Radiography Program Student Handbook

Student Success Manual

Department of Health Sciences

Revised August 2022
Stacey A. Stewart B.A, R.T. (R)
Clinical Coordinator
Patricia Agcaoili HCMG-BAS, R.T.(R)(CT)
Radiography Program Director

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Welcome

Welcome to the Pensacola State College Radiography Program. This handbook describes the program policies for students and will serve as a guide to both academic and clinical responsibilities. The policies in this handbook have been developed specifically for Pensacola State College Radiography students.

If you have any questions at any time, please speak with the Program Director or Clinical Coordinator. Any material in this handbook is subject to change. Students will be informed of these changes as they occur.

Radiography Program Mission Statement

The mission of the Pensacola State College Radiography Program is to graduate radiographers who are proficient in radiation safety and patient care and who meet all competency standards required by the American Registry of Radiologic Technologists (ARRT).

Goals and Student Learning Outcomes

The program's curriculum is designed to integrate the didactic with the clinical experience. Under the direct supervision of the faculty, the student will attain proficiency in essential clinical competencies for practicing healthcare through participation in laboratory and clinical sessions followed by experiences at clinical sites with direct patient care.

Radiography Program Goals and Student Learning Outcomes

Goal 1: The student will be clinically competent.

- The student will practice the safe application of radiation at all times, thereby protecting self, patients, and other personnel.
- The student will produce diagnostic radiographs completely in the context of all radiographic criteria and techniques.

Goal 2: The student will demonstrate communication skills.

- The student will use appropriate medical terminology and complete information in written and oral communication relative to patients, radiographers and other medical staff.
- The student will discuss procedures and care strategies patients in a manner appropriate to the patient.

Goal 3: The student will develop critical thinking skills.

- The student will adapt to new procedures, situations, and resources to meet the needs of the patients, routine and trauma.
- The student will critique images to determine quality and provide suggestions for correction.

Goal 4: The student will model professionalism.

- The student will demonstrate a strong work ethic related to the profession.
- The student will participate in continuous learning for ongoing development of knowledge and skills in the profession.

General Education Learning Outcomes

1. Demonstrate effective reading, writing, speaking, and listening skills necessary as a productive member of the healthcare team.
2. Demonstrate mathematical skills easily and quickly.
3. Apply scientific concepts.
4. Identify and solve problems, applying knowledge in a critical and ethical manner.
5. Function effectively in a team environment.
6. Evaluate and use information technology effectively.

Accreditation

The Pensacola State College Radiography Program is currently accredited by:

The Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive
Suite 2850
Chicago, Illinois 60606-3182
(312) 704-5300 www.jrcert.org

Any student who satisfactorily completes the training program and is recommended by the Program Director is eligible to take the certifying examination of the American Registry of Radiologic Technologists. The College reserves the right to refuse any student participation in this examination on the basis of unsatisfactory scholastic or clinical achievement and/or poor attendance.

The American Registry of Radiologic Technologists requires that candidates for the registry examination be of good moral character. Generally, the conviction of either a felony or misdemeanor indicates a lack of moral character for registry purposes. Those who have been convicted of a crime may be eligible for registration if they have served their entire sentence, including parole, and have had their civil rights restored.

An individual may file a request for pre-application review with the ARRT in order to obtain a ruling on the impact of the situation on their eligibility for certification or registration. Contact the American Registry of Radiologic Technologists at (651) 687-0048 or www.arrt.org. Click the Ethics Pre-Application Process.

To those who have passed the examination and are otherwise eligible, a certification shall be issued which confers upon the applicant the right to use the title Registered Technologist and its abbreviation "R.T. (R) ARRT" in connection with his or her name as long as the certification shall be in effect.

Program Standards

Joint Review Committee on Education in Radiologic Technology (JRCERT) Program Standards

Standards for an Accredited Educational Program in Radiologic Sciences adopted by

The Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, Illinois 60606-3182
(312) 704-5300

These standards are posted on the bulletin board in the back of classroom 3224, Building 3200B, available in this Student Handbook, and on the JRCERT website: http://www.jrcert.org/programsfaculty/jrcertstandards/.

Standard One: Accountability, Fair Practices, and Public Information:

The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Standard Two: Institutional Commitment and Resources:

The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Standard Three: Faculty and Staff:

The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Standard Four: Curriculum and Academic Practices:

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

Standard Five: Health and Safety

The program's curriculum and academic practices prepare students for professional practice. The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

Standard Six: Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement:

The extent of a program's effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.

Joint Review Committee on Education in Radiologic Technology Resolution of Complaint Policy

It is the policy of the Pensacola State College Radiography Program to comply with all standards set by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The Radiography Program assures that all complaints regarding allegations of non-compliance with the JRCERT Standards will be resolved in a timely and appropriate manner. A record of such complaints and their resolutions will be kept in a file in the Program Director's office.

- If a student feels that the program is in non-compliance with the JRCERT STANDARDS, the student may discuss the situation with the Program Director or Clinical Coordinator.
- The complaint will be discussed with the student and Program Director and all attempts will be made to come to a final resolution
- If the complaint cannot be resolved at the Program director level, then the complainant can appeal to the Department Head of Health Sciences.
- If the complaint cannot be resolved at the Department Head level, then the complainant can appeal to the Dean of the Warrington Campus.
- Every attempt will be made to resolve valid complaints within a ten-workday period.
- 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
Phone: (312) 704-5300
Fax: (312) 704-5304
E-mail: mail@jrcert.org
Website: https://www.jrcert.org/accreditation-for-students/allegations/

Reporting Allegations

The JRCERT is required to be responsive to allegations of non-compliance with any of its Standards. Please be advised the JRCERT cannot advocate on behalf of any one student. 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. The JRCERT takes seriously and follows up appropriately any allegation that an accredited program is not maintaining compliance with its accreditation standards. Before the JRCERT will take action to investigate the program, however, it must be assured that the complainant has addressed the matter internally. Did you follow the program's/institution's due process through to its final appeal? If you have addressed the matter internally and wish to make a formal complaint, please complete an allegation reporting form. The allegations must reference the specific accreditation standards/objectives with which you believe the program to be in non-compliance. The Standards for an Accredited Program in Radiologic Sciences can be found under the Accreditation Information menu.

The American Registry of Radiologic Technologists (ARRT) Code of Ethics

The Code of Ethics forms the first part of the Standards of Ethics. The American Registry of Radiologic Technologists Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the health care team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients.

Code of Ethics

1. The Registered Technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The Registered Technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of humankind.

3. The Registered Technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance. Familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.

4. The Registered Technologist practices technology founded on theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purposes for which they have been designed and employs procedures and techniques appropriately.

5. The Radiologic Technologist assesses situations, exercises care, discretion, and judgment, assumes responsibility for professional decisions, and acts in the best interest of the patient.

6. The Registered Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The Registered Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the health care team.

8. The Registered Technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

9. The Registered Technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

10. The Registered Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues, and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skill is through professional continuing education.

11. The Registered Technologist refrains from the use of illegal drugs and/or controlled substances which result in impairment of professional judgement and/or ability to practice radiologic technology with reasonable skill and safety to patient.

Program Faculty, Clinical Staff, and Professional and Administrative Staff

Program Faculty

Program Director

Mrs. P. Agcaoili HCMG-BAS, R.T. (R)(CT) (850) 484-2302
pagcaoili@pensacolastate.edu

Clinical Coordinator

Mrs. S. Stewart B.A., R.T. (R) (850) 484-2304
sstewart@pensacolastate.edu

Clinical Staff

Mrs. A Barbour, R.T. (R) Clinical Instructor
abarbour@pensacolastate.edu

Mrs. B Wright, R.T. (R)(M) Clinical Instructor
bwright@pensacolastate.edu

Mrs. R. Bacon, R.T. (R) Clinical Instructor
rbacon@pensacolastate.edu

Ms. T. Gurtowsky R.T. (R) Clinical Instructor
tgurtowsky@pensacolastate.edu

Mrs. A. Ramos-Stewart, R.T. (R)(M) Clinical Instructor
aramosstewart@pensacolastate.edu

Mrs. J. Daigrepont R.T. (R) Clinical Instructor
jdaigrepont@pensacolastate.edu

Professional and Administrative Staff

Dr. Dusti Sluder, Dean, Health Sciences, Warrington Campus (850) 484-2230

Dr. Mitzie Sowell, Department Head, Health Sciences, Warrington Campus (850) 484-2301

Mrs. Jeanine Dickinson, Administrative Assistant, Health Sciences (850) 484-2308

Radiography Program

PENSACOLA STATE COLLEGE

Policies and Procedures

Department of Health Sciences

Professional Behaviors

Appropriate professional behaviors are expected of all members of the healthcare team. Four professional behaviors are identified. These expectations apply equally in the classroom and clinic. Each is clarified with a list of supporting behaviors. This list is not intended to be all-inclusive.

1. Demonstrate dependability and punctuality.
    a. Attend all classes, labs, and clinical assignments.
    b. Arrive for class, lab, and clinical with ample time to be prepared to participate at the designated starting time.
    c. Leave class, lab, and clinical at stated time or when dismissed.
    d. Contact instructor by phone prior to absence from class or clinical.
    e. Complete and turn in assignments on time.
    f. Accept responsibility for actions and outcomes.
    g. Take full advantage of time available in labs and clinic by staying on task and involved.
    h. Use time effectively.
    i. Follow assigned lunch schedule during clinical assignments.
2. Work effectively and respectfully in the clinical setting.
    a. Stay in assigned areas unless permission granted by clinical instructor.
    b. Accept assignments from clinical instructor.
    c. Attend to the comfort, safety, and modesty of all patients.
    d. Continually maintain patient confidentiality.
    e. Demonstrate a positive attitude toward feedback.
    f. Develop a plan of action in response to feedback.
    g. Critique own performance with the standards set by the program.
    h. Maintain professional demeanor at all times.
3. Work effectively and respectfully with peers and instructors demonstrating mature communication skills.
    a. Avoid interrupting others.
    b. Respond during interactions using appropriate verbal and nonverbal style.
    c. Communicate in respectful manner.
    d. Respect personal differences of others.
    e. Use correct grammar and expression in verbal communication.
    f. Avoid use of offensive statements.
    g. Write legibly and complete assignments with acceptable quality.
    h. Listen actively.
    i. Recognize any limitation of knowledge regarding subject matter.
4. Assume responsibility for personal and professional growth.
    a. Recognize problem or need for remediation.
    b. Assume responsibility for own actions.
    c. Demonstrate a positive attitude toward feedback.
    d. Communicate with the individual giving feedback.
    e. Assume responsibility for all learning.

Academic Requirements

The didactic or academic portion of the program has been coordinated with the clinical experience to best facilitate the student radiographer's comprehension. The student must obtain 75% or better in each Radiography course and passing grades in General Education courses. If the student is unable to retain a 75% average before the final examination in the Radiography courses, it is the responsibility of the student to receive tutoring or additional instruction.

Book Purchases

Books may be purchased directly from the Bookstore located in the Student Affairs Building on the Warrington Campus. Books will not be issued until they are paid for. Actual prices will not be quoted until the Bookstore receives invoices from the publishing companies.

Energized Lab on Campus

A faculty member must always be present during the use of the energized laboratory on campus in Room 3225.

CPR

Each student is required to provide a copy of his or her CPR card for Healthcare Providers to the program faculty. Failure to comply with this requirement may result in the revocation of clinical privileges.

The student will retain the original and copies in his or her clinical portfolio.

Course Attendance Policy

Each student is expected to attend all scheduled class, lab, and clinical sessions. Course material may contain subject matter that may be difficult to understand if the student elects not to be present for the lecture or lab. The instructor will not repeat missed material.

When instructors are asked to provide a recommendation or reference for scholarships or employment purposes, the instructors take many factors, including attendance, into consideration.

If a student expects to be late or absent, the instructor must be notified prior to the beginning of class. The program follows a stricter policy than the general attendance policy in the Pensacola State College Student Handbook for maximum allowed absences in lecture classes. See course syllabi for attendance policy for the Radiography Program core courses.

If a student misses a lecture, it is the student’s responsibility to notify the instructor to obtain missed assignments or information.

If the student misses a test or quiz, it is the student’s responsibility to make arrangements with the instructor to make up the test or quiz on the next class day.

Clinical Attendance and Mileage Policy

If a student is absent from clinical rotations, he or she will not be able to perfect the required skills of a radiographer and may fall behind in obtaining clinical knowledge. Also, clinical sites view clinical rotations as an opportunity to observe future employees.

1. Assignments:
    a. Clinical rotations are currently assigned to the student during the day.
    b. Rotations to various facilities and areas in the Imaging Department are assigned only by the program faculty.

2. Mileage:

    In addition to the didactic course work (classroom) conducted on the Warrington Campus, students are assigned to various clinical facilities. It is the student's responsibility to arrive at and depart from clinic in a timely fashion. The program currently assigns students to Baptist Hospital, Medical Center Clinic, Sacred Heart Hospital, Santa Rosa Medical Center, Gulf Breeze Hospital, Andrew's Institute, and West Florida Hospital. Students are assigned for the entire day of clinic.

From the Warrington Campus;

- Baptist Hospital 5 miles
- West Florida Hospital /Medical Center Clinic 12 miles
- Sacred Heart Hospital 9 miles
- Santa Rosa Hospital 28 miles
- Gulf Breeze Hospital/Andrew's Institute 11 miles

3. Absences:
    a. If a student will be absent or significantly late (more than 30 minutes), he or she must notify the Clinical Instructor at the assigned facility no later than 8:15am. If assigned to Gulf Breeze/Andrew's or Santa Rosa Medical Center, you must e-mail your Clinical Instructor by 8:15am since there is not a voicemail system in place.
    b. The student must also call and leave a message with the Clinical Coordinator at (850)484-2304 by 8:15am.
    c. Failure to notify the Clinical Instructor and Clinical Coordinator of any absence/tardy will result in a final grade reduction of two (2) percentage points.
    d. Important phones numbers to call when absent or tardy:

<u>Pensacola State College</u>:	
Program Director	484-2302
Clinical Coordinator	484-2304
<u>Baptist Hospital</u>:	
Radiology/Imaging Department	434-4917
Instructors' voice mail	437-8764

Sacred Heart Hospital:

Radiology/Imaging Department	416-2960
Instructors' voice mail	416-6874

West Florida Hospital/MCC:

Radiology/Imaging Department	494-5344
Instructors' voice mail	494-4903

Santa Rosa Medical Center:

Radiology/Imaging Department	626-5170

Gulf Breeze Hospital/Andrew's

Radiology/Imaging Department	934-2353

4. Attendance:
    a. Students are allowed 30 minutes for lunch. Student are **NOT** allowed to leave the premises during their lunch break.
    b. Program clarification of clinical attendance:

    A Radiography student must be in productive attendance for a minimum of 5 hours in order for the time to be counted as an infraction. Otherwise, any day with less time in clinical participation will be viewed as a full day absence from clinical.
    c. One (1) clinical day may be missed for emergency purposes in the fall and spring semesters and one (1) clinical day may be missed in each of the summer semester sessions A, B or D, for emergency reasons. Emergency absences may not be accumulated from one semester to another. Tardiness is not a professional behavior and is frowned upon by the program and clinical facilities.
    d. If the student goes over the allowed missed days/ tardies, they will be put on attendance probation. They will be given a written notice of the probation that they can add comments to and must sign to show they have been notified of the overage. The student will be given an opportunity during finals week to make up one day over. If they required more than one day, they will need to speak with the clinical coordinator and program director concerning their ability to continue in the program.

5. Punctuality:
    a. Students may sign in only 5 to 7 minutes before the hour, but then must proceed directly to the clinical assignment.
    b. The student must be prepared to participate at the scheduled time.
    c. Students must adhere to assigned times for lunch breaks.
    d. Students must not leave the department unauthorized.
    e. Students must depart on time.

6. Clinical Behavior:
    a. As a representative of Pensacola State College's Radiography Program and a guest at the affiliated hospitals, each student is expected to conduct himself or herself in a professional manner while in attendance at any clinical facility.
    b. The student is strongly encouraged to be assertive in educational experiences. The hospital staff has neither the time nor obligation to seek out the reluctant student.

7. Clinical Schedules:
    a. Clinical schedules will be posted at the beginning of each term.
    b. Changes will be made in assignments and rotations only by the faculty of the program.
    c. The following pertains to student schedules:
    If there are no procedures scheduled in the area to which the student is assigned, the student should request reassignment from the clinical instructor. If a clinical instructor is not readily available, do routines where needed.

Emergency Closing

If PSC has cancelled classes, the student is not to attend clinic or on-campus classes. Classroom material will be covered at a later date. If classes have returned to their regular schedule and the student believes that they cannot make it to class or the clinic site due to road conditions, it will be treated as an absence. Please make sure that you log into and enroll in PSC Alert for the latest information concerning school closures. https://www.pensacolastate.edu/pscalert/. The PSC Alert system allows any current student, faculty, or staff members to designate several different ways to receive emergency alerts: SMS text messaging, voice messaging via any telephone number, and deliver of email to college or non-college email address.

Clinical Appearance

The Radiography student is not only representing Pensacola State College during clinical rotations, but he or she is also a guest at the affiliated clinical sites. The Radiography student also represents the clinical facility to which the student is assigned during his or her clinical hours. Therefore, it is the policy of the Radiography Program to have students appear professional at all times during clinical rotations.

The following is the clinical dress code for the Radiography Program. Each student will adhere to this policy throughout all clinical assignments and rotations.

Dress Code

Uniform Requirements:

- Required scrub pants selected by the program
- Ankle length (rolled up pants are not permitted), worn over socks
- Pants worn at waist level at all times; saggy pants are not permitted.
- Bottom of pants cannot drag on ground and need to remain above the level of the sole of the shoe heel. (No elastic in the bottom hem.)
- Required print or solid scrub top selected by the program
- Required scrub dress selected by program, if student wishes to wear a dress
    - Minimum length - bottom of dress at knee joint
    - Maximum length -4" below knee joint

- Only black leather shoes with black laces are acceptable. Black shoes with a white sole and/or a small white logo will be permitted. Shoe must be 95% black, no other colors allowed. Comfortable shoes are advisable. No open toed or open backed shoes allowed. Address any questions or concerns with Clinical Coordinator and/or Program Director.
- Only black socks are worn with black shoes and must be above the ankle. Solid black panty hose/tights are to be worn with uniform dresses.
- Underwear will be worn.
- Picture ID tags issued by the College are worn on the left side of the uniform top above the pocket level.
- Radiation monitoring device (dosimeter) is worn at the collar level.
- Black lab jacket or coat may be worn.
- Black turtleneck or crew neck (no scooped necklines and must cover collar bones) pullovers with long sleeves to the wrist and tucked into pants may be worn under uniform top. No motifs, designs or figures are to be displayed on shirt under uniform top.
- A black short sleeve t-shirt with crew neck (no scooped necklines and must cover collar bones) must be worn under the scrub top. The black t-shirt sleeve must not hang below the length of the uniform sleeve and must be tucked into pants. No motifs, designs or figures are to be displayed on shirt under uniform top.

Accessories

Hair:

- Must be worn away from the face and completely off the uniform collar
- Any loose hair falling onto the face when student bends forward will be pinned back behind the ears with clips
- Long hair must be worn above the collar level and pinned securely to the head.
- Therefore, swinging ponytails, drooping buns, buns falling apart (messy bun), etc. are not acceptable. If the ponytail hangs, it must be pinned securely to the head
- Must be clean, dry, and combed
- Acceptable hair accessories:
- Only plain barrettes are permitted
  - Color -either black, dark brown, or your hair color
  - Length - 5" or smaller
  - Width - 2" or smaller
  - Words, beads, or ornaments attached to barrettes are not permitted
- Small bows (functioning as rubber bands) must be either white, black, or uniform color.
- Rubber bands of neutral color
- A black fabric surgical cap can be utilized to contain hair. Cap must not hang below collar and must cover all hair.
- Hair is worn in such a manner as not to interfere with the ability to perform duties or attend to the patient, such as constantly touching hair with hands.
- Overall, the student's hair and hairstyle must present a professional appearance.
- Outlandish hairstyles or coloring are unprofessional, therefore unacceptable.

Beards and Mustaches:

- Must be neat, trimmed, combed, and clean at all times
- Do NOT arrive at the clinical site unshaven in an attempt to grow a beard
- Shadow beards are not permitted.

Jewelry:

- Limited to the following articles:
- Plain wedding band
- Analog watch of professional appearance with a second hand
- One pair of pierced earrings smaller than a dime may be worn with only one earring in each ear lobe.
- Hoops or gages are not permitted.
- If student has body piercing, no jewelry may be visible. This includes tongue, eyebrow or nose piercings.

Cosmetics:

- Professional is the key word.
- Makeup will always remain professional and subtle in appearance.
- Only acceptable makeup:
- Lightly applied black or brown mascara
- Lightly applied pale colored blush
- Lightly applied pale colored lipstick
- Lightly applied eyeliner
- Lightly applied foundation

- Perfume and scented aftershave lotion are not acceptable.
- **Students who have a strong odor of perfume, aftershave, body odor, or cigarette smoke will be sent home with an unexcused absence for the day.**
- **Uniforms that have a spoiled smell will result in student being sent home with an unexcused absence for the day.**
- Nail polish or nail strengthener are not to be worn.
- Nails must be clean and trimmed.
- The wearing of artificial fingernails will not be permitted. The possibility of fungal infection is a concern in patient care situations. This is a hospital policy.
- Hand lotion may not be worn. Hand lotion can break down the integrity of disposable gloves.
- Tattoos – First year cohorts, all visible tattoos must be covered or concealed during the student's clinical experiences. If tattoos are on one arm, both arms must be covered. If located on back of neck, behind ear or on hands/finger, these tattoos may be left uncovered with the approval of the program director and/or clinical coordinator. Each tattoo will be evaluated on a case by case basis; If tattoo is unable to remain uncovered it must be covered with band aide or turtleneck shirt. Second year cohorts may have tattoos visible unless it is determined to be excessive, offensive or unacceptable for the assigned clinical site. If tattoos are on one arm, both arms must be covered. All tattoos will be reviewed by the clinical coordinator and/or program director. If tattoos are deemed to be unacceptable, band aides or a turtleneck/long sleeve shirt may be required.
- No gum chewing during clinical hours.

Items required for every clinical day:

- Ball point pen
- Right and left radiographic markers (purchased at Warrington Campus Bookstore)
- CPR mouthpiece (available at Warrington Campus Bookstore)
- Radiation monitoring device - dosimeter (provided by the program)
- One pair non-sterile examination gloves (provided at the hospitals)
- Technique/Procedure Books (explanation of type, development and content during first semester)
- Small note pad
- Goggles/ face shield

Articles **NOT** allowed to be carried on student during clinical hours

- Cigarettes
- E-cigarettes and vape pens
- Any tobacco products
- Cell phones, earbuds, Bluetooth devices etc.

Cell Phones and Other Communication Devices

Cell phones, earbuds, and other such electronic devices must be turned off during class, lab and clinic times. Communications by electronic devices, including but not limited to instant messaging, text messaging, and telephone calls, during class is prohibited unless expressly designated as part of the learning activities. In certain situations (e.g. during exams, etc.) students may be required to temporarily deposit cell phones and other electronic communication devices with the instructor for the duration of specific class activities. Where emergency or employment situations require access to electronic communication services, arrangements may be made in advance with the instructor.

CELL PHONES OR OTHER COMMUNICATION DEVICES ARE STRICTLY PROHIBITED DURING DIDACTIC AND CLINICAL COURSES. NO EXCEPTIONS.

Failure to comply with the dress code or accessories requirements will result in a student being dismissed from clinical for the day and loss of professionalism points.

Communicable Disease Policy

The Radiography Program must ensure that each student is informed about the Communicable Disease Policy as well as that of the clinical education setting to which he or she will participate. Any student with any infectious processes must contact his or her clinical instructor at the clinical facility. In the event of an exposure to a communicable disease, the student must immediately contact the clinical instructor at the clinical site. The clinical instructor must complete an incident report form and forward a copy to the Clinical Coordinator. The clinical instructor should instruct the student to contact his or her family physician to determine what tests and treatments should be provided. The student should take the initiative to read all policies governing safety and protection of patient and personnel.

Any student with any infectious process listed below must report to the clinical instructor before assignment:

- Positive Covid-19 test (phone/email coordinator and Instructor, do not report to clinic)
- Fever of 101 degrees or greater
- Sore throat, associated with fever of 101 or above, and swollen lymph nodes
- Flu-like symptoms (respiratory)
- Productive cough with fever or congestion in lungs
- GI flu (diarrhea, nausea, and vomiting)
- Draining of open sores, boils, and burns
- Conjunctivitis (pink eye)
- Diagnosed strep throat
- Scabies
- Herpes labialis (cold sores)

Before the student returns to the clinical assignment, the following must occur:

- The student's temperature must be below 99 degrees.
- The student must be able to fully participate in clinical activities.
- If phlegm is colored, the student should not be in clinic. If phlegm is clear, exhibit good hand washing techniques and wear mask in patient areas.
- If diarrhea is severe, student must remain home from clinic until diarrhea subsides for 12 hours.
- Student must present a note to the clinical instructor from his or her physician stating the student can fully participate in clinical activities without harm to self or others.

Confidentiality and Dissemination of Patient Information

Given the nature of radiography, it is imperative that the student maintain the confidence of patient information that is received in the course of clinical experiences.

Pensacola State College prohibits the gathering of any patient information unless required for purposes of treatment, payment, or health care operations; discussions of Protected Health Information (PHI) within the organization should be limited.

Acceptable uses of PHI within the organization include but are not limited to exchange of patient information needed for the treatment of the patient, billing, and other essential health care operations, peer review, internal audits and quality assurance activities. Appendix A

Infection Control Policy

The purpose of the Infection Control Policy is to ensure the safety of patients, families, health care workers, and students from infectious diseases.

Infection control is the use of techniques and precautionary methods in order to prevent the transmission of contagious, nosocomial infections, and AIDS. The following are general infection control (Universal Precautions) guidelines.

1. Remove jewelry, such as rings with stones and nail polish. They harbor microorganisms that are difficult to remove. (The wearing of a plain wedding band is acceptable provided that the ring(s) is cleaned often.)
2. Always wear freshly laundered uniforms. If clothing becomes soiled with blood/body fluids during a clinical assignment, the student should contact the clinical instructor immediately. The clinical instructor will instruct the student to change to clean clothing as soon as possible to avoid any potential infectious process to the student or another patient.
3. Practice good hand washing techniques. Always wash hands before and after any patient contact. This includes cleaning of equipment after contact with a patient.
4. Students should use the following precautions when so prescribed:
    a. Wear gloves
    b. Wear protective eye wear (goggles)
    c. Wear appropriate barriers or gowns
    d. Dispose of all contaminated wastes into its proper disposal site(s) or container(s)
    e. Clean all surfaces with an approved disinfectant or germicide before and after a radiographic examination
    f. Wash hands before and after contact with patients

Critical Incident Policy

1. A critical incident is defined by the instructor (based on the expertise and knowledge of the instructor) and/or the Program Director, supported by established standards of practice as any incident in which the health or the wellbeing of the client or the threat of same is threatened or jeopardized due to the action of a student. If the clinical instructor prevents an error, the student is still at fault.

2. A critical incident is also defined as any behavior which undermines the professionalism of the institution, program and facilities. A code of conduct violation may be filed as well as critical incident paperwork.

3. A critical incident is grounds for dismissal from the course and student will earn a failing grade of zero in the course and will be unable to continue in the radiography program. The student may be deemed not in good standing and may not be able to return to the program. Program officials may withdraw student from the cohort at this time. Additionally, program officials may report critical incidents to the ARRT Ethics Review Board.

Procedure: Instructor will document a critical incident on the Radiography Student Conference Form. The form will include all pertinent information and the behavior(s) will be identified. The instructor will meet with the student to review the behavior(s), make recommendations, give action plan and obtain student comments and signature. The instructor may also file a **student code of conduct** violation.

Penalty: Disciplinary actions include, but are not limited to, grade reductions, remediation, and dismissal from the program, at the discretion of the Program Director with the recommendations of radiography program associates.

Appeals: See College Grievance Procedures

Examples of Critical Incident Behaviors include but are not limited to:

1. Cheating in any form or fashion – classroom, clinical, laboratory, or elsewhere.

2. Functioning outside the scope of practice.

3. Failure to meet safety needs of patient, self, and others.

4. Radiographing wrong body part or insufficient analysis of orders/request/patient assessment.

5. Unable to successfully complete category during semester assigned.

6. Failure to comply with radiation safety procedures for patient, family, faculty, staff, students, and self – such as failure to shield, excessive radiation, mistaken radiation and so on. This applies to both clinical and laboratory settings.

7. Failure to communicate such things as changes in the client's condition or equipment error etc. Failure to observe ARRT ethics.

8. Breach of confidentiality – HIPPA, gossiping, posting clinical (other) information on social networks etc. Falsifying information – including deception, being party to deceptive practices, other falsification.

9. Abandoning a client to include, but not limited to leaving the clinical area for any reason without reporting the client's condition to the assigned preceptor and/or instructor or leaving the client unattended. Abandoning patient/technologist/faculty member/department etc. while assigned to clinic.
10. Stealing from an affiliated agency or the college.
11. Talking or texting on personal communication devices during RTE courses.
12. Not following Dress Code per Handbook.
13. Being removed from clinical at the request of the facility, faculty, or program.
14. Nonprofessional behavior.
15. Attempting Competencies on exams prior to having all necessary practices – refer to number 2.
16. Accessing PACS or other filing systems without supervision of a technologist.
17. Excessive absenteeism.
18. Failure to complete and maintain health records mandated by clinical facilities, i.e. Vaccinations and CPR.

Smoking Policy

All clinical settings utilized by PSC are "Smoke Free" facilities. There should be no smoking, vaping or using smoke free tobacco products at the clinical facilities. If you go outside during a break and choose to use tobacco products, realize you may be denied re-admittance to facility per facility protocol. If you are released from clinic due to hygiene or other issues, it is an absence. If the behavior continues, it is a critical incidence.

Radiation Safety

The Radiography Program and affiliated hospitals operate under the radiation protection concepts of ALARA (As Low as Reasonably Achievable). This principal of employing proper safety procedures benefits the patient, student, and department staff.

Radiation Monitoring Devices:

Each student will be issued a radiation monitoring device, referred to as a dosimeter. A radiation monitoring device records a person's exposure to radiation. The student must wear the radiation monitoring device at all times during clinical assignments. Students will not be permitted to work in clinical areas without the dosimeter. A new dosimeter is issued to the student every other month to replace the previous device. Each student is responsible f or exchanging hi s /her dosimeter at this time.

Do not wear the radiation monitoring device when having dental or medical radiographs as a patient.

The Radiography Program's policy is to have the student wear the radiation monitoring device at collar level facing outward on his or her uniform. The dosimeter is not to be worn lower than the student's sternal notch.

During fluoroscopy procedures, the student

- Wears the dosimeter at the collar level;
- Does not wear the dosimeter under the lead apron;
- Does not clip the dosimeter onto the lead apron;
- May clip the dosimeter onto the uniform sleeve (may have to fold uniform material) up high at the shoulder level and facing outward; and
- Cannot clip the dosimeter onto the cuff of the uniform sleeve (long or short sleeve).

Radiation Exposure Reports:

At the end of a two-month period, the old dosimeters are sent to Landauer, Inc. to be analyzed. A radiation dosimetry report is returned to the program. The radiation dosimetry reports are made available in the Radiography classroom. The student is responsible for initialing the dosimetry report by his or her name to confirm reviewing the document.

Standards for an Accredited Educational Program in Radiography:

Standard 5.1 The program assures the radiation safety of students through the implementation of published policies and procedures.

PSC Program Response: Program faculty ensure the health and safety of students in the Radiography Program by enforcing the published policies and procedures, all of which are in compliance with the Nuclear Regulatory Commission regulations and the Florida Administrative Code Paragraph 64E-5.313 that compliance can be demonstrate by regulating that the dose from external sources would not exceed 100 mrem (1mSv) in a year to a member of the general public. Students must wear an assigned dosimeter badge at all times when in the radiography classroom, the energized lab on campus, and at their clinic site.

The radiography program radiation policy stipulates students cannot exceed the maximum permissible dosage for occupationally exposed persons as established by state and federal agencies for radiologic health. The Clinical Coordinator reviews the quarterly dosimeter readings report, if a student's dosimeter readings exceed 40 mrem, the student will be counseled, and an investigation will be concluded. Students exposure must be limited to 100 mrem annually. The student must also read and understand radiation safety policies to include ALARA standards and personal radiation monitoring. A signature on the dosimeter report acknowledges that the student has read and understands the dosimeter reading.

Radiation Practice for the Student:

The student will apply proper radiation practices and policies consistent with clinical policies and the scope of practice in Radiography.

1. The student will stand completely behind the lead-lined control area when making an exposure.
2. All doors must be closed in each radiographic room for all examinations.
3. When assisting with fluoroscopic procedures, the student must wear a lead apron, never turn back on source of radiation (unless wearing wrap around apron) and should remain at least two feet away from the table during fluoroscopy (unless assisting patient). Other radiation protection devices, such as thyroid shields, leaded gloves and glasses, are available and should be utilized whenever applicable.
4. When performing portable examinations, the student must stand at least six feet from the radiation source and wear a lead apron when the exposure is being made. If the student is not making the exposure, he/she should leave the room or step further away than six feet.

   If student is making exposure, always announce that exposure will be made and allow time for other individuals to move away from the area before making exposure.
5. The student **will not** stand out and hold a patient during a radiographic exposure. Any concerns should be brought to the instructor's attention.
6. The student will not perform a radiographic exposure on any person that has not been ordered by a physician.

Radiation Practice for the Patient:

Prior to any radiographic examination being performed, a licensed practitioner must provide a proper prescription for the exam ordered. This must be written and include the patient's name, ordering physician, examination to be performed, and indications.

Prior to the patient being radiographed, the student, under the guidance of the instructor or technologist, should follow the steps for informed consent in a confidential manner:

1. Verify the identity of the patient by at least two prescribed methods.
2. Introduce self as a student to the patient.
3. Explain the procedure requested to the patient.
4. Acquire permission from the patient to proceed with the exam.
5. Obtain and record patient history.
6. Female patients of childbearing age are to be asked if there is any possibility of pregnancy.

7. If the information correlates, the examination may be performed.
8. If any information does not correspond, check the orders with the supervising technologist, supervisor, or clinical instructor.
9. The patient is provided with an appropriate lead shield for **all** exposures. (Each incident of not shielding a patient during an exam will result in a shielding probation. Upon the third incident, the student will be dismissed from the program.)
10. The radiation field is to be collimated only large enough to include the anatomical part being radiographed. Radiation field size must never exceed the image receptor size. Exposure factors must produce the minimum amount of exposure needed to obtain a quality radiograph.
11. If a radiograph needs to be repeated, under no circumstances is any student to perform the repeat study without the direct supervision of a technologist or instructor.

MRI Safety

The powerful magnetic field of the MR system will attract iron-containing (also known as ferromagnetic) objects and may cause them to move suddenly and with great force. This can pose a possible risk to anyone in an object's "flight path." Great care is taken to be certain that objects such as ferromagnetic screwdrivers and oxygen tanks are not brought into the MR system area. As a student rotating through MRI, it is vital to remove all metallic belongings in advance of entering the MRI area, including watches, jewelry, and items of clothing that have metallic threads or fasteners.

The powerful magnetic field of the MR system will pull on any iron-containing object in the body, such as certain medication pumps or aneurysm clips. For example, the MRI exam will not be performed if a ferromagnetic aneurysm clip is present because there is a risk of the clip moving or being dislodged. In some cases, certain medical implants can heat substantially when exposed to radiofrequency energy that is used during MRI. Therefore, it is very important to determine if any implant or other internal object that might be affected by entering the MRI area is present.

The magnetic field of the MR system may damage an external hearing aid or cause a heart pacemaker, electrical stimulator, or neurostimulator, to malfunction or cause injury. If there is a bullet or other metallic fragment in the body (e.g., any metallic foreign body), there is a potential risk that it could change position, possibly causing injury.

All students enrolled in the Radiography Program are hereby advised of the potential hazards of MRI. A student may opt out of a specialty rotation in MRI or otherwise be required to enter an MRI room where exposure to strong magnetic energy and radiofrequency waves will occur.

To protect the student from potential injury, the program must assure that each student has been educated in MRI safety and screened for potential devices in the body that might place the student at risk for injury.

The student will be provided MRI safety information and will sign a statement as an indication that he or she understands the potential for personal injury. In addition, the student will complete the screening checklist to avoid risk for injury.

If it is determined that a student is at risk, he or she will be prohibited from entering the MRI department while completing clinical rotations in the Radiography program. Appendix B.

Fire Safety

Every precaution has been taken for the prevention of fires. Never shout "fire." Get to know the location of fire extinguishers and how to operate them. Periodic fire drills are held to familiarize personnel with actions to be taken in case of a fire on campus or at the hospital.

If a fire is discovered, do the following:

- Remove all persons from immediate danger;
- Close door tightly;
- Turn on the fire alarm;
- Call the operator and report the location of the fire;
- Use nearest fire extinguisher as directed;
- Do not turn off lights;
- Take all directions from the fire marshal when he or she arrives; and
- Obey all orders.

Safety Glasses

The Radiography Program's policy for use of safety glasses by students during clinical practicum is as follows:

- Safety glasses are to be worn when assisting or performing procedures that may compromise the student's protection, such as a coughing patient, portable exams when student may be exposed to patient's body fluids, special procedures, and cardiac catheterization procedures.

Gloves

The Radiography Program's policy for the use of gloves by students during clinical practicum is as follows:

- Students are to wear gloves when positioning any body part that has an open wound (wrapped or unwrapped), appearance of blood, seepage, or any possible contaminant.
- Students should be particularly cautious when positioning extremities, such as feet and ankles.
- Gloves are to be worn when handling body fluids, i.e. disposing of urine, vomit, lab samples, etc.
- When wearing gloves for personal protection, do not contaminate other objects, i.e. equipment, x- ray tube, control panel, cassettes, by touching with dirty gloves. If the student has an allergy to latex or is not sure, the student is to use vinyl gloves.

Grading Policy

The Radiography Program grading policy is based on both clinical and classroom achievement. Neither can be used to pull up a failing grade in the other.

The program is divided into terms, and each will be graded independently. Because each term of instruction depends on successful completion of the course material in the preceding terms, it is the policy of the Health Sciences Department that each student must begin his or her course of study at the beginning of the program.

The following grading scale will be used in the program for didactic courses:

93 - 100	A
88 - 92	B+
83 - 87	B
79 - 82	C+
75 - 78	C
72 - 74	D+
70 - 71	D
Below 70	F

The following grading scale will be used in the program for clinical courses:

95 - 100	A
90 - 94	B+
86 - 89	B
82 - 85	C+
75 - 81	C
72 - 74	D+
70 - 71	D
Below 70	F

The American Registry of Radiologic Technology uses a passing score (a scaled grade) of 75%. The overall course grade must be 75% or better, or the letter grade of C. An average below 75% in any Radiography course is not acceptable to continue to the next semester or session in the program. Graduation is not possible with a D+, D, or F in any Radiography course.

The Radiographer must have a thorough understanding and high degree of knowledge and competence in many skills used to treat patients safely and effectively. Grades reflect mastery of this important material.

Late Assignments

- Acceptance of late assignments is at the discretion of the course instructor.
- There will always be a reduction in the amount of credit the late assignments will receive.
- Assignments, such as projects and papers, which have been given a significant amount of time to be completed will receive a significant reduction in credit.
- The instructor may refuse to accept homework or other assignments after the deadline. This will result in zero points being awarded to the assignment.
- Remember, a letter grade of D+, D, or F is unacceptable in any Radiography course and results in the student's discontinuance in the program.

Legal Responsibilities

The student is legally responsible for error, misjudgment, or other acts which may cause injury to the patient. The student may be sued independently of suits against the College, hospital, instructor, or physician. Each student has been assessed a fee for malpractice insurance during registration. All students should have medical or health insurance to cover personal illness or injury while in the program.

Picture ID Tag

Each student will obtain a Pensacola State College picture I.D. tag. This identification badge consists of the student's picture and name. It must be worn and visible at all times during clinical rotations. If the Pensacola State College picture I.D. is lost or broken, it is the student's responsibility to replace it before the next clinical day and inform the clinical instructor of the problem. Failure to do so will result in the student being dismissed from clinical.

Pregnancy Policy

This is the pregnancy policy which the Radiography Program follows. This policy supersedes the pregnancy policy in the Health Sciences Department(previously known as Allied Health) handbook.

Students who are pregnant or become pregnant during the twenty-one- month program have the option of declaring in writing their pregnancy to the Program Director or Clinical Coordinator or not doing so. The declaration of pregnancy is voluntary. Likewise, the student may declare, in writing, that she no longer wishes to be considered pregnant.

If the pregnant student does wish to declare her pregnancy, she must complete a voluntary declaration of pregnancy form with the Clinical Coordinator. The Program Director or Clinical Coordinator will then discuss with the student further options regarding the program.

Options:

1. The student may remain in the program after voluntarily disclosing the pregnancy without modification or interruption.
    a. The student will agree to attend and complete all classes, clinical requirements, and assignments as required by all students in the program.
    b. The student must present a doctor's note stating that she may fully participate in the clinical portion of the program.
    c. The Clinical Coordinator will meet with the student and discuss dose limits, additional monitoring for the fetus, and radiation safety for the student.
2. The student may remain in the program after voluntarily disclosing the pregnancy with modifications to the student's clinical rotations.
    a. The student will have the choice to delay clinical rotations and required competencies in areas such as fluoroscopy, portables, surgery, c-arm, MRI, CT, Radiation Therapy, Nuclear Medicine, and special procedures.
    b. The Clinical Coordinator will discuss any necessary modification to the student's clinical rotations.
    c. Due to the rotation modifications and required competencies, the student's program may need to be extended beyond twenty-one months.
3. The student may take a year's leave of absence from the program from both didactic and clinical portions of the program.
    a. The Program Director or Clinical Coordinator will discuss with the student the option of withdrawing from the program.
    b. The Program Director or Clinical Coordinator will advise the student on the process of returning to the program at a later date.

Monitoring Devices During Pregnancy:

a. Dosimeter designated for use under the lead apron at the waist level must be properly managed at all times. **Under no circumstances should the fetal and student badges be reversed**. Proper utilization of dosimeters during radiation exposure is mandatory.
b. Lead aprons provided by the clinical site or by the school must be worn at all times that the pregnant or potentially pregnant student receives radiation exposure. Care should be taken to reduce and eliminate unnecessary exposure. Using these protective measures, the student should be able to perform normal duties throughout the pregnancy without fear of excessive radiation exposure to the unborn child.

REFERENCES FOR RADIATION REGULATIONS:

- National Council on Radiation Protection and Measurement: Limitation of Exposure to Ionizing Radiation. Report#116 National Council on Radiation Protection and Measurement: Radiation Protection for Medical and Allied Health Personnel, Report #105

- National Council on Radiation Protection and Measurement: Radiation Structural Shielding Design and Evaluation for Medical, Use of X-Ray Gamma Rays of Energies Upto10MEV, Report#49

- National Council on Radiation Protection and Measurement: Radiation Protection in Pediatric Radiology, Report#68.

Returning Students

Returning students are those who were at one time enrolled in the Radiography Program at Pensacola State College.

If a student has not successfully completed the first semester of the program, the student will be considered for re-entry into the program along with the new applicants.

The student must reapply to the program and is responsible for submitting a new application and health form.

If a student has successfully completed at least the first semester of the program, the student is to notify the Department Head of his or her desire to return to the program in writing by October 1st or April 1st, whichever comes before the time when the student left the program. Students considered to be in Good Standing may seek readmission within one year of initial dis-enrollment from the PSC Radiography Program. "Good Standing is defined as students who have not been dismissed for behavioral issues or received any Code of Conduct Violations. Additionally, students are required to pass clinical competencies for the categories completed prior to leaving the program. Please contact the Radiography Program for additional information (850-484-2302).

Student Responsibilities

- It is the responsibility of the student to register, pay for, or withdraw/drop from any courses.
- It is the responsibility of the student to be knowledgeable of the policies of the college, program, and clinical sites which are covered in the college catalog, handbooks, and syllabi.
- Applying for state Radiographer licensure and/or the American Registry of Radiologic Technologist national exam is also the responsibility of the student.

Program Test Policy

All tests and quizzes are to be taken at the time and place assigned to the class.

It is not the policy of the program to give the student the option to take a test or quiz early, but we do realize that extenuating circumstances may arise. It is not recommended that tests or quizzes be taken early. However, tests or quizzes may be taken early at the discretion of the instructor and with prior arrangement. Adequate reason for such arrangements must be presented and sufficient time must be given to the instructor.

Tests or quizzes which have been missed must be taken on the next classroom day of the program which the student attends. This means that even if the course in which the student missed the test or quiz is not being held that day, the student must be prepared to take the make-up test. Arrangements to take the make-up test or quiz must be made with the course instructor. It is the responsibility of the student to contact the course instructor. Failure to take the make-up on the next classroom day will result in a score of zero.

In each course, the first time a test or quiz is taken later than the appointed time, a penalty of ten (10) points will automatically be deducted from the score.

In the same course, if another test or quiz is taken late, a penalty of twenty (20) points will automatically be deducted from the score.

In the same course, if a third test or quiz is taken late, a penalty of thirty (30) points will automatically be deducted from the score.

In the same course, if a fourth test or quiz is not taken on time, no make-up will be given and the student will receive a score of zero.

If an instructor selects not to use this policy, the student will be notified at the beginning of the course. The instructor has the right to waive this policy for students who can present documentation and reasonable excuses for long term absences (i.e. death in the immediate family, student admission to the hospital, student is contagious, etc.).

Technical Standards

The field of radiography is a healthcare profession which is very labor intensive. Each applicant must be aware of some routine physical activities with which he or she will be involved during the clinical experience. Students will need to be able to stay on their feet for long periods of time and be able to go up and down stairs while carrying pieces of equipment. During fluoroscopy, the student will wear a lead apron, which may weigh as much as 15 pounds. The student will need to reach to a height of 6 feet due to the height of x-ray tubes from the floor. The student must also be able to walk, stand, and sit for long periods of time. Stooping to the floor, lifting patients, squatting, reaching, twisting, bending, pushing, pulling, dragging, climbing and manual dexterity skills are all typical tasks the student will do each clinical day.

Lifting loads of approximately fifty pounds is not uncommon (e.g., 3 - 4 people lifting a 200-pound patient). In order to provide safe patient care, the student must have vision that will allow him or her to see in a dimly lit room and hear in areas with background noises from the operation of equipment. The student must be able to effectively communicate in English with a patient in a professional manner and understand the patient's verbal responses and quickly interpret and react to the patient's physical needs. The student will come in contact with contagious and immunosuppressed patients. The student must be able to write legibly, type accurately, and use a keyboard.

The Policy Compliance Agreement for Semesters is labeled Appendix C.

State and National Regulations

IMPORTANT: Due to state and national regulations for licensing, exam applicants who apply for boards must be aware of the following regulations:

**Pleading no contest or guilty in a conviction of a felony or misdemeanor involving moral turpitude may cause the graduate to forfeit his or her eligibility to sit for the national and state boards for certification. Please contact the American Registry of Radiologic Technologists at (651) 687-0048 and the Office of Radiation Control at (850) 245-4266 Tallahassee, Florida if there are any questions.

Transfer Students

Like any new student, a transfer student must apply to Pensacola State College and directly to the Radiography Program by application. All transfer students must complete at least the last three (3) semesters of training with the Pensacola State College Radiography Program. The student must also complete all General Education requirements of the A.S. degree. The transfer student must submit a current CPR card and updated health form.

Transfer students must demonstrate and prove competency in all the Clinical Competencies of the program. The student must complete the ARRT Radiography Clinical Competency Requirements by demonstrating competency in all 36 of the mandatory Radiologic Procedures, demonstrating competency in at least 15 elective Radiologic Procedures, and demonstrating competency in the General Patient Care areas including CPR, vital signs, sterile and aseptic technique, venipuncture, transfer of patients, and care of patient medical equipment (e.g., oxygen tank, 02 administration, IV tubing).

Radiography Program

PENSACOLA STATE COLLEGE

Clinical Education

Department of Health Sciences

This portion of the handbook presents the clinical aspect of the Radiography Program and contains the evaluation tools and mechanism that the clinical instructors will use to evaluate the student's progress through each semester.

Clinical Education Overview

During the clinical experience, the student is given the opportunity to perform all types of routine radiographic procedures. Only in this manner will he or she be prepared for entry into the profession.

Each student is responsible for his or her performance. However, this is a competency-based curriculum, both academic and clinical. Efforts have been made to develop a clinical evaluation system whereby students may progress through clinical education with strengths and deficiencies identified. The clinical evaluation will help each student address deficiencies and maximize learning outcomes.

Competency based evaluation is a means of checking the progression rate of the student during his or her education by determining whether or not he or she is capable of meeting specified objectives and demonstrating proficiency. Students' knowledge and application of skills are evaluated throughout the educational experience.

It is very important that knowledge and skills be reinforced and evaluated in the clinical setting to maximize the student's clinical effectiveness. The program's clinical affiliates provide clinical experiences designed to bridge the gap between theory and application. This is accomplished through quality supervision of clinical experiences in each clinical facility. The clinical portion of the program is an integral and important part of the curriculum. Therefore, an informative understanding of the clinical evaluation process by the student is an essential aspect which will enable the student to have a productive, beneficial, and successful clinical experience.

In addition to knowledge and skills in Radiography, the student will be introduced to each clinical site as outlined in Appendix D.

Radiography Clinic I

General Outline

During the clinical phase of the program, the student will have the opportunity and responsibility to combine the knowledge gained during the didactic portion of the program with practical application.

The student will be evaluated on

1. Radiation protection of patient, self, and other staff members.
2. Ethical conduct.
3. Patient care.
4. Body mechanics.
5. Patient transport.
6. Infection control techniques.
7. The use of medical terms.
8. Proper handling of image receptors.
9. Proper image processing techniques.
10. Radiographic positioning for routine chest examinations.
11. Radiographic positioning for routine abdomen examinations.
12. Radiographic positioning of upper extremity examinations.
13. Knowledge of anatomy and physiology of the chest, abdomen, and extremities.
14. Ability to problem-solve and critically think in clinical situations.

Clinical schedules for students during this term are Tuesday and Thursday from 8:00 a.m. to 4:00p.m. (Times subject to change).
All radiographic procedures are performed under direct supervision during this clinical rotation.
JRCERT's Standard 5.4: Student Must be directly supervised until competency is achieved.

JRCERT defines direct supervision as student supervision by a qualified radiographer (a technologist/clinical instructor) who:

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

Repeat images must be completed under direct supervision per JRCERT Standard 5.4.
Students must be directly supervised during surgical and mobile, including mobile fluoroscopy, procedures regardless of the level of competency per this JRCERT Standard 5.4.
Operating room (OR) rotations will begin in Clinic I as well.

Radiography Clinic II

General Outline

During the second term, the student again will participate in the clinical activities of the Radiology/Imaging Departments. The student will be responsible for the knowledge and skills obtained in the previous semester.

In addition to the categories the student has proven competency in during Semester I (all chest studies, abdomen, abdomen series, hand, wrist, forearm, elbow,, the student must provide competency in humerus and shoulder, lower extremity (foot, ankle, lower leg, knee and femur), pelvis, and lumbosacral spine. In addition, C-Arm demonstrations will be done at the end of the Clinic II semester. A mechanism will be utilized to check back and reevaluate the student on competencies and skills which have been accomplished in the previous semester.

Clinical schedules for students during this term are Tuesday and Thursday from 8:00 a.m. to 4:00 p.m. (Times are subject to change).

All radiographic procedures are performed under direct supervision during this clinical rotation per JRCERT Standard 5.4.

All repeat images are performed only with direct supervision by a qualified radiographer per JRCERT Standard 5.4.

Students must be directly supervised during surgical and mobile, including mobile fluoroscopy, procedures regardless of the level of competency per this JRCERT Standard 5.4.

Radiography Clinic III

General Outline

During the third term, the student will continue to participate in the Radiology/Imaging Departments. The student will also demonstrate competency in the cervical spine, the thoracic spine, and the thoracic cavity (ribs/sternum). Students will also be evaluated on nursing skills, such as acquiring vital signs, sterile gowning and gloving. Students will continue to be responsible for previous skills and radiographic procedures presented during Radiography Clinics I and II. In addition, a mechanism will be utilized to check back on competencies and skills which have been accomplished in the previous two semesters.
Also, during this semester, the student will rotate through Computed Tomography (CT) and special procedures (IR).

All radiographic procedures are performed under direct supervision during this clinical rotation per JRCERT Standard 5.4.

All repeat images are performed only with direct supervision by a qualified radiographer per JRCERT Standard 5.4.

Students must be directly supervised during surgical and mobile, including mobile fluoroscopy, procedures regardless of the level of competency per this JRCERT Standard 5.4.

This clinical is a twelve-week session. Clinical schedules are on Monday, Tuesday, and Wednesday from 8:00 a.m. to 3:45 p.m. (Times subject to change). First-year students have class, Radiographic Special Procedures, at the Warrington Campus on Thursday.

College offices are closed on Fridays during the summer terms.

Radiography Clinic IV

General Outline

During the fall semester of the second year, the student will be assessed on the competencies of the skull (including sinuses, facial and nasal bones). The student will also be responsible for accomplishing competencies in categories pertaining to fluoroscopy examinations (esophagram, upper GI, small bowel series and barium enema/ air contrast BE), as well as all other exams learning in Clinic I-III.

Also, during this semester, the student will rotate through the advanced procedure area of Bi-Plane and MRI.

Previously assigned and accomplished competency categories will be rechecked and re-comped to assure the assimilation of knowledge and ability to perform at the entry level as a registry eligible technologist.

All radiographic procedures are performed under direct or indirect supervision during this clinical rotation.

JRCERT Standard 5.4 Once student has achieved competency, he/she may work under indirect supervision. JRCERT defines indirect supervision as student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use per JRCERT Standard 5.3.

ALL repeat images are performed only with direct supervision by a qualified radiographer per JRCERT Standard 5.4.

Students must be directly supervised during surgical and mobile, including mobile fluoroscopy, procedures regardless of the level of competency per this JRCERT Standard 5.4.

Clinical schedules are Monday and Wednesday from 8:00 a.m. to 4:00 p.m. (Times are subject to change).

Radiography Clinic V

General Outline

During the spring semester of the second year, the student will demonstrate competency in radiographic procedures that have been determined as entry level exams. The program has termed these entry level exams as terminal competencies. A list of terminal competencies and procedure requirements are given to the student at the beginning of the semester. Also, mechanisms will be utilized to check back on competencies and skills which have been accomplished in the previous four clinical experiences.

During this semester, the student can continue to rotate in the advanced procedure areas of Computed Tomography, Magnetic Resonance Imaging, Radiation Therapy and Nuclear Medicine only upon completion of all ARRT exams required to sit for the registry and as these areas are available.

The student will also be responsible for clinical and lab demonstrations previously studied in Positioning I-IV.

The student must successfully complete this semester and complete all ARRT's Radiographic Clinical Competency Requirements before graduation from the program.

Students who have successfully passed competencies may work under indirect supervision per JRCERT Standard 5.4.

EXCEPT: Students must be directly supervised during surgical and mobile, including mobile fluoroscopy, procedures regardless of the level of competency per this JRCERT Standard 5.4. ALL repeat images are performed only with direct supervision by a qualified radiographer per JRCERT Stand 5.4.

Clinical schedules are Monday and Wednesday from 8:00 a.m. to 4:00 p.m. (Times are subject to change).

Possible Clinical Assignments

The following is an outline of the clinical areas the student will experience in each semester.

First Year

SEMESTER I	SEMESTER II	SEMESTER III
Routine /diagnostic	Routine /diagnostic	Routine /diagnostic
Fluoroscopy	Fluoroscopy	Fluoroscopy
Portables	Portables	Portables
ER	ER	ER
OR/Surgery	OR/Surgery	OR/Surgery
		Computed Tomography (CT)
		Interventional Radiology (IR)

Second Year

SEMESTER I	SEMESTER II
Routine /diagnostic	Routine /diagnostic
Fluoroscopy	Fluoroscopy
Portables	Portables
ER	ER
OR/Surgery	OR/Surgery
MRI	
Bi- plane SHHS	

*The ancillary rotations may change due to clinic sites. Notice will be given by the Clinical Coordinator if changes are to be made.

Clinical Competency Categories

The following identifies each clinical category by number and the radiographic procedures contained in each category. The student will demonstrate and/or perform a competency on the radiographic procedures in each category.

Category Number	Category Contents	Projections
	CLINIC I	
1	Chest	PA and Lateral*, AP Chest, Portable Chest, Oblique Chest, Lateral Decubitus Chest
2	Abdomen	AP, PA, Lateral Decubitus Abdomen and Abdomen Series
3	Hand Thumb and fingers Wrist	PA, Oblique, and Lateral AP, PA, Oblique, and Lateral PA, Oblique, Lateral, and Ulnar Flexion
4	Forearm Elbow	AP and Lateral AP, Lateral, Internal and External Oblique
	CLINIC II	Projections
5	Humerus Shoulder Scapula Clavicle AC Joints	AP and Lateral AP Internal/External Rotations, Grashey, Axial, Scapular Y AP and Lateral AP and AP Semi-Axial Bilateral AP with and without weights
6	Toes Foot Ankle Os Calcis (Heel) Weight-Bearing Foot Stress Views Ankle	PA, Oblique, and Lateral Dorsoplantar (AP), Oblique, and Lateral AP, Oblique, and Lateral Tangential and Lateral AP, Oblique, and Lateral Inversion and Eversion AP
7	Lower Leg Knee Patella Femur Weight-Bearing Knee	AP and Lateral AP, Lateral, Internal/External Oblique, and Tunnel View AP, Sunrise, and Lateral AP and Lateral AP, Lateral, Internal/External Oblique, and Tunnel View
8	Pelvis Hip Sacroiliac Joints	AP AP, Frog Lateral, and Cross Table Lateral AP and Both Obliques
9	Lumboscaral Spine Sacrum Coccyx	AP, Both Obliques, Lateral, and L5 - S1 Spot AP and Lateral AP and Lateral
11	C-Arm Demonstration with Sterile Field	C-Arm demo to be done at the end of the semester so students will have the capability to practice/test on their C-Arm abilities in Clinic III, IV, V, and VI.

Category Number	**CLINIC III**	Projections
10	Cervical Spine Soft Tissue Neck	AP, Both Obliques, Lateral, Odontoid, Swimmers, and Cross-Table Lateral AP and Lateral
12	Thoracic Spine	AP, Breathing and Non-Breathing Lateral, and Swimmers AP and Lateral
13	Ribs Sternum	AP and Both Obliques RAO and Lateral
	CLINIC IV	
14 TBA	Esophagram Upper GI (without and with air) Small Bowel Series	RAO, Lateral, AP/PA, and LAO RAO, PA, RT Lateral, LPO, and AP
15 TBA	Barium Enema/Air Contrast BE	PA, AP, RAO, LAO, LPO, RPO, Lateral Rectum, RT and LT Lateral Decubitus, AP Axial Rectum, and Post-Evac PA/AP
16 TBA	Skull Sinuses	AP, PA, Townes, Caldwell, Lateral Waters, and SMV AP, Waters, Modified and Open-Mouth Waters, Caldwell, Lateral, and SMV
17 TBA	Facial Bones Nasal Bones Mandible Temporomandibular Joints (TMJs)	AP, Waters, Mod. Waters, Caldwell, Lateral, Orbit (Rhese Method) Waters, Mod. Waters, and Lateral Axiolateral Obliques, PA, AP Axial (Townes), Panorex and SMV AP Axial (Townes Method), Axiolateral Oblique (Modified Laws) open and closed mouth, and Axiolateral (Schuller Method)
	CLINIC VI	**TERMINAL COMPETANCIES**
	1.	Extremity (High level of difficulty; such as trauma)
	2.	Abdomen Series (may substitute decubitus abdomen in lieu of upright) OR Lumbosacral Spine (5 views including obliques which may NOT be simulated)
	3	Portable Chest
	4.	Routine PA & Lateral Chest (to be checked off last if possible)

+ Changes may be made to which semester a category may be demonstrated due to things such as inclement weather and school closings. Notice will be given by the Clinical Coordinator and Clinical Instructors if changes are to be made.

*Sample: Laboratory Demonstration for Category I: PA and Lateral Chest (Appendix E)

Explanation of Clinical Grading Procedure

The student's final clinical grade will be based on the following criteria.

Copies of the evaluation forms are presented within the handbook.

Radiography Clinic I-IV

Competency Evaluations = 20%

Each student will be evaluated on radiographic procedures according to the objectives stated in the Clinical Competency Evaluation Criteria. Overall performance will be determined by averaging grades from each competency performed during the term. A minimum of 85% is required to satisfactorily meet the Clinical Competency Evaluation Criteria. Failure in a competency evaluation results in a repeat performance by the student with an averaging of (grade) points. A third failure in a Competency Evaluation results in a review of the student's continuance in the program by the Program Director or Clinical Coordinator.

Image & Procedure Evaluation = 20%

Each student will be evaluated on his or her ability to discuss the anatomy and physiology on the structures demonstrated in the radiographic images and general knowledge of radiographic procedures as stated in the objectives for Image & Procedure Evaluation.

Clinical Instructor's Evaluation = 40%

Students will be continually evaluated during their clinical experiences by the clinical instructors. The evaluation will be based on the student's skills, dependability, initiative, cooperation, attendance, punctuality, and other related behaviors.

Record Maintenance= 5%

Clinical Experience Record, Technique/Procedure booklet, and probation form return are all part of this grade.

Staff Evaluation= 10%

Student’s performance will be evaluated periodically by the staff technologists at the affiliated facilities. The evaluations will be averaged together.

Professionalism = 5%

Appearance, calling in when late or absent before 8:00am, addressing Clinical Instructor and other health care professionals appropriately etc. will all be factored into this grade.

Total of each area = 100%

Radiography Clinic V

Competency Evaluations = 15%

Each student will be evaluated on radiographic procedures according to the objectives stated in the Clinical Competency Evaluation Criteria. Overall performance will be determined by averaging grades from each competency performed during the term. A minimum of 85% is required to satisfactorily meet the Clinical Competency Evaluation Criteria. Failure in a competency evaluation results in a repeat performance by the student with an averaging of (grade) points. A third failure in a Competency Evaluation results in a review of the student's continuance in the program by the Program Director or Clinical Coordinator.

Clinical Instructor's Evaluation = 40%

Students will be continually evaluated during their clinical experiences by the clinical instructors. The evaluation will be based on the student's skills, dependability, initiative, cooperation, attendance, punctuality, and other related behaviors.

Record Maintenance= 15%

Clinical Experience Record, Technique/Procedure booklet, and probation form return are all part of this grade.

Staff Evaluation= 10%

Student’s performance will be evaluated periodically by the staff technologists at the affiliated facilities. The evaluations will be averaged together.

Professionalism = 20%

Appearance, calling in when late or absent before 8:00am, addressing Clinical Instructor and other health care professionals appropriately etc. will all be factored into this grade.

Total of each area = 100%

Program Philosophy

Every exam, every patient, every action a student takes throughout the day should reflect the same conscientious care, attention, and respect given during a graded competency evaluation.

Proficiency Testing and Evaluation Procedure

(Referred to as Student Lab Demonstrations or Lab Demos)

Evidence of clinical progress: Student demonstration of clinical proficiency.

Rationale: Each student is required to perform assigned radiographic examinations in the presence of the clinical instructor for the purpose of assessing performance and progression in the area of clinical education.

The following prerequisites are required in the order listed before the student can demonstrate the radiographic exam:

1. Have prior lecture and instruction in anatomy and physiology (Radiographic A&P classes).
2. Have classroom lecture and instruction on radiographic procedures/positioning (Radiographic Positioning classes) prior to the laboratory demonstration.
3. After the classroom lecture, the clinical instructor will demonstrate (referred to as the instructor demonstration) to the students the procedure/positioning at the clinical site. This is an extension of the Radiographic Positioning classes. The program utilizes the state-of-the-art radiographic equipment and small student groups at the clinical facilities to demonstrate the radiographic procedures instead of demonstrating the procedures in the Radiography lab on the Warrington Campus.
4. After the above requirements are met, the student will demonstrate positioning (referred to as student demonstrations) of the assigned examination in the radiographic room in the presence of the clinical instructor. The demonstration and performance with few modifications will follow the positioning skills and views as outlined in the Radiography Positioning classes.

Evaluation process:

The proficiency evaluation will be based on the clinical instructor's observation of the student during the simulated situation.

- The clinical instructor will observe and evaluate the student's performance according to the objectives listed in the Clinical Proficiency Evaluation Criteria/Objectives.
- The results of the evaluation are immediately discussed with the student to determine a satisfactory or unsatisfactory completion.
- If 80% of the objectives are not satisfactorily observed by the clinical instructor, the student will repeat the exam after remediation and further instruction from the clinical instructor until a satisfactory evaluation is attained.

Procedure process:

The student will demonstrate back to the instructor the required radiographic procedures as outlined by the clinical coordinator.

- The student demonstrations are performed under simulated situations.
- The student will perform the entire simulated exam as if he or she were performing a real exam on a patient with the exception that no exposure will be made during the simulation.
- Success in proficiency (student demonstration) determines that the student may proceed toward competency in that category. After successfully completing the student demonstration, the instructor will give the student a Record of Clinical Experience form. The student will begin recording on this form the minimum number of performances and/or practices required in each category that the student has performed.

Clinical Proficiency Evaluation Criteria/Objectives:

1. Patient Care, Handling and Communication

   a. The student is able to:

      i. assist the patient
      ii. talk with patient
      iii. give proper instructions and explanations
      iv. obtain adequate history

2. Utilization of equipment

   a. The student is able to:
      i. Manipulate the equipment correctly
      ii. Utilize bucky and locks correctly
      iii. Correctly handle image receptors, if applicable

3. Exam preparation

   a. The student is able to:
      i. Select correct image receptor sizes, number of image receptors, if applicable
      ii. Have necessary accessory equipment properly placed and available

4. Use correct source to image receptor distance:

   a. The student is able to:
      i. Select the correct source to image receptor distance
      ii. Position x-ray tube at correct distance

5. Use correct patient positioning:

   a. The student is able to:
      i. Position patient correctly on the table (head at appropriate end, prone, supine, etc.)
      ii. Oblique patient/part correctly, if required
      iii. Remove unwanted anatomical parts for the area of interest

6. Use correct centering:

   a. The student is able to:
      i. Align center of part to center of image receptor
      ii. Center central ray to center of image receptor

7. Use correct accessory equipment (sponges, cones, technique charts)

   a. The student is able to
      i. Use correct positioning aids
      ii. Select the correct cone or aperture, if required
      iii. Use a technique chart for exposure factors.

8. General radiation protection:

   a. The student is able to
      i. Stand in correct area during exposure
      ii. Use gonadal shields on patient
      iii. Use lead apron and gloves, if applicable for exam
      iv. Select proper exposure factors from technique chart

9. Use correct collimation of the beam:

   a. The student is able to
      i. Cone or collimate to the part of interest
      ii. Use automatic collimation

10. Use correct image identification:

   a. The student is able to
      i. Place “R” or “L” radiographic marker in correct location
      ii. Insure correct labeling of image

See Appendix A: Laboratory Demonstration for Category 1 PA and Lateral Chest

Clinical Competency Requirements

All clinical education in the Pensacola State College Radiography Program is competency (performance) based. The didactic (classroom) portion of the program has been coordinated with the clinical experience to best facilitate the student radiographer's comprehension and usage from the practical point of view.

Clinical Competency is evaluated after a period of passive, then active clinical participation. In the active phase, the student may perform specified tasks under the direct supervision of the Registered Technologist (R.T.). Direct supervision constitutes that a Registered Technologist be present in the radiographic room while the student performs a procedure. Until clinical competency is proven, a student is not permitted to perform any radiographic exam without direct R.T. supervision.

The radiographic procedures performed in the Radiology/Imaging Department have been divided into categories. A listing of these categories and their related radiographic procedures was presented on previous pages of this handbook. In order to pass a clinical competency category, the student radiographer must:

- Complete a minimum number of required performances under direct supervision
- notify the clinical instructor, by signing up on the clinical competency form that the student feels competent enough and ready to perform the required radiographic exam.

*The appendix contains the Clinical Competency Evaluation Form and the Performance Evaluation Form for Clinical Behavior of Radiography Students used by the clinical instructor during the evaluation process.

Evaluation Process of Competency

If the student can demonstrate to the clinical instructor competency in the category the student performs with an 85% or better accuracy, the student is considered to have passed that category.

Remediation Process for Failed Competency

If the student radiographer is unable to obtain 85% accuracy in the radiographic exam performed as a competency, the student will not pass the category at that time.

The student will have two (2) more chances to pass the required category after a remediation process. The clinical instructor will discuss the remediation criteria with the student after reviewing the competency evaluation.

The clinical instructor will assign an appropriate number of additional radiographic procedures in that specific category to be performed by the student under direct instructor or R.T. supervision.

Additional procedures assigned by the instructor must be recorded by the student on his or her Record of Clinical Experience form.

After the completion of these additional experiences and/or other assigned remediation, the student may again attempt to re-comp the category.

If the radiographic exam is passed on the second attempt at 85% or better accuracy, the student is considered to have passed that category.

However, the student's recorded grade for that category will be the average score from the 1st and 2nd attempts. This is explained and examples given under **Grading System for Competencies**.

If the student is unable to pass the category on the second attempt, the Program or Clinical Coordinator will discuss additional remediation with the student.

The remediation process, after the failed second attempt, involves another instructor lab demonstration and student demonstration back to the instructor of the failed radiographic examination. Also, the Program Director and Clinical Coordinator will together decide what additional methods may be used to assist the student in obtaining the knowledge and proficiency necessary to pass the failed category.

Third failure in the competency evaluation process results in a review of the student's performance and continuance in the program by the Program Director and Clinical Coordinator.

Grading System for Competencies

In order to be fair and equitable in grading clinical competencies, the following is an explanation of the grading for the clinical competency evaluations:

On the initial competency attempt (such as the routine chest exam, PA and Lateral chest) if the student performs at an 85% or above level on the competency, the student has successfully passed the competency and that score will be the student's recorded grade. Therefore, the recorded grade will reflect the score the student earned on the first clinical competency, such as a 100%, 95%, 88% or 85%.

If the student fails the first attempt (such as a 66%) on the clinical competency (such as the routine chest exam), the following grading process will occur on the second attempt. During the second time the student performs the previously failed competency, he/she must perform at 85% or above level on the second attempt (such as a 94%). The student passed the competency because he or she made a 94% on the second attempt, but the recorded grade will be an average of the 1st and 2nd attempts.

Example:

- 1st attempt (failed the competency) = 66%
- 2nd attempt (passed the competency) = 94%

Recorded grade on the grade roster = 80%

If the student fails the first and second attempts on the clinical competency (such as failing the routine chest exam twice), the following grading process will occur on the third attempt. During the third attempt the student performs the twice failed competency, the students again must perform at 85% or above level on the third attempt (such as a 93%), but the recorded grade will be an average of the 1st, 2ND, and 3rd attempts.

Example:

- 1st attempt (failed the competency) = 66%
- 2nd attempt (failed the competency again) = 75%
- 3rd attempt (passed the competency) =93%

Recorded grade on the grade roster =78%

Using this method of grading, the student who has extra practices, time, remediation, and involvement with the clinical instructor, due to two failed attempts at a competency, does not receive a higher clinical grade than the student who passes the competency on the first attempt with a score of 85%, 88%, etc.

Clinical Competency Evaluation Criteria

1. Evaluation of the Requisition
   a. Student is able to
      i. Identify procedures to be performed
      ii. Recall the patient's age and name
      iii. Identify the mode of transportation to the clinical area
      iv. Pronounce the patient's name within reasonable limits

2. Facilities Readiness
   a. Student is able to
      i. Provide clean area for patient
      ii. Have all needed accessories readily available
      iii. Have appropriate size image receptors readily available, if required
      iv. Turn machine "on" and be prepared for exposure
      Turn x ray tube into correct position for the examination

3. Patient and Technologist Relationship
   a. student is able to
      i. select the correct patient
      ii. If needed, explain to the patient what clothing to remove for the examination (including jewelry, wigs, bobby pins, dentures, glasses, etc.)
      iii. Safely assist patient to and from the table
      iv. Talk with the patient in a concerned, professional manner
      v. Give proper instructions for moving and breathing
      vi. Explain the procedure to the patient
      vii. Maintain a professional manner throughout the procedure, as well as before and after obtaining images
      viii. Follow proper isolation procedures when appropriate
      ix. Properly care for any personal belongings of the patient during the procedure (such as glasses, wallets, purses, etc.)
      x. Assess the patient's ability to see, hear, ambulate and cooperate

4. Positioning Skills
   a. student is able to
      i. Position the patient correctly on the table (head at the appropriate end, prone or supine, etc.)
      ii. Align the center of the part to the demonstrated to the center of the cassette/ image receptor.
         I. Center the central longitudinally to the center of the table, if required.
         II. Oblique the patient correctly, if required
      iii. Remove unwanted anatomical parts from the radiographic area
      iv. Use the proper SID (source to image receptor distance)
      v. Properly immobilize the patient, if necessary

5. Equipment Manipulation
    a. Student is able to
        i. Use the proper locks and turn the x ray tube from the horizontal to vertical and vice versa
        ii. Move the bucky tray and utilize the bucky locks
        iii. Insert and remove the image receptor from the bucky tray, if applicable
        iv. Identify and utilize the locks
        v. Operate image advancement
        vi. Select exposure factors at control panel
        vii. Close x ray room doors to complete circuit

6. Proper Collimation
    a. Student is able to
        i. Collimate only the area being radiographed
        ii. Select the proper size cone or diaphragm

7. Evidence of Radiation Protection for Self, Patient and Others
    a. Student is able to
        i. Use gonadal shields
        ii. Demonstrate utilization of lead aprons and gloves, when appropriate
        iii. Select proper exposure technique
        iv. Question female patients concerning pregnancy
        v. Wear radiation monitoring device (dosimeter) as required by the program
        vi. Protect self and others from necessary radiation

8. Film Identification
    a. Student is able to
        i. Use the proper “R” and “L” markers in the correct location
        ii. Use the other markers when appropriate (such as time markers)
        iii. Properly identify the patient information, date, etc. on the image

9. Technique Manipulation
    a. Student is able to
        i. Adapt for technique changes in SID, grid ratio, collimation, patient factors, etc.
        ii. Use technique chart for exposure factors
        iii. Measure the patient properly

10. Knowledge of Procedure
    a. Student is able to
        i. Identify all the positions done routinely for a particular examination
        ii. Adapt positioning skills as needed to accommodate special patient conditions
        iii. Select the proper image size for the examination

11. Knowledge of Anatomy
    a. Student is able to
        i. Demonstrate the anatomical part(s) in proper perspective on the image

Image and Procedure Evaluation (Referred to as I&P)

A radiographer should have the ability to perform radiographic procedures and critique the final images. This program provides the instruction and opportunities to achieve these necessary and valuable goals.

Purpose of Image and Procedure Evaluation

To continually evaluate the student's knowledge in the anatomy and physiology of structures demonstrated in radiographic images and knowledge of the radiographic procedures necessary to obtain these images.

Procedure for Image and Procedure Evaluation

The I&P exams will be scheduled to correlate with the category taught in positioning class. The student will be evaluated by the instructor on the student's knowledge of the exam. The instructor will present the student with question sheets and radiographs pertaining to the appropriate category. This procedure acts as an additional method in evaluating competency in the clinical area, the student's critical thinking skills, problem solving, and communication.

Objectives for Image and Procedure Evaluation

1. Anatomy
    a. Student is able to
        i. Identify the anatomical parts seen on the radiographs
        ii. State the pertinent functions of the organs on the radiograph
        iii. Respond to items confidently and in a timely manner

2. Knowledge of Procedure
    a. Student is able to
        i. Identify all positions routinely performed for a particular examination
        ii. Explain the purpose and procedure for any given examination or radiograph
        iii. Describe the patient preparation for a given procedure
        iv. Use critical thinking skills and problem-solving skills to respond to question
        v. Respond to items confidently and in a timely manner

Evaluation Process for Image and Procedures

The I&P evaluation will be based on the student's ability to demonstrate and verbally respond to the questions in a timely manner. The grading scale and evaluation criteria are similar to the Clinical Competency Evaluation process. A minimum of 75% is required to pass each I&P evaluation.

Clinical Assignment Objectives

First-Year Students

1. Objectives for First Rotation in Fluoroscopy and Routine Rooms
   a. After completion of the first rotation through the assigned area the student will be able to demonstrate:
      i. The location of the light switched in the room
      ii. Where to stand during an exposure
      iii. How and where to locate the patient in the department
      iv. The patient's name and exam to be performed
      v. Locate as to where on the radiography request is the patient's age, sex, room number, referring physician and date to be performed
      vi. Where the closest patient bathrooms are located
      vii. Where exposed and unexposed cassette are kept in the x ray room and where radiographic images are developed or displayed, including different image receptor sizes, if applicable
      viii. The location of the linen supply cart and stockroom
      ix. Which supplies are kept in the room and where they are located
      x. The location of the supply room and the restock room with necessary items
      xi. Where to pick up laundry and where to drop it off
      xii. Where lead aprons are kept in the room
      xiii. How to manipulate the locks on the tubes, how to manipulate the tube and how to center the tube to the center of the grid
      xiv. How to move the tabletop
      xv. The location of the foot stool and where it is stored
      xvi. How to assist the technologist during fluoroscopy exams
      xvii. Radiation safety measure for themselves including wearing a lead apron and the proper location of the dosimeter on the uniform
      xviii. Where the circuit breaker is located in the room
      xix. How to efficiently get help in an emergency situation

2. Objectives for First Rotation on Portables
   a. After completion of first rotation through the assigned area, the student will be able to demonstrate:
      i. Where to locate the examination request
      ii. Where to sign out to do a portable exam
      iii. How and where to locate the portable machine
      iv. Where to locate the correct wall sockets to plug in the machine
      v. Where to check on the x ray request to find if the exam is correctly ordered as a portable exam
      vi. How to move the x ray tube over the patient
      vii. How to manipulate the locks on the portable machine
      viii. Basic positioning for an AP chest, (most common portable exam)
      ix. How to measure the distance from the x ray tube to the patient (correct SID)
      x. If applicable, correct placement of annotation on the radiographic image
      xi. Where radiographic images are sent after the completion of the exam
      xii. How to assist the technologist during every portable exam
      xiii. How to assist the technologist in all phases necessary to begin and complete an exam
      xiv. Where lead shields and aprons are kept for portable exams
      xv. Radiation safety measures for themselves including wearing a lead apron, distance from the patient and proper location of dosimeter on uniform
      xvi. Proper cleaning procedure for portable machines

Appendices

Radiography Program

PENSACOLA STATE COLLEGE

Department of Health Sciences

Pensacola State College

Department of Health Sciences

Radiography Program

Statement on Confidentiality and Dissemination of Patient Information

Given the nature of our work, it is imperative that we maintain the confidence of patient information that we receive in the course of our clinical experiences. Pensacola State College prohibits the gathering of any patient information unless required for purposes of treatment, payment, or health care operations, and discussions of Protected Health Information (PHI) within the organization should be limited. Acceptable uses of PHI within the organization include, but are not limited to, exchange of patient information needed for the treatment of the patient, billing, and other essential health care operations, peer review, internal audits and quality assurance activities.

I understand that Pensacola State College students provide services to patients that are private and confidential and that I am a crucial step in respecting the privacy rights of patients. I understand that it is necessary, in the rendering of services, that patients provide personal information and that such information may exist in a variety of forms such as electronic, oral, written or photographic and that all such information is strictly confidential and protected by federal and state laws.

I agree that I will comply with all confidentiality policies and procedures. If I, at any time, knowingly or inadvertently breach the patient confidentiality policies and procedures, I agree to notify the program Coordinator immediately. In addition, I understand that a breach of patient confidentiality may result in suspension or expulsion for Pensacola State College's program. I also understand that a wrongful breach of patient confidentiality could personally subject me to criminal and civil penalties.

I understand all privacy policies and procedures that have been provided to me by Pensacola State College. I agree to abide by all policies or be subject to disciplinary action, which may include verbal or written warning, suspension, or expulsion. This does not alter the nature of the existing relationship between Pensacola State College and me.

Name (printed): _____ Date: _____

Signature: _____

Appendix A

Radiography Program

MRI Rotation – Safety Protocol

All students enrolled in the Radiography Program are hereby advised of the potential hazards of MRI. As a student, you may opt to complete a specialty rotation in MRI, or otherwise be required to enter an MRI room where exposure to strong magnetic energy and radiofrequency waves will occur.

To protect you from potential injury, the program must assure that you have been educated in MRI safety, and screened for potential devices in your body that might place you at risk for injury.

Please read the MRI safety information provided and provide your signature as an indication that you understand the potential for personal injury. In addition, please complete the screening checklist to determine if you would be at risk for injury.

If it is determined that you are at risk, you will be prohibited from entering the MRI department while completing clinical rotations in the Radiography Program.

Appendix B

MRI Safety Information

The powerful magnetic field of the MR system will attract iron-containing (also known as ferromagnetic) objects and may cause them to move suddenly and with great force. This can pose a possible risk to anyone in an object's "flight path." Great care is taken to be certain that objects such as ferromagnetic screwdrivers and oxygen tanks are not brought into the MR system area. As a student rotating through MRI, it is vital that you remove all metallic belongings in advance of entering the MRI area, including watches, jewelry, and items of clothing that have metallic threads or fasteners.

The powerful magnetic field of the MR system will pull on any iron-containing object in the body, such as certain medication pumps or aneurysm clips. For example, the MRI exam will not be performed if a ferromagnetic aneurysm clip is present because there is a risk of the clip moving or being dislodged. In some cases, certain medical implants can heat substantially when exposed to radiofrequency energy that is used during MRI. Therefore, it is very important to determine if you have any implant or other internal object that might be affected by entering the MRI area.

The magnetic field of the MR system may damage an external hearing aid or cause a heart pacemaker, electrical stimulator, or neurostimulator, to malfunction or cause injury. If you have a bullet or other metallic fragment in your body (e.g., any metallic foreign body) there is a potential risk that it could change position, possibly causing injury.

I have read the MRI safety information provided above and understand the potential for personal injury from entering the MRI department.

Print Student Name: _____

Student Signature: _____

Date: _____

Appendix B

MRI Screening Checklist

WARNING: When entering an MRI area, certain implants, devices, or objects may be hazardous to you and cause injury. Do not enter the MRI area if you have any questions regarding an implant, device, or object. Please answer the following questions as a screening method to ensure your safety. Remember, the MRI magnet is ALWAYS on.

Do you have or have you had?	No	Yes	If yes, please explain
Aneurysm clips, coil or graft			
Vascular stent, coil, clips or clamps			
Cardiovascular catheter / Swan-Ganz catheter			
Heart valve replacement			
Implanted filter (i.e. Inferior Vena Cava filter)			
Cardiac pacemaker, pacemaker wires or a defibrillator			
Brain surgery clips			
Implanted stimulator (i.e. vagal nerve, deep brain, TENS, bone growth)			
Implanted insulin pump, catheter or drug infusion device			
Programmable shunt or VP shunt			
Magnetically activated implant or device			
Internal or external monitoring devices (including temperature or oxygen probes)			
Epidural or nerve block catheter			
Stapes prosthesis, cochlear implant			
Eye prosthesis, lens implant, eyelid spring or wire, retinal tack			
Eye injury with metallic object or fragment			
Internal electrodes or wires			

Appendix B

Do you have or have you had?	No	Yes	If yes, please explain
Medication patch (nitroglycerine, nicotine, hormones, other medication)			
Antimicrobial wound or burn dressing			
Ingested camera pill for capsule endoscopy			
Dental implant, dentures or partial plates			
Intrauterine Device (IUD)			
Penile implant			
Injury by a bullet or metallic object (shrapnel, BB)			
Tissue expander (i.e. breast expander)			
Permanent make-up, tattoo, piercing			
Hearing aid (remove before entering the MRI room)			
Artificial or prosthetic limb			
Joint replacement or resurfacing			
Radiation seeds or implants			
Any other type of device, implant or prosthesis not listed above			

I have answered these questions to the best of my ability, and I understand that possible injury could result if I withhold vital information.

Print Student Name: _____

Student Signature: _____

Date: _____

Pensacola State College

Radiography Program

Department of Health Sciences

POLICY COMPLIANCE AGREEMENT FOR THE RADIOGRAPHY PROGRAM

I, _____, hereby verify

(Student's Name)

that the Academic Standards, Dress Code, College Code of Conduct as published in the Pensacola State College Catalog, the contents of the Radiography Program Student Handbook, and the Department of Health Sciences Manual and the clinical course syllabus has been explained to me.

I understand further that the privilege to practice and develop my clinical skills within the college clinical facility or affiliates will be terminated by the department if I fail to abide by the policies and procedures as published. These published documents have been made available to me and I agree to abide by the policies contained therein.

Student Signature: _____

Printed Student Name: _____

Date: _____

Appendix C

Pensacola State College
Radiography Program

Introductory Tour of the Radiology/Imaging Department

Student Name: _____ Date: _____

Directions: The student is to check off each area after the instructor has demonstrated or shown the item to the student. Completed forms are handed in to the clinical instructor.

1. Tour of the department
   - _____ a. Note parking lots around the hospital department.
   - _____ b. Note parking lots where students park during clinical hours.
   - _____ c. Note where department is located in relation to other areas of the hospital.
   - _____ c. Walk through entire department – include CT, outpatient, MRI, Nuclear Medicine, ultrasound, reading rooms, file rooms, bathrooms, lounge, etc.

2. Introductions
   a. Introduce the students to the following:
   - _____ i. Radiologists on duty.
   - _____ ii. Administrative personnel (make note of names).
   - _____ iii. Chief techs or supervisors (make note of names).
   - _____ iv. Technologists.

3. In a radiographic room
   a. The control booth:
   - _____ i. Show students control panel to include rnA, kVp, seconds, exposure switch.
   - _____ ii. Point out technique charts.
   - _____ iii. Where to stand during exposure (emphasize observing patient through window-not around control booth!).
   - _____ iv. Where to place image receptors, if applicable.
   - _____ v. Instructor make exposure.

   b. X-ray table:
   - _____ i. Demonstrate motorized tabletop vs. floating table top.
   - _____ ii. Built in foot stools.
   - _____ iii. Demonstrate movement of bucky tray and its locks.
   - _____ iv. Emergency power shut off.

Appendix D

c. Overhead x-ray tube:

_____ i. Demonstrate different locks and detent in horizontal, vertical, transverse, longitudinal, etc.

_____ ii. Center overhead tube to center of grid bucky.

_____ iii. Point out distance indicator.

_____ iv. Point out collimator indicator

_____ v. Demonstrate automatic collimation (explain meaning of collimation)

d. Fluoroscopy unit:

_____ i. Point out fluoro tower, fluoro screen, TV monitor, movement of fluoro tower (image intensifier or digital detector).

_____ ii. Where to stand in the room during fluoroscopy. iii.

_____ Have students put on lead aprons.

_____ 1. Demonstrate how to wear apron.

_____ 2. Where to hang up and correctly store aprons.

_____ 3. The importance of not folding aprons.

e. Radiation safety:

_____ i. Demonstrate where to stand during exposure in:

_____ ii. Routine room.

_____ iii. Fluoro room, also demonstrate wearing lead apron during fluoroscopy.

f. Chest exam:

_____ i. Very briefly explain operation of equipment.

_____ ii. Very briefly demonstrate PA and lateral chest exam (more formal demonstration is done later in semester).

Pensacola State College
Department of Health Science
Radiography Program

Laboratory Demonstration
Category 1 – PA/LAT Chest/Oblique Chest/Lordotic Chest/ AP Stretcher Chest/Decubitus Chest

Name: _____ Date: _____
Student is able to perform the following criteria to the clinical instructor with minimum or no assistance.

S = Satisfactory U = Unsatisfactory NA = Not Applicable

Patient Care	**S**	**U**	**NA**
1.Identifies patient using at least 2 forms of ID			
2.Assists patient			
3.Converses with patient clearly			
4.Obtains adequate history from patient			
5.Clearly explains procedure to patient			

Comments: _____

Utilization of Equipment	**S**	**U**	**NA**
6.Positions tube correctly			
7.Easily manipulates tube			
8.Easily manipulates locks/detent			
9.Correctly places cassette in bucky (if applicable)			
10.Correctly collimates to appropriate IR/cassette size			
11.Positions tube to correct SID			

Comments: _____

Preparation	**S**	**U**	**NA**
12.Cleans room/equipment prior to patient entering the room			
13.Obtains gonadal shielding for patient			
14.Ensures the appropriate technique is set (can change in accordance to patient)			

Comments: _____

Positioning of the Part & Central Ray	**S**	**U**	
15.Position patient for PA Erect Chest			
16.Position patient for Lateral Erect Chest			
17.Position patient for Oblique(s) Chest			
18.Position patient for Lordotic Chest			
19.Position patient for AP Erect Chest in wheelchair			
20.Position patient for AP Erect/Semi-Erect Chest in stretcher			
21.Position patient for AP Supine Chest on x-ray table			
22.Position patient for RT Lateral Decubitus on table			
23.Position patient for LT Lateral Decubitus on table			

Comments:_____

Equipment & Technique	S	U	
24.Set control panel for PA/ Oblique Erect Chest			
25.Set technique for PA/ Oblique Erect Chest			
26.Set control panel Lateral Erect Chest			
27.Set technique for Lateral Erect Chest			
28.Set control panel for Lordotic Chest			
29.Set technique for Lordotic Chest			
30.Set control panel for AP Erect Chest with and without bucky			
31.Set technique for AP Erect Chest with and without bucky			
32.Set control panel LT/RT Lateral Decubitus with and without			
33.Set technique for LT/RT Lateral Decubitus with and without			

Comment: _____

Radiation Protection & Film Identification	S	U	
34.Stands in correct area for exposure			
35.Utilizes patient shielding			
36.Accurately demonstrates collimation on patient			
37.Places right (R) or left (L) marker in correct position			

Comments: _____

	Satisfactory	Unsatisfactory
Total Number:		

Please remediate student in area(s) with any unsatisfactory marks.

Additional Comments:

_____

_____

_____

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Pensacola State College
Department of Health Sciences
Radiography Program

Images and Procedures Evaluation

Student Name: _____ Final Grade: _____

Category: _____ Date: _____

Criteria: The student will	Unsatisfactory	Needs Improvement	Satisfactory
1. Identify all the anatomy on the corresponding images.	1	2	3
2. Demonstrate confidence and timeliness in responding to the identification of the anatomy.	1	2	3
3. Demonstrate the knowledge of the procedures by responding to related questions.	1	2	3
4. Demonstrate confidence and timeliness in responding to the knowledge and procedure questions.	1	2	3
5. Demonstrate the ability to easily solve a problem when presented with a clinical situation and/ or scenario.	1	2	3
6. Demonstrate appropriate oral communication skills when responding to Image & Procedure questions and explanations	1	2	3
7. Demonstrate overall use of good critical thinking skills during the evaluation process.	1	2	3
Totals:			

Unsatisfactory = 1 – unacceptable
Needs Improvement = 2
Satisfactory = 3 – appropriate response

Grading Scale to determine percentage:

21 points = 100%
20 points = 95%
19 points = 90 %
18 points = 86 %
17 points = 81 %
16 points = 76%
15 points = 71%
14 points = 67%
(Total divided by 21 x 100 = %)

Instructor Notes: _____

_____

_____

_____

Student Signature _____ Date _____

Instructor's Signature _____ Date:_____

Appendix F

Record on Grade Sheet: date_____/initials_____
Record on ARRT Sheet: date_____/initials_____
Student signed & dated: date_____/initials_____

PENSACOLA STATE COLLEGE
RADIOGRAPHY PROGRAM
Clinical Competency Evaluation

Student_____ Final Grade_____
Evaluator_____ Date_____
Procedure performed_____

Patient description: age_____ condition_____ circle the following - IP, OP, ER, male, female, amb, wc, str, bed patient information_____
Start time:_____(indicates when student received notification of exam, such as receiving request)
Time initial exposure made:_____(indicates time the first exposure was made by student)
End time:_____(indicates when entire exam, including repeats, has been released by supervisor and patient released)

Check which areas are applicable for this procedure:
1) _____ Initial competency
2) _____ARRT, indicate Mandatory or Elective
3) _____Rechallenge competency
4) _____Terminal competency

Section #1 - Assessment of patient, physician orders, patient and room prep	**U**	**NI**	**S**
1. Read and assess the exam order/requisition completely.			
2. Pull up the correct patient and exam or the correct accession number.			
3. Prepare radiographic room, such as shield in room, cassette/IR in room, clean cassette/IR, clean table/bucky, clean pillowcase, calipers, etc.			
4. Correctly identify the patient. Use 2 patient identifiers. Check armband.			
5. Verbally verify with the patient the correct exam including the correct side.			
6. Inquire regarding the possibility of pregnancy within the age guidelines and specifics of the clinic facility and document properly.			
7. Dress patient correctly. Remove potential artifacts and double gown.			
8. Explain to the patient what you will be doing and what is expected of them.			
9. ASSIST the patient to the position and/or place needed for each exposure efficiently (to table, upright bucky, covering patient, turning patient, helping patient into required positions, etc.).			
10. Evaluate part thickness (Peds, Adult, S, M, L, XL) or obtain and record cm measurement to aid in determining technical factors.			
TOTALS =			

Subtotal for Section #1 = _____U=0 NI=1 S=2

Comments: Please list by number._____

_____

_____

Exam/View: _____	**A_____**	**B_____**	**C_____**
Section #2 – Actual performance of the exam	U NI S	U NI S	U NI S
11. Scan/select the cassette/image with the corresponding patient/view.			
12. Determine the exposure factors and proper radiographic technique and set on the control panel, or state to instructor.			
13. Proper manipulation of the locks and positioning of the tube (tube angulation, detent, SID, correct placement of central ray).			
14. Orient/align the cassette/IR properly for the part being radiographed, correct placement in grid, on tabletop, in bucky, correct choice of grid.			
15. Position patient accurately.			
16. Collimate the beam so that only (and all of) the area of interest is included on the image.			
17. Identify right or left side of patient with the correct lead marker, visibly displayed on the image and out of the anatomy.			
18. Evidence of radiation protection by use of lead shielding on the proper area of the patient per exam, gender, etc.			
19. Absence of repeat(s) and/or additional exposure(s) due to student error.			
20. Use correct breathing instructions for exposure, make exposure while watching patient through window.			
TOTALS =			

Subtotal for Section #2 = _____ U=0 NI=1 S=2

Comments: Please list by number and view.

Section #3 – Assessment of follow through and exam completion	U	NI	S
21. Communicate to the patient throughout the entire exam with clarity, acceptable volume, and in a professional manner.			
22. Demonstrate proper and exemplary patient care practices throughout the entire exam.			
23. Obtain/record/state patient history to technologist in charge without being prompted to do so. Use correct medical terminology and be specific.			
24. Critique images for optimal density, contrast, (S values, if applicable) and required anatomy.			
25. Assist patient from table to standing position, wheelchair, stretcher, bed			
26. Return patient to the condition in which they arrived, which includes clothing, bandages, blankets, personal belongings, etc.			
27. Explain to patients where they go next. Take inpatients to proper holding area and inform transport.			
28. Complete paperwork according to department policy, including completing on computer, acquiring and recording the technologist's correct initials or numbers, handling of images, shredding documents, etc.			
29. Clean and straighten up the radiographic room upon immediate completion of the exam.			
30. Overall knowledge of exam/procedure with minimal errors.			
31. Ease and timeliness of exam.			
TOTALS =			

Subtotal for Section #3 = _____U=0 NI=1 S=2

Comments: Please list by number.

_____

_____

_____

_____

U = Unacceptable (0 points) **PASSING SCORE = 85%**
NI = Needs Improvement (1 point) S = Satisfactory (2 points)

Subtotal Section #1 = _____ Subtotal Section #2 = _ Subtotal Section #3 = ____

TOTAL = _____ **divided by 102** (for 3 view exam) = _____**% Final Grade**
= _____ **divided by 82** (for 2 view exam) = _____**% Final Grade**
= _____ **divided by 62** (for 1 view exam) = _____**% Final Grade**

Student Signature_____ **Date**_____

Pensacola State College
Department of Health Sciences
Radiography Program

PEFORMANCE EVALUATION FORM FOR CLINICAL BEHAVIOR OF FIRST YEAR RADIOGRAPHY STUDENTS

Student Name: _____ Semester: _____

Date: _____ Mid-term / Final

GRADING SCALE:

3 points	=	performs excellently
2.5 points	=	performs above average
2 points	=	performs satisfactorily
1 point	=	needs improvement
0 points	=	unacceptable behavior

A. SKILLS

_____ 1. Student selects correct technical factors for radiographic examinations, with minimal supervision and makes appropriate adjustments for patient considerations (i.e., trauma, habitus, age, pathology).

a. Substitutes alternate positions and adjusts centering points accordingly.

b. Manipulates the technical factors of kVp, mAs, and SID to control radiographic quality.

_____ 2. Readily adapts to department and radiographic procedures and protocols at assigned clinical site.

_____ 3. Positioning skills are consistent with the student's level of training.

_____ 4. Inspects radiographic room to be sure it is clean and stocked before and after use.

_____ 5. Performs procedures with relative ease and promptness.

_____ 6. Records and reports clinical histories thoroughly and consistently.

_____ 7. Involved in radiographic room (i.e. readily available) to assist and/or actually perform radiographic examinations.

_____ 8. Demonstrate use of safety protocol on all medical and patient care equipment (i.e., wheelchairs, stretchers, oxygen tanks, bed rails, etc.).

_____ 9. Able to perform radiographic exams on previously passed competencies with little or no assistance (patient condition taken into consideration)

B. DEPENDABILITY

_____ 10. Punctual, arriving in the assigned radiographic room/ancillary area at the appointed time and begins work promptly. (Note: not only readiness to begin work, but also returns from lunch on time.)

_____ 11. Amount of absences has been minimal or nonexistent.

_____ 12. Amount of tardy infractions has been minimal or nonexistent.

_____ 13. Arrives at clinical site according to required dress code with all required accessory equipment. (Refer to Student Handbook).

_____ 14. Will accept instructions from instructor and will complete them without further reminder and a minimal amount of supervision.

_____ 15. Completes procedures within a reasonable period of time.

_____ 16. Follows rules and regulations of the Radiography Program and assigned clinical sites.

C. INITIATIVE

_____ 17. Looks for things to do and does them without being asked. This includes technical work, duties necessary to maintain a clean and orderly department, and clerical work.

_____ 18. Readily undertakes any procedures requested in his or her area of responsibility with little or no additional instruction.

_____ 19. Demonstrates a willingness to learn (motivation).

_____ 20. Performs equally in workload.

_____ 21. Signs up and seeks out clinical instructor to perform required exams in a timely manner.

_____ 22. Practices previously learned skills independently.

D. COOPERATION

_____ 23. Accepts and applies guidance, suggestions, and constructive criticism from the staff and the instructor.

_____ 24. Demonstrates ability to constructively work with staff, instructor, and all fellow students.

_____ 25. Recognizes and acknowledges limitations of knowledge and experience.

E. PROFESSIONALISM

_____ 26. Is respectful of patients. Shows interest in patients and uses appropriate communication skills while being efficient.

_____ 27. Communicates with staff and instructor (if late to lunch, location, prior to absence/tardy, etc.)

_____ 28. Maintains composure and professional decorum in all situations.

_____ 29. Personal appearance demonstrates professionalism: clean shoes and uniform, personally neat, proper accessories and hair style requirements.

_____ 30. Exercises self-discipline when speaking about fellow students, staff, and clinical sites.

_____ 31. Demonstrates good judgement and discretion in the performance of technical duties.

F. ADDITIONAL COMMENTS

_____ 32. Student is showing clinical proficiency and/or progress for level of training in the program presently attained.

_____ 33. Overall assessment: The student's overall clinical skills this semester is ____/99.

TOTAL SCORE DIVIDED BY 99, THEN MULTIPLY X 100= _____%

FINAL LETTER GRADE FOR THIS PERFORMANCE EVALUATION _____

INSTRUCTOR COMMENTS

In the space provided below, briefly summarize for the student their strengths and goals.

The evaluation has been reviewed by the student and the clinical instructor. The contents of the evaluation have been discussed with the student.

Clinical Instructor's signature _____ Date _____

Student's signature _____ Date _____

Rev 08/01/2022 SAS

Pensacola State College
Department of Health Sciences
Radiography Program

Technologist Evaluation of Student's Clinical Performance

Student's Name: _____

Clinical Assignment: _____

Dates of rotation: _____

To the Technologist: We value your input and comments in evaluating the student's progress through the program. Please check the box which best describes the student's performance and behavior in the 10 areas indicated. Additional space is provided for further comments and observations. Thank you!

	Excellent 10pts	**Good 8pts**	**Average 6pts**	**Needs improvement 4pts**	**Unsatisfactory 0pts**	**Not Applicable**
1. Quality of work						
2. Efficiency/ Speed						
3. Dependability						
4. Participation/ Initiative						
5. Responsibility						
6. Cooperation						
7. Patient Care						
8. Professional Appearance						
9. Attitude						
10. Practices Radiation Safety						

Total: _____

Comments:

_____

_____

_____

_____

Technologist Signature: _____ Date: _____

- Clinic Grading Scale: 95-100 = A;90-94 B+; 86-89 = B; 82-85 = C+; 75-81 = C; 72-74 = D+; 70-71 = D; and Below 70 = F

Appendix I

Pensacola State College – Radiography Program
Voluntary Declaration of Pregnancy Form

Instructions: Complete applicable declaration/withdrawal, strike through and initial non-applicable. Submit to the Clinical Coordinator. To Whom It May Concern:

In accordance with current regulations, I voluntarily wish to declare that I am pregnant. I believe I became pregnant in

_____(only the month and year need be provided).

In making this declaration, I wish to be afforded the protection that the unborn child shall not receive in excess of limits established below. If the threshold is exceeded, counseling will ensue with possible clinical site modifications. Students are not permitted to attend clinic if NRC limits are exceeded and will result in delayed program completion.

	Fetal Gestation Dose	**Fetal (monthly) Dose**
PSC Radiography	0.1mSv	0.005mSV
NRC Regulation	5.0 mSv	0.5 mSv

Student Name	**Student Signature**	**Date**
Clinical Coordinator Name	**Clinical Coordinator Signature**	**Date**
Program Director Name	**Program Director Name**	**Date**

Pensacola State College – Radiography Program
Withdraw of Pregnancy Declaration Form

INSTRUCTIONS: Complete applicable declaration/withdrawal, strike through and initial non-applicable. Submit to the Clinical Coordinator. To Whom It May Concern:

Effective immediately, I am voluntarily withdrawing my previous declaration of pregnancy. I understand that by submitting this form I agree to the removal of any clinical scheduling changes due to my declaration of pregnancy. I realize dose limits will revert to pre-declaration limits, and to the termination of any radiation monitoring that was added due to my declaration of pregnancy.

Student Name	**Student Signature**	**Date**
Clinical Coordinator Name	**Clinic Coordinator Signature**	**Date**
Program Director Name	**Program Director Signature**	**Date**

Addendum 1:

Energized Laboratory on Campus

The energized laboratory, located in room 3225 on the Warrington campus, is utilized as a training site for students. Training in the lab setting must be under the supervision of a registered radiographer (ARRT). The energized lab, which houses the portable radiography machine, is always locked and accessible only by the program director or clinical coordinator. Dedicated training times are scheduled when an ARRT faculty member is present to provide supervision. The lab is locked when appropriate supervision is not available.

The student must adhere to the following requirements while in the energized lab setting:

1. Sign into the lab with the date and time.
2. Exhibit professional behavior.
3. Adhere to program dress code policy.
4. No food or drinks.
5. Radiograph phantoms and positioning devices only.
6. Maintain ALARA principles and JRCERT standards.
7. Report equipment failure to appropriate faculty member.

Nov 2022 PKA

Addendum 2:

Updated Program Mission Statement as approved by the Pensacola State College Radiography Program Advisory Committee on November 3, 2022.

"The mission of the Pensacola State College Radiography Program is to graduate clinically competent Radiologic Technologists who demonstrate qualities of excellence in radiation safety and patient care. These graduates will be registry-eligible, entry-level radiographers who will enhance the healthcare community of the patients they serve."

The Pensacola State College Radiography Program Advisory Committee also approved an update to the second goal for the program to make it more specific for measurement.
Updated Program Goal # 2

"The student will demonstrate effective communication skills."

Addendum 3:

Updated Didactic (Classroom on Campus) Dress Code

While attending class on the Warrington campus, the student will be permitted to wear a “PSC” shirt (e.g. sweatshirt, T-shirt, crewneck shirt) or a program-approved shirt with their black scrub pants and tennis shoes. Students will be allowed to wear their hair down but must have a hair tie to pull their hair up and away from their faces when participating in lab activities.
Students must still wear their name badges and have all items available for pocket check offs on their person.