# *Bronx Community College*

## *Radiologic Technology Program*

## *Clinical Handbook*

## *2022-2024*

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Prof. V. Rodriguez
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# MISSION AND GOALS OF THE RADIOLOGIC TECHNOLOGY PROGRAM

## MISSION STATEMENT

The Mission of the Bronx Community College Radiologic Technology Program is to prepare its students for a career in the Diagnostic Imaging Sciences through a challenging, progressive academic and clinical environment. The faculty of the Radiologic Technology Program is committed to graduating competent, compassionate Radiographers with strong communication and patient care skills.

## GOALS AND STUDENT OUTCOMES OF THE RADIOLOGY PROGRAM

**Goal # 1: Graduates will demonstrate clinical competency in radiologic technology.**

SLO # 1.1: Students will demonstrate accurate positioning skills to produce diagnostic images.
SLO # 1.2: Students will demonstrate effective patient-care skills.
SLO # 1.3: Students will compute appropriate technical factors and practice principles of ALARA.
SLO # 1.4: Students will utilize principles of radiation protection.

**Goal # 2: Graduates will demonstrate effective communication skills.**

SLO # 2.1: Students will demonstrate proficiency in written communication skills.
SLO # 2.2: Students will demonstrate effective oral communication skills in the clinical aspect of the program.

**Goal # 3: Graduates will demonstrate critical thinking and problem-solving skills.**

SLO # 3.1: Students will apply alternate methodologies for imaging trauma patients.
SLO # 3.2: Students will recognize the quality of diagnostic radiographic images.
SLO # 3.3: Students will demonstrate ability to modify and improve image quality.

**Goal # 4: Graduates will demonstrate professionalism.**

SLO # 4.1: Students will conduct themselves according to professional standards.
SLO # 4.2: Students will demonstrate understanding of the Code of Ethics.
SLO # 4.3: Students will demonstrate professional development by advancing in the field of radiologic technology and medical imaging.

## DESCRIPTION OF THE PROFESSION

Radiologic Technologists are highly skilled professionals qualified by education and accreditation to perform imaging examinations and accompanying responsibilities at the request of physicians. They are educated in anatomy, patient positioning, examination techniques, equipment protocols, radiation safety, radiation protection and basic patient care.

## CLINICAL EDUCATION

The Clinical Competency Evaluation System is a standardized method of evaluating the student's clinical abilities and performance in the areas of radiation protection, patient care, patient communication, positioning, professionalism, radiographic techniques and image evaluation. This system is structured to ensure proper transition from direct to indirect supervision while ensuring patient safety and protection. The clinical education component of the program allows the student to demonstrate knowledge gained from his/her didactic studies to the clinical arena. It is here where the student will master his/her interactions with patients, radiation protection, as well as the skills that are necessary to produce an optimum diagnostic radiograph.

## STUDENT LEARNING OUTCOMES

The Radiologic Technology Program provides a clinical environment to develop a competent specialized professional who is qualified to:

- Students will be able to perform routine radiographic examinations.
- Students will demonstrate effective patient care skills.
- Students will utilize the principles of ALARA to protect the patient, themselves and the general public from unnecessary radiation.
- Students will conduct themselves by professional standards.
- Students will work as effective members of the healthcare team.
- Students will be able to apply alternate methodologies for trauma and non-conforming patients.
- Students will apply sound judgment when performing pediatric radiography.
- Students will demonstrate oral communication and listening skills appropriate for the patient's age, mental status, and cultural diversity.
- Students will demonstrate effective written communication.
- Students will be able to recognize diagnostic images and modify them to improve quality as necessary.

## CLINICAL AFFILIATES

- New York Presbyterian Hospital, (NYPH) New York, New York, 622 West 168th Street, New York, New York 10034 (212) 305-6620
- Montefiore Medical Center, (MMC) Bronx, New York 111 East 210th Street, Bronx, 10467 (718) 920-2290
- Jacobi Medical Center, 1400 Pelham Parkway South, Bronx, NY, 10461 (718-918-4642)
- Montefiore- Wakefield Division, 600 East 233rd Street, Bronx, New York, 10466 (718) 920-9449

The Program reserves the right to assign students to a clinical affiliate based upon availability of clinical sites. Students will be reassigned in their senior year, to a second site for a more expanded clinical experience.

The student is subject to all the rules and regulations of the clinical affiliate. The clinical affiliate has the right to request the dismissal of any student who demonstrates any breach of rules or displays unethical behavior. **If a student is dismissed from their clinical site, they will not be reassigned to another clinical affiliate. Because this will interrupt the sequence of Radiography education, they will be dismissed from the program and all Radiography classes. A student who is dismissed from a clinical site is not eligible for re-admission into the Radiography Technology Program.**

The College does not assume any responsibility for transportation costs to and from the clinical site.

## FACT SHEET

- Cardio-Pulmonary Resuscitation (CPR) All students are required to be certified to comply with ASRT Program Curriculum Competency. No student is allowed in the clinical area without proof of a CURRENT VALID certification. First-year students, the deadline date is December 1st, second-year students, the deadline date is August 30th.

- Equal Learning Opportunity. The Program provides students with equal learning opportunities to facilitate achievement of objectives. It is a requirement of the JRCERT (Joint Review Committee on Education in Radiologic Technology) that all Radiologic Technology students be afforded the same opportunities for training in all areas equally.

  If institutions affiliated with a JRCERT program do not allow male students to participate in direct patient contact during mammography or do not allow the presence of a male student in the radiographic room during examination performance, then the female students may not be allowed to participate either. Exclusion of students during any procedure based on gender is discrimination.

## I. HEALTH AND PHYSICAL STANDARDS

All students must submit, as part of the initial program application process a current medical examination report (not older than six months) on the form provided by the College. Additionally, a health clearance form will be sent to the student and must be presented to the Program on orientation day. Students who do not meet the necessary criteria as stated on the health clearance form or fail to submit the form by August 15th will **not** be admitted into the program. Public Law 2165 requires that all matriculated students born after January 1, 1957, and enrolled for six or more credits be immunized against Measles, Rubella, and Mumps. Final admission requires approval by the College of the student's ability to meet its health and physical standards.

In addition, students in Radiologic Technology are required to take a physical examination required under contractual agreements by the clinical affiliates which will include mandatory drug testing and criminal background check.

**Bronx Community College**
**Accommodation/Disability Statement**

Bronx Community College respects and welcomes students of all backgrounds and abilities. In the event you encounter any barrier(s) to full participation in this course due to the impact of a disability, please contact the disability Services Office as soon as possible this semester. The disability Services specialists will meet with you to discuss the barriers you are experiencing and explain the eligibility process for establishing academic accommodations for this course. You can reach the disability Services Office at: disability.services@bcc.cuny.edu, Loew Hall, Room 211, (718) 288-5874.

**HIPAA**
All students must be HIPAA compliant before clinical placement.

**BACKGROUND CHECKS & DRUG TESTING**
The clinical affiliates associated with the program require a background check and drug testing to ensure the safety of the patients treated by radiologic technology program students. Students admitted to the clinical phase of the program will be required to comply with background checks and drug testing before starting the program. ***The student is responsible for the cost of the background check and drug testing.*** Students who fail to meet the clinical affiliate's standards for drug testing, and criminal background checks, will not be issued an ID by the affiliate and will be dismissed from the program.

The radiologic technology program uses the services of Castle Branch for Background Checks and Drug Testing. Castle Branch is one of the top 10 background screening and compliance management companies in the nation. The

portal link for Bronx Community College is CastleBranch.com/UV02. The designated package code must be submitted at CastleBranch.com website.

Radiologic science professionals must meet high ethical standards given their essential role in the health care system and the close contact they have with patients. If you are a student who has been charged with or convicted of a misdemeanor or felony (including a conviction of a similar offense in a military court-martial), the Radiology program recommends completing an "Ethics Review Application" that can be obtained from the American Registry of Radiologic Technologist (ARRT). This application can help identify issues that may make a student ineligible for certification and registration. It is a student's responsibility to identify and address any potential issues early, before a student has pursued coursework toward the Radiologic Technology degree.

## II. CLINICAL EDUCATION HOURS

Clinical education is an organized placement that occurs in a structured and timely format. The program does not permit students to be scheduled for more than 40 hours per week in clinical and academic activities combined. However, clinical hours have been carefully determined to best support student learning in the clinical environment and facilitate competency achievement.
Depending on the affiliate site, students should be available between 8:30 a.m. and 4:00 p.m. for clinical rotations.

The hours of clinical education are:

- The New York Presbyterian Hospital 9:00 a.m. to 3:00 p.m.
- Montefiore Medical Center 9:00 a.m. to 3:00 p.m.,
- Jacobi Medical Center 9:00 a.m. to 3:00 p.m.
- Montefiore-Wakefield Division 9:00 a.m. to 3 p.m.

**All students are expected to be in their assigned area and ready to function by their respective start times.**

A. Students are required to sign in and sign out daily. No clinical credit will be given if the student is not on record. Students are not permitted to sign in and sign out for other students. Disciplinary action will result for a student signing in or out for another student.

B. Students must be available for the clinical experience and in the tech area between the hours of 9:00 A.M. and 3:00 P.M.

C. Winter session (CLE 15 & 45) is the first three weeks of January. Summer Clinical, CLE 31 and 61, follow the schedule for Summer III and are approximately eight weeks in length during June and July. Attendance at winter and summer session is mandatory.

## III. CLINICAL ATTENDANCE POLICIES

**CLINICAL ATTENDANCE**

**Any student, who has clinical absences more than those listed below, will receive a failing grade for that CLE course.**

Students are required to complete a specific number of clinical hours each semester. Lateness more than 10 minutes is considered an absence, and three times late will count as an absence. A student may provide documentation of extenuating circumstances to the clinical coordinator and is subject to approval by the Committee on Admissions and Waivers.

### A. Clinical Absences

The following is a list of the maximum clinical infractions that will be tolerated each semester. *****

| | |
|---|---|
| CLE 11 | 1 day absent |
| CLE 15 | 1 day absent |
| CLE 21 | 3 days absent |
| CLE 31 | 3 days absent |
| CLE 41 | 3 days absent |
| CLE 45 | 1 day absent |
| CLE 51 | 3 days absent |
| CLE 61 | 3 days absent |

CLINICAL HANDBOOKS WITH EXPERIENCE RECORDS **MUST** ACCOMPANY STUDENTS **AT ALL TIMES** IN THE CLINICAL SETTING. STUDENT MAY BE ASKED TO LEAVE THE CLINICAL SETTING IF EXPERIENCE RECORDS, OR FILM BADGE IS NOT WITH THE STUDENT. **AS PER OUR CLINICAL AFFILIATES IT IS MANDATED THAT STUDENTS THAT DO NOT HAVE THEIR ID'S CAN NOT REMAIN ON THE PREMISSES AND MUST GO HOME, THIS WILL RESULT IN ONE ABSENCE**

***Lateness more than 10 minutes is considered an absence, and three times late will count as an absence. The student can be sent home.**

### B. Clinical Lateness

Excessive lateness will result in disciplinary action. Students who report any time after the official start of the clinical day will be considered late. **THREE LATENESSES WITHIN A SEMESTER WILL BE COUNTED AS ONE CLINICAL ABSENCE** and will subject the student to the clinical absence policy. Students who report more than 10 minutes late will not be allowed to remain for the day and will be charged with an absence. A Late return from lunch will also be considered a recordable lateness. Allowable time for lunch is 1 hour.

Students who leave the clinical site early will also be charged with an absence and disciplinary action. No credit for half days.

## C. Required Notification for Absences and Lateness

Students are required to telephone the clinical site and speak with the Clinical Instructor in the event of absence or lateness. Notification shall be made no later than 8:45 a.m. at NYPH (212) 305-6620; MMC (718) 920-2290 Monte-Wakefield Division (718) 920-9449, Jacobi (718) 918-5261. In the event a message cannot be left at the clinical site, the student must notify the Clinical Coordinator's office at (718) 289-5285 or the Administrative Assistant's office at (718) 289-5400.

## D. Early Dismissal

Students who need to leave the hospital early must receive written approval from the Clinical Coordinator or Clinical Faculty. Early dismissal reverts to absence policy. Hospital personnel does not have the authority to dismiss a student. In the event of an emergency, the student must call the College if a Clinical Instructor is immediately unavailable.

## E. Extended Absenteeism

Extended absences which may occur outside of the student's control will be examined on a case-by-case basis by the Committee on Admissions and Waivers. Documentation regarding the extended absence must be provided for the program to consider the reason for the student's absence.

## F. Course Attempts

To maintain the standards of our credentialing agency and to restrict program capacity due to clinical assignments, the following regulations will are enforce

- Radiologic Technology students may attempt a given Clinical Education (CLE) course only twice. An attempt is defined as having been registered in the course for at least three weeks, appeared on the roster, and/or received any grade, academic or administrative.
  *For example, and not by way of limitation, a student takes CLE 11 and obtains a grade of C requiring a repetition of this course; the student must return the following Fall semester to repeat the CLE 11 course. The student is required to pass CLE 11 on the second attempt and may not withdraw. No further attempt of CLE 11 is allowed, and the student may not continue in the program.*

## G. Reinstatement into CLE courses

**Guidelines for readmission shall be:**

The minimum acceptable grade in Clinical Education (CLE designation) in the Radiologic Technology program shall be a grade C+ or above in CLE 11 through CLE 51 and a B or above in CLE 61. Grades of C or lower in CLE courses must be repeated if the student wishes to receive a degree in Radiologic Technology. Grades of C or lower may be repeated subject to the following conditions:

- Permission to repeat is subject to the availability of space and at the review of the Committee on Admissions and Waivers.
- The course must be completed with a C+ or above in CLE 11 through CLE 51 before the next higher-level course may be taken.
- Both grades received in the same course will be used to calculate the student's cumulative Grade Point Average (GPA).
- The credit for a repeated course may be applied only once toward graduation.
- A student may repeat such a course only once.
- Repetition of courses passed may negatively affect financial aid eligibility.
- A grade lower than B in CLE 61 will result in repeating this course.

# IV. PREGNANCY POLICY

It is recommended that a pregnant student voluntarily inform the program director of their condition of pregnancy, in writing, and the estimated date of conception. Forms may be found in the Appendix of the Clinical Handbook.
The National Council of Radiation Protection (NCRP) recommend that the maximum permissible dose equivalent to the embryo-fetus from occupational exposure to the expectant mother should be limited to 0.5 rem for the entire gestation period. It is recommended by the NCRP that persons involved in the occupation should notify the supervisor immediately if pregnancy is suspected. Through proper instruction in all safety precautions, personnel monitoring, and strict adherence to these precautions, it is possible to limit all occupational exposure to less than 0.5 rem for the entire gestational period and to prevent fetal MPD levels from being surpassed.
When the student voluntarily declares their pregnancy, in writing, the student will meet with the clinical coordinator and/or program director to discuss radiation protection practices during the pregnancy. Upon declaration, the student will have the following options during their enrollment in the program:

**Option #1**
**Continue both the didactic and clinical education phases**

- All clinical as well as didactic objectives must be fulfilled prior to graduation

- The student will be required to wear two film badges, one at waist level and one at collar level.
- Will be assigned to the same clinical rotations as non-pregnant students
- It is recommended that pregnant students observe the following precautions:
    - Stay out of the field of radiation and, other than during fluoroscopy, remain in the control booth during the exposure period
    - Wear additional lead apron or aprons in fluoroscopy, during portable exams or when otherwise necessary

**Option #2**
**Continue only the didactic educational phase**

- All clinical as well as didactic objectives must be fulfilled prior to graduation.
- Allowance will be made for reinstatement in the clinical phase post pregnancy

**Option #3**

**Leave of absence from the Radiography Program**

- Discontinue didactic and clinical education phases
- Re-enter program based on readmission criteria as stated previously
- The student may re-enter the program in the next cyclic offering of the radiography courses.

The student will be required to sign a statement acknowledging explanation of options and stating option choice

Undeclared Policy: a declared pregnant student may undeclared (withdraw the declaration) in writing, their pregnancy at any time. This is strictly voluntary.

## V. HOSPITAL STRIKE/ JOB ACTION

No student is permitted to participate in any strike or job action while on clinical duty. Any time there is a strike or job action; the student should leave clinical duty and report to the college. He or she should check with the Program Director, Clinical Coordinator, faculty member and/or a clinical instructor from another site for further direction.

AT NO TIME SHOULD A STUDENT ATTEMPT TO CROSS A PICKET LINE OR ENTER THE HOSPITAL AFFILIATE TO REPORT FOR CLINICAL DUTY IN THE EVENT OF A JOB ACTION/STRIKE. ANY STRIKE/JOB ACTION MAY RESULT IN A DELAYED GRADUATION DATE.

## VI. GUIDELINES FOR UNIFORM APPEARANCE

When you are in uniform for clinical experiences, the following rules regarding appearance must be observed:

1. Shoes and uniform must be scrupulously clean to maintain medical asepsis.
2. Shoes should be sturdy and comfortable. Safety dictates that no clogs or sandals be worn in the clinical area.
3. All uniforms should be a respectable fit to maintain professional dignity when moving about as you carry out clinical activities.
4. All tattoos will be kept covered.

NOTE: BECAUSE THEY ARE PART OF THE ACCEPTED UNIFORM OF THE PROGRAM AND MEET THE CLINICAL AFFILIATES EXPECTATIONS YOU ARE REQUIRED TO WEAR:

**For Female Students:**

a) The Radiologic Technology Program uniform consists of a white tunic with BCC logo on the sleeve and blue uniform pants. If lab jacket is worn, it must have the BCC logo on the sleeve. Uniforms can only be ordered from a designated vendor.

b) White uniform shoes. No clogs or sandals are permitted. Socks must be worn. No logo or trademark may appear on the shoes. No plastic shoes permitted.

c) Hospital identification must be worn at all times with photo I.D. facing forward.

d) Radiation monitoring badge must be worn at all times.

e) Operating Room (O.R.) "scrubs" are not allowed unless the student is assigned to an area that requires such attire and the student will be provided such attire from the hospital. The student will follow the hospital policy regarding the use and wearing of O.R. scrubs. A lab coat must be worn over scrubs if the student leaves the O.R. "Scrubs" are hospital property and will never be taken home. Failure to comply will result in immediate clinical dismissal

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f) To maintain asepsis, hair should be either styled short or if long; it must be arranged up and off the face and collar.

g) Because jewelry creates safety and asepsis problems, dangling earrings and bracelets must not be worn in the clinical area. The only jewelry that is permitted is a plain wedding band, one pair of stud earrings and a watch.

h) To maintain asepsis, nails must be kept short with no chipped or jagged edges. Colored nail polish is not allowed. Clear polish may be worn.

i) Students who appear in the clinical area wearing improper uniforms, nail polish, or without their identification badge and/or radiation badge will be required to leave and charged with an absence.

j) Appropriate underwear is to be worn under uniforms. No colored or thong type or patterned underwear is permitted.

k) Tattoos must be covered at all times.

**For Male Students:**

a) The Radiologic Technology Program uniform consists of a white tunic with BCC logo on the sleeve and blue uniform pants. If lab jacket is worn, it must have the BCC logo on the sleeve. Uniforms can only be ordered from a designated vendor.

b) White uniform shoes. No clogs or sandals are permitted. Socks must be worn. No logo or trademark may appear on the shoes. No plastic shoes permitted.

c) Hospital identification must be worn at all times with photo I.D. facing forward.

d) Film Badge must be worn at all times.

e) Long sleeve T-shirts, non-white T-shirts, and white dress shirts under uniform shirts will not be permitted.

f) Operating Room (O.R.) "scrubs" are not allowed unless the student is assigned to an area that requires such attire and the student will be provided such attire from the hospital, and he/she will follow the hospital policy regarding the use and wearing of such attire. A lab coat must be worn over scrubs if a student leaves the O.R. Uniform shirts and pants may never be worn under scrubs to maintain medical asepsis. Failure to comply will result in immediate clinical dismissal.

g) To maintain medical asepsis, hair should be either styled short or if long; it must be arranged up and off the face and collar.

h) Jewelry creates safety and asepsis problems. The only jewelry that is permitted is a plain wedding band, one small stud earring, and a watch.

i) To promote asepsis nails must be kept short with no chipped or jagged edges.

j) Students who appear in the clinical area wearing improper uniforms without their identification badge and/or film badge will be required to leave and charged with an absence.

k) Appropriate underwear is to be worn under uniforms.
l) Tight pants are not allowed, comfort fit is preferred

m) Male students are required to be cleanly shaven at all times. Beards and mustaches must be kept trimmed and neat at all times. Students who fail to shave will be sent home and incur one absence from the clinical session.

n) Tattoos must be covered at all times.

## VII. RADIATION PROTECTION/ MONITORING

The radiation dosimeter is a device that records the amount of radiation received by the wearer. Although the radiation exposure of students working in the clinical setting is not likely to exceed 1/10 of the maximum limits set by the Bureau of Radiological Health, Department of Health, 50 mSv/year. It is the policy of all hospitals to issue radiation badges to individuals working with or near radiation sources on a frequent basis.

- Badges are for personal monitoring and shall only be worn by the person they are assigned.
- Badges should be worn only at the clinical site and never taken home.
- Badges shall not be tampered with and are sensitive to extreme heat and light.
- Monthly badge reports will be posted and signed by each student.
- Students will not be allowed to remain in clinical without their badge and will be sent home incurring an absence.
- Accidental exposure or damage to the badge should be reported immediately to the Clinical Instructor and Radiation Safety Officer (RSO).

In the unlikely event a student receives an unexplainable high exposure reading from the Radiation Safety Office of the institution they are assigned to, they will be informed by letter. This letter is a legal document stating the level of exposure and that reassignment to a non-radiation area would be mandatory. Since reassignment to a non-radiation area would not support the completion of clinical competencies, the student will be required to withdraw from clinical until the following year. Continuation of RAD classes would be optional.

**Radiologic Technology Program Threshold Limit Policy**
The following occupational dose limits apply to you if you work with radiation. This policy reflects federal, state, and New York City regulations.

- Dose to the whole body – 0.05 Sv (5 rem)/year
- Dose to lens of eye – 0.15 Sv (15 rem)/year
- Dose to the skin, any extremity or any single organ – 0.5 Sv (50)/year
- Dose to the fetus – 0.005 Sv (0.5 rem) for the gestation period

The Program will notify the student in writing if your monitoring report records a dose that exceeds 1/40 of the annual occupational limits over three months
Although this may appear to be a small reading, any student who receives this amount or more during any given quarter will be counseled. Additional information can be reviewed online at NRC (Nuclear Regulatory Commission) Guide 8.13.2. www.nrc.gov

Radiologic Technology students must be knowledgeable about the dangers of radiation. The following rules will be strictly enforced in the clinical setting:

A. **UNDER NO CIRCUMSTANCES WILL ANY STUDENT HOLD A PATIENT FOR AN EXPOSURE OR EXPOSE ANOTHER STUDENT HOLDING A PATIENT.**

B. Students should not energize an x-ray tube while any person other than the patient is in the room.

C. Under no circumstances will any student ever radiograph another student.

**EXCEPTIONS:** Fluoroscopic procedures, portables, specials and operating room procedures that mandate the presence of staff members. Personnel must be wearing lead aprons and gloves during these procedures. Students must be careful entering rooms during these procedures.

D. All radiographic examinations must demonstrate evidence of collimation.

E. If you lose your badge or your badge is left in a radiographic room, please notify the Radiation Safety Officer and Clinical Instructor.

F. Failure to turn in a film badge on time will result in a monetary fine as designated by the hospital affiliate.

G. Students **must** use gonadal or breast shielding on patients when appropriate **DEPENDANT ON CLINICAL SITE**,

**MONTEFIORE DIVISION DOES NOT REQUIRE SHIELDING FOR ANY RADIOGRAPHIC STUDY**

H. **Repeat radiographs must be done under direct supervision with an RT in the room. There will be no exception to this rule for any reason. Failure to observe this policy will result in disciplinary action.[1] All repeat radiographs will be recorded on the designated pink repeat log and initialed by an RT.**

K. No radiographic procedures will be "completed," and patient dismissed before quality control is performed by a staff Radiologic Technologist.

[1] Refer to Student Handbook

## VIII. PROGRAM RULES AND REGULATIONS

**ANY INFRACTIONS OF THE ABOVE PROGRAM RULES AND REGULATIONS, "A" THROUGH "K," WILL RESULT IN DISCIPLINARY ACTION.**

**If a student is dismissed from their clinical site, they will not be reassigned to another clinical affiliate. Because this will interrupt the sequence of Radiography education, they will be dismissed from the program and all Radiography classes. Re-entry, the following year, into the program will be pending review by the Radiologic Technology Admissions Committee and counseling services through Student Development**

A. **Students are expected to follow the posted "Room Assignments" schedule for the period specified.** Any deviation from such shall not be allowed unless there is prior approval or instruction from the program faculty. Room assignments are subject to change by the faculty when deemed necessary. Floor supervisors may not reassign students without permission from program faculty. Failure to observe this rule will result in disciplinary action.

B. Students are not permitted to alter the scheduled clinical hours or scheduled lunch hours to suit personal or job-related commitments. Vacation times are designated by the Program and may not be changed.

C. Students are expected to follow instructions as expressed by the program faculty, the floor supervisors, physicians or a supervising technologist as it may relate to a particular examination. Any incident involving faculty insubordination shall be considered a serious offense and shall merit disciplinary action.

- First offense- documented counseling with faculty and Counseling Services through Student Development.
- Second offense- suspension.
- Third offense - dismissal

D. Any problems involving equipment, staff, patients, or patient scheduling should be discussed with the program faculty and/or reported to the floor supervisor.

E. It is the student's responsibility to maintain ongoing and active "Program Clinical Experience Record" sheets and repeat logs.

F. The student **MUST** wear his/her identification and film badge in the clinical setting at all times. In the absence of these, you shall not be allowed to function clinically.

G. The student is responsible for use and purchase of right and left initial markers. Markers with your initials should not be loaned to other students or staff. Clip on markers are not permitted.

H. The student must maintain proper uniform attire.

I. The student must comply with all other regulations outlined in the *Student Handbook.*

J. **AT NO TIME WILL ANYONE BE RADIOGRAPHED AT THE CLINICAL SITE WITHOUT A SPECIFIC REQUEST, IN WRITING, FROM A PHYSICIAN.**

K. **ELECTRONIC DEVICES (cell phones, smartphones, laptop computers, etc.)** The use of electronic devices is not permitted in the classroom, college laboratory, or any clinical facility. In the event of an emergency, Mr. Morales-Armstrong, Program Administrative Assistant, is to be contacted at (718) 289-5400. The faculty member shall be notified of your emergency. Cell phone use is not permitted in the clinical site. Failure to observe this policy will result in clinical dismissal and incur an absence.

L. During the Fall and Spring semesters, student must complete a minimum of four competencies by mid-semester to maintain the pace required to complete the competency requirements per semester. A verbal warning will be given to the student if these requirements are not met.

**PROGRAM DISMISSAL POLICY**

The Radiologic Technology Program faculty reserves the right to recommend to the Program Director the dismissal of a student for serious infraction of program policy, e.g., health problems which cannot be resolved and interfere with the attainment of program objectives; unsafe clinical practice and/or misuse of privileges extended to the clinical education sites, behavior which is contrary to the ethical code of the radiography profession.

A dismissed student is not eligible for readmission or re-enrollment in the Bronx Community College Radiologic Technology Program.

The student has the right to appeal the decision as outlined in articles 15.3 to 15.6 of the Board of Trustees Bylaws, which can be obtained from the Student Development Office.

**DUE PROCESS**

**Academic Appeal Procedure for Unsatisfactory Grades Issued by Faculty**:

The student shall engage in the following when appealing a grade

1. Discuss the grade with your instructor within **one week** of the end the semester.
2. If you are not satisfied, then within **one week,** meet with the Program Director A written response will be given to the student within five business days.
3. If you still are not satisfied, within **one week,** meet with the Chairperson. A written response will be given to the student within 20 business days.
4. Final appeal of your grade is through the Committee on Academic Standing. The Codification of the College's Academic Rules and Regulations is available in the Registrar's Office, the College Library, and Student Government Office.

**Progressive Disciplinary System**

Effective Fall 2015, BCC Radiologic Technology Program will be using a progressive disciplinary system that applies a series of more serious penalties for successive violations of policy, procedures, rules, or standards. The protocol of counseling and disciplinary actions includes:

- The faculty member will discuss the infraction with the student, and a counseling form will be completed by the faculty member. It will indicate the specific infraction, the degree of seriousness of the infraction (i.e., counseling, warning, reprimand or probation) and the steps needed to be taken by the student to correct the behavior.

- The counseling form will be signed by both the student and the faculty member. The copy will go into the student's file. The form is intended to make the students aware that they are not meeting the standards of progression needed to successfully complete the course.

- If a student receives a cumulative total of 4 infractions, this demonstrates a disregard for the Radiologic Technology Program policies. This will result in the dismissal of the student from the program.
  Disciplinary actions used in this system and the consequences of each are as follows:

**1. Verbal Warning** – A verbal notification to a student that his/her behavior, performance, and/or actions are unacceptable, and that stronger disciplinary action will result if the problem area(s) is/are not corrected.

**2. Written Warning** – This is a formal behavioral agreement, drawn up between the student, the Program Director and the Clinical Coordinator or course instructor. It lists the specific behaviors, performances, and/or actions that are unacceptable and that need to be corrected within a designated amount of time. Failure to correct these problem areas, within the given time frame, will result in more serious disciplinary actions. One copy of the written agreement will be provided to the student, while another will be entered into the student's file as documentation as a warning to the student.

**3**. **Probation** - This action may be taken as a last resort for those students who continue to display inappropriate behavior or who commit an infraction that is **considered to be of a serious nature.** At this point, the student will be referred to **Jessenia Paoli, Student Conduct Officer, Department of Student Affairs, LH 417** for adjudication. **The decision of the Department of Student Affairs is final.**

| **Category I Infraction** | **1st Occurrence** | **2nd Occurrence** | **3rd Occurrence** | **4th Occurrence** |
|---|---|---|---|---|
| Violating the Standard Uniform Dress Code | Verbal Warning* | Written Warning | Probation | Dismissal+ |
| Unsatisfactory academic/clinical performance | Verbal Warning | Written Warning | Probation | Dismissal+ |

| Category II Infraction | 1st Occurrence | 2nd Occurrence | 3rd Occurrence | 4th Occurrence |
|---|---|---|---|---|
| Absences (unexcused) | Verbal Warning* | Written Warning | Dismissal+ | |
| Careless damage to clinical site, grounds or property | Verbal Warning* | Written Warning | Dismissal+ | |
| Creating or contributing to unsanitary conditions | Verbal Warning* | Written Warning | Dismissal+ | |
| Disturbing others at work | Verbal Warning* | Written Warning | Dismissal+ | |
| Phone calls or visitors during clinical rotations | Verbal Warning* | Written Warning | Dismissal+ | |
| Neglect of duty | Verbal Warning* | Written Warning | Dismissal+ | |
| Provoking or reacting to provocation | Verbal Warning* | Written Warning | Dismissal+ | |
| Tardiness to class or clinic (excessive) | Verbal Warning* | Written Warning | Dismissal+ | |
| Use of profanity during clinical rotation or classes | Verbal Warning* | Written Warning | Dismissal+ | |
| Unauthorized absence from the assigned area or class | Verbal Warning* | Written Warning | Dismissal+ | |
| Willful violation of safety rules or hospital safety practices | Verbal Warning* | Written Warning | Dismissal+ | |
| Using cell phones/text messaging in class/clinic | Verbal Warning | Written Warning | Dismissal+ | |
| Failure to observe and practice the radiation safety guidelines | Verbal Warning | Written Warning | Dismissal+ | |
| Unprofessional conduct | Verbal Warning | Written Warning | Dismissal+ | |
| Violating the No Call/No Show Policy | Verbal Warning | Written Warning | Dismissal+ | |

| **Category III Infraction** | **1st Occurrence** | **2nd Occurrence** | **3rd Occurrence** | **4th Occurrence** |
|---|---|---|---|---|
| Causing harm to a faculty member, patient, visitor, or fellow worker through negligence or inattention to duties | Probation | Dismissal+ | | |
| Defacing of notices, walls, or property | Probation | Dismissal+ | | |
| Willful negligence in patient care situations | Probation | Dismissal+ | | |
| Leaving a clinical area assignment/room without the clinical instructor's permission | Probation | Dismissal+ | | |
| Gambling at clinical site or on college property | Probation | Dismissal+ | | |
| Horseplay or throwing things | Probation | Dismissal+ | | |
| Reporting to college or a clinical site under the influence of alcohol or other non- prescribed drugs | Probation | Dismissal+ | | |
| Leaving the clinical site property without permission from clinical coordinator | Probation | Dismissal+ | | |
| Violating the Program Policies | Probation | Dismissal+ | | |
| Violating the Program Energized Lab Policy | Probation | Dismissal+ | | |
| Sleeping while on duty at a clinical assignment | Probation | Dismissal+ | | |
| Insubordination (refusal to respond to the reasonable request by instructor, clinical coordinator, Program Director | Dismissal+ | | | |

| Category IV Infraction | 1st Occurrence | 2nd Occurrence | 3rd Occurrence | 4th Occurrence |
|---|---|---|---|---|
| Accepting gratuities from patients and their relative | Dismissal** | | | |
| Conviction of a felony | Dismissal | | | |
| Fighting at the clinical site or on college premises | Dismissal+ | | | |
| Performing a radiographic exam without a physician's order | Dismissal+ | | | |
| Physical and/or verbal abuse of a patient | Dismissal+ | | | |
| Possession of and/or consumption of alcohol or any non-prescribed drugs | Dismissal+ | | | |
| Possession of illegal weapons on hospital or college property | Dismissal+ | | | |
| Theft | Dismissal+ | | | |
| Willful destruction of college/clinical property | Dismissal+ | | | |
| Willful falsification of a documents or records | Dismissal+ | | | |
| Breach of confidentiality, unauthorized accessing confidential information on hospital/college | Dismissal+ | | | |
| Academic or clinical dishonesty | Dismissal+ | | | |

* It is assumed that before this action the student has been counseled.
** Excludes flowers, candy, and thank you cards
+ Requires review and approval of Program Director/Clinical Coordinator

## IX. HOSPITAL RULES AND REGULATIONS

A. The student is subject to **ALL** the rules and regulations of the clinical affiliate. The clinical affiliate has the right to request the dismissal of any student who demonstrates any breach of rules or displays unethical behavior.

B. Upon completion of all examinations, all radiographs must be approved (initialed) by a Radiologic Technologist or floor supervisor before the patient is allowed to leave the department. Failure to do so will result in disciplinary action.

C. New York State prohibits the administration of any medication by the student.
The student may, at the request of a physician:
1. Fill a syringe, (Syringe must be labeled with drug name). All hospital protocol involving drawing up of a solution is to be strictly followed and supervised.
2. Assist in sterile technique.
3. Remove an I.V. (d/c).
4. Remove or change a bandage
5. Monitor vital signs

D. The student will observe all aspects of professional ethics and patient confidentiality and follow all HIPAA codes and regulations.

E. The student will be familiar with handling contagious/isolation cases and the proper method of disposal/sterilization of materials utilized.

F. In case of an accident (patient, visitor, employee or self), notification of your immediate supervisor is required.

G. The student is expected to perform ancillary duties of a technologist to include, but not limited to:
1. Keeping room clean and stocked.
2. Keeping aprons and other protective apparel clean and hung correctly
3. Shutting off equipment when not in use.
4. Retrieving and disposing of necessary equipment/supplies.
5. Students are required to know the generic and pharmaceutical names of emergency drugs.
6. Assist the patient with a bedpan or urinal, as needed.
7. Know hospital emergency codes
8. Know location of crash carts, fire exit, and MSDS

9. Clean cassettes if the facility uses film/screen combination.

H. Students are not permitted to eat or drink beverages in restricted areas.

I. Smoking is prohibited, and use of cell phones within is prohibited.

**Areas restricted from cell phone use include:**

1. Hospital Corridors.
2. Corridors of Radiology Department.
3. Radiographic Rooms.
4. Processing areas.
5. Operating and recovery rooms
6. Emergency room/Trauma-Triage areas

## X. PATIENT CONFIDENTIALITY

**Students will comply with the HIPAA Laws as set forth by each facility.**

A. Records and patient charts are legal documents. Therefore, these documents must be protected from unauthorized personnel, family, and patient. Charts are not to be left unattended. The patient may not be left alone with his/her chart or request.

B. Radiographs may not be shown to the patient. If the patient insists on seeing his/her film, contact a radiologist or a supervisor. Never discuss with a patient the results of the examination or the diagnosis on an x-ray requisition. Refer the patient to his/her physician.

C. Confidential HIV Related Information is any information indicating that a person had an HIV related test, or has HIV infection, HIV related illness or AIDS, or any information which could indicate that a person has been exposed to HIV. HIV antibody test results are extremely confidential. You are not permitted to discuss these results with anyone. Students may be dismissed from the program for breach of confidentiality concerning any patient information, findings or results.

D. Patient Confidentiality is of extreme importance. DO NOT discuss cases in the department, hallways, elevators, cafeteria or the surrounding community.

## COMMUNICABLE DISEASE AND INFECTION CONTROL POLICY

All students will be required to immediately report to the Program Director any contact or diagnosis by their family physician, or Employee's Health Service, of a communicable disease related to themselves or a member of their household.

- It will be the responsibility of the Clinical Coordinator to notify the Infection Control Nurse at the student's clinical site of any such report of a communicable disease.
- The Infection Control Nurse will work by the New York City Health Code, report to the City of New York, Department of Health, in writing, on form 395V.
- The Infection Control Nurse will advise the Program Director/Clinical Coordinator of any precautions and procedures that must be adhered.
- A contingency plan has been implemented in the event of a catastrophe. The program will remain adhering to the CUNY emergencies policies; however, the faculty are responsible to attend workshops that pertain to online teaching modalities offered by the college. The teachings offered in the workshops will aid in an easier transition in the event of an abrupt change in teaching modalities.

## CLINICAL INFECTION CONTROL PROCEDURE

"Standard Precautions" have been recommended by the Centers for Disease Control ("CDC") to prevent the transmission of human immunodeficiency virus ("HIV"), the virus that causes Acquired Immunodeficiency Syndrome ("AIDS").

These safeguards emphasize the need for healthcare workers to consider all patients as potentially infected with HIV and/or other blood-borne pathogens and to adhere rigorously to infection control procedures for minimizing the risk of exposure airborne, droplet and contact transmissions of all patients. Therefore, "Standard Precautions" will be implemented as a concept: a way to approach the patient and safer way to provide health care.

The following "Standard Precautions" are advised in providing care to all patients throughout the institution:

> All healthcare workers should routinely use appropriate safeguards to prevent skin and mucous membrane exposure when contact with blood or other body fluids of any patient are anticipated. Protective barriers will be stored and placed in strategic locations in all nursing units and the radiology department.
>
> Gloves should be worn when touching blood and body fluids, mucous membranes, or non-intact skin of all patients, for handling items or surfaces soiled with blood or body fluids and for performing venipuncture and other vascular access procedures. Gloves must not be worn outside of the patient's room or corridors, or outside radiographic rooms.

Gloves should be changed after contact with each patient and hands should be washed. If a needle stick puncture of the glove occurs, the glove must be changed as promptly as safety permits, and the needle stick must be reported.

Sterile procedures still require sterile gloves, equipment, and technique. 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 to mucous membranes of the mouth, nose, and eyes. Examples of such procedures include dental procedures, operating room, and invasive procedures.

Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or other body fluids.

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.

All health care workers should take precautions to prevent injuries by needles, scalpels, and other sharp instruments or devices during procedures, or when cleaning used instruments after procedures.

Needles should never be recapped or otherwise manipulated by hands, to prevent needlestick injuries.

After they are used, disposed of syringes and needles, scalpel blades and other sharp items should be placed in puncture-resistant containers for disposal.

The puncture-resistant containers are located as close as practical to the use area.

Needle injuries should promptly be reported according to established procedures.

To minimize the need for emergency mouth-to-mouth resuscitation, resuscitation bags or other ventilation devices are strategically located and available for use in areas where the need for resuscitation is predictable.

Health care workers/students who have exudative lesions or weeping dermatitis should report to Employees' Health Service before patient contact.
Linen soiled with blood or body fluids from any patient should be placed and transported in impervious "barrier" bags that prevent leakage.

All blood and body fluid specimens (except culturette swabs) must be securely contained and placed in plastic bags before transport.

Blood or body fluid spills should first be removed and then the area should be decontaminated with a chemical germicide or a solution or sodium hypochlorite (a 1:10 dilution or household bleach).

## XI. CLINICAL EDUCATION POLICIES

The student is responsible for costs related to clinical rotations. These costs will include:

| | |
|---|---|
| Tuition & student fees | |
| film badges if lost | drug testing and background checks |
| lunch | basic life support certification (CPR) |
| transportation | required physical exams |
| uniforms | PPD testing |
| markers | vaccinations/titers |

The policies and processes by which the students receive clinical education are as follows:

Documented student prerequisite knowledge in:

- Basic radiation protection.
- Basic patient care and clinical skills.
- Principles and procedures are related to image quality.
- Documented practice of radiographic procedures under laboratory conditions.
- Competency-based clinical evaluations, based on actual radiographic examination performance.

**PROGRESSION OF CLINICAL COMPETENCY EVALUATION SYSTEM**
Following successful completion of CLE 11, with a C+ or higher, the student will begin clinical participation in CLE 15.

**1.** The student will begin clinical participation first by observation.

**2.** This participation moves from a more passive role to a mode of assisting the technologist.

**3.** Gradually the student will perform radiographic procedures under the direct supervision of the NYS licensed Radiologic Technologist.

**4.** The student will perform each radiographic procedure independently for a predetermined number of times (minimum of 2) before he/she is eligible for an evaluation of each examination within a category. The success criteria for all examinations will be 77% (87% for CLE 61). All OR examinations will be evaluated on a Pass/Fail basis. After an unsuccessful competency attempt, the student will be remediated by the evaluating clinical faculty. Two additional practices will be documented on the "Unsuccessful Competency Form," before attempting to re-comp a failed study. The remediation form must be given to the Clinical Instructor before reevaluation. (see p. 28)

**5.** Each category must be completed by a date designated by the program faculty. Failure to complete a category will prevent the student from progressing to the next category.

**6.** Upon completion of all category examinations, the student is then eligible for final competency evaluation. A success criterion for final evaluations is 87% for each examination.

**7.** Final Evaluations will be assigned by the program faculty or an appointed clinical instructor, not chosen by the student.

## LABORATORY LEARNING OUTCOMES

In a laboratory setting, the student will be able to:

1. Evaluate the procedure to be performed.

2. Effectively communicate with patients, including proper breathing instructions.

3. Identify and select the proper film size. Correctly place it in its proper relationship to the bucky or tabletop.

4. Correctly measure the anatomical structure to be radiographed.

5. Determine technical factors to produce a diagnostic radiograph with minimum radiation exposure using Computed (CR) or Digital (DR) Radiography.

6. Correctly adjust technical factors considering motion, pathology, collimation and body habitus.

7. Correctly identify and place the required anatomical part in the proper radiographic position for the desired radiographic results.

8. Properly center the anatomical part being radiographed to the center of the table and/or cassette.

9. Adjust the collimator to the anatomical structure.

10. Correctly place identification markers on the cassette and film not to obscure the anatomical part being radiographed.

11. Correctly maneuver tube (horizontal vs. vertical). Correctly center the tube to both horizontal and vertical bucky using correct SID.

12. Apply knowledge of the principles of radiation protection utilizing protective shielding if required.

13. Evaluate radiographs for positioning, technical factors and anatomical structures.

**LABORATORY PRACTICE**

In conjunction with RAD 13 and 23, Radiographic Procedures I and II, students are assigned to scheduled laboratory practice during CLE 11 and CLE 21. During this time, the student will have the opportunity to observe demonstrations of positioning a body part correctly for various procedures by a faculty member. Following these demonstrations, students will then practice positioning as well as becoming familiar with setting proper technical factors. In CLE 11 the student will then be tested under laboratory conditions only.

The following rules will be adhered to during the laboratory practice:

Students will be accompanied by a Faculty member at all times when the lab is energized.

1. Students will **NEVER** radiograph one another. Violation of this policy will result in immediate dismissal from the program.

2. Smoking, drinking and eating in the lab area is prohibited.

3. Students are not permitted to perform laboratory experiments without approval from a faculty member.

4. Cleanliness in radiographic rooms and processing areas is expected at all times.

5. Equipment in the laboratory setting is not to be removed without prior approval of the clinical coordinator.

6. All equipment must be returned to its proper location.

7. Any injury that a student may incur must be reported to a faculty member immediately.

8. Film badges must be worn while the lab is energized at all times. Failure to comply with this policy will result in the student being counseled.

9. It is the policy of the program that in the event of absence from assigned laboratory sessions (practice) the student will not be permitted to make-up the material missed.

10. Additionally, scheduling of laboratory practice and evaluations does not permit adjustments to days other than the students' assigned day.

11. The student is responsible for scheduling practice time in the BCC radiographic laboratory and should consult their respective lab instructor.

**MID-SEMESTER EVALUATION - CLE 11**

There will be a low stakes evaluation by the College faculty indicating student progress at mid-semester, in accordance with criteria listed on the Laboratory Evaluation Form. This evaluation is discussed with the student at the mid-semester conference to assist the student in improving in those areas and become familiar with the competency evaluation format.

## XII. CLINICAL COMPETENCY OVERVIEW

- There are 36 Mandatory, 15 Elective (51 competencies in total). There are 10 General Patient Care competency examinations mandated by the ARRT to complete the clinical component of the Radiologic Technology program.
- **Out of 51 competencies, required only 10 competencies can be simulated.**
- Students may select which 10 competencies they want to simulate out of the 51 competencies required.
- Of the 10 general patient care examinations, all will be simulated on a phantom, another student or faculty member.
- Also, 4 final competency examinations must be performed on patients during CLE 61. **NO** final competencies may be simulated.
- A total of 51 examinations must be completed according to the specifications and guidelines set forth by the ARRT and as described in the BCC Clinical Handbook, before the completion of the program.
- All failed competencies MUST be repeated before graduation.

**DOCUMENTING CLINICAL PRACTICES**

- The student is required to attain a minimum of two (2) documented practices before attempting a clinical competency examination. Before performing a clinical competency, this documentation must be presented to the Clinical Instructor. There are four (4) categories of clinical competency examinations: Mandatory, Elective, General Patient Care and Final. The program has made allowances for achieving documented practices under various conditions for each of the areas requiring documented practices. No practices are expected for Final Comps.

- In the area of **Mandatory exams**, a minimum of two (2) documented practices are required: one (1) must be performed on a patient and the second practice may be performed on either a patient or simulated on a fellow student or a phantom. It must be noted here that practices performed on patients may be documented by a staff technologist or clinical instructor. In the case of simulation, on a fellow student or phantom, **documentation must be by the Faculty Clinical Instructor only.**

- In the area of the **Elective exams,** a minimum of two (2) documented practices are required. These documented practices may both be performed on patients, in simulation or a combination of the two. The manner in which the practice takes place dictates the type of documentation, i.e., staff technologist or clinical instructor as stated in the section of mandatory exams (**previous paragraph)**

- Practices for the **General Patient Care exams** must be done in a simulation mode, either on a fellow student, faculty member or a phantom. Documentation is required for these practices, yet the student will be tested during RAD 16, Patient Care. The remaining patient care simulations will be completed during RAD 16.
- There are no practices expected before performing the **Final Competency examinations. A study for Final Comp should be a challenging study and will be assigned by a Clinical Instructor. Refusal to perform a study assigned by a Clinical Instructor during this final phase of the competency program will result in a delay in program completion.**

**CLINICAL COMPETENCY TESTING**

The success criteria for each examination in CLE 15-CLE 51 will be 77%. Final Competencies must be achieved with a minimum success rate of 87%. The categories are:

| | |
|---|---|
| Upper Extremities | Pediatrics |
| Lower Extremities | Geriatrics |
| Chest & Thorax | Surgical Studies |
| Abdomen | Mobile Studies |
| Spine & Pelvic | Fluoroscopic Studies |
| Cranium | |

## XIII. SUPERVISION OF STUDENTS

Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the **DIRECT SUPERVISION** of a qualified NYS licensed radiographer. Only a staff RT may deem a case complete and appropriate to forward to the Radiologist for reading.

**DIRECT SUPERVISION is defined as:**

- A qualified NYS licensed radiographer reviews the request for examination in relation to the student's level of achievement.
- A qualified NYS licensed radiographer evaluates the condition of the patient in relation to the student's knowledge.
- A qualified NYS licensed radiographer is present throughout the study and approves the resulting radiographs.

After demonstrating competency, students may perform procedures with Indirect Supervision.

**INDIRECT SUPERVISION is defined as:**

- A qualified NYS licensed radiographer is immediately available to assist students regardless of the level of student achievement.

- "Immediately available" is interpreted as a presence of a qualified NYS licensed radiographer adjacent to the room or location where the radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

*A technologist or supervisor initials must accompany the students' initials on the requisition to verify approval of the examination and dismissal of the patient.*

**REPEAT RADIOGRAPHS**

**Unsatisfactory radiographs shall be repeated only in the presence of an NYS licensed radiographer, regardless of the student's level of competency. All repeats will be logged on "pink sheets" and initialed by an RT. Students who do not adhere to this policy will be subject to disciplinary action and/or dismissal.**

**Any clinical competency evaluation will have a repeat projection limitation of 25%. This means that no more than one (1) out of four (4) projections can be repeated without incurring a failing grade. This also means that any clinical evaluation examination with three (3) or less projections can have no repeats produced otherwise it will incur an automatic failure as a grade.**

## XIV. CATEGORY EVALUATIONS

| | |
|---|---|
| Category | A category consists of a series of related radiographic examinations, which illustrates an area of the body. |
| Final | A series of various non-related examinations from each category to demonstrate overall student competency. These studies should be challenging and should test the students critical thinking and ability to work independently. |

| | |
|---|---|
| Professional Development | An evaluation to assess professional development (affective domain) as the student progresses through a clinical education program. Evaluations will be conducted at the end of the semester in CLE 11, 15, 31, 45 and 61, and at midterm and end of the semester for 21, 41 and 51. |

**CATEGORIES:**

| | | |
|---|---|---|
| I. | Upper Extremity, Chest | CLE 15, 21 and/or CLE 31 |
| II. | Lower Extremity, KUB | CLE 15, 21 and/or CLE 31 |
| III. | Spine, Thorax and Abdomen | CLE 31, 41 and/or CLE 45 |
| IV. | Contrast Studies, Cranium and Portable | CLE 41, 45 and/or CLE 51 |
| V. | Final Competently Evaluations | CLE 61 |
| VI. | General Patient Care | CLE 31 |

The student will, under standard testing conditions, demonstrate clinical competency in the performance of each category. The student will perform each procedure at least twice before attempting a competency examination. Preliminary studies, as well as competencies, must be documented in competency logs in the clinical handbook.
If at any time during a clinical day, the instructor observes the student unable to perform a procedure in which he/she has previously demonstrated competency, the instructor will revoke the exam competency and document the revocation on a corrective action form. The student will then be referred to the Clinical Coordinator for remediation. If remediation is not completed before the end of the semester in which the competency was revoked, the student will receive a grade of INC (incomplete) for the semester.

## XV. CLINICAL COMPETENCY CATEGORIES

### 1. UPPER EXTREMITIES, CHEST

| | | |
|---|---|---|
| Finger/Thumb | Forearm | Shoulder |
| Hand | Clavicle | Scapula |
| Wrist | Humerus | Trauma upper extremity |
| Elbow | Trauma shoulder (with Scapula "Y" or Transthoracic view) | |
| | Pediatric upper extremity | |
| | Geriatric upper extremity (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging) | |
| | Chest, Routine (age 7 or older) | |

**2. LOWER EXTREMITIES, KUB**

| | |
|---|---|
| Toe | Femur |
| Foot | Hip |
| Os Calsis | Pelvis |
| Ankle | Trauma lower extremity |
| Tibia/fibula | Pediatric lower extremity |
| | Geriatric lower extremity (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging) |
| Knee | KUB (Age 7 or older) |
| Patella | Trauma Hip (with cross table lateral) |

**3. SPINE, THORAX AND ABDOMEN**

| | |
|---|---|
| Cervical spine | Lumbosacral spine |
| Thoracic spine | Sacrum & Coccyx |
| Rib series | Cross-Table Lateral Spine |
| Sternum | Sacro-Iliac Joints |
| Scoliosis Series | Trauma Hip (with cross table lateral) |
| Acromioclavicular Joints | Chest, Wheelchair or Stretcher |
| Chest, Decubitus | Chest, Pediatric (age 6 or younger) |
| | Pediatric ABD |
| | Geriatric Routine Chest (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging) |
| Abdomen, Supine & Erect | Abdomen, Decubitus |

**4. CONTRAST STUDIES, CRANIUM AND PORTABLES**

| | |
|---|---|
| Routine Skull Series | Esophagus Study |
| Paranasal Sinuses | UGI Series |
| Facial Bones | Small Bowel Series |
| Mandible Series | Barium Enema (Single/Double) |
| | Intravenous Urography (IVP) |
| | Portable Orthopedics |
| Orbit Series | Portable Abdomen |
| Nasal Bone Study | Portable CXR |
| Larynx (soft tissue neck) | Myelography- |
| Retrograde pyelography | Arthrography |
| C-arm procedure-2 | Cystography or Cystourethrography |
| Portable Pediatric study | |

**5. GENERAL PATIENT CARE**

| | |
|---|---|
| CPR Certification | Venipuncture |
| Vital Signs – Blood Pressure | Vital Signs – Temperature |
| Vital Signs – Pulse | Vital Signs – Respiration |

Vital Signs – Pulse Oximetry Transfer of Patient
Sterile and Medical Aseptic Technique
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)

### 6. FINAL COMPETENCIES – 4 Challenging Radiographic Procedures

Upon completion of the recommended number of category examinations, the student will prepare for the Final Competency Examination. The Final Competency Examination will be a random selection of radiographic examinations **selected by an assigned faculty member** and may be subject to change. The distribution will be as follows:

| | | | |
|---|---|---|---|
| Trauma Tabletop Extremity | 1 | Portable Abdomen | 1 |
| Multiple Bucky Bone Work | 1 | Portable Chest | 1 |

### 7. ELECTIVE ROTATIONS

Upon completion of CLE 41, students will be assigned to elective rotations in CT, MRI, and Mammography. Prior to entry of the clinical phase of the program student's will be required to complete a documented review of PowerPoints, on e-portfolio**, this must be submitted to their CI before any advanced imaging rotation.**

## XVI. MINIMUM SUCCESS CRITERIA

**The category examination evaluation will be initiated by the student. The final competency exam will be given at the discretion of an assigned faculty member.**

| | | |
|---|---|---|
| Categories | I through V | 77% |
| Category | V | 87% |

For a student to remain in the program, the student must:

C**omplete ALL competencies assigned in each semester.**

Receive a minimum of a 77% for an overall semester/session grade for CLE 11 through CLE 51, and a minimum of 87% for CLE 61.

- All simulated examinations will earn a numerical grade after film review.
- Receive a minimum of a 77% grade on each clinical evaluation. A student who fails a clinical evaluation will be required to return to the lab for counseling in the area of the failed examination. The student is also responsible for reviewing the text on the subject matter before coming in for lab counseling. The student will be required to pass a simulated lab evaluation on the failed examination. It is the students' responsibility to make an appointment for counseling, at BCC, with the

Clinical Coordinator or the faculty performing the counseling session. The student will not be eligible to acquire new documented practices or attempt an additional reevaluation on the failed examination until the lab counseling or evaluation process has been completed. Once the student has been successfully counseled, and lab evaluated he/she is eligible to return to the clinical participation stage for additional experience in the area of the failed exam. The student will now be required to perform and document a minimum of two (2) additional practice exams in the area of the failed exam before initiating a clinical evaluation. Documentation of the exams must be evidenced on the "Student Reevaluation Form."

**The Reevaluation form must be presented to the Clinical Instructor PRIOR to reevaluation. Failure to present this form BEFORE reevaluation will result in a "0" (ZERO) grade for that competency.**

A student who fails two (2) **reevaluations** in a category will be terminated from the Radiologic Technology program. This will apply to two (2) **reevaluations** of the same or different exams.

A student's **reevaluation grade** will be limited to **a maximum** of 77% regardless of the actual grade achieved.

**Any competency that is attempted during the program (mandatory or elective) for which a student receives a failed grade must be reevaluated before graduation.**

## XVII. CLINICAL EDUCATION – TIME FRAME

The program does not permit students to be scheduled for more than 40 hours per week in clinical and academic activities combined. However, clinical hours have been carefully determined to best support student learning in the clinical environment and facilitate competency achievement.

**First Year**

| | | |
|---|---|---|
| CLE 11 | Clinical Radiography I | 6 hrs/wk-(14 weeks) |
| CLE 15 | Clinical Radiography II | 30 hrs per week-(3 weeks) |
| CLE 21 | Clinical Radiography III (Category I & II) | 12 hrs/wk- (14 weeks) |
| CLE 31 | Clinical Radiography IV (Category I –II-III & Electives) | 24-35 hrs/wk.(4-8 wks) |

**Second Year**

| | | |
|---|---|---|
| CLE 41 | Clinical Radiography V (Category III & IV & Electives) | 18 hrs/wk (14 wks) |

| | | |
|---|---|---|
| CLE 45 | Clinical Radiography VI (Category IV & Electives) | 30 hrs/wk-(3weeks) |
| CLE 51 | Clinical Radiography VII (Category IV & Electives) | 18 hrs/wk- (14 wks) |
| CLE 61 | Final Evaluations (Category V) | 24-35 hrs/wk.(4-8 wks) |

## XVIII. CLINICAL GRADES:

Students are required to complete all mandated clinical courses during the assigned semester (e.g., CLE 11, Fall Semester First Year). Clinical competencies that have not been completed during the assigned semester will result in an INC (work for the course is incomplete, but student otherwise passing the course). A student with a grade of INC may not register for the subsequent level course in a sequence without permission from the Clinical Coordinator or Program Director. Completion of all clinical education requirements is one of the criteria for eligibility to take the State Licensure and American Registry of Radiologic Technologist (ARRT) examinations after graduation.

**A student must maintain the minimum of a C+ (77%) average in CLE 11, 15, 21, 31, 41, 45 and 51. Failure to maintain the required grade of C+ in the above courses and a B (85%) in CLE 61 will result in dismissal from the Program.**

| | | |
|---|---|---|
| CLE 11 | Final Laboratory Evaluations | 60% |
| | Midterm Laboratory Evaluation | 10% |
| | Professional Development | 25% |
| | Podcast Quizzes (3) | 5% |
| | Total: | 100% |
| CLE 15 | Clinical Evaluations (Category I&II) | 60% |
| | Professional Development | 40% |
| | Total: | 100% |
| CLE 21 | Clinical Evaluations (Category I&II) | 60% |
| | Professional Development | 40% |
| | Total: | 100% |
| CLE 31 | Clinical Evaluations (Categories II&III) | 50% |
| | Professional Development | 40% |
| | Image Evaluation | 10% |
| | Total: | 100% |

| | | |
|---|---|---|
| CLE 41 | Clinical Evaluations (Categories III&IV) | 60% |
| | Professional Development | 40% |
| | Total: | 100% |
| CLE 45 | Clinical Evaluations (Category III&IV) | 60% |
| | Professional Development | 40% |
| | Total: | 100% |
| CLE 51 | Clinical Evaluations (Category IV) | 60% |
| | Professional Development | 40% |
| | | 100% |
| CLE 61 | Final Evaluations | 50% |
| | Professional Development | 40% |
| | Clinical Exit Exam | 10% |
| | Total: | 100% |

CLINICAL HANDBOOKS IS AVAILABLE FOR VIEWING ON BLACKBOARD CLINICAL COURSE SHELL AND HARD COPIES ARE AVAILABLE ON CAMPUS IN THE RADIOLOGY DEPARTMENT. STUDENT MAY BE ASKED TO LEAVE CLINICAL SETTING IF EXPERIENCE RECORDS, ID, OR FILM BADGE IS NOT WITH STUDENT. CLINICAL EXPERIENCE RECORDS MUST BE KEPT BY THE STUDENT, AND MUST BE PRODUCED FOR THE CLINICAL INSTRUCTOR UPON DEMAND FOR REVIEW AND/OR Before A CLINICAL EVALUATION. NO STUDENT WILL BE PERMITTED TO COMPLETE MORE THAN TWO (2) EVALUATIONS DURING THE LAST FULL WEEK OF THE SEMESTER/SESSION.

## XIX. GRADUATE COMPETENCIES

Upon graduation, the student will be able to demonstrate competence in the General Education Proficiencies and Student Learning Outcomes set forth by the Radiography Program and Bronx Community College.

A. Apply knowledge of anatomy, physiology, positioning and radiographic techniques to accurately demonstrate anatomical structures on a radiograph or other imaging receptor.

B. Determine exposure factors to achieve optimum radiographic techniques with minimum radiation exposure to the patient

C. Evaluate radiographic images for appropriate positioning and image quality.

D. Apply the principles of radiation protection to the patient, self, and others.

E. Provide ethical behavior when dealing with all aspects of patient care and comfort in accordance with professional standards.

F. Recognize emergency patient conditions and initiate lifesaving first aid and basic life-support procedures. Recognizing drugs, their interaction with and potential hazards to the body.

G. Detect equipment malfunctions, report same to the proper authority and know the safe limits of equipment operation.

H. Exercise critical thinking, independent judgment, and discretion in the technical performance of medical imaging procedures.

I. Participate in radiologic quality assurance programs.

J. Provide patient/public education related to the profession, radiographic procedures, and radiation protection/safety

*The information in this handbook is current at the time it is printed. However, policies, guidelines, and procedures are subject to change without notice. The Director of the Radiologic Technology Program or his/her designee will make final interpretation of program policies and procedures.*

***Accreditation and Compliance concerns can be directed to the JRCERT***
***Joint Review Committee on Education in Radiologic Technology***
***at***
***(312) 704-5300 or jrcert.org***

***The Program reserves the right to amend the preceeding rules and regulations as deemed necessary.***

## Receipt of Clinical Handbook Form

**I, _____,**

have been given a copy of the revised 2019-2021 Clinical Handbook. I have read and understand the content of this handbook and agree to comply with the criteria set forth within during all phases of my clinical practicum.

*Student's signature:* _____

*Date:* _____

PREGNANCY DECLARATION FORM

I, _____ declare to Bronx Community College Radiologic Technology Program officials, that I am declaring my pregnancy. For the purposes of understanding any medical risks, my estimated conception date is _____. I understand my pregnancy will not prohibit me from working in or frequenting radiation areas and I may operate radiographic equipment as indicated by my level of education and experience. I understand that I have the right to discuss the situation, risks, and possible consequences with the Radiation Safety Office at the clinical site I am assigned.

Signature of Student

Signature of Program Official

VOLUNTARY PREGNANCY UNDECLARE FORM

I, _____, am undeclaring my pregnancy. Effective date_____.

Signature of Student

Signature of Program Official