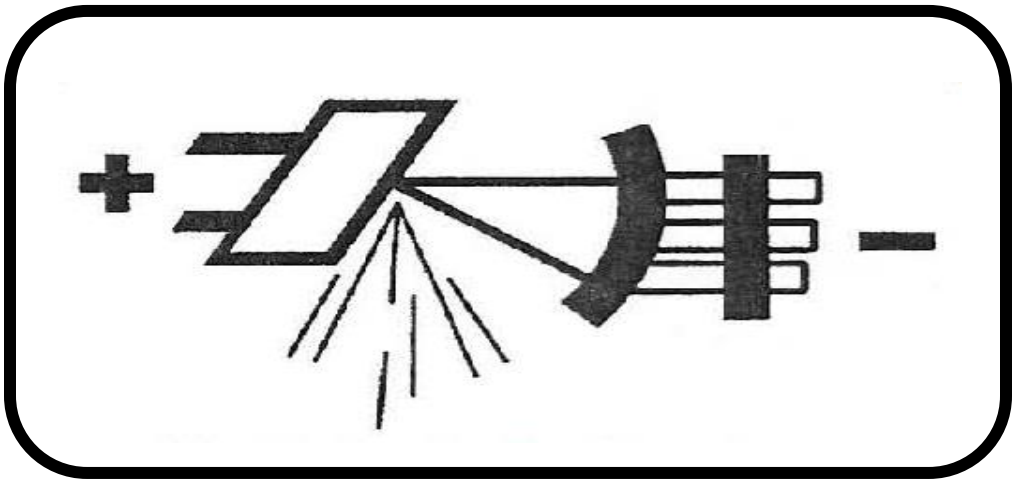
St. Louis Community College

Radiologic Technology Program



Class of 2027

Student Handbook Florissant Valley

Welcome

St. Louis Community College is proud to offer this Student Handbook to students in the Radiologic Technology program. The purpose is to provide students with the information they will need in order to become very familiar with the program. The Radiologic Technology program started in 1967 at the Forest Park Campus and has since graduated well over a thousand radiologic technologists for the St. Louis area, surrounding counties, as well as the entire state of Missouri. Upon graduation, students will be awarded the Associate in Applied Science Degree and will be eligible to sit for the certification examination of the American Registry of Radiologic Technologists.

The field of radiologic technology is an exciting and expanding field. There are many opportunities for graduates of the program.

The faculty, counselors, and administrators at St. Louis Community College, along with the clinical preceptors, supervisors, and registered technologists at the clinical education sites, wish to help you reach your goal. Feel free to contact any of us for advice and assistance during your academic career. We are here to help you. We all welcome you and wish you the best in your professional endeavors!

Radiologic Technology Program Faculty

Program Overview

Introduction

This student handbook is designed to provide answers to many questions that students are likely to have while enrolled in the Radiologic Technology program. It is also intended to serve as a reference regarding student responsibilities. There are several other publications issued by campus and college offices that provide detailed procedures and descriptions of services that are available to students. The policies and regulations outlined in these publications must also be observed, in addition to the Radiologic Technology program-specific information provided in this handbook.

It is extremely important that all students read and understand the policies found in this handbook.

Philosophy of the Program

The St. Louis Community College Radiologic Technology program is committed to providing quality education and meeting the needs of the community for professional radiologic technologists. The program personnel are aware of their leadership responsibilities. They will maintain a collegiate Radiologic Technology program sufficiently flexible to adjust to the changing educational requirements of the profession. To fulfill these needs, the program offers radiographic instruction, coordinated clinical education, and those academic courses deemed desirable to ensure both a concerned and aware citizen as well as a thinking and compassionate radiologic technologist.

Mission Statement

The mission of the Radiologic Technology program conducted at St. Louis Community College is to graduate students with the employment skills of a radiologic technologist, to meet the needs of the medical imaging community, while providing quality patient care. The program will foster a supportive environment for student success.

Type of Program

The STLCC Radiologic Technology program is a twenty-three-month community college-based program that includes didactic instruction with coordinated clinical education in all aspects of the field of radiologic technology.

Degree Granted

Associate of Applied Science

Program Goals

Goal 1: Students will graduate with critical thinking and problem-solving skills.
Student Learning Outcomes:

- Students will evaluate images for appropriate positioning and image quality.
- Students will demonstrate the ability to adapt to situations where standard protocols do not apply.

Goal 2: Students will achieve clinical competence.
Student Learning Outcomes:

- Students will position the patient and imaging system to perform acceptable radiographic examinations and procedures.
- Students will maintain a safe environment.

Goal 3: Students will demonstrate professionalism.
Student Learning Outcomes:

- Students will demonstrate ethical and professional values.
- Students will exhibit professional traits expected of radiologic technologists.

Goal 4: Students will effectively communicate with people from a variety of backgrounds.
Student Learning Outcomes:

- Students will demonstrate effective written communication.
- Students will demonstrate effective oral communication.

Technical Standards

Aligned with the College's Mission, Vision, and Values, the Health Sciences programs at St. Louis Community College strive to create inclusive and transformative educational experiences for future generations of healthcare professionals. Valuing the uniqueness and potential of each learner, we work to foster a culture of respect and equality that is welcoming to all students.

The technical standards outlined below describe the abilities and characteristics typically required to successfully perform the responsibilities of a radiologic technologist. These attributes, also referred to as Technical Standards, have been developed to create transparency and promote understanding surrounding the expectations of STLCC's Health Science programs. These standards **are not** used as criteria for admission to the Radiologic Technology program.
Specific to the Radiologic Technology program, successful applicants must possess skills within the following areas:

- Observation
- Communication
- Motor
- Intellectual, Conceptual, Integrative
- Behavioral Navigation, Social Interactions, and Professional Presentation

Request for Accommodation

After reviewing the Technical Standards, students who anticipate needing accommodations are encouraged to work with the STLCC Access Office to ensure that reasonable accommodations can be implemented effectively during classroom and clinical training. Given the intricacies associated with clinical-based programs, additional time may be needed to effectively implement an accommodation. Disability-related accommodation is not retroactively applied; therefore, students are encouraged to engage in conversations with the Access Office as soon as possible. Contact information can be found on the access office website www.stlcc.edu/access.

Observation

1. Function in environments with low lighting, such as radiographic procedure rooms.
2. Acquire information from demonstrations (up close and from afar), program experiences, written documents, and computer systems.
3. Assess patients for compliance with instructions, comfort, and condition.
4. Evaluate radiographic images for appropriate positioning, exposure, and diagnostic quality.
5. Identify and retrieve supplies and equipment necessary for various imaging procedures.
6. Read a range of print sizes and fonts on documents, labels, control panels, and digital screens.
7. Respond appropriately to all clinical site intercom pages and alarms.
8. Recognize and interpret auditory and/or visual signals from imaging equipment.
9. Interpret and respond appropriately to patients' questions, concerns, or distress.
10. Recognize and assess patient changes in mood, activity, cognition, verbal, and non-verbal communication.
11. Detect changes in equipment operation based on auditory and/or visual cues (e.g., alarms or alerts).

Communication (in English)

1. Read and comprehend requisitions, medical charts, physician orders, written directions, and other related documents.
2. Communicate in person and in writing effectively, respectfully, and sensitively with: Patients, families, faculty, preceptors, and members of the healthcare team.
3. Provide explanations of procedures in a manner that is appropriate and understandable to patients with a variety of backgrounds and abilities.
4. Accurately document patient care and procedural information in clinical records.
5. Respond appropriately to verbal instructions from physicians, instructors, supervisors, and colleagues accurately.

Motor

1. Assist with the safe transfer of patients between wheelchairs, stretchers, hospital beds, and radiographic equipment.
2. Operate and manipulate radiographic equipment and related accessories safely and efficiently.
3. Respond promptly and effectively in emergency situations, including but not limited to performing CPR or supporting a patient who is fainting.
4. Safely position or assist in positioning patients for imaging procedures, regardless of their physical condition or mobility.
5. Lift, move, or transport heavy equipment using proper safety techniques (mobile x-ray machine, patient in wheelchair/stretcher/hospital bed, image receptors and x-ray accessories).
6. Stand for extended periods during lab activities, clinical rotations, and imaging procedures.
7. Wear the required protective lead garments for certain radiologic procedures.

Intellectual, Conceptual, Integrative

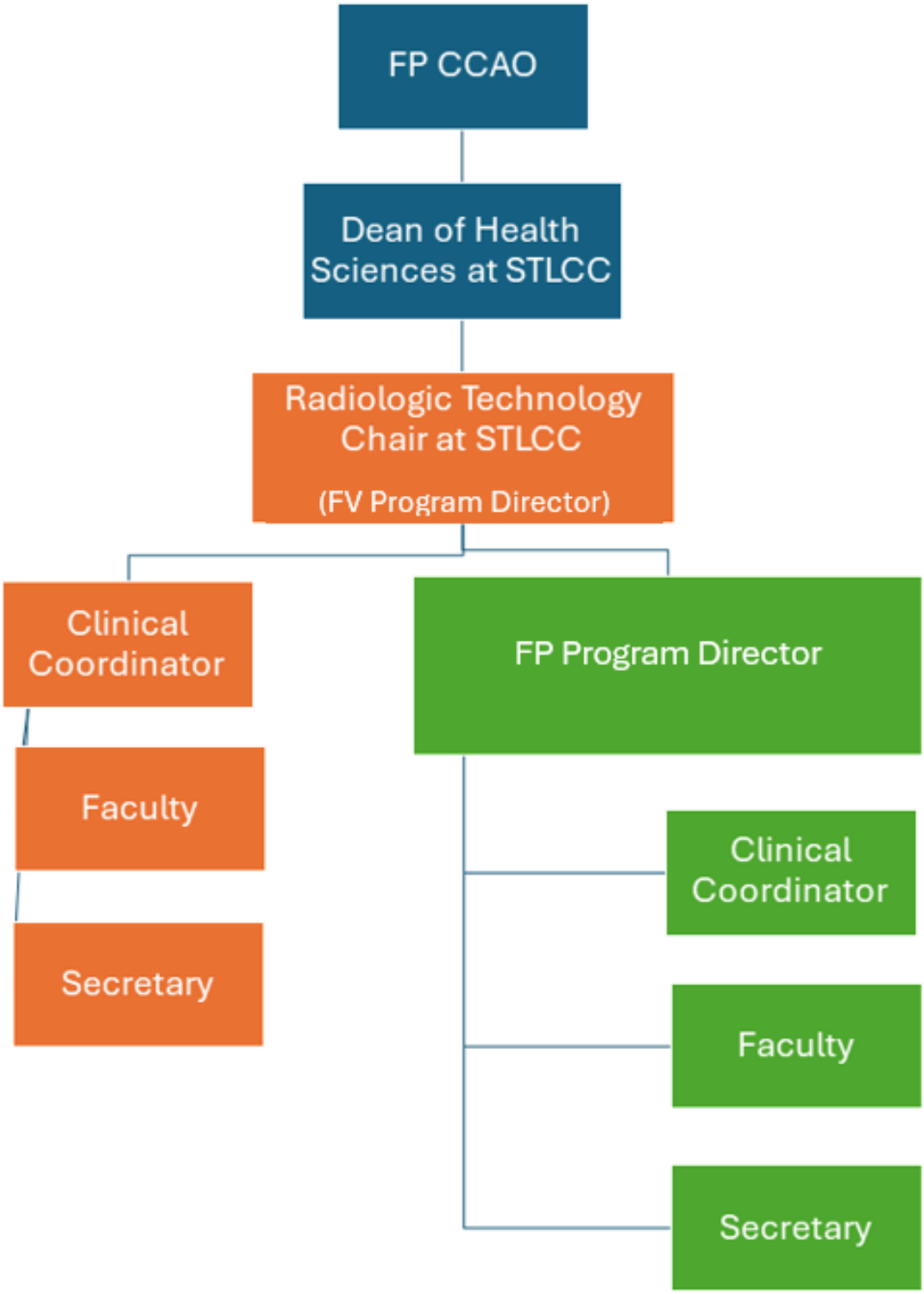
1. Accurately analyze and review data related to radiographic procedures and patient care in the diagnostic imaging environment.
2. Exercise professional judgment to perform the responsibilities of a radiologic technologist efficiently, ensuring timely and accurate imaging services.
3. Apply critical thinking and problem-solving skills to select and implement appropriate radiographic techniques, positioning, and exposure factors based on patient conditions and clinical indications.

Behavioral, Social, Professional

1. Demonstrate professionalism by maintaining respectful, effective, and collaborative relationships with healthcare team members across various clinical settings.
2. Adhere to the dress code and professional appearance standards of the Radiologic Technology program.
3. Exhibit emotional stability and resilience to perform effectively under stress and adapt to the fast-paced, high-pressure environments typical of radiologic technology practice.

***The Technical Standards will be signed in CastleBranch**

Saint Louis Community College
Radiologic Technology
Organizational Chart



Saint Louis Community College
Radiologic Technology
Program Faculty

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Saint Louis Community College
Radiologic Technology
Clinical Site List

Links to Clinical Site List in Canvas (includes mailing addresses)

Chart

Advanced Bone & Joint - O'Fallon

Advanced Bone & Joint - St. Peters

Advanced Bone & Joint – Wentzville

Alton Memorial Hospital

Barnes Jewish West County Hospital

Barnes Jewish Hospital

Barnes-Jewish Orthopedic Center for Advanced Medicine

Barnes-Jewish St. Peters Hospital

BJC Outpatient Center at Chesterfield
Christian Hospital Northeast

Memorial Hospital – Belleville

Memorial Hospital – Shiloh

Mercy Hospital South

Missouri Baptist Medical Center

Missouri Baptist Medical Outpatient Center - Sunset Hills

Progress West Healthcare Center

SSM Health Cardinal Glennon Children's Hospital

SSM Health Cardinal Glennon Pediatric Specialty Services- North County

SSM Health Cardinal Glennon Pediatric Specialty Services- South County

SSM Health DePaul Hospital

SSM Health Medical Group - Troy, MO

SSM Health Saint Louis University Hospital

SSM Health St. Joseph Hospital - Lake Saint Louis

SSM Health St. Joseph Hospital - St. Charles

SSM Health St. Joseph Hospital - St. Charles Outpatient Center – Kisker

SSM Health St. Joseph Hospital - St. Charles Outpatient Center – Veterans

SSM Health St. Mary's Hospital

SSM St. Clare Hospital of Fenton

St. Louis Children's Hospital

St. Luke's Hospital

St. Luke's CDI - Rayus Radiology at Frontenac

St. Luke's Des Peres Hospital

Washington University & Barnes-Jewish Orthopedic Center in Chesterfield

Accreditation

St. Louis Community College is fully accredited by the North Central Association of Colleges and Schools and approved by the Missouri State Department of Vocational Education.

The Radiologic Technology program at Forest Park is accredited by the JRCERT.

The Radiologic Technology program at Florrisannt Valley is currently in the process of attaining JRCERT accreditation.

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

JRCERT Due Process

Reporting Process Important Notes for Reporting Allegations Against a Program

1. The JRCERT cannot advocate on behalf of any student(s). An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student.
2. The investigation process may take several months.
3. The JRCERT will not divulge the identity of any complainant(s) unless required to do so through legal process.

Process

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

If the individual is unable to resolve the complaint with program/institution officials or believes that the concerns have not been properly addressed, they may submit allegations of non-compliance to the JRCERT. The Allegations Reporting Form must be completed and mailed to the JRCERT with the required supporting materials. This form can be found at www.jrcert.org.

JRCERT Mailing Address

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

JCERT Standards

Standards for an accredited educational program in radiography, adopted by The Joint Review Committee on Education in Radiologic Technology. Effective January 1, 2021

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.

Objectives:

1.1 The sponsoring institution and program provide students, faculty, and the public with policies, procedures, and relevant information. Policies and procedures must be fair, equitably applied, and readily available.

1.2 The sponsoring institution and program have faculty recruitment and employment practices that are nondiscriminatory.

1.3 The sponsoring institution and program have student recruitment and admission practices that are nondiscriminatory and consistent with published policies.

1.4 The program assures the confidentiality of student educational records.

1.5 The program assures that students and faculty are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of noncompliance with the Standards.

1.6 The program publishes program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) on an annual basis.

1.7 The sponsoring institution and program comply with the requirements to achieve and maintain JRCERT accreditation.

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.

Objectives:

2.1 The sponsoring institution provides appropriate administrative support and demonstrates a sound financial commitment to the program.

2.2 The sponsoring institution provides the program with the physical resources needed to support the achievement of the program's mission.

2.3 The sponsoring institution provides student resources.

2.4 The sponsoring institution and program maintain compliance with United States Department of Education (USDE) Title IV financial aid policies and procedures, if the JRCERT serves as gatekeeper.

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.

Objectives:

3.1 The sponsoring institution provides an adequate number of faculty to meet all educational, accreditation, and administrative requirements.

3.2 The sponsoring institution and program assure that all faculty and staff possess the academic and professional qualifications appropriate for their assignments.

3.3 The sponsoring institution and program assure the responsibilities of faculty and clinical staff are delineated and performed.

3.4 The sponsoring institution and program assure program faculty performance is evaluated and results are shared regularly to assure responsibilities are performed.

3.5 The sponsoring institution and/or program provide faculty with opportunities for continued professional development.

Standard Four: Curriculum and Academic Practices

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

Objectives:

4.1 The program has a mission statement that defines its purpose.

4.2 The program provides a well-structured curriculum that prepares students to practice in the professional discipline.

4.3 All clinical settings must be recognized by the JRCERT.

4.4 The program provides timely, equitable, and educationally valid clinical experiences for all students.

4.5 The program provides learning opportunities in advanced imaging and/or therapeutic technologies.

4.6 The program assures an appropriate relationship between program length and the subject matter taught for the terminal award offered.

4.7 The program measures didactic, laboratory, and Clinical Ed courses in clock hours and/or credit hours through the use of a consistent formula.

4.8 The program provides timely and supportive academic and clinical advisement to students enrolled in the program.

4.9 The program has procedures for maintaining the integrity of distance education courses.

Standard Five: Health and Safety

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.

Objectives:

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

5.2 The program assures each energized laboratory is in compliance with applicable state and/or federal radiation safety laws.

5.3 The program assures that students employ proper safety practices.

5.4 The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.

5.5 The sponsoring institution and/or program have policies and procedures that safeguard the health and safety of students.

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.

Objectives:

6.1 The program maintains the following program effectiveness data:

- five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation,
- five-year average job placement rate of not less than 75 percent within twelve months of graduation, and
- annual program completion rate.

6.2 The program analyzes and shares its program effectiveness data to facilitate ongoing program improvement.

6.3 The program has a systematic assessment plan that facilitates ongoing program improvement.

6.4 The program analyzes and shares student learning outcome data to facilitate ongoing program improvement.

6.5 The program periodically reevaluates its assessment process to assure continuous program improvement.

Advisory Committee

The primary function of the Radiologic Technology Advisory Committee is to provide counsel to the program faculty and College administration to ensure that the program continues to meet the needs of students and the community. The members of the committee are individuals involved in the imaging profession in various capacities.

Advisory Committee Student Representative

As part of the professional development process, at least one student will be chosen by the radiologic technology faculty to serve as a guest to represent students at the committee meetings. This selection will occur no later than March 31st of each year of the student's first year in the program. The term for the student selected will end on the scheduled day of their class graduation.

The student representative is expected to attend and actively participate in the annual advisory committee meetings. Additionally, the student representative should share information about the meetings with radiography program students.
The selection of the student representative will be based on the following criteria:

1. Possess the following characteristics:
    - In good standing in the program (didactic and clinical education courses)
    - Demonstrate leadership qualities
    - Good communication skills
    - Demonstrate excellent patient care skills in both the lab and clinical settings
    - Very good attendance and punctuality in didactic and clinical education courses
    - Mature
    - Adaptable
    - Demonstrate a professional attitude
    - Program advocate
2. All interested students are asked to provide a response to the following question:
    "What role should a student play on the program's advisory committee, and how will this assist the student in professional development?"
    The response should be completed in 12-point font, double-spaced, and be at least 250 words in length. It should be sent to the program director via email as an attachment by March 1st.
3. The paper will be reviewed using the following criteria:
    - Personal reflection
    - Content
    - Organization
    - Style - sentence fluency
    - Grammar, spelling, punctuation

Radiography Club

The mission of the radiography club is:

1. To promote student involvement in the radiologic technology profession
2. To provide community service
3. To provide a means of communication and mentoring between 1st-year and 2nd-year radiography students
4. Membership is open to all students enrolled in the Radiologic Technology program at St. Louis Community College.

A 2nd-year student will serve as president and a 1st-year student as vice president. Two secretaries and two treasurers will be elected, one from each class.
Officer elections will be conducted as follows:

1. Elections will be held during National Radiologic Technology Week in the fall semester.
2. Elections will be on paper ballots.
3. An announcement will be made two weeks in advance of the elections so that those interested in being candidates can be added to the ballot.
4. In the event an office is left vacant, an emergency election will be held as soon after the position is vacant as is feasible.

Radiologic Technology Curriculum- **Forest Park**

CAREER GENERAL EDUCATION		CREDITS
BIO:207	*Anatomy & Physiology I	4
BIO:208	*Anatomy & Physiology II	4
COM:101	Oral Communication I	3
ENG:101	College Composition I	3
MTH:140S	Intermediate Algebra (or higher)*	3
PSY:200	General Psychology	3
XXX:XXX	Civics Requirement #	3

Required – Math and science course grade of C or higher

AREA OF CONCENTRATION

Fall Semester I

XRT:101	Radiographic Procedures I	4
XRT:104	Principles of Radiographic Exposure I	3
XRT:111	Clinical Education I	2

Spring Semester I

XRT:102	Radiographic Procedures II	3
XRT:105	Principles of Radiographic Exposure II	3
XRT:107	Radiologic Physics I	2
XRT:112	Clinical Education II	2

Intersession I

XRT:121	Radiographic Image Evaluation I	2

Summer I

XRT:116	Clinical Education III	3

AREA OF CONCENTRATION (CONT.)		CREDITS

Fall Semester II

XRT:103	Radiographic Procedures III	3
XRT:108	Radiologic Physics II	2
XRT:122	Radiographic Image Evaluation II	2
XRT:213	Clinical Education IV	3

Spring Semester II

XRT:207	Radiologic Pathology	2
XRT:208	Advanced Imaging Modalities	2
XRT:209	Radiobiology	2
XRT:214	Clinical Education V	3

Intersession II

XRT:215 Clinical Education VI +

Summer II

XRT:211	Radiologic Technology Review	3
XRT:212	Professional Development in Radiography	2
XRT:215	Clinical Education VI +	2

Program Total **73**

#See current college catalog for courses that meet the Civics Requirement

Radiologic Technology Curriculum- **Florissant Valley**

CAREER GENERAL EDUCATION		**CREDITS**
BIO:207	*Anatomy & Physiology I	4
BIO:208	*Anatomy & Physiology II	4
COM:101	Oral Communication I	3
ENG:101	College Composition I	3
MTH:140S	Intermediate Algebra (or higher)*	3
PSY:200	General Psychology	3
XXX:XXX	Civics Requirement #	3

Required – Math and science course grade of C or higher

AREA OF CONCENTRATION

Spring Semester I		
XRT:101	Radiographic Procedures I	4
XRT:121	Image Evaluation I	2
XRT:104	Principles of Radiographic Exposure I	3
XRT:111	Clinical Education I	2
Summer I		
XRT:112	Clinical Education II	2
Fall Semester I		
XRT:102	Radiographic Procedures II	3
XRT:122	Image Evaluation II	2
XRT:107	Radiologic Physics I (8 week)	2
XRT:108	Radiologic Physics II (8 week)	2
XRT:116	Clinical Education III	3

AREA OF CONCENTRATION (CONT.)		**CREDITS**
Spring Semester II		
XRT:103	Radiographic Procedures III	3
XRT:105	Principles of Radiographic Exposure II	3
XRT:207	Radiologic Pathology	2
XRT:213	Clinical Education IV	3
Summer II		
XRT:209	Radiobiology	2
XRT:214	Clinical Education V	3
Fall Semester II		
XRT:211	Radiologic Technology Review	3
XRT:212	Professional Development in Radiography	2
XRT:208	Advanced Imaging Modalities	2
XRT:215	Clinical Education VI	2
Program Total		**73**

#See current college catalog for courses that meet the Civics Requirement

Student Services

Advising

Academic advisors are "course specialists" who have the expertise needed to provide students with program planning assistance.
Services provided include:

- Assist students who are experiencing academic difficulty
- Offer suggestions for improving academic performance
- Provide advice on the proper sequencing of academic courses
- Provide information regarding specific degree and general education requirements
- Evaluate academic course history to determine graduation eligibility
- Make referrals to various college support services
- Advise students wanting to transfer to four-year institutions

The Academic Advising office is located in SC-200 and can be reached by calling (314) 644-9457. For more information, visit https://www.stlcc.edu/admissions/advising/

Counseling Services

Professional counselors are available to assist students with educational, career, and personal concerns. All services are free to STLCC students and alumni.

Professional Counselors

- Personal counseling
- Family problems
- Depression
- Substance abuse
- Motivational issues
- Relationship issues
- Stress and anxiety

***Academic Counselors*:**

- Setting educational goals
- Managing time
- Reducing test anxiety
- Accessing campus resources
- Developing transfer plans
- Learning skills to achieve success

Counseling is located on the second floor Student Center and can be reached by calling (314) 644-9239. For more information, visit https://www.stlcc.edu/student-support/counseling.aspx.

Academic Support Center

The Academic Support Center offers a variety of learning services to students. The Center provides tutoring in English as a Second Language (ESL), reading, basic study skills, writing assistance, and all levels of math and sciences. The Center offers workshops in Microsoft applications and study skills improvement. Computers are available for student use for homework assignments and research. Students may contact the Academic Support Center by calling (314) 644-9270. For more information, visit https://www.stlcc.edu/student-support/academic-support/

Americans With Disabilities Act (ADA) Access

STLCC is committed to providing all students equal access to learning opportunities.
Access Office staff, available on each campus, work with students who have disabilities to provide and/or arrange academic accommodations. Students who have, or think they may have, a disability are encouraged to contact the campus Access Office:

- Forest Park & Harrison Center: 314-644-9039 or FPAccess@stlcc.edu
- Florrisant Valley: 314-513-4551 or FVAccess@stlcc.edu

Students with academic accommodations are responsible for providing their professors with instructor Memos and should do so early in the course. For more information, see Access Services (https://www.stlcc.edu/student-support/disability-services/).

Advice/Guidance to Students

Your future success as a student will largely depend on how you are perceived by the staff at your assigned clinical site. Although lasting impressions develop over time, first impressions are especially important. From the very beginning of your clinical education, it is essential to present yourself as a dedicated and motivated student who is serious about learning the art and science of medical imaging. You will be spending the majority of your time with the technologists, and building strong, professional relationships with them will be key to your success. Demonstrate your commitment by asking thoughtful questions, showing initiative, and actively seeking out learning opportunities. Observe carefully, listen attentively, engage fully, and continually strive to learn and improve.
It is also important to recognize that not all procedures you observe will match exactly what you learned in the classroom or at previous clinical sites. Many departments adjust "textbook" procedures to meet their specific needs and protocols. There are often multiple correct approaches to performing a procedure. A method that differs from what you were taught may still be entirely appropriate. Maintain an open mind, and ask questions to understand why certain practices are followed before forming judgments.
Finally, keep in mind that the clinical site's primary mission is to provide high-quality patient care, which can sometimes mean that teaching moments are limited. There may be times when you feel overlooked, and it is important to be understanding. Take full advantage of opportunities when staff technologists are available to support your learning, and remain proactive throughout your clinical experience.

Program Policies

CastleBranch

The following must be in completed status in CastleBranch prior to beginning the program:

- Background check
- Drug screen
- Physical Examination
- Immunizations
- PPD
- CPR certification
- Signed Confidentiality Statement
- Title IX training
- Acknowledgment of Student Handbook

Policies Requiring Student Signature

Many program policies require the student's signature to acknowledge that they have read and understand them. By signing in CastleBranch, the student affirms their understanding of the policy and its implications. A list of the policies that require a student signature in CastleBranch is below:

- Agreement with Respect to Participation in Clinical Education
- Pregnancy Policies
    - *Pregnancy and the Student Radiologic Technologist.*
    - *Attachments A, B, and C*
    - *Attachment D*
- Program Retention and Readmission Policy
- Readmission Appeal Policy
- Statement of Responsibility
- Student Confidentiality Agreement
- Supervision and Radiation Protection
- Technical Standards

Academic Integrity Statement

St. Louis Community College recognizes that the core value of academic integrity is essential to all activities of an academic community and provides the cornerstone for teaching and learning. It is characterized by upholding the foundational principles of honesty, equity, mutual responsibility, respect, and personal integrity. Advancing the principles of academic integrity is essential because doing so enhances academic discourse, the quality of academic work, institutional operations, and the assessment of educational goals.

Observing academic integrity involves:

- Maintaining the standards of the College's degrees, certificates, and awards to preserve the academic credibility and reputation of the College;
- Communicating expectations, best practices, and procedures in order to promote the principles of academic integrity and ensure compliance;
- Providing environments, instruction, and access to resources necessary for maintaining integrity in learning;
- Taking responsibility and personal accountability for the merit and authenticity of one's work;
- Giving proper acknowledgment and attribution to those who directly contribute to a project or whose work is used in the completion of a project;
- Recognizing what compromises academic integrity, whether intentional or unintentional (plagiarism, cheating, uncivil behavior, etc.).

It is the shared duty of faculty, students, and staff of the College to understand, abide by, and endorse academic integrity.

Cheating or any other form of academic dishonesty cannot be tolerated among anyone preparing to enter a health-related field. If it is determined that cheating or plagiarism has occurred, the instructor will determine the disciplinary action. Possible consequences could include a warning, grade reductions, or dismissal from the program. Students dismissed for academic dishonesty will not be considered for re-admission to the program.

Statement of Responsibility

For and in consideration of the benefit provided the undersigned in the form of experience in evaluation and treatment of patients of _____("Clinical Site"),

The undersigned and his/her heirs, successors and/or assigns do hereby covenant and agree to assume all risks or, and be solely responsible for, any injury or loss sustained by the undersigned while participating in the program operated by St. Louis Community College at thier assinged clinical site unless such injury or loss arises solely out of the clinical sites gross negligence or willful misconduct.

***The Statement of Responsibility will be signed in CastleBranch**

Student Confidentiality Agreement

As the undersigned student enrolled in an allied health program at **ST. LOUIS COMMUNITY COLLEGE** ("STLCC" or the "College"), I understand and agree to the following:

1. My clinical education will include access to confidential patient information at the clinical sites where I participate in clinical education (each, a "Clinical Site"). This information includes information about the patient or the patient's family including diagnosis, treatment, and/or the patient's ability to pay. The confidentiality of this information must be maintained regardless of the form of information, including electronic records, oral communications, paper records and computer programs and applications. I agree to protect to the fullest extent required by all state and federal laws and Clinical Site policies the patient's right to confidentiality of medical and personal information.

2. My clinical education may also include access to other confidential information about: (a) an employee or job applicant; (b) a physician or other practitioner; (c) peer review or quality of care; (d) the business plans or finances of the College or Clinical Sites; (e) my computer password; (f) the computer password of others; (g) students and instructors; or (h) any other person who makes use of clinical facilities and services.

3. I agree that, except as clearly directed by my instructor, I will not at any time either during or after my studies at the College, seek, disclose or discuss confidential patient information or other confidential information as set forth in paragraph two.

4. I agree to become familiar with and fully comply with the HIPAA and other patient confidentiality policies and procedures of the Clinical Sites where I participate in clinical education.

5. I recognize my disclosure of confidential information may cause irreparable injury to a patient, the College, and/or a Clinical Site.

6. I understand my violation of this agreement or my disclosure of any confidential information in an unauthorized manner can result in my immediate dismissal from the Radiologic Technology program at the College.

7. I agree to seek the guidance of my clinical faculty or supervisor if I am uncertain or unclear of my confidentiality responsibilities.

***The Student Confidentiality Agreement will be signed in CastleBranch**

HIPAA Violations

If it is determined that a HIPAA violation has occurred, the program faculty will determine the disciplinary action. Possible consequences will range from an assignment or course grade reduction and/or program dismissal. Students dismissed from the program due to a HIPAA violation will not be considered for re-admission to the program.

Graduation

To prepare for graduation, students should run a degree audit before each term. To run a degree audit (https://stlcc.edu/admissions/advising/degree-audit.aspx) use Archer Connect to confirm that general education requirements for the student's *declared major* have been met. Do not assume that courses completed at other institutions have been accepted to meet the general education requirements of the program. Contact Academic Advising regarding any discrepancies. **It is the student's responsibility to ensure that all requirements for graduation have been satisfactorily met.**

When the student meets all graduation requirements for their declared major, the Registrar's Office will notify them by email during the term in which they will complete their degree requirements.

Degree Conferral: Degrees will be conferred and reflected on transcripts within two weeks of the official degree conferral date. There is one *Commencement ceremony* per year, and it includes the current spring graduation candidates, as well as the prior fall and summer graduates. Students graduating during the current summer term may request to participate in the ceremony if they have six hours or fewer to complete and support from the program director. Students will need to RSVP for the Ceremony through the commencement STLCC webpage.

ARRT Credential: Before a student can apply online for an ARRT credential, they must create an ARRT account. The program director will share the appropriate instructions for doing so within 3 months of program completion. It is the student's responsibility to complete the account creation and follow all necessary steps to complete the registration.

The address is: The American Registry of Radiologic Technologists (www.arrt.org)
1255 Northland Drive
St. Paul, Minnesota 55120-1155
Telephone Number: (651) 687-0048

Change of Address/Name

If a student changes their name, address, or phone number while enrolled in the program, they must inform the program director of these changes. The new information should be put in writing and given to the program director to be placed in the student's file. It is still necessary for the student to make these revisions using Archer Connect and notify their clinical preceptor.

Program Grading Scale

The following grading scale is used in all Radiologic Technology program courses.

93 - 100 = A
84 - 92 = B
75 - 83 = C
68 - 74 = D
0 - 67 = F

Grade Point Average

To determine a student's grade point average multiply the number of grade points for each grade received by the number of semester hours for the course; and then divide the total number of grade points by the total number of semester hours attempted. Points are allowed for the following grades: A-4; B-3; C-2; D-1. Grades of W, T, R, S, I and PR are excluded from the calculation of grade point average since they have no grade point value

(EXAMPLE)

		Credits	Grade	Points	Total Points
BIO:207	Anatomy and Physiology	4	C	2	8
XRT:101	Radiographic Procedures I	4	B	3	12
XRT:111	Clinical Education I	2	C	2	4
XRT:104	Principles of Radiographic Exposure I	3	B	3	9
MTH:160	College Algebra	4	B	3	12
	Total	17			45

45 grade points divided by 17 credit hours = 2.64 G.P.A.

Clinical Education Grading

Clinical grades are determined using multiple assessment tools to provide a comprehensive evaluation of student performance. These tools include the Clinical Grading Rubric, the Professional Development Evaluation (PDE), and Case Studies (when assigned). Each component is designed to measure different aspects of clinical competence, professional behavior, and critical thinking skills.

Students are encouraged to view each assessment as an opportunity for growth, learning, and professional development, knowing that consistent effort and dedication will lead to success in both the clinical setting and their future careers.

Clinical Grading Rubric

The Clinical Grading Rubric is utilized to document and organize all clinical requirements. It outlines the grading criteria for each clinical course and is available in Appendix H of this handbook. Additionally, the rubric can be accessed within each Clinical Education course on Canvas. Clinical requirements must be completed by the last day of each semester (not including finals week).

Professional Development Evaluation (PDE)

Clinical performance is evaluated at the end of each rotation using the Professional Development Evaluation (PDE). The PDE serves as one of the tools in determining the student's Clinical Education grade.

Points earned on each PDE during the current semester are averaged, and the resulting score is entered into the Clinical Grading Rubric.

A copy of the PDE used for each Clinical Education Course can be found in Appendix I.

Case Studies

As part of the Radiography program, all students are required to complete and present two case studies: one during the first year and another during the second year. These presentations serve as a meaningful opportunity for students to share and reflect on their clinical experiences, engage in professional discussions, and enhance their presentation skills.

The case study will be included in the Clinical Education Course grade and is a mandatory requirement for the successful completion of the Clinical Education Course.

Presentation Day Schedule

The case study presentations will be held on a designated day that will be identified on the Program Calendar.

The case study documents, including instructions, grading rubrics, and the verification form, will be available in the "Class of" Canvas Course Shell. Link to FV Class of 2027 Canvas Course

Program Retention Policy

Students must follow all clinical site and Radiologic Technology program policies and procedures. Any non-compliance may result in student disciplinary action.

Each clinical site reserves the right to immediately remove a student from their facility for non-compliance with policies and procedures. The student will be referred for disciplinary action to the faculty and administration of St. Louis Community College. In this event, one of the following will apply:

- If possible, transfer to a different clinical site.
    - Any missed time will have to be made up according to the established make-up schedule.
    - Only one (1) transfer will be allowed during the 23-month program.
- Dismissal from the program. **Students are not eligible for future readmission.**

If a student engages in unethical, inappropriate, or dishonest behavior, one of the following actions can be taken:

- Warning
- Points deducted from the exam or assignment
- Zero on the exam or assignment
- Reduction of the final course grade
- Grade of "F" for the course
- Dismissal from the program. **Students are not eligible for readmission.**

Failure to abide by the "Code of Ethics" as found in the student handbook will result in disciplinary action up to and including dismissal from the program. **Students are not eligible for future readmission.**

Academic Requirements

First Semester Requirements:

- All Radiologic Technology program courses must be completed with a course grade of C or better.
    - Earning a course grade of less than a C in any first-semester course will result in dismissal from the program.
    - The student will be eligible to return to the program according to the readmission policy below.

After the First Semester:

- All Radiologic Technology program courses must be completed with a course grade of C or better.
- **First Course Grade Below a C:**
    - Earning a course grade of less than a C in any programmatic course will require the student to retake the course.
        - The student may remain in the program and continue to progress with their cohort.
        - The failed course must be repeated the next time it is offered.
        - **Programmatic courses may only be repeated once.**
        - Any missed clinical time due to schedule conflicts must be made up in accordance with clinical site and program requirements.

- **Second Course Grade Below a C:**
    - The second time a student earns a course grade of less than a C in a programmatic course, it will result in dismissal from the program.
        - The student will be eligible to return to the program according to the readmission policy on the next page.

Program Readmission Policy

Students who return to the program following **academic dismissal** will be required to **restart the program**. All previously completed programmatic courses must be repeated, regardless of the grades earned.

However, students who have completed **all first-year courses with a course grade of C or better** may be eligible to **test out of the first-year coursework** by taking the **Readmission Placement Exam**.

- **After readmission, earning one course grade of less than a C will result in dismissal.** Programmatic courses may only be repeated once. Students dismissed after readmission will NOT be eligible for future readmission
    - The following must be in completed status on CastleBranch prior to returning from a leave of absence:
        - New Background check
        - New Drug Screen
        - Updated Immunization tracking
        - Updated CPR (if expired)

Readmission Placement Exam

The Readmission Placement Exam is a comprehensive assessment covering all content from the first year of the Radiologic Technology program.

- **If the student earns a score of 75% or higher** on the Readmission Placement Exam:
    - The student may re-enter the program at the beginning of the second year and join an in-progress cohort.
    - Clinical competencies in Trajecsys will be retained.

- **If the student earns below 75%** on the Readmission Placement Exam:
    - The student will be required to restart the program as a first-year student and repeat all courses.
    - All previously completed Clinical Competencies will be removed from Trajecsys and must be recompleted.

This policy ensures that students returning to the program meet current educational and clinical standards while providing a fair opportunity for advanced placement based on prior academic achievement within the program.

***The Retention/Readmission Policy will be signed in CastleBranch**

Program Transfer and Course Repetition Policy

Students enrolled in a Radiologic Technology program at STLCC are not permitted to transfer between locations (Forest Park and Florissant Valley). Each student is expected to complete the program at the location into which they were originally admitted.

Students who earn less than a C in a Radiologic Technology program course may request to repeat the course at another STLCC location, provided they receive prior approval from the program director at the preferred location. Approval is based on course availability, academic standing, and overall progress in the program.

To request permission, students must submit a written request to the program director at the preferred location at least two weeks before the desired term begins. Unauthorized course enrollment at another location may result in administrative course withdrawal or delay in program completion.

Withdrawal From Class and/or Program

A student who withdraws from a class before the withdrawal deadline, at the end of the 12th week of the semester, will receive a grade of "W" on their official transcript. This grade will not be given to students who stopped attending or who only attended class once or twice. Under rare and extenuating circumstances, the instructor or appropriate administrator may initiate a withdrawal on the student's behalf.

Radiologic Technology students should not withdraw from any required course before meeting with the program director. Withdrawal from any Radiologic Technology program course constitutes withdrawal from the program.

Leave of Absence

A student may be granted a leave of absence for a period not to exceed one year. Because the program courses have specific prerequisites, a student can only take a leave of absence for one year. Any student who does not return after one year will be required to reapply for admission to the program.

A leave of absence can only be granted by the program director. The student must provide a reason for the leave of absence request.

If a student requests and is granted a leave of absence from any radiography course, the grade at the time of the leave will be recorded as it stands.

The following must be in completed status on CastleBranch prior to returning from a leave of absence:

- Background check
- Drug Screen
- Immunization tracking
- CPR (if expired)

Attendance Policy Statement
Students are expected to attend and be on time for all class sessions. Excessive absences and/or tardiness will affect a student's grade as determined by each instructor. Clinical attendance policies are addressed in the Clinical Education Syllabus section of this student handbook.

Pregnancy Policies
All students enrolled in the program are required to confirm receipt and review of the Pregnancy Policies. This requirement applies to all students, regardless of pregnancy status, plans, or possibility. By signing in CastleBranch, the student affirms their understanding of the policy and its implications.

Additionally, by signing in CastleBranch, the student acknowledges that voluntary notices of pregnancy will also be reported to the College Title IX Coordinator. The role of the Title IX coordinator is to coordinate specific actions to prevent sex discrimination and ensure equal access to the College programs and services. More information about Title IX as it relates to pregnancy and related conditions can be found at www.stlcc.edu/pregnancy

The complete Pregnancy Policy and the associated attachments are in Appendix B

Student Rights and Responsibilities

General and Academic Rights

Students at St. Louis Community College have certain general and academic rights and responsibilities that are outlined in detail on the College website. The process for addressing an alleged violation of general rights and/or responsibilities is outlined within the sections found on the College website. For more information, visit www.stlcc.edu/need2know.

Academic Disputes

Academic disputes are handled differently than violations of general rights. The student should first exhaust all informal channels for solving the problem, beginning with an informal appeal to the faculty member. This informal meeting with the faculty member should take place as soon as possible after the student becomes aware of the alleged problem. In all cases where the dispute involves a purely academic matter, such as an allegedly unfair grade, students should refer to the academic appeal procedure, which includes specific timelines and process steps. For more information, visit Academic Rights and Responsibilities (https://stlcc.edu/college-policy-procedures/academic-rights-and-responsibilities/)

Non-Academic Appeals

There is a District Readmission Committee for Nursing and Health Science programs that hears all readmission concerns related to program policies. The committee membership is comprised of the Chairperson, three members from the Nursing program, three members from the Health Science programs, and two retention coaches. Faculty members are voted to serve 2-year terms or as directed by the affiliated Deans.

To request an appeal on a program policy, the following steps must be followed:

1. The student must request a readmission appeal form from the program chair/ director.
2. Paperwork must be submitted to the committee chairperson as indicated on the form.
3. The committee will meet to hear the appeal. The student is given the option to speak to the committee for a time not to exceed 5 minutes.
4. The chairperson will notify the student of the committee's decision.
5. Under no condition will the Readmission Committee arbitrate on grades.
6. The committee shall not hear appeals alleging violations of students' rights and/or responsibilities for academic appeals.

Clinical Education Syllabus

Clinical Education Overview and Curriculum

Clinical Education is the application of student knowledge of radiologic technology in a real-life situation. It enables students to put into practice what they have learned in the classroom, laboratory sessions, and from observing registered technologists at their clinical education site. The purpose of Clinical Education is to provide meaningful, well-balanced clinical experience for student radiologic technologists. This experience will be structured in an attempt to provide and ensure uniformity among the affiliated institutions.

XRT111: Clinical Education I

This course is designed to provide the student with an overview of all aspects of the radiology department and the responsibilities of a radiologic technologist.

Prerequisite: Current enrollment in the program
Credit hours: 2
When offered: Fall of first year

Upon successful completion of the course, the student will be able to:

1. Explain the importance of radiologic technology professional organizations.
2. Explain the policies and procedures for the Radiologic Technology program.
3. Explain the general organizational structure within a healthcare facility.
4. Recognize the importance of effective patient care and communication for all patients.
5. Describe infection control/standard precautions techniques.
6. Describe the roles of TJC and OSHA with patient and employee safety.
7. Adhere to the established policies for patient confidentiality.
8. Exhibit ethical behavior in accordance with established professional standards.
9. Identify legal and professional standards and relate each to practice in health professions.
10. Employ acceptable radiation protection practices.
11. Demonstrate proper body mechanic techniques to safely transfer patients.
12. Apply the principles of quality patient care to the clinical environment.
13. Identify the technologist's professional responsibility in relation to patients of varying backgrounds.
14. Use appropriate and effective written, oral and nonverbal communication with patients, the public and members of the health care team in the clinical setting.
15. Demonstrate an understanding of conflict resolution and critical thinking strategies.
16. Describe vital signs used to assess patient condition, including sites for assessment and normal values.
17. Demonstrate basic positioning skills for the PA and Lateral chest.
18. Demonstrate basic positioning skills for the AP supine abdomen (KUB).

XRT112: Clinical Education II
This course is designed to provide the student with the clinical applications of basic radiographic positioning, radiation protection, patient care, radiographic exposure factors and image processing.

Prerequisite: XRT:111
Credit hours: 2
When offered: Spring of first year

Upon successful completion of the course, the student will know or understand:
1. Describe basic radiographic positioning procedures.
2. Apply appropriate radiation protection practices.
3. Identify appropriate patient care practices.
4. Describe proper setting of radiographic exposure factors.
5. Describe the image processing procedure.

Upon successful completion of the course, the student will demonstrate the ability to:
1. Demonstrate basic radiographic positioning procedures.
2. Employ appropriate radiation protection practices for the patient, others and self.
3. Demonstrate appropriate patient care practices.
4. Select the radiographic exposure factors to produce a diagnostic image.
5. Demonstrate image processing of a radiographic procedure.

XRT116: Clinical Education III
This course is designed to provide the student with an introduction to pediatric radiography and development of critical thinking skills in radiographic procedures.

Prerequisite: XRT:112
Credit hours: 3
When offered: Summer of first year

Upon successful completion of the course, the student will know or understand:
1. Describe pediatric radiographic positioning techniques.
2. Apply appropriate radiation protection practices for pediatric patients.
3. Identify effective communication techniques for pediatric patients.
4. Describe proper setting of radiographic exposure factors for pediatric patients.

Clinical Education III (cont.)
Upon successful completion of the course, the student will demonstrate the ability to:
1. Demonstrate pediatric radiographic positioning techniques.
2. Employ appropriate radiation protection practices for the patient, others, and self.
3. Demonstrate effective communication techniques for pediatric patients.
4. Select the radiographic exposure factors to produce a diagnostic image for the pediatric patient.

XRT213: Clinical Education IV
This course is designed to provide the student with an introduction to the specialized areas of the operating room and trauma radiography.

Prerequisite: XRT:116
Credit hours: 3
When offered: Fall of second year

Upon successful completion of the course, the student will know or understand:
1. Describe radiographic procedure techniques for operating room and trauma radiography.
2. Apply appropriate radiation protection practices for operating room and trauma radiography.
3. Describe specialized equipment used in operating room and trauma radiography.

Upon successful completion of the course, the student will demonstrate the ability to:
1. Demonstrate radiographic procedure techniques for operating room and trauma radiography.
2. Employ appropriate radiation protection practices during operating room and trauma radiography.
3. Identify specialized equipment used in operating room and trauma radiography.

XRT214: Clinical Education V
This course is designed to provide the student with an overview of interventional radiography, computed tomography (CT), diagnostic medical sonography (DMS), magnetic resonance imaging (MRI), nuclear medicine (NM) and radiation therapy (RT).

Prerequisite: XRT:213
Credit hours: 3
When offered: Spring of second year

Upon successful completion of the course, the student will know or understand:
1. Describe radiographic procedures and techniques for routine and non-routine exams.
2. Identify protocols for selective imaging modalities and radiation therapy.
3. Observe procedures in interventional radiography (IR), computed tomography (CT), diagnostic medical sonography (DMS), magnetic resonance imaging (MRI), nuclear medicine (NM) and radiation therapy (RT).

XRT215: Clinical Education VI
The course is designed to provide the student with the opportunity to complete all American Registry of Radiologic Technologists (ARRT) and Radiologic Technology program Clinical Education competency requirements.

Prerequisite: XRT:214
Credit hours: 2
When offered: Summer of second year

Upon successful completion of the course, the student will know or understand:
1. Apply acceptable positioning techniques for radiographic procedures.
2. Use proper radiation protection techniques during each radiographic procedure.
3. Use proper patient care techniques on every patient.
4. Identify the correct process for image production and acquisition.

Upon successful completion of the course, the student will demonstrate the ability to:
1. Demonstrate appropriate positioning techniques for radiographic procedures.
2. Employ radiation protection practices for the patient, others and self during radiographic exams.
3. Demonstrate appropriate patient care techniques on each patient.
4. Demonstrate the correct process for image production and acquisition.

Clinical Site Assignments

Students are typically assigned to a variety of clinical settings for Clinical Education I-VI to ensure a meaningful clinical educational experience. During the program, students may be assigned to a brief rotation at a pediatric hospital. Due to the number of students accepted into the program, requests for specific hospitals **CANNOT** be honored. Clinical assignments will be made based on the following criteria: Clinical needs of the student, radiology department volume and examination mix, and the number of students requested by the clinical education site.

Agreement with Respect to Participation in Clinical Education

Explanation

St. Louis Community College, as a part of its educational services, sponsors a number of clinical programs which are conducted in cooperation with various organizations and institutions throughout the metropolitan St. Louis area. Each of these programs is subject to a specific contract in which the organization or institution reserves the rights with respect to the program conducted, including the right to determine when and in what circumstances the organization or institution can deny placement or require removal of a student participating in a program from its premises. Such a determination is often completely outside the control of the College and may be exercised without its agreement or consent.

Agreements

Therefore, the undersigned, as a condition precedent to enrollment in any clinical program, hereby understands and/or agrees:

1. To comply with rules and regulations of the organizations and institutions that are sponsoring clinical programs in which the undersigned is participating. These rules and regulations include, but are not limited to, completion and/or maintenance of the personal health insurance, background check, drug screen, immunizations, body mechanics lab, PPD, health form and CPR certification (The immunization tracking system must be maintained in order to provide documentation of immunizations, PPD, health form, and CPR certification.)

2. That they are a guest of said organization and/or institution and that they may be summarily denied placement or further access to the premises where the clinical program is conducted, by the participating organization or institution without the consent and independent of any decision of St. Louis Community College.

3. That as a result of such denial or access, they may not be able to satisfactorily complete such program or the course of study for which completion of the program may be required.

4. In the event of such denial of access, that they will not have any recourse through the usual student grievance procedures or otherwise against the College, but will have to proceed, if at all, independently against the organization or institution withdrawing access to the specific clinical program.

I hereby certify that I have read and understand the foregoing explanation and agreements and that I agree to be bound thereby in consideration of my acceptance into and participating in any clinical program conducted in any facility owned or operated by an organization or institution independent of St. Louis Community College.

***The Agreement with Respect to Participation in Clinical Education will be signed in CastleBranch**

Liability Insurance

Each student will receive malpractice (liability) insurance through St. Louis Community College, with their paid tuition, for each summer, fall, and spring semester of Clinical Education. This insurance, offered through the College, is malpractice (liability) coverage only and covers students in case of accident/injury to the patient in the clinical setting. It does not constitute health insurance for the student. For this reason, students may not attend clinical without being registered for Clinical Education courses.

Personal Health Insurance

Students are required to obtain and maintain their own medical insurance coverage per the clinical site agreements that the College has in place. Any accident occurring on campus or at a program clinical site that requires medical attention will be at the student's expense. Students without personal medical insurance coverage are not able to attend clinical rotations at sites that require it.

Student Health

Since many patients are in a weakened or vulnerable condition, it is important to take precautions to avoid transmitting any health problems to patients or staff. Students who are not feeling well should not go to their clinical site. It is important for students to take care of themselves and seek medical attention when needed.

Students are required to inform clinical faculty of any medical procedure or injury that results in clinical absence. Before being allowed to return to clinical, the student must provide documentation of orders from a physician stating they may return with **no restrictions**.

Bloodborne Pathogen Exposure Control

St. Louis Community College is committed to providing a safe and healthy work environment. In pursuit of this goal, the College's Exposure Control Plan (ECP) is provided with directions to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens" (BBP) and the Centers for Disease Control and Prevention (CDC) guidelines for BBP and Other Potential Infectious Materials (OPIM) or waste.

It is the policy of the College that faculty, students, and staff will utilize Occupational Health and Safety Administration (OSHA) guidelines to minimize contact with Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV), and other bloodborne pathogens. It is also the policy of the College that exposure incidents involving blood or OPIM, which occur as a result of College activities, will be reported for appropriate follow-up, in accordance with administrative procedures.

Faculty, students, and staff must implement the use of universal precautions treating all human blood and OPIM as if known to be infectious for bloodborne pathogens. Faculty, students, and staff must identify and ensure the use of practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items. Faculty, students, and staff must use personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks to prevent blood or OPIM from passing through or contacting clothing or skin, eye, mouth, or other mucous membranes. Although this equipment is meant to reduce the risks of exposure, it may not eliminate it.

***The Student Clinical Incident Report Form can be found in Appendix C**

Accidental Injury/Illness While at Clinical Sites

The following steps are completed for any student experiencing an injury or illness while at a clinical site:

1) The student notifies the site clinical instructor or program faculty immediately or as soon as possible.
2) If the injury involves potential exposure to infectious material/bloodborne pathogens, the student should follow the clinical site's protocol for BBP exposures, including washing exposed skin with soap and water and/or flushing exposed mucous membranes with water.
3) Student seeks medical attention for immediate treatment/testing/follow-up as needed. Students are responsible for all costs associated with their treatment/testing/follow-up.
4) Student and clinical instructor complete the clinical site's injury/exposure incident report form and submit the form per organizational policy/procedure.
5) The student retains a copy of the clinical site's injury/exposure incident report and submits it to the program faculty. Program faculty redacts information as needed for patient confidentiality.
6) Student completes a Student Clinical Incident Report within 24 hours of the incident, describing the circumstances and details of the incident, and submits the form to program faculty within 24 hours of the incident.
7) Program faculty submit the Student Clinical Incident Report Form and any accompanying documentation to College Risk Management (riskmgmt@stlcc.edu) for notification within 24 hours of receiving the information. If a copy of the clinical site's injury report is available, it should be included with the submission to Risk Management.
8) The student directs any questions to the site clinical instructor or program faculty.

The Student Clinical Incident Report Form can be found in Appendix C

Injuries/Illnesses Occurring On Campus

All injuries/illnesses occurring on campus should be reported by contacting Campus Police, regardless of whether it involves a student, employee, or campus visitor. Assistance should be provided to the injured within the training of the responder and, if necessary, summon outside emergency medical services by calling 911. Campus Police will direct the completion of a College Incident Reporting Form (Parts A-C).

Clinical Conduct

ARRT Code of Ethics

The principles in the code of ethics adopted by the American Registry of Radiologic Technologists should be studied and understood. They should serve as a guide for the technologist throughout their professional career.

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

Professional Conduct

Students must remember that their clinical institution is cooperating with the College to provide necessary learning experiences. Students are **guests** of the cooperating agency and must conduct themselves in an appropriate professional manner.
Follow these guidelines:

- Introduce yourself to your patient and address the patient by the correct title (Ms., Mr., etc.)
- When addressing a patient, avoid using terms of endearment, such as honey and sweetie.
- Give a warm smile to patients and visitors and develop a friendly rapport.
- Empathize with them and their situation when needed.
- Learn to be a good listener when your patients describe their problems, concerns, and fears.
- Explain each procedure in a manner that your patient can understand.
- Conduct should not include any sign of impatience, loud or fast-talking, boredom on your part, working in a hurried manner, etc.
- Be especially careful of your conversation. Patients should be the center of all conversations when they are in your care. Be very careful about giggling and laughing, as this can be easily misinterpreted by the patient.
- Be especially careful not to talk about "your grade" or "checking out" of an exam when the patient is nearby and within hearing range.

Students occasionally ask whether wearing an ID badge that identifies them as a student will cause unnecessary concern for patients. In practice, this is rarely an issue when professional conduct is maintained. By approaching each patient and examination with confidence, clear communication, and competent technique, students can foster trust and minimize any potential discomfort or concern.

Student Responsibilities in Clinical

Patient care takes priority over all other responsibilities.
Students are part of the medical team.

Students are expected to:

- Show respect to patients and staff
- Follow directions
- Act professionally at all times

As part of the department, students contribute to patient care and the operation of the department. This includes helping to keep the department neat, clean, and stocked with necessary supplies. Reducing medical costs includes working carefully to minimize equipment and supply expenses.

Students are expected to be aware of clinical site and program policies and will be held responsible for following them.

Responsibilities to the Physician
Technologists and students have responsibilities to the physicians under whom they are working.

- Strictly carry out the orders of the physician.
- Never discuss or criticize a physician with a patient or with a patient's friend/family. Never express to them a preference for the services of a physician.
- Never interpret images or express an opinion of diagnosis or treatment to a patient.
- Always accord to a physician the proper amount of respect and consideration due to their higher professional position.

Responsibilities to the Patient
Patient care is the **highest** priority. The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that requires staff to ensure patient privacy. No information about a patient should be shared with anyone except individuals involved with the care of that patient. Only information necessary to deliver care should be divulged. Patients and their affairs should not be made a subject of conversation or discussion between technologists or others not involved with their care.

Information concerning patients should not be relayed or displayed where other patients or visitors might overhear or see.

Students should remember that educational activities are subject to HIPAA privacy guidelines. Protected health information (PHI), for example, patient names and birth dates, must be removed from all images and reports. **PHI should never leave the clinical site.**

Communication

A radiology department cannot function smoothly without proper communication. As a member of the radiology department, students will need to adhere to certain principles of communication:

- Relay all messages promptly.
- Report all equipment malfunctions to the immediate supervisor as soon as possible.
- Messages regarding patients and/or their relatives should be communicated clearly.
- Notify the person in charge prior to leaving the immediate work area.
- If relieved during an examination, explain what needs to be completed along with any other necessary details pertinent to the exam.
- When leaving the radiology department to do a mobile exam, exam in the O.R., obtain supplies, or any other errand that requires the student to leave the radiology department, be sure to let the person in charge know.
- When a faculty member is present, students should let them know when they are leaving the department for lunch, breaks, mobile exams, etc.

There are many other instances where proper communication is absolutely vital. Be certain to maintain proper communication in all of these instances!

Cell Phone and Smart Devices

Personal cell phone and smart device use, including texting, is never allowed in the clinical work area or in patient care areas. Cell phones may only be used during breaks and lunches. At all other times, it must be silenced and out of sight. Noncompliance will be reflected on the Professional Development Evaluation and may result in disciplinary action.

The department phone may be used in the event of a personal emergency.

Studying in Clinical Areas

If permitted by the clinical site, students may study during slow time. Students are expected to participate in department activities and are not allowed to study when there are exams or work to be done. E-books may be prohibited by clinical site policy.

Dress Code /Personal Hygiene Policy

Students who are following the dress code policies will present a professional image to their patients and visitors. In addition, some of the policies also serve to reduce the possibility of infections to patients and personnel. The prescribed uniforms are comfortable and conducive to the nature of the work done in the radiology department. Each student must be thoroughly familiar with the dress code policies. If a student is judged to be dressed inappropriately for clinical or does not comply with one of the other codes, the student could be sent home by the clinical preceptor or faculty member. A student who is sent home for non-compliance with the dress code will be required to make up all missed time. Failure to comply with these codes may result in clinical grade reduction or dismissal from the program.

Uniforms

- Uniforms will be available for purchase from the STLCC Bookstore.
- Students must purchase at least two (2) teal Radiologic Technology program scrub tops from the STLCC Bookstore.
- Black scrub bottoms may be purchased through the bookstore, or they may purchased at any retailer.
- Optional: Solid teal scrub jackets matching the scrub tops are also available for purchase from the STLCC Bookstore.

R/L Markers

Prior to attending Clinical Education at the clinical site, each student must purchase at least one set of lead markers. The makers must not include designs that hide the letters. The letters must be visible through the design pattern. Lead markers can be purchased from any vendor, including Amazon, Etsy, PB Markers, and eBay. The cost of a set of lead markers is approximately $15-$30. A set of lead markers will include both a right (R) and left (L) marker plus the student's three initials (first, middle, last name):

- R (plus 3 initials)
- L (plus 3 initials)

Dress Code Policy

1. Students must wear the approved uniform at clinical.
2. Students are always to be neat and well-groomed when in the clinical areas. Students must be clean and free of body odor.
3. Scrubs and shoes must be clean and in good condition.
4. The use of excessive fragrances must be avoided.
5. Hair must meet the requirements of the assigned clinical site. Hair must be neat, clean, and well-controlled. Students with hair longer than shoulder length must restrain it neatly. (Fashion scarves, ribbons, feathers, and hats are unacceptable.) This will reduce the possibility of infections to patients and personnel.
6. Mustaches, beards, and sideburns must be neatly trimmed and of reasonable length.
7. No jewelry can be worn except engagement and/or wedding rings, watches, and earrings that do not draw undue attention. Earrings should be no larger than the size of a quarter and should be professional in style. Small dangling styles are acceptable, provided they hang no longer than 1" from the earlobe.
8. Facial, tongue, nose, or other piercings, including multiple earrings, cannot be worn. No more than two (2) earrings per ear can be worn during clinical.
9. Visible tattoos must follow the clinical site policy.
10. Fingernails must be short and clean: **Fingernail polish or fake fingernails of any kind may not be worn.**
11. Make-up of any type is not to be worn in excess.
12. Sweaters, sweatshirts, and thermal wear are not permitted.
13. Short or long sleeved T-shirts, Under Armour apparel, and "sleeves" are permitted, provided they are white or black and do not have a logo. The sleeves of short sleeved T-shirt should not be visible below the scrub top sleeve or bottom hem.
14. The appropriate ID badge must be worn at all times in a visible location.
15. Any gum chewing must be done discreetly.
16. Smoking or vaping is not allowed on any clinical site property.
17. High-top tennis shoes and basketball shoes and those with multiple bright colors or logos are not acceptable. Crocs (without holes) may be worn if the color is black or white.

A student not in compliance with the dress code/uniform policies may be sent home by the clinical preceptor or faculty member. Any missed time must be made up.

Supervision and Radiation Protection Policy

Direct Supervision Policy

Students must be under *direct supervision* while performing radiographic exams until they have successfully completed a competency evaluation for that specific exam. Direct supervision is defined as a radiography student who is directly supervised by a qualified radiologic technologist who:

- **is required to be physically present in the radiographic room throughout the entirety of the procedure,**
- reviews the request for radiographic examination to determine that the student can perform the examination with reasonable success,
- ascertains that the condition of the patient does not contradict performance of the examination by the student,
- reviews and approves the procedure and/or image prior to the dismissal of the patient.

Indirect Supervision Policy

Students may perform exams under *indirect supervision* after they have successfully completed a competency evaluation for that specific exam. Indirect supervision is defined as a radiography student supervised by a qualified radiologic technologist who:

- is immediately available to assist students regardless of the student's level of competence,

All images must be approved by a qualified radiographer, whether performed under direct or indirect supervision.

Surgical, Mobile, And Mobile Fluoroscopy Supervision Policy

Radiography students must always be *directly supervised* during all surgical, mobile, and mobile fluoroscopy procedures regardless of the level of competency achieved by the student.

Repeat Radiography Supervision Policy

All repeat images must be performed under the *direct supervision* of a qualified radiologic technologist who is required to be physically present in the radiographic room throughout the entirety of the repeat of an unsatisfactory image.

Acknowledgment of Understanding

The above policies have been thoroughly explained to me. I understand these policies, and I agree to follow them. I understand that failure to abide by these policies will negatively impact evaluations of my clinical performance and lower my clinical grade. Incidents of noncompliance are cumulative throughout the program, and each incident of noncompliance will result in the following deductions:

- 1st incident of noncompliance: The clinical course grade will be reduced by 15 percentage points.
- 2nd incident of noncompliance: The clinical course grade will be reduced by an additional 10 percentage points
- 3rd incident of noncompliance: The student will receive an "F" for the Clinical Education course. The student will be dismissed from the program and will be ineligible for readmission.

Supervision and Radiation Protection Policy (cont.)

Radiation Protection Policy

- All students MUST wear a radiation monitoring device (dosimeter). The dosimeter is to be worn on the collar. When wearing a lead apron, the dosimeter should be worn outside the apron.
- Students must wear lead aprons when involved in fluoroscopic, mobile or operating room procedures. Lead gloves must also be worn in situations in which exposure to the hands is likely.
- Students must never stand in the primary X-ray beam.
- Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.
- Students must not hold image receptors during any radiographic procedure.
- Students must never make exposures in the lab unless the exposure is part of a laboratory experiment and under the direct supervision of a faculty member.
- Students will at all times utilize the three Cardinal Rules of Radiation Protection as listed:
    - Time – Use as short an exposure time as possible
    - Distance – Stand as far away from the source as possible
    - Shielding – Use shielding (such as lead aprons and lead barriers)
- Students will minimize the risk of exposure to patients by utilizing the principle of A.L.A.R.A. (As Low As Reasonably Achievable)
- Students will reduce patient exposure through the use of shielding and collimating to the I.R. size or smaller.
- Students will minimize exposure to others in the area by making certain the door to the examination room is closed when making exposures.
- Students will minimize exposure to others in the area when performing mobile examinations by making sure that family members and other non-essential personnel are out of the room when making an exposure, or by providing them with a shield.
- Students will minimize exposure to others in the area when performing portable examinations by announcing clearly and audibly that an X-ray exposure is about to be made.

Students found not following the radiation protection policies will be subject to penalties ranging from Documentation Forms to failure of competencies.

***The Supervision and Radiation Protection Policy will be signed in CastleBranch.**

Dosimeter Policy

1. The dosimeter must be worn at clinical at all times.
2. Always wear the dosimeter outside the apron at the collar.
3. Do not leave the dosimeter in the room (e.g. hanging on a lab coat or lead apron on the back of a door) where it may be exposed.
4. Do not expose the dosimeter to heat or static electricity.
5. Never intentionally expose the dosimeter.
6. If the dosimeter is lost, damaged, or stolen, notify the clinical coordinator immediately. The dosimeter can be replaced, but students may not return to clinical until the replacement is issued. Any time missed must be made up.
7. Leave the dosimeter in a secure location.
8. Students are responsible for ensuring their dosimeter report is performed each month. The dosimeter reading window is typically the first week of the month, as noted on the program Calendar. Failure to have the dosimeter reading performed within this timeframe will result in a deduction of points from the clinical grading rubric.
9. If a student becomes pregnant, they have the OPTION to notify the program director in writing to declare their pregnancy. Upon notification, a second dosimeter will be provided to be worn at the waist (under lead aprons, when worn). This dosimeter will be designated as a "fetal" monitor.
10. The exposure limit for a radiation worker is 5 rem (5000 mrem) per year, with a maximum of 3 rem (3000 mrem) in any one quarter. It is the policy of the Radiologic Technology program at St. Louis Community College that any student in a radiation area be monitored at all times during clinical education hours and in labs when exposures are being made. If a dose equal to or exceeding 400 mrem to deep tissue, or 100 mrem to shallow tissue or 5000 mrem to extremities is reached in any single month, an investigation will be undertaken to determine the cause of the exposure.

The above policies are strictly enforced. Corrective action will be implemented upon any violation.

***The Dosimeter Policy will be signed in CastleBranch**

Protocol For Handling Clinical Problems

1. Student - document and discuss the problem with the clinical preceptor. If there is no resolution, proceed to step 2.
2. Student - provide documentation and discuss the problem with faculty. Faculty will document the meeting with the student. Faculty will meet with the clinical preceptor. If there is no resolution, proceed to step 3.
3. Student - provide documentation from steps 1 and 2 and discuss the problem with the clinical coordinator. If there is no resolution, proceed to step 4.
4. Student - provide documentation from steps 1, 2, and 3 and discuss the problem with the program director.
5. If the program director does not resolve the issue, refer to St. Louis Community College Academic Rights and Responsibilities policies. For more information, visit Academic Rights and Responsibilities.

Documentation Form

The Documentation Form (Appendix D) is used to document various facts, incidents, etc. A faculty member or clinical preceptor can complete the documentation form. The completed document will be kept in the student's file. If a number of these documentation forms are completed and an undesirable pattern emerges, various disciplinary actions could be taken up to and including dismissal from the program.

Incident Report Form

The Incident Report Form (Appendix E) is used when an incident occurs requiring some form of disciplinary action. This form can be completed by a faculty member or clinical preceptor and is kept in the student's file. However, since this is a community college based program, all disciplinary action taken is to be determined by the STLCC Radiologic Technology program faculty member.

Clinical Participation Documentation

Students are required to record participation for every exam throughout the entirety of the program. The purpose is to document the type and quantity of clinical experience that the student is receiving. This information is used by the clinical preceptor and/or faculty member to determine that the student is receiving sufficient experience. Decisions affecting rotation schedules or whether a student is ready to be evaluated for clinical competency for an exam are made with the aid of this information. Thus, failure to maintain a proper record of exams will slow the rate of student progress.
This is to be started from the first day of Clinical Education. All exams must be entered into Trajecsys before the start of the next clinical day.
The level of student participation that is recorded for each exam is explained below.

Observed

The student only watched the radiologic technologist perform the exam.

Assisted Radiologic Technologist

During the exam, the student provided any type of assistance to the radiologic technologist. Perhaps they assisted by carrying the image receptor, helping to move the patient, or other non-technical duty. The technologist performed the majority of the exam, but the student provided some assistance to them.

Direct Supervision

The radiologic technologist **is present and immediately available in the room** while the student performed the exam. The student performed the majority of the exam with minimal assistance from the radiologic technologist.

Indirect Supervision

The student has achieved exam competency, and they performed the exam without assistance. A qualified radiographer must be immediately available to provide assistance if needed.

Repeat Images

Any radiograph that is repeated for any reason must be documented.

- All repeat examinations will be performed in the presence of a qualified radiographer. Repeats will be documented in Trajecsys.

The student must record the reason for repeating the image and the projection/position repeated in the comment section when logging the exam in Trajecsys.

Clinical Site Orientation Objectives

All objectives must be completed and approved by the clinical preceptor in Trajecsys before a student can request a competency evaluation.

- Provide information concerning the location and functions of the emergency cart, fire extinguisher, AED, emergency codes, oxygen, suction, and blood pressure equipment.
- State the names of the chief radiologist, other radiologists, the radiology manager, and the immediate supervisor.
- Provide information concerning Trajecsys clocking in and out procedures, lunch, breaks, personal phone calls, cell phone use, parking regulations, and applicable department and clinical site policies.
- Describe the radiology department layout.
- Become familiar with the tube, table, upright bucky, and tech console.
- Assist in transporting patients, and find the location of wheelchairs, stretchers, etc., in the radiology department and on the nursing floors. Demonstrate proper body mechanics, learn the numbering system of patient rooms, and use the proper in-patient sign-out and return procedure on the nursing floors.
- Explain the process of patient registration, order verification, exam completion, and image transmittal.

General Radiography Examinations

- Utilize the radiology department exam protocol list, provided by the clinical preceptor, to explain the 5 most common exams performed in the department.

G.I. Examinations (if applicable)

- Explain the steps of setting up the fluoroscopic equipment prior to starting the 2 most common fluoroscopy examinations.
- Explain the process of preparing the barium sulfate or water-soluble mixture.
- Describe the duties of the radiologic technologist during each fluoroscopy examination.

Mobile Exams (if applicable)

- Transport the mobile unit, explain basic mobile radiation protection principles, and define the meaning of STAT vs. routine requests.
- Describe the basic radiographic procedure involved in mobile radiography of the chest after having observed at least 4 mobile chest exams.

Clinical Education Competency

Evaluation of Clinical Competency

A competency can be attempted at clinical anytime the student and supervising technologist feels the student is ready. There is no requirement to complete the skills assessment or didactic exam prior to the attempted competency as long as the student has performed and logged three (3) exams under direct supervision.

The following exams do NOT require 3 direct exams logged prior to a competency attempt. These competencies may be attempted anytime the student and supervising technologist feel the student is ready:

- Head exams
- Sternoclavicular joints
- Clavicle
- Sternum
- Cross-Table Lateral Spine
- AC Joints
- Calcaneus
- Chest Lateral Decubitus
- Abdomen Decubitus
- Toes

Prior to beginning the examination, the student must request the competency evaluation from a clinical preceptor, or an in-serviced radiologic technologist. The student is required to perform the entire examination independently, without technical assistance, and in the direct presence of the evaluator.

Upon successful completion (pass) of the clinical competency evaluation, the student will be expected to continue performing that particular exam under indirect supervision.

Supervising technologists must complete a competency evaluation in Trajecsys for all competency attempts. If a student has 3 unsuccessful competency attempts on one exam, the student will have remediation with their procedures instructor at STLCC before attempting the competency again.

Clinical preceptors may request a competency recheck at any time. If the student fails the recheck, the clinical preceptor must enter the failed recheck in Trajecsys. The student will return to direct supervision for additional experience in that exam before being allowed to recheck again. If a student fails two (2) consecutive rechecks on the same exam, the clinical preceptor will refer the student to remediation with the Radiographic Procedures course instructor.

This Evaluation of Clinical Competency Policy applies to each exam on the Master Competency List (MCL).

Master Competency List (MCL)

In order to complete the program, the student shall competently perform a full range of radiographic procedures on adults and selected radiographic procedures on pediatric patients in the following categories:

- General Patient Care
- Chest and Thorax
- Upper Extremity
- Lower Extremity
- Head
- Spine and Pelvis
- Abdomen
- Fluoroscopy Studies
- Mobile C-Arm Studies
- Mobile Radiographic Studies
- Pediatric Patient
- Geriatric Patient

The radiographic procedures from the categories above, as well as clinical objectives that the student is required to complete, are included in the Master Competency List (MCL).

Difficult, trauma, and specialized projections cannot be evaluated until the student has been successfully evaluated in the basic procedures.

The student's MCL record will be maintained in Trajecsys. However, the student should print a copy of the MCL for their records. A printer-friendly MCL can be found in the Canvas Class of 2027 Course Shell and in Appendix F. Link to FV Class of 2027 Canvas Course

Clinical Competency Evaluation Documentation

The competency evaluation form is included in Appendix G. This is a pass/retest evaluation. There are four main areas of consideration on the evaluation. If a student receives one U (unsatisfactory) in any critical criteria or more than three (3) U's in other criteria, the student will not pass the competency evaluation. If the competency evaluation is not passed, the evaluation must still be completed by the evaluator.

It is the responsibility of the student to ensure that the evaluation has been completed by the evaluator in Trajecsys with all necessary information included.

Periodic Competency Rechecks

Starting in Clinical Education III, each student will be required to satisfactorily perform several competency rechecks (evaluations) of procedures previously mastered. This is to ensure that the student's skill level for those procedures is being maintained. Each semester thereafter, competency rechecks will be performed over any previously mastered procedures. The number of required competency rechecks is specified in the clinical education grading rubrics found in Appendix H.

For each exam recheck, a competency evaluation is completed and documented in the recheck section of the Master Competency List. Refer to the Clinical Competency Flowchart on page 50 regarding how to proceed if the recheck evaluation is unsuccessful. If the student is unsuccessful in the recheck evaluation process, the evaluator should still complete the competency evaluation.

Continuing Performance of Completed Competencies

After a student successfully completes a competency evaluation, they are still expected to perform those exams to maintain competency and develop proficiency.

Modality Rotations

- Modality rotations are completed in Clinical Ed. VI.
- A total of 14 days will be scheduled observing advanced modalities.
- Each modality requires a 2-day rotation, with the exception of mammography.
    - Mammography is an elective rotation.
    - If a mammography rotation is not selected, the student may choose which modality they would prefer to schedule for the remaining 2 observation days.
- Due to scheduling considerations for our clinical partners, all fourteen (14) days will be scheduled in advance. Once the schedule is set, it cannot be changed.

Modality Observation Log Sheets

- Modality Observation log sheets are found on Canvas in the Clinical Education VI course shell.
- The student will print one log sheet for each modality. If more space is needed to record exams, another log sheet may be printed.
    - The observing technologist will sign the modality log sheet at the end of each rotation.
    - If the student is performing more than one day of observation in a modality, all dates should be included on one log sheet.
- Completed modality observation log sheets must be uploaded to Canvas in the Modality Log Assignment Tab.

Clinical Education Attendance Policies

Required Clinical Hours

All Radiologic Technology program students at St. Louis Community College receiving clinical education at any of the college-affiliated clinical sites will follow the schedule of clinical hours required below without pay.

In a period of twenty-three months, the student is required to complete the following hours at assigned clinical sites. All scheduled clinical days are 8 hours.

Clinical Education hours are not allowed on any day when St. Louis Community College is closed (including legal holidays when the college is closed), Faculty/Staff Professional Development Days, and during final examination days.

Clinical hours are tracked in Trajecsys. It is the student's responsibility to maintain an accurate record of all Clinical Education hours.

XRT: 111 - Clinical Education I	First Fall Semester 6 weeks clinical orientation 16 hours/week x 10 weeks (Tuesday and Thursday)
XRT: 112 - Clinical Education II	First Spring Semester 16 hours/week x 15 weeks (Tuesday and Thursday)
XRT: 116 - Clinical Education III*	First Summer Session 40 hours/week x 8 weeks (Monday – Friday)
XRT: 213 - Clinical Education IV	Second Fall Semester 24 hours/week x 16 weeks (Mon, Wed, and Fri)
XRT 214 - Clinical Education V	Second Spring Semester 24 hours/week x 15 weeks (Mon, Wed, and Fri)
XRT 215 - Clinical Education VI**	Second Summer Session (early summer) 40 hours/week x 3 weeks (Monday – Friday) 24 hours/week X 6 weeks (summer session) (Mon, Wed, and Fri)

* XRT: 116 (Clinical Ed III) begins on the Monday following the early summer session.

** XRT: 215 (Clinical Ed VI) is a nine-week course beginning on the first day of early summer session.

Clinical Attendance Documentation

Trajecsys

The clinical record-keeping program, Trajecsys, will be used to document all clinical time. Students are required to follow all Clinical Education guidelines and policies. In rare instances, corrections to the Trajecsys time record may be required. Corrections to the Trajecsys clinical time record can only be made by clinical preceptors or program faculty. Any attempt to falsify clinical time will result in disciplinary action.

Breaks and Lunch Periods

Radiology departments may have varying policies regarding employee breaks and lunch periods. Students will adhere to the break and lunch periods established by their assigned clinical site. For shifts exceeding six (6) hours in duration, students must take a lunch break of no less than thirty (30) minutes.

Skipping the lunch period is strictly prohibited. Students are not permitted to work through their lunch break in order to leave early, or for any other purpose. Similarly, breaks may not be skipped to leave early.

Holidays

Students are not allowed to attend classes or clinical on holidays observed by St. Louis Community College. Observed Holidays include:

New Year's Day
Martin Luther King's Birthday
President's Day
Spring Holiday
Memorial Day
Juneteenth
Fourth of July
Labor Day
Thanksgiving Holiday Weekend
Christmas

Students may be excused from Clinical for observance of a religious holiday when such observance, as is required, cannot be made outside the hours when clinical is scheduled or because a student's religion forbids secular activity during a school day. Students must submit a written request to the program director in advance to be excused from clinical.

Personal Time

Personal time allows students to take time off from clinical without penalty. Personal time hours do not need to be made up and are not counted as an absence.

All missed clinical time during the semester will be deducted from the student's available personal time until all personal time hours have been used. Personal time cannot be carried over to another semester. Any unused personal time at the end of the semester will be forfeited.

- Personal time must be used in four (4) hour or eight (8) hour increments.
- Personal time may not be used on the first day at a new clinical site due to mandatory orientation requirements.
- Personal time may not be used during modality rotations.

Personal Time Hours per Semester

- Clinical Education I: 24 hours
- Clinical Education II: 24 hours
- Clinical Education III: 32 hours
- Clinical Education IV: 32 hours
- Clinical Education V: 32 hours
- Clinical Education VI: 32 hours

Notification of Personal Time

Personal time is requested by emailing both their assigned STLCC clinical faculty and their clinical preceptor prior to the start of the requested personal time hours.

Using personal time without notifying the assigned STLCC faculty and the clinical preceptor prior to the start of the personal time hours will be considered a No Call/No Show Policy violation.

Grading Penalties for Personal Time Notification Violations

- Notification Prior
    - The student emailed both their assigned STLCC clinical faculty and their clinical preceptor prior to the start time of their requested personal time hours.
    - No penalty
- Notification within 0-15 minutes
    - The student emailed both their assigned STLCC clinical faculty and their clinical preceptor after the start time of their requested personal time hours, but within 15 minutes of the start time of their requested personal time hours.
    - Counted as a Tardy (Late Arrival). The Tardy Policy penalties and grading deductions will apply.
- Notification more than 15 minutes
    - The student emailed their assigned STLCC clinical faculty or their clinical preceptor more than 15 minutes after the start time of their requested personal time hours.
    - Counted as a No Call/No Show. The No Call/No Show Policy penalties and grading deductions will apply.

Clinical Absences

Missed clinical shifts will be recorded as an absence once all available personal time for the semester has been exhausted. Students may not save personal time and choose to take an absence instead. Clinical absences will result in grade reductions in the clinical education course and may lead to dismissal from the program. Specific point deductions related to clinical absences are included in the Penalties and Deductions section of the clinical grading rubric (Appendix H). All absence-related deductions will be documented on the clinical grading rubric.

Notification of Clinical Absence

A student who has not requested personal time and is unable to attend clinical is required to:

- Telephone and speak directly to the clinical preceptor before the scheduled start time of the clinical shift. If the clinical preceptor is absent, the student must speak to a supervisor. It is only acceptable to leave a message if both the clinical preceptor and the supervisor are unavailable.
- Email their assigned STLCC clinical faculty before the scheduled start time of the clinical shift.

Failure to report to a scheduled clinical assignment without notifying the clinical preceptor and their assigned STLCC clinical faculty before the designated clinical start time will be considered a No Call/No Show Policy violation.

Clinical Absence Policy Violation Grading Penalties

- No clinical absences (not including personal time)
  - No penalty
- 1 or 2 clinical absences (not including personal time)
  - 5 percentage point deduction on the clinical grading rubric for each occurrence
- 3 or more clinical absences (not including personal time)
  - Beginning on the 3rd absence, each additional absence will result in an additional 10 percentage point deduction on the clinical grading rubric for each occurrence

Clinical Tardy (Late Arrival)

Students are expected to demonstrate professional behavior and accountability in all clinical education settings. Timely attendance is an essential component of professional conduct and patient care. Clinical tardies may result in grade reductions in the clinical education course and may lead to dismissal from the program. Specific point deductions related to clinical tardies are included in the Penalties and Deductions section of the clinical grading rubric (Appendix H). All tardy-related deductions will be documented on the clinical grading rubric.

- **Tardy:**
  A student is considered tardy if they clock into Trajecsys one (1) minute or more after the scheduled start of the clinical shift. A late arrival of 59 minutes or less will be recorded as a tardy.
- **Tardy (more than 59 minutes):**
  If a student misses more than 59 minutes of a scheduled clinical shift, personal time will be applied in four (4) hour or eight (8) hour increments. If personal time is not available, the missed time will be considered an absence, and points will be deducted from the clinical grading rubric.

Notification of Clinical Tardies

A student who is unable to clock in at the designated clinical site start time is required to:

- In person or by telephone, speak directly to the clinical preceptor no later than one hour after the designated start time of clinical. The student must speak to a supervisor if the clinical preceptor is absent.
- If more than 15 minutes late, the student must also notify (via e-mail or phone call) their assigned STLCC clinical faculty no later than one hour after the scheduled start time of clinical.

Arriving late to clinical without following this notification policy will be considered a No Call/No Show Policy violation.

Clinical Tardy (Leaving Early)

- **Leaving Early:**
  A student is considered to have left early if they clock out of Trajecsys one (1) minute or more before the scheduled end of the clinical shift. An early departure of 59 minutes or less will be recorded as a tardy (leaving early).
- **Leaving Early (more than 59 minutes):**
  If a student misses more than 59 minutes of a scheduled clinical shift, personal time will be applied in four (4) or eight (8) hour increments. If personal time is not available, the missed time will be considered an absence, and points will be deducted from the clinical grading rubric.

Notification of Leaving Early

If the student must leave the clinical site at any time during their scheduled clinical shift, they must notify their clinical preceptor and their assigned STLCC clinical faculty before leaving. If the clinical preceptor is absent, the clinical supervisor must be informed.

Leaving before the end of the scheduled clinical shift without following this notification policy will be considered a violation of the No Call/No Show Policy.

Grading Penalties for Tardies (Late Arrival or Leaving Early)

- Deductions for tardies (late arrival or leaving early) will be recorded on the clinical grading rubric.
    - 0 or 1 clinical tardies
        - No penalty
    - 2 or 3 clinical tardies
        - 2 percentage point deduction on the clinical grading rubric for each occurrence
    - 4 or more clinical tardies
        - Beginning on the 4th tardy, each additional occurrence will result in an additional 4 percentage point deduction on the clinical grading rubric for each occurrence

No Call/No Show Policy

A No Call/No Show policy violation occurs when a student fails to follow required clinical notification or attendance documentation procedures. Violations include, but are not limited to:

- Failure to clock in or out in accordance with the clinical attendance documentation process
- Failure to follow required notification procedures for personal time, absences, or tardies

The impact of No Call/No Show violations on grading is NOT restricted to each Clinical Education course. NoCall/No Show violations are counted **cumulatively** throughout the duration of the program.

- *First incident in the program:* The student will receive a written warning. This will be documented in an incident report and kept with the student's records for the duration of the program.
- *Second incident in the program:* The clinical course grading rubric will be reduced by 15 points.
- *Third incident in the program:* The student will receive an "F" for the Clinical Education course, which results in dismissal from the program. The student is ineligible for readmission.

Incomplete Clinical Hours

Students repeating a class from a previous semester will be required to schedule and make up any missed clinical time by the end of the semester.

In special circumstances, a significant amount of clinical time may need to be completed at a later date. This option can only be approved by the program director. If this option is used, a schedule for make-up hours will be agreed upon by the program director and the student.

Extended Clinical Hours

Students may put in more than eight (8) hour shifts in certain instances with prior approval; however, students are not allowed to put in more than ten (10) hours in a shift. Students are required to take at least a thirty minute lunch period if the shift is scheduled for more than six (6) hours. If a student signs in at 7:00 a.m. and out at 5:30 p.m., the student would be credited with ten hours. The latest a student may be at clinical is 7 p.m.

Jury Duty/Court Summons

If a student is going to serve on a jury or is subpoenaed to appear in court, the student is excused from clinical, and the time does not count as an absence. The student is required to show their subpoena or call for jury duty to the faculty. If a student is subpoenaed to appear in traffic court this policy does **NOT** apply.

Bereavement Leave

Three (3) consecutive days of bereavement leave, not counting weekends, will be granted for immediate family members. **Immediate family:** mother, father, mother or father-in-law, sister, brother, husband, wife, child and grandparents.

One (1) day bereavement leave will be granted for cousins, aunts, nieces, nephews, and uncles. Clinical time missed during bereavement leave does not count as an absence.

Documentation must be provided to faculty, i.e., obituary, funeral service announcement, etc.

Inclement Weather Policy

When inclement weather is forecasted, St. Louis Community College will remain open except under very severe weather conditions.

- **College is open** - In the absence of any announcement, students should assume the college is operating on its normal schedule.
    - Students are expected to "plan ahead" and make every reasonable effort to arrive at their clinical site on time.
    - Students are expected to remain at clinical when the college is open.

- **College is closed** - Students will not attend clinical or classes. All classes are canceled for the day. Online and evening classes are also canceled. The library, student center, writing center, and any other services are closed. However, if the student's specific STLCC Campus remains open, students are expected to attend clinical or classes as scheduled.
    - If the announcement is made that the College is closed after a student arrives at clinical, the student must leave clinical upon the closure of the College.
    - When the College is closed, students do not have the option to perform clinical hours.
    - The missed clinical time does not have to be made up.

- **College is on a delayed schedule** - Clinical will begin at 9:30 a.m. Campus classes beginning before 9:30 a.m. will be canceled for the day.

- **College is closing early** - Classes scheduled <u>after the time specified</u> in the closing announcement will be canceled for that day. In the absence of any announcement, students should assume that the College is operating on its normal schedule.
    - Leaving prior to college closure will be counted as a leave early event which will result in a point deduction from the Professional Development Evaluation. The missed clinical time must be made up.
    - If the clinical site sends the staff home early because of inclement weather, the student may also be sent home by the clinical preceptor. The student does not need to make up the missed time.
    - Early dismissal by the clinical preceptor will be confirmed by the clinical faculty.

- **Emergency and Closing Notifications -** St. Louis Community College has a variety of tools and applications to notify students, employees and the community in the time of emergency events or closings. Students should be familiar with these emergency platforms.
    - STLCC Alerts: All STLCC employees and credit students are automatically set up to receive STLCC Alerts. Community members may opt-in to receive messages.
    - STLCC Emergency Hotline (314-539-5454)
    - Announcements may also appear on radio and TV stations.

Appendix A

Readmission Appeal Policy and Procedure

1. If a student has been previously dismissed from the Radiologic Technology program (deemed ineligible to return) and wishes to formally reapply to the Radiologic Technology program in the future, there is a readmission appeal process that must be followed. Students will be required to write an action plan letter explaining why they would be successful in the Radiologic Technology program upon reentry. This action plan will be evaluated by the STLCC Health Science Readmission Committee. The readmission committee has the right to grant or deny the student's request to be readmitted to the Radiologic Technology program.

2. Students are ineligible for readmission to the Radiologic Technology program if they were previously dismissed for the following reasons:

- Violation of College Student Code of Conduct (G.19) policy
- Violation of College Academic Integrity (G.13.01) policy
- Multiple written warnings for unprofessional behavior in the classroom or clinical setting.
- Documented unsafe or unethical behaviors or actions in the classroom or clinical setting.

3. Students previously dismissed from the program who may be eligible for readmission must submit a written appeal for readmission. The appeal and any supporting documentation will be reviewed by the Health Sciences Readmission Committee, comprised of one (1) Radiologic Technology program faculty, at least two (2) other Health Sciences faculty, and the Health Sciences Programs Project Coordinator. The Health Sciences Readmission Committee will attempt to meet within ten (10) working days of receipt of the written appeal and will provide recommendations to the Radiologic Technology Program Director regarding student readmission to the program.

Required documentation from the student wishing to be readmitted to the Radiologic Technology program:

1. A letter (printed or typed) clearly identifying the student's desire to reenter the Radiologic Technology program.
2. Concise and detailed reasons to support their appeal, including a plan for improvement.

2. Submit any supporting documentation relevant to the readmission appeal, such as medical documents, legal documents, work schedule changes, and letters of support. All such documentation must be in the form of company stationery with the physician or work supervisor's signature and must have specific dates of treatment/hospitalization or dates of change in work. In legal documents, those should be in the form of court orders or subpoenas. Documentation of the student's previous academic performance will be helpful. A plan for improvement is required to be included in the documentation.

3. Attach the letter of appeal and all supporting documentation to this appeal form.

_____ _____

Student Signature Date

_____

Student Printed Name

Appendix B

Pregnancy and the Student Radiologic Technologist

1. Student declaration of pregnancy to the program is personal and VOLUNTARY. If a pregnant student chooses to declare their pregnancy, a written statement to the program director must be provided. In the event the student opts to withdraw their declaration of pregnancy, a written statement must be provided to the program director.

2. As there must be effective control and monitoring in the relatively early stages of pregnancy, it is RECOMMENDED that the student disclose their known or suspected pregnancy to the program director and clinical instructor at as early a date as possible. This matter shall be the responsibility of the student and is completely VOLUNTARY.

3. St. Louis Community College is not responsible for restricting the fetal dose prior to the student voluntarily declaring their pregnancy to the program director.

4. Upon declaration of pregnancy, the student must meet with the program director to review and sign the policies and procedures. The student MUST read the U.S. Nuclear Regulatory Commission's Regulatory Guide 8.13 - "Instruction Concerning Prenatal Radiation Exposure" - published December 1987, revised 1999.

5. After reading the Regulatory Guide and then clarifying any questions about the content, the declared pregnant student MUST sign (Attachment A) (declaring they have been properly counseled).

6. The declared pregnant student will also be required to meet with the program director to review the policies and sign the "Radiation Safety for the Pregnant Student Working in a Controlled Area" (Attachment B) regarding the hazards and requirements.

7. The declared pregnant student will also be required to meet with the program director to review the policies and sign the "Voluntary Selection of Clinical Education Options for the Pregnant Student," (Attachment C).

8. A declared pregnant student SHALL NOT assist in holding a patient during radiographic procedures.

9. A declared pregnant student WILL wear a protective lead apron (wrap around apron, covering front and back is optional) when performing mobile, fluoroscopic and O.R. procedures.

10. The results of exposure of the embryo/fetus to the risk factors are directly dependent upon the amount of exposure.

The Radiation Risks Are:

1) Childhood Cancer
2) Intellectual disabilities and abnormal smallness of the head (microcephaly)
3) Genetic effects: Radiation induced genetic effects have not been observed to date in humans.

The Non-Radiation Risks Are:

1) Occupational (mental, chemical, textile, wood)
2) Alcohol
3) Smoking
4) Miscellaneous: medical drugs

Although the risks to the unborn child are small under normal working conditions using ALARA (as low as reasonably achievable), it is still advisable to limit the radiation dose from occupational exposure to no more than 500 mrem for the total pregnancy.

11. Fetal dose shall not exceed 500 mrem. The pregnant student will be allowed to wear double aprons (a full apron with a half apron to shield the abdomen).

12. Wear a second dosimeter at waist level to record radiation dose to embryo/fetus. If a lead apron is worn, position dosimeter inside the apron at waist level.

13. Upon a student's declaration of pregnancy, the student's exposure history will be reviewed. Clinical assignments may be adjusted to assure that the effective dose equivalent remains below 50 mrem per month with a total effective dose equivalent of less than 500 mrem for the entire gestation period.

14. In the event the limit of 500 mrem is likely to be reached prior to the end of pregnancy, the pregnant student will be required to consultation with clinical site staff and site Radiation Safety Officer, student clinical assignments and activities may be adjusted to prevent elevated dosimeter readings. In extreme cases, a student's clinical experience may be deferred until no longer pregnant to prevent radiation doses to embryo/fetus exceeding dose limits.

15. Regardless of declaration decision, students are strongly advised to consult with their personal healthcare provider regarding safety concerns and continuation in the Radiologic Technology program.

In signing this form, I am declaring my pregnancy and acknowledge and understand the above policies.

_____	_____	___/ ___/___
Student Signature	Student Printed Name	Date
_____	_____	___/ ___/___
Radiologic Technology Program Director Signature	Radiologic Technology Program Director Printed Name	Date

Acknowledgment of Potential Hazards of Radiation Exposure to the Fetus

Attachment A

I have read the Regulatory Guide 8.13 of the US Nuclear Regulatory Commission and have received oral instruction on the material contained therein and answers to any questions that I had concerning the subject matter.

I am aware of the possible hazards to my fetus from the radiation exposure I may receive while participating in clinical education as a student during my pregnancy. I am also aware of the precautions I must take to minimize the exposure to my fetus. In addition, I will seek further counsel should I have additional questions or concerns.

I am pregnant, and my estimated date of conception is _____ .

_____	_____	___/ ___/___
Student Signature	Student Printed Name	Date
_____	_____	___/ ___/___
Radiologic Technology Program Director Signature	Radiologic Technology Program Director Printed Name	Date

Radiation Safety for the Pregnant Student Working in a Controlled Area

Attachment B

1. I understand that the Standards for Protection Against Radiation regulations state that the maximum permissible dose equivalent to the embryo/fetus from occupational exposure should be limited to 500 mrem over the entire gestation period.

2. I am fully aware of the potential dangers of exposure to radiation, and I fully accept responsibility for my decision to continue my clinical education as a student radiographer.

3. I have reviewed my radiation exposure history with the program director/faculty member.

4. During procedures that require lead aprons to be worn, I agree to wear two dosimeters: one at the required collar level and the additional badge at my waist will be worn under the lead apron for the duration of my pregnancy.

I understand and fully acknowledge all of the above-mentioned sections and do not have any additional questions that have not been answered to my satisfaction.

_____	_____	___/ ___/___
Student Signature	Student Printed Name	Date
_____	_____	___/ ___/___
Radiologic Technology Program Director Signature	Radiologic Technology Program Director Printed Name	Date

Voluntary Selection of Clinical Education Options for the Declared Pregnant Student

Attachment C

After receiving counsel on the following options and in due consideration of the potential risks to my embryo/fetus, I VOLUNTARILY elect to:

Option A
Discontinue clinical education until completion of my pregnancy. I realize that all clinical time, assignments, rotations, and competencies must be made up and completed before I can graduate from the program.

Option B
Continue clinical education performing radiography only. Mobile, fluoroscopy and O.R. procedures will not be performed. I realize that faculty and clinical instructor(s) will assign an appropriate amount of mobile, fluoroscopy and O.R. experience (EQUIVALENT TO WHAT I MISSED DURING MY PREGNANCY) for me after the completion of my pregnancy. I further acknowledge that all assignments, rotations, and competencies must be made up and completed before I can graduate from the program.

Option C
Continue clinical education without any restrictions or limitations. I will perform all procedures, assignments, and rotations as assigned and will utilize all radiation safety precautions.

I am aware that if I select Option B or C, I may discontinue clinical education at any time for health reasons and that all clinical time, assignments, rotations, and competencies must be made up and completed before I can graduate from the program. Similarly, I am aware that I may be asked to discontinue clinical education if there are health or safety concerns as indicated to me by my personal healthcare provider or performance concerns identified by program faculty or clinical affiliates.

_____	_____	___/ ___/___
Student Signature	Student Printed Name	Date

_____	_____	___/ ___/___
Radiologic Technology Program Director Signature	Radiologic Technology Program Director Printed Name	Date

Withdrawal of Declaration of Pregnancy

Attachment D

Student declaration of pregnancy to the program is personal and VOLUNTARY. If a student chooses to declare their pregnancy, a written statement to the program director must be provided. The student must also submit a written statement to the program director when they wishes to withdraw the declaration of pregnancy. Withdrawal of declaration of pregnancy may occur at any time.

_____	_____	___/ ___/___
Student Signature	Student Printed Name	Date

_____	_____	___/ ___/___
Radiologic Technology Program Director Signature	Radiologic Technology Program Director Printed Name	Date

Appendix C

St. Louis Community College

STUDENT CLINICAL INCIDENT REPORTING FORM

Instructions: This form should be used to report clinical incidents occurring off-campus. Students should complete this form within 24 hours after an incident occurs and submit it to their program's clinical supervisor or program director. The program supervisor should add any additional information, attachments, etc, and forward to the Risk Management Office within 24 hours of receiving it.

Campus: ☐ CC ☐ FP ☐ FV ☐ MC ☐ WW ☐ SC ☐ HEC	**Department / Program:**
This is a report of a: ☐ Injury/Illness ☐ BBP Exposure ☐ Needstick ☐ Property Damage ☐ Near Miss ☐ Other	

Student Information

Name:	**Student A#:**	**Student Phone:**
Student Address:		**Student Email:**

Incident Information

Incident Date:	**Incident Time:**	**Instructor / Preceptor:**	**Date Reported:**

Location of Incident (facility, department, room, specific area):

Other Persons Present During Incident:

Describe in detail, in your own words, what happened, including the events leading up to the incident:

Please include any details you have on the incident, such as:

- Specific tasks being performed at the time of the incident
- Step-by-step events leading up to the incident
- Equipment, tools, or chemicals involved
- Unusual conditions

What initial actions were taken as a result of the incident (flushing, washing, medical care, counseling, etc.)?

What Personal Protective Equipment (PPE) Was Required?	**Was Proper PPE Being Used?** ☐ Yes ☐ No

Describe any follow-up actions, such as medical care, safety review, etc.

Student Signature:	**Date:**
Program Faculty Signature:	**Date:**

Appendix D

St. Louis Community College
Radiologic Technology Program

Documentation Form

Student Name: _____ Date: ____/_____/20____

St. Louis Community College/Radiologic Technology program/clinical site rule violation or other counseling need:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Expectation and/or action (completed by faculty):

_____
_____
_____
_____
_____
_____
_____

Student's comments:

_____
_____
_____
_____
_____

_____ _____
Student signature Faculty and/or Clinical Preceptor

_____
Faculty and/or Clinical Preceptor (Print)

Appendix E

St. Louis Community College
Radiologic Technology Program

Incident Report

NAME:_____DATE OF INCIDENT:_____

_____

_____

_____

_____

_____

_____

_____

To be completed by STLCC Faculty member:

Disciplinary Action to Be Taken:

_____Clinical Preceptor: and/or

_____ STLCC Faculty Member

My signature indicates only that I have read the above report. I understand that I may add my own comments on the reverse side of this form.

_____ _____

Student signature Date

_____

Student printed name

Appendix F

Clinical Education Master Competency List (MCL)

Student Name: _____

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

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

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

- "Difficult," trauma, or mobile procedures competencies are only allowed after the student has been successfully evaluated for competency in the basic procedures.
- Trauma is considered a serious injury or shock to the body and requires modifications in positioning and monitoring of the patient's condition.

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

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

Imaging Procedures	Mandatory	Elective	Date Completed
Chest and Thorax			
Chest AP (Wheelchair or Stretcher)	✓		
Chest Lateral Decubitus		✓	
Chest Routine	✓		
Ribs	✓		
Sternoclavicular Joints		✓	
Sternum		✓	
Upper Airway (Soft-Tissue Neck)		✓	
Upper Extremity			
AC Joints		✓	
Clavicle	✓		
Elbow	✓		
Forearm	✓		
Hand	✓		
Humerus	✓		
Scapula		✓	
Shoulder	✓		
Thumb or Finger	✓		
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓		
Trauma: Upper Extremity (Non-Shoulder)*	✓		
Wrist	✓		
Lower Extremity			
Ankle	✓		
Calcaneus		✓	
Femur	✓		
Foot	✓		
Knee	✓		
Patella		✓	
Tibia-Fibula	✓		
Toes		✓	
Trauma: Lower Extremity*	✓		

* Trauma requires modifications in positioning due to injury, with monitoring of the patient's condition.

Imaging Procedures	Mandatory	Elective	Date Completed
Head – Must select at least one elective procedure from this section.			
Facial Bones		✓	
Mandible		✓	
Nasal Bones		✓	
Orbits		✓	
Paranasal Sinuses		✓	
Skull		✓	
Temporomandibular Joints		✓	
Spine and Pelvis			
Cervical Spine	✓		
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		
Hip	✓		
Lumbar Spine	✓		
Pelvis	✓		
Sacroiliac Joints		✓	
Sacrum and/or Coccyx		✓	
Scoliosis Series		✓	
Thoracic Spine	✓		
Abdomen			
Abdomen Decubitus		✓	
Abdomen Supine	✓		
Abdomen Upright	✓		
Intravenous Urography		✓	

Imaging Procedures	Mandatory	Elective	Date Completed
Fluoroscopy Studies – Must select two procedures from this section and perform per site protocol.			
Arthrography		✓	
Contrast Enema, Single or Double Contrast		✓	
Cystography/Cystourethrography		✓	
ERCP		✓	
Esophagus (*NOT* Swallowing Dysfunction Study)		✓	
Hysterosalpingography		✓	
Myelography		✓	
Small Bowel Series		✓	
Upper GI Series, Single or Double Contrast		✓	
Mobile C-Arm Studies			
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		
Mobile Radiographic Studies			
Abdomen	✓		
Chest	✓		
Upper or Lower Extremity	✓		
Hip	Program Required		
Pediatric Patient (Age 6 or Younger)			
Abdomen		✓	
Chest Routine	✓		
Mobile Study		✓	
Upper or Lower Extremity		✓	
Geriatric Patient (At Least 65 Years Old **and** Physically or Cognitively Impaired as a Result of Aging)			
Chest Routine	✓		
Hip or Spine		✓	
Upper or Lower Extremity	✓		

Appendix G

St. Louis Community College
Radiologic Technology Program

Clinical Competency Evaluation (Trajecsys)

Student Name: _____ Date: ____/_____/20____

Exam: _____ Initial / Re-check **Pass** **Retest**

- Competency evaluations are allowed after the procedure has been taught in the classroom and the "Simulation" column has been initialed by a faculty member.
- The procedure must be performed without technical assistance according to department protocol. Technique charts may be used.
- The patient should be of no more than average difficulty except for those exams otherwise indicated.
- "Difficult", trauma or mobile competencies are only allowed after the student has been successfully evaluated for competency in the basic procedures and has performed the procedure under direct supervision.
- Trauma is considered an injury or shock to the body that requires modifications in positioning and monitoring of patient's condition.
- **Only competency evaluations performed with inserviced technologists will be accepted.**

Scoring: If a student receives one U in any critical criteria, or more than three (3) U's in other criteria, circle Retest.

S = Satisfactory U = Unsatisfactory

1. Proper exam preparation		
Evaluate examination order and patient information	**S**	**U***
Prepare examination room by ensuring that it is clean, neat and stocked with necessary equipment	**S**	**U**

2. Effective patient communication and care		
Greet patient, and verify correct patient using two patient identifiers.	**S**	**U***
Assist patient using proper body mechanics	**S**	**U**
Confirm correct examination and give clear and concise explanation of examination to patient.	**S**	**U**
Practice appropriate infection control procedures	**S**	**U**
Questions patient about possible pregnancy when appropriate	**S**	**U***
Obtain and document appropriate history according to department policy	**S**	**U**
Ensure patient comfort and safety by monitoring, communicating, and performing necessary patient care procedures	**S**	**U**

3. Positioning and technical skills		
Select appropriate size and type IR	**S**	**U**
Position IR appropriately (Bucky, tabletop)	**S**	**U**
Position patient/anatomical part correctly	**S**	**U***
Mark IR correctly with lead markers	**S**	**U***
CR appropriately angled and centered to IR and anatomical part	**S**	**U***
Utilize standard SID per exam protocol	**S**	**U**
Properly collimate	**S**	**U***
Utilize protective lead shielding for patient, self and others when appropriate	**S**	**U***
Properly set control panel	**S**	**U***
Exposure Indicator within acceptable range (enter number in comments, enter n/a if not available)	**S**	**U**
Instruct patient on proper breathing technique prior to and following exposure	**S**	**U**
Properly use exposure switch while watching patient	**S**	**U**
Perform skills confidently and efficiently	**S**	**U**
Correctly assemble and use accessories and supplies (grids, contrast, trays etc.)	**S**	**U**
Performs exam with acceptable or no repeats	**S**	**U***

4. Finalize examination		
Release patient properly according to department protocol	**S**	**U**
Properly organize images and records according to department protocol	**S**	**U**
Clean and organize examination room	**S**	**U**
Evaluate images (identify anatomy of interest and evaluate positioning)	**S**	**U**

* Denotes critical criteria

If an instructor or technologist corrects a mistake during the exam, it will be scored as though the mistake were not corrected.

Check **all** boxes below that apply:

☐ **I was present throughout the exam**

☐ **The student performed the exam without technical assistance**

Comments:

_____

_____

Appendix H

Clinical Education Evaluation and Grading

Each clinical Education Grading Rubric will be subject to the deductions and penalties as outlined in the "Clinical Education Grading Penalties and Deductions" section at the end of this appendix.

Clinical Education I: Grading Criteria- Midterm

- The midterm grade will be calculated by averaging the scores from the three (3) orientation exams.
- Clinical orientation session punctuality and attendance will impact the Final Clinical Education Course grade.

Clinical Education I: Grading Criteria- Final

Orientation Exam Average Score (50 points)

- 50 to >0.0 points: Average exam score

  The average score earned on the orientation exams will be converted into points toward the final course grade.

  - **Point Calculation:**
    Exam average percentage × 50 = Exam Points Earned
  - **Example:**
    An exam average score of **80%** will earn **40 out of 50 points** toward the final course grade.

PDE: Professional Development Evaluation Score (40 points)

- 40 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Competencies (10 points)

- 10 points

  Two (2) clinical competencies completed by the last day of the semester.
- 5 points

  One (1) clinical competency completed by the last day of the semester.
- 0 points

  Zero (0) clinical competencies completed by the last day of the semester.

Clinical Education II: Grading Criteria- Midterm

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Education II: Grading Criteria- Final

Case Study Presentation (20 points)

- ☐ 20 points
- ☐ 15 points
- ☐ 10 points
- ☐ 0 points

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Competencies: Cumulative Total in Trajecsys (30 points)

- ☐ 30 points
  - 10 or more total competencies completed by the last day of the semester.
- ☐ 25 points
  - 8-9 total competencies completed by the last day of the semester.
- ☐ 20 points
  - 6-7 total competencies completed by the last day of the semester.
- ☐ 15 points
  - 4-5 total competencies completed by the last day of the semester.
- ☐ 0 points
  - 0-3 total competencies completed by the last day of the semester.

Clinical Education III: Grading Criteria- Final Only

PDE: Professional Development Evaluation Score (50 points)

- 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Competencies: Cumulative Total in Trajecsys (40 points)

- 40 points
  - 30 or more total competencies completed by the last day of the semester.
- 35 points
  - 28-29 total competencies completed by the last day of the semester.
- 25 points
  - 25- 27 total competencies completed by the last day of the semester.
- 15 points
  - 20-24 total competencies completed by the last day of the semester.
- 0 points
  - 0-19 total competencies completed by the last day of the semester.

Clinical Competency Rechecks: Counted per Semester (10 points)

Only 2 rechecks per exam will be counted toward the total points.

- 10 points
  - 5 or more rechecks completed by the last day of the semester.
- 5 points
  - 3-4 rechecks completed by the last day of the semester.
- 0 points
  - 0-3 rechecks completed by the last day of the semester.

Clinical Education IV: Grading Criteria- Midterm

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Education IV: Grading Criteria- Final

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Competencies: Cumulative Total in Trajecsys (30 points)

- ☐ 30 points
  - 40 or more total competencies completed by the last day of the semester.
- ☐ 25 points
  - 38-39 total competencies completed by the last day of the semester.
- ☐ 15 points
  - 35-37 total competencies completed by the last day of the semester.
- ☐ 5 points
  - 30-34 total competencies completed by the last day of the semester.
- ☐ 0 points
  - 0-29 total competencies completed by the last day of the semester.

Clinical Competency Rechecks: Counted per Semester (20 points)

Only 2 rechecks per exam will be counted toward the total points.

- ☐ 20 points
  - 10 or more rechecks completed by the last day of the semester.
- ☐ 15 points
  - 8-9 rechecks completed by the last day of the semester.
- ☐ 10 points
  - 6-7 rechecks completed by the last day of the semester.
- ☐ 5 points
  - 4-5 rechecks completed by the last day of the semester.
- ☐ 0 points
  - 0-3 rechecks completed by the last day of the semester.

Clinical Education V: Grading Criteria- Midterm

PDE: Professional Development Evaluation Score (50 points)*

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Education V: Grading Criteria- Final

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Case Study Presentation (20 points)

- ☐ 20 points
- ☐ 15 points
- ☐ 10 points
- ☐ 0 points

Clinical Competencies: Cumulative Total in Trajecsys (20 points)

- ☐ 20 points
  - 45 or more total competencies completed by the last day of the semester.
- ☐ 10 points
  - 40-44 total competencies completed by the last day of the semester.
- ☐ 0 points
  - 0-39 total competencies completed by the last day of the semester.

Clinical Competency Rechecks: Counted per Semester (10 points)

Only 2 rechecks per exam will be counted toward the total points.

- ☐ 10 points
  - 20 or more rechecks completed by the last day of the semester.
- ☐ 5 points
  - 15-19 rechecks completed by the last day of the semester.
- ☐ 0 points
  - 0-14 rechecks completed by the last day of the semester.

Clinical Education VI: Grading Criteria- Final Only

PDE: Professional Development Evaluation Score (50 points)

- ☐ 50 to >0.0 points: Average PDE score

  Scores will be calculated by entering the average points earned on all PDEs for the current semester.

Clinical Competencies: Cumulative Total in Trajecsys (40 points)

- ☐ 40 points
  - Completed all required clinical competencies on the MCL.
- ☐ 0 points
  - Did NOT complete all required clinical competencies on the MCL.

Clinical Competency Rechecks: Counted per Semester (10 points)

Only 2 rechecks per exam will be counted toward the total points.

- ☐ 10 points
  - 20 or more rechecks completed by the last day of the semester.
- ☐ 5 points
  - 15-19 rechecks completed by the last day of the semester.
- ☐ 0 points
  - 0-14 rechecks completed by the last day of the semester.

Clinical Education Grading Penalties and Deductions

The following penalties and deductions apply to all Clinical Education Courses.

Clinical Hours Completed

- Completed (routine)
  - Completes all clinical hours by the last day of the semester
  - No penalty
- Completed (scheduled)
  - Completes all clinical hours within the scheduled time
  - No penalty
- Not Complete
  - Does NOT complete all clinical hours within the scheduled time
  - Clinical grade of D

Clinical Absences

- No Absences
  - No clinical absences (not including personal time)
  - No penalty
- 1 or 2 Absences
  - 1 or 2 clinical absences (not including personal time)
  - 5 point deduction for each occurrence
- 3 or More Absences
  - Beginning on the 3rd absence, each additional absence (not including personal time) will result in an additional 10 point deduction for each occurrence

Clinical Tardies

- 0-1 Tardy
  - 0 or 1 clinical tardies or leaving early
  - No penalty
- 2 or 3 Tardies
  - 2 or 3 clinical tardies (including leaving early) will result in a 2 point deduction for each occurrence
- 4 or More Tardies
  - Beginning on the 4th tardy (including leaving early), each additional tardy will result in a 4 point deduction for each occurrence

Penalties and Deductions (cont.)

Dosimeter

- ☐ Completed
  - Dosimeter read during the open reading window each month
  - No penalty
- ☐ Not Completed (or late)
  - Dosimeter NOT read during the open reading window each month
  - 1 point deduction for each late reading

CastleBranch Renewal Deadlines

- ☐ Completed
  - CastleBranch Renewal Deadlines (if applicable) were completed on time
  - No penalty
- ☐ Not Completed (or late)
  - CastleBranch Renewal Deadlines (if applicable) were NOT completed on time
  - 1 point deduction for each late or missed deadline

Appendix I

Professional Development Evaluation (PDE)

Clinical Education I

Instructions: Evaluate the student's abilities in the following categories based on the length of time in the program.

Instructions: Evaluate the student's abilities in the following categories based on the length of time in the program.					
	4 Points	**3 Points**	**2 Points**	**1 Point**	**0**
1. Performance: The ability to perform most basic tasks in the radiology department.	Performs most basic tasks with no assistance.	Performs most basic tasks well; seldom makes errors.	Satisfactorily performs most basic tasks with assistance.	Performance of most basic tasks is marginal, inconsistent.	Performance of most basic tasks is poor. Needs constant supervision and instruction.
2. Productivity: The amount of work produced (including simulations, competencies, and exams).	Produces more than average amount of work; performs most exams under direct or indirect supervision.	Completes appropriate amount of work in the time expected; performs most exams under direct or indirect supervision.	Completes appropriate amount of work in the time expected, primarily functions in an assistive role.	Does just enough to get by; primarily observes exams.	Avoids work.
3. Comprehension: Level of understanding the information, responsibilities, procedures, materials, equipment and techniques required to do the job.	The student demonstrates comprehensive knowledge of radiographic concepts.	The student demonstrates above average knowledge of radiographic concepts.	The student demonstrates adequate knowledge of radiographic concepts.	The student's demonstration of radiographic concepts is inconsistent.	The student has inadequate knowledge of radiographic concepts.
4. Patient Care: The ability to meet the needs of and interact effectively with patients.	Instills a high level of confidence to patients through communication and concern; anticipates and responds to patients' needs.	Responds to patients' needs; above average patient rapport.	Aware of patients' needs, but does not always respond and/or establish patient rapport.	Does not anticipate patients' needs or establish patient rapport; responds to requests only.	Minimal communication with patients; avoids active patient contact.

PDE I (cont.)

	4 Points	3 Points	2 Points	1 Point	0
5. Communication/ Cooperation: The ability to effectively convey information while recognizing the dignity and perspectives of others; accepts instructions and constructive criticism.	Is cooperative and displays excellent communication skills; anticipates the needs of others and promotes teamwork; always responds appropriately to feedback.	Is cooperative and displays good communication skills; always responds to request of others and promotes teamwork.	Displays average communication skills; is usually cooperative and responsive to the requests of others; often responds appropriately to feedback.	Displays poor communication skills, or sometimes is uncooperative or not receptive to feedback.	Displays poor communication skills, or is uncooperative, or indifferent/hostile to feedback.
6. Initiative: The energy and motivation displayed in starting and completing tasks.	Self-starter; always accepts responsibility; seeks additional work.	Usually a self-starter; works well when given responsibility.	Accepts responsibility as required but does not pursue additional responsibility.	Does only what is required; needs frequent encouragement to start and complete tasks.	Puts forth little effort.
7. Judgment: The ability to reason, interpret and follow policies; take responsibility for one's actions and behaviors with maturity and self-control.	Always uses sound reasoning in making decisions; is aware of policies and always follows and supports them.	Usually uses sound reasoning in making decisions; is aware of policies and usually follows and supports them.	Satisfactorily uses sound reasoning in making decisions; is aware of policies and usually follows them.	Only some ability to reason and make judgments; needs to be reminded of policies.	Reasoning is often not logical and/or inconsistently follows policies.
8. Safety: The student will maintain a safe environment.	Always recognizes unsafe situations and takes appropriate action.	Usually recognizes unsafe situations and takes appropriate action.	Sometimes recognizes unsafe situations and takes appropriate action.	Sometimes recognizes unsafe situations and takes appropriate action when prompted.	Unable to recognize unsafe situations and/or take appropriate action.

	4 Points	3 Points	2 Points	1 Point	0
9. Professional Appearance: Grooming, cleanliness and appropriateness of dress.	Always presents a professional image; very well groomed and careful about appearance.	Usually well-groomed and presents a professional image.	Satisfactory personal appearance; clean and neat, and usually in accordance with dress code.	Personal appearance is marginal; frequently needs to be reminded of dress code.	Careless about personal appearance; does not comply with dress code.
10. Professionalism: The ability to treat all people with respect and dignity in every situation; acts with honesty and integrity; maintains confidentiality.	Conducts self in an appropriate manner at all times conforming to the highest standards of professional ethical behavior.	Conducts self in an appropriate manner conforming to standards of professional ethical behavior.	Generally adheres to standards of professional ethical behavior in an acceptable manner.	Sometimes does not follow standards of professional ethical behavior.	Often does not follow standards of professional ethical behavior.
11. Follows program direct supervision policy.*	Yes	No			
12. Follows program repeat policy.*	Yes	No			
13. Orientation Objectives Complete	Yes	No			

- 1st incident of noncompliance: The clinical course grade will be reduced by 15 percentage points.
- 2nd incident of noncompliance: The clinical course grade will be reduced by an additional 10 percentage points
- 3rd incident of noncompliance: The student will receive an "F" for the Clinical Education course. The student will be dismissed from the program and will be ineligible for readmission.

Professional Development Evaluation (PDE)

Clinical Education II – VI

Instructions: Evaluate the student's abilities in the following categories based on the length of time in the program.

	4 Points	3 Points	2 Points	1 Point	0
1. Comprehension: Level of understanding the information, responsibilities, procedures, materials, equipment and techniques required to do the job.	The student demonstrates comprehensive knowledge of radiographic concepts.	The student demonstrates above average knowledge of radiographic concepts.	The student demonstrates adequate knowledge of radiographic concepts.	The student's demonstration of radiographic concepts is inconsistent.	The student has inadequate knowledge of radiographic concepts.
2. Quality of Work: The ability to produce quality outcomes.	Meets highest standards of accuracy and thoroughness.	Work is consistently well done; seldom makes errors.	Quality of work is satisfactory; recognizes mistakes and takes corrective action.	Quality of work is marginal; inconsistent	Poor work quality; makes repeated mistakes.
3. Organization of work: The ability to prepare, execute and complete work in an organized, efficient manner.	Consistently plans procedures and needs no instructions to proceed; highly efficient.	Plans procedures and rarely needs instructions to proceed; starts work promptly.	Generally plans procedures; occasionally needs instructions to proceed.	Sometimes has difficulty organizing procedures and needs instructions to proceed.	Has difficulty organizing procedures and consistently needs instructions to proceed.
4. Productivity: The amount of work produced (including competencies, rechecks and exams).	Does more work than expected.	Produces more than average amount of work.	Completes appropriate amount of work in the time expected.	Does just enough to get by; often functions in an assistive role.	Avoids work; functions primarily in an assistive role.
5. Patient Care: The ability to meet the needs of and interact effectively with patients.	Instills a high level of confidence to patients through communication and concern; anticipates and responds to patients' needs.	Responds to patients' needs; above average patient rapport.	Aware of patients' needs, but does not always respond and/or establish patient rapport.	Does not anticipate patients' needs or establish patient rapport; responds to requests only.	Minimal communication with patients; avoids active patient contact.

	4 Points	3 Points	2 Points	1 Point	0
6. Adaptability: The ability to remain flexible and adapt to changes while maintaining a positive attitude.	Always responds appropriately and effectively to unexpected situations and changing conditions.	Responds appropriately and effectively to most unexpected situations and changing conditions.	Displays average ability to respond appropriately and effectively to most unexpected situations and changing conditions.	Frequently is inflexible to change; does not maintain a positive attitude.	Inflexible to change and does not maintain a positive attitude.
7. Communication/ Cooperation: The ability to effectively convey information while recognizing the dignity and perspectives of others; accepts instructions and constructive criticism.	Is cooperative and displays excellent communication skills; anticipates the needs of others and promotes teamwork; always responds appropriately to feedback.	Is cooperative and displays good communication skills; always responds to request of others and promotes teamwork.	Displays average communication skills; is usually cooperative and responsive to the requests of others; often responds appropriately to feedback.	Displays poor communication skills, or sometimes is uncooperative or not receptive to feedback.	Displays poor communication skills, or is uncooperative, or indifferent/hostile to feedback.
8. Initiative: The energy and motivation displayed in starting and completing tasks.	Self-starter; always accepts responsibility; seeks additional work.	Usually a self-starter; works well when given responsibility.	Accepts responsibility as required but does not pursue additional responsibility.	Does only what is required; needs frequent encouragement to start and complete tasks.	Puts forth little effort.
9. Judgment: The ability to reason, interpret and follow policies; take responsibility for one's actions and behaviors with maturity and self-control.	Always uses sound reasoning in making decisions; is aware of policies and always follows and supports them.	Usually uses sound reasoning in making decisions; is aware of policies and usually follows and supports them.	Satisfactorily uses sound reasoning in making decisions; is aware of policies and usually follows them.	Only some ability to reason and make judgments; needs to be reminded of policies.	Reasoning is often not logical and/or inconsistently follows policies.
10. Safety: The student will maintain a safe environment.	Always recognizes unsafe situations and takes appropriate action.	Usually recognizes unsafe situations and takes appropriate action.	Sometimes recognizes unsafe situations and takes appropriate action.	Sometimes recognizes unsafe situations and takes appropriate action when prompted.	Unable to recognize unsafe situations and/or take appropriate action.

	4 Points	3 Points	2 Points	1 Point	0
11. Professional Appearance: Grooming, cleanliness and appropriateness of dress.	Always presents a professional image; very well groomed and careful about appearance.	Usually well-groomed and presents a professional image.	Satisfactory personal appearance; clean and neat, and usually in accordance with dress code.	Personal appearance is marginal; frequently needs to be reminded of dress code.	Careless about personal appearance; does not comply with dress code.
12. Professionalism: The ability to treat all people with respect and dignity in every situation; acts with honesty and integrity; maintains confidentiality.	Conducts self in an appropriate manner at all times conforming to the highest standards of professional ethical behavior.	Conducts self in an appropriate manner conforming to standards of professional ethical behavior.	Generally adheres to standards of professional ethical behavior in an acceptable manner.	Sometimes does not follow standards of professional ethical behavior.	Often does not follow standards of professional ethical behavior.
13. Progress: The ability to make advancements and improve clinical proficiency.	n/a	n/a	Improving clinical skills and proficiency appropriately.	Making some advancement and clinical proficiency improvement, less progress than expected.	Not progressing or improving clinical proficiency.
14. Follows program direct supervision policy.*	Yes	No			
15. Follows program repeat policy.*	Yes	No			

- 1st incident of noncompliance: The clinical course grade will be reduced by 15 percentage points.
- 2nd incident of noncompliance: The clinical course grade will be reduced by an additional 10 percentage points
- 3rd incident of noncompliance: The student will receive an "F" for the Clinical Education course. The student will be dismissed from the program and will be ineligible for readmission.