Review Committee.

***If, for any reason, an applicant is denied clinical placement based on their criminal record their acceptance into the Radiography Program will be rescinded.***

The ARRT has the final say as to who may or may not sit for the national ARRT certification examination. Therefore, even after being "fully" accepted, it would be prudent for the student to complete the ***Ethics Review Preapplication*** before starting the program. Further information is found in the "Ethics Requirements" section of the [2023 Primary Eligibility Pathway Handbook](#) found on the [www.arrt.org](http://www.arrt.org) website. This will ensure that the ARRT considers the student to be eligible to sit for the certification examination after the terminal award is received.

### Medical Marijuana Policy

To be transparent, regarding the entire drug screening process and the use of Medical Marijuana, Northampton Community College recognizes our responsibility to fully inform students of NCC's policy at the time of acceptance. This policy is included with the acceptance documents and must be read carefully. The signed [Health Careers Medical Marijuana Policy](#) is uploaded to MyRecordTracker© as part of onboarding process.

The Pennsylvania Department of Health is currently implementing the Pennsylvania Medical Marijuana Program, a component of the Medical Marijuana Act (MMA) that was signed as law on April 17, 2016. This program provides access to medical marijuana for patients with serious medical conditions as defined by the Pennsylvania Department of Health.

Currently, the Federal government regulates drugs through the Controlled Substances Act, which does not recognize the difference between medical and recreational use of marijuana. Under Federal law, marijuana is a Schedule 1 controlled substance, meaning that it is considered to have no medical value. Medical practitioners may not prescribe marijuana for medical use under Federal law.

Students entering any Health Science Careers Program are required to have urine drug screenings upon admission to the clinical phase of the program and on a semester basis while participating in clinical experiences. As per current policy, if the results are positive, the student will be dismissed from the program immediately and referred for appropriate counseling.

Students using medical marijuana will not be eligible for clinical, internship, or externship placement in any NCC health science career program, due to the current discrepancy between State and Federal law regarding Drug Free Workplace Act and the MMA. Businesses who are not in compliance with Federal law are at risk for criminal or civil charges; and additionally, may find issue with eligibility for Federal contracts and grants. Additionally, Pennsylvania's Medical Marijuana statute specifically provides that an employer does not have to accommodate an individual in a safety sensitive position if that person is under the influence of medical marijuana. Most positions involving direct patient care are considered safety sensitive positions.

## NCC Radiography Program's Student Handbook

Students should also understand that under current Pennsylvania State Board law, many health career licensing boards require drug screening at the time of application for licensure. Similarly, most health care employees will perform routine drug screening as a condition for employment, as these positions involve direct patient care, and are considered safety sensitive positions.

Despite having a medical marijuana card, a positive drug screen for marijuana, THC, cannabinoids etc. will result in revocation of program acceptance or other actions including withdrawal from the program.

### Basic Life Support (BLS) for Healthcare Providers: CPR

The Radiography Program, American Registry of Radiologic Technologists (ARRT), and the affiliation agreement with the clinical education sites require that each student maintains CPR certification during their training. Training requires an in-person component to demonstrate skills using mannequins. A copy of the student's certification (AHA: BLS Provider, ARC: BLS Healthcare Provider) is to be uploaded into the myRecordTracker© system.

The student should obtain the **two-year certification**. If the certification expires while enrolled in the program, renewal is required on, or before, the expiration date. It is the student's responsibility to know, and renew prior to, the expiration date deadline. CPR certification is verified prior to the start of each clinical rotation.

### Insurance (Personal Health and Liability)

Health insurance coverage is required throughout the duration of the program. Documentation of coverage must be uploaded to myRecordTracker© for review by the [Health and Wellness Center](#) by the published deadline and whenever there is a policy change, or an updated insurance card is received. Students should always have their health insurance available in the event of illness or injury whether on-campus or at the clinical education setting.

The College shall maintain liability (malpractice) insurance, purchased by the student, in the following amounts: a minimum of \$1,000,000 for each claim and \$5,000,000 aggregate. The course fee for each Fall semester clinical practice course includes the annual fee for the malpractice insurance.

### Physical Exam and Required Immunizations and Titters

A Physical Exam and School Provided Health Form must be completed no sooner than six (6) months by the student and medical provider. The form lists the immunizations and titters requiring supporting documentation (immunization records and lab reports) to be individually uploaded into myRecordTracker©.

#### *Required Vaccinations*

Allied Health students are required to be immunized, and/or document immunity against varicella (chickenpox), hepatitis B, hepatitis C, tetanus, diphtheria, pertussis (whooping cough), influenza (flu), measles, mumps, rubella, and Covid-19.

### *Meningococcal Vaccination*

Students living in campus housing must receive the meningococcal vaccination unless religious beliefs prohibit the student from obtaining the vaccine, in which case a waiver will need to be signed and uploaded into myRecordTracker®.

### *Tuberculosis*

Allied health students are required to be tested annually for TB. Proper documentation is to be uploaded into myRecordTracker® for review by the [Health and Wellness](#) Center. If any employee/student contracts active tuberculosis (not latent/inactive tuberculosis), they shall be removed from their job/classroom/dorm setting until medical documentation and laboratory results have been received at the [Health and Wellness](#) Center to confirm diagnosis and mode of treatment. Signed documentation from a licensed physician must state that they are not in an infectious state. These forms are available at the [Health and Wellness](#) Center. Thereafter, a progressive note must be submitted annually by the treating physician and/or a tuberculosis screening questionnaire done at the [Health and Wellness](#) Center.

### Drug Screening

A drug screen for each student is required by the Radiography Program and the clinical affiliates prior to clinical rotations in both the first year and second-year's fall semesters.

The Program's clinical sites, and as a partner, NCC, is entrusted with the responsibility of providing high quality patient care and a safe educational and work environment. The unauthorized use or trafficking in alcohol or drugs is a significant hazard to patients, visitors, and employees. Students who are found to have drugs or alcohol on their person or in their system are subject to serious discipline, up to and including termination of their experience.

In accordance with Northampton Community College's (NCC) policy governing the use of alcohol and other drugs, the Allied Health and Science Division has adopted procedural steps pertaining to the suspicion of student substance abuse or impairment at the clinical site. The clinical settings are an educational extension of the College and as such, the policies of the College, as stated in the *Student Handbook* under "Student Policies" in the [NCC College Catalog/Student Handbook](#), apply to students when participating in clinical education.

In accordance with clinical site practice, students may be subjected to random drug screens. If a student, while at clinical, is suspected of substance abuse or being under the influence, the student will be:

- Immediately removed from all patient/work areas by the Clinical Preceptor or immediate supervisor.
- Immediately referred to a drug screening facility or the clinical site's testing area and will need to follow up with drug and alcohol counseling in the event of a positive result.
- Arrangements for safe transportation of the student will be secured by the preceptor/supervisor after coordinating with the Clinical Education Coordinator.
- Refusing to submit to drug/alcohol testing is grounds for banning the student from any further activities and withdrawing them from the program.

- The student is responsible for paying the drug screen fee.

Be advised that as a matter of protocol, many clinical sites require drug and alcohol screening in the event of any accidental incident involving a patient, employee, or student. If substance abuse is confirmed, and the clinical site agrees, the student will be permitted to return to the clinical education setting if they comply with the prescribed plan of action. Failure to comply with the individualized plan of action or repeat incidents will result in withdrawal from the program.

### Essential Functions of a Radiographer

Students accepted into the program are required to complete the [Essential Functions of Radiographer: Verification of Understanding/Student Disclosure Form](#) before the start of the program.

The following is a list of the everyday functions that a radiographer needs to be able to perform at the hospital or outpatient facility. **The inability to perform these skills at a competent level may require withdrawal from the program to protect the patient population.**

#### 1. Observational skills:

- Assess the patient's needs.
- Able to discern the information that is needed for the procedure at hand.
- Recognize the need for prompt medical attention in a variety of settings and locations.
- Discern the details, density, and contrast of a radiographic image to determine if it is optimal for the radiologist's interpretation.
- Distinguish among the chromatic colors.
- Be able to use peripheral vision.
- Judge the distance of objects and the spatial relationship of objects at different distances.
- Detect changes in equipment operation (i.e., overheating, incorrect meter readings).
- Secure the correct chemical container and/or medication.

#### 2. Communication skills:

- Communicate with other health care providers.
- Perceive the patient's oral communication with the ear.
- Be able to hear sounds of a high pitch (e.g., patient's monitoring equipment).
- Be able to hear sounds of a low pitch (e.g., patient's breathing patterns).
- Perceive the patient's nonverbal communication.
- Secure information (i.e., questioning of the patient).
- Communicate promptly and effectively in English both verbally and in writing.
- Communicate with the patient and the public on a level that they can comprehend.
- Communicate effectively, using medical terminology, with the physician and other health personnel.
- Respond to directives from others related to patient care and emergency situations.
- Display compassion, empathy, integrity, concern for others, interest, and motivation.
- Obtain pertinent information from the patient's chart.
- Obtain information that is requested by the physician to make a diagnosis.
- Document in writing, through knowledge of the medical terms, good grammar, and spelling, information needed on the patient's requisition for an optimum diagnosis by the radiologist.
- Document the vital sign findings for the use of other health care personnel.

- Interact with others in a respectful, professional manner especially in stressful situations.

3. Motor skills:

- Tolerate physically taxing workloads.
- Safely lift from a lower to a higher position a minimum of 50 pounds and occasionally as much as 75 pounds.
- Be able to carry an object weighing as much as 25 pounds to transport it from one place to another.
- Be able to draw, drag, haul, or tug an object(s) weighing more than 100 pounds or the patient's weight.
- Be able to push an object(s) with steady force to thrust forward, downward, or outward weighing more than 100 pounds or the patient's weight.
- Be able to stoop/bend, squat, crouch, kneel, crawl, climb, and reach above shoulder level.
- Sufficient gross and fine motor coordination to respond promptly, manipulate equipment, and ensure patient safety.
- Perceive the attributes of an object(s) such as size, shape, temperature, or texture by touching with the skin, particularly that of the fingertips.
- Elicit information from a patient by diagnostic maneuvers (i.e., palpation).
- Safely manipulate and use controls (i.e., the x-ray tube that is located up to six feet from the radiographic/fluoroscopic room floor).
- Be able to use the fingers/hands in repetitive actions such as picking, pinching, writing, firm grasping, and twisting/turning.
- Skillfully use precision instruments.
- Maintain an upright, erect position with the entire body supported by the feet for as long as 7 hours during the workday.
- Function efficiently while wearing lead protective apparel.
- Safely perform procedures.
- Utilize the equipment needed to obtain temperature, pulse, respiration, and blood pressure.
- Enter data into the computer.

4. Cognitive functions:

- Ability to adapt to a crisis, flexible schedules, and/or change in environment.
- Function effectively under stressful conditions.
- Concentrate on the task at hand.
- Visually concentrate and/or focus thoughts or efforts for long periods of time.
- Exercise independent judgment and discretion in the safe technical performance of medical imaging procedures.

Health Insurance Portability and Accountability Act (HIPAA) of 1996

Student radiographers, by virtue of the educational process, will have access to protected health information (PHI) of patients under their care in and outside the radiology department at each of the clinical education sites.

Confidentiality is a patient's right and the responsibility of the radiographer, student radiographer, and all the health care team members in radiology. Any information in written, oral, or electronic form about a patient's physical, emotional, or mental health or treatment is considered confidential and should be

## NCC Radiography Program's Student Handbook

shared only in a private area among healthcare providers involved in the care and diagnostic treatment of the patient. This information must be handled discreetly and privately and protected against theft, loss, or inappropriate disclosure.

Any information regarding the diagnosis, treatment, prognosis and/or personal life of any patient is to be regarded as confidential information by the student and not to be discussed with the patient, public, your family and/or significant others.

The student is required to abide by the policies concerning confidentiality issues and "anything" regarding HIPAA. The requirement is brought forth by acknowledging and signing the [NCC Departmental Confidential Policy: HIPAA form](#). **Failure to abide by the policy will result in strict disciplinary action such as withdrawal from the program.**

Further Discussions referencing HIPAA that lead to sanctions are found in the following sections of this Handbook:

- ["Confidentiality of Patient Information: HIPAA"](#) under Legislative Clinical Site Policy
- ["Radiography Social Media Policy"](#) under Educational and Clinical Code of Conduct
- ["Expectations of Student Presenter"](#) under Image Critique Writing Assignment

### Magnetic Resonance Imaging (MRI)

The presence of ferromagnetic non-removable devices, implants etc. does not prevent a student from completing the radiography program. All accepted students must complete [MRI Safe Practices Information, Screening and Acknowledgement Form](#) as part of the pre-clinical documentation to ensure that:

1. The student is aware of the hazards associated with the MRI environment.
2. The student may safely enter the MRI environment.
3. The clinical staff do not unintentionally place the student in an unsafe environment.

The signed form is uploaded to MyRecordTracker© as part of onboarding process along with any updated or changes in information. Prior to a student's rotation in MRI, the clinical staff will review the student's suitability for safely rotating in the area in accordance with the hospital protocol in place at that time. If the screening flags an area of concern, additional screening may be necessary that could require a physician's order e.g., pre-MRI orbit radiographs.

## Academic Policies

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### Confidentiality of Educational Records Family Educational Rights and Privacy Act of 1974 (FERPA)

As outlined in the Family Educational Rights and Privacy Act of 1974, a student has the right to have their educational records remain confidential. The student’s education records will be maintained in a secure and confidential manner.

No one outside the institution will have access to, nor will the institution disclose, any information from a student's educational record without the written consent of the student, except to personnel within the institution, to persons or organizations providing the student financial aid, to accrediting agencies carrying out their accreditation functions, to persons involved with institutional research, or to persons in an emergency in order to protect the health or safety of the student or other person. All these exceptions are permitted under the act. Please reference “Academic Information and Policies” in the current [NCC College Catalog/Student Handbook](#) for details.

### NCC Radiography Program Grading Scale

The plus/minus grading system is utilized in the Radiography Program. The Radiography Program’s grading scale is different than the College’s scale. The lowest passing grade is 75% to remain competitive with the registry examination’s scale.

100 - 91 =	A	79 =	C+
90 =	A-	76-78 =	C
89 =	B+	75=	C-
81 - 88 =	B	74 - 0 =	F
80 =	B-		

### Academic Recognition

Students who complete a minimum of six credits in the semester and who achieve a grade point average for the semester of not less than 3.50 will be carried on the Dean's Honor List, a mark of academic distinction. Reference “Academic Recognition” in the current [NCC College Catalog/Student Handbook](#) for details.



## Academic Probation Policy

To remain in good academic standing, a student must maintain a minimum grade point average of 2.0 for all work attempted for graduation. For more details, please reference "Academic Probation Policy" in the current [NCC College Catalog/Student Handbook](#).

## Academic Honesty Violation

### NCC Policy and Appeal Procedure

When a faculty member believes that a student has committed acts that violate the academic honesty policy, he or she will advise the student of the offense and the penalty imposed.

- A written warning with the requirement that the assignment be redone within the instructor's specified time. Faculty members are encouraged to report the incident and action to their division Dean and to the Assistant Dean of Students (Bethlehem) or the Associate Dean of Students (Monroe) using online Academic Honesty Violation Form.
- A failing grade for the assignment or test. Faculty members must report the incident and action to their division Dean and to the Assistant Dean of Students (Bethlehem) or the Associate Dean of Students (Monroe) using the online Academic Honesty Violation Form.
- An "F" grade for the course.

If a faculty member issues an "F" grade in the course as a penalty for academic dishonesty, he or she must send a written report of the instance of cheating or plagiarism and the action taken to the division Dean and the Assistant Dean of Students (Bethlehem) or the Associate Dean of Students (Monroe) using the online Academic Honesty Violation Form.

If the faculty member has given an "F" grade for the course as a penalty for a violation of academic honesty, a student may not withdraw from the course while the matter is under appeal or if it is resolved that the "F" grade stands.

The College affirms the right to revoke a previously awarded degree due to subsequent discovery of academic dishonesty by the student, clerical error by the college, or revocation of credit from institutions of academic accreditation. Please reference "Academic Honesty - Policy and Appeal Procedure" in the current [NCC College Catalog/Student Handbook](#) for details.

### ARRT – Violation of Academic Honor Code in Radiography Program

*The ARRT application asks if the student has ever been subjected to a sanction due to a violation of an academic honor code, suspended, or dismissed by an educational program that you attended to meet ARRT certification requirements. An affirmative response may result in the ARRT determining that the student is ineligible to take the registry examination.*

By being accepted into this program, you have demonstrated the skills that you need to be successful. Working diligently on the coursework and minimizing outside distractions will get you to your goal of completing the program and passing the Registry Examination.

Learning the theory and developing the clinical skills required of the profession is how you pass the examination and earn your Radiologic Technology credential. Taking shortcuts, whether they be cheating, plagiarizing or other forms of clinical or academic dishonesty does not demonstrate professional behavior and will not be tolerated. Getting something “wrong” is part of how we learn and being a student is all about learning. Ultimately, we need to know the material that is being taught so we can provide great patient care.

If a mistake happens in a clinical situation, whether you're a student or seasoned technologist, professional behavior requires that you take responsibility. Procedures and protocols are frequently revised when an error occurs to prevent a recurrence that could impact patient safety. Covering up errors in clinical practice defeats this continuous improvement process.

**A grade of “F” resulting from an academic dishonesty issue, would require a favorable ARRT ethics review to continue in the program. Due to the sequential nature of the coursework, a minimum of a one-year delay in program completion would also be a consequence.**

## Incomplete Policy

An incomplete grade of “I” is given only when a student has obtained the permission of the instructor to postpone completion of specific course work for a valid reason (illness, death in the student's immediate family, etc.).

The deadline for completing the course requirements is no more than five months—or sooner as designated by the instructor—after grades were due in the semester in which the “I” grade was issued. If the “I” grade is not changed within that period through your completion of applicable course work, it will be changed to an appropriate grade. The instructor may designate that the “I” become a specified letter grade. The grade may not be a W, WP, or WF.

## Academic Progression within the Radiography Program

Students are required to show both didactic and clinical progression each consecutive semester for courses that carry the RADT prefix. This means the student is required to pass each RADT academic course and RADT clinical practice course with at least a grade of "C-" to show academic progression.

All courses in the program are provided once every year. Each course carries the requirement that all courses are pre-requisites to subsequent courses in the 21-month program. The Radiography program allows for one failure in the course that carries the prefix of the student's Allied Health program. The failed course, and the semester the course is offered again, requires a re-entry cumulative exam of all courses preceding and concurrent with the course failed.

For example, if a student fails a RADT course in the second semester. The student's seat, if in good ethical and professional standing, will be held for a year until the course is offered again. However, the student must pass a re-entry cumulative exam, given several months prior, consisting of all the material

covered in their first and second semester, excluding the course material they failed. If they pass, according to the radiography grading schema, the student may proceed to re-enter the failed course and continue the program into the second year. If the student fails, the student is automatically withdrawn from the program.

This option does not apply if the student failed or withdrew from the course due to:

- ["Repeated Courses - Academic Dismissal from Allied Health Programs"](#)
- Failure due to inability to perform the ["Essential Functions of a Radiographer"](#)
- Failure due to ["Academic Honesty Violation"](#)
- Failure due to ["Withdrawal of Radiography Student from the Clinical Education Setting"](#)

## **Repeated Courses - Academic Policy for Dismissal from Allied Health Programs**

The following applies for those accepted in the following programs: Nursing, Dental Hygiene, Medical Assistant, Radiography, Diagnostic Medical Sonography, Funeral Service, Licensed Massage Therapy, and Veterinary Technician.

Any student who does not successfully complete two (2) courses (either two different courses or the same course twice), that carry the prefix of the student's Allied Health program, regardless of when in the program curriculum the unsuccessful attempt occurs, will be dismissed from their Allied Health program. An unsuccessful course completion is defined as a final course grade of an "F", or "W". A withdrawal due to factors unrelated to program performance, e.g., a medical leave of absence, will not be considered an unsuccessful attempt when approved by the Program Director.

## **Course Drop, Withdrawal, Refunds, Class Changes, and Adjustments**

### NCC Policy and Procedure for Voluntary and Involuntary Withdrawal

Students who wish to drop or withdraw from either a course or the College must receive official authorization from the Records Office. Failure to drop or withdraw officially may result in the recording of an F grade. A student who is asked to leave the College for misconduct or delinquent attendance will receive no refund of tuition or fees.

Students who drop with the approval of the Records office prior to the date specified in the College Calendar, will be entitled to a 100 percent refund (or adjustment) of tuition and fees charged, less any amounts owed to the College for fines, returned checks and other charges and fees.

Refunds will be paid to the student according to their original method of payment apart from A) contractual third-party payments – refund payable to third party named, and B) excess parent plus loan funds – refund payable to the parent unless designated otherwise. Refunds for amounts paid to NCC by check are not processed until 2 weeks after the payment was deposited.

After the Drop deadline students may withdraw themselves from classes in which they are enrolled through the 90%-point of the semester. An instructor may issue a withdrawal for poor attendance.

If the student drops the course within the Add/Drop period, there is no "W" issued and a partial tuition refund is issued. Refer to the [current academic calendar](#) for specific dates.

## Radiography Program Policy and Procedure for Voluntary Withdrawal

Students may not selectively withdraw from a radiography course due to the structured scheduling of the program. If a student chooses to withdraw from one (1) radiography course, they must withdraw from all radiography courses and the program. If after having withdrawn from the program, a student wishes to re-enter the program, they must re-apply through Admissions. The only exception, with Program Director and Clinical Education Coordinator approval, is for a student who needs to take a medical leave of absence.

### Exit Interview

As part of our continuous improvement initiative, each student withdrawing from the Radiography Program is asked to speak with either a program representative or the admission's liaison to document the reasons for leaving. An email to the Program Director or Clinical Education Coordinator addressing the reasons for withdrawal is required.

## Radiography Program Policy and Procedure for Involuntary Withdrawal

Involuntary withdrawal is completed for documented consecutive violations or more severe violations that involve but are not limited to: [Professional Conduct Policy](#), [Academic Honesty Violation](#), [Drug Screening](#), [HIPAA](#), [Repeated Courses](#), [Medical Marijuana Policy](#), [Essential Functions of Radiographer](#), [Social Media Policy](#), [Lab Safety Practices](#), [Radiography Student Requests to Transfer from Clinical Education Site](#), [Radiography Student Employed in Radiology at the Clinical Site](#), and [Withdrawal of Radiography Student from the Clinical Education Setting](#)

Any offense that warrants involuntary withdrawal is communicated between the Program Director and the Dean, School of Health Sciences & Education and may warrant a change in status or action plan.

Please refer to [Action Plan for Conduct: Forms and Processes](#) section for implementation practices.

## **Refund of Tuition and Fees**

Total withdrawal from the College or withdrawal from a single course may affect your financial aid award and your eligibility for future semesters of financial aid. It is your responsibility to notify the Financial Aid Office of changes in enrollment status.

The last day to request a full tuition refund is before classes start and the percentage refunded decreases quickly as the semester progresses. Check the current academic calendar for refund cut-off dates. Reference "[Course Drop, Withdrawal, Refunds, Class Changes, and Adjustments](#)" and "Special Note to Financial Aid Recipients" in the current [NCC College Catalog/Student Handbook](#) for details.

## **Academic Appeals**

Appeals of grades, appeals of penalties for academic honesty violations, and appeals of actions related to the policy on Professional Conduct, will begin informally through discussion between the student and the faculty member involved and will proceed, if continued, through a series of formal steps culminating

## NCC Radiography Program's Student Handbook

in a hearing before an Academic Appeals Committee, which will present its findings and recommendations for a decision to the Vice President for Academic Affairs.

No final recommendation can be made without a quorum. The decision of the Vice President for Academic Affairs will be final, unless it differs from that of the committee; in such cases, the student may appeal to the President, whose decision is final. Please reference "Academic Appeals" in the current [NCC College Catalog/Student Handbook](#) for details.

### **Appeals Not Covered Under Other Policies**

The following is a generic policy for appeals not stipulated in the College Catalog or NCC Student Handbook.

Students may appeal against a decision made by the Program Director to the Dean, School of Health Sciences & Education. Students who do not agree with the recommendation of the Dean, School of Health Sciences & Education may appeal in writing within three working days either to the Vice President for Academic Affairs or Vice President, Enrollment & Student Affairs (appeal route determined by the Dean, School of Health Sciences & Education).

The Vice President's decision will be final unless stated otherwise in a specific College policy. Note: Working day is defined as any day when a full schedule of classes is in session (this excludes Saturdays and Sundays).

### **Assertions of Non-Compliance with the JRCERT Standards**

For information about the JRCERT Standards, go to: [www.jrcert.org](http://www.jrcert.org). If a student thinks that the radiography program is not abiding by the JRCERT standards and wants to lodge a complaint with the JRCERT, they may contact the JRCERT directly via [www.jrcert.org](http://www.jrcert.org).

As per standard 1.5, contacting the JRCERT must not be a step in the formal institutional or program grievance policy/procedure. The student must first attempt to resolve the complaint directly with institutional/program officials by following the grievance policy/procedures provided by the institution/program. If the student is unable to resolve the complaint with institutional/program officials or believes that the concerns have not been properly addressed, the individual may submit allegations of noncompliance directly to the JRCERT.

## Academic Support

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### Endowments/Scholarships/Financial Aid

To be considered for an endowment or scholarship, the student needs to file for financial aid (including a FAFSA filing). Even if not eligible for financial aid, you must file to be entered into the candidate pool. Please contact the [Financial Aid Office](#), on campus, for filing information.

As of August 2018, there are six endowed radiography scholarships available for students. Eligibility requirements vary and may include financial need, GPA, county of residence, clinical site rotations, military service, and other criteria. Typically, awards are granted for the student's second Fall semester. Please click on link for more information: [NCC FAFSA and Scholarship](#)

### NCC Learning Center

To help you make the most of your education, NCC has established a Learning Center (LC). The Center can provide you with academic support in a variety of ways.

**Tutors:** The LC can assign a tutor to work with you by appointment. One could also work with a professional assistant on a drop-in basis.

**Computers:** The LC houses computers with academic tutorial software which allows you to do additional work. One could also work individually with on-line tutorial programs. In addition, computers are located at various locations on campus.

Call or visit the LC in College Center 315, 610-861-5517, to find out more. Please refer to the following website for current hours and opportunities to schedule a session: [NCC Learning Center](#). The website also offers Science Tutoring, located in Penn Hall 211, for students taking chemistry and biology courses.

### Mack Library

The Mack Library on the fourth floor of the College Center has both print and non-print materials including books, magazines, newspapers, audio/visual materials, hardware, and software. Lounge areas, individual study compartments, and Internet access are available as well as audio/visual equipment.

### Counseling Services

A staff of professional counselors is available to help you with your educational and personal counseling. The office is in the College Center CC 341. Call 861-5346 for more information. Also visit their website: [Counseling Services](#)

### Disabilities (Disclosure)

After acceptance into the Radiography Program, a disclosure sheet is signed by the student. If there is a written documented disability, reasonable services and accommodations are offered to the student to

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facilitate accessibility to both the Radiography Program and the clinical facilities. Please visit the website for further information: [Disability Services](#).

Services provided to students with disabilities are based upon each student's individual needs. Accommodation includes, but is not limited to: Academic support, Extended time for tests, recording lectures, Oral tests, Note-takers.

### **NCC Culture of Caring: You Matter @NCC**

It can be difficult to focus on your academic progress while also dealing with personal concerns. NCC can help with the following: transportation, financial assistance, housing, food, academic support, childcare, and emotional/mental health support. Please visit website for further information: [You Matter @NCC](#)

### **NCC Radiography Specific Academic Support**

The program usually has second-year students who have been trained through the Learning Center as tutors specifically for the Radiography Program. Appointments are required and the times available will be listed in the Wogenrich Laboratory of the Radiography Department.

The Radiography Program has purchased CD-ROM programs, and the programs are available in the Wogenrich Laboratory of the Radiography Department. Ask your Preceptor, Clinical Education Coordinator, or Program Director for the exact location of tutorial aids.

### **NCC Radiography Academic Advisors**

Your academic advisor will help you coordinate your learning experiences and assist you in your progress toward your educational goals. As a Radiography Program major, your advisor will be either the Program Director or the Clinical Education Coordinator

## Campus Public Safety Policy

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NCC is concerned about the safety and welfare of all individuals who study or work at the College or who visit the campus. We believe that every student, employee, and visitor have the right to be part of an environment which is safe and does not tolerate misconduct. Please visit the website for further information: [The NCC Department of Public Safety](#)

Urgent concerns should be reported to Campus [Public Safety](#) at 610-861-5588 (the Bethlehem Campus radio linked number) or by calling 9-1-1 as appropriate.

Non-urgent concerns may be reported via the Online Reporting Form "[Reporting Concerns or Complaints](#)" or by visiting the Office of Student Affairs (Bethlehem), College Center Suite 200, 610-861-4558.

### Emergencies NCC Campus Medical, Fire, and Police

Three emergency phones are stationed in the parking lots for use if an emergency arises. Simply press the button and a connection to [Public Safety](#) will be made. When [Public Safety](#) answers please indicate the nature of your emergency and your location (use the number on the pole). Additional phones are located throughout the facilities for emergency use. Contact campus [Public Safety](#) by dialing 5588 on a regular campus phone or 610-861-5588. Oxygen, on campus, is available through [Public Safety](#).

### Emergency Response Guidelines (NCC)

#### Fire and/or Explosion

1. In the event of a fire or explosion:
  - A. Sound any available fire alarms.
  - B. Immediately call 911, then campus safety at 5588 (610-861-5588). Give your name, location, and the extent of the problem.
  - C. If the fire is small, attempt to extinguish it with a fire extinguisher.
  - D. If the fire is large, evacuate the building via the nearest fire exit\*
2. Additional suggestions:
  - A. Do not panic.
  - B. Do not run or use excited motions.
  - C. Use stairways. Do not attempt to use elevators; they will shut down during a fire.
  - D. Know in advance the location of fire extinguishers and how to use them.
  - E. Prevent fires through good housekeeping habits.
  - F. Know the appropriate evacuation protocol if assisting individuals with disabilities\*.

\* All College Center exit corridors and smoke tower stairwells are marked with exit signs and are protected with self-closing fire rated doors. Tower exits stairs are marked with "area of refuge" signs. These are the safest areas during an emergency. Rescue personnel (Fire Department) will first check all exit corridors and exit stairwells for any trapped persons.



### Crime in Progress/Civil Disturbance

1. Do not attempt to apprehend or interfere with the criminal except for self-protection.
2. Call **Public Safety** at 5588 (610-861-5588). Give your name and location. Advise them of the situation and, if you are safe, remain where you are until contacted by **Public Safety**.
3. If safe, attempt to get a good description of the criminal. Note height, weight, sex, ethnicity, approximate age, clothing, method and direction of travel, and name if known. All of this takes only a few seconds to notice and is of utmost help to the investigating officers. If the individual enters a vehicle, note the license number, make, and model, color and any other noticeable characteristics.
4. In the event of civil disturbance, continue with your routine as much as possible. If the disturbance is outside, stay away from doors and windows. Unless threatened with physical harm, do not leave your location until verifying that it is safe to do so.
5. Do not interfere with those creating the disturbance or with law enforcement authorities on the scene.

### Injury or Illness

1. Do not move an injured or ill person unless it appears to be a life-threatening situation.
2. Call or, if possible, have another person call first 911, then Campus **Public Safety** at 5588 (610-861-5588). Provide the dispatcher with as much information as possible regarding the nature of the injury or illness, and state whether or not the victim is conscious, etc. **Public Safety** will meet the ambulance if required and will also notify the Student Health Center.
3. Return or stay with the victim. Administer first aid or CPR if you are trained to do so. Keep the patient as comfortable as possible.
4. Remain with the individual until Emergency Services arrives.

**Note:** The nearest first aid kit is located within the Wogenrich Lab viewing area.

### Bomb Threat

1. Whenever a bomb threat is received over the phone, remain calm and write down as much of the following information as possible:
  - A. The exact words of the caller
  - B. Location of the bomb
  - C. When the bomb is supposed to go off
  - D. Type of bomb and who placed it, if stated
2. Write down a description of the caller's voice:
  - A. Male, female, child, or adult?
  - B. Any background noises?
  - C. Particular accent or inflection in the caller's voice
  - D. Your mental picture of the caller.
3. Notify Campus **Public Safety** at 5588 (610-861-5588)

4. Evacuation procedure:

- A. Unless you perceive the situation as life threatening, in which case you should evacuate immediately, wait for Campus [Public Safety](#) to arrive at the building.
- B. If an entire building is to be evacuated, Campus [Public Safety](#) and the appropriate crisis team staff normally will enter each classroom, lab, or work area and verbally inform occupants of the situation and ask them to evacuate in an orderly fashion.
- C. Assemble in a location outside your building as assigned by Campus [Public Safety](#) Officers.

5. Responsibility of faculty or staff members in classroom or lab:

- A. If directed by Campus [Public Safety](#), ask students to pick up all of their belongings and leave in an orderly fashion.
- B. Make a survey of the room before leaving to identify any piece of equipment, article or object which is not ordinarily there, making certain not to touch the unknown object.
- C. Relay this information to Campus [Public Safety](#) after leaving the building

### Chemical or Radiation Spill

1. Inform a faculty or staff member if available. You or the faculty/staff will call Campus [Public Safety](#) at 5588 (610-861-5588) and give the following information:
  - A. Type of incident (chemical spill, radiation hazard, etc.)
  - B. Type of chemical, if known
  - C. Whether or not students are injured.
  - D. Extent of injuries
  - E. Location of incident
  - F. Name and title of caller (student, technician, professor, etc.)
2. Pull the alarm and evacuate the building.
3. Should the spill occur outside your building:
  - A. Notify Campus [Public Safety](#) at 5588 (610-861-5588)
  - B. Remain in your building unless ordered by Campus [Public Safety](#) to evacuate
  - C. Close all windows and turn off all outside air intake vents or fans.
  - D. Leave your building only when told to do so, and travel away from the spill and in an upwind direction, if possible

### Earthquake/Other Natural Disaster

1. If you are in a building, move away from windows and try to position yourself in a doorway or under a desk or table.
2. When the tremors cease, or they are very slight, evacuate the building in an orderly fashion.
3. Use stairways – not elevators – during evacuation.
4. If possible, instructors should take attendance to assure that all personnel are accounted for outside of the facility. Report anyone missing to [Public Safety](#) or campus official.
5. Should you require evacuation assistance, please telephone Campus [Public Safety](#), 5588 (610-861-5588).

## Shooting Protocol

1. If you witness any armed individual on campus at any time, immediately contact [Public Safety](#) at 5588 (610-861-5588). If the individual is acting in a hostile or belligerent manner, contact 911 and then call [Public Safety](#) at 5588. There are no easy answers for what to do if confronted by a shooter. However, it is suggested that you do not provoke the individual, avoid making eye contact with them, avoid making any sudden movements or gestures, and create space between you and them but don't just turn and run. If you find yourself confronted by the shooter, remain calm and talk in a low tone of voice.
2. If the shooter is outside the building:
  - A. Move to a room inside of the building if safe to do so and remain there until an "all clear" instruction is given by an authorized known voice.
  - B. Turn off all the lights and close and lock all windows and doors. If the door does not have a lock, attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows.
  - C. If you can do so safely, get everyone present on the floor and out of the line of fire.
  - D. If the staff or students do not recognize the voice that is giving instruction, they should not change their status.
  - E. Unknown or unfamiliar voices may be false and designed to give false assurances.
3. If the shooter is inside the building:
  - A. If it is possible to flee the area safely and avoid danger, do so.
  - B. Contact 911 and [Public Safety](#) at 5588 (610-861-5588) with your location if possible.
  - C. If flight is impossible, lock all doors and secure yourself in your space. If the door does not have a lock, attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows.
  - D. Get down on the floor or under a desk and remain silent.
  - E. Get everyone on the floor and out of the line of fire.
  - F. Wait for the "all clear" instruction.
4. If the shooter comes into your class or office:
  - A. There is no one procedure the authorities can recommend in this situation.
  - B. If you are seated, remain seated as standing may be perceived as a threat.
  - C. Attempt to get the word out to others if possible and call 911 if that seems practical.
  - D. Use common sense. If hiding or flight is impossible, attempt to negotiate with the individual.
  - E. Attempting to overcome the individual with force is a last resort that should only be initiated in the most extreme circumstances.
  - F. Remember, there may be more than one active shooter.
  - G. Wait for the "all clear" instruction.

- H. In shooting situation, the Bethlehem Township Police are in charge once they arrive on the scene.
- I. Be careful not to make any changes to the scene of the incident since law enforcement authorities will investigate the area later.
- J. In case you must flee, do not go to the normal first evacuation sites for your building. Get as far away from the shooting scene as possible and then contact authorities.

Regardless of location of a shooter incident, response personnel (i.e., Campus [Public Safety](#) and other law enforcement agencies) will be charged with neutralizing the situation. This means that the response personnel must bypass anyone who is not the shooter.

If you encounter response personnel, do not approach them, engage in physical contact, or request assistance in providing aid. This will slow the response of law enforcements actions to neutralize the situation so that aid can be rendered to all. It creates more stress for the responders, and it could cause an accidental discharge.

When you see law enforcement responding to a shooter situation move to the side, if in a hall get close to the walls, and put your hands where they can be seen. If you have information about the shooter (e.g., description, identity, location, and number of shooters) advise the responding officers that you have information and provide it to the police as quickly and accurately as possible.

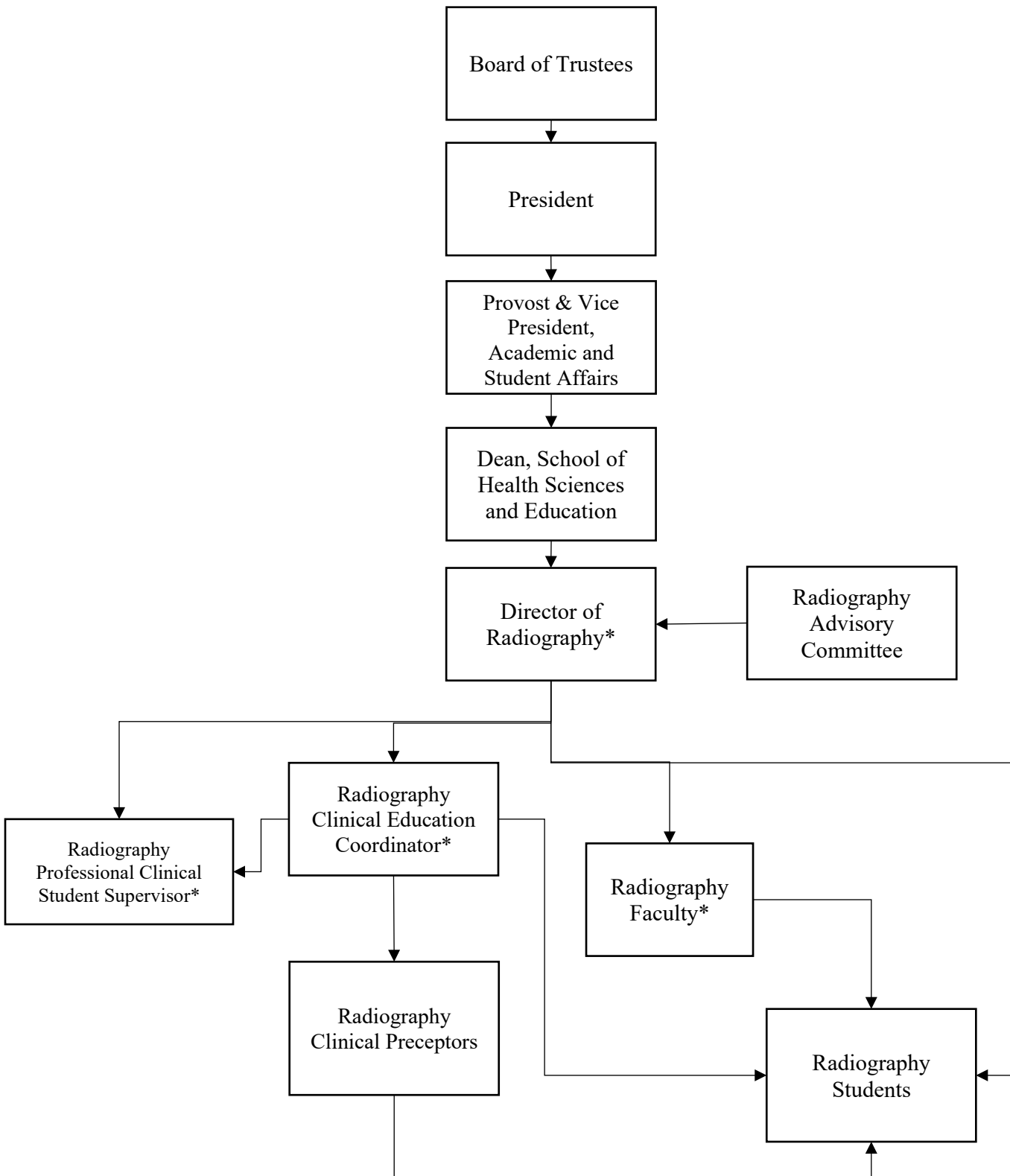
## Medical Emergencies in the Classroom or on Campus

- Remain calm-dial 9-1-1
- When the dispatcher answers, make a simple statement of what you need (i.e., "I need an ambulance")
- The dispatcher will then ask for the address and location of the emergency.
- Main campus address is 3835 Green Pond Road, Bethlehem 18020
- Then your "Building name" and "room number"

Dispatcher will ask you exactly what is wrong...or for more details. Answer as best you can and do not become annoyed that it appears to be taking too long. They are asking you for this info and another dispatcher is contacting emergency medical personnel with the information. The dispatcher will ask for your name and phone number. Do not hang up until the dispatcher says it is ok to do so.

Ask another person in the room to call [Public Safety](#) after you have called 9-1-1 ([Public Safety](#): 610-861-5588 or 5588 from a campus phone). Notify them of the emergency and that 911 has been contacted. [Public Safety](#) has a protocol to follow once they receive a call – including communicating with emergency personnel to meet them when they arrive on campus and contacting the college's health center.

## Organizational Chart: Radiography Program



\*Constitutes the Radiography cluster

## **NCC Radiography Program Department Responsibilities**

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### **The Program Director will:**

- ensure effective program operations.
- oversee ongoing program assessment.
- participate in budget planning.
- maintain current knowledge of the professional discipline and educational methodologies through continuing professional development.
- assume the leadership role in the continued development of the program.
- develop, implement, supervise, evaluate, and revise the program curriculum and programs in community service and continuing education in radiology.
- counsel faculty and staff and make recommendations concerning development and offering of orientation programs for new faculty, part-time faculty, and Clinical Preceptors.
- assign faculty instructional and coordination responsibilities.
- counsel students and utilize referral programs to ensure that students who require additional counseling are directed to appropriate College personnel.
- assist with and encourage student activities.
- assist with the recruitment, interviewing, and selection of students.
- schedule appropriate student clinical education.
- maintain adequate student records.
- implement and support Continuous Improvement Initiative Assessment Cycle.
- prepare a list of special assignments that reflect institutional and individual goals and ambitions appropriate to the position and the administrative team.
- maintain cooperative working relationships with college personnel, affiliate hospitals, appropriate community, state, regional, and national groups, agencies, and professional organizations.
- function as an active member of the administrative team.

### **The Clinical Education Coordinator will:**

- correlate clinical education with didactic education.
- coordinate clinical education and evaluate its effectiveness.
- evaluate, supervise, and assure clinical education effectiveness through regularly scheduled visits to the clinical education settings.
- instruct and evaluate students.
- develop and revise the curriculum as needed.

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- advise students.
- give in-services.
- support the Program Director to help ensure effective program operation.
- participate in the assessment process.
- cooperate with the Program Director in periodic review and revision of clinical course materials.
- maintain current knowledge of the discipline through continuing professional development and the pursuit of scholarly activities.
- maintain current knowledge of program policies, procedures, and student progress.

### **The Professional Clinical Student Supervisor will:**

- support the clinical education coordinator with correlating clinical education with didactic education.
- support clinical education coordinator in evaluating and assuring clinical education effectiveness through regularly scheduled visits to the clinical education settings.
- advise students.
- support the Program Director to help ensure effective program operation.
- attend scheduled divisional, departmental, program, advisory, and college meetings.
- perform College service activities either on or off campus.
- maintain a good rapport with the clinical affiliates.

### **The Full-time Didactic faculty will:**

- prepare and maintain course syllabi/outlines and objectives, instruct, and evaluate students, and report progress.
- participate in the assessment process.
- cooperate with the Program Director in periodic review and revision of course materials.
- support the Program Director to help ensure effective program operation.
- maintain appropriate expertise and competence through continuing professional development.
- attend scheduled divisional, departmental, program, advisory, and college meetings.
- do academic advising and counseling.
- do student advising for registration.
- perform College service activities either on or off campus.
- maintain appropriate expertise and competencies through continuing professional development and pursuit of scholarly activities.
- maintain a good rapport with the clinical affiliates.

### **The Part-Time Didactic Faculty will:**

- prepare and maintain course syllabi/outlines and objectives, instruct, and evaluate students, and report progress.
- participate in the assessment process, when appropriate
- cooperate with the Program Director in periodic review and revision of course materials.
- maintain appropriate expertise and competencies through continuing professional.
- development and pursuit of scholarly activities.

### **The Clinical Preceptor will:**

- be knowledgeable of program goals.
- understand the clinical objectives and clinical evaluation system.
- understand the sequencing of didactic instruction and clinical education.
- provide the student with clinical instruction and supervision.
- evaluate students' clinical competence.
- serve as a student advocate to the clinical staff.
- maintain competency in professional discipline, instructional, and evaluative.
- techniques through continuing professional development.
- maintain current knowledge of program policies, procedures, and student progress.
- directly inform students when they may accept, or delete, patient images for which the Clinical Preceptor is responsible.

### **The Clinical Staff will:**

- understand the clinical competency system.
- understand requirements for student supervision.
- support the educational process.
- maintain current knowledge of the program policies/procedures and student progress.
- directly inform students when they may accept, or delete, patient images for which the Technologist is responsible.

### **The Mentor:**

- The mentor is anyone that provides guidance through the course of your experience. There may be more than one mentor depending on the circumstances.
- First-year radiography students are assigned to a second-year radiography student mentor in their respective clinical education setting.



- The mentor should function as a peer to help the mentee's initial questions and to make the transition into the clinical practice setting a more comfortable and enjoyable one.

## Action Plan for Program Conduct: Forms and Process

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The following is a brief explanation of forms followed by proactive steps in documentation and notification for miscellaneous instances of conduct. There may be issues or concerns that are so serious that the procedure will bypass the verbal and written steps and warrant an immediate suspension or withdrawal from the Radiography Program.

### Summary of Forms

#### Verbal Warning: Written Action Plan

The verbal warning form is verbal verification between the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director. It is utilized to communicate a minor issue before preceding a "Continual Non-Compliance" or "Written Warning" unless bypassed to higher levels depending on the seriousness of the situation.

A Verbal Warning is completed for minor issues that include but are not limited to the following:

- [Late Policy](#)
- [Trajecsys Clock in/out](#)
- [Notification Policy](#)
- [Clinical Education Dress Code](#)
- [Cell Phones and Smart Watches](#)
- [Personal Laptops](#)
- ["Already Did That"](#)
- [Competency Refusal](#)
- [Clinical Attendance Policy](#)

#### Continual Non-Compliance: Action Plan for Improvement

Each student has running documentation, in their file, of repeated occurrences categorized as 'Continual Non-Compliance'. An incident that has already perpetrated a verbal warning will result in either a point deduction or forfeiture of days from the current clinical rotation. Documentation is verified between the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director.

Please select each link or refer to "[Non-Compliance Flow Chart](#)" under Appendix F that summarizes the following list of 'Continual Non-Compliance' and their resulting outcomes:

- [Late Policy](#)
- [Trajecsys Clock in/out](#)
- [Notification Policy](#)
- [Clinical Education Dress Code](#)
- [Program Meeting](#)
- [Cell Phones and Smart Watches](#)
- [Personal Laptops](#)

- [“Already Did That”](#)
- [Competency Refusal](#)

### Written Warning: Action Plan for Improvement

A written warning is utilized if either a verbal warning was contradicted for the same issue, or the incident is a cause of concern requiring counsel and an action plan for improvement. Documentation is verified between the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director.

A written warning usually precedes a “Corrective Action Plan” unless bypassed to higher levels dependent on the seriousness of the situation.

### Corrective Action Plan (CAP): Written Warning and Action Plan for Improvement

A Corrective Action Plan is completed for repetitive non-compliance or significant infringements that may warrant point deductions and/or forfeiture of days from the current clinical rotation. Each occurrence is documented and verified by the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director.

Documentation at this level precedes the “Disciplinary Action Plan (DAP): Written Warning and Action Plan for Improvement” unless bypassed to higher levels dependent on the seriousness of the situation.

A Corrective Action Plan is completed for significant infringements that include but are not limited to the following:

- Repetitive Non-Compliance (i.e., [Clinical Attendance Policy](#))
- [Direct and Indirect Supervision](#)
- [Missing in Action at Clinical](#)
- [Leaving without Permission from Clinical](#)

### Disciplinary Action Plan (DAP): Written Warning and Action Plan for Improvement

A Disciplinary Action Plan is completed for consecutive infringements (prior CAP for the same offense) or more critical infringements. Both instances may warrant point deductions and/or forfeiture of days from the current clinical rotation. Each occurrence is documented and verified by the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director. Documentation at this level precedes either “Suspension” or “Involuntary Withdrawal”.

A Disciplinary Action Plan is completed for consecutive significant infringements or more critical infringements that include but are not limited to the following:

- Consecutive offenses listed under Corrective Action Plan (CAP)
- [Failure of one course](#)

Any offense that warrants a DAP is communicated between the Program Director and the Dean, School of Health Sciences & Education and may warrant a change in status.

## Suspension

Dependent on infringement, a student may be suspended in lieu of withdrawal (i.e., class attendance policy). Documentation is verified by the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director.

Any offense that warrants suspension is communicated between the Program Director and the Dean, School of Health Sciences & Education and may warrant a change in status or action plan.

If there is a suspension from the Radiography Program, the student will be withdrawn from clinical practice and the days missed will be made-up during the [six \(6\) week extension](#) of the last clinical education course. However, if the decision is rescinded, the student will be given, if reasonable, an opportunity to make-up the missed clinical practice time prior to the [six \(6\) week extension](#).

## Involuntary Withdrawal

Involuntary Withdrawal is completed for consecutive infringements (prior DAP for the same offense) or more severe infringements. Either instance is documented and verified by the student and either the Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director.

Involuntary Withdrawal is completed for consecutive significant or critical infringements or more severe infringements that include but are not limited to the following:

- Consecutive offenses carried over from Corrective Action Plan (CAP)
- Consecutive offenses listed under Disciplinary Action Plan (DAP)
- [Essential Functions of a Radiographer](#)
- [Academic Honesty Violation](#)
- [Laboratory Safety Practices](#)
- [HIPAA Violation](#)
- [Professional Conduct Policy](#)
- [Radiography Student Request to Transfer from Clinical Education Site](#)
- [Radiography Student Employed in Radiology at the Clinical Site](#)
- [Withdrawal of Radiography Student from the Clinical Education Setting](#)

Any offense that warrants involuntary withdrawal is communicated between the Program Director and the Dean, School of Health Sciences & Education and may warrant a change in status or action plan.

## **General Process**

The Clinical Preceptor(s) will have copies of the forms at each clinical site and available on Trajecsyst. Forms are also available via JotForm program. The following are general guidelines for initiating an action plan:

1. The witness documents the issue or concern.

2. Depending on involvement, the CP, CC, PCSS, and/or PD will conference with the student about the issue/concern at hand.
3. During the conference, the student will be given an opportunity for rebuttal.
4. Depending on involvement, the student, CP, CC, PCSS, and/or PD will complete the form.

- **Verbal Warning**

- Includes but not limited to:
  - [Late Policy](#)
  - [Trajecsys Clock in/out](#)
  - [Notification Policy](#)
  - [Clinical Education Dress Code](#)
  - [Cell Phones and Smart Watches](#)
  - [Personal Laptops](#)
  - ["Already Did That"](#)
  - [Competency Refusal](#)
  - [Clinical Attendance Policy](#)

- **Continual Non-Compliance**

- [Late Policy](#)
- [Trajecsys Clock in/out](#)
- [Notification Policy](#)
- [Clinical Education Dress Code](#)
- [Program Meeting](#)
- [Cell Phones and Smart Watches](#)
- [Personal Laptops](#)
- ["Already Did That"](#)
- [Competency Refusal](#)

- **Written Warning**

- **Corrective Action**

- Includes but not limited to:
  - [Repetitive Non-Compliance \(i.e., \[Clinical Attendance Policy\]\(#\)\)](#)
  - [Direct and Indirect Supervision](#)
  - [Missing in Action at Clinical](#)
  - [Leaving without Permission from Clinical](#)

- **Disciplinary Action**

- Includes but not limited to:
  - [Consecutive offenses listed under Corrective Action Plan \(CAP\)](#)
  - [Failure of one course](#)

- **Involuntary Withdrawal**

- Includes but not limited to:
  - [Essential Functions of a Radiographer](#)
  - [Academic Honesty Violation](#)
  - [Laboratory Safety Practices](#)
  - [HIPAA Violation](#)
  - [Professional Conduct Policy](#)

- [Radiography Student Request to Transfer from Clinical Education Site](#)
  - [Radiography Student Employed in Radiology at the Clinical Site](#)
  - [Withdrawal of Radiography Student from the Clinical Education Setting](#)
  - **Suspension**
5. The form is to be faxed (610-861-4581) or scanned and emailed to the Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director. Completed forms are sent to the Program Director for placement in the student's program file.

## Educational and Clinical Code of Conduct Policies

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### Discrimination, Harassment, and Sexual Misconduct Policy

Members of the NCC community, guests and visitors have the right to be free from sexual discrimination, harassment, and misconduct. All members of the campus community are expected to conduct themselves in a manner that does not infringe upon the rights of others. When an allegation of misconduct is brought to an appropriate administrator's attention, and a Respondent (hereinafter referred to as "Responding Party") is found to have violated this policy, sanctions will be used to reasonably ensure that such actions are never repeated. This policy has been developed to reaffirm these principles and to provide recourse for Complainants (hereinafter referred to as "Reporting Party") whose rights have been violated. This policy is intended to define community expectations and to establish a mechanism for determining when those expectations have been violated. For detailed information, please refer to the "Discrimination, Harassment, and Sexual Misconduct Policy" in the [NCC College Catalog/Student Handbook](#).

### Professional Conduct Policy

Documented evidence of a student's failure to conduct themselves in accordance with professional codes of conduct (e.g., Program, College, Departmental and Host Facility Codes of Ethics, Codes of Conduct, Policies on Clinical Procedures, Departmental Policies and Procedures, etc.) will result in serious academic penalties up to and including failure of the course and/or dismissal from the program.

Professional Conduct includes, but is not limited to, the following behaviors:

- Students are expected to communicate and interact with one another, faculty, and clinical staff in a respectful, professional manner.
- Recognizing that personal relationships and/or being too friendly with staff technologists and staff can create misconceptions of favoritism, professional interactions must always be maintained.
- Students shall abide by NCC's Discrimination, Harassment, and Sexual Misconduct Policy when interacting with their fellow students, faculty, and clinical staff.
- Students shall avoid engaging in unwelcome harassing behavior or verbal, written, and/or online conduct that deprives another person of the loss of education access, opportunities, rights, and/or peaceful enjoyment therefrom.
- Students shall avoid any intimidating speech directed at a specific individual in a face-to-face confrontation that is likely to provoke a violent reaction.
- Any student engaging in alleged aggressive, disrespectful, unethical, or sexual harassing behavior toward any person encountered throughout this course of study involving patients, peers, college or hospital staff, visitors or faculty will be directed to leave or be escorted off the clinical site or NCC campus by Public Safety. This behavior will also require a conference with the Clinical Education Coordinator and the Program Director, as well as the Dean of Health Sciences and Education, the Title IX Officer, and/or the Dean of Students.

## NCC Radiography Program's Student Handbook

If a student wishes to appeal any action taken under this policy, they should follow the procedures listed in the NCC College Catalog/Student Handbook, and other applicable policies listed in this handbook. For further information, please refer to "Student Code of Conduct" in the [NCC College Catalog/Student Handbook](#).

### Mistreatment of Radiography Student at Clinical Education Site

If there is an issue of student mistreatment by a staff person at the clinical site, the student should complete an incident report form and submit it to the Program Director or Clinical Education Coordinator for follow-up. The "Incident Report" form is included with the other program documents on Trajecsys.

At the completion of fact finding by the Program, the Radiology Administrator will be approached if the issue cannot be resolved and warrants that level of intervention or disciplinary action.

### Radiography Student Request to Transfer from Clinical Education Site

After attempts have been made by the Clinical Education Coordinator, Clinical Preceptor, and student to resolve a student's problems or reason for the request, the student may initiate a written request for a transfer from the clinical education setting. Transfer of clinical education settings will be done on a **one-time basis**.

The written request should contain information regarding the reason for requesting the transfer and any attempts that have been made to resolve the issue. Upon receipt of the written request, the Program Director and/or Clinical Education Coordinator will act as mediators and meet with all parties involved to determine if an alternative solution can be found.

If the reasons are due to the student's unprofessional conduct, the request will be denied, and the student will be withdrawn from the program. If the decision is to transfer the student, the Program Director will assist the student in, but not be responsible for, nor guarantee, finding another clinical education setting.

### Withdrawal of Radiography Student from the Clinical Education Setting

The clinical education setting reserves the right to request that the college withdraw a student from their site due to a variety of reasons (e.g., unacceptable personal behavior, unethical conduct, insubordination, substance abuse, threats to patient or staff safety, etc.) **Any student that is asked to leave a clinical site due to unprofessional conduct will be withdrawn from the program.**

If the withdrawal is due to "other reasons" (e.g., staffing cutbacks, personality clashes, clinical performance) the Program Director and Clinical Education Coordinator will investigate the issues and reach a decision as to the student's progression in, or withdrawal from, the program.

Until a decision is reached, the student will be placed on suspension. Days missed will be made-up during the **six (6) week extension** for clinical education if the student is allowed to continue in the program.



Reassignment to another site due to "other reasons" (if approved) is a one-time occurrence, a second request will result in the student's withdrawal from the program. If the decision is to allow the student to continue in the program and there is not an alternative clinical site willing to accept them, the student will be withdrawn from the program.

If there is a non-voluntary withdrawal from the Radiography Program, the student must be reviewed and cleared by the ARRT before taking an ARRT certification examination in the future.

## "Already Did That"

If you say, something similar or to the likeness of "I already did that procedure" or "I already comped that". That kind of statement displays an attitude warranting noncompliance with the clinical code of conduct. Students, like Radiographer's, cannot refuse to do examinations. There is something to be learned from every patient interaction. If communicated to the Clinical Education Coordinator, by the Clinical Preceptor, a plan of action will be initiated.

### Noncompliance: "Already Did That"

The statement of likeness of "Already Did That" is an infringement on the "[Educational and Clinical Code of Conduct Policy](#)." The following steps will be taken in response to a noncompliance to the Clinical Code of Conduct pertaining to any statement resembling "Already Did That," reported by Clinical Preceptor and/or Clinical Education Coordinator:

**1<sup>st</sup>** occurrence

- ✓ [Verbal Warning](#)

**Subsequent** occurrences

- ✓ [Continual Non-Compliance](#)

- Two (2) points deducted from current clinical course grade for each incident.

## Cell Phones and Smartwatches

Cell phones and smart watches are prohibited as aids during graded evaluations. Usage during evaluation will be perceived as academic dishonesty. Therefore, didactic instructors have the authority to have smart watches and cell phones removed during any form of didactic academic assessment. Be aware, the ARRT will not allow one to sit for registry unless cleared of academic dishonesty.

Clinical Preceptors have the authority to have smart watches and cell phones removed during competency exams and/or if it impedes one's attentiveness to learning and patient care. If excessive use is communicated to the Clinical Education Coordinator, by the Clinical Preceptor, a plan of action will be initiated.

### Noncompliance: Cell Phones and Smart Watches

The use of cell phones and smart watches is an infringement on the "[Educational Clinical Code of Conduct Policy](#)." The following steps will be taken in response to a noncompliance to the Clinical Code of

Conduct pertaining to Cell Phone and Smart Watch usage reported by Clinical Preceptor and/or Clinical Education Coordinator:

**1<sup>st</sup>** occurrence

- ✓ Verbal Warning

**Subsequent** occurrences

- ✓ Continual Non-Compliance
  - Two (2) points deducted from current clinical course grade for each incident.

## Personal Laptops

Personal laptops are permissible for use in a classroom setting and should only be used as an aid in lectures and education. The instructor has the right to ask the student to put the laptop away if collectively determined the laptop is not conducive to the learning process.

Personal laptops are not permissible in a clinical setting. A student is required to be always present and available during the clinical experience. If communicated to the Clinical Education Coordinator, by the Clinical Preceptor, a plan of action will be initiated.

### Noncompliance: Personal Laptops

Personal laptops used at the clinical site is an infringement on the “[Educational Clinical Code of Conduct Policy](#).” The following steps will be taken in response to a noncompliance to the Clinical Code of Conduct pertaining to personal laptop usage reported by Clinical Preceptor and/or Clinical Education Coordinator:

**1<sup>st</sup>** occurrence

- ✓ Verbal Warning

**Subsequent** occurrences

- ✓ Continual Non-Compliance
  - Three (3) points deducted from current clinical course grade for each incident.

## Social Networking

Being active in social media can help you meet and communicate with other students, but it is important to use good judgment. Familiarize yourself with the terms and conditions of the sites or services you use and be careful not to post anything that would jeopardize your safety or future job prospects.

Be careful not to use social media to harass or threaten others or to damage their reputation. It is only human to disagree with someone, but differences of opinion should be expressed respectfully. Behavior that is not acceptable on campus is not acceptable online. Infringing on the rights of others or seriously disrupting the educational functions of the College may be in violation of the Student Code of Conduct and may result in disciplinary action. If you have questions, please contact the Assistant Dean of Student Life at 610-861-4558.

## Radiography Program social media Policy

**Social networking is not permitted during classes, lab, and clinical practice.** Be aware that information published on social media about, or related to your clinical experience, clinical site, clinical or college personnel may be considered a violation of the professional conduct policy and/or HIPAA resulting in an involuntary withdrawal from the Radiography Program.

Make every effort to present yourself in a positive, mature, responsible, authentic, and professional manner. Interactions should always be honest, civil, and respectful. Despite your personal privacy settings, content that you publish on social media should always be considered public and can never truly be removed or deleted. With this said, it is a HIPAA violation if you mention a patient and include enough information that the person could possibly be identified. This includes posting images (whether the patient is specifically identifiable or not). Furthermore, said violation may expose the offender to criminal and civil liability. **When in doubt, do not post.**

## **Radiography Student Employed in Radiology at the Clinical Site**

Students may be employed at the clinical education setting while they are in the Radiography Program, but only when they are not functioning in the "student capacity." In other words, these are two separate and distinct roles, and under no circumstances are the students to use time as an employee to complete clinical education requirements such as performing competency or [proficiency evaluations](#).

**To undertake clinical education activities while functioning as an employee is considered academic dishonesty and will be handled under the cheating and plagiarism policy.** A grade of "F" will be assigned followed by suspension and/or withdrawal from the program. Suspensions and withdrawals reported to, and evaluated by, the ARRT. This may prevent the student from being able to take the registry exam in the future.

## **Tobacco/E-cigarettes on College Campuses and Clinical Facilities**

Northampton Community College strives to provide a safe and healthy environment in which to teach, learn, research, live, and work. The college recognizes that:

- Smoking is a major cause of preventable disease.
- That a tobacco and smoke/vaping-free college is consistent with the college's mission and purpose; and that.
- A tobacco and smoke-free college will improve individual and community health.

This policy applies to all persons, including all students, faculty, staff, volunteers, contractors, vendors, and visitors, anywhere on college campus and in college vehicles, college buildings, contracted clinical buildings/facilities on all campuses, and parking lots.

For purposes of this policy:

**Northampton Community College** shall define all locations, campuses, buildings, and outdoor areas owned and/or operated by the college.

**Tobacco and smoking-related products** are defined as any type of tobacco or smoking-related products intended to mimic tobacco products or the smoking or **vaping** of any other substance. This includes, but is not limited to cigarettes, cigars, cigarillos, smokeless tobacco, electronic cigarettes, pipes, **vaping pens**, bidis, hookahs, chewing tobacco and snuff.

**College Vehicle** is defined as any vehicle that is owned, leased, or rented and used for transportation for college business and includes the driver and all passengers.

Use of any tobacco or smoking-related products is prohibited at Northampton Community College, consistent with applicable law and college policy.

Additionally, the possession or use of cannabis, cannabinoids, marijuana or other controlled substances on university property or any clinical facility is prohibited. Students should also refer to the Health Careers Medical Marijuana Policy included in their Acceptance Checklist.

It is the responsibility of all members of the community to comply with this policy, and it is expected that both smokers and nonsmokers will cooperate in the implementation of the policy in an atmosphere of mutual respect and consideration. All members of the college community are encouraged, if comfortable, to promote compliance with this policy by reminding students, faculty, staff, volunteers, contractors, vendors, and visitors of the prohibition of use of tobacco and smoking-related products at Northampton Community College, as necessary.

Any individual in violation of this policy may be subject to disciplinary action. Faculty and staff in violation of this policy may be reported to the individual supervisor. Students in violation of this policy may be reported to the Office of Student Conduct and Conflict Resolutions which may result in dismissal from all programs with the School of Health and Sciences and Education.

## Legislative Clinical Site Policy

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### Confidentiality of Patient Information: HIPAA

Refer to section under [Health Insurance Portability and Accountability Act \(HIPAA\) of 1996](#). The student is required to abide by the policies concerning confidentiality issues and “anything” regarding HIPAA. The requirement is brought forth by acknowledging and signing the [NCC Departmental Confidential Policy: HIPAA form](#).

Students will comply with the Confidentiality Policies and HIPAA regulations at their clinical sites. Requests for confidential information related to the clinical education center and/or patient should be referred to the supervising radiographer, clinical preceptor, radiologist, or attending physician.

Any documentation (e.g., competency forms, image critiques) containing protected patient information must be kept at the clinical site in a secure area. Documentation containing patient information is never to be taken home by the student.

**Failure to abide by the policy will result in strict disciplinary action such as withdrawal from the program.**

### Patient's Bill of Rights

There is not one single Patient's Bill of Rights. A typical example follows and serves to acquaint you with the rights and expectations of patients as well as the clinical site where you will be assigned. We consider you a partner in your hospital care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible. This hospital encourages respect for the personal preferences and values of everyone.

While you are a patient in the hospital, your rights include the following:

- You have the right to considerate and respectful care.
- You have the right to be well-informed about your illness, possible treatments, and likely outcome and to discuss this information with your doctor. You have the right to know the names and roles of people treating you.
- You have the right to consent to or refuse treatment, as permitted by law, throughout your hospital stay. If you refuse a recommended treatment, you will receive other needed and available care.
- You have the right to have an advance directive, such as a living will or health care proxy. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have written an advance directive, you should provide a copy to the hospital, your family, and your doctor.
- You have the right to privacy. The hospital, your doctor, and others caring for you will protect your privacy as much as possible.
- You have the right to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.

## NCC Radiography Program's Student Handbook

- You have the right to review your medical records and to have the information explained, except when restricted by law.
- You have the right to expect that the hospital will give you necessary health services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.
- You have the right to know if this hospital has relationships with outside parties that may influence your treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.
- You have the right to consent or decline or take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital provides.
- You have the right to be told of realistic care alternatives when hospital care is no longer appropriate.
- You have the right to know about hospital rules that affect you and your treatment and about charges and payment methods. You have the right to know about hospital resources, such as patient representatives or ethics committees that can help you resolve problems and questions about your hospital stay and care.
- You have responsibilities as a patient. You are responsible for providing information about your health, including past illnesses, hospital stays, and use of medicine. You are responsible for asking questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment, you are responsible for telling your doctor.

This hospital works to provide care efficiently and fairly to all patients and the community. You and your visitors are responsible for being considerate of the needs of other patients, staff, and the hospital. You are responsible for providing information about insurance and for working with the hospital to arrange payment, when needed. Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of lifestyle on your personal health.

A hospital serves many purposes. Hospitals work to improve people's health; treat people with injury and disease; educate doctors, health professionals, patients, and community members; and improve understanding of health and disease. In carrying out these activities, this institution works to respect your values and dignity.

## Radiation Safety Policy and Procedures

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In the first three-weeks of RADT 107 Clinical Practice I, there is an orientation session that prepares the students to safely use ionizing radiation. Application of radiation safety is assessed through a practical evaluation.

### Dosimeter

The College arranges a dosimeter-based radiation monitoring service. Fees are included in the clinical education course offered each fall. The dosimeters provided to the students are to be used in the radiographic labs on campus during the first, fall and spring semesters for lab courses. The dosimeters are to be always worn during the clinical course work which spans the entire duration of the program. For questions concerning the dosimetry service at the College, the students are to see the Program Director.

### Dosimeter Care

To prevent faded or altered measurements, dosimeters should be stored in a low-radiation background area. Guard the dosimeter from direct sunlight and extreme heat. Take necessary precautions to prevent the dosimeter from getting wet.

As per general manufacturer, the dosimeter is suitable for use at an ambient temperature of -10°C to +40°C and a relative humidity of 10% to 90%. It should not be exposed to direct sunlight above 1000 W/m<sup>2</sup> (The 1000 watts/m<sup>2</sup> normally only comes at solar noon for a few minutes on a clear bright day - the rest of the time it is less and even far less. The exception being a cloud event or reflected light).

If necessary, the blister packaging can be cleaned with a damp cloth. Only the aluminum oxide detector is not affected by heat or moisture, meaning other components in the blister packet are and can fade or alter your measurements.

### Dosimeter Practice

- Dosimeters are to be always worn during clinical rotations and the laboratory sessions. No student will be permitted to remain in an energized laboratory without their dosimeter.
- Only the person who is assigned a dosimeter shall wear it. Do not loan a dosimeter or use it for monitoring an area.
- The dosimeter should be worn such that monitoring is optimized (usually on the collar) when working with ionizing radiation. Detectors should always be turned to face the source of radiation.
- The radiation dosimeter shall not be worn when receiving a medical radiation exposure.
- When wearing a lead apron, the dosimeter should be placed on the collar outside the apron.
- For students monitored using two dosimeters, one should be worn on the collar, outside the lead apron, and the other should be worn at waist level, under the apron.
- In the event of pregnancy, a student who voluntarily declares her pregnancy in writing will be provided with a (baby) dosimeter that is always worn at waist level for fetal monitoring. Please refer to "[Voluntary, Written Declaration of Pregnancy and Dosimeters](#)".

### Voluntary, Written Declaration of Pregnancy and Dosimeters:

If you are pregnant and decide to voluntarily disclose your pregnancy (must be in writing) to the program and clinical site, you will receive, in addition to your regular dosimeter, a "baby" dosimeter. You will also need to:

- Have a consultation with the program director and the hospital's physicist (radiation safety officer)
- Submit your individualized plan to complete the program's requirements to NCC.

NCC will make reasonable accommodations for you and your unborn child. At any time, you have the right to rescind your declaration of pregnancy, which must be done in writing.

### Non-Compliance: Dosimeter Practice

Not only is the dosimeter a vital component of your dress code, but it is also imperative in representing radiation safety habits. The dosimeter is part of your uniform and provides integral information pertaining to your radiation safety. Refer to "[Non-compliance: Clinical Education Dress Code](#)" in this handbook.

### Quarterly Dosimeter Exchange

Delay in returning the dosimeter results in considerable extra work and delays in obtaining dosimetry reports. A dosimeter which is returned late cannot be processed with the control dosimeter supplied with the shipment. Dosimeters not processed during the designated period may have their results impaired by degradation.

Dosimeters are to be exchanged quarterly and students will be notified by the Department Secretary, Clinical Education Coordinator, or Program Director. The old dosimeter must be promptly returned to the Department Secretary in exchange for a new dosimeter.

### Loss or Damaged Dosimeter

Immediately report lost or damaged dosimeter to the Clinical Preceptor, Clinical Education Coordinator **and** Program Director. A lost dosimeter will need to be replaced before clinical rotations can resume. Any clinical days missed must be made up. Replacement typically takes five to seven business days. Additional costs incurred for replacement are at the expense of the student.

### **Radiation Dosimeter Report (RDR)**

In RADT 102 Fundamentals of Radiologic Sciences, the students are shown where the Radiation Dosimetry Report (RDR) is posted. The students are given instructions on how to read the RDR.

Report (RDR) is posted (without the individual's Social Security number and date of birth) in the Gary Wogenrich Laboratory after being reviewed by the Program Director, within thirty (30) days after receipt of the report.



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Per the U.S. Nuclear Regulatory Guidelines, workers (students) under the age of 18 are limited to 1/10 of the (yearly) adult effective dose limit of 5000 mrem. It is anticipated that the dose limits for NCC students who may be under the age of 18 will comply.

### RDR Review Procedure

If a student has a prior dose history, those reports are to be submitted to the Program Director to ensure an accurate record so that annual exposure limits are not exceeded.

An exposure below the limits defined above in each individual category (shallow, deep, eye) will be considered as reasonable. The limit is set as 10% of the NRC annual total effective dose equivalent (TEDE) for the whole body (5,000 mrem/50mSv). The guideline set forth for Radiography students, above the age of 18, is a limit of **125 mrem (1.25 mSv) per quarter**. The limit for the Embryo and Fetus is a monthly exposure limit of 50 mrem (0.5 mSv) with an entire gestation limit of 500 mrem (5mSv).

**Students will place their initials after their name to document that they reviewed the result of their exposure.** The clinical site's Radiation Safety Officer and/or the Clinical Preceptors will receive a summary and copy of the RDR for the students assigned to their clinical site. The students will also receive the same report.

If exposures exceed the guideline, the student will be notified and counseled appropriately by the Program Director and the clinical site's Radiation Safety Officer (RSO). The student will provide the Program Director with a copy of any documentation provided to them by the RSO. The Program Director will discuss the RDR with the student, Clinical Preceptor, and/or RSO to investigate possible contributing factors for the increased exposure to ionizing radiation. After the inquiry, ways to improve radiation safety will be discussed with the students.

### NRC Form 5 Equivalent Occupational Exposure Record

On an annual basis, following the completion of or withdrawal from the Program, all students will receive a copy of NRC Form 5 Equivalent Occupational Exposure Record for a Monitoring Period under the Provisions of NRC 10CFR 19 and Title 25 of the Pennsylvania Code.

## Employment in a Radiology Clinical Setting

If NCC students are currently employed or are hired by a clinical facility, they are to wear the NCC provided dosimeters if the employer does not issue a dosimeter. If the facility provides a dosimeter for the students employed at their site, the student must provide, or arrange to provide, the Program Director a copy of their dosimetry report. The Program Director will monitor the student's cumulative exposure and communicate with the facility RSO when necessary. The facility's clinical employment orientation process will cover topics such as:

- Storage of dosimeters prior to leaving the clinical site
- Radiation dosimetry reports – location
- Review of radiation dosimetry reports (RDR) – Radiation Safety Officer (RSO)

## Holding Patients/Image Receptors

Students must employ proper radiation safety practices including, but not limited to, time, distance and shielding. 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.

## Radiation Producing Equipment-Gary Wogenrich Laboratory

The Commonwealth of Pennsylvania Department of Environmental Protection is the governing body that awards the certificate of registration for the radiation producing machines located in the Gary Wogenrich Laboratory. The current certificate is displayed by the entrance to the Shimadzu Room in the common area of the radiographic laboratory.

### Laboratory Safety Practices

Energized radiographic equipment can be dangerous when used inappropriately. Misuse of the equipment and inappropriate behavior will result in withdrawal from the Radiography Program. Students must comply with the following rules and regulations:

- You are not to make radiographic exposures unless an instructor is present.
  - You will be able to practice with the units, but the exposure buttons will be disabled when no instructor is present.
- The radiographic room door is to be locked prior to making an exposure.
  - Exposures are never to be made when the door to the radiographic room is open.
- If the door to the radiographic room is closed, always knock before attempting to enter.
- If you notice that the equipment is not working properly, report your findings to a faculty member immediately.
  - Malfunctioning equipment is never to be used.
  - As a student, you are never to attempt to repair the equipment.
- Friends, relatives, colleagues, or pets are never to be exposed to ionizing radiation in the lab.
- Students are responsible for the return of any equipment and all accessories (phantoms, cassettes, etc.) to their proper place.
- All equipment and the appropriate circuit breakers will be turned off before leaving the laboratory. Refer to the posted startup/shutdown informational pages.
- The lab area must be cleaned/organized before leaving for the day.
  - Failure to clean-up will be reflected in the course grade.

### Laboratory Hours

Students are encouraged to utilize the Wogenrich Laboratory outside of scheduled class time. Open lab times are as follows:

- Monday –Friday 5:00pm – 10:00pm,

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- Saturday & Sunday 9:00am – 9:00pm

Students requiring access to the Radiography Program facilities during off-hours (outside the hours of 7:30 a.m. to 5:00 p.m. on Monday through Friday) or when the campus is closed may have to contact [Public Safety](#) to unlock the building or lab door. [Public Safety](#) can be reached at 610-861-5588, please have your NCC photo ID to ensure access.

## Non-Radiation Safety Policy and Procedures

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### Emergency Medical Care at the Clinical Education Setting

The Health Agency shall provide emergency medical care for injury or illness of students, using the student's health insurance, in the Health Agency until provisions can be made for continued care. The student maintains the responsibility for payment of the medical expenses.

### Infectious Disease Precautions

Clinical rotations may bring you into contact with infectious patients or patients with compromised immune systems. For this reason, students must stay up to date with their immunizations and follow established infection control protocols. Protect yourself and protect your patients! Infectious diseases (airborne) include, but are not limited to, chickenpox, diphtheria, influenza (flu), measles, mumps, rubella, tuberculosis (TB), whooping cough (pertussis), coronavirus and COVID-19.

Depending on the clinical rotation, students will be required to wear personal protective equipment (PPE) appropriate for the rotation, environment, and/or patient condition. Students will follow the protocols established by their clinical site. If the PPE required by the clinical site is deemed inadequate by the School of Health Science and Education's Program, the Program's guidance will take precedence.

Students found to be out of compliance with PPE guidelines will be removed from their clinical site for the remainder of that day and the hours will need to be made up. Any continuing violations will result in escalating corrective action.

### Exposure to Infectious Disease

#### ***Tuberculosis:***

Allied health students will need to be tested annually for TB. If any employee/student contracts active tuberculosis (not latent/inactive tuberculosis), they shall be removed from their job/classroom/dorm setting until medical documentation and laboratory results have been received at the [Health and Wellness](#) Center to confirm diagnosis and mode of treatment. Signed documentation from a licensed physician must state that they are not in an infectious state. These forms are available at the [Health and Wellness](#) Center. Thereafter, a progressive note must be submitted annually by the treating physician and/or a tuberculosis screening questionnaire done at the [Health and Wellness](#) Center.

#### ***Blood borne pathogens:***

If any employee/student has an exposure incident, (exposure incident as define by OSHA is defined as a specific eye, mouth, other mucus membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from the performance of a duty), the following procedure should be observed.

The individual should immediately inform their instructor or immediate supervisor, wash the exposed area with water thoroughly and report to NCC's [Health and Wellness](#) Center. For off campus or clinical

sites, staff/student should inform their supervisor/instructor of the exposure. Hospital protocol should be followed and communicated to the [Health and Wellness](#) Center in the case of a clinical exposure.

An Incident or Exposure form must be completed. The staff/student will be counseled at the [Health and Wellness](#) Center and if appropriate, will undergo base line testing for HBV and HIV. All confidential documentation will be held at the [Health and Wellness](#) Center. The staff/student is to be followed by the [Health and Wellness](#) Center for re-evaluation and assessment while being treated.

***Other exposures, or possible exposures:***

Since the pandemic, there has been rigorous guidance communicated by the [Health and Wellness](#) Center for any special cases of infectious disease. Guidance is continually under review and is subject to change. In the event of a public health emergency, follow the guidelines detailed on the College's [Health and Wellness](#) website: [NCC Health & Wellness Website](#). In any event, the student should also consult with their health care provider.

## **Accidental Exposure to Infectious Materials**

In the event of accidental exposure to infectious materials, the clinical site's protocol designed to protect Health Agency personnel shall be utilized to protect the College's students. It shall be the responsibility of the student to promptly report any suspected or actual exposure to a representative of the Health Agency and to the College faculty or staff person in charge.

If an incident occurs on site in clinical practice, the clinical site will:

1. Complete an incident report for an invasive injury and forward a copy of the incident report to the Clinical Preceptor, Clinical Education Coordinator, and Radiology Administrator.
2. Ensure follow-up, per the clinical site's employee exposure protocols.
3. Ensure that students adhere to the clinical site's policies regarding personal protective equipment and universal precautions.
4. Send initial and follow up reports to the NCC [Health and Wellness](#) Center.

## **Accidents Occurring in Lab or at the Clinical Practice Setting**

All student related accidents that occur during laboratory sessions on campus or clinical education that result in patient injury, personal injury, personnel injury, or equipment damage, must be immediately reported to the lab instructor, Clinical Preceptor, and/or Clinical Education Coordinator.

For injuries or potentially infectious exposures at the clinical site, the hospital's emergency room will treat the student. Students should always have their health insurance information available.

It is important to document the incident stating the facts as soon as possible. If an incident report is completed at the clinical site, a copy of that incident report must be forwarded to both the Clinical Education Coordinator and NCC [Health and Wellness](#) Center.

Incidents on the college campus are documented by [Public Safety](#) which can always be reached on the phone to radio link by calling 610-861-5588.

## Program (Opening) Meetings

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Mandatory program opening meetings are scheduled at the beginning of each semester and the summer session. These sessions are an integral component of the program and is in place for the purpose of distributing and communicating the clinical practice course syllabus, rotation schedules, changes in assessment techniques, updated clinical information, changes or updates in policies/procedures, and any other issues at hand that are relevant to discuss.

Opening meetings are also an opportunity to meet with your mentor or answer questions for your mentee. Preceptors from each clinical site attend these meetings to orient or provide site specific information for their respective students and collaborate with administrative members of the Radiography Program.

### Non-Compliance: Program Meeting

Student attendance is mandatory. The following consequence applies if the student is late or absent without prior permission given by the Program Director and/or Clinical Education Coordinator. The following steps will be taken in response to noncompliance to either being late or absent for a scheduled program meeting reported by the Clinical Education Coordinator and/or Program Director:

#### **Any** occurrence

##### ✓ **Continual Non-Compliance**

- One (1) day forfeiture of absence requiring clinical make-up.
  - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to [“Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course”](#)

## Clinical Site Allocation and Schedule

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### Student Assignment

When accepted into the Radiography Program, students are placed in one of multiple, major affiliate hospitals. The student's residence and specific request is taken into consideration before clinical sites are assigned. However, there are instances where relatively high numbers of acceptances reside in a one specific geographical area. As a result, the program may not be able to place the student in a clinical site close to their residence or grant specific requests.

As per the Joint Review Committee on Education in Radiologic Technology (JRCERT), assignments are primarily based on providing an equitable learning experience that provides a wide range of procedures for competency achievement, including mobile, surgical, and trauma examinations.

To abide by these principles, students are assigned to different primary clinical education sites for each year they are in the program. The focus is switching between sites with larger patient volumes with those assigned to smaller facilities. This will provide students with a more comprehensive insight into different clinical environments and cultures. It will also give the students more networking opportunities and increase their visibility to potential hiring managers and staff.

### JRCERT Standard of Schedule: The 4-10-40 Rule

As per Standard Four (4.4): JRCERT's Curriculum and Academic Practices, clinical education is not permitted to be scheduled, and students may not volunteer to participate in clinical rotations, any time the college campus is closed. Examples of campus closures include Labor Day Holiday, Thanksgiving Holiday, Winter Holiday, Martin Luther King Observation, Memorial Day Holiday, and Fourth of July Holiday. Please refer to [Northampton Community College's current Academic Calendar](#) for current semester closure dates.

In addition, students are not permitted to do more than 10 hours of clinical in any one day and are not permitted to do more than 40 hours of clinical plus didactic instruction in a week. To optimize educational efficiency, students may not be scheduled for less than 4 hours in any one day. **The 4-10-40 rule.**

### Orientation Schedule

General orientation will be provided by the first day of clinical practice. Site orientation will include, and are not limited to, the following topics:

- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions
- Dosimeter storage area if the site issues dosimeters

- Epic Healthcare Program Training

## Rotation Schedule

A common rotation schedule is prepared, prior to the beginning of each semester/session, by the Clinical Education Coordinator in collaboration with the Clinical Preceptors to ensure all students spend an equivalent amount of time in each diagnostic area. The schedule consists of daily "blocks" for the specific number of days in each rotation. The schedules are distributed to the Clinical Preceptors who assign the specific dates for the rotations according to staffing and patient volume availability at their site.

Copies of the schedule are distributed to the student and the Clinical Preceptor to ensure the schedule is followed. In areas where there is more than one room, the Clinical Preceptor will decide where to place the students for their optimal educational experience. Each student will receive the same rotations just in a different sequence. Clinical shifts are typically 8 ½ hours including a 30-minute lunch and a 15-minute morning break. Some sites may allow 45 minutes for lunch with no morning break.

During the winter session (Clinical Practice 1B), shifts are scheduled 5 days per week and 9 hours per day, including lunch/breaks, except for one day being 4 hours, without lunch/break, on the Friday before the college is closed for the Holidays.

During the summer session (Clinical Practice III), shifts are scheduled 4 days per week for 10 hours a day including lunch/breaks.

It is the responsibility of the student to know when cases have been ordered, scheduled, announced, or called for that exam room or rotation (including portables and OR). It is not up to the staff radiographer to find you in your assigned rotation. Any day missed within the scheduled rotational area is to be made-up in the same rotational area missed. For example, if you are absent during a day of OR rotation, you will be required to make-up that day in OR only.

## Rotation Schedule Change

### Initiated by the Clinical Preceptor

Clinical education rotation schedule changes initiated by the Clinical Preceptor must be kept to a minimum and should be considered only in the best interests of achieving clinical education objectives as opposed to radiology department objectives. As per accreditation (JRCERT), rotation schedules must provide an equitable clinical experience for each student.

### Requested by Student

Clinical education rotation schedule changes requested by the student must be kept to a minimum and must be approved, **in advance**, by the Clinical Preceptor. There must be adequate supervisory personnel available, and the change must maintain an equitable clinical experience for each student. **Students cannot take it upon themselves to adjust their clinical schedules without approval.**



## **Meal/Break**

The College's staff and students have access to the dining facilities at the clinical education setting.

Each student shall have the same amount of time for lunch and the scheduled time is determined by the Clinical Preceptor, not the student. Clinical shifts are typically 8 ½ hours including a 30-minute lunch and a 15-minute morning break. Some sites may allow 45 minutes for lunch with no morning break.

Even though students may want to eat together, sometimes this may not be possible. For example, if you are in the middle of a case, you would not leave; or if the case is rare, it would be more beneficial to stay for the exam and go to lunch later.

## Clinical Education Dress Code

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The "Clinical Education Dress Code" includes identification badges, radiographic markers, dosimeters, uniform, and miscellaneous personal hygiene attributed to overall appearance. Requirements are reviewed and distributed to students at the initial program orientation meeting.

### Non-Compliance: Clinical Education Dress Code

While adhering to the "Clinical Education Dress Code," the student represents not only themselves but also the Radiography Program, the Clinical Education Facility, and the College. Failure to comply with the "Clinical Education Dress Code" will result in the following reported by the Clinical Preceptor and/or Clinical Education Coordinator:

#### 1<sup>st</sup> occurrence

##### ✓ Verbal Warning

- One (1) day forfeiture of absence requiring clinical make-up.
  - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to ["Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course"](#)

#### Subsequent occurrences

##### ✓ Continual Non-Compliance

- Two (2) points deducted from current clinical course grade for each incident.
- One (1) day forfeiture of absence requiring clinical make-up for each incident.
  - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to ["Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course"](#)

## Identification Badges

The Identification badge is part of the student's uniform. Some clinical sites provide an ID while others require the students to wear their NCC student ID. The badge must be worn, all times, at the clinical site. *Failure to comply falls under the category of failure to comply with "Clinical Education Dress Code".*

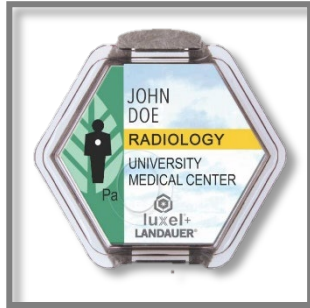
## Markers



Failure to properly mark and/or identify a radiograph is a potential medical/legal problem and results in a possible negligence case. Students are required to utilize radiographic markers to properly mark each radiographic procedure they perform. Markers may be provided by the clinical education setting. If not provided by the clinical education setting, students must purchase their own before the start of clinicals.

Markers should include 3 initials for identification purposes. The left marker must be blue, and the right marker must be red. *Failure to comply falls under the category of failure to comply with "Clinical Education Dress Code".*

## Dosimeters



**Dosimeters** must be worn at all times while at the clinical education site. Please refer to Dosimeter Service and Dosimeter Guidelines for further information. *Failure to wear your dosimeter, at the site and in practice lab, falls under the category of failure to comply with "Clinical Education Dress Code".*

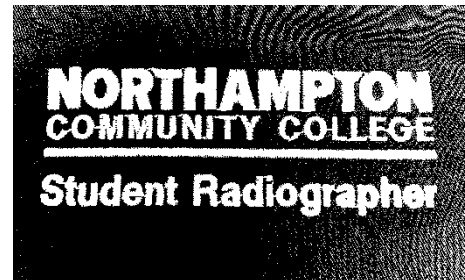
## Uniform

The following are the requirements for uniform regardless of site. Failure to comply to the following falls under the category of Failure to comply to the following falls under the category of failure to comply with the "Clinical Education Dress Code"

### Black Scrubs

All students are to wear black scrubs with identifying embroidery above the left chest pocket which includes the college logo, "Northampton Community College" and "STUDENT RADIOGRAPHER"

- Students are allowed to purchase any style or brand.
- NO stretch pants or leggings



### Black shoes/sneakers

- Must be non-porous, clean and remain clean.
- NO sandals

### Jewelry, Piercings, and Tattoos

- A limit of two (2) smooth rings are allowed.
- One watch/Fitbit is acceptable.
- Plugs (gauges) must be solid and match skin color if worn.
- Tongue piercings must be tongue colored if worn.
- Tattoos must be covered.
- NO necklaces or bracelets
  - ✓ Jewelry may harbor bacteria, tear gloves, or pose a scratch risk to patients.
- NO loops or dangling earrings

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- ✓ Patients may grab and pull.
- NO exposed piercings (e.g., eyebrow, lip, nose rings)
  - ✓ Low profile nose studs may be permissible - check with your Clinical Preceptor
  - ✓ Presents as a risk of infection if grabbed by a patient.

## Personal Hygiene

The following is a list of items to provide a safe and welcoming environment between the student, patient, and personnel. *Failure to comply to the following falls under the category of failure to comply with the "Clinical Education Dress Code".*

### Hair

- Hair must be of a naturally occurring color, worn in good taste, out of the face, and tied back to prevent it from contacting the patient.
- Facial hair must not impede a secure fit of the face mask used for patients on airborne precautions.

### Nails

- Only clear fingernail polish may be used for the clinical education setting.
- Fingernail length should not exceed 1/4" due to hygienic and patient safety considerations.
- NO artificial finger nails.

### Scents and Odor

- Deodorant should be worn.
- Use breath freshener after eating onions, garlic etc.
  - ✓ No chewing gum.
- No eating/drinking around patients
- NO perfume, cologne, after shave or scented lotions
  - ✓ These scents can be offensive and cause allergic reactions to patients and personnel.
- NO odor of smoke is permitted.
  - ✓ All clinical sites are smoke free campuses.

## General Patient Care Simulations Requirement

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Before graduation from the program, each student is required to complete a patient care simulation in the following: CPR, Vital signs assessment (Blood Pressure, Pulse, Respiration, Temperature, Pulse Oximetry), Sterile and medical aseptic technique, Venipuncture, Transfer of the patient, Care of patient medical equipment (e.g., oxygen tank, IV tubing).

These skills will be taught, evaluated and/or validated either at the Clinical Site or the College by NCC Faculty, Clinical Preceptor, Radiology Nurse, or a qualified healthcare employee. The outcomes for principles/concepts in each patient care area will be reinforced in all the radiography didactic courses. Successful completion of the simulations will be documented in Trajecsys.

### Cardiopulmonary Resuscitation (CPR)

When this area of instruction/demonstration is completed, the student will be able to:

- Recognize when CPR should be initiated on infants, children, and adults.
- Perform CPR on infants, children, and adults.
- Recognize when the Heimlich maneuver should be initiated on infants, children, and adults.
- Perform the Heimlich maneuver on infants, children, and adults.
- Perform both CPR and the Heimlich maneuver without causing unnecessary bodily harm. Know the theory behind both CPR and the Heimlich maneuver.

### Vital Signs (BP, Pulse, Respiration, Temperature, Pulse Oximetry)

When this area of instruction/demonstration is completed, the student will be able to:

- Take vital signs accurately.
- List the rates of pulse, respiration, and blood pressure that are within normal limits for a child and for an adult.
- Record the readings according to departmental protocol.
- Discriminate between normal and abnormal findings.
- Understand how readings relate to the functioning of the body.
- Explain the implication of abnormal vital signs.

### Sterile and Aseptic Technique

When this area of instruction/demonstration is completed, the student will be able to:

- Differentiate between medical asepsis and surgical asepsis.
- Explain the radiographer's responsibility for maintaining surgical aseptic technique when it is applicable.
- Demonstrate the medically aseptic hand washing technique.
- List the steps in a surgical scrub.
- Differentiate between disinfection and sterilization.

- Demonstrate the correct method of opening a sterile pack and placing a sterile object on a sterile field.
- Demonstrate the correct method of putting on a sterile gown and sterile gloves.
- Demonstrate skin preparation for a sterile procedure.
- Demonstrate the correct method of removing and reapplying a sterile dressing.
- Demonstrate removal and disposal of gowns, gloves, and masks without breaking isolation principles.
- Demonstrate the correct method of linen disposal using medical asepsis principles.
- Name the agent and state the dilution used for disinfecting radiographic equipment, as recommended by the Centers for Disease Control (CDC).
- Demonstrate the proper disposal of contaminated equipment in the clinical area.
- Use isolation techniques for infectious and immunocompromised patients.

## Venipuncture

When this area of instruction/demonstration is completed, the student will be able to:

- Perform venipuncture using universal precautions.
- Maintain asepsis of the area.
- Identify infiltration of the vessel.
- Know what to do for an infiltrated vessel.
- Know the departmental protocol for the procedure.
- Maintain IV patency according to established guidelines.

## Transfer of the Patient

When this area of instruction/demonstration is completed, the student will be able to:

- Describe the cause, signs, symptoms, and treatment of orthostatic hypotension.
- Demonstrate the correct method of moving and positioning a patient to prevent injury to you or to the patient.
- List the safety measures that must be taken when transferring a patient from a hospital room to the radiographic imaging department.
- Demonstrate good body mechanics for lifting and transfer techniques.
- Assist patient to sit from a recumbent position.
- Assist patient in and out of wheelchair.
- Perform two-person transfer of patient from bed to stretcher and stretcher to bed.

## Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)

When this area of instruction/demonstration is completed, the student will be able to:

- Identify the most common types of oxygen administration equipment and explain their potential hazards.
- Identify high-flow and low-flow oxygen delivery devices.
- List the precautions that must be taken when oxygen is being administered.
- Administer oxygen to the patient according to the doctor's orders.

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- List the symptoms that indicate infiltration into the surrounding tissues by an intravenous infusion.
- Move the patient without disrupting the flow of solution within the IV tubing.
- Know out to use an existing IV setup for injection of contrast while maintaining medical asepsis.
- Maintain the predetermined flow/drip rate for the IV setup.
- Provide care to a patient with a tracheostomy.
- Provide care to a patient with chest tubes.
- Provide care to a patient with a urinary catheter.
- Provide care to a patient with intravenous and intra-arterial lines.
- Demonstrate how to drain and measure the output from a urinary collection bag.

## Competency and Proficiency Requirement

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Students will be participating at various clinical sites with the opportunity to complete the competency and proficiency requirements set forth by the ARRT. The following is a summary of competency and [proficiency evaluations](#) for program completions.

- Prerequisite knowledge competency evaluations – 3 (first semester)
- Room competency evaluation at 2<sup>nd</sup> clinical site
- General patient care activities – 10 mandatories
- Mandatory competency evaluations – 36
  - ✓ No more than eight (8) of these mandatory competency evaluations may be simulated.
- Elective competency evaluations – 15
  - ✓ Stipulations for elective competency evaluations:
    - 1 elective must be from the head section.
    - 2 electives must be from the fluoroscopy studies section.
- Mandatory [proficiency evaluations](#) – 6 in the second year



## Direct and Indirect Supervision Policy

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Before proceeding to perform any competency or proficiency, it is essential to understand the Direct and Indirect Supervision Policy in a clinical education setting.

### Direct Supervision

Until competency is achieved by a student in any given procedure, all clinical assignments shall be carried out under the direct supervision of a qualified (ARRT certified and registered) radiographer.

The parameters of **direct supervision** are as follows:

A qualified (**ARRT certified and registered**) radiographer:

1. Is physically present during the performance of the procedure.
2. Reviews the procedure in relation to the student's achievement.
3. Evaluates the condition of the patient in relation to the student's knowledge.
4. Reviews and approves the procedure and images.

After demonstrating competency through a competency evaluation on a procedure, the student may perform that procedure under indirect supervision.

### Simulated Exams: Direct

Simulated exams require direct supervision. If a patient presents at a later date, the exam can be comped at that time so that images can be evaluated, and indirect supervision verified.

### Repeated Views/Exams: Direct

Repeats **must** be done under the **direct supervision** of a qualified (**ARRT certified and registered**) radiographer who is **physically present** during the performance of the procedure.

During **EVERY** repeat, a certified radiographer must:

- Be physically present during the conduct of the repeat image.
- Approve the student's procedure prior to re-exposure.
- Directly inform students when they may accept, or delete, patient images for which the Technologist is responsible.
- Sign the Repeat Exposure Supervision Verification form.

### Mobile Radiographic/Fluoroscopic Procedures: Direct

Mobile exams and fluoroscopic procedures **must** be done under the **direct supervision** of a qualified (**ARRT certified and registered**) radiographer who is **physically present** during the performance of the procedure.

### Transmission of Images: Direct

Whether directly or indirectly supervised, the Radiographer must directly inform students when they may accept, or delete, patient images for which the Technologist is responsible. Students may not send (or delete) images without approval.

### **Indirect Supervision**

Once competency is achieved for a particular study, indirect supervision may be enacted. Indirect supervision is defined as follows: provided by a qualified (**ARRT certified and registered**) radiographer who is immediately available to assist students regardless of the level of student achievement.

### Immediately Available – Defined

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 applies to all areas where ionizing radiation equipment is in use on patients.

### **Student responsibility for Appropriate Supervision:**

The student knows what competencies they have completed and must remain aware of their supervising technologist's presence when performing/practicing exams they have not yet comped. Effective communication with your technologist is vital.

It is just as appropriate to remind a tech that you've passed a comp on a procedure, and you'd like to work independently as it is to say that you haven't comped a procedure and need them to observe.

Ultimately it is the student's responsibility to ensure the proper level of supervision.

### Non-compliance: Direct and Indirect Supervision Policy

The Indirect and Direct Supervision Policy is enforced through the JRCERT (Joint Review Committee on Education in Radiologic Technology) to provide assurance to patient safety and proper educational practices (JRCERT Standard 5.4). The following steps will be taken in response to a noncompliance to the Direct and Indirect Supervision Policy reported by the Clinical Preceptor and/or Clinical Education Coordinator:

#### **1<sup>st</sup>** occurrence

- ✓ **Corrective Action Plan**
  - Five (5) points deducted from current clinical course grade.

#### **2<sup>nd</sup>** occurrence

- ✓ **Disciplinary Action Plan**
  - Five (5) points deducted from current clinical course grade.
  - Forfeiture of one (1) day of clinical required to be made-up.

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- Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to [“Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course”](#)

### 3<sup>rd</sup> occurrence

#### ✓ [Involuntary Withdrawal](#)

- Withdrawal from Clinical Practice based on continually disregarding patient safety encompassed within the “Direct and Indirect Supervision Policy”.

## Competency Evaluations

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### Eligibility to Perform Competency Evaluation

The practical evaluations that are performed in the laboratory setting at NCC help to facilitate the transfer of the student's knowledge to the clinical practice setting. The goal in performing the practical evaluations is to help prepare the student to be more successful in completing the clinical competency evaluations.

When the student has passed their lab practical, they are eligible to do a competency evaluation on that procedure/exam at the clinical site. Otherwise, the clinical experience will be suspended if the student has an outstanding requirement to pass a failed repeat of the same practical.

Any clinical days missed until completed will be forfeited and required to be made-up. Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to "[Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course](#)". In general, the studies are to have been observed, assisted, and performed. Approximately one third (1/3) of the required number of competency evaluations required for the semester are to be completed by the progress report time. Check the syllabus for due dates.

**Competency exams may only be performed during student clinical rotations, not while working as an employee.**

### Eligible Evaluators for Competency Evaluations

Any of the following certified radiographers may do the competency evaluations:

- Radiographer designated by the Clinical Preceptor
- Clinical Preceptor
- Clinical Education Coordinator
- Professional Clinical Student Supervisor
- Program Director

### Competency Terms

#### Number of Competency Exams Permitted on Single Patient

One competency exam per patient. Every patient presents differently and affords a distinct learning experience. Multiple competencies on a single patient would duplicate graded evaluation items such as history taking, room readiness, and etcetera.

#### Single View Competency Exams Listed as One View on the ARRT Competency Requirements Sheet

Students need to be able to perform the entire exam's protocol that may include additional views. The additional views will be included/graded on the comp sheet and the single view being comped must be

done correctly. In the situation where one of the additional views needs to be repeated, a zero is entered in the appropriate row but the comp will be marked as approved in Trajecsys since the required view was satisfactory. E.g., Chest AP (Wheelchair or Stretcher) performs entire study, but it is not graded as a failure if the lateral needed to be repeated.

### Volunteering to do Competency Evaluation

You may do a competency evaluation under the following conditions:

- You have stated **prior** to beginning the examination that you want the procedure to be graded and you have **given the evaluator a properly filled out comp form**. The Category and Procedure/Exam fields are particularly important for accurate record keeping.
  - Failure to do so will mean that the examination will not count towards the completion of the program requirements.
- You may not, in any way, pre-screen or evaluate the patient before declaring that you would like to be graded on the exam.

### Random Selection

If you are ready to do a competency evaluation, but you do not volunteer to perform the exam, you may be selected to perform the competency evaluation.

### Patient deemed "Poor Condition" by Radiographer

If the radiographer feels that the patient is in such poor condition that it would not be safe for a student to attempt a competency evaluation, they have the right to prohibit the attempt for both the patient's and student's welfare. The student should then team up with the radiographer to gain valuable experience and safely manage and image the patient.

## **Failure of a Competency Evaluation**

The Clinical Preceptor will ensure that the failed competency is entered into Trajecsys. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the comp "Not Approved" so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

### Remediating Failed Competency Evaluation

All failed competencies require remediation and subsequently need to be successfully performed before the end of the program. When a competency evaluation has been failed, the following is required:

- Remediation (do another competency evaluation on the procedure)
- The CP will record the remediated procedure in Trajecsys ("other evaluations" tab) as either a pass or fail.
- After the pass or fail has been entered by the CP and approved by the Clinical Education Coordinator, the student is eligible to do a repeat competency evaluation for a "letter" grade.

All failed competencies need to be remediated successfully before the students transfer to their second rotational site to simplify record keeping. This way CPs know that incomplete comps can be performed without having to investigate that a remediation was completed. Simulation is allowed for this purpose.

### Fourth Repeat of Same Competency Evaluation

The student will be withdrawn from the program if they reach a maximum of four repeats on the same competency, including failed remediations.

## Competency Refusal

Competency evaluations are performed on a random basis. Just as a radiographer is not permitted to pick or choose an examination, the student is not allowed to pick or choose patients.

Refusal involves any of the following scenarios:

- A student refused to do a competency when they have already stated they were ready to do the competency.
- The Clinical Preceptor felt the student was sufficiently trained to perform the competency and the student refused to perform the competency.

For instances of refusal, the Clinical Preceptor is to record the following in Trajecsys:

- Grade of zero (0)
- Date & name of the study refused.
- Write that the ***student refused to do the examination.***

### Non-Compliance: Competency Refusal

Students are held to the same standard as Radiographers for the inability to choose patients. The following steps will be taken in response to a noncompliance to "Competency Evaluations" reported by Clinical Preceptor and/or Clinical Education Coordinator:

**1<sup>st</sup>** occurrence

- ✓ **Verbal Warning**
  - Two (2) points deducted from current clinical course grade.

**Subsequent** occurrences

- ✓ **Continual Non-Compliance**
  - Three (3) points deducted from current clinical course grade for each incident.

NOTE: Based on the act of refusal, if the procedure does not become available again on a "live" patient, the student **will not be permitted to simulate** that examination.

- ✓ If a "live" patient comes in before the start of Clinical Practice V, the student is expected to perform the competency on that patient.
- ✓ If a "live" patient does not come in before the end of Clinical Practice V, the student will be required to continue into the six (6)-week extension until the competency has been completed without simulation.

## Proficiency Evaluations

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The Radiography Program expects that its students and its graduates will not only be competent but proficient in performing procedures. In other words, you are expected to maintain your proficiency through constant repetition once a competency procedure has been passed.

### Proficiency Evaluations Required

During the 2nd year, the student will have completed proficiency evaluations in each of the following areas:

Category 1:	Chest and Thorax
Category 2:	Upper Extremity
Category 3:	Lower Extremity
Category 4:	Head
Category 5:	Spine and Pelvis
Category 6:	Fluoroscopy Studies

Three (3) proficiency evaluations are to be completed in the second-fall semester and three (3) in the second-spring semester.

### Proficiency Terms

Proficiencies are to be performed under the guidance of the Clinical Preceptor and/or Clinical Education Coordinator. Procedures are randomly chosen and given in a manner that the evaluator may tell the student that the next “study” that comes through the door is theirs to do as a proficiency.

### Failure of a Proficiency Evaluation

The Clinical Preceptor will ensure that the failed proficiency is entered into Trajecsys. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the proficiency “Not Approved” so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

### Remediating a Failed Proficiency Evaluation

Failed proficiencies require remediation and subsequently need to be successfully performed before the end of the program. When a proficiency evaluation has been failed, the following is required:

- Remediation (do another proficiency evaluation on the procedure)
- The CP will record the remediated procedure in Trajecsys (“other evaluations” tab) as either a pass or fail.
- After remediation of a proficiency evaluation, if it is difficult to repeat the same procedure due to the infrequency of that procedure, the Clinical Preceptor may have the student simulate the procedure or request that the student do any other procedure within that same category.

### Fourth Repeat of Same Proficiency

The student will be withdrawn from the program if they reach a maximum of four repeats on the same proficiency, including failed remediations.

## Simulation

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At the discretion of both the Clinical Preceptor and Clinical Coordinator, simulation may begin at the start of the last clinical practice course bearing no deviation from competency and proficiency terms.

As a student, placement in varying clinical sites afford an equitable experience to complete competency and proficiency obligations. It is the student's responsibility to ensure the experience is taken advantage of before approaching the start of the last clinical practice.

Simulations are for extenuating circumstances that are offered unanimously amongst the majority. Simulations will not be granted due to avoidance/procrastination on your part and will result in utilizing the entire six-week extension to complete.

### Simulation: Direct

Simulated exams remain as a procedure that requires **Direct Supervision**. If a patient presents at a later date, the exam can be comped at that time so that images can be evaluated, and Indirect Supervision verified.

### Guidelines

- Procedure must be rarely done as determined by both the Clinical Preceptor and Clinical Coordinator.
- **No more than three (3) mandatory** competency evaluations can be simulated.
- Simulations must be performed on a human being without exposure.
- Obtain images of the procedure and utilize these images for the "*Image Analysis*" section of the Student Competency/Proficiency Evaluation Form.
- Use the competency or proficiency evaluation sheet in Trajecsys.



## Image Critiques and Written Assignments

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Image critiques are a valuable part of the student's clinical educational experience. Critiques are an evaluation of the student's ability to critically think, problem solve, and to blend all the information together that they have learned in a presentation or surprise critique. The purpose of the written portion of the assignment is to reinforce writing skills.

Image Critiques are presented at the student's respective clinical site. There is a major and minor critique and a surprise critique/activity given by the Clinical Preceptor. In addition, there is clinical experience and transfer site comparison/contrast paper in first and last semester, respectively.

### Critique and Paper Schedule

**Clinical Practice I**—fall semester, first year.

- Clinical Experience paper

**Clinical Practice II**—spring semester, first year

- (1) Major, (1) Minor, (1) Surprise

**Clinical Practice III**—summer session, first year

- (1) Major, (1) Minor, (1) Surprise

**Clinical Practice IV**—fall semester, second year.

- (1) Major, (1) Minor, (1) Surprise

**Clinical Practice V**—spring semester, second year

- (1) Transfer site comparison/contrast paper

### Major Image Critique Criteria

The major image critique is an **extensive** report on a particular procedure/study and must include all the items on the "Image Critique/Image Evaluation" sheet. Examples include but are not limited to: Head work/Facial bones, GI series, or hip pinning.

### Minor Image Critique Criteria

The minor image critique is usually shorter than a major image critique. Consult with your Clinical Preceptor to make sure that all the expectations are met. Examples include but are not limited to the following:

- Specific position
- Specific radiographic view
- A positioning or technique problem
- Artifacts
- Positions or techniques related to pathology or trauma,
- Quality control testing methods, etc.

- Problem that has stimulated the interest of the student.

## Surprise Image Critique Criteria

The Clinical Preceptor will present the topic to the student for an immediate response/solution as appropriate. As a rule of thumb, the surprise image critique usually **does not or may not** cover all twelve (12) image critique items. This surprise critique may focus on a student's area of weakness. Examples include but are not limited to:

- Artifacts
  - ✓ identify, discuss.
- Critical thinking exercise
  - ✓ synthesize all the information.
  - ✓ form a solution or demonstrate how something should be done.
- Problem solving exercise.
- Room set-up

## Picking/Approval of Topics

When choosing a topic for a major, minor, or surprise image critique, the student and/or Clinical Preceptor should consider the student's level of experience in didactic/clinical education. The student has the option to pick their own topic, or the Clinical Preceptor has the option to assign the topic(s) to the student. If the student picks their own topic, it must be approved by the Clinical Preceptor before posting to Image Critique Schedule.

## Image Critique Writing Assignment

In addition to orally presenting image critiques, the student is required to submit a written paper covering their major and minor image critiques. This paper should be used to organize the student's thoughts, oral presentation techniques, and further prepare for their critiques.

### Guidelines

1. The text of the paper will consist of these main parts:
  - a. Covering descriptors 1-10 from the "Image Critique/Image Evaluation" Grading Sheet for the Major and Minor Critique.
  - b. Format/Neatness/Grammar/Parentetical citations/Works cited will be assessed.
  - c. Double-spaced.
  - d. All borders should be one (1) inch.
  - e. Include page numbers.
2. Overall organization and flow of the paper will be graded as well.
3. Students must submit their research paper electronically to the Clinical Education Coordinator in the manner described in the course syllabus.

## Posted Image Critique Schedule

The image critique schedules are posted in the radiology department. A copy of the form is forwarded to the Clinical Education Coordinator at NCC. The schedule includes the following:

- Date of the image critiques
  - ✓ Typically, in last half of each semester or summer session
- Starting time
- Student names
- Topics of the major and minor critiques

## Audience

The audience may consist of classmates, staff radiographers, clinical preceptors, radiologists, and if possible, the Clinical Education Coordinator and/or the Program Director.

## Expectations of Student Presenter

- Collect the images.
  - ✓ Do not use the ones in the NCC teaching files on campus.
  - ✓ Students are encouraged to learn how to retrieve the images at the clinical site.
- Utilize other imaging modalities, such as CT, MRI, and Interventional studies when possible.
- Make copies of images only if the clinical site allows it.
- Do not breach HIPAA guidelines for patient privacy.
  - ✓ Anonymize the images (remove patient identifiers)
- Check with your Clinical Preceptor on how to use the medical records department, the library, and the teaching file at your clinical site for research purposes and adhere to HIPAA guidelines.
- Thoroughly research the information on the topic that has been chosen.
- It is good to have normal and abnormal images when a disease process is being presented.
- Use diagrams when and if you feel that it is appropriate.
- Be as creative and interesting as possible.

## Grading

Refer to the applicable clinical course syllabus to determine the point value of the assignment. The grading of the image critiques is done using the following twelve (12) descriptors from the grade sheet:

- ✓ Patient history: Able to describe from admission to discharge.
- ✓ Patient's description: Age, sex, body habitus, etc.,
- ✓ Positioning: Able to describe the patient's set-up for procedure
- ✓ Exposure factors/indices and equipment used: Able to discuss.

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- ✓ Radiation protection: Able to discuss principles and application.
- ✓ Anatomical structures: Able to identify - knows if visualized.
- ✓ Pathology or disease process: researched and able to explain.
- ✓ Density and contrast: able to apply principles for image improvement.
- ✓ Artifacts on the image identifies and describes how to prevent.
- ✓ Evaluation of image: able to suggest methods for improvement.
- ✓ Communication/presentation skills: including medical terms.
- ✓ Question and answer session: entire group (peers and preceptors)

Follow the check list on the "Image Critique Evaluation." Check with your Clinical Preceptor to find out if they want you to follow the check list in any order. All twelve (12) areas on the check list must be covered, but the way the information is presented is up to the Clinical Preceptor(s) at that clinical site.

There is a separate grade for the writing assignment using a rubric. Be sure to correlate your paper with the grading sheet.

The grades for the major, minor, and surprise evaluations are entered into the Trajecsys system by the Clinical Preceptor. The written assignment grade is entered into Trajecsys by the Clinical Education Coordinator

### **Missed image critique:**

Notification is required on the day of absence as described in the "[Arriving Late, Leaving Early, or Absence](#)" section. If the proper notification is not received, a "0" grade will be assigned. If the proper notification was received, the missed critique is to be made up on the first day back to clinical practice or at the discretion of the Clinical Preceptor. Ten percent (10%) will be deducted from the total score.

## Didactic and Clinical Evaluations

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### Evaluations of Faculty by Students

Faculty evaluations are administered towards the end of each semester in both the didactic and clinical education settings. This is the student's opportunity to suggest changes in the way that an instructor facilitates a course.

### Evaluations of Students by Clinical Education Staff

The "Technologist's Evaluation of Student Performance and Professionalism," is used by the staff to assess the performance of the student in the affective domain. A minimum of five (5) evaluations are required for each clinical education course and are used by the Clinical Preceptors to help determine the clinical education grade for that course. A modified "Technologist's Evaluation of Student Performance and Professionalism" is used for the first Clinical Practice and a minimum of five (5) are required.

### Evaluations of Students by the Clinical Preceptors

The "Clinical Preceptor's (CP) Evaluation of Student Performance and Professionalism," is used by the Clinical Preceptors to assess the student's performance in the affective domain.

### Clinical Preceptor's Evaluation by the Students

With the idea of continuous improvement in mind, the Clinical Preceptors are evaluated by the students at the end of each semester and given a synopsis prepared by the Clinical Education Coordinator. The Clinical Education Coordinator and/or Program Director reviews and discusses the evaluation with the Clinical Preceptors.

### Self-Evaluation by Students during Clinical Education

The student self-evaluation is completed on Trajecsys approximately one (1) week before the end of each clinical practice course (see course syllabus). The evaluation is the student's reflection on their performance (cognitive, affective, and psychomotor). The focus is on areas of strength and those needing improvement.

### Progress Reports Didactic/Clinical

Either a satisfactory (S) or an unsatisfactory (U) grade will be issued approximately six (6) weeks into the fall or spring semester (summer sessions are not applicable). A letter grade is issued at the end of the semester.

Conferencing occurs between the course instructor and every student earning a U. The goal is to help that student be successful in that course. Progress reports are not part of the final course grade, they are used as a tool to address potential issues early.

Although progress reports are not generated by the Records office during the summer months, the Clinical Preceptors are to report concerns to the Program Director and/or the Clinical Education Coordinator by the first week in July.

## Radiography Program Generalized Attendance Policy

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### Attendance Policy

Please refer to “*Academic Information and Policies*” in the *NCC College Catalog/Student Handbook*. NCC Class attendance and engagement in the learning process are critical factors in determining students’ success in their courses. NCC students are expected to attend all class sessions of courses in which they are enrolled and are responsible for all material presented in class sessions of these courses.

However, a student who misses class more than twice the number of weekly meetings of the class\* (or the equivalent in short term courses) may be withdrawn from the course by the instructor. Students who are withdrawn for poor attendance will receive a grade of W. Faculty may issue a withdrawal through the first 90% of the semester (14th week or equivalent in short term classes\*). After the 90% period, a student may not withdraw or be withdrawn.

In an internet-based online learning course, a student is considered to have missed the equivalent of more than twice the number of weekly meetings of a traditional classroom course in a consecutive two-week period if there has been no participation by the student in the class through submission of assignments, participation in discussion forums or contact with the professor in any way during the period.

Students who are withdrawn from the class for lack of attendance may appeal the enforced withdrawal to the instructor. If the Instructor agrees to reinstate the student, he/she will be required to complete a reinstatement form and return it directly to the Records Office. If the appeal is denied, the student may speak with the appropriate academic dean and/or the Vice President for Student Affairs and Enrollment. Further discussion may take place with the faculty member, but the final decision on the withdrawal rests with the faculty member.

### Leave of Absence

Reapplication to the program is made through the Admissions office and is on a space available basis.

If the withdrawal was due to medical reasons, a note from the physician needs to be sent to the NCC Health Center for clearance prior to the return to classes and clinical education.

If possible and educationally sound, the student will be placed in courses from the semester that was interrupted. Placement in clinical practice, depending on the time lapse and the professional judgment of the Radiography Department, may not coincide with the beginning of the semester in which the student departed. In clinical education, skills quickly deteriorate when not reinforced through continual practice.

Departmentally we have found that creating special schedules out of sync with the cohort and the semester system tends to be very disruptive for all concerned. Special schedules are developed only when deemed educationally sound for the student.

## **Inclement Weather Policy**

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### **Decision for Day/Evening Classes**

The decision for NCC campus to broadcast closure for day classes is typically by 6:00 a.m. the day of. Cancellation of day classes does not imply cancellation of evening classes. The decision for NCC campus to broadcast closure for evening classes is typically by 3:00 p.m. the day of.

### **Method of Communication**

NCC weather alert website: [NCC Weather Information](#).

NCC will alert by radio, television, or website. They also offer an NCC Text Alert system. One can sign up on the website. When selecting notification preferences, be sure to select all college campuses.

The weather closing information hotline is available 24 hours a day. The numbers are as follows:

- Lehigh Valley and surrounding areas 610-861-4595 (Main Campus)
- Monroe County residents 570-369-1800 ex.8 (Monroe Campus)

### **Cancellation of classes (Monroe and Bethlehem):**

If either the Monroe or Bethlehem College campus is closed, ***all*** students are excused from clinical education. This policy does not apply to closures due to localized site/campus events such as a closure due to a water main break.

**Make-up time is required after 3 days (24 hours) of the Clinical Practice course has been missed in the semester.** Weather related make-up for the second-year students may be assigned on Tuesdays in the final semester of the program if there are no clinical capacity issues at their site.

### **Delayed start of classes (Monroe and Bethlehem):**

If the College delays the start of classes, at either campus, all students are to start at that designated time. Make-up time is only required for full day closures.

Example: Delayed start at 10:00 a.m. – normal schedule will be maintained after that starting time for both didactic and clinical education – in other words no 8:00 or 9:00 a.m. classes that day. Clinical rotations would start at 10:00. This is effectively a two (2) hour delay.

### **Early closing (Monroe and Bethlehem):**

If the College releases students early at either campus, all students are to go home at that designated time. Make-up time is only required for full day closures.

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It is permissible to stay at the clinical site if it is safer to wait for conditions to improve before traveling. Example: if a student left for, or arrived at, their clinical site before closure was announced it is up to the student's best judgement to remain or go home. Time spent at clinical during a delay/closure counts as clinical time and is credited toward their total clinical time requirements. It cannot be used as banked time if weather related makeup is not needed.

### **Localized Inclement Weather Situations:**

If the student experiences dangerous local weather conditions that prevents them from safely getting to their clinical site (and the College has not suspended classes): Notify the Clinical Preceptor and Clinical Education Coordinator per clinical site protocol. Make-up time will be required.



## **NCC Radiography Program Clinical Attendance Policy**

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### **JRCERT Standard 4.4: Curriculum and Academic Practices**

As per Standard Four (4.4): JRCERT's Curriculum and Academic Practices, clinical education is not permitted to be scheduled, and students may not volunteer to participate in clinical rotations, any time the college campus is closed. Examples of campus closures include Labor Day Holiday, Thanksgiving Holiday, Winter Holiday, Martin Luther King Observation, Memorial Day Holiday, and Fourth of July Holiday. Please refer to [Northampton Community College's current Academic Calendar](#) for current semester closure dates. In addition, students are not permitted to do more than 10 hours of clinical in any one day and are not permitted to do more than 40 hours of clinical plus didactic instruction in a week.

### **Significance of Attendance at Clinical Sites**

To meet the educational outcomes for the Radiography Program, students are required to complete the clinical rotations at their designated clinical sites as scheduled by the Clinical Education Coordinator and the Clinical Preceptor. Quality patient care requires that radiographers be present as scheduled to perform examinations. As future employees, students must develop appropriate work habits to not only obtain but maintain employment.

Clinical attendance at all clinical education assignments is the responsibility of the student. Students are expected to be on time at the clinical site and to remain in the clinical facility for the entire clinical experience. A good "rule-of-thumb" is to arrive at your assigned rotational area ten (10) minutes before your shift begins, so that you are prepared, clocked-in, and ready to begin on time.

### **Clinical Site Clock-in/out: Trajecsys**

Every day of attendance must be documented with arrival and departure entries recorded in an online clinical management system, known as Trajecsys, assigned to a computer at each clinical site. It is advised to arrive at the clinical site with enough time to clock in Trajecsys before the scheduled clinical shift begins. Although there is the capability, under no circumstances is the student to clock in or out on any other platform than what is assigned (i.e., personal phone, laptop, etc.) Clocking in and out on an unapproved platform is deemed non-compliant and point deductions from the overall clinical grade will result. See "Non-Compliance: Trajecsys Clock-in/out".

Be aware that falsifying attendance records and asking another student to clock-in is considered academic dishonesty and voids the "Non-Compliance: Trajecsys Clock-in/out" Policy. Meaning, an automatic dismissal from the program for both the parties involved.

### **Non-Compliance: Trajecsys Clock-in/out Policy**

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for either not clocking in or out on Trajecsys or clocking in or out on any other platform than the assigned computer at each clinical site. Incidences will

be reported for the duration of the program, by the Clinical Preceptor and/or Clinical Education Coordinator:

**Consequence for the first (1<sup>st</sup>) occurrence**

- ✓ Verbal Warning

**Subsequent occurrences**

- ✓ Continual Non-Compliance
  - Two (2) points deducted from current clinical course grade for each incident.

## Non-Attendance (Absence) Allowance/Forfeit per Clinical Course

Aside from mutually agreed faculty discretion of 'reasonable cause of nonattendance' with verification, failure to attend clinical (absence) or arriving late will impact your ability to achieve course objectives and will affect your clinical grade. Reasonable cause of nonattendance can range from serious personal illness to illness or death of family member. The latter are prime examples of natural life occurrences beyond one's control.

Students are permitted two (2) days off per semester without point penalty. The allotted two days are non-transferable between clinicals and will require make up when taken. Days can be used in four (4) hour increments just as make-up days are to be done at a minimum of four (4) hour increments.

## Non-Compliance: Clinical Attendance Policy

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for exceeding two (2) days of absence per clinical course, regardless of the days made up, reported by Clinical Preceptor and/or Clinical Education Coordinator:

NOTE: Each instance from days three (3) to six (6) is a penalty of two (2) points from the clinical course grade in addition to the requirement to make-up the missed day within the affected semester.

Consequence for days three (3) thru seven (7):

- ✓ (3) Verbal Warning
- ✓ (4) Written Warning
- ✓ (5) Corrective Action Plan
- ✓ (6) Disciplinary Action Plan
- ✓ (7) Involuntary Withdrawal
  - Withdrawal from Clinical Practice based on continually disregarding "NCC Radiography Program Clinical Attendance Policy".

**Consequence for not making up absences by end of affected clinical practice**

- ✓ Clinical V will be an incomplete until days are made-up during the [six-week extension](#) offered after the end of the program.

- Graduation in May will not be an option. Depending on how many days are outstanding, it will push graduation to either August or January. It is not until the student graduates that they will be eligible to sit for their boards.

NOTE: Winter Clinical does not fall under the non-attendance allowance/forfeit procedure. Any days missed are required to be made up within the winter session or the student will risk a Clinical V incomplete to make up the days during the [six-week extension](#).

## Late Policy/Forfeit per Clinical Course

Professional behavior dictates punctuality, particularly in a clinical setting where shift relief is required. If you expect to be hired by any of the facilities in which you are training, you need to show them that you are dependable and can be on time.

You are allowed a maximum of four (4) late incidents for the duration of the program. Late indicates one minute past your clinical start time. Make-up time is required when you are over 15 minutes late to the clinical. The make-up time required is rounded up to the next whole hour. For example, if a student is one hour and twenty minutes late, two (2) hours of make-up time is required. The following addresses the consequences for exceeding four (4) lates regardless of the lates made up:

### Non-Compliance: Late Policy

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for exceeding four (4) lates, for the duration of the program, reported by Clinical Preceptor and/or Clinical Education Coordinator:

#### **Consequence for the fifth (5<sup>th</sup>) late**

- ✓ [Verbal Warning](#)
  - Two (2) points deducted from current clinical course grade.

#### **Subsequent occurrences**

- ✓ [Continual Non-Compliance](#)
  - Two (2) points deducted from current clinical course grade for each incident.
  - Forfeiture of one (1) day of clinical required to be made-up.
    - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to [“Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course”](#)

## Bank Time

Bank time can be accrued for instances of volunteering, participating in club events (i.e., pinning), merit awards, or attending clinical on non-scheduled days not impeding JRCERT standards. Bank time is not permitted for students with pending unsatisfactory clinical attendance (having already exceeded more than two days or three lates in any one semester).

For each semester, a student can acquire up to eight (8) hours of bank time that can be used for either pre-planned absences or decided on the day of absence. When bank time is used, they **may not be**

**replenished**, and they must be used in four (4) hour increments. Bank time is non-transferable between semesters.

The scheduling of banked time must be coordinated with the Clinical Preceptor in the same manner (including rotation assignment) as make-up days. The make-up day scheduling form (on Trajecsys) is to be used to document banked time. A copy will be retained by the Clinical Preceptor for reference.

### Merit Award: "Way to Go"

The "Way to Go" is awarded at the discretion of the Clinical Preceptor with the validation of the Clinical Education Coordinator for outstanding student performance. The reward is one (1) hour of release-time from clinical practice to be scheduled with the Clinical Preceptor(s).

Those who have earned the merit award will be recognized at the next Opening Program/Clinical Education Meeting. The merit award can be used as resource material by the Faculty and Program Director for writing references.

Documentation should be e-mailed to the Clinical Education Coordinator or Program Director for student file. It can also be faxed to 610-861-4581.

## Arriving Late, Leaving Early, or Absence

### Notify Clinical Preceptor AND Clinical Education Coordinator

No matter the circumstance, the student must notify the **Clinical Preceptor AND Clinical Education Coordinator** at least ten (10) minutes prior to any deviation from the routine clinical hours assigned. These deviations include but are not limited to arriving late, leaving early, and absence. Note: Additional notifications per Clinical site protocol may be required (i.e., notifying the hospital department in addition to the CP & CEC).

The Clinical Preceptor must be called. The Clinical Education Coordinator must be texted and/or e-mailed. It is not the Clinical Preceptor's responsibility to transfer the student's message to the Clinical Education Coordinator-it is the student's responsibility to communicate directly to the Clinical Education Coordinator via text and/or e-mail.

### Non-Compliance: Notification Policy

The following applies for failure to notify the Clinical Preceptor **AND** Clinical Education Coordinator for instances of arriving late, leaving early, or absence:

#### 1<sup>st</sup> occurrence

- ✓ **Verbal Warning**
  - One (1) point deducted from current clinical course grade.

#### Subsequent occurrences

- ✓ **Continual Non-Compliance**
  - Two (2) points deducted from current clinical course grade for each incident.

### Filing Time-Exception

In addition to notifying the Clinical Preceptor AND Clinical Education Coordinator, a time-exception must be filed through Trajecsyst, and validated by the Clinical Preceptor. Hence, a time exception is filed for any deviation from routine clinical hours such as arriving late, leaving early, or absence.

A time exception provides a method of communication and documentation for any time missed during the student's experience at clinical. The time-exception must be completed with a comment. Failure to do so will incur an incomplete exception causing further delay resulting in either point deductions and/or repeating clinical days.

### Make-Up and Bank Time Form

In the event of a time-exception, the *"make-up and bank time form"* (located in Trajecsyst) is to be completed within three (3) days of returning to clinicals with a copy to be retained by the Clinical Preceptor for reference. The make-up time does not need to be made-up in those three days. It is the negotiation between you and the Clinical Preceptor that needs to be completed via the *"make-up and bank time form"*.

The Clinical Preceptor(s) will determine when make-up time may be scheduled. This determination is based on various factors e.g., staff availability to adequately supervise students. In general, students may request to schedule themselves during NCC breaks (Fall, Spring and between semesters) or afternoons when classes are finished (half days). Since some Clinical Preceptors rotate to cover weekends, some sites may allow students to make-up time on weekends coordinated with the Clinical Preceptor's schedule.

Scheduled make-up time will follow the same policies as regularly scheduled clinical days. To optimize educational efficiency, students may not be scheduled for less than 4 hours in any one day. All make-up time should be completed prior to the start of the next semester. In the event it is not possible, the Clinical Preceptor and Clinical Education Coordinator will coordinate the make-up time. Any outstanding make-up time at the end of Clinical Practice V will result in utilizing the 6-week extension.

### A Chronological Guide for Filing Time Exception and Completing Make-up Time

The following is a guide in the event of arriving late, leaving early, absent, or any deviation from routine hours assigned.

- 1) Contact both the Clinical Preceptor (phone) **AND** the Clinical Education Coordinator (e-mail/text) at least ten (10) minutes prior to the scheduled start time
- 2) Complete a time-exception **with a comment** via Trajecsyst.
- 3) Complete the *"make-up and bank time form"* (on Trajecsyst) and schedule your make-up time within three days of returning to clinical.
  - The following applies when negotiating:
    - Make-up time is required in the same rotation that was missed.
    - Make-up time is required to be scheduled in 4-hour blocks to maintain optimized educational efficiency.

- 4) Make-up time is coordinated and agreed upon with the Clinical Preceptor and followed through by the student.
  - No last-minute scheduling is permitted.
  - The Clinical Preceptor must be given 24 hours' notice for requested make-up time.
- 5) Failure to follow through with scheduled make-up time will result in having to make-up a 2nd day (the original day + the missed make-up day).

## Missing in Action — Student Cannot be Located during Clinical Practice

### Non-Compliance: Missing in Action

The following are consequences apply if the student cannot be located during clinical practice reported by Clinical Preceptor and/or Clinical Education Coordinator:

#### 1<sup>st</sup> occurrence

- ✓ [Corrective Action Plan](#)
  - Five (5) points deducted from current clinical course grade.

#### 2<sup>nd</sup> occurrence

- ✓ [Disciplinary Action Plan](#)
  - Five (5) points deducted from current clinical course grade.
  - Forfeiture of one (1) day of clinical required to be made-up.
    - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to [“Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course”](#)

#### 3<sup>rd</sup> occurrence

- ✓ [Involuntary Withdrawal](#)
  - Withdrawal from Clinical Practice based on continually disregarding the “NCC Radiography Program Clinical Attendance Policy” and “Educational and Clinical Code of Conduct Policy”.

## Leaving Clinical Practice without Permission

### Non-Compliance: Leaving without Permission

The following are consequences apply if the student leaves clinical without permission reported by Clinical Preceptor and/or Clinical Education Coordinator:

#### 1<sup>st</sup> occurrence

- ✓ [Corrective Action Plan](#)
  - Five (5) points deducted from current clinical course grade.

#### 2<sup>nd</sup> occurrence

- ✓ [Disciplinary Action Plan](#)
  - Five (5) points deducted from current clinical course grade.

- Forfeiture of one (1) day of clinical required to be made-up.
  - Further consequence applies if the student has already exceeded two or more days of clinical absence. Refer to [“Non-Attendance \(Absence\) Allowance/Forfeit per Clinical Course”](#)

3<sup>rd</sup> occurrence

- ✓ [Involuntary Withdrawal](#)
  - Withdrawal from Clinical Practice based on continually disregarding the “NCC Radiography Program Clinical Attendance Policy” and “Educational and Clinical Code of Conduct Policy”.

## Absent from Didactic and/or Clinical Practice for More than 2 Consecutive Days

For each absence from didactic and/or clinical education due to illness for more than 2 consecutive days, the student needs to present a physician's note to the Clinical Education Coordinator or the Program Director stating the following:

1. Diagnosis
2. Dates of treatment
3. Release date to return to with or without restrictions.
  - For a return without restrictions, the note must state the following to return to clinicals: **‘Permitted to Return to Patient Care Activities’**. This serves the rationale to protect the welfare of the patient, hospital personnel, and your classmates.

If one is unable to see a physician, they can make an appointment to be evaluated by the college nurse—call 610-861-5365. The hours of the [Health and Wellness Center](#) (located in College Center 120) are posted on the following website: [NCC Health & Wellness Center](#)

- If your class and/or clinical education begins before the Clinical Education Coordinator or Program Director is in their office, you may enclose your physician's release documentation in a sealed envelope and slide the envelope under the office door.
  - **Keep a copy for your personal files!**
- After dropping off the note, proceed to either the classroom or clinical site.

## Pregnancy Policy/Procedure

In accordance with U.S. Nuclear Regulatory Commission (NRC) Regulatory Guide 8.13, the following pertains to a pregnant student:

- If you decide to voluntarily declare pregnancy, you must do so in writing.
- You have the option to continue in the program without modification.
- You may withdraw your declaration of pregnancy, which also must be in writing.

If you decide to voluntarily disclose your pregnancy, use form NRC 8.13-8 (form letter for declaring pregnancy available in the Program Director's office or on Trajecsyst) or develop your own format. Whatever format is used, the month and year you became pregnant must be included. In the absence of this voluntary, written disclosure, a student cannot be considered pregnant.

You do have the option to continue the educational program **without modification** or interruption, or you may do one of the following:

1. make modifications in your clinical assignments.
2. take a leave of absence from your clinical assignments.
3. take a leave of absence from the program.
4. develop your own plan with reasonable accommodation developed in collaboration with your physician, and the radiation physicist/radiation safety officer at the clinical education setting.

If you want reasonable accommodation to be made as quickly as possible, in addition to the written disclosure, you will need to submit to the Program Director the program's "Pregnancy Information Sheet" completed in a timely fashion by your physician. The form asks for the following information:

1. How many months pregnant you are.
2. The name of your physician.
3. Whether your physician advises you to continue in both the academic and clinical portions of the program. If periodic evaluations are recommended above and beyond what is considered normal for the "average" pregnancy, what reasonable accommodations will be needed? What reasonable accommodations do you and your physician recommend for your pregnancy?
4. What is your anticipated date of return to the program following the delivery of your baby? (Remember to submit your physician's release to return to classes and/or clinical practice to the NCC Health Center.)
5. Consult with your physicist (radiation safety officer) at your clinical education setting. Wear a fetal monitor (baby badge) at the clinical education setting in addition to your regular dosimeter.
6. Submit your individualized plan to meet the program requirements and help us to reasonably protect both you and your baby.

The basic premise is that you need to make an informed decision based on your individual needs and preferences. You will then need to write your plan in a timely fashion using either the suggested accommodations from above or developing your own reasonable accommodations in consultation with your physician and the radiation physicist/radiation safety officer. The written plan is then submitted to the Program Director, Clinical Education Coordinator, and Clinical Preceptor for approval.

In addition, the student shall:

1. Review all radiation protection information covered in the program and at the clinical education setting.
2. Meet with the clinical education setting's consulting radiation physicist or radiation safety officer for the purpose of in-service training and counseling on pregnancy/prenatal exposure.
3. Obtain an additional dosimeter (known as a baby badge) that must be worn at all times while in a radiation area in the clinical education setting.



Upon approval of the plan, the Program Director, Clinical Education Coordinator, and Clinical Preceptor will see that requested reasonable accommodations are made for the unborn child and the mother.

After the baby's birth, the student's written medical release from her physician needs to be submitted to the NCC Health Center to return to both the didactic and clinical education components of the program, and if you took a leave of absence, contact the Clinical Education Coordinator to revise the schedule to make up rotations and missed evaluations. If possible, we will try to see that you graduate and have your pinning ceremony with your class.

## Medical and/or Pregnancy Leave of Absence

If a student needs to take a medical and/or pregnancy leave (voluntary disclosure and in writing), the following guidelines will be followed:

- Rotations missed must be made-up.
- The remainder of the program would need to be completed.
- The Clinical Preceptor and Clinical Education Coordinator will work out a rotation schedule for the rotation(s) missed.
- If necessary, the student will be placed in the six (6)-week extension at the end of Clinical Practice V. Depending on the circumstance(s), the student may be required to do the entire six (6)-week extension.
- No more than forty (40) hours of clinical and didactic classes can be scheduled in any one week. A student cannot be scheduled for more than ten (10) hours in any one day. In addition, students may not be scheduled when the College is closed for a Holiday.

## Medical Restrictions-Light Duty

Any injury or medical condition that restricts a student to "light duty" may present an increased risk of harm to the student and/or the patient in the clinical setting. If a student cannot perform any of the functions stipulated in the standard "Essential Functions of a Radiographer," or if the clinical site requests that the student not provide patient care, the student shall follow the guidelines for Medical Leave of Absence.

## Bereavement Leave

Bereavement applies to both didactic (classroom) and clinical education as follows:

- Up to a maximum of 3 days
- For a death in the student's immediate family (i.e., parent, spouse, brothers, sisters, children, grandparents, mother or father-in-law, or additional persons as stated in the most current College Catalog).
- A copy of the obituary may be requested.

## Sequence Clinical Education Experience

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The following sequences of the student's clinical education experience details expectations, curricular pre-requisites, and a timeline for required competencies and proficiencies.

### First-year, Fall Semester: Clinical Practice I

#### CP I: Schedule

Two (2) days per week (Tuesday and Thursday) of clinical education.

#### CP I: Pre-Clinical Lab: First Three (3) Weeks

During the first, three-weeks of the first-fall semester, the first-year students remain on the NCC (Bethlehem) campus to perform the pre-clinical orientation program involving the following topics:

- Radiation protection
- Emergency situations and responses
- Ethical behavior
- Interacting with patients
- Isolation procedures
- Use of universal precautions
- Lifting and moving techniques
- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions

Pre-clinical orientation labs are a critical component of Clinical Practice I. Successful completion of the practical examinations associated with the pre-clinical labs is required before progressing to the hospital assignments. Practical examinations include assessing lifting and moving procedures, equipment operation, patient handling, and radiation protection.

Failure of the pre-clinical portion of Clinical Practice I will result in failure of the course and requires restarting the program from the beginning.

**Because the end of the pre-clinical component of the course corresponds with the end of the Add/Drop period, the student will need to drop all radiography courses immediately to avoid "W" grades. Reapplication to the program is required and is made through the Admissions *office*.**

CP I: Required Competency Evaluation (6)

Refer to [competency evaluations](#) for protocol. The following six (6) competency evaluations are required:

Three (3) *mandatory* prerequisite knowledge evaluations:

- ✓ Equipment Operation
- ✓ Patient Care and Handling
- ✓ Radiation Protection

Three (3) competency evaluations:

- ✓ Routine chest
- ✓ 2 Extremity (either upper or lower)

CP I: Required Proficiency Evaluation (0)

No proficiencies are required in this semester.

CP I: Required Writing Assignment: Clinical Experience

Refer to Image [Critiques and Written Assignments](#) section.

**First-Year, Winter Session: Clinical Practice IB**

CP IB: Schedule

When the session begins, around December 13th, the students continue clinical rotations for a total of 14 days (112 hours) before the session ends around January 8th.

Rotations are limited to a maximum of forty (40) hours in any one week and 10 hours per day. Each day consists of not more than 9.5 hours of clinical with a 30-minute lunch break. If the normal break time at a site is longer, the clinical practice time must be reduced to maintain the 10 hour per day limit.

CP IB: Required Competency Evaluation (0)

No clinical competencies are required in this session. Allows first year students the opportunity to gain experience and perform the range of exams they have learned to date.

CP IB: Required Proficiency Evaluation (0)

No proficiencies are required in this semester.

## **First-year, Spring Semester: Clinical Practice II**

### CP II: Schedule

Two (2) days per week (Tuesday and Thursday) of clinical education.

### CP II: Required Competency Evaluation (5)

Refer to [competency evaluations](#) for protocol. The following five (5) competency evaluations are required:

- ✓ Abdomen (KUB)
- ✓ 4 competency evaluations on anything

### CP II: Required Proficiency Evaluation (0)

No proficiencies are required in this semester.

### CP II: Required Major, Minor, Surprise Image Critique

Refer to [Critiques and Written Assignments](#) section.

## **First-Year, Summer Sessions: Clinical Practice III**

The course begins with the opening of Summer Session I and ends with the conclusion of Summer Session II. There is no clinical practice on Memorial Day, or the July 4<sup>th</sup> Holiday. Vacation time must be scheduled with the Clinical Preceptor so that rotations can be scheduled appropriately. When the student has reached 336 hours of clinical time, which usually occurs sometime after the first week in August, they may utilize the time remaining until the official end of the Summer II Session for any needed make-up time.

### CP III: Schedule

Monday-Thursday on campus starting first week for 8 hours per day.

Monday-Thursday at clinical, starting second week, for 10 hours per day for a maximum of forty (40) hours in any one week. Each day consists of not more than 9.5 hours of clinical with a 30-minute lunch break. If the normal break time at a site is longer, the clinical practice time must be reduced to maintain the 10 hour per day limit. ***Clinical sites may require Monday-Friday rotations of 8 hours (plus lunch) due to supervisory staffing requirements.***

There is one (1) week of middle shift (approx. 2:00 p.m. – 12:00 a.m.) rotation.

### CP III: Intensive Seminar: First Week Only

There is a one-week intensive seminar during the first week of the summer sessions concluding with online testing the same week.

### CP III: Required Competency Evaluation (20)

Refer to [competency evaluations](#) for protocol. Twenty (20) competency evaluations (either mandatory or elective) are required during the summer session.

### CP III: Required Proficiency Evaluation (0)

No proficiencies are required in this semester.

### CP III: Specialty (Computed Tomography)

Students are given the opportunity to shadow two (2) days in Computed Tomography.

### CP III: Required Major, Minor, Surprise Image Critique

Refer to [Critiques and Written Assignments](#) section.

## **Second year, Fall Semester: Clinical Practice IV**

The students are assigned to another clinical site for this semester. Assignments are made as described in "[Student Assignment](#)" section with the focus on switching students between sites with larger patient volumes and those assigned to smaller facilities. This will provide students with a more comprehensive insight into different clinical environments and cultures. It will also give the students more networking opportunities and increase their visibility to potential hiring managers and staff.

### CP IV: Schedule

The student is in the clinical education setting on Monday, Wednesday, and Friday. When the first-year students have begun reporting to their clinical site, second year students will, on a rotational basis, exchange their assigned Friday for half day Tuesday & Thursday afternoon. This allows the second-year student easier access to exams needed for competencies as well as providing mentoring access to the first-year students.

This is only put into practice at clinical sites with adequate staff to student ratios and clinical capacity. This mentoring scheduling is only in effect for this clinical course which corresponds to the first year's initial clinical assignment. Please note that mentoring scheduling is subject to change.

### CP IV: Required Competency Evaluation (10) and Room Competency Evaluation

Refer to [competency evaluations](#) for protocol. Ten (10) competency evaluations (either mandatory or elective) are required during the second fall semester. In addition, a room competency evaluation is required.

### CP IV: Required Proficiency Evaluation (3)

Refer to [proficiency evaluations](#) for protocol. Three (3) mandatory proficiency are required during the second fall semester.

### CP IV: Required Major, Minor, Surprise Image Critique

Refer to [Critiques and Written Assignments](#) section.

## **Second-year, Spring Semester: Clinical Practice V**

At the conclusion of Clinical Practice V, if all program requirements have been met, the student is eligible for May graduation.

### CP V: Schedule

Students continue rotations at their second clinical site for three (3) days per week (Monday, Wednesday, and Friday) of clinical education.

### CP V: Required Competency Evaluation (14) and Room Competency Evaluation

Refer to [competency evaluations](#) for protocol. Fourteen (14) competency evaluations (either mandatory or elective) are required during the second spring semester.

### CP V: Required Proficiency Evaluation (3)

Refer to [proficiency evaluations](#) for protocol. Three (3) mandatory proficiency are required during the second fall semester.

### CP V: Required Writing Assignment: Clinical Site Comparison

Refer to [Critiques and Written Assignments](#) section.

### CP V: Student Choice

There are three (3) days of **student choice** which allows the students to go into any specialty area of interest. The intent is to see if the student has an interest in pursuing further education in any one of these specialty areas:

Sonography	Nuclear Medicine (N)
Interventional Radiography (IR)	Magnetic Resonance Imaging (MRI)
*Mammography (M)	Radiation Therapy (RT)

The student can also select a diagnostic rotation where they feel they need more time to reinforce skills. These rotations should be scheduled early in the semester so that students can make an informed decision regarding their participation in the advanced skills internship.

Missed specialty rotations may not be able to be rescheduled due to staffing or patient volume factors.

\*The Program will make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, the Program will not attempt to supersede clinical site policies that restrict breast imaging rotations/procedures to students. Students are advised that placement in a breast imaging rotation is not guaranteed. Male students may not be able to rotate through mammography based on the policy at their clinical site. Students should be aware that there are various employment opportunities, and potential barriers, which may affect their ability to work in a particular clinical staff position.

## Six-Week Extension

The six-week extension is offered as a continuation of Clinical Practice V. Graduation in May will not be an option for students taking all or part of the six-week extension. Depending on how many days either outstanding due to suspension or non-compliance, it will push graduation to either August or January. It is not until the student graduates that they will be eligible to sit for their boards.

The six-week extension for Clinical Practice V is used in one of the following ways:

- For those students who could not complete all the program requirements, the time can be used to complete competencies, proficiencies, or rotations to meet all program requirements.
- For students who need to make-up missed defensible days/rotations from any clinical education course.
- To be completed by students with documented corrective action due to attendance concerns.

## Timing of Graduation

If you complete all your competency evaluations, proficiency evaluations, and all program requirements by the published deadline for the last day of classes for the spring semester, you will not need to complete the **six (6) week extension**. You will be eligible for graduation during the spring (May) commencement.

Students remaining for, and completing, the **six (6) week extension** are eligible for graduation during the winter (January) commencement.

Completion of all program requirements by the published deadline for the last day of classes for the spring semester is required to enter the Advanced Skills Internship (ASI).

## Advanced Skills Internship (ASI)

When students have successfully completed all their program requirements, they have the option to voluntarily complete six (6) weeks in an Advanced Skills Internship in one of the following specialties:

Bone Densitometry (BD)	Computed Tomography (CT)
Interventional Radiography (IR)	Magnetic Resonance Imaging (MRI)
Mammography (M)	Surgery (OR)

The Advanced Skills Internship (ASI) is offered through the College's Center for Business & Industry, non-credit course offerings and is only available to current year, May, graduates on a space available basis.

The intent of the ASI is to provide the graduate with a more comprehensive experience in a particular modality. This is an excellent opportunity for graduates to evaluate their suitability with a modality they are considering for employment. It is not meant to satisfy the competency requirements for registry eligibility.

Evaluation of competencies during the internship will be at the discretion of the mentor. The decision to accept, approve, and verify the competency so that it can be entered into the ARRT registry application process will be determined by the mentor. Continuation of clinical hours for cross training and documentation of competencies after the internship is at the discretion of the clinical site. There is no guarantee of employment after completing the internship.

Students who are interested should complete an application which is provided by the Clinical Education Coordinator in the last semester of study.

## Selective internship

Due to the limited number of clinical openings, selection is determined based upon the following criteria which were demonstrated throughout the duration of the Radiography Program:

- Eligibility for May graduation.
- Minimum program GPA of 3.0
- Excellent clinical performance as determined by the selection committee.
- Attitude
- Professional behavior
- Dependability/reliability
- Initiative
- Communication skills
- Attendance



## Length of the program

The internship runs for six (6)-weeks starting the day after Memorial Day. A certificate will be received by the student upon completion of the requirements for the ASI.

## Fees

The ASI is offered at the same cost as two (2) credit hours (Northampton County resident rate) plus \$50. Current credit hour rates are published on the College website: [Tuition and Fees Breakdown](#)

Refund Policy: Students who wish to withdraw must formally request withdrawal and will be eligible for a refund as described by the College's Center for Business & Industry policy:

- 100% Refund - Withdraw 5 business days prior to the first day of class.
- 50% Refund - Withdraw 3-4 business days prior to the first day of class.
- 0% Refund - Withdraw less than 3 business days prior to the first day of class.

## Internship sites

Each year, clinical sites are polled to compile the list of offerings. The availability of internships varies from year to year due to normal staffing fluctuations, the availability of mentors and changes in physical resources at the clinical facilities. The intern is usually placed with a clinical education site (network) where they trained. This avoids the processing delays and additional intern expenses involved in going to a new site/network. Timeliness in completion of entrance requirements and submitting application paperwork is an especially crucial factor in the placement process.

## Policies/procedures:

Unless specifically stated, the student will follow the policies and procedures of the "Radiography Program Student Handbook."

## Assessment

Assessment will be done through satisfactory completion of the following:

- [Competency Evaluations](#)
- One (1) image critique session
- Minimum of three (3) "Technologist Evaluation of Student Performance and Professionalism"
- Clinical Preceptor's (C.P.) Evaluation of Student Performance and Professionalism"
- "Summary Sheet--Professional Evaluation of Student Performance" completed by the mentor.

## Grading

Grading is on a Pass/Fail basis. The grade from the internship is not considered in determining any Radiography Program grade. The ASI is not considered part of the requirements to take the ARRT Registry examination. Taking the Registry exam is not contingent upon completion of the ASI. A pattern (2 to 3) of unsatisfactory assessments will result in the withdrawal of the intern from the experience.

## Call

Since call is often an integral component in certain specialty areas, the student may anticipate call rotations depending on the modality and the facility. If applicable, the mentor and the student will work out the call schedule. **Note:** The student cannot do clinical practice for more than 40 hours in any one week.

## Personal day

One (1) personal day is available and requires makeup if no advance notification was communicated to the mentor at least 1 hour in advance. If two (2) absences occur during the internship, the program reserves the option to withdraw the student from the internship. If not withdrawn, make up time is required. When there are three (3) absences during the internship, the student will be withdrawn from the internship. Note: A personal day cannot be used for call time.

## Staying late for a case

If a rare or interesting case presents when you are scheduled to leave clinical and you would like to take advantage of the educational opportunity it provides. Please ask the Clinical Preceptor or the supervising technologist if you can stay. When you clock out, file a time exception with a comment. There is no comp time adjustment, and the time cannot be used for make-up time.

## Mentor

The mentor is your immediate supervisor/preceptor in the specialty area. There may be more than one mentor depending on the circumstances.

## Involuntary Withdrawal

If a conferencing/disciplinary session occurs during the internship, the student will be withdrawn from the internship.

## Continuing Education

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The clinical education setting allows the program's students and College staff to observe and/or participate in selected conferences and educational programs held for the staff for continuing education purposes.

### Continuing Education (Hospital In-services and Students)

The clinical education setting allows the program's students and College staff to observe and/or participate in selected conferences and educational programs held for the staff for continuing education purposes.

## Application for Registry

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### Misdemeanor/Felony (ARRT Pre-Application Review)

The ARRT investigates all potential violations to determine eligibility to take the registry examination. Such investigations can cause delays in processing exam applications. Students can avoid delays by requesting a pre-application review of the violation before or during training, rather than waiting until completing the educational program. The ARRT will rule on the impact of the violation on eligibility for ARRT registration. Once eligibility is established, the candidate can proceed with fulfilling program requirements with the knowledge that they can take the exam. **Give a copy of the ARRT's response letter to the Program Director for the registry application sign-off process.**

The pre-application review form is downloadable from the ARRT web site: [How to use Ethics Review Pre-application](#) or you may request a copy by phoning the ARRT at 651-687-0048. This information will remain confidential.

### Registration Eligibility

Your registration is scheduled based on the number of credits you have completed. Students who have the greatest number of credit hours completed will register first.

It is your responsibility to be sure you have met all your graduation requirements. Throughout the Radiography Program, you will be meeting with your program academic advisor, who will help you plan your coursework and have the necessary information to complete your registration.

### Registry Application

In the latter part of the spring semester, the Program Director will meet with each second-year student to complete and sign-off the "Application for Certification and Registration" for the ARRT Radiography registry exam to be administered that year.

Passport photos are a requirement for the application along with the validation of the following by the Program Director:

- ✓ Competency evaluations
- ✓ General patient care simulations
- ✓ Course requirements for the AAS degree

If all the program requirements for graduation are completed, or can be completed, by the date that grades are due for graduation eligibility, the Program Director can proceed to validate the student's Registry application.

### Registry (ARRT) Review Testing for Certification Examination

The Senior Review course is devoted to Registry review and testing. On-line practice exercises, quizzes, simulated registry examination, and review books are other options.

## Graduation and Career (Placement) Services

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### Employer Survey

To assess and continually improve the Radiography Program effectiveness, as a graduate radiographer your employer will be contacted and asked to complete a questionnaire concerning both your professional and technical skills.

### Graduate Survey

To assess and continually improve the Radiography Program effectiveness, the graduates at 6-months post-graduation will receive a questionnaire used for assessing career preparedness. To ensure validity, a high response rate is needed. Please respond to the survey request for the advancement of the program.

### Career Placement

The Career Services Office, located in College Center, is an employment resource for Radiography Program graduates and is provided at no charge to the student. The Career Services Office is contacted by employers concerning job postings. Call 610-861-5346 for details. Although the Career Services Office cannot guarantee placement, it will inform you of employment possibilities and will assist you in resume writing and perfecting your interviewing skills.

The Radiography Program Staff are often notified directly about job openings. Please report any change of address (or phone) to the Program Director and the Records Office so you can be informed promptly about these opportunities.

### Continuing Education Requirements & Continuing Qualifications Requirements for Registered Radiographers (Life-long Learning)

See the ARRT *Certification Handbook and Application Materials for Exams Administered* in your testing year. This booklet is available from the ARRT.org website: [Primary Eligibility Pathway Handbook](#)

### References and Letters of Recommendation

For a member of the program faculty to provide you with a reference, a written release needs to be submitted for your file. We as a department have agreed that we have the right not to give a reference. Therefore, it is imperative for you to ask the faculty person for permission to use them as a reference before submitting their name to the employer/educational institution.

**Never** give out anyone's name as a reference without their permission. The individual who is giving you a reference needs to know ahead of time that they may be contacted regarding a reference for you. For references from the ***Clinical Preceptors***, students need to check with them individually since they must adhere to the policy/procedure for their clinical site.

References are important and can be time consuming to write, so plan to provide an updated copy of your resume and information on employment history and skills. Also, take the time to stay in touch and keep your references updated on your employment status.

### **Transferring to Four-Year Degree Program**

The Career Services/Transfer Advising offices have current information on further education and vocation choices. If you are interested in transfer programs, call the office, 610-861-5346, for detailed information. Program Faculty are also a valuable resource for career advice. Reference the NCC website for more information: [NCC Transfer Options](#)

**COLLEGE AND HOSPITAL ASSOCIATION OF RADIOLOGIC TECHNOLOGY STUDENTS (CHARTS)  
CONSTITUTION AND BY-LAWS**

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ARTICLE I: Name

The name of this organization shall be the "College and Hospital Association of Radiologic Technology Students," also referred to as "CHARTS."

ARTICLE II: Objectives and Purposes of Organization

- a. To improve and enhance Radiography Students' College, and Clinical Education.
- b. To develop a cooperative relationship between CHARTS, NCC, and Affiliate Hospitals.
- c. To advance the Allied Health Profession of Radiologic Technology; and,
- d. To provide philanthropic assistance and community services.

ARTICLE III: Requirements for Membership

- a. CHARTS membership is open to all students currently enrolled in the Radiography Program.
- b. Each active member shall be entitled to voting privileges.
- c. Radiography Program graduates shall be associate members and shall not be entitled to voting privileges.
- d. Both active and associate members shall be encouraged to attend all meetings and organizational functions.

ARTICLE IV: Officers

- a. Section 1 – List of Officers First and Second Year Students
  - President
  - Vice President
  - Secretary
  - Treasurer
- b. Section 2 – Requirements of Officers

Only active members in good academic standing are eligible to hold office. A cumulative GPA of 3.0 or better is considered good academic standing for the purpose of holding office.

- c. Section 3 – Time and Procedure of Election Officers

First year officers shall be elected in November of each Fall Semester. The Second Year President shall open the floor for nominations, which shall be limited to three per office. Prior to placing the nominee's name on the ballot, the nomination must be accepted, either written or verbally. Voting by only active members to be affected by the elections, not outgoing members, shall be on paper ballots, and tabulated immediately by the current officers. Additional ballots shall be used to determine the outcome of ties.

- d. Section 4 – Tenure of Officers

Officers shall serve for the duration of their academic standing or upon completion of the Radiography Program.

- e. Section 5 – Removal of Officers

## CHARTS By-Laws

Officers may be removed from the office by a two-thirds (2/3) majority vote of the members present during a regular or emergency meeting. The officer and all the membership shall be notified of such an intended action three (3) days prior to the meeting. Reasons for removal include but are not limited to 1) mishandling of organizational funds, 2) misrepresentation of the organization, and 3) dissatisfaction with any officer's action by the membership.

f. Section 6 – Filling of Vacancies

Officer vacancies shall be filled during a regularly scheduled or emergency meeting. The highest remaining officer shall conduct the procedure as outlined in Article IV, Section 3.

g. Section 7 – Commitment of Officers:

Officers shall not hold official titles and not be required to perform duties in any other organizations or committees within the Radiography Program while holding the title of Officer. Officers can elect to vacate their position in C.H.A.R.T.S. and run for office in another organization if they so desire.

### ARTICLE V: Faculty Advisor

The Radiography Program Director/Faculty shall serve as CHARTS Advisor.

### ARTICLE VI: Duties and Election of Officers

1. The President shall:

- a. composes an agenda and presides over all meetings.
- b. establishes committees subject to approval of the membership.
- c. calls additional meetings as prescribed.
- d. be responsible for presenting complete and balanced information concerning any business to the membership.
- e. delegate according to the needs of the organization.
- f. delivers a short speech during their class's pinning ceremony.

2. The Vice-President shall:

- a. presides over meetings in the absence of the President and assume all appropriate responsibilities.
- b. secure information concerning committee actions for presentation to the membership.
- c. aid in meeting preparation and business.
- d. assumes all other duties as delegated by the President or a vote of the membership.
- e. has the responsibility of social activities (i.e., class, picnic, pinning ceremony, etc.) but has the option of delegating responsibility to another student when necessary.

3. The Secretary shall:

- a. takes minutes of all official meetings.
- b. be responsible for the reproduction and distribution of all pertinent information.



## CHARTS By-Laws

- c. preserves and maintain all current and past CHARTS records.
  - d. be responsible for appropriate correspondence.
4. The Treasurer shall:
  - a. keeps a record of all expenditures.
  - b. aid in the development of a yearly budget, in conjunction with other officers and membership.
  - c. presents a detailed income and expenditure report at each meeting.
5. Elections:

The officers shall be elected in November of their first Fall Semester. This will enable the 1<sup>st</sup> year officers to work closely with the 2<sup>nd</sup> year officers to learn the details of their respective offices.

The CHARTS Advisor and Treasurer shall have joint responsibility for all organization funds. Signatures of both shall be required for any transaction involving the expenditure of organizational funds.

### ARTICLE VII: Committees

Committees shall be instituted as the need arises and are open to active or associate members of the organization. The President, Vice-President, Secretary, and Treasurer shall work together in the appointment of committees. The committee may be dissolved if its purpose has been fulfilled. A chairperson shall be appointed by mutual agreement of the members of a particular committee and will be responsible for reporting relevant information to the general membership at regularly scheduled meetings.

### ARTICLE VIII

Membership attendance at CHARTS funded, or partially funded educational activities, will be based upon:

1. Academic standing,
2. CHARTS participation, and
3. Participation in student competition.

### ARTICLE IX: Amendments to the Constitution

Amendments may be initiated by a two-thirds (2/3) vote of the membership present at that scheduled meeting. Any amendments to the constitution, passed by the organization, are subject to approval of the Office of Student Activities, and must be presented immediately after acceptance by the membership.

### ARTICLE X: Ratification

This constitution shall go into effect after ratification by a two-thirds (2/3) majority vote of the quorum of eighty (80) percent of the students currently enrolled in the Northampton Community College Radiography Program and after approval of the Office of Student Activities and Student Senate.

### ARTICLE XI: INDIVIDUAL MEMBERSHIP ACCOUNTS

Monies accrued in individual accounts from fundraising activities can only be redeemed for CHARTS activities, Pinning Ceremony and Lambda Nu regalia. No monies can be used to fund outside needs. Any money left in the individual accounts upon graduation from their program shall be forfeited and returned to the general account.

## **BY-LAWS OF THE PENNSYLVANIA DELTA CHAPTER OF LAMBDA NU**

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### Article I: Name, Location, and Color Identity

The name of this organization is the **Pennsylvania Delta Chapter of Lambda Nu**, the national honor society for the radiologic and imaging sciences. This Chapter is established at **Northampton Community College, Bethlehem, Pennsylvania**.

**Λν**- Lambda Nu's name is derived from the lower-case Greek characters in the formula  $\lambda\nu$ , which represents the physics of the inverse relationship between wavelength ( $\lambda$ ) and frequency ( $\nu$ ), an essential parameter across the diversity of modalities comprising the professions.

**ΛN**-In a similar manner, Lambda Nu uses the upper-case Greek characters  $\Lambda$  and  $N$  to represent the inverse relationship and delicate balance required between the art and the science inherent in the radiologic and imaging sciences professions of radiography, radiation therapy, nuclear medicine, diagnostic medical sonography, cardiovascular-interventional technology, mammography, computed tomography, magnetic resonance imaging, quality management, and bone densitometry.

Lambda Nu's colors are maroon for the radiologic sciences, forest green for the health professions, and gold, the ancient color of honor.

### Article II: Purpose

The purpose of this Chapter is to:

- foster academic scholarship at the highest academic levels.
- promote research and investigation in the radiologic and imaging sciences.
- recognize exemplary scholarship.

### Article III: Membership

Radiologic and imaging sciences students, alumni, and faculty qualify for membership according to the following standards:

Section A. Professional course GPA 3.5 or higher on 4.0 scale after one full time semester (or equivalent – summer clinical practice is not a stand-alone semester) of the professional program.

There can be no grades of “F” in a professional course(s) to become a member or to maintain a membership. This will become effective with the Radiography and Sonography students entering their professional courses during the fall semester of 2010.

Section B. Enrollment in a radiologic or imaging sciences program as a full-time student for at least one term.

Section C. Evidence of professional commitment beyond minimum requirements of the program, including, but not limited to:

- GPA higher than Chapter minimum
- actively pursuing an independent research project
- active membership in a professional organization, as evidenced by:
- holding office or committee appointments

## Lambda Nu By-Laws

- preparing for presentation of a professional paper or poster
- preparing for competition in a Quiz-Bowl
- clinical-based employment in a radiologic or imaging sciences field

Section D. An invitational letter will be sent to eligible students.

Section E. Faculty members are eligible for membership upon meeting the following criteria:  
actively teaching at the institution of the above chapter (full time, part time, adjunct, or guest faculty)

Section F. All members must register and pay national dues as well as meet all Chapter obligations.

Section G. Exemplary honors may be achieved upon evidence of advanced professional recognition (i.e., academic paper or poster presentation, publication, etc.)

Section H. After induction into the honors society, the member is required to maintain his or her 3.5 GPA per semester.

Section I. If a member's GPA for a semester drops below 3.5, he or she will be sent a letter and have one semester probationary term to build up his or her GPA up to 3.4 or higher.

Section J. During the probationary semester, he or she will retain membership benefits.

### Article IV: Officers

Section A. Each Radiologic Science Program will have its own officers.

Section B. Only members in good standing may hold an office.

Section C. The President of this organization may not be President of another campus organization.

Section D. The duties of the President, are:

1. represent the Chapter, behave, and speak only in its best interest
2. carry out purposes of the organization
3. act to ensure the welfare of the organization
4. preside at business meetings
5. service as ex-officio member of all committees

Section E. The primary duty of the Vice-President is to assume the duties of the President in the event of absence, incapacity, or resignation.

Section F. The duties of the Secretary are to record and preserve the proceedings and records of the organization.

Section G. The duties of the Treasurer are to keep accurate financial records, provide for the safekeeping of funds, and ensure expenditures are according to the by-laws and the will of the Board and membership.

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Section H. Officers assume their duties at the beginning of the second fall semester.

Section I. In the event of a vacancy in any office, the President will appoint an active member to fill the vacancy.

### Article V: Executive Board

Section A. The members of the Executive Board include all officers of the Chapter and the chairpersons of all standing committees.

Section B. A university faculty sponsor shall be appointed by the Department Chair and shall serve as an ex-officio member of the Executive Board. Ex-Officio members do not have voting rights but have the right to attend all meetings and consultations of the Executive Board and must be notified of all such meetings and consultations.

Section C. The duties of the Executive Board are to carry out the work of the Chapter between meetings of the membership.

### Article VI: Meetings

Section A. The membership shall meet at least once per academic year (August – May).

Section B. The following business will be conducted at least once per year:

1. induction of new members
2. election and installation of new officers
3. conduct the business of the organization
4. planning or participation in one campus or community charitable event without profit to the organization
5. planning or participation in one social event

Section C. A quorum for the purpose of conducting business will consist of those members present at a meeting announced by the Executive Board through posting a notice and making announcements in class.

### Article VII: Elections

Section A. The election of officers shall occur once per academic year (August – May).

Section B. A call for nominations for office shall be made to the membership at least 7 days prior to the election. Nominations may be verbal or written but require seconding by another member and acceptance of the nomination by the candidate.

Section C. Elections shall be by secret ballot of all members currently registered for classes at the time of the election.

Section D. Elections shall occur by a method announced at least 7 days in advance by the Executive Board (i.e., in person during a meeting, in-class ballot distribution, via email, or other means)

## Lambda Nu By-Laws

### Article VIII: Dues and Finances

- Section A. The fees for students shall be a one-time fee of \$40.
1. \$20 shall be forwarded with the proper application form to the national Lambda Nu Chapter for registration and issuance of an individual membership certificate. This is a one-time fee required by the national office.
  2. \$20 shall be deposited in the Chapter account
- Section B. All Chapter fund expenditures must have the approval of the president of the Chapter and the faculty sponsor.

### Article IX: Standing Committees

- Section A. A Program Committee will plan and conduct induction of new members and officers as well as academic, charitable, and social events.
- Section B. A Scholarship Committee will plan and conduct all scholarship activities, including, but not limited to monetary awards, exemplary recognition of members, and a forum for presentation of academic and research projects.
- Section C. Ad-hoc committees may be established as necessary by the President upon ratification by a majority vote of the Executive Board.
- Section D. Committee Chairs are appointed by the President upon ratification by a majority vote of the Executive Board. Committee Chairs serve at the pleasure of the President but can be replaced only upon ratification by a majority vote of the Executive Board.

### Article X: Parliamentary Authority

Business of the Chapter shall occur according to parliamentary procedure practices as described in *Sturgis' Standard Code of Parliamentary Procedure*. This includes the transaction of business in meetings of the membership and the Executive Board.

### Article XI: Amendments to the By-Laws

- Section A. Proposed by-law amendments must be distributed to all members currently registered for classes by a method approved by the Executive Board at least 7 days prior to the meeting at which the proposal is to be presented for vote.
- Section B. A 2/3 majority is required of those voting for a by-law to become effective.

### Article XII: Validity of By-Laws

These by-laws are valid only when they have been accepted by the national Lambda Nu office.

# APPENDIX FORMS LIST

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## Appendix A

*Magnetic Resonance Imaging (MRI) Safe Practices Information, Screening and Acknowledgement Form*

## Appendix B

*Student Release of Information Form*

## Appendix C

*Health Careers Medical Marijuana Policy*

## Appendix D

*NCC Departmental Confidential Policy: Health Insurance Portability and Accountability Act (HIPAA) of 1996*

## Appendix E

*“Essential Functions” of a Radiographer Verification of Understanding/Student Disclosure Form*

## Appendix F

*Non-Conformance Flowchart*

## Appendix G

*Student Verification of Understanding “Radiography Program Student Handbook”*

Magnetic Resonance Imaging (MRI) Safe Practices Information, Screening and Acknowledgement

The magnetic and radiofrequency fields utilized in MRI imaging can be hazardous. The system uses an extraordinarily strong magnetic field that may be hazardous to individuals entering the room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. Remove all metallic objects before entering the MRI environment. These objects include hearing aids, pager, cell phone, keys, eyeglasses, hair pins, barrettes, jewelry (including piercings), watch, safety pins, paperclips, bank/credit cards, any magnetic strip card, coins, pens, pocketknives, nail clipper, steel toe or shanked boots/shoes and tools. To ensure student and patient safety during educational rotations in the MRI environment, carefully complete the following screening and read the information section covering specific equipment restrictions. **Any “yes” response needs to be evaluated and signed off by appropriate clinical personnel before the student is permitted to rotate in the modality. Students MUST notify the program and the appropriate MRI personnel of ANY change in their status before rotating in MRI.**

1.  Yes  No --Have you ever had an injury to the eye involving a metallic object or fragment (e.g., metallic slivers, shavings, foreign body) or worked around metals? If yes, please describe \_\_\_\_\_
2.  Yes  No --Do you have any implanted devices? E.g., morphine or insulin pump, other infusion pump, bone stimulator, tens unit, leads, penile implant, ear implants (cochlear or stapes), pacemaker or pacer wires, internal defibrillator (ICD) etc. If yes, please describe \_\_\_\_\_
3.  Yes  No --In the past 2 weeks have you had an endoscopy procedure, GI clips, video capsules or GI bleed? If yes, please describe \_\_\_\_\_

**WARNING:** Certain implants, devices or objects may be hazardous to you and/or may interfere with the MRI equipment.  
**The MRI system magnet is ALWAYS on.**

Please indicate if you have any of the following:

- |  |   |
|--|---|
| <input type="checkbox"/> Yes <input type="checkbox"/> No Vascular or Aneurysm Clips<br><input type="checkbox"/> Yes <input type="checkbox"/> No Gunshot wound or shrapnel injury<br><input type="checkbox"/> Yes <input type="checkbox"/> No Surgery in the past 8 weeks<br>Artificial limbs, metal implants,<br><input type="checkbox"/> Yes <input type="checkbox"/> No plates, prosthesis, or joint<br><input type="checkbox"/> Yes <input type="checkbox"/> No Neurostimulation system<br><input type="checkbox"/> Yes <input type="checkbox"/> No Spinal cord stimulator<br><input type="checkbox"/> Yes <input type="checkbox"/> No Internal electrodes or wires<br><input type="checkbox"/> Yes <input type="checkbox"/> No Bone growth/bone fusion stimulator<br><input type="checkbox"/> Yes <input type="checkbox"/> No Vascular access port and/or catheter<br><input type="checkbox"/> Yes <input type="checkbox"/> No Medication patch or metallic<br><input type="checkbox"/> Yes <input type="checkbox"/> No IUD, diaphragm, or pessary | <input type="checkbox"/> Yes <input type="checkbox"/> No Radiation seeds or implants<br><input type="checkbox"/> Yes <input type="checkbox"/> No Wire mesh implant<br><input type="checkbox"/> Yes <input type="checkbox"/> No Tissue expander (e.g., breast)<br><input type="checkbox"/> Yes <input type="checkbox"/> No Heart valve prosthesis<br><input type="checkbox"/> Yes <input type="checkbox"/> No Eyelid spring or wire<br><input type="checkbox"/> Yes <input type="checkbox"/> No Metallic stent, fiber, or coil<br><input type="checkbox"/> Yes <input type="checkbox"/> No Shunt (brain or spine)<br><input type="checkbox"/> Yes <input type="checkbox"/> No Pregnant, suspect pregnancy or breast feeding<br><input type="checkbox"/> Yes <input type="checkbox"/> No Body piercing jewelry<br><input type="checkbox"/> Yes <input type="checkbox"/> No Tattoo(s) or permanent makeup<br><input type="checkbox"/> Yes <input type="checkbox"/> No Other items of concern _____ |
|--|---|

**Please consult the MRI technologist if you have any questions or concerns BEFORE you enter the MRI system room.**

There are special items marked MRI safe. Those items are allowed to come into the MRI rooms. This includes special carts, special IV poles, special beds, special wheelchairs, etc. do not let anyone bringing unmarked hospital equipment into an MRI room unless you are sure the equipment is safe in the room. Hospital employees must also be cleared to go into the rooms. They must check their pockets for scissors, pens, any kind of clips, any medical metal pieces, any items in their hair like bobby pins, etc. Masks used throughout the hospital contain a metal strip across the bridge of the nose. Those masks must either be replaced with an approved unit or have the metal strips removed. As a student, safety protocol is also your responsibility. Be conscious of all the safety rules and when in doubt, ask a tech.

I attest that the information is correct to the best of my knowledge. I read and understand the contents of this form and had the opportunity to ask questions regarding the information on this form.

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed name

Clinical Facility Approval \_\_\_\_\_  
(Required if positive response to screening) Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name & Title

Date	Time	Comments





## Student Release of Information Form

### For Health Career Clinical Sites Only

The Family Educational Rights and Privacy Act of 1974 (FERPA) protects the student’s educational record from disclosure to unauthorized individuals. As an admitted and enrolled student in this NCC Health Science program, additional documentation is required to be submitted, including criminal background checks, health and vaccination/titer information, and drug screening results. While these items are not part of the student educational record, they are maintained as confidential by the program/school. Northampton Community College is required to share positive results of criminal background checks and drug screening with any affiliated institution used for clinical education in the Health Science programs, as well as any pertinent health information requested by the clinical facilities.

- I understand that the clinical affiliate requires that positive results of my background check(s) be shared with the following individuals: the VP Human Resources, Labor/Employment Counsel, VP Patient Care Services, and/or the manager(s) of the unit where the student is assigned for clinical.
- I understand that any requested information will be released to the requestor according to the guidelines outlined in the affiliation agreement between the college and the clinical affiliate.
- In connection with my admission and enrollment in an NCC Health Science Program and my participation in the program's clinical training opportunities, I hereby authorize the College and its agents to release any and all information relevant to my criminal record, health information, and/or drug screen results to any authorized clinical site representative it deems appropriate in order to determine my suitability to be enrolled in the Health Career Program and/or to be assigned to a clinical site selected by the College. A photocopy of this release will be sufficient to authorize the release of the information.

#### Student Information:

(Please print legibly)

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
Student’s Name (Last) (First) (Middle) (Previous)

\_\_\_\_\_  
Address (Street) (City) (State) (Zip)

\_\_\_\_\_  
Primary Phone Number Secondary Phone Number

\_\_\_\_\_  
Signature of Student Authorizing Release Date

***Upload signed form to your MyRecordTracker® Account***

## HEALTH CAREERS MEDICAL MARIJUANA POLICY

To be transparent regarding the entire drug screening process and the use of Medical Marijuana, Northampton Community College recognizes our responsibility to fully inform students of NCC's policy at the time of acceptance. Please read the following policy carefully and acknowledge your understanding by signing and uploading this form to MyRecordTracker©.

The Pennsylvania Department of Health is currently implementing the Pennsylvania Medical Marijuana Program, a component of the Medical Marijuana Act (MMA) that was signed as law on April 17, 2016. This program provides access to medical marijuana for patients with serious medical conditions as defined by the Pennsylvania Department of Health.

Currently, the Federal government regulates drugs through the Controlled Substances Act, which does not recognize the difference between medical and recreational use of marijuana. Under Federal law, marijuana is a Schedule 1 controlled substance, meaning that it is considered to have no medical value. Medical practitioners may not prescribe marijuana for medical use under Federal law.

Students entering any Health Science Careers Program are required to have urine drug screenings upon admission to the clinical phase of the program and on a yearly basis while participating in clinical experiences. As per current policy, if the results are positive, the student will be dismissed from the program immediately and referred for appropriate counseling.

**Students using medical marijuana will not be eligible for clinical, internship, or externship placement in any NCC health science career program**, due to the current discrepancy between State and Federal law regarding Drug Free Workplace Act and the MMA. Businesses who are not in compliance with Federal law are at risk for criminal or civil charges; and additionally, may find issue with eligibility for Federal contracts and grants. Additionally, Pennsylvania's Medical Marijuana statute specifically provides that an employer does not have to accommodate an individual in a safety sensitive position if that person is under the influence of medical marijuana. Most positions involving direct patient care will be considered safety sensitive positions.

Students should also understand that under current Pennsylvania State Board law, many health career licensing boards require drug screening at the time of application for licensure. Similarly, most health care employers will perform routine drug screening as a condition for employment, as these positions involve direct patient care, and are considered safety sensitive positions.

Due to current laws, NCC does not provide admission to the clinical phase in any of our Health Science Career Programs. Students who have been admitted and are later to be found positive for medical marijuana will be dismissed from the Program.

***I hereby acknowledge that I have read and understand NCC's Health Careers Medical Marijuana Policy.***

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*Student's Name (Please Print)*

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*Signature of Student*

---

*Date*



## **NCC Departmental Confidential Policy**

### Health Insurance Portability and Accountability Act (HIPAA) of 1996

Confidentiality is a patient's right and the responsibility of the radiographer, student radiographer, and all the health care team members in radiology. Any information in written, oral, or electronic form about a patient's physical, emotional, or mental health or treatment is considered confidential and should be shared only in a private area among healthcare providers involved in the care and diagnostic treatment of the patient. This information must be handled discreetly and privately and protected against theft, loss, or inappropriate disclosure.

Student radiographers, by virtue of the educational process, will have access to protected health information (PHI) of patients under their care in and outside the radiology department at each of the clinical education sites. Students will comply with the Confidentiality Policies and HIPAA regulations at their clinical sites and on the NCC campus.

Assignments, whether in the clinical or classroom setting, which include patient-related information must be handled securely to avoid unnecessary or inadvertent disclosure and will not include patient identifying information.

Students accused of violating patient confidentiality will be suspended from clinical rotations and possibly recommended for withdrawal from the Radiography Program depending on the circumstances. An investigation will be conducted using the Disciplinary Action Plan (DAP).

Your signature indicates that you have read and understand the confidentiality policy.

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*Student's Name (Please Print)*

---

*Signature of Student*

---

*Date*

## **“Essential Functions” of a Radiographer**

### **Verification of Understanding/Student Disclosure Form**

The following is a list of the everyday functions that a radiographer needs to be able to perform at the hospital or outpatient facility. The inability to perform these skills at a competent level may require withdrawal from the program to protect the patient population.

#### Observational skills:

- Assess the patient's needs.
- Able to discern the information that is needed for the procedure at hand.
- Recognize the need for prompt medical attention in a variety of settings and locations.
- Discern the details, density, and contrast of a radiographic image to determine if it is optimal for the radiologist's interpretation.
- Distinguish among the chromatic colors.
- Be able to use peripheral vision.
- Judge the distance of objects and the spatial relationship of objects at different distances.
- Detect changes in equipment operation (i.e., overheating, incorrect meter readings).
- Secure the correct chemical container and/or medication.

**Initial: \_\_\_\_\_ I acknowledge that I have read the above “observational skills” of a Radiographer**

#### Communication skills:

- Communicate with other health care providers.
- Perceive the patient’s oral communication with the ear.
- Be able to hear sounds of a high pitch (e.g., patient’s monitoring equipment).
- Be able to hear sounds of a low pitch (e.g., patient’s breathing patterns).
- Perceive the patient’s nonverbal communication.
- Secure information (i.e., questioning of the patient).
- Communicate promptly and effectively in English both verbally and in writing.
- Communicate with the patient and the public on a level that they can comprehend.
- Communicate effectively, using medical terminology, with the physician and other health personnel.
- Respond to directives from others related to patient care and emergency situations.
- Display compassion, empathy, integrity, concern for others, interest, and motivation.
- Obtain pertinent information from the patient's chart.
- Obtain information that is requested by the physician to make a diagnosis.
- Document in writing, through knowledge of the medical terms, good grammar, and spelling, information needed on the patient's requisition for an optimum diagnosis by the radiologist.
- Document the vital sign findings for the use of other health care personnel.
- Interact with others in a respectful, professional manner especially in stressful situations.

**Initial: \_\_\_\_\_ I acknowledge that I have read the above “communication skills” of a Radiographer**

## **“Essential Functions” of a Radiographer cont.**

### Motor skills:

- Tolerate physically taxing workloads.
- Safely lift from a lower to a higher position a minimum of 50 pounds and occasionally as much as 75 pounds.
- Be able to carry an object weighing as much as 25 pounds to transport it from one place to another.
- Be able to draw, drag, haul, or tug an object(s) weighing more than 100 pounds or the patient’s weight.
- Be able to push an object(s) with steady force to thrust forward, downward, or outward weighing more than 100 pounds or the patient’s weight.
- Be able to stoop/bend, squat, crouch, kneel, crawl, climb, and reach above shoulder level.
- Sufficient gross and fine motor coordination to respond promptly, manipulate equipment, and ensure patient safety.
- Perceive the attributes of an object(s) such as size, shape, temperature, or texture by touching with the skin, particularly that of the fingertips.
- Elicit information from a patient by diagnostic maneuvers (i.e., palpation).
- Safely manipulate and use controls (i.e., the x- ray tube that is located up to six feet from the radiographic/fluoroscopic room floor).
- Be able to use the fingers/hands in repetitive actions such as picking, pinching, writing, firm grasping, and twisting/turning.
- Skillfully use precision instruments.
- Maintain an upright, erect position with the entire body supported by the feet for as long as 7 hours during the workday.
- Function efficiently while wearing lead protective apparel.
- Safely perform procedures.
- Utilize the equipment needed to obtain temperature, pulse, respiration, and blood pressure.
- Enter data into the computer.

**Initial: \_\_\_\_\_ I acknowledge that I have read the above “motor skills” of a Radiographer**

### Cognitive functions:

- Ability to adapt to a crisis, flexible schedules, and/or change in environment.
- Function effectively under stressful conditions.
- Concentrate on the task at hand.
- Visually concentrate and/or focus thoughts or efforts for long periods of time.
- Exercise independent judgment and discretion in the safe technical performance of medical imaging procedures.

**Initial: \_\_\_\_\_ I acknowledge that I have read the above “cognitive skills” of a Radiographer**

## **“Essential Functions” of a Radiographer**

### Verification of Understanding/Student Disclosure Form

I acknowledge that I have read the “Essential Functions” of a Radiographer and answered the following statement to the dutiful extent of my ability.

**Statement:** I am satisfactorily able to perform all the identified “essential functions”

Please initial one answer: YES \_\_\_\_\_ \*NO \_\_\_\_\_

\*If not, do you need reasonable accommodation?

Please initial one answer: \*\*YES \_\_\_\_\_ NO \_\_\_\_\_

\*\* If yes, please confidentially contact the Coordinator of Disability Services at (610) 861-5342. All accommodation will be made with the understanding that the safety and well-being of patient care will not be compromised. Documentation may be needed from a physician or other professional indicating that you need reasonable accommodations.

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*Student’s Name (Please Print)*

---

*Signature of Student*

---

*Date*

# Non-Compliance Flow Chart

<p><b>Verbal Warning</b> Written Action Plan</p>	<p>(5th offense) Late Policy (2-point penalty)            (1<sup>st</sup> offense) Trajecsyst Clock-in/out Policy            (1<sup>st</sup> offenses) Notification Policy            (1st offense) Clinical Education Dress Code (1 day penalty)            (1st offense) Cell Phones and Smart Watch            (1st offense) Personal Laptops            (1st offense) "Already Did That"            (1st offense) Competency Refusal (2-point penalty)            *(3<sup>rd</sup> offense) Clinical Attendance Policy (2-point penalty with make-up of day missed)</p>
<p><b>Continual Non-Compliance</b> **Consecutive occurrence accrues for entire length of program</p>	<p>(Any offense) Program Meeting (1 day penalty)            **(6 or more offenses) Late Policy (2 points and 1 day penalty)            **(2 or more offenses) Trajecsyst Clock-in/out Policy (2-point penalty)            **(2 or more offenses) Notification Policy (2-point penalty)            **(2 or more offenses) Clinical Education Dress Code (2 points and 1 day penalty)            **(2 or more offenses) Cell Phones and Smart Watch (2-point penalty)            **(2 or more offenses) Personal Laptops (3-point penalty)            **(2 or more offenses) "Already Did That" (2-point penalty)            **(2 or more offenses) Competency Refusal (3-point penalty)</p>
<p><b>Written Warning</b></p>	<p>*(4<sup>th</sup> offense) Clinical Attendance Policy (2-point penalty with make-up of day missed)</p>
<p><b>Corrective Action Plan (CAP)</b></p>	<p>*(5<sup>th</sup> offense) Clinical Attendance Policy (2-point penalty with make-up of day missed)            (1<sup>st</sup> offense) Direct and Indirect Supervision (5-point penalty)            (1<sup>st</sup> offense) Missing in Action (5 points penalty)            (1<sup>st</sup> offense) Leaving without permission (5 points)</p>
<p><b>Disciplinary Action Plan (DAP)</b></p>	<p>*(6<sup>th</sup> offense) Clinical Attendance Policy (2-point penalty with make-up of day missed)            (2<sup>nd</sup> offense) Direct and Indirect Supervision Policy (5-point penalty)            (2<sup>nd</sup> offense) Missing in Action (5-point and 1 day penalty)            (2<sup>nd</sup> offense) Leaving without permission (5-point and 1 day penalty)            Failure of 1<sup>st</sup> RADT course</p>
<p><b>Involuntary Withdrawal</b></p>	<p>(7th offense) Clinical Attendance Policy            (3rd offense) Direct and Indirect Supervision            (3rd offense) Missing in Action            (3rd offense) Leaving without permission            Failure of 2<sup>nd</sup> RADT Course            Violation of HIPAA            Academic Dishonesty            Essential Functions of Radiographer            Withdrawal of Student from the Clinical Education Setting            Didactic Attendance Policy            Clinical Education as Employee</p>

\*Renews every semester

Point penalty applies to current clinical practice grade.

Day penalty requires make-up in current clinical practice that incident occurred.

✓ Any penalties accruing days are counted in Clinical Attendance Policy. Therefore, further consequences may apply.



**Student Verification of Understanding**  
**“Radiography Program Student Handbook”**

I hereby verify that I have read and understand the contents of the Radiography Program Student Handbook, revision 8/2023, and know I can access a copy via Trajecsyst or the Radiography Program webpage when I need additional information.

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*Student's Name (Please Print)*

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*Signature of Student*

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*Date*