LAKE MICHIGAN®
COLLEGE

Radiologic Technology Student Handbook

2022-2023

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RADIOLOGIC TECHNOLOGY PROGRAM TEAM

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Provost & Vice President, Academic Affairs ..... Dr. Leslie Kellogg

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RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL SITE LIST

Allegan General Hospital
555 Linn Street
Allegan MI 49010
269-673-8424, ext. 4210

Borgess - Lee Memorial Hospital
420 W. High Street
Dowagiac, MI 49017
269-783-3030

Borgess - Pipp Hospital
411 Naomi St.
Plainwell, MI 49080
269-685-0700

Bronson Lakeview Community Hospital
408 Hazen
Paw Paw, MI 49079
269-657-1441 (or 3141)

Bronson Lakeview Outpatient Center
451 Health Parkway
Paw Paw, MI 49079
269-655-3060

Bronson South Haven
955 S. Bailey Avenue
South Haven MI 49090
269-637-5271

Elkhart General Hospital
600 E Boulevard
Elkhart, IN 46514
574-523-3301

Spectrum Health Lakeland – Niles
31 N. St. Joseph Ave.
Niles MI 49120
269-687-1435

Lakeland Health Park (COPS)
3900 Hollywood Rd.
St. Joseph MI 49085
269-556-2820

Spectrum Health Lakeland - Watervliet
Department of Radiology 400 Medical Park
Watervliet MI 49098
269-463-3111

Spectrum Health Lakeland - St. Joseph
1234 Napier Ave.
St. Joseph MI 49085
269-983-8299

Southwest Michigan Center for Orthopedics
183 Peace Boulevard
St Joseph MI 49085
269-428-3500

South Bend Clinic
211 North Eddy Street
South Bend IN 46617
574-234-8161

Unity Physicians Hospital
4455 Edison Lakes Parkway #100
Mishawaka, IN 46545
574-231-6839

Bronson Methodist Hospital
601 John Street
Kalamazoo, MI 49007
269-341-7654

WHAT IS A RADIOLOGIC TECHNOLOGIST?

A radiologic technologist is a highly skilled person, qualified by a medical/technical education. They provide patient services at hospitals, physician's offices, and imaging centers. A radiologic technologist uses a variety x-ray equipment to produce images of tissues, organs, bones, and vessels of the body. As a radiologic technologist you will use x-ray radiation to acquire images. A career in general radiography can open pathways to other specialty areas of medical imaging such as Computed Tomography (CT), MRI, mammography, angiography, interventional radiography (IR), cardiovascular technologist, PET CT, quality assurance/control, PACS administration, nuclear medicine and radiation therapy. Some of these specialized jobs only require on the job training while others require education in a college program. Radiologic technologists are highly educated in the anatomy of the human body and the physics of electromagnetism.

Radiologic technologists work in a variety of atmospheres such as emergency/trauma center (ER), surgery, outpatient centers, and on inpatient floors. They perform many different exams such as chest x-rays, trauma imaging, barium enemas, esophagrams, hysterosalpingograms, cystograms, hip pinnings, post- operative x-rays, assist radiologists and surgeons, and much more.

Not only do radiologic technologists operate energized x-ray equipment, they also perform a variety of administrative tasks. They maintain records, keep track of patient images, analyze images for quality, keep electronic files, schedule patients, and in general maintain an efficient department. Good health, emotional stability, and a sincerer desire to work with sick, injured, or disabled people are important qualifications for this profession.

A radiologic technologist must go through an accredited program and take a final exam given by the ARRT (American Registry of Radiologic Technologists) to acquire their national registry.

RADIOLOGIC TECHNOLOGY PROGRAM AT LAKE MICHIGAN COLLEGE

The Radiologic Technology program is designed to prepare the student for employment as a Radiologic Technologist. After successful completion of the appropriate registry exams, the graduate will be eligible to write the initials of R.T. (R) (Radiologic Technologist, Registered) behind their name.

ELIGIBILITY AND ADMISSSION

Lake Michigan College and the Health Science Department are pleased that you are interested in the Associate in Applied Science – Radiologic Technology program. The selection process was established to enhance student success in the Rad Tech curriculum and passing scores on the American Registry of Radiologic Technologist national certification exam (ARRT).

1. Submit a Lake Michigan College application at www.lakemichigancollege.edu/apply.
2. Be a high school graduate or successfully complete the GED test.
3. Forward ALL official transcripts from colleges previously attended other than LMC to the Lake Michigan College Records Office. It is your responsibility to confirm that your transcripts are on file with the Records Office. All transcripts **MUST** be received by the application deadline; students are encouraged to send up-to-date transcripts as early as they are available. Please allow 8-10 weeks for official transcripts to be evaluated. Failure to have all transcripts submitted on time to LMC may result in an incomplete Radiologic Technology program application.
4. Complete all prerequisite courses with the minimum grade requirements by the posted application deadline.
5. Meet the Technical Standards for Admission to the Health Science Department and the Technical Standards and Functions required for the Radiologic Technology Program.
6. Be 18 years of age or older when you begin the Radiologic Technology Program.
7. Submit a complete Lake Michigan College Radiologic Technology program application form by the posted application deadline. This application must be directly submitted to the Health Sciences Office: in person, via fax, via US Post, or via e-mail (very clear cellphone pictures are accepted via e-mail).

PROGRAM ADMISSION

Once a student has received notification of acceptance into the Associate in Applied Science Radiologic Technology program, the following requirements must be met before starting classes. These requirements may also need to be repeated or updated any time a student returns to the program, or whenever there is a change in health status.

1. Completion of a physical exam using the Health Certification Form. This form must be completed by the health care provider of the student's choice for the sole purpose of determining and documenting physical status prior to beginning the clinical component of the Radiologic Technology program.

2. Obtain required immunizations listed on the Health Certification Form or prove immunity with positive titers. It is preferable that vaccines which require more than one dose (for example: Hepatitis B) completed prior to entering the Radiologic Technology program; however, minimally, it must be started before the student is allowed to attend the clinical site. The seasonal flu vaccine is a requirement in late fall annually. COVID-19 vaccination is also a requirement for the Radiologic Technology program.

3. Complete a required Basic Life Support (BLS) Provider CPR course through American Heart Association (preferred) or Red Cross. Current BLS certification must be maintained throughout the duration of the program. Online only certifications are not accepted.

4. Proof of freedom from Tuberculosis in the form of a two-step TB skin test, negative TSPOT, negative Quantiferon Gold, or negative chest x-ray (CXR). If any of these tests are positive, the student must have a negative chest x-ray. An annual blood test (TSPOT or Quantiferon Gold) or skin test must be completed annually.

5. Pass the required criminal background check and drug screen. All Radiologic Technology students are required to complete a criminal background check and a urine drug screen. The cost for the entire criminal background search and drug screen package through Complio by American DataBank, the company used for handling these screenings, is $101.00. Students are responsible for paying the non-refundable cost of the background search and drug screen. If a criminal record is found, the student may be asked to forfeit their seat in the Radiologic Technology program. A background check and negative drug screen are required for Radiologic Technology program admission and re-admission. Any student convicted of a felony or a misdemeanor during the program may be exited from the program. In order to be in compliance with the policies of our clinical site partners, the Lake Michigan College Radiologic Technology program will not allow a student into the program with a drug screen that is positive for marijuana, even if the student is in the legal possession of recreational and/or medical marijuana.

6. Attend, review, and complete the **mandatory** Radiologic Technology program orientation. Students will receive instructions on how to register for classes after Orientation. Registration will take place through WaveLink.

Admission process is nondiscriminatory in regards to age, color, height, weight, creed, disability, marital status, sexual orientation, national origin, political affiliation, race, religion, or gender identity or expression.

PROGRAM MISSION STATEMENT AND GOALS

The Radiologic Technology Program of Lake Michigan College will provide for both the personal and professional career development of each student in the field of radiography. The Radiologic Technology Program goals are:

1. The students will demonstrate entry level knowledge and expertise in the field of clinical radiography.
2. Students will grow and develop professionally.
3. Students will demonstrate critical thinking skills.
4. Students will demonstrate appropriate communication skills.
5. Graduates will be employable and meet the needs of the health care community.

The Radiologic Technology Program is committed to providing a sound academic and professional course of study that meets the requirements for qualified radiographers and the requirements of Lake Michigan College for an Associate in Applied Science degree as listed in the 2021-2022 Lake Michigan College Catalog, 2021-2022. The Radiologic Technology Program provides a sound base of clinical courses and practice along with complimentary supportive course work from the sciences and general education.

The Radiologic Technology Program follows the accreditation policies for Radiologic Technology Education as set forth by the JRCERT (Joint Review Committee on Education in Radiologic Technology). The JRCERT address is 20 North Wacker Drive, Suite 2850, Chicago, Illinois, 60606-3182. Standards for accreditation and annual program effectiveness information may be accessed at www.jrcert.org. The email address is mail@jrcert.org. Program Effectiveness Data can be found at: https://www.lakemichigancollege.edu/academics/imaging/radiologic-technology-associate-applied-science

ASSESSMENT PLAN STUDENT LEARNING OUTCOMES

The Radiologic Technology program gathers data on the outcomes listed below, which correspond to the program goals listed above. Assessment plan and analysis located in the Rad Tech portal on Canvas when new data exists.

1.1 Students will produce diagnostic examinations.
1.2 Students will demonstrate a working understanding of CR/DR digital systems.
1.3 Students will utilize radiation protection measures.
2.1 Students will formulate solutions for ethical problems.
2.2 Students will model professional behaviors.
3.1 Students will analyze images.
3.2 Students will perform non-routine exams.
4.1 Students will demonstrate verbal communication skills.
4.2 Students will demonstrate writing skills.
5.1 Graduates will employ ASRT practice standards in radiographer positions.
5.2 Graduates will indicate that they were prepared for employment through the program.
5.3 The program will demonstrate a consistent graduation rate.
5.4 Graduates will obtain employment
5.5 Students will pass the ARRT Radiography Certification Examination

HEALTH REQUIREMENTS

Health Certification/Physical Exam Form: A statement of physical/emotional fitness must be completed (by the physician of your choice) for the sole purpose of determining and documenting your physical status prior to beginning your Health Science program. The Health Certificate Form includes: A negative Tuberculin Skin Test or negative chest x-ray; proof of immunizations for Rubella (German Measles); Rubeola (Hard measles); Tetanus/Pertussis; the Hepatitis B Vaccine Series; Varicella Zoster (Chicken Pox) or a physician diagnosed history of varicella zoster; and a recent physical examination. It is preferable that the Hepatitis B series is completed prior to entering the Health Science program of choice; however, minimally, it *must* be started or a waiver signed before the student is allowed to attend the clinical site. This Health Certificate form must be completed and uploaded to the students' clinical compliance account. Office **prior** to beginning any clinical education courses. You will want to retain a copy of this document and your health records for your own records.

TB skin test and drug testing due dates will be sent to students upon acceptance into the program and will be discussed at Orientation.

CPR Certification: It is also required to obtain and maintain a Basic Life Support Provider (BLS) credential; via the American Heart Association. This training includes infant, child, adult, 1 man – 2 man CPR, choking and AED devices. CPR *must* be maintained and proven every 2 years.

Student Health Issues: It is the student's responsibility to inform the Dean of Health Sciences and the Program Chair of any illness, injury, surgery or medical condition that might compromise the safety of either the student or the patient(s) (i.e. lifting limitations, contagious disease, pregnancy, etc.). If a student has an infectious condition that may endanger clients in the clinical sites, they need to inform the Dean of Health Sciences and Program Chair of the situation and provide a written letter from their healthcare provider stating that it is safe for them to return to the clinical site. While in the program, any student with a medical condition of injury which causes a student to miss clinical for over two (2) days, will be required to obtain a written doctor's release to continue in class and clinical practice and/or return to class and clinical. The release will verify that they are able to meet class/lab/clinical practice requirements without restriction on activity (such as limitations on weight lifting). The goal is to prevent aggravating an existing condition, or jeopardizing the students, classmates, or patient's safety or well-being. **If a student must interrupt the clinical component for a period greater than two (2) weeks, the student will only be re-admitted into clinical with the Program Chair and Clinical Coordinator's permission.** If at any point there are concerns regarding a health problem or disability, Lake Michigan College reserves the right to require a medical release or physical examination. Students are responsible for contacting the Program Chair regarding concerns or risks related to their own healthcare needs. Students must meet the Technical Standards and Functions set for participants in the Lake Michigan College Health Science Programs with or without reasonable accommodation.

Health Waivers: Students may apply for a temporary or permanent health waiver should they voluntarily wish to disclose a medical condition or health concern (such as pregnancy, injury, illness, or conditions such as asthma, allergies, etc.) that will affect their ability to complete specific clinical compliance and program requirements. This includes required vaccinations.

The Health Waiver form may be located at the end of this handbook and should be completed and turned in to the Radiologic Technology Program Director with a doctor's note or other documentation. Upon review of the documentation and request, the form will be signed and placed in the student's file. An

exception will then be added to Complio by the Health Sciences Office for the particular requirement.

Students who are unable to obtain a vaccination due to a medical condition may be required to utilize additional personal protective equipment (PPE) in the lab and/or clinical setting. Some clinical sites may not permit students with a vaccine health waiver to be at their facility.

Religious or personal exemptions/waivers for vaccinations or other program requirements are not accepted. Students may contact the Health Sciences Office or Radiologic Technology Program Director with any questions.

Health Insurance: It is important that you maintain health insurance to defray the cost of hospital and medical care of any illness or injury that may be sustained while participating in a clinical experience. Substantial monetary liability can be incurred if you do not have a medical insurance and injury or illness occurs.

GENERAL PROGRAM POLICIES

Employment: Students are encouraged NOT to work during the Radiologic Technology program. Due to limited clinical site affiliations and scheduled workdays within the Radiologic Technology labs, students will be required to follow a rigid schedule during their clinical education portion of the program. Therefore, if a student chooses to continue to work while in the program, the clinical site schedule will not be altered or adjusted in any way to conform to the students' personal work schedule.

Health Care employers may hire you as a Student Radiologic Technologist one you have completed all positioning course requirements. Your employment status, practice, and procedures are not affiliated with the Lake Michigan College Radiologic Technology Program. Students with student radiologic technology jobs are not allowed to use their work hours as clinical time. You must also wear a separate dosimetry badge provided by your employer.

Radiologic Technology students are **NOT** allowed to accept financial compensation for any of their clinical site component.

Holidays: The Radiologic Technology student's schedule will not always follow the routine holiday schedule at Lake Michigan College due to the extensive clinical requirement. The Radiologic Technology program has its own calendar for students to follow while going through the program. Specific designated holidays that Radiologic Technology students receive are as follows; Memorial Day, Independence Day 4th of July, Labor Day, Thanksgiving Break, Winter Break, and Spring Break.

Lodging: Students driving an extended distance to commute are responsible for their own lodging arrangements.

Student Conduct and Civility: Radiologic Technology students are expected and required to conduct themselves in a professional and civil manner at ALL times of the Radiologic Technology program's standards or be subject to dismissal.

Confidentially: The Radiologic Technology students must acknowledge the importance of the protection of confidential information concerning patients and their families. Any and all information (official and unofficial) regarding a patient or their family is considered to be confidential and privilege information. Any Radiologic Technology student violating a patients' right to confidentiality will be dismissed permanently from the Radiologic Technology program upon proof of such violation. Students must sign

the Student Agreement Form at the end of this section of the handbook acknowledging this information.

Communicable Disease Policy: To protect healthcare personnel from transmission by considering all patients as potentially infected with HIV and/or other blood-borne pathogens, and to adhere rigorously to infection control precautions for minimizing the risk of exposure to blood, bodily fluids, and moist body substances of all patients.

1. All healthcare workers should routinely use appropriate barrier precautions to prevent skin and mucous-membrane exposure when contact with blood or other bodily fluids of any patient is anticipated. Gloves should be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, and for handling items or surfaces soiled with blood or body fluids. Gloves should also be worn during venipuncture or other vascular access procedures. Gloves should be changed after contact with each patient. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or their body fluids.
2. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately after gloves are removed.
3. All healthcare workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. Refer to the policy and procedure manual of each clinical site for the specific methods for disposing of the objects mentioned above.
4. Although saliva has not been implicated in HIV transmission, to minimize the need for mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.
5. Healthcare workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.
6. Pregnant healthcare workers are not known to be at greater risk of contracting HIV infection than healthcare workers who are not pregnant; however, if a healthcare worker develops HIV infections during pregnancy, the infant is at risk of infection resulting from pre-natal transmission. Because of this risk, pregnant healthcare workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.
7. Body substances such as feces, airway secretions, and wound drainage, and urine always may contain potentially infectious organisms. The universal precaution system not only protects healthcare workers from transmission of blood-borne pathogens, but also from other infectious agents found in moist body substances. Patients are protected from organisms present on the hands of personnel, and the staff's hands are protected from acquiring new organisms.

Academic Performance: A Radiologic Technology student must maintain a 2.0 GPA while they are in the program, and must maintain this overall GPA to receive the Associate of Applied Science degree. A student will be dismissed from the program if a required course in the program is unsatisfactorily completed.

Drug Free Workplace Policy: The welfare and success of Lake Michigan College depends on the physical and psychological health of all its students and employees. The abuse of drugs and alcohol poses a serious threat to the College, its students, and its employees. Commonly abused or improperly used drugs and substances include, among others: alcohol, pain killers, sedatives, stimulants and tranquilizers as well as

marijuana, cocaine, heroin, and other illegal drugs.

The unlawful manufacturing, distribution, possession and/or sale of marijuana, narcotics, or other controlled substance except as expressly permitted by law. This includes the possession of paraphernalia. The Michigan Medical Marijuana Act of 2008 (MMMA) notwithstanding, Lake Michigan College is subject to the Federal Drug-Free Workplace Act of 1988, both of which prohibit controlled substances on campus, including marijuana. The use or possession of medical marijuana is not permitted anywhere on Lake Michigan College's campuses. Students subject to random, unannounced drug screens. Refusal of random drug screen at the time of request puts student subject to dismissal from the program.

Cell Phones: While the Health Science Department faculty recognizes that communication with family and friends is important, the use of cell phones and/or electronic devices including any smart devices in class is very distracting to other students and to your instructor. Please keep ALL electronic devices on either vibrate or voice mail mode during class. If you are experiencing a family emergency and must keep a cell phone on, please obtain instructor permission prior to class. We appreciate your cooperation in providing an environment conducive to learning for all students. **Cell Phones are NOT allowed at clinicals (see clinical section of this handbook for more details)**. Some instructors will have specific cell phone policies during lecture/labs.

GRADING SCALE

The grading scale is as follows. For clinical and lab course grading requirements, please see the clinical education section of this handbook.

Grade	Percentage
A+	100%
A	94-99%
A-	90-93%
B+	87-89%
B	83-86%
B-	80-82%
C+	77-79%
C	73-76%
C-	70-72%
D+	67-69%
D	63-66%
D-	60-62%
E	0-59%

The minimum passing grade for any Radiologic Technology (RADT) course is a 77.0% (C+). **No grades are rounded up or down during the semester or at the end of the semester for final calculation of the grade average.** Students who are unsuccessful in a course in the Radiologic Technology program course sequence cannot move on to the next semester of Radiologic Technology courses and must apply for re-admission to the program, if eligible.

A failing grade (below a C+) in the academic or didactic portion of a course results in an unsuccessful attempt for the entire course, regardless of the clinical or lab performance. An unsuccessful attempt in any RADT course is noted in the student's Radiologic Technology program record.

RADIATION SAFETY / DOSIMETRY BADGES

All students enrolled in the Radiologic Technology Program will be issued dosimetry badges. Dosimetry badge exposure records will be in the possession of the Clinical Coordinator/Program Director. Each quarterly report is available for each student. Upon review of their exposure record each student must initial their exposure record on the report.

- Dosimetry badges are changed on a quarterly basis. The student is responsible changing out their own badges.
- Clinical dosimetry badges will be worn by student radiographers when in the clinical setting. Clinical dosimetry badges will be worn on the collar. If lead aprons are worn, the dosimetry badge MUST be positioned outside the lead apron with the front side of the badge (student name side) facing outward. Failure to wear a badge will result in the issuance of a Violation of Policy: Warning Notice and an unexcused absence (students will be dismissed from the day's activities).
- Specific lab dosimetry badges will be provided for each student. These badges will remain in the laboratory in a designated location. Students will be responsible for picking up the badge, wearing it, and returning it to the designated laboratory location. Students will not be allowed to participate in lab without a laboratory dosimetry badge. Failure to wear the assigned dosimetry badge will result in issuance of a Violation of Policy: Warning Notice.
- Once issued a badge, the student radiographer will be responsible for its care. A student will be required to pay for damaged or lost dosimetry badges.
- Dosimetry badges must be returned at the completion of training, and this includes badges which the student may have replaced.
- Any student who receives a quarterly badge reading of 2.5 mSV or more will be required to submit, in writing, a thorough and complete explanation for the high reading. With proper attention to the concepts of radiation protection discussed in class, it is unnecessary for a student to exceed 2.5 mSv for this measurement period. In the event that the student receives total badge readings in excess of 2.5 mSv, he/she will be required to complete a remedial program on radiation safety. Any student who exceeds the maximum permissible dose of 2.5 mSv quarterly, will be restricted from the following clinical activities: participation in special procedures, fluoroscopy, surgery and mobile radiography for a period of one month. In addition, the student will be required to complete a remedial program on radiation safety. Exceeding the maximum dose limits twice during training will result in dismissal from the program.

Students will not hold image receptors during any radiographic procedure and **will not hold patients** during any radiographic procedure when an immobilization method is the appropriate standard of care. Students found holding image receptors or holding patients will receive a Violation of Policy (VOP).

During fluoroscopy, mobile radiography and other examinations where student radiographers may become exposed to secondary or scatter radiation, the student is required to wear a lead apron (.5 mm Pb eq.).

During the clinical aspects lecture (semester before clinicals begin), students will be screened and prepared for MR (Magnetic Resonance), Computed Tomography, and other modalities that they may be observing, helping with patients, or within those departments.

Students under the age of 18 are not permitted to operate radiographic or fluoroscopic equipment, nor

participate in fluoroscopic or portable examinations, in accordance with State of Michigan guidelines. State standards for radiation protection are available in the Program Director's office.

PROGRAM X-RAY RADIATION SAFETY POLICIES AND LAB RULES

1. Students using Lake Michigan College's energized laboratory must be under the supervision of a qualified radiographer in the lab.
2. The x-ray rooms and/or portable x-ray unit will not be turned on without an instructor present in the Medical Imaging Center.
3. X-ray room generator switches will be in the off position when the x-ray rooms are not in use.
4. The portable x-ray unit's power switch will be in off position when not in use.
5. Students and faculty must wear the laboratory dosimetry badge at all times while working in the lab. Laboratory badges must be worn at the collar level with the front of the badge (student name side) facing outward. When wearing a lead apron in the lab the student and/or faculty must assure that the dosimetry badge is outside of the lead apron.
6. Students and faculty may not utilize the laboratory if they have lost or misplaced their laboratory badge Students cannot resume usage within the laboratory until the laboratory badge has been replaced.
7. Under no circumstances will students or faculty make exposures on each other while in the x-ray rooms or while using the portable x-ray unit.
8. Exposures will be taken on phantoms only.
9. Everyone must be outside of the x-ray rooms or the portable x-ray unit room during the exposure.
10. Doors must be closed prior to any exposure in the x-ray rooms or in using the portable x-ray unit.
11. If you suspect that you have been inappropriately exposed to ionizing radiation, submit a written report of the incident to the Radiography Program Director.
12. Report any equipment malfunctions or unsafe conditions to an instructor.
13. The outside doors of the Medical Imaging Career Center laboratory that lead to the main hallway must be locked when a faculty member is not present.
14. Do not move phantoms alone or without the instructor's knowledge
15. X-ray rooms and the portable x-ray unit room must be cleaned and organized by students at the end of each lab session and before the next lab group session, or at the end of the lab day for the last lab group. The laboratory is part of the "learning environment" and repeated offenses in misuse or care of the facility will warrant a warning notice for each student in the lab group that violates this policy.
16. The Fuji readers, CR cassettes and Fuji digital cassettes must be properly turned off and placed in the resting locations while not being used. Failure to utilize the Fuji laboratory equipment in

general, and clinical equipment with care and respect may result in disciplinary action, up to and including, dismissal from the program.

17. Careless or repeated actions that jeopardize safety of individuals or that harm equipment (including but not limited to x-ray equipment and phantoms) may result in disciplinary action up to and including dismissal from the program. The radiation safety officer (Radiography Program Director) has authority to determine who is authorized to operate the radiation machines.
18. Each student will be assigned a login number for the DR and CR workstations and the portable unit. The password assigned to each number is "DEFAULT". Each student will then change this default password. It is the responsibility of each student to remember his/her login number and password.
    a. First, sign in to your login using your login number and "**DEFAULT**" password.
    b. Click the green box in the upper right corner of the screen.
    c. Choose "change password"
    d. Type in "**DEFAULT**" for current password, then enter your new password twice to confirm
    e. Then write your login information on a piece of paper. It is important to remember this password and keep it secure.

**The instructors/adjuncts will be able to view your password at any time, so let's keep it appropriate.*

STUDENT CONDUCT/VOP: WARNING NOTICE PROCEDURE

Radiologic Technology students are expected and required to conduct themselves in a professional manner at all times.

A student will receive a verbal warning notice as the first step of the probation process of unsatisfactory performance. A written warning notice (Student Conduct/Violation of Policy: Warning Notice is the second step of the probation process. These notices will be issued soon after the problem is identified. Progressive violations will warrant immediate removal from the program. Failure to improve behavior following a written warning will result in removal from the program.

The criteria for receiving a warning notice include (note – those marked may not be an all-inclusive list):

1. Unsatisfactory achievement of clinical objectives.
2. *Unsafe clinical practice. It is understood that unsafe practice may include either a combination of several repetitive examples of the following:
3. Errors in recording of pertinent clinical data
4. Failure to safely adopt basic patient care skills in actual patient care situations resulting in actual or potential patient harm. This is relative to the degree of completion of the Radiography Program.
5. Failure to demonstrate sound judgment relative to the student's degree of radiography curriculum completion.
6. Unsafe or inappropriate diagnostic service to the patient
7. Failure to follow universal precautions or blood-borne pathogens processes
8. *Failure to establish effective working relationships with clinical site team members in providing patient services.
9. *Failure to establish effective relationships with patients.
10. *Violation of either the JRCERT (www.jrcert.org) or ARRT (www.arrt.org) codes of ethics.
11. *Evidence that a student is under the influence of alcohol or an illegal drug while at a clinical site. The student will be removed from the clinical site immediately. If there is reason to believe that a student is under the influence of drugs and/or alcohol, they will be required to undergo drug and/or alcohol testing immediately. If the student refuses to submit to a test or the student's test returns a positive result, the student will be immediately removed from the program.
12. *Failure to assume the responsibilities of a student in the Radiologic Technology program:
13. Excessive tardiness
14. Inappropriate personal appearance or inappropriate clinical behavior
15. Unethical behavior, i.e., lying, cheating, stealing, etc.
16. Repeated failure to submit required written work in the clinical area or repeated lateness in submitting work
17. Failure to meet the Clinical Guidelines and Competency Levels of the LMC Radiologic Technology program.
18. *Failure to submit clinical documents such as evaluation forms, time sheets, log sheets.
19. *Failure to comply with the Lake Michigan College's Student Code of Conduct or Student Handbook.
20. *Failure to comply with HIPAA laws.

21. *Failure to comply with program policies.

**Serious violations will warrant immediate removal from the program without a verbal or written warning (Violation of Policy) issued (note – those marked may not be an all-inclusive list).*

STUDENT'S REPLY TO THE STUDENT CONDUCT/VOP: WARNING NOTICE

The student is required to reply to the warning notice within **one week**, using the Student Violation of Policy Reply. The student's reply must show evidence of problem solving regarding the identified unsatisfactory behaviors. The reply must include the following:

a. Student's perception of the problem
b. Awareness of the seriousness of the warning notice
c. Methods that will be utilized to correct the problem

RESOLUTION OF THE STUDENT CONDUCT/VOP: WARNING NOTICE

At the end of the established probationary period, the student and the instructor will again have a conference to discuss the effectiveness of the corrective action taken. If the student has progressed to another clinical area during this time, the student will be evaluated by both the instructor who issued the Student Conduct/Violation of Policy: Warning Notice and the current instructor.

1. If the student shows satisfactory improvement, the warning notice will be resolved. A written evaluation of the student's progress will be submitted, signed and dated by both the instructor(s), and the student. This will remain on file until the student graduates. Copies go to the Dean of Health Sciences, Program Director, Clinical Instructor and the student.
2. If the behavior that originally elicited the warning notice reoccurs, the student will automatically fail the clinical portion of that course, thus fail the course and be dismissed from the Radiologic Technology program.
3. If the student does not show satisfactory improvement after receiving a warning notice, the recommendations of the issuing instructor will be followed.

CHANGES IN CLINICAL SCHEDULE DUE TO A STUDENT CONDUCT/VOP: WARNING NOTICE IF WARRANTED

When issued a Violation of Policy: Warning Notice, students:

1. Will not progress to any clinical area where the notified problems cannot be evaluated until the warning notice has been resolved, unless otherwise specified by the instructor.
2. Will have their schedule arranged, if possible, by the instructor in consultation with the Dean of Health Sciences and the Program Director to prevent loss of academic time.
3. Will be held back in their program by the Program Director if the schedule rearrangement is not possible.

STUDENT ACADEMIC COMPLAINT POLICY AND GRIEVANCE PROCESS

A grievance is defined as having a claim that there has been a violation, misinterpretation or inequitable application of any existing policy, procedure or regulation. If you feel you have a complaint/grievance, please follow the College complaint policy and procedure. Students who wish to file a complaint or grievance should refer to the Student Complaint policy located on the College's website at https://www.lakemichigancollege.edu/policies/complaint-resolution-process. A complaint may be made with the JRCERT. Grievance information and procedure for the JRCERT can be located on the website, Canvas Rad Tech student portal, and this handbook.

PERSONAL PROBLEM SOLVING

If any Radiologic Technology student is having difficulties maintaining the program course work, personal conflicts, or complaints regarding the program, the following individuals may be contacted to assist the student:

Program Director ..... Ildiko Widman (269) 487-6062

Dean, Health Sciences ..... Marla Clark (269) 927-8762

The name of the Program Medical Director and a list of the current Radiologic Technology Advisory Committee are available upon request from the Program Director.

Financial problems should be discussed with the Lake Michigan College Financial Aid Department.

Specific lecture or lab issues will be first brought to the attention of the instructor teaching the class.

RE-CONSIDERATION TO THE RADIOLOGIC TECHNOLOGY PROGRAM

Any student who is eligible to return is allowed **one** request for re-admission to the Radiologic Technology program. Students must refer to their exit interview paperwork for specific requirements for their eligibility for return. Returners must hold a minimum 2.0 overall GPA. A student who wants to be considered for re-admission to the program will need to have their written request received by the Health Science Office **by May 12th** for re-consideration for the next September start of the program.

The student seeking to return to a Radiologic Technology program will send a letter requesting re-consideration to the Program Director and Dean of Health Sciences. The request for re-consideration letter will include:

1. The student's perception of the problem leading to dismissal and explanation of contributing circumstances;
2. Demonstration of an understanding and awareness of the problem;
3. What the student has done to rectify the problem;
4. The student's detailed plan for success in the radiography course to be repeated and future radiography courses if re-admitted.

The request will be forwarded to the Health Science Department Re-Consideration Committee. The Committee will be composed of two Health Science faculty other than the faculty directly involved in the dismissal, one faculty member from another discipline, the Student Ombudsman, and the Dean of Health Sciences. The Health Science Department Re-Consideration Committee will meet as needed.

The student and faculty member involved in the dismissal will be informed by the Dean of Health Science of the time, date and place of the meeting. At the meeting, the student will present a detailed academic success plan. The faculty member involved in the dismissal will present an overview of the behaviors that led to the dismissal and his/her support for or against re-consideration. In absence of the involved faculty, the lead faculty of the course will present. The student has the choice of being present or not during the involved faculty's presentation. The student and involved faculty will then be excused from the meeting.

The Health Science Department Re-Consideration Committee, after reviewing the student's history, the documents described above, and faculty recommendation will determine if the student will be re-admitted to the Radiologic Technology program. The Health Science Department Re-Consideration will look for compelling evidence that the reasons for the dismissal can be corrected with certain changes, and that these particular changes improve the chances for a successful outcome. If the student is permitted to return to the program, the Health Science Re-Consideration Committee along with the Program Director will determine if additional courses must be repeated, and will detail what other requirements (i.e. skills validation) are associated with the opportunity to repeat the failed course.

The Dean of Health Sciences will notify the student in writing of the final determination and any re-consideration conditions. Any re-consideration is based on space availability.

If the student is denied re-consideration and wishes to appeal the Health Science Department Re-Consideration Committee decision, the student will submit a letter requesting a review to the College Re-Consideration Committee. The decision of the College Re-Consideration Committee is final.

The student will not be allowed to continue in the program until this process is complete and a determination on readmission is made.

Lake Michigan College RADIOLOGIC TECHNOLOGY

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PREREQUISITES	Credit Hours	Contact Hours
BIOL 110 or 101 (or comparable prerequisite for BIOL 205)	4	5

PROGRAM PREREQUISITES	Credit Hours	Contact Hours
BIOL 205 Human Anatomy	4	5
PHSC 101 Physical Science: Chemistry and Physics	4	5
PSYC 201 Introduction to Psychology	3	3
MATH 122 Intermediate Algebra	4	4
ENGL 101 English Composition 1	3	3
ENGL 102 English Composition 2	3	3
HEAL 103 Medical Terminology	2	2
Humanities/Fine Arts	3	3
Total Prerequisite Hours	**30**	**33**

REQUIRED SUMMER PROGRAM ORIENTATION – The acceptance letter from the Health Sciences Office will provide the one day required orientation date. The letter will contain details about criminal background checks, drug screening and health requirements.

FALL Courses	Credit Hours	Contact Hours
RADT 130 Introduction to Radiography	3	3
RADT 131 Radiographic Positioning I	8	10
RADT 134 Radiographic Physics	4	4

SPRING Courses	Credit Hours	Contact Hours
RADT 138 Clinical Experience I*	2	2
RADT 139 Common Equipment and Procedures	3	3
RADT 140 Radiographic Positioning II	8	10

SUMMER Courses	Credit Hours	Contact Hours
RADT 143 Clinical Experience II (14-weeks)*	6	6
RADT 144 Radiographic Positioning III (First 7-weeks)	4	5

FALL II Courses	Credit Hours	Contact Hours
RADT 241 Sectional Anatomy and Modalities	3	3
RADT 229 Clinical Experience III*	4	4
RADT 145 Radiographic Protect/Biology	2	2

SPRING II Courses	Credit Hours	Contact Hours
RADT 232 Clinical Experience IV*	3	3
RADT 244 Senior Review	1	1
RADT 228 Computer Applications in Medical Imaging**	3	3
Total Core (Major) Hours	**54**	**59**
Total Degree Hours (Prerequisites and Core)	**84**	**92**

*Please note that some late afternoon/early evening and some weekend shifts may be assigned for clinical experience.
**RADT 228 and RADT 241 is taught online or hybrid.

Radiologic Technology Program
CLINICAL EDUCATION

RADIOLOGIC TECHNOLOGY PROGRAM CLINICAL PRACTICE

OVERVIEW

Competency-based Clinical Education is the name of a program which has been developed and approved by the American Society of Radiologic Technologists. The purpose of this program is to provide the student radiographer with a method of clinical evaluation within a college-based Radiologic Technology program. Competency-based Clinical Education ensures that each student is fairly evaluated on his/her radiographic skills.

The faculty at Lake Michigan College is proud to offer this progressive learning program to student radiographers. The following pages will explain the Competency-based Clinical Education Program, and the student's role in the process.

TERMINOLOGY

There are many terms unique to the Competency-based Education Program. In order that you may understand the remainder of this handbook, consider the following definitions.

- **COMPETENCY**: The student's ability to perform within a realm of limited supervision and assume those duties and responsibilities set forth in course and clinical objectives. The minimum level of competency is 85%.

- **CATEGORY**: A group of radiographic examinations that exemplify an area of the human body. For example: lower extremity. The student is assigned a new category each semester.

- **ARRT SKILL EVALUATION**: The procedure in which a student's performance in one of the following patient care skills is evaluated. Patient skill evaluations to complete are: vital signs, patient transport, oxygen administration, venipuncture and injection, sterile and aseptic technique (three forms). (Pages 40-50).

- **SIMULATION**: The student performs a radiographic examination on a live subject (not a patient) and simulates the exposure. Or, an x-ray phantom may be used as a “patient” and the procedure may be simulated with an exposure. In both cases a radiograph of the area of interest shall be critiqued by the student.

- **DIRECT SUPERVISION:** A Radiologic Technologist is present in the radiographic room while a student is performing an x-ray examination. If a student has not tested out on a specific exam, he/she must be under direct supervision while performing such exams. All portable exams and repeat exposures require direct supervision.

- **INDIRECT SUPERVISION**: A Radiologic Technologist is available for consultation with the student, but is not necessarily present in the radiographic room during an x-ray examination. Although the Technologist may not be present in the room, in an appropriate indirect supervision situation, he/she must be in a room immediately adjacent to the exam room or in a location where the student is performing the exam.

GENERAL CLINICAL INFORMATION

All Radiologic Technology courses must be completed with a 2.0 or higher to be considered passing for the Radiologic Technology curriculum completion.

All Radiologic Technology clinical courses are subject to special scheduling dates which may or may not follow the college semester dates and/or the college calendar.

Clinical Experience: The student is expected to help the staff as much as possible by either helping with a patient exam or performing the exam. The students are placed in a clinical site as a learning modality and we wish to utilize this clinical experience to the fullest extent possible. **Students must understand and adhere to the policies the clinical site requires prior to working in that particular clinical site.**

Clinical Assignment: The clinical site is a third party entity into which students are placed for practical experience. Students will attend a variety of clinical sites throughout the program. Students do not get to pick their clinical assignments. Students should not rely upon the availability of a clinical site in a particular geographical location. The Lake Michigan College Clinical Coordinator will establish the specific student clinical assignments and rotation for each clinical site. Students may be expected to commute to an additional clinical site (other than the initial clinical site assigned) to obtain the complete education of the Radiologic Technology program. The Lake Michigan College Program Director and Clinical Coordinator along with the clinical site must approve all student rotations.

While Lake Michigan College uses its best efforts to negotiate clinical sites, even after they become available they can become unavailable for reasons beyond the control of Lake Michigan College and in that event Lake Michigan College has no liability.

A basic clinical site schedule will be utilized as a guide by the Clinical Coordinator. The clinical shift schedule will be determined by the assigned Clinical Instructor of the clinical site. The Radiologic Technology students may be required to follow the workday schedule of their assigned clinical site. Lunches and work breaks will be at the discretion of the supervising Radiographer. The clinical schedule is determined by the clinical site not the student. The program follows JRCERT guidelines for clinical rotation hours. Clinicals will not exceed 40 hours per week, and no more than 10 hours per week.

Program Director: Responsible for academic leadership, teaching, and administrative management of the Radiologic Technology program. The Program Director is responsible for the equipment, facilities and activities of the program, along with monitoring and evaluating all clinical affiliates.

Clinical Coordinator: Provides direct clinical and technical supervision of students enrolled in the Radiologic Technology program and acts as a liaison between the clinical affiliates and the College. They are responsible for clinical assignments, orientation of clinical preceptors in regards to student supervision, mediating student/clinical site concerns and evaluating student performance during periodic clinical visits.

Clinical Preceptor: A Radiographer employed at the clinical site that is responsible for the student(s) clinical education while they are at their specific clinical facility. The instructor evaluates the performance of the students in the clinical setting.

Staff Radiographer: Radiographers who are employees at the assigned clinical site instruct and assist

students during their clinical experience. These individuals support the clinical education and evaluate students while at the clinical site.

Radiologic Technology students are required to follow all rules and regulations of each clinical site they are assigned. **Students violating such rules or regulations will be subject to the warning notice process and/or dismissal from the Radiologic Technology Program.**

It is the student's responsibility to establish a working relationship with their clinical site. Failure to do so will result in the student being dismissed from the clinical setting and therefore the program.

CLINICAL POLICIES AND PROCEDURES
THE EVALUATION PROCEDURE

The student begins their clinical participation by first assisting a practicing Radiologic Technologist in performing radiographic examinations. This participation moves from a passive mode of observation to a more active role of assisting. As the student gains experience in various radiographic procedures, they gradually move into an independent role, with limited supervision. Before any independence is allowed, the student must first prove competency in the specific procedure. Until competency is demonstrated, the student will remain under direct supervision.

Each of the four (4) clinical semesters of training, the student must challenge a specific number of exams from the list of procedures on page 32. The number of evaluations that students must accomplish each semester is defined on page 36. The only persons allowed to grade the student on exams performed on patients are the Clinical Instructors from each clinical site, LMC Clinical Adjunct Instructors, Clinical Coordinator, or the Program Director. The simulated tests will be performed by the Program Director, Clinical Coordinator, LMC Clinical Adjunct Instructors or the Lab Instructor. All of the Technologists/Instructors will be using the designated online clinical competency evaluation. **It is the student's responsibility to make sure they are graded on exams performed, and the grading technologist enters it into Tracks (Trajecsys) system. Clinical Coordinator will review grades and determine if the percentage is correct**. If a form is incorrectly marked or if the math is incorrect, the Program Director/Clinical Coordinator reserves the right to correct it.

Exams conducted and graded by the Lab Instructor will be submitted to the Program Director/Clinical Coordinator by the Lab Instructor. This will be after the student has had an opportunity to view their lab competencies. The lab grades will be reviewed and percentages calculated by the Lab Instructor.

For both clinical and laboratory competencies, a grade below 85% will be considered failing and must be repeated at a later date after remediation has occurred. Remediation will consist of a simulation of the exam with either the Clinical Coordinator or Program Director. The student must complete the remediation process according to the timeline designated by the Program Director. A student will have one (1) attempt to pass the remediation evaluation.

The highest grade possible for a retest score on a clinical competency exam will not exceed 86%.

Failure to pass on the second attempt on a previously failed exam at clinicals, or in the laboratory, will result in a failing grade for the course and dismissal from the Program. A total of three (3) separate laboratory exam failures during the first fall semester will result in a failing grade for the course and

dismissal from the program. A total of three (3) separate failures, either clinical or laboratory, during the Program will result in dismissal from the Program. Clinical Failures and Laboratory Failures are considered separate.

If a student demonstrated incompetence on an exam competency they had previously passed, the attending clinical instructor/technologists may revoke the passed competency. In this case, the student isn't penalized, but they must retest with direct supervision until the exam competency is again passed.

It is suggested that students either perform or simulate each examination several times before an evaluation occurs. When students feel confident to take an evaluation, the Clinical Instructor should be notified when an examination of that type becomes available.

SPOT CHECKS

Spot checks will be given at the clinical sites by the LMC Clinical Adjunct Instructors or the Program Director. The lab competency form will be used to grade your proficiency. If a student fails a spot check, the student will immediately be remediated upon that specific exam. Failure of 2 spot checks a semester will result in a failing clinical grade. Failure of three (3) total spot checks throughout the Program will render the student as subject to dismissal from the Program.

SIMULATION OF EXAMINATIONS FOR CLINICAL READINESS

Prior to being allowed to conduct radiographic procedures on actual patients, the student must successfully simulate the category of examinations in the laboratory. During the simulation, the student will role play taking radiographs. Under most circumstances, the patient flow during clinical practicum will be sufficient to allow each student the opportunity for evaluation without resorting to simulation for ARRT competency check off requirements. However, circumstances may necessitate the implementation of simulation. For LMC Program requirements, the following exams may not be simulated: barium enemas, UGI's, esophagrams, and C-arm procedures. These exams must be performed on patients. Should the Radiologist not perform overhead images on these exams, this portion of the exam may be simulated.

REPEAT POLICY

All repeat procedures must be completed with direct supervision from a registered radiologic technologist.

UNSCHEDULED EXAMINATIONS

Each semester the students in the laboratory and clinical practicum will have to perform a specific number of examinations. The time of the evaluations will be determined and administered by the Program Director/Clinical Coordinator at the clinical sites and the Laboratory Instructor in the Lake Michigan College lab. The evaluations in the clinical sites will be either simulations or on actual patients. The Program Director/Clinical Coordinator/LMC clinical faculty will perform no more than 5 total simulations for the program, this includes lab simulations.

SCOPE OF RESPONSIBILITY

The evaluation process is the dual responsibility of both the student and the Clinical Instructors/Coordinator. All parties must remain aware of the number of evaluations required each semester and work together toward completing the requirements as defined. The student, as well as the

Program Director, will each keep track of completed clinical competencies. Students must complete the Orientation Check Off Form within one week of starting a new clinical rotation. Students are required to complete a Clinical Rotation Evaluation and Clinical Preceptor Evaluation at the end of each rotation.

STUDENT PERFORMANCE EVALUATION

Each rotation the student will be evaluated by the Clinical Instructors from each affiliate for overall student performances. These evaluations allow the student an opportunity to discover how Technologists perceive the student's work skills and attitudes. These evaluations are intended as a performance indicator, but will not be used for determining a clinical grade.

ANECDOTAL NOTES

The Clinical Coordinator will be maintaining anecdotal notes concerning the student's performance during clinical practicum, if needed. These notes are intended to keep accurate documentation of incidences or excerpts of a student's clinical experience. These notes are intended as a performance indicator, but will not be used in determining a clinical grade.

DRESS CODE

The professional status of any health care worker depends in a large part upon the manner in which that person is perceived. Clothing is an important part of our professional image. For this reason, a student radiographer is expected to be neat and clean in appearance and appropriately dressed for all clinical assignments. Regardless of the dress code at the clinical affiliate at which the student is training the following dress policies will apply.

The Clinical Instructor shall determine the appropriateness of the student's appearance and dress. Exceptions to the dress code include prescribed attire while in O.R. and other specific activities. Such exceptions must be approved by the Clinical Instructor.

Inappropriate attire will result in a verbal warning the first time and a VIOLATION OF POLICY: WARNING NOTICE (VOP) for each subsequent incident. The student may be sent home to change, if the Clinical Instructor determines it to be necessary.

During clinical practicum, the student must wear the college patch, permanently sewn to the left sleeve of the uniform. The student must also wear their issued LMC student ID badge.

If the student works as an employee of a health facility, he/she may not wear the College patch or student ID badge while functioning as an employee.

The College-issued dosimetry badge must be worn at all times during clinical practicum. **AT NO TIME WILL THE STUDENT BE ALLOWED TO PARTICIPATE IN LAB OR CLINICAL PRACTICUM WITHOUT HIS/HER DOSIMETRY BADGE.** A VOP will be issued and the student will be excused from clinical practicum for the day and STO will be deducted. The College dosimetry badge is not to be worn by a student functioning as an employee outside of clinical hours.

UNIFORM POLICY

UNIFORM APPAREL (pants, tops, and jacket) IS **NAVY** unless a site requires specific color. Uniforms must be the school approved uniform from the designated uniform retailer, fit well and be clean and pressed. The personnel at the LMC Bookstore can assist you with your uniform purchase.

Students must wear the required scrub uniform to clinical practicum AT ALL TIMES.

UNIFORM REQUIREMENTS

- **Pants**: drawstring or elastic waist, no ankle cuffs – may have slit pickets or cargo pockets.
- **Top**: short sleeve, V-neck scrub top with one or two pockets.
- **Jacket**: V-neck cardigan style or pocket jacket with snaps and knit cuffs.
- **Shoes**: White leather or fake leather lace-up uniform or tennis shoes. NO MESH. Shoes and laces must be clean and white.
- **ID Badge**: LMC Radiologic Technology Student ID Badge – issued at start of program.
- *Optional*: White or navy long-sleeve t-shirts are permitted to be worn under scrub tops.

GENERAL GROOMING GUIDELINES

- Hair should be neatly styled and pulled back if below shoulder length so as to avoid patient contact. Beards must be neatly trimmed. IT IS UNACCEPTABLE TO FAIL TO SHAVE AND DECLARE THAT YOU ARE GROWING A BEARD FOR THE DAY.
- Fingernails must be kept short, neat and clean. Long fingernails present a hazard to the patient during positioning. Artificial nails are not permitted.
- Perfumes and colognes are not permitted. Cosmetics and deodorant are permissible, if used moderately.
- Plain jewelry is acceptable. Costume jewelry or dangling earrings, necklaces or bracelets are not permitted. The wearing of excessive jewelry is a hazard to the patient and jewelry may become caught in the equipment or damaged.
- Earrings in other visible body parts besides the ear are **NOT** acceptable. No more than two (2) earrings per ear will be acceptable.
- Bodily cleanliness, a clean uniform and personal oral hygiene are necessary to prevent personal odor. Hygiene odors are offensive to patients and co-workers. If a student's personal hygiene is not appropriate they may be subject to dismissal from clinicals for the day. The missed time will be subtracted from the students' STO bank.
- Tattoos must not be visible. A plain white t-shirt (long or short sleeved) may be worn under the uniform to conceal tattoos.
- UNIFORM APPAREL (PANTS AND TOPS) IS NAVY COLOR. Jackets (lab coats) may be navy or white. Uniforms must be the school approved uniform from the designated uniform retailer, fit well and be clean and pressed. The personnel at the LMC Bookstore (our preferred uniform retailer) can assist you with your uniform requirements.

CELL PHONES AT CLINICAL SITES

At the clinical site, personal telephone calls are **not permitted**, except for emergencies or during the designated break times or the designated lunchtime. Students must be mindful that that use of electronic communication devices between patient exams may reflect to the clinical staff that the student is disinterested in various clinical activities that may or may not involve performing procedures. Misuse of

electronic communication devices and telephone communications, whether at clinical site or in the college classroom, may constitute an issuance of a Violation of Policy: Warning Notice or Program Dismissal. Clinical site department phones are not to be used by the student for personal phone calls.

SMOKING

Smoking/vaping is only allowed in the hospital or clinical facilities' designated smoking areas. Many clinical facilities do not allow smoking/vaping anywhere on the premises.

PARKING

Clinical parking instructions will be provided by the Program Director and/or clinical site as it pertains to student parking. Students must follow these parking instructions.

GUM CHEWING/EATING

Gum chewing and eating is not permitted in the Radiology Department areas designated for patient and physician services.

CLINICAL ATTENDANCE

ATTENDANCE TRACKING

Good attendance and punctuality are important traits of a professional radiographer. When the student leaves training and enters the work world, he/she will find these traits vital to successful employment. Any absences or tardiness, no matter how legitimate, disrupts the learning process of the student and disrupts the operational function of the Medical Imaging Department. Students must complete a request for clinical absence for an approved scheduled absence. (See Exhibit F).

The faculty attempts to instill the importance of punctuality and good attendance by establishing the following guidelines.

1. Students will use the online tracking system Trajecsys (also referred to as Tracks) at each clinical site to maintain a record of their clinical attendance. A record of all absences and tardiness will be maintained in the student's permanent file.

2. Student radiographers are required to record their time accurately. Students must time in and out through Trajecsys and approved by the clinical preceptor technologist of that facility. This policy also applies when students are participating in respective modality observation days.

3. As a student serving clinical time, the student is not a hospital employee. Therefore, students must take a lunch break and two 15 minute breaks.

4. Student radiographers are not to record in/out for others.

5. All hours logged must accurately reflect total amount of hours covered at clinicals by the schedule.

6. Upon the 1st semester of the Program all new enrollees will receive 48 hours of STO - Student Time Off. STO is allotted to each student for the entire program. It is designed for emergent needs. It is not designated, for instance, for non-emergent appointments and vacation time.

7. Hours worked as an employee may not be substituted as clinical hours.

8. Missed clinical time will be deducted from the student's STO bank.

9. If a clinical site sends the student home due to the student becoming ill during the day of the rotation, then this time will not be deducted from the student's STO. Refer to the Program Clinical Coordinator about this policy and specific qualifying situations.

10. The Clinical Coordinator will keep track of student STO. Students are also required to keep track of their own STO, and it is the student's responsibility to know how much STO he/she has remaining.

11. All clinical competencies and program/college/JRCERT requirements must be complete for a student to be eligible to sit for the ARRT's certification examination.

12. Each student must complete a minimum number of program clinical hours to graduate. These clinical hours are to be completed in accordance with published assignments over the entire program.

13. A student may be subject to dismissal from the Program if the student's missed clinical time exceeds the 48 hour STO allotment for clinical time. If a student exceeds the STO allotment, then the student has not successfully completed the Program clinical requirement. An incomplete of this or other program requirements will render the student as ineligible to sit for ARRT exam certification.

14. More than 16 hours of STO taken as consecutive clinical days (i.e., Monday/Tuesday or Friday/Monday) may constitute dismissal from the program. Decisions regarding student dismissal will be made by the Program Director with input from the Program Director and other faculty of the Program.

15. Students are required to be at the Radiologic Technology clinical site until the completion of their shift unless permission is obtained from the supervising clinical instructor and the supervising radiographer. Students will only receive clinical hours for time actually spent within the clinical setting. Student are required to submit clinical attendance reporting forms.

16. The student is to notify the attending radiographer whenever the student leaves the Radiologic Technology lab/department. Failure to do so may be interpreted as abandonment of the clinical assignment.

ABSENCES DUE TO ILLNESS OR PERSONAL LEAVE

1. Radiologic Technology students receive 48 hours of STO. STO is to be used for illness or emergent needs. STO should not be considered synonymous with vacation leave or leave for non-emergent events or appointments. There is no "make-up" time.

2. If a student must be absent due to illness or an emergent need the student must notify the Clinical Preceptor "In Charge" personnel at the clinical site and the Clinical Coordinator prior to the beginning of the student's shift. The Clinical Coordinator's cell phone number is 269-930-4528; the Clinical Coordinator's email is dbarrett@lakemichigancollege.edu.

3. If the student fails to notify the clinical site and the Clinical Coordinator prior to the beginning of the shift, the student will receive a deduction of a whole clinical semester letter grade. It should be noted

that a no call/no show violation constitutes a Violation of Policy: Warning Notice. No call/no show is defined as the student not providing notification of absence prior to or during the assigned day's shift.

PRE-ARRANGED ABSENCES

1. A fraction of a day shall only be accepted as a legitimate personal leave for obvious illness or an appointment that has been *pre-arranged and approved by the Clinical Coordinator 1 week before such a time. Please use Request to Schedule Clinical Absence Form, Exhibit F.*

2. Repeated missed fraction of a day time may be questioned and denied by the Clinical Coordinator a Violation of Policy: Warning Notice may be issued.

TARDIES

1. A tardy is defined as not being where the student is assigned and ready to begin clinical practicum at the designated time.
2. An accumulation of two (2) tardies in a single semester will result in a lowering of the clinical grade by one letter grade. For every set of two (2) tardies the clinical letter grade will be lowered one letter grade.
3. An accumulation of four (4) tardies, total, in the Program will constitute issuance of a Violation of Policy: Warning Notice.

BEREAVEMENT LEAVE

Upon notice to the Program Director, the student will be granted up to three (3) consecutive days off regularly scheduled course requirements in the event of a death within the immediate family.

Immediate family is defined as:

Spouse
Grandparent
Sister
Child
Spouse's Father
Brother
Father
Spouse's Mother
Grandchild
Mother
Brother/Sister-in-law Legal Guardian

It is not the intention of this policy to provide adequate time to adjust to the loss of a loved one, but rather to allow some reprieve from the pressures of study during the grieving process.

Students must follow appropriate communication procedures with the Program Director and the student's assigned clinical site about their intent to take bereavement leave. Bereavement leave taken without appropriate communication and/or approval will constitute, at minimum, a First Warning or possible dismissal from the program.

Documentation from the student is required for the student to be eligible for excused bereavement leave. The student is responsible for completion of the clinical and classroom objectives for the time missed during bereavement leave.

INJURIES AT CLINICAL SITES

Any student who incurs an injury during their program studies at a clinical site must notify the Clinical Coordinator and Program Director and Dean of Health Sciences as soon as possible. The student will be instructed to follow the clinical site's process when such an injury occurs within their facility. The student bears the responsibility of their own heath insurance or payments for treatment in case of injury at clinicals.

PERSONAL ILLNESS OR INJURY

Any student who is unable to perform routine duties of a radiographic technologist because of personal illness or injury must notify the Clinical Coordinator and Program Director as soon as possible. The student must notify the Program Director and Clinical Coordinator in writing as soon as possible of the anticipated length of the illness or disability.

TRADING SHIFTS

Students are required to attend clinical practicum as assigned. Trading of shifts between students is not permitted.

SHOWING UP ON THE WRONG DAY/SHIFT/AFFILIATE

Students who arrive at the clinical affiliate on the wrong day/shift/place will not be allowed to start early or complete practicum other than as scheduled.

RADIOGRAPHY CLINICAL COMPETENCY REQUIREMENTS
ARRT COMPETENCY REQUIREMENTS

(APPROVED 2021, EFFECTIVE 2022)

As part of the education program, candidates must demonstrate competence in the clinical procedures identified below. These clinical procedures are listed in more detail in the following sections:

- Ten mandatory general patient care procedures;
- 36 mandatory imaging procedures;
- 15 elective imaging procedures selected from a list of 34 procedures;
- One of the 15 elective imaging procedures must be selected from the head section; **and**
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.

One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur but not both).

GENERAL PATIENT CARE PROCEDURES

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g. Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

**Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device*

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:

- patient identity verification
- examination order verification
- patient assessment
- room preparation
- patient management
- equipment operation
- technique selection
- patient positioning
- radiation safety
- image processing
- image evaluation

IMAGING PROCEDURES

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	*Elective*			
CHEST and THORAX					
Chest Routine	X				
Chest AP (Wheelchair or Stretcher)	X				
Ribs	X		X		
Chest Lateral Decubitus		X	X		
Sternum		X	X		
Upper Airway (Soft-Tissue Neck)		X	X		
Sternoclavicular Joints		X	X		
UPPER EXTREMITY					
Thumb or Finger	X		X		
Hand	X				
Wrist	X				
Forearm	X				
Elbow	X				
Humerus	X		X		
Shoulder	X				
Clavicle	X		X		
Scapula		X	X		
AC Joints		X	X		
TRAUMA: Shoulder or Humerus *(Scapular Y, Transthoracic or Axial)**	X				
TRAUMA: Upper Extremity *(Non-Shoulder)**	X				
** Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.*					
LOWER EXTREMITY					
Toes		X	X		
Foot	X				
Ankle	X				
Knee	X				
Tibia-Fibula	X		X		
Femur	X				
Patella		X	X		
Calcaneus		X	X		
TRAUMA: Lower Extremity*	X				
**Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.*					
HEAD – *Candidates must select at least one elective procedure from this section*					
Skull		X	X		
Facial Bones		X	X		
Mandible		X	X		
Temporomandibular Joints		X	X		

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	*Elective*			
Nasal Bones		X	X		
Obits		X	X		
Paranasal Sinuses		X	X		
SPINE AND PELVIS					
Cervical Spine	X				
Thoracic Spine	X		X		
Lumbar Spine	X				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	X		X		
Pelvis	X				
Hip	X				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	X		X		
Sacrum and/or Coccyx		X	X		
Scoliosis Series		X	X		
Sacroiliac Joints		X	X		
ABDOMEN					
Abdomen Supine	X				
Abdomen Upright	X		X		
Abdomen Decubitus		X	X		
Intravenous Urography		X			
FLUOROSCOPY STUDIES - *Candidates must select two procedures from this section and perform per site protocol.*					
Upper GI Series, Single or Double Contrast		X			
Contrast Enema, Single or Double Contrast		X			
Small Bowel Series		X			
Esophagus (NOT Swallowing Dysfunction Study)		X			
Cystography/Cystourethrography		X			
ERCP		X			
Myelography		X			
Arthrography		X			
Hysterosalpingography		X			
MOBILE C-ARM Studies					
C-Arm Procedure *(Requiring manipulation to obtain more than one projection)*	X		X		
Surgical C-Arm Procedure *(requiring manipulation around an sterile field)*	X		X		

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	*Elective*			
MOBILE RADIOGRAPHIC STUDIES					
Chest	X				
Abdomen	X				
Upper or Lower Extremity	X				
PEDIATRIC PATIENT *(age 6 or younger)*					
Chest Routine	X		X		
Upper or Lower Extremity		X	X		
Abdomen		X	X		
Mobile Study		X	X		
GERIATRIC PATIENT *(At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)*					
Chest Routine	X				
Upper or Lower Extremity	X				
Hip or Spine		X			
SUBTOTAL					
Total Mandatory Exams Required	36				
Total Elective Exams Required		15			
Total Number of Simulations Allowed			3		

Simulations must meet the following criteria: (a) the student is required to competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor, and affective skills required in the clinical setting; (b) the Program Director/Clinical Coordinator is confident that the skills required to competently perform the simulated task will generalize or transfer to the clinical setting.

Following is a list of the number of evaluations to be completed each semester, this makes a total of 52 competencies to be completed by the program end.

*Semester amounts subject to change upon semester syllabus.

Spring — First Year: Maximum Total of ten (10)

- One (1) to be completed on a patient or simulation by the Program Director/Clinical Coordinator/LMC Clinical Faculty
- One (1) to be completed by simulation with the Lab Instructor
- Eight (8) to be completed on patients by designated Technologists, Clinical Instructor, Clinical Coordinator or Program Director

Summer (14 weeks) – First Year: Minimum of fourteen (14), Maximum of twenty (20)

- All fourteen (14-20) can be completed on patients by designated Technologists, Clinical Instructor, Clinical Coordinator or Program Director

Fall — Second Year: Minimum of twelve (12)

- One (1) to be completed on a patient or simulation by the Program Director/Clinical Coordinator/LMC Clinical Faculty
- Eleven (11) to be completed on patients by designated Technologists, Clinical Instructor, Clinical Coordinator or Program Director

Spring — Second Year: Complete Remaining ARRT Competency Requirements

MONITORING PATIENT VITAL SIGNS

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

Objective

To measure a patient's vital signs of temperature, pulse, respiration, and blood pressure

Equipment

- Thermometer
- Blood pressure kit

Procedure

On completion of this laboratory activity, the student will be able to:

1. **Temperature – Oral Method**
   a. Place the oral thermometer under the patient's tongue.
   b. Ensure that the thermometer is kept in place until a stable reading is obtained.
   c. Read the oral thermometer and record the reading.

2. **Respiration**
   a. Measure a patient's respiration by observing the patient's chest or abdomen for a 60- second period.
   b. Record the number of respirations per minute.

3. **Pulse**
   a. Measure a patient's pulse rate at the radial artery near the wrist for a 60-second period.
   b. Record the patient's pulse rate per minute.

4. **Blood Pressure**
   a. Obtain a sphygmomanometer and stethoscope.
   b. Properly place the cuff of the sphygmomanometer on the patient's upper arm midway between the elbow and shoulder.
   c. Inflate the cuff above the systolic pressure to stop blood flow to the arm.
   d. With the stethoscope placed over the brachial artery in the antecubital fossa of the elbow, slowly release the cuff of the sphygmomanometer.
   e. When the first sound of blood flow is heard through the stethoscope, record the systolic pressure reading.
   f. When the sound of blood flowing through the arm ceases, record the diastolic pressure reading.

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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PATIENT TRANSFER TECHNIQUES

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

Objective

To demonstrate proper wheelchair and cart transfer techniques

Equipment

- Wheelchair and cart

Procedure

- On completion of this laboratory activity, the student will be able to:

1. Standby Assist Wheelchair Transfer

a. Position the wheelchair at a 45-degree angle to the table.
b. Move the wheelchair footrests out of the way and be sure that the wheelchair is locked.
c. Instruct the patient to sit on the edge of the wheelchair seat.
d. Instruct the patient to push down on the arms of the chair to assist in rising and then stand up slowly.
e. Direct the patient to reach out and hold onto the table with the hand closest to the table and then turn slowly until he or she feels the table behind him or her.
f. Instruct the patient to hold the table with both hands and then sit down.
g. If the table is too high instruct then provide the patient a footstool, provide assistance as needed for the patient to step up on the stool and sit on the table.

2. Assisted Standing Pivot Wheelchair Transfer

a. Position the wheelchair at a 45-degree angle to the table with the patient's strongest side closest to the table. If the patient has loose-fitting clothes, place a transfer belt around the patient's waist.
b. Move the wheelchair footrests out of the way and be sure that the wheelchair is locked.
c. Direct the patient to sit on the edge of the wheelchair seat, providing assistance as needed.
d. Instruct the patient to push down on the arms of the wheelchair to assist in rising.
e. Bend at the knees, keeping the back straight. Grasp the transfer belt with both hands. Block the patient's feet and knees to provide stability, especially for paraplegic and hemiplegic patients.
f. Assist the patient in rising to a standing position.
g. Ask the patient whether he or she is feeling all right. If the patient reports any feelings of dizziness or exhibits any of the other signs of orthostatic hypotension, let him or her stand for a moment until the feeling subsides.
h. Pivot the patient toward the table until the patient can feel the table against the back of the thighs.
i. Ask the patient to support him/herself on the table with both hands and sit down, assisting as necessary.
j. Help the patient to sit by gradually lowering him or her to the table.

3. Two-Person Wheelchair Lift	**YES**	**NO**
a. Plan for the lift by locating an assistant who will lift the patient's feet as you lift the patient's torso.		
b. Lock the wheelchair, remove the armrests, swing away or remove the leg rests, and direct the patient to cross his or her arms over the chest.		
c. Stand behind the patient, reach under the patient's axillae, and grasp the patient's crossed forearms. Direct the assistant to squat in front of the patient and cradle the patient's thighs in one hand and the calves in the other hand.		
d. On command, lift the patient to clear the wheelchair and move the patient as a unit to the desired place.		

4. **Cart Transfer With a Moving Device**	**YES**	**NO**
a. Bring the radiographic to table alongside the cart and assure that it won't float during patient transfer.		
b. Move the cart alongside the table, preferably on the patient's strong or less affected side. Place it as close to the table as possible, and then secure it by depressing the wheel locks. In addition, place sandbags or other devices on the floor to block the wheels satisfactorily.		
c. The patient is rolled away from the table while the device is placed halfway underneath both the patient and the draw sheet.		
d. Return the patient to a supine position.		
e. Use the draw sheet to move the patient gently onto the table.		
f. If necessary the patient may be rolled again to remove the moving device.		

5. **Cart Transfer Without a Moving Device**	**YES**	**NO**
a. Move the cart alongside the table, preferably on the patient's strong or less affected side. Place it as close to the table as possible, and then secure it by depressing the wheel locks. In addition, place sandbags or other devices on the floor to block the wheels satisfactorily.		
b. Begin by rolling up the draw sheet on both sides of the patient. Be sure that the draw sheet is completely under the patient and straightened before the transfer.		
c. Support the patient's head and upper body from the far side of the radiographic table. Direct an assistant to support the patient's pelvic girdle from the cart side and a second assistant to support the patient's legs from the table side.		
d. Cross the patient's arms over the chest to avoid injury or interfering with a smooth transfer.		
e. Direct the assistant supporting the pelvic girdle to stand on the opposite side of the cart, and make sure that the cart does not move away from the table during the transfer.		
f. On command, grasp the rolled up draw sheet and slowly pull the patient to the edge of the cart. On a second command, slowly lift and pull the patient onto the table.		

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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OXYGEN ADMINISTRATION

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

Supervising Radiographer will initial and date each activity, signifying successful completion. When the entire sheet has been completed, a designated Clinical Instructor will review the sheet with the student and sign.

Objective: Assess student's understanding of oxygen therapy.

O^2 Activities:	**RT Initials/Date**
Identify the parts of a wall oxygen outlet, determine that all equipment is available and in working order. Demonstrate setup for oxygen administration in an emergency situation.	
Assess PSI on a portable oxygen tank. Determine if sufficient oxygen is available for transporting a patient.	
For a patient being transported to the imaging department with oxygen, review physician orders for how much oxygen the patient is to receive (flow rate or concentration), method of administration, and frequency (continuous or PRN). Assess accuracy of delivery.	
Evaluate positioning of the nasal cannula on a patient.	
Evaluate positioning of an oxygen mask on a patient.	

IV Tubing Activity:	**RT Initials/Date**
Evaluate the students' ability to reposition and manipulate IV tubing	

What happens to the location of the distal end of the endotracheal tube based on the position of the head?

COMMENTS:

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CLINICAL INSTRUCTOR SIGNATURE **STUDENT'S SIGNATURE**

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VENIPUNCTURE AND INTRAVENOUS DRUG INJECTION

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

Objective

- To demonstrate the proper technique for venipuncture and intravenous drug injection

Equipment

- Disposable non-latex gloves
- Butterfly needle
- Syringe
- Alcohol swabs
- Venipuncture Training Arm Kit

Procedure

- On completion of this laboratory activity, the student will be able to:
    a. Wash hands thoroughly.
    b. Check the patient's identification.
    c. Explain the procedure to the patient.
    d. Assemble all needed supplies, and prepare the drug for administration.
    e. Put on disposable gloves.
    f. Once an appropriate site for venipuncture has been selected, cleanse it with an alcohol swab using a circular motion while moving from the center to the outside.
    g. Apply a tourniquet above the site using sufficient tension to impede the flow of blood in the vein. Ask the patient to open and close the fists to distend the vein fully. When the vein has been identified, ask the patient to hold the fist in a clenched position.
    h. To stabilize the vein, place the thumb on the tissue just below the site and gently pull the skin and vein toward the hand.
    i. Hold the needle with the bevel facing upward. Pinch the wings of the butterfly needle together tightly.
    j. Insert the needle next to the vein at a 15-degree angle, and gently advance it into the vein. Blood will flow back into the tubing when the needle is correctly positioned.
    k. If the tubing of the butterfly needle has not previously been filled with solution, allow the blood to flow from the hub before attaching the syringe to ensure that no air bubbles are contained in the system.
    l. Remove the tourniquet and inject the drug.
    m. Unless otherwise instructed, remove the needle and apply gentle pressure to the site with an alcohol swab.
    n. Dispose of the syringe and needle properly.
    o. Chart all relevant information.

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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STERILE AND ASEPTIC TECHNIQUE

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

OPENING A STERILE PACKAGE

Objective

- To demonstrate the proper technique for opening a sterile package

Equipment

- Sterile package and table

Procedure

- On completion of this laboratory activity, the student will be able to:

1. **Open a Sterile Package on a Table**
   a. Place the package on the center of the surface with the top flap of the wrapper set to open away from himself or herself.
   b. Pinch the first flap on the outside of the wrapper between the thumb and index finger by reaching around (not over) the package. Pull the flap open and lay it flat on the far surface.
   c. Use the right hand to open the right flap and the left hand to open the left flap.
   d. Grasp the turned-down corner and pull the fourth and final flap down, being sure not to touch the inner surface of any of the package with an un-sterile object such as a sleeve.

2. **Open a Sterile Package While Holding It**
   a. Hold the package in one hand with the top flap opening away from you.
   b. Pull the top flap well back, and hold it away from both the contents of the package and the sterile field.
   c. Drop the contents gently onto the sterile field from about 6 inches above the field and at a slight angle, making sure that the package wrapping does not touch the sterile field at any time.

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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STERILE AND ASEPTIC TECHNIQUE

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

STERILE GOWNING TECHNIQUE

Objective

- To demonstrate the proper sterile technique for self-gowning and gowning another person

Equipment

- Surgical gown

Procedure

- On completion of this laboratory activity, the student will be able to:

1. **Self-Gowning**
    a. Stand about 12 inches from the sterile area, pick up the gown by the folded edges, and lift it directly up from the package.
    b. Step back from the table, making sure no objects are near the gown. Grasp the gown at the shoulders, hold it at arm's length, allow it to unfold, do not shake.
    c. Face the inside of the gown and, holding it by the shoulder seams, raise the arms up and slip into the sleeves.
    d. Direct an un-sterile assistant to stand behind and reach inside the sleeves, grasp the sleeves and pull them gently to adjust the gown.
    e. For the open method of gloving, the sleeves are pulled over the hands. For the closed method of gloving, the sleeves are pulled while keeping the hands and fingers covered.
    f. Direct an assistant to fasten the back and waistband of the gown.
2. **Gowning Another**
    a. After gowning and gloving using sterile technique, pick up the sterile gown by the neck band, hold it at arm's length, and allow it to unfold.
    b. Hold the gown by the shoulder seams with the outside facing you.
    c. Protect your sterile gloves by cuffing both hands under the gown's shoulders.
    d. Direct the person being gowned to slip the arms into the sleeves in a downward motion until the hands emerge from the sleeves.
    e. Direct a non-sterile circulating person to pull the gown up and fasten the back and waistband.
    f. You, as a sterile, gowned and gloved person pull the gown sleeves down over the hands being careful that your gloved hands do not touch their bare hands.

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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STERILE AND ASEPTIC TECHNIQUE

Lake Michigan College Radiologic Technology Program
ARRT Skill Evaluation

STERILE GLOVING TECHNIQUE

Objective
To demonstrate proper sterile technique for the closed and open methods of self-gloving and for gloving another person

Equipment
- Surgical gown
- Surgical gloves

Procedure
On completion of this laboratory activity, the student will be able to:

1. **Self-Gloving: Closed Method**
   a. After donning a sterile gown with the fingers still inside the cuff of the gown, pick up the right glove and lay it pal down over the right cuff of the gown.
   b. The fingers of the glove should face toward you (toward your elbow).
   c. Working through the gown sleeve, grasp the cuff of the glove and bring it over so that it covers the open cuff of the right sleeve.
   d. Pull the glove on by grasping the glove cuff and advancing the hand into the glove.
   e. Proceed with the opposite hand, using the same technique. Never allow the bared hand to contact the gown cuff edge or outside of the glove.
   f. The fingers are adjusted until comfortable.

2. **Self-Gloving: Open Method**
   a. Pick up the glove by the inside of the cuff with one hand. Do not touch the outside surface of the glove or the glove wrapper.
   b. Slide the glove onto the opposite bare hand leaving the cuff down (folded).
   c. With the gloved (and now sterile hand) pick up the other glove by reaching under the cuff (outside surface of the glove). Touch only the outside surface of the glove with the sterile hand.
   d. Pull the glove onto the hand without touching the inside surface of the glove.
   e. Turn down cuff of first hand, touching only the outside of the glove

3. **Gloving Another**
   a. After gloving using sterile technique, open the sterile package and pick up the gloves.
   b. Pick up the right glove and place the palm away from you.
   c. Slide the fingers under the glove cuff and spread them so a wide opening is created. Keep thumbs under the cuff.
   d. The person you are gloving thrusts his or her hand into the glove. Do not release the glove yet.

e. Gently release the cuff (do not let the cuff snap sharply) while unrolling it over the wrist.
f. Proceed to the left glove with the same technique.
g. Repeat the process for the other hand

COMMENTS:

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EVALUATOR'S SIGNATURE **STUDENT'S SIGNATURE**

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RADIOLOGIC TECHNOLOGY PROGRAM

STUDENT MODALITY ROTATION EVALUATION

Student Name: _____

Scheduled Date: _____

Nuclear Medicine
Ultrasound Radiation Therapy
Cardiovascular Lab Vascular Interventional Lab MRI
CT (required) Mammography

At the conclusion of your indicated rotation, complete the following questions:

What procedures did you observe?

How is this area similar to diagnostic radiography?

In what way(s) does this area differ from diagnostic radiography?

Would you consider this area as a career option? Why?

How might this rotation be improved?

STUDENT SIGNATURE **DATE**

_____ _____

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

Joint Review Committee on Education in Radiologic Technology (JRCERT) Process for Reporting Allegations

I. Important Notes

1. The JRCERT cannot advocate on behalf of any student(s). An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student.

2. The investigation process may take several months.

3. The JRCERT will not divulge the identity of any complainant(s) unless required to do so through the legal process.

II. Process

1. Before submitting allegations, the individual must first attempt to resolve the complaint directly with program/institution officials by following the due process or grievance procedures provided by the program/institution. Each program/institution is required to publish its internal complaint procedure in an informational document such as a catalog or student handbook (Standard One, Objective 1.1).

2. If the individual is unable to resolve the complaint with program/institution officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT:

   Chief Executive Officer
   Joint Review Committee on Education in Radiologic Technology
   20 North Wacker Drive, Suite 2850
   Chicago, IL 60606-3182
   PH: (312) 704 – 5300
   Fax: (312) 704 – 5304
   Email: mail@jrcert.org

3. The Allegations Reporting Form must be completed and sent to the above address with required supporting materials. All submitted documentation must be legible.

4. Forms submitted without a signature or the required supporting material will not be considered.

5. If a complainant fails to submit appropriate materials as requested, the complaint will be closed.

The Higher Education Opportunities Act of 2008, as amended, provides that a student, graduate, faculty, or any other individual who believes he or she has been aggrieved by an educational program or institution has the right to submit documented allegation(s) to the agency accrediting the institution or program.

The JRCERT, recognized by the United States Department of Education for the accreditation of radiography, radiation therapy, magnetic resonance, and medical dosimetry educational programs investigates allegation(s) submitted, in writing, signed by any individual with reason to believe that an accredited program has acted contrary to the relevant accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

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

Joint Review Committee on Education in Radiologic Technology (JRCERT) Allegations Reporting Form

I. General Information	
Name of Complainant	
Address	
Signature	
Date	

II. Institution Sponsoring the Program	
Name	
City and State	
Type of Program	☐ Radiography ☐ Radiation Therapy ☐ Magnetic Resonance ☐ Medical Dosimetry

III. Required Information

1. Attach a copy of the program's publication that includes the due process or grievance procedure.

2. Provide a narrative that identifies what you did at each step of the due process or grievance procedure, copies of materials you submitted as part of your appeal, and copies of correspondence you received in response to your appeal.

3. List the specific objective(s) from the accreditation standards (available at www.jrcert.org/jrcert-standards) and indicate what the program is alleged to have done that is not in compliance with the cited objective(s).

   Example

   Objective: 5.4 direct supervision pre-competency

   Allegation: Students often do patient exams without supervision before they have completed a competency check-off.

IV. Identify what was done at each step of the due process or grievance procedure (remember to attach copies of materials you submitted as part of your appeal and copies of correspondence you received in response to your appeal).

V. List the specific objective(s) from the accreditation standards (available at www.jrcert.org/jrcert-standards) and indicate what the program is alleged to have done that is not in compliance with the cited objective(s).

LAKE MICHIGAN COLLEGE

Radiologic Technology Program
APPENDICES

LAKE MICHIGAN COLLEGE

RADIOLOGIC TECHNOLOGY PROGRAM

PREGNANCY GUIDELINES FOR THE DECLARED PREGNANT STUDENT

Because of documented specific evidence by the National Council on Radiation Protection and Measurements on the unborn fetus, especially during the first three months, any student who declares their pregnancy while in the Radiologic Technology Program will adhere to the following procedure. Declaration of pregnancy while in the Radiologic Technology Program is voluntary.

1. As is general policy of the Radiologic Technology Program, the student will not be involved in holding patients for diagnostic x-rays.
2. Declaration of pregnancy is voluntary. If the student decides to declare their pregnancy, they mu st provide a written notification. The student has the option to continue in the program without modification.
3. If a student cannot complete the Program requirements, she will receive credit for those semesters completed and be required to apply for “admission with advanced placement” during the next semester of enrollment following the end of the pregnancy. Since this is a limited enrollment program, admission will be on a “space available” basis.
4. Lake Michigan College’s responsibility in assuring that the fetal dose not exceed 5 mSv gestation al period does not begin until the notification of the pregnancy is given in writing.
5. A copy of the Regulatory Guide 8.13 from the U.S. Nuclear Regulatory Commission will be provided to the student by the Program Director.
6. The student will be counseled by Program faculty regarding radiation effects to the fetus. The student will be counseled to follow ALARA practices, Regulatory Guide 8.13.
7. The student will be closely monitored and will be required to wear two radiation dosimetry badges: a collar badge and body badge at the abdominal level.
8. The student’s clinical assignments will not be adjusted to avoid rotations involving fluoroscopy, portable radiography and operating room procedures, and radioisotopes unless notified by the student’s physician.
9. The student accepts full responsibility for any complications occurring in her pregnancy or to the fetus because of added hazards during the Radiologic Technology program.
10. The student will be required to complete all program requirements before being recommended to sit for American Registry of Radiologic Technologist examination
11. The student may request to withdraw their declaration of pregnancy at any time. A written notification must be submitted to the Program Director.

RADIOLOGIC TECHNOLOGY PROGRAM

CIVILITY STATEMENT

Incivility is an important issue in healthcare which can lead to a breakdown in communication, impact patient safety, and lead to patient harm (Grissinger, 2017; ISMP, 2014; Luparell, 2011). This issue is so important that The Joint Commission and the Institute of Safe Medication Practices (ISMP) have issued reports to address this issue (The Joint Commission, 2008; ISMP, 2004, 2014). More specifically, the ISMP states that …

> "These behaviors have been linked to adverse events, medical errors, compromises in patient safety, and even patient mortality. Disrespect causes the recipient to experience fear, anger, shame, confusion, uncertainty, isolation, self-doubt, depression, and a whole host of physical ailments such as insomnia, fatigue, nausea, and hypertension. These feelings diminish a person's ability to think clearly, make sound judgments, and speak up regarding questions or concerns. Disrespectful behavior is also at the root of difficulties encountered in developing team-based approaches to improving care. Patient confidence has also been undermined by disrespectful behaviors, making patients less likely to ask questions or provide important information" (2014).

Civility is an essential component to professionalism, safety, communication, and patient outcomes. Therefore, in order to foster the growth of the students and provide a civil environment for students, staff, and faculty, LMC's Radiologic Technology program has adopted the following policy (Schaeffer, 2013):

Students will maintain program civility and respect at all times. This includes the classroom, clinical, lab, and any time outside the learning environment such as individual advising, or email etc. There will be **zero tolerance** for any rude or disruptive behavior while in the Radiologic Technology program and due to the sensitive nature of the issue resulting in an impact on the profession and patient safety, such behavior may result in a dismissal from the program. This includes student to student, student to patient, student to faculty/staff, faculty to student/staff, and faculty to faculty. It is the intent of the Radiologic Technology program to support and foster a culture conducive to learning and maintaining patient safety therefore, the following expectations have been adopted to address disrespect and incivility prior to dismissal:

1. Students will use the code of conduct (professionalism) as the standard of expected behaviors
2. There is a zero tolerance of disrespectful or disruptive behaviors with progressive discipline. (i.e., possible student consequences: a) 1:1 discussion with faculty; b) being placed on a learning contract and/or writing a reflection paper; and c) repetitive behavior moves to warning per handbook).
3. Faculty will role model and assist the student with a restorative process for making better communication and behavioral choices (i.e., Express concerns using "I" statements, staying calm, be objective when communicating, reflecting on behavior, taking accountability and responsibility, etc.)

4. Students will strive to promote collaboration and respect towards all individuals (i.e., faculty, peers, health care staff, patients, etc.)

The following represents examples of incivility that can be either observed, face to face, or via social media. Incivility in the classroom, clinical, or lab might include: talking during lecture, texting during class, arguing, not paying attention, not participating during assigned projects for group work, and include the following definitions and examples (not all-inclusive):

Definition of Incivility:
"Rude or disruptive behavior that may result in psychological distress for the people involved and, if left unaddressed, may progress into threatening situations." (Clark, 2010)

Definition of Disrespect:
"Any behavior that influences the willingness of staff or patients to speak up or interact with an individual because he or she expects the encounter will be unpleasant or uncomfortable, fits the definition of disrespectful behavior." (ISMP, 2014)

Examples of Incivility and Uncivil Behaviors:

- Exclusion from important work activities
- Yelling, screaming, verbal attacks
- Taking credit for another's work
- Emotional tirades, angry outbursts
- Refusing to work collaboratively
- Overt temper tantrums
- Interrupting others
- Gossiping
- Disrupting meetings
- Name-calling
- Discounting input from others
- Condescending speech, rudeness, dismissiveness
- Berating others via e-mail
- Spreading rumors
- Failing to share credit for collaborative work
- Lack of respect for another's point of view
- Damaging others reputation

Examples of Disrespectful Behaviors:

Disrespectful behavior in healthcare include "… behaviors [that] range from overt acts of abuse and bad behavior to insidious actions so embedded in our culture that they seem normal—gossip" (ISMP, 2014). The following Table includes examples of disrespectful behavior from the Institute of Safe Medication Practices (2014).

Behavior Categories	Description	Examples
Disruptive	Egregious conduct clearly evident in the behavior and/or speech	Angry or rude outbursts Verbal threats Swearing Pushing or throwing objects Bullying Threat/infliction of physical force or conduct
Demeaning	Patterns of debasing behavior that exploit the weakness of another	Shaming, humiliation Demeaning comments Spiteful behavior, backstabbing behavior Faultfinding Censuring staff in front of others Medical "education by humiliation" Insults or insensitive jokes or remarks Misogynistic or misandrist comments Sexual harassment, sexual innuendo
Intimidating	Implicit or explicit behaviors or threats used by one individual to control another; abuse of power through threats, coercion, and force of personality	Overbearing behaviors Arrogant behavior Patronizing behaviors Sarcasm or taunting Hostile notes, emails Invading another person's personal space intentionally Unjust verbal statements by someone in authority that result in distressful consequences in the recipient and others
Passive-Aggressive	Negativistic attitudes and passive resistance to demands for adequate performance; make cooperative, compliant, or pleasant comments but behave otherwise	Unreasonably critical of authority Negative comments about colleagues Refusal to do tasks; stubborn about doing things their own way Deliberate delay in responding to calls Go out of the way to make others look bad while acting innocent Undermine another's position, status, value; setting someone up for failure Failure to support a coworker Intentionally communicating incomplete information Willful workarounds without reporting system issues

Behavior Categories	Description	Examples
Passive Disrespect	Uncooperative behaviors that are not malevolent	Chronic lateness to meeting/rounds Sluggish response to requests Resist safe practices (e.g., time outs) Non-participative in improvement efforts Procrastinate causing delays Ill prepared, not prepared
Dismissive Treatment	Behavior that makes patients or staff feel unimportant and uninformed	Condescending comments Patronizing comments/attitude Gossip Aloof, disinterested, ignoring behavior Slights due to gender or race Impatience Resistance to work collaboratively Constant refusal to value, recognize, acknowledge, praise contributions of others Exclusionary and over-ruling behavior
Nonverbal Insidious	Subtle unspoken behavior that may seem innocent enough but is nonetheless disrespectful	Staring or glaring Sighing Making gestures, pointing Making faces, raising eyebrows, rolling eyes Positioning body to exclude others
Systemic Disrespect	Disruptive behaviors so entrenched in the culture that the element of disrespect may be overlooked	Making patients/staff wait for services Requiring long work hours Excessive workloads

(This table has been adapted with permission from the April 24, 2014 issue of the ISMP Medication Safety Alert! Acute Care Edition. The full table can be accessed at https://www.ismp.org/node/586)

RADIOLOGIC TECHNOLOGY PROGRAM
ON CAMPUS EMERGENCY PREPAREDNESS INFORMATION

The Student Handbook and the Lake Michigan College website publicizes Emergency Preparedness information.

The Academic and College Policies section is contained on the web and in the Student Handbook. This section contains policies and information such as, but not limited to the Incident Reporting Process and the Weapons Free Campus Policy.

The Student Handbook may be accessed at: https://www.lakemichigancollege.edu/mylmc/student-handbook or by going to:

1. www.lakemichigancollege.edu
2. Click on **Campus Life**
3. Click on **Student Resources**

The College Catalog and class schedule may be accessed online by going to:

1. www.lakemichigancollege.edu
2. Click on **Campus Life**
3. Click on **Student Resources**
4. Click on **Catalog and Schedule** under the *Enrollment & Registration* header

The Academic and College Policies section in the Student Handbook also provides listings for Emergency Procedures. The College web address for LMC Safety and Emergency Information is http://www.lakemichigancollege.edu/safety.

Alcohol and Drugs
Annual Security Report
Campus Crime Reports
Chemical Hygiene Plan
Crime Statistics
Emergency Call Stations
Evacuation & Emergency Procedures
RaveAlert
Reporting Criminal Incidents
Safety Tips
Weather & Emergency Closings

The Radiologic Technology Program summer orientation session will include a review regarding of the following information:

- RaveAlert and the options students have to receive the RaveAlert messages;
- Maxient Reporting System (incident) and proper use of the system;
- College Catalog listing of types of student misconduct;
- Availability of the classroom media station phone for 6-911 or 911 calls;
- Availability of parking lot direct dial 911 phones; and
- Locations of the College Emergency flip page documents in each classroom and in the lab

LAKE MICHIGAN COLLEGE

TECHNICAL STANDARDS FOR ADMISSION

Health Science Department

The Health Science department faculty has specified the following non-academic criteria which applicants generally are expected to meet in order to participate in the Health Sciences programs and professional practice. These technical standards are necessary and essential and have been developed to provide for the health and safety of the patients receiving care from the health sciences department students.

OBSERVATION – The applicant must be able to participate in all demonstrations, laboratory exercises, and clinical practicum in the clinical component, and to assess and comprehend the condition of all patients assigned for examination, diagnosis and treatment.

COMMUNICATION – the applicant must be able to communicate with patients to effectively elicit patient compliance, understand and assess non-verbal communications, and be able to effectively transmit information to patients, physicians, paraprofessionals, faculty, and staff in a timely way.

PSYCHOMOTOR – the applicant must have motor functions sufficient to elicit information from patients by appropriate diagnostic or therapeutic maneuvers; be able to perform basic tasks; possess all necessary skills to carry out diagnostic or therapeutic procedures; be able to interpret movements reasonably required to provide general care and emergent treatment/actions as necessary for patient safety and comfort.

INTELLECTUAL/ CONCEPTUAL, INTEGRATIVE, AND QUANTITATIVE ABILITIES – The applicant must be able to measure, calculate, reason, analyze, evaluate, and synthesize information and observations. Problem solving, the critical skill demanded of health science practitioners, requires all of these cognitive abilities.

BEHAVIOR AND SOCIAL ATTRIBUTES – The applicant must possess the emotional health required for full utilization of intellectual abilities; execute appropriate medical judgment; the prompt completion of assigned or non-assigned responsibilities for care of and service to the patient; and the development of supportive and effective relationships with patients. Applicants must be able to tolerate physical and mental workloads, function effectively under stress, adapt to changing environments and conditions, display flexibility and function in the face of uncertainties inherent in the clinical setting and with patients. Compassion, integrity and concern for others, interest and motivation are personal qualities each applicant should possess.

LAKE MICHIGAN COLLEGE

TECHNICAL STANDARDS AND FUNCTIONS

Radiologic Technology Program

Standards	Functions
Ability to stand and walk for 6-8 hours at a time, including occasional periods of sitting. Physical condition sufficient to occasionally carry, push, and pull safely.	Standing and walking for 6-8 hours at a time while actively engaged in radiographic procedures. Pushing and moving stretchers and wheelchairs with patients from patient areas to procedure rooms. Pulling and moving patients to and from radiographic table. Lifting/carrying and attaching extra radiographic table components for specific procedures. Utilize good body mechanics. Pushing heavy mobile radiographic equipment throughout the hospital.
Physical condition and motor skills suitable to balance, climb, crouch, crawl, stoop, kneel, and reach.	Reaching up to 6' with the use of a step stool, if needed, to manipulate equipment. Gathering items needed for intravenous injection.
Manual dexterity and tactile sensitivity suitable enough to detect landmarks and precise measurements.	Drawing up contrast from vial for intravenous injection. Palpate external body land marks to precisely line up radiographic tube.
Hearing sufficient to understand patients and other staff members. Hearing sufficient to detect equipment sounds.	Hearing various background sounds during equipment operations. Listening to patient responses.
Communication and speech sufficient to speak with patients, staff members, and ask appropriate questions.	Communicating in a clear and concise manner to people in various departments. Asking patients questions to obtain appropriate medical history. Providing effective written, oral, nonverbal communication with patients and their families, colleagues, healthcare providers, and the public.
Vision sufficient to view records, reports from equipment, images, and visuals.	Visually assessing patient. Viewing x-ray images.
Sufficient muscle strength, lower back and knee stability to handle patients and equipment in a safe manner. Ability to lift heavy loads, occasionally up to 125 pounds.	Lifting and transferring of patients and physically assisting patients. Moving and manipulation of x-ray systems and equipment.
Sufficient psychological stability and knowledge of techniques/resources to be able to respond appropriately and efficiently in emergent situations in order to minimize dangerous consequences either patient related or environment related. Critical thinking skills sufficient to work and make decisions under high stress. Ethical ability to work under standards and laws.	Recognizing and responding appropriately in emergency situations. Approaching highly stressful human situations calmly. Making a clinical judgment using critical thinking. Adhering to ethical standards of conduct as well as applicable state and federal laws.

Note

Students need to be able to perform each of these tasks with or without accommodation. If an accommodation is necessary because of a disability it is the student's responsibility to provide documentation and to request accommodation. The college will endeavor to satisfy requests for reasonable accommodations, however, it is not guaranteed. **Accommodations for a disability cannot be guaranteed in a hospital setting.*

LAKE MICHIGAN COLLEGE

Request to Schedule Clinical Absence

Student Name: _____ **Date**:_____

Requested date of absence(s):

Semester: _____

Clinical Education Center:_____

My plan to make-up the missed time is as follows:

_____

_____

_____

_____

_____

Student's Signature:_____

Clinical Coordinator's Signature:_____

Program Chair's Signature:_____

Directions: Complete form one (1) week prior to requested date of absence.

Retain a copy for your own records.

LAKE MICHIGAN COLLEGE

Student Corrective Action Reply

Student Name: _____ **Date**:_____

My perception of the problem:

My awareness of the seriousness of the problem:

Steps I will implement to correct the problem:

Student Signature: _____

Program Chair Signature:_____

This form is due within three (3) days is issuance of Corrective Action Notice/Written Warning/VOP.

RADIOLOGIC TECHNOLOGY

STUDENT AGREEMENT FORM

In consideration of my enrollment and acceptance, I, intending to be legally bound, hereby, for myself, my executors, administrators, and heirs, waive and release Lake Michigan College, their agents, representatives, committees, members and radiographic staff of any and all claims or rights to damage from injuries or losses suffered by me directly or indirectly, while attending, completing and fulfilling both my off-campus and on-campus class and clinical assignments and responsibilities for Lake Michigan College. I agree to abide by the rules and follow the procedures set forth by Lake Michigan College, the Radiologic Technology Program and the respective clinical facilities governing my conduct and these assignments. Initials

PRIVACY ACT STATEMENT

As a Radiologic Technology student at Lake Michigan College, I understand that my name, major field of study, participation in officially recognized activities and sports, dates of attendance, degrees and academic awards received, and the most recent previous educational institution attended are public information and can be given out by any employee of the school at any time to any person who properly identifies him/herself. Initials

In addition, by signing here, I will allow the Radiologic Technology Department to give out my name and address (not phone number) as a recruitment tool to clinical facilities, magazine or journal organizations, and to award programs.

CONFIDENTIALITY/HIPAA STATEMENT

I have received, read and understand the confidentiality/HIPAA policy of Lake Michigan College. I understand and agree that in the performance of my duties in any of the clinical facilities used by Lake Michigan College, I must hold all patient information in confidence. I understand that any violation of the confidentiality of information shall result in immediate disciplinary action. Initials

SKILL VALIDATION PROCESS

In the Lake Michigan College (LMC) Radiologic Technology Program, certain skills are practiced and validated according to school and Program policy. As an LMC Radiologic Technology student, I recognize and give my consent to be an active participant in the skill validation process. This means I will assume the role of the client and/or technologist for certain skills, including injections and venipuncture. Initials

REPEAT EXPOSURE/DIRECT SUPERVISION STATEMENT

I understand I must have direct supervision when making a repeat exposure during clinical education. Direct supervision is strictly enforced if the student hasn't passed an exam competency or while portable radiography is in use. Failure to adhere to these requirements will result in disciplinary action. Initials

PATIENT/IMAGE RECEPTOR HOLDING STATEMENT

I understand that as a student I will NOT hold image receptors and I will not hold patients. I understand that if found holding patients or image receptors I will receive disciplinary action in form of a Violation of Policy (VOP). Initials

JRCERT STANDARDS AND GRIEVANCE POLICIES AND PROCEDURES

I acknowledge I have been given a copy of the JRCERT standards and grievance policies and procedures. The standards have been explained to me and I understand how to complete a grievance with the JRCERT. Initials

CLINICAL SITE ORIENTATION AND CHECK OFF INFORMATION

I acknowledge that I am required to complete an orientation check off form each time I attend a new clinical site. I understand this form must be signed by me and turned into the Radiologic Technology Program Clinical Coordinator within one week of clinical site attendance. Initials

RADIOLOGIC TECHNOLOGY

HANDBOOK ACKNOWLEDGEMENT FORM

I hereby acknowledge that I have received, read, and understand the Lake Michigan College Radiologic Technology Student Handbook including program policies and the Student Agreement Form. I further agree to follow all policies and procedures within the handbook.

I understand while attending the clinical site of the Radiologic Technology program, I am expected to follow all reasonable rules and regulations of policies and procedures of the assigned clinical site.

I understand that the Radiologic Technology faculty expect student professional conduct and civility at all times while a student is in the Radiologic Technology program and will reinforce these professional standards, both in the classroom and in clinical settings.

I understand that failure to abide by these rules and regulations may result in dismissal from the Radiologic Technology program.

I further understand that my signature below would allow personnel from the accrediting body, JRCERT, to review my student file during a formal audit of the Radiologic Technology program.

I understand that this signed document will become a part of my academic record in the Radiologic Technology Program.

Date: _____

Student Printed Name: _____

Student Signature: _____