



RADIOLOGIC TECHNOLOGY

MIDLANDS TECHNICAL COLLEGE

STUDENT HANDBOOK

The policies and procedures contained in this book have been endorsed by the Radiologic Technology Advisory Committee to ensure the professional conduct of all students on August 12, 2026.

“Midlands Technical College is accredited by the Commission on Colleges of the Southern Associate of Colleges and Schools to award associate degrees, diplomas, and certificates.”

The Radiologic Technology Program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT).

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

The Radiologic Technology Program is approved by the South Carolina Radiation Quality Standard Association (SCRQSA).

South Carolina Radiation Quality Standards Association
P.O. Box 7515
Columbia, SC 29202
1927 Thurmond Mall, Suite 101 - Columbia, SC 29201
Toll-Free (877) 771-6141 803-771-6141
Fax # 803-771-8048 scrqsastaff@capconsc.com

2026-2028

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STATEMENT OF NONDISCRIMINATION

Midlands Technical College does not discriminate in admissions, educational programs or employment on the basis of race, sex, sexual orientation, national origin or ethnic group, color, age, religion, disability, genetic information, gender, military service, pregnancy or other category protected by applicable law. In compliance with all federal and state laws, including the Age Discrimination Act of 1967, Title VI and Title VII of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1992 as well as the ADA Amendments of 2008 (ADAA), and the Genetic Information Nondiscrimination Act of 2008 (GINA), Midlands Technical College offers access and equal opportunity in its admissions policies, academic programs and services, and employment of disabled individuals in that no otherwise qualified person will be denied these provisions on the basis of a disability. The Midlands Technical College also prohibits retaliation against any person for bringing a complaint of discrimination or for participating in an investigation of a complaint of discrimination. Mr. Ian A. MacLean has been designated to coordinate compliance with the nondiscrimination requirements contained in Section 35.107 of the Department of Justice regulations, Sections 503 and 504 of the Rehabilitation Act of 1973, Title VI and Title VII and Title IX regulations. Information concerning the provisions of the Americans with Disabilities Act and the rights and privileges thereunder are available from Mrs. Debbie Walker in her position as Director of Internal Audit and Risk Management and the Chief Compliance Officer for Affirmative Action, Equal Employment Opportunity, Sexual Harassment, Disability Action and the Title IX Coordinator. She can be reached at Midlands Technical College, P.O. Box 2408, Columbia, SC 29202, 803.822.3204, walkerd@midlandstech.edu.

MIDLANDS TECHNICAL COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM'S STATEMENT OF MISSION

The Radiography Program is a comprehensive two-year A.A.S. degree program which provides its students a high-quality, customer service, competency-based didactic and clinical education. The education provided prepares the students to enter the entry-level job market in diagnostic radiology, allows them to transfer to senior colleges, prepares advanced students for subspecialty areas, as well as instilling lifelong values and assists them in achieving their professional and personal goals.

STATEMENT OF ROLE AND SCOPE

The Program implements its mission through a clearly defined set of objectives and outcomes that meet and exceed the “Standards” for an accredited program through the Joint Review Committee on Education in Radiologic Technology.

Didactic Instruction. The Program follows the American Society of Radiologic Technologists curriculum guide in the presentation of Radiography content, as well as meeting the Southern Association of Colleges and Schools and Commission on Colleges liberal arts requirements for Associate’s Degree.

Clinical Education. The Program prides itself on the professional behavior and clinical competency skills of its graduates. Clinical rotations through all phases of radiography are required to meet the job demands of the small office to the large hospital. Critical thinking skills and problem-solving methods are emphasized.

Service Excellence. The Program teaches and evaluates students in the affective areas of patient care. Teamwork, professionalism, and patient management skills are assessed through the curriculum. Involvement in professional society functions is strongly encouraged.

Access Programs. The Program provides students with counseling, tutoring and job placement services. Programs and student’s assessment strategies are constantly being performed to improve the Program and the student.

Quality Outcome Assessment. All phases of the Program are assessed to ensure quality services are provided to the student, employer, and future patients. Areas such as admissions, RAD 100, Instructor’s teaching abilities, ARRT scores, post graduate evaluations, student satisfaction survey, etc. are assessed. The Radiography Advisory Committee is an active integral part of assessing the quality of the Program and providing important input into the necessary clinical skills needed of the graduates.

STATEMENT OF VALUES

The Program respects the diversity of its students and recognizes the worth, dignity, and potential of each student. Therefore, the Program affirms the following values and beliefs:

Commitment to Student. Belief in the priority of providing the finest instruction, resources, and support services to enhance the growth and development of our students. The Program supports students in clarifying their life-long goals, developing interpersonal skills, and becoming self-sufficient.

Commitment to Excellence in Education. Belief in providing and being accountable for the quality of medical and general education and student support services. Our Associate Degree and certificate graduates are prepared to demonstrate their knowledge, in written and oral communications, customer service areas, information technology, clinical procedures, equipment operation, quality assurance, and radiation safety.

Commitment to Faculty and Staff. Recognition of the importance and contribution of all individuals who collectively create a positive learning environment. All members of the radiology and college community should have the opportunity to enhance their potential for purposeful, gratifying and productive lives.

Quality Clinical Environment. Recognition of the importance of providing a learning environment that is characterized by integrity, clear communications, open exchange of ideas, fairness in evaluation and respect for all individuals.

Effective Use of Resources. Belief in the effective use of college and program resources to provide quality education and services to its student and community and to be accountable to all of its clinical affiliates.

AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGIST

CODE OF ETHICS*

PREAMBLE

This Code of Ethics is to serve as a guide by which Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, other members of the allied profession and health care consumers.

The Code of Ethics is not law but is intended to assist Radiologic Technologists in maintaining a high level of ethical conduct.

Therefore, in the practice of the profession, we the members of the American Society of Radiologic Technologists, accept the following principles:

Principle 1

Radiologic Technologists shall conduct themselves in a manner compatible with the dignity of their profession.

Principle 2

Radiologic Technologists shall provide services with consideration of human dignity and the uniqueness of the patient, unrestricted by considerations of age, sex, race, creed, social or economic status, handicap, personal attributes or the nature of the health problem.

Principle 3

Radiologic Technologists shall make every effort to protect all patients from unnecessary radiation.

Principle 4

Radiologic Technologists should exercise and accept responsibility for independent discretion and judgment in the performance of their professional service.

Principle 5

Radiologic Technologists shall judiciously protect the patient's right to privacy and shall maintain all patient information in the strictest confidence.

Principle 6

Radiologic Technologists shall apply only methods of technology founded upon a scientific basis and not accept those methods that violate this principle.

Principle 7

Radiologic Technologists shall not diagnose, but in recognition of their responsibility to the patient, they shall provide the physician with all information they have relative to radiologic diagnosis or patient management.

Principle 8

Radiologic Technologists shall be responsible for reporting unethical conduct and illegal professional activities to the appropriate authorities.

Principle 9

Radiologic Technologists should continually strive to improve their knowledge skills by participating in educational and professional activities and sharing the benefits of their attainments with their colleagues.

Principle 10

Radiologic Technologists should protect the public from misinformation and misrepresentation.

PHILOSOPHY AND GOALS OF THE PROGRAM

The Radiologic Technology Program sponsored by Midlands Technical College is a two year (twenty continuous months), Associate of Applied Science degree program. The students are involved in the educational training for a period of twenty months in order to meet requirements of the program and to fulfill requirements for the National Board Exam by the American Registry of Radiologic Technologists.

The clinical education of the program is based on the attainment of sound educational performance, objectives, and a thorough testing system for clinical competency.

It is the purpose of the Radiologic Technology Program of Midlands Technical College to produce graduates that are competent technologists, registry eligible, and demonstrate a professional concern for their patients.

The students' accomplishment of their clinical and academic objectives will prepare them for entrance level skills of a staff radiologic technologist.

The program is affiliated with four area hospitals. Prisma Richland, Prisma Baptist, Prisma Health Baptist Parkridge and Lexington Medical Center are major affiliates. The students receive approximately twenty months of clinical education at these locations.

While at Prisma Richland, Prisma Baptist, Prisma Health Baptist Parkridge and Lexington Medical Center the students will rotate through all radiology services and clinics. The student will rotate through Lexington Orthopedics, Prisma Health Orthopedics, Midlands Orthopedics, Lexington Medical Center Community Medical Centers (6) and MUSC Kershaw according to the needed clinical experiences to round out the student's clinical education.

The program has an advisory committee which is comprised of area professionals in the field of Radiologic Technology. This committee helps guide the program in the production of qualified graduates needed to meet the job expectations.

PROGRAM GOALS

Goal 1: Students will be clinically competent.

Student Learning Outcomes: Students will apply positioning skills.
Students will select technical factors. Students will utilize radiation protection.

Goal 2: Students will demonstrate communication skills.

Student Learning Outcomes: Students will demonstrate written communication skills.
Students will demonstrate oral communication skills.

Goal 3: Students will develop critical thinking skills.

Student Learning Outcomes: Students will adapt standard procedures for non-routine patients. Students will critique images to determine diagnostic quality.

Goal 4: Students will model professionalism.

Student Learning Outcomes: Students will demonstrate work ethics.
Students will summarize the value of life-long learning.

DESCRIPTION OF THE PROFESSION

Imaging examinations performed by, and accompanying responsibilities assigned to, a radiographer shall be at the direction of physicians qualified to request and/or perform radiologic procedures. Upon completion of the program the radiographer shall be able to:

1. Apply knowledge of anatomy, physiology, positioning, and radiographic techniques to accurately demonstrate anatomical structures on a radiograph or other imaging receptor.
2. Determine exposure factors to achieve optimum radiographic technique with minimum radiation exposure to the patient.
3. Evaluate radiographic images for appropriate position and image quality.
4. Apply the principles of radiation protection for the patient, self, and others.
5. Provide patient care and comfort.
6. Recognize emergency patient conditions and initiate lifesaving first aid and basic life-support procedures.
7. Evaluate the performance of radiologic systems, know the safe limits of equipment operation, and report malfunctions to the proper authority.
8. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
9. Participate in radiologic quality assurance program. All course outlines specifically state the required objectives, goals and student learning outcomes of each course which will lead to all terminal objectives being met and the Program's mission completed.

GRADUATION REQUIREMENTS

Program Graduation Requirements:

1. Successful completion of all clinical, academic and graduation competencies
2. Successful completion of all RAD course work with at least a 75%
3. Successful completion of all required courses for the Associate of Applied Sciences degree in the general studies area with a 75% or better and a 2.5 GPA Cumulative RAD
4. Overall GPA of 2.0 or higher

Graduation Competencies:

1. Use oral and written communications.
2. Demonstrate knowledge of human structure, function, and pathology.
3. Anticipate and provide basic patient care and comfort.
4. Apply principles of body mechanics.
5. Perform basic mathematical functions.
6. Operate radiographic imaging equipment and accessory devices.
7. Position the patient and imaging system to perform radiographic examinations and procedures.
8. Modify standard procedures to accommodate for patient condition and other variables.
9. Determine exposure factors to obtain diagnostic quality radiographs with minimum radiation exposure.
10. Adapt exposure factors for various patient conditions, equipment, accessories, and contrast agents to maintain appropriate radiographic quality.
11. Practice radiation protection for patient, self, and others (where applicable).
12. Recognize emergency patient conditions and initiate basic life support procedures.
13. Evaluate radiographic images for appropriate positioning and image quality.
14. Evaluate the performance of radiographic systems, know the safe limits of equipment operation, and report malfunctions to the proper authority.
15. Demonstrate knowledge and skills relating to quality assurance.
16. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
17. Successfully completes the required clinical competencies.
18. Successfully complete the mandatory and elective competencies deemed appropriate by ARRT.

Clinical Competencies:

1. Completion of the required CBE's (Clinical Based Examinations)
2. Completion of all assigned clinical time and
3. Completion of all objective sheets

SECTION I: CLINICAL EDUCATION

INSTRUCTIONAL AND ADMINISTRATIVE PERSONNEL
Midlands Technical College 803-738-8324

Dr. Gregory Little, Ed. D.
President, Midlands Technical College

Jeff McCarty, Ed, D.
Dean, School of Health Care
Office: 803-822-3434

Erica Albritton, Ed.D.
Chair, Department of Health Sciences

Millie Massey, M. Ed., RT(R)(CV)
Program Director, Radiologic Sciences
Office: 803-822-3651; Cell: 803-240-5784

Russ Dantzler, B.S.R.S., RT(R)(CT)
Clinical Coordinator/Instructor
MTC office: 803-822-3482
Cell: 803-521-7160

**

Clinical Site Coordinator/Prisma Richland
MTC office: 803-822-7038 Prisma Richland Office: 803-434-7805
Cell: 803-938-3682

Lori Smith, A.A.S., RT (R)
Clinic Site Coordinator Lexington Medical Center
MTC Office: 803-822-6706 LMC office: 803-791-2460 ext. 6976
Cell: 803-513-4381

Lisa Willson, Ed. D., RT(R)(T)
Clinical Site Coordinator Prisma Baptist/Prisma Health Parkridge
MTC Office: 803-822-4265 Prisma Baptist front desk: 803-296-5060
Cell: 803-587-5560

Prisma Health Richland 803-434-6301

<u>NAME</u>	<u>POSITION</u>
Mark O'Halla	CEO and President, Prisma Health
Matthew Taffoni, MD	Chief Radiologist, Radiology Services, Prisma
-	
Gordon Branham, BS, RT(N) CNMT	Director of Radiology
Joseph Lewis, RT(R)	Diagnostic Imaging Manager
Kelley Ramsey, RT (R)	Diagnostic Radiology Supervisor, Day Shift
Anabelle Gibbs, RT (R)	Lead Technologist
Iklime Cakir, RT (R)	Lead Technologist, & Preceptor Weekends
Tracey Nelson, RT(R)	Day Shift Student Preceptor
Michele Hicks, RT (R)(CT)	Imaging Manager, Outpatient Services

This list is strictly for the purpose of informing you of “key” people in the clinical areas to whom you may be introduced.

Prisma Health Baptist & Baptist Parkridge 803-296-5060

Name	Position
Mark O'Halla	President and CEO, Prisma Health
Matthew Taffoni, MD	Chief of Radiology, PH Baptist
Brendt DeBriendt, RT(R)(CT)(MR)	Director of Radiological Services
Paul Hensly, RT (R)(CT)(MRI)	Manager of Diagnostic Radiology
Vickie Schaeffer, RT (R)	Student Preceptor, AM Shift
Thomas Ruess, RT(R)	Surgery Preceptor

Baptist Parkridge

Paul "David" Case, RT (R)(CT)(MR)	Manager of Diagnostic Radiology
Lynn Kinard, RT (R)	Clinical Preceptor

This list is strictly for the purpose of informing you of "key" people in the clinical areas to whom you may be introduced.

Lexington Medical Center- 803-791-2460

Name	Position
Kirk Jenkins	President & Chief Executive Officer
Nicholas Mayes, M.D.	Chief of Radiology
Joshua McCain, M.D.	Director of Imaging Services
Marice Wilson, M.B.A., CRA, RT (R)	
Andre Perkins, M.B.A, CNMT	Imaging Operations Manager
Robyn Morrison, RT (R)	Imaging Operations Supervisor
Cheryl Babb, RT(R)	Clinical Preceptor-Days
Kristen Hooker, RT (R)	Clinical Preceptor-Weekends
Erin Haggard, PA	Fluoro PA
Kevin Hengeveld & Jennifer Stevens	PA's Interventional/Fluoro

This list is strictly for the purpose of informing you of “key” people in the clinical areas to whom you may be introduced.

LEXINGTON MEDICAL CENTER- COMMUNITY MEDICAL CENTERS

Marice Wilson, MHA, RT(R) Director of Radiology CMC's

Cayce:

Manager: Teresa Byrd, RT (R)	Manager
Erin Phillips, RT (R)	Preceptor
Kelley Sarver, RT (R)	Preceptor

Chapin:

Stephanie Balfour, RT (R)(CT)(MR)	Manager
Jewel Wessinger, RT (R)	Preceptor

Irmo:

Stephanie Balfour, RT (R)(CT)(MR)	Manager
Jill Howard, RT (R)	Preceptor
Teresa Fox, RT (R)	Preceptor

Lexington:

Stephanie Croft, RT(R)	Manager
Shelley Rivers, RT(R)	Preceptor
Nikki Miller, RT(R)	Preceptor

Northeast:

Lisa Hinsberg, RT(R)	Manager
Cassie Laberta, RT(R)	Preceptor
Kimberly McCall, RT(R)	Preceptor

Saluda Pointe:

Teresa Byrd, RT(R)	Manager
Kelly Wooten, RT(R)	Preceptor
Maurice Lyons, RT (R)	Preceptor

This list is strictly for the purpose of informing you of “key” people in the clinical areas to whom you may be introduced.

CLINICAL EDUCATION

The clinical education received in this program provides the student with the necessary clinical background in the manipulation of equipment, the handling of all types of patients, the setting of proper radiographic techniques, Image processing, and filing skills. All areas of these basic skills must be mastered before the student can successfully complete the program and be eligible to be certified by the American Registry of Radiologic Technologists. All clinical and didactic activities assigned to students to meet program and student outcomes are strictly educational.

During the two-year training program, the student must rotate through the following clinical assignments for the length of time prescribed by the program director and clinical coordinators. *The program will follow all of the policies and requirements of each facility in order to maximize the experiences and learning opportunities they provide.*

1. Diagnostic Radiologic Procedures (IVU's, BE's, UGI's, routine examinations, etc.)
2. Portable Radiography
3. Surgery
4. Trauma PM's - Students will start through this clinical area after approximately 2 semesters of competent clinical experience. The hours will be from 2:00 p.m. to 10:00 p.m.
5. Trauma Weekends - Students will start rotating through this clinical area after approximately 2 semesters of competent clinical experience. The students will rotate on the 2:00 pm-10:00 pm shift at Prisma Richland. The weekend rotation at Lexington Medical Center will be from 2:00 pm-10:00 pm. These times are flexible based on surgical competency needs of the student. The student may also request to do rotations on third shift, 11:00 pm- 7:00 am, at Prisma Richland during the weekend rotation. The students will be off Friday prior to the weekend clinic and off Monday immediately afterwards. The student will not be in class or clinic over 40 hours per week. *Keep in mind the scheduled hours may be changed by the instructor to meet the clinical needs of each student.*
6. Imaging Center
7. Computerized Tomography
8. Nuclear Medicine (Elective)
9. Radiation Therapy (Elective)
10. Diagnostic Sonography (Elective)
11. Rotations affiliate hospitals (LMC, PHB, PHR, PHBP)
12. MRI (Elective)
13. Prisma-USC Orth (NE, 14 MP & Saluda Pt)
14. Interventional Radiography/Cath Lab(Elect)
15. MRI (Elective)
16. Patient Flow Coordinator
17. E.K.G.
18. 11:00 – 7:00 AM (elective)
19. Midlands Orthopedic & Neurosurgery
20. Lexington Orthopedics&Sports Med
21. Prisma Health Baptist Parkridge
22. PHO-USC Parkridge Orthopedics
23. MUSC Kershaw
24. Lexington Medical Center-Community Medical Centers- NE, Irmo, Lexington, Saluda Pointe, Chapin and Cayce

Duties of the Program's faculty:

Position	Responsibilities must, at a minimum, include:
Program Director Academic Instructor (fill in site coordinator during absences for teaching a class) Millie Massey, M. Ed., RT(R)(CV)	• Assuring effective program operations. • Overseeing ongoing program accreditation and assessment processes. • Participating in budget planning. • Participating in didactic and/or clinical instruction, as appropriate. • Maintaining current knowledge of the professional discipline and educational methodologies through continuing professional development • Assuming the leadership role in the continuing development of the program. • Prepares and maintains course outlines and objectives, instructing, and evaluating student progress. • Participates in clinical education at a variety of clinical sites. • Performs competency simulations, check offs and rechecks for the students while in clinic.
Clinical Coordinator/ Academic Instructor Russ Dantzler, BSRS, RT(R) (CT)	• Correlating and coordinating clinical education with didactic education and evaluating its effectiveness. • Participating in didactic and/or clinical instruction. • Evaluates the students in the clinical setting twice each semester at Baptist & Parkridge. • Supporting the program director to assure effective program operations. • Participating in the accreditation and assessment processes. • Prepares and maintains course outlines and objectives, instructing, and evaluating student progress. • Maintaining current knowledge of the professional and educational methodologies through continuing professional development. • Maintaining current knowledge of program policies, procedures, and student progress. • Performs competency simulations, check offs and rechecks for the students while in clinic.

	• Prepares and maintains course outlines and objectives, instructing, and evaluating student progress. • Participates in the accreditation and assessment process;
Full-Time Academic/Site Clinical Coordinator ***	• Supports the program director to assure effective program operations. • Participates in periodic review and revision of course materials. • Provides clinical education to students at Prisma Richland. • Evaluates the student's clinical performance. • Conferences with each student at the site at midterm and end of semester meetings. Maintains current knowledge of professional discipline. • Maintains appropriate expertise and competence through continuing professional development. • Performs competency simulations, check offs and rechecks for the students while in clinic.
Full-Time Site Clinical Coordinator Lori Smith, AAS, RT(R)	• Prepares and maintains course outlines and objectives, instructing, and evaluating student progress. • Provides clinical education at Lexington Medical Center. • Evaluates the students in the clinical setting twice each semester. • Participates in the assessment process. • Participates in the periodic review and revision of course materials. • Maintaining current knowledge of the professional discipline. • Maintaining appropriate expertise and competence through continuing professional development. • Performs competency simulations, check offs and rechecks for the students while in clinic.

Full Time Site Clinical Coordinator Lisa Willson, Ed., D. RT(R)(T)	• Prepares and maintains course outlines and objectives, instructing, and evaluating student progress. • Provides clinical education at Prisma Health Baptist and Prisma Health Baptist Parkridge. • Evaluates the students in the clinical setting twice each semester. • Participates in the assessment process. • Participates in the periodic review and revision of course materials. • Maintaining current knowledge of the professional discipline. • Maintaining appropriate expertise and competence through continuing professional development. • Performs competency simulations, check offs and rechecks for the students while in clinic.
Adjunct Clinical Faculty Tiffany Greene, RT(R) Jessica Blue, RT(R)(VI) Rebecca Enright, RT(R) Jim Palmatier, RT(R)	• Provide clinical support to the student at the clinical site in the absence of a full-time or adjunct faculty member. • Will evaluate the students' performance on a daily basis in Trajecsyst. • Can evaluate the students on simulation, check-off and recheck competencies. •
Clinical Preceptors	• Provides clinical support to student learning at the clinical site. • Will be responsible for student learning in the absence of the program's full-time or adjunct faculty. • Evaluates the students' performance on a weekly basis in Trajecsyst. • Can evaluate the students on simulations, competencies and recheck competencies during the clinical rotation.

CLASS AND CLINICAL SCHEDULES

All radiology classes will follow the College's academic calendar. However, due to the clinical requirements needed for graduation the clinical rotations do not follow the published college calendar. Students will return up to 3 days early to practice with the clinical site's equipment, review course syllabi, listen to guest speakers and tour facilities coming up in the upcoming clinical rotation. There will be no time spent in clinic during the week of final exams.

The radiography program's curriculum is based on six semesters of academic study and clinical rotations to acquire clinical competency. The purpose of clinical rotations through hospitals and offices is to provide students the variety and number of radiographic procedures they need to be evaluated on and to be performed before competency and graduation can be obtained.

To graduate from the program within the published six semesters a standard number of radiographic procedures must be competently completed by each student as well as other written assignments and the completion of specific clinical objectives.

Students are selected for specific home base clinical sites based on instructor's suggestions. *The program has the right to reassign students to a different clinical site due to changes in clinical scheduling, student numbers, or changes in radiographic procedures.*

Due to shorter than normal fifteen-week semesters as published in the College's catalog, the radiography's clinical schedule cannot follow the normal college schedule. Students will receive specified breaks as noted in the college calendar; however, those students who have not obtained the required number of competencies, objectives, evaluations or patient care numbers would be strongly encouraged to schedule designated break days for clinical rotations in order to achieve the number of exams as required.

The purpose of clinical scheduling during college breaks is to assist those students who have not met established program clinical requirements during the semester. This additional time provides the clinical time and rotations necessary to meet semester requirements. These requirements must be completed prior to the start of the next semester. This would assist the student in graduating as scheduled, and to be able to sit for the National Board Examination with their classmates.

A student entering the radiography program must be willing to devote their time and energies into a medical technical specialty that requires dedication and commitment.

If a student wants to spend time in an area of specialty they can do so once the competencies and objectives for the current semester have been completed. We recommend a four-hour session on the first visit. The Site Coordinator will set this session up for you with the department you have requested. The program also recommends the students to do this early in the radiology program.

Many post graduate programs do have a waiting list or additional pre-requisites you must complete prior to starting their program of specialization.

I have read this information and understand that due to my own progression of clinical competence I may or may not receive all the college’s academic breaks as designated by the College’s calendar.

QUESTIONS WILL BE ANSWERED BY THE RADIOLOGIC TECHNOLOGY FACULTY OR STAFF PRIOR TO SIGNING.

_____	_____
Applicant/Student	Date

_____	_____
Faculty/Staff	Date

Page 114 will be the document you sign for this page. This is your page to keep.

IMAGING CENTER AND SPECIAL ROTATION ASSIGNMENTS

Rules:

The student must adhere to all MTC School of Radiologic Technology policies while assigned to Special Rotations.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Calls instructor and person in charge of assignment if expects to be out sick, late or has changes in normal routine, i.e., doctor's appointment. 2. Reports for duty unless otherwise directed. (follow clinical rotation schedule) 3. Communicates with staff in charge about lunch time. 4. Reports back to staff when returning to department. 5. Submits and retrieves evaluation forms from Trajecsys. 6. Meets all competency requirements. 7. May request observation time in specialty areas with site coordinator once all competencies are completed for current semester. Two weeks in final semester are scheduled for "specialty rotations" if the student would like additional time in area.
Site Coordinator	1. Notifies charge person if changes are made in schedules. 2. Documents absences and will provide documentation to the student when at 50% absent. 3. Obtains and reviews performance evaluations. 4. Reviews objective accomplishments. 5. Reports to Program Director any student having difficulty following procedures.
Program Director	1. Reviews all records and has final decision regarding this policy and procedure.

MIDLANDS TECHNICAL COLLEGE

STUDENT CLINICAL PRECEPTOR RESPONSIBILITIES

The student Clinical Preceptor is a very important part of the clinical instructional team, who is responsible for creating an atmosphere which is supportive of learning at the clinical rotation sites. The instructor is also responsible for the following:

1. Receives specific training using the ASRT Clinical Instructors Training program. The Clinical Coordinator schedules with the new CP. They also review the Clinical Preceptor packet created by MTC for program specific rules and JRCERT specific rules.
2. Documents occurrences and evaluate student's daily performance. These could be critical incidents or praiseworthy events.
3. Orient new students to the clinical site.
4. Change the student's scheduled area as needed to place them in areas where maximum learning can be experienced.
5. Keep informed of the content of the current student policy manual.
6. Go-to person for check-offs and rechecks in the absence of the Site Coordinator or Adjunct faculty.
7. Serve as a role model for the students.
8. In the event of a negative situation the preceptor can ask the student to leave the clinical site and contact the Clinical Coordinator/Program Director as soon as possible regarding the situation. This will require a meeting to resolve the issue between the program, the student and the clinical site.

Imaging Center	Ashton Rabern	803-434-4450
Trauma PM's	Savannah Williams (acting)	803-434-6766
Weekends	Iklime Cakir	803-434-6766
Prisma Orthopedic	Chris Marcinik	803-296-9456
Lexington Orthopedics & Sports Medicine	Rachel Fry	803-936-7230
Midlands Orthopedic & Neurologic Medicine	Katelyn Butter	803-256-4107- ext. 6324

Lexington Medical Center	Kristen Hooker-weekend Cheryl Babb- Days	803-791-2465
MUSC Kershaw	Emily Watson-Atkinson	803-713-1272
LMC Community Medical Centers:		
Cayce	Erin Phillips/Kelly Sarver	803-314-0660
Chapin	Jewel Wessinger/Dana Long	803-932-0655
Irmo	Jill Howard/Teresa Fox	803-407-4100
Lexington	Shelley Rivers/Nikki Miller	803-358-6179
Northeast	Cassie Laberta/Kimberly McCall	803-314-0500
Saluda Pointe	Kelly Wooten/Maurice Lyons	803-785-3590

STUDENT CLINICAL FILES

The student has two assigned file folders to keep records for clinical objectives and competencies. One folder is for filing patient number sheets and written clinical objectives/papers; one is for clinical competency recording, and grades.

Rules:

1. All folders of documentation are the property of Midlands Technical College.
2. The folders for grades and written objectives must not be removed from the instructors' office without permission from the instructors.
3. Students may ask to see folders during office hours or when necessary.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Files accurate records. 2. Files documentation on time. 3. Keeps files neat. 4. Leaves folders in proper place at all times.
Site Coordinator	1. Reviews documentation frequently. 2. Keeps folder containing grades private and locked in desk within the locked office. 3. Reviews contents of documentation with student on Trajecsys. 4. Reports to Program Director any student that is having difficulty following procedures.

5. Documents demerits for failure to meet requirements.
6. Recommends dismissal from the program for failure to comply with this policy.

Program Director

1. Reviews all records and has final decision concerning this policy and procedure.

CLINICAL EDUCATION REQUIREMENTS

Please note: Trajecsyst is the online system we use to record and document all student room objectives, weekly evaluations, attendance, and competencies while in the program. This will be signed up for in August with each new cohort. A one-time fee for the duration of the program will cover the use of Trajecsyst. Clinical Education requirements are designed to help the student learn to adjust to the requirements of the professional work force.

Rules:

The student must:

1. Maintain prompt attendance in all clinical assignments. Attendance is to be clocked in on a computer at each site. You will clock in and out and upon leaving and returning from lunch. Cell phones are not to be used for this!
2. A) Call an instructor if sick or cannot attend their clinical assignment by the time they are supposed to report to clinic. The student may talk to the Site Coordinator at 803-434-7805. The students at Lexington Medical Center need to contact Mrs. Smith at 803-513-4381. The students at Prisma Baptist/Parkridge need to contact Dr. Willson at 803-296-2002. **If student is at an affiliate facility, they should call their Site Coordinator and the radiographer in charge at the affiliate site.**

B) If the student is scheduled for weekend rotation and is unable to come to clinic, he/she must **call the Site Coordinator and technologist in charge**. The time will be made up the next weekend since this is a special rotation.
3. Pass the physical requirements of the program. Complete all MTC health forms required by the program. The program health requirements are based on the clinical affiliate requirements as stated in the "affiliate contract." (07/2022). All clinical rotations require a positive titer to determine the immunity one has to HepB, MMR and Varicella. Negative titers will require additional vaccines to be completed. Another titer must be drawn to determine if positive. Complete all onboarding processes for each clinical facility prior to the start of the assigned rotation.

4. Rotate through all clinical assignments and gain working knowledge of the equipment and procedures done.
5. If the student misses' clinical rotations due to absences, it is strongly suggested that the student make up clinical time before the end of the semester in order to complete clinical competencies within the required time frame. Time missed prior to mid-term, that is not made up, will be made up during the break (spring break or fall break). Time missed after mid-term must be made up by the end of the semester. This can be done by volunteering to stay over one to two hours over during the week or on the weekend while in clinic (3rd 5th semester students only on weekends). **If time is not made up by the last class day of the semester an additional 3 demerits will be given. The time must be made up prior to the next semester starting.** *If time is missed during the last week of the semester, the student will make up the time prior to the start of the next semester.* If a prolonged illness or injury (extenuating circumstances such as: auto accident, hospitalization, surgery) occurs which would cause a student to miss clinical practice and be put behind in obtaining clinical objectives and competencies, the make-up time will be at the discretion of the Site Coordinator.
6. Complete all clinical competency objectives on or before the required deadlines set each semester.
7. Complete all non-completed clinic assignments before the start of the next semester.
8. Missing clinic class during the second through the fifth semesters will require missed time to be made up. Two-hour class = two hours make up in clinic. One-hour class (in summer) will require one hour make up in clinic. Compensatory time cannot be used for this time.
9. Complete satisfactory rotations through the specialty areas such as Orthopedics, Trauma PM Rotation, Trauma Weekend Rotations, Computerized Tomography, Portable Radiography, and Surgery. **Scheduled time (comp time) off will not be used** during Trauma PM shift, Trauma Weekend and Room #6 at Prisma Richland Rotations due to limited openings in the schedule for these rotations. During the 5th semester internships scheduled time off will not be allowed in order to maximize your learning opportunities. ***If time is missed in these areas, it will be made up in the specialty area.***
10. Maintain satisfactory clinical evaluations completed by staff technologists and clinical preceptors. If a "6" or below on a junior evaluation, 1st & 2nd semesters only; or "7" or below on a senior evaluation, during the 4th & 5th semesters only, the **student will be scheduled to return** to the area and produce a better score on the 2nd rotation.
11. Handle emergency room patients and produce satisfactory radiographs within the specified time as designed by the program.
12. Always demonstrate compassion and professional conduct while working with patients.

13. Be able to communicate properly with patients verbally and with body language.
14. Be able to communicate and work with fellow students and radiographers verbally and with body language.
15. Exhibit professional conduct and always adhere to dress code while assigned to the clinical area.
16. Be able to cope and function during stressful situations.
17. Retain proficiency. No textbooks or large notebook in clinic during clinic hours. If idle time is present, you should clean and stock your area, practice with the tube and practice positioning with your classmate. You may also study your clinic notes/notecards from your clinic notebook.
18. Not come to clinic during time off unless approved by Site Coordinators. Any infraction of the above rules will result in the necessary disciplinary actions.
19. MTC students can only provide sliding/moving assistance to students from other educational programs. MTC students are not to be directly involved in their patient cases.
20. Two students or more will not be allowed to share a patient who has multiple check off possibilities. We do not want the patient to be uncomfortable with students changing in and out. This adds additional stress to the patient on top of the events happening currently.

OBSERVATION POLICIES FOR PROSPECTIVE STUDENTS

The following regulations are placed on prospective students who are **observing** while under the supervision of a freshman or senior radiology student.

Observing student **WILL NOT** be allowed to:

1. Make exposures of any kind.
2. **Go on any portables.**
3. Read a patient's chart.
4. Watch a patient while the technologist processes images.
5. Converse with the patient.
6. Go to the emergency room. (At PHR & PHB, ER patients come to x-ray dept., LMC x-ray rooms in actual Emergency Department.)
7. Observe special procedures.
8. Observe prepping a patient for a barium enema or VCUG.
9. Lift patients or push wheelchairs or stretchers.
10. Be in any room with an isolation patient.

The regulations are intended to protect the patient's privacy, as well as, to protect the wellbeing of the observing prospective student.

ISOLATION PATIENTS

Statement:

Midlands Technical College radiology students will adhere to the policy and procedures established by Prisma Radiology Departments and Lexington Medical Center Radiology Department. These policies are found in Infection Control Manual: INDEX IC: 2.4, R-8 for the Prisma Alliance Policy. These policies are found in Infection Control Policies # 4.1, 4.2, 4.3 on Isolation Protocols, on Lexi for Lexington Medical Center. For the safety of the patients and the safety of the students, a staff technologist or an instructor **MUST** be present when radiographing a patient on isolation precautions. **STUDENTS MUST PERFORM ALL ISOLATION EXAMS UNDER DIRECT SUPERVISION.** MTC requests students to NOT radiograph a known COVID-19 positive patient until specific training is completed. This is in alignment with the clinical site policies as well. **Once the third semester student receives the “Covid Precautions Training” from Mr. Dantzler, the student will be directly involved with Covid positive patients.** Students must practice standard precautions while radiographing patients when body fluids are present. N95 masks and eye protection will be available. 1 demerit will be issued if caught not using proper PPE for the specific patient condition.

TRAUMA CERVICAL SPINE SERIES PATIENTS/ SPINAL PRECAUTIONS Midlands Technical College radiology students will adhere to the policy and procedure established by the faculty. For the safety of the patient, students will only perform spinal exams on patients under spinal precautions under the **DIRECT Supervision** of a registered technologist or an instructor **MUST** be present when radiographing a patient for a Trauma Cervical Spine Series or any spinal precautions. The students SHALL NOT hold the patient’s head/neck for stabilization of the cervical spine during transfer. This **MUST BE** done by hospital staff (i.e. technologist, nurse or etc.)

DIRECT AND INDIRECT SUPERVISION OF THE RADIOLOGIC TECHNOLOGY STUDENT

PURPOSE: To inform students of responsibilities concerning direct and indirect supervision of the radiologic technology student.

Statement:

According to Section 3B of the STANDARDS OF AN ACCREDITED PROGRAM FOR THE RADIOGRAPHER:

"Until students achieve the program's required competency in a given procedure, all clinical assignments should be carried out under the **direct** supervision of qualified radiographers.

Following are the parameters of direct supervision:

1. The qualified radiographer reviews the request for examination in relation to the student's achievement.
2. The qualified radiographer will perform a "final check" on the patient using the request and the name band.
3. The qualified radiographer evaluates the condition of the patient in relation to the student's achievement and must be present during exam.
4. The qualified radiographer reviews and approves the radiographs." According to JRCERT 2021 Standards- Radiography: Standard 5.4 states, "Students must be **directly supervised** during surgical and mobile radiography procedures regardless of the level of competency."

After the student has met the requirements for competency of required exams, the student may then perform under **indirect** supervision. The definition of **indirect** supervision as stated in the same "Standards" is: "Indirect supervision is defined as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement."

This means that NO student can perform any exam unless a qualified radiographer is in the immediate area (i.e., the radiographer is in the sorting area or adjoining room).

EXAM REPEAT POLICY

Students **shall not repeat radiographs** unless in the presence of a qualified radiographer regardless of their level of competency. Failure to follow this policy will result in demerits being given.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Follows the radiology department protocol when doing exams. 2. Follows MTC protocol at all times. 3. Performs independently under indirect supervision after competency has been met. 4. Have staff radiographer assist with all repeats. 5. All infectious disease cases must be done under direct supervision.
Site Coordinator	1. Perform repeat images with students in clinic. 2. Keeps current list posted of student's competencies. 3. Reviews progress of students with staff. 4. Assigns students to areas on a rotational basis where staff radiographers are available. 5. Instructs students concerning protocol and procedures. 6. Works with chief radiographer and staff in implementing the "Standards" and guidelines as set by the JRCERT.
Chief Radiographer	1. Advises staff radiographers of supervision procedures to follow. 2. Advises staff radiographers to assist with all repeats.
Program Director	1. Reviews and approves all activities.

PERFORMING A REPEAT RADIOGRAPH WITHOUT DIRECT SUPERVISION

As stated in this policy manual and in each clinical course syllabus, students are **never** to perform a repeat radiograph on a patient without the assistance of a credentialed technologist.

This is for the purposes of ALARA, proper patient care, JRCERT mandates and legality issues.

When a student performs a repeat radiograph **without** the direct supervision of a Site Coordinator, Clinical Preceptor, or technologist, the student will receive an automatic **three (3) demerits** for the first incident. Additional incidents will result in the doubling of the demerits. Continued problems in this area, could lead to dismissal from the program.

RADIOGRAPHING THE WRONG PATIENT OR WRONG BODY PART

Whenever the wrong patient or wrong body part is radiographed, the student performing this examination **will receive a minimum of five (5) demerits.** This medical-legal issue is taught during the first semester in “Introduction to Radiologic Technology” - RAD 101. The student is taught several methods to verify the patient and the examination ordered. The student is also taught the importance of properly identifying the correct patient and the correct procedure to be performed. Due to the extensiveness of this training, if this incident still occurs a letter grade drop will re-enforce the importance of this situation. If the student is attempting to radiograph the wrong patient or wrong body part, but is stopped by the radiographer or instructor, **the student will receive a minimum of two (2) demerits.**

MISMARKING OR NOT MARKING RADIOGRAPHIC IMAGES

Whenever the wrong marker is used or no marker is used, the student performing the examination **will receive one (1) demerit per incidence.** This is a medical legal issue taught during the first semester in RAD 101. The demerits will increase to two (2) per incident during the senior year (4th & 5th semesters).

FAILURE TO READ THE OUTPATIENT ORDER

Whenever the outpatient order is not verified to confirm the order of the examination the student is being requested to do, the student will automatically receive **three (3) demerits**. Additional incidents will cause a doubling of the demerits given. This is a medical-legal issue taught in RAD 101.

Revoking a Competency Checkoff/Recheck Exam

A student is deemed competent when the criteria for an exam has been adequately met based upon that student's individual actions and performance. A previously earned competency check off or recheck may be revoked when two (2) or more of the following five (5) criteria are met:

- a. A student makes 2 or more “major” mistakes during positioning/equipment use as noted on the Student Evaluation Criteria.
- b. A student is unable to adequately critique an image for positioning errors.
- c. A student is unable to adequately utilize appropriate technical factors, such as:
 1. Not changing technique between exposures
 2. Improper bucky tray selection/alignment

3. Not using ALARA properly
4. A student is unable to identify required anatomical structures or evaluation criteria previously taught for the exam at the discretion of the instructor based on professional standards.
5. A student neglects to provide proper patient care according to the guidelines taught in class.
6. A student **MUST** call a Site Coordinator prior to checking off with a Site Preceptor or a technologist to verify the correct patient and the correct exam prior to beginning any exam. Failure to do so will result in **two (2) demerits**. Additional incidents will cause a doubling of demerits given.

Revoking a competency checkoff or recheck is a serious action and is not made without thorough contemplation on the part of the site coordinator and program director. When this occurs, the most recent competency (either checkoff or recheck) will be revoked and the student will be **assigned 1 demerit**. The student will then be **required to prove competency again** within that semester or prior to beginning the new semester.

GENDER SENSITIVE EXAMINATIONS

MTC Radiology Program will abide by the following policy on “Gender sensitive examinations” such as: VCUG (Voiding Cystourethrogram), HSG (Hysterosalpingogram), and Defagrams:

We will do the following:

1. Radiographer in charge will ask the patient if they will allow a student to observe or assist in the examination.
2. If the patient were to refuse, at any point during the procedure, the student will be requested to leave the radiographic room until the examination is completed.

DRESS REGULATIONS AND PROFESSIONAL ETHICS

The “Program’s Dress Code and General Appearance” policies are based on all clinical site dress regulations. In order for our students to rotate through a clinical site the student cannot violate the clinical sites dress code. The program’s dress code and general appearance policies meet all clinical sites expectations of how a professional radiographer should present themselves to patients and visitors so as to instill confidence and professionalism.

A professional image must be presented at all times.

1. Navy blue elastic top pants will be worn. They may have an inside drawstring and cargo pockets on the side of legs. A navy-blue Henley style shirt (mandarin collar and 2-3 buttons) in short sleeve or $\frac{3}{4}$ sleeve will be worn. A white short sleeved undershirt may be worn under the uniform top due to the low-cut style of the shirt. **NO long sleeve shirts are to be worn under the uniform top. NO scrub pants (draw strings) or pull over scrub shirt will be permitted.** A white lab jacket with short or long sleeves must be worn over shirt if tattoos are visible. The lab coat **will not be embroidered with the MTC logo.** Slacks and lab coat are to be pressed before going to clinic. Uniforms are to be laundered after each wear.
2. Midlands Technical College patches must be stitched on the right arm sleeve two inches below the shoulder seam of the white top and lab coats. Patches may be purchased at MTC bookstore. Please make sure to purchase “Radiologic Technology Program.”
3. All white leather athletic shoes or all white leather nursing shoes, no mesh inserts, reflectors, sport logos or clogs are to be worn. White crew socks are to be worn to protect the lower legs and ankles from exposure to body fluids.
4. Long hair is allowed but must be pulled into a tight ponytail, braid or bun at the base of the skull, so it is above the top of the shoulders. This is due to health and hygiene purposes for the patient and safety for the student, so the hair does not get caught in the x-ray tube. Hair style must meet the approval of the instructors. Medium hair is a length touching the top of the shoulders. This may need to be pulled back if it falls into the facial area. Short hair is to be styled in a conservative fashion. **ALL HAIR STYLES MUST BE KEPT CLEAN, NEAT AND OF ACCEPTABLE COLOR. ALL HAIR STYLES AND ACCESSORIES MUST MEET WITH THE INSTRUCTOR'S PROFESSIONAL OPINION OF A PROFESSIONAL IMAGE.**
5. Beards and mustaches are permitted; however, they must be kept short, well-trimmed and clean. If a student wishes to grow a beard, they must notify the instructor. Otherwise, the student is expected to be always clean shaven.
6. **NO Smart Watches.** Digital watches are discouraged due to the potential of damage that can possibly occur.
 - i A watch with a **second hand must be worn** while in the clinical area. Watch bands should be silver, gold, black, brown, or white.
 - ii A wedding ring and/or class ring can be worn while in uniform and only one ring per hand.
 - iii A short light weight gold or silver chain may be worn on inside of shirt. No pendants or in line charms are allowed.

iv One pair of matching stud earrings no larger than a dime may be worn.

7. Only nail polish that is clear or neutral (beige, buff, or nude) in color may be worn. Nails should be short, well-groomed and should not be seen over the top of the fingertips when the palm of the hand is facing you at eye level. **No** acrylic nails or tips extensions are allowed.
8. A conservative amount of make-up may be worn with a light shade of lipstick.
9. Hands must be kept clean and should be washed before and after each patient.
10. Breath should be free of any offensive odors. Keep mints in pocket to assist with this.
11. Body should be kept free of any offensive odors. Our personal hygiene is very important as we maintain close contact to our patients during the examinations.
12. **NO** cologne can be used while in clinic (this includes perfumed lotions). This is for the patient's well-being. Please apply this rule to the classroom also.
13. The hospital requires a photo identification badge. The badge must be worn at all times while in the hospital. Badges will be provided by the hospital. You also will order two (2) MTC name tags from the bookstore when ordering uniforms to wear at the orthopedic offices.
14. Radiation monitoring badges will only be worn in the clinical area and can be worn home for your next outside rotation. Do **NOT** leave in car or place on microwave as it will record the radiation.
15. Supervisors in the clinical areas, such as chief technologists, assistant technologists, full-time faculty, adjunct faculty and preceptors etc., will be referred to by last name only (unless otherwise instructed).
16. All hospital policies will be adhered to while in the clinical area. (E.g.: No Scrub outfits from surgery worn outside of hospital at any time.) While in surgery a white lab coat will be worn over surgery scrubs when in the department or at lunch.
17. Radiographic rooms will be kept clean and stocked with adequate linens and supplies.
18. Professional conduct, courtesy, and cooperation is expected at all times when in the hospital setting.
19. Students are not allowed in the clinical area during off duty hours without permission from the instructors and approval from HR for insurance reasons.
20. Students will be expected to report promptly to class and clinical areas according to schedule. This includes make up time and extra scheduled time (volunteer time).
21. While in the affiliate hospitals, the MTC dress code must be adhered to.
22. No gum, candy or food is allowed in the clinic. You are allowed to have mints in your pocket to keep breath free of odors.

23. No visible tattoos, body piercing, gauges, or holes in the ear lobes, other than one pair of earrings are allowed in clinical. Patches or band aids **cannot be** used to cover such on the head, face, and hand areas.

Students must present themselves at all times in a professional manner. Infractions of the above regulations may result in one or more demerits. These demerits will be reflected in the clinical grade for the semester in which the infraction occurred. Dress code infractions will double with additional occurrences. Demerits in this category do not reset at the beginning of the next semester. They carry over into the next semester.

ID Markers

Students must have their film ID markers with them at all times while in the clinical area. Failure to have the markers can result in dismissal from the clinical area for the day or until the student obtains proper markers from the instructors. Students will **order 2 sets** of radiographic markers from Midlands X-ray Co (803-359-1022). MTC will provide Midlands with the student's name, and specific number to be ordered. Specific information will be given to the students. These cost approximately \$30.00 per set.

NAME BADGES

The student must wear a photo ID badge at all times while in the following clinical areas, Lexington Medical Center and Prisma Health locations. This applies to entering and leaving the clinical sites. ID badges will be provided by the hospitals. The student is also to order 1 name tags from the MTC bookstore. The cost is approximately \$19.00 each. These will be worn when at Midlands Orthopedics and MUSC Kershaw.

SECTION II:

CLINICAL EVALUATIONS & GRADING

CLINIC GRADING POLICIES

Clinical grades are determined in six areas (seven in the second fall semester). The area and each determining factor are listed below. Grading is completed by the Site Coordinator and signed off by the Program Director prior to conferencing.

DEMERITS ARE GIVEN AT THE DISCRETION OF THE INSTRUCTORS FOR INEFFICIENCY AND/OR INADEQUACY IN THE CLINICAL AREA AND WILL AFFECT THE CLINIC GRADE.

EVALUATIONS - The required number of evaluations must be turned in by the semester deadline. For each evaluation not turned in, **one (1) point will be taken from the clinical grade** in this category.

The student can score up to ten (10) points on the final grade sheet for evaluations. The student is required to hand in evaluations from the staff for 50% of their grade; the instructors submit two (2) evaluations for the other 50% (mid-term and end of the semester).

To get the grade for the staff evaluation part of the final grade, a point value is assigned to each of the columns of the senior evaluation form. The best being ten (10) and the worst being zero (0). The sum of all acquired points is then divided by the total number of categories checked (14). On the junior evaluation forms the best is 10 and the worst is 2. The sum of all acquired points is then divided by the total number of categories checked (12). All of the staff evaluations are done this way. For averaging, the points are totaled and divided by the total number of evaluations for the final point value of staff evaluations.

Senior Point Value	10	8	6	2	0
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Junior Point Value	10	6	2
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A staff evaluation score of a *6 or less* on the junior evaluation (1st & 2nd semester) or *7 or less* on a senior evaluation (4th & 5th semesters) will require the student to repeat the rotation in which the low score was earned.

The same method and a similar rating scale are used for instructors' evaluations.

60-57 = 10 Excellent	32-29 = 2	Unsatisfactory
56-53 = 9 Above Average	28 & below = 0	Unsatisfactory
52-49 = 8 Average		
48-45 = 7 Average		
44-41 = 6 Satisfactory		
40-37 = 5 Satisfactory		
36-33 = 4 Below Average		

Each category is given a score, the sum of which is totaled and given a point rating from scale (there will be two (2) instructor's evaluations which carry 50% of the total grade for evaluations).

EVALUATIONS (Continued)

Example:

Mid-term

If a student receives a score of 56 on 1st evaluation (Site Coordinator) = 9 points

Final

59 on 2nd evaluation (Site Coordinator) = 10 points

Staff averaging = 8 points

$$9 + 10 = 19$$

$$19 \div 2 = 9.5$$

$$9.5 + 8 = 17.5$$

$$17.5 \div 2 = 8.75 \text{ (9)}$$

9 would be the final grade for evaluation category on the final grade sheet.

CLINICAL ATTENDANCE - (See sick policy and vacation policy) After three (3) absences (fall, spring) and after two (2) absences (summer), one (1) point will be taken from the clinic grade for each absence. (Consecutive days are considered one absence.) *Scheduled comp time or scheduled vacation is not considered as an absence but is excused time. The late policy (as stated in policy handout) states that after two (2) tardies in a semester, two (2) points will be taken from the clinic grade for each offense. Leaving clinic without permission will result in demerits and time must be made up. Returning late from lunch/dinner break will be considered a tardy. All clocking in and out each day and for lunch **MUST** be completed on a computer, **NOT ON A cell phone**. Time from tardies is to be made up at the end of the day.

Time missed from absences is to be made up prior to the day of clinic, to avoid penalty. This applies to RAD 100, RAD 153, RAD 155, RAD 165, RAD 258 and RAD 268.

WRITTEN ASSIGNMENTS - Failure to hand in written assignments (research papers) by the required date will result in a **5-point drop** and could result in suspension. Room objectives must be completed in Trajecsyst within 2 weeks of the rotation. Missing room objectives, patient # sheets, other assignments (i.e. 4 OR papers in fourth semester and patient care chapter) will result in **one (1) demerit for each missing item. These must be completed prior to start of next semester**. All work must be handed in by the beginning of the next semester.

*Documentation for numbers not turned in by the semester deadline date and dated prior to that date will not be accepted.

CLINIC EXAM

A clinic exam will be given at midterm and at the end of second -fourth semesters. This will be based on:

1. Patient care chapters discussed during class at MTC
2. Policy and procedure changes for current semester
3. The clinical environment
4. Pathology topics discussed during Patient Care class
5. Guest lecturers' material

A point grade will be assigned as follows:

Exam Score	Point Value
95-100	10
89-94	9
83-88	8
77-82	7
71-76	6
65-70	5
60-64	4

The midterm test and final examinations will be averaged together to obtain the point value of this 10-point category. This is the sixth category of points. If a student misses a patient care class held at MTC during the second-fourth semesters they will be required to make up the time in clinic. This will be equal time in patient care to equal make up time in clinic. This is a very important class that directly affects your clinical knowledge for the current semester. Compensatory time cannot be used for the time to be made up.

COMPETENCY EXAMS - The following grading scale is in effect for the clinical check off exams:

Failure of 0 - 3 exams will result in 0 demerits

Failure of 4 - 5 exams will result in 1 demerit each

Failure of 6 or more exams will result in 2 demerits each

Competency exams (check offs and rechecks are completed by the Site Coordinators, Clinic Preceptors and Technologists at the clinical site. During the first two semesters Site Coordinators are to do the competencies. This is to ensure the 21 steps are followed in sequence. Check off failures reset at the start of each semester.

OVER 5 FAILED EXAMS WILL RESULT IN 2 DEMERITS EACH PER EXAM.

RECHECK EXAMS-

Each recheck failure is -1 demerit each.

These will reset at the start of the new semester.

AUTOMATIC LETTER GRADE DROP: (This means 5 points will be taken from the clinic grade)

FAILURE TO COMPLETE COMPETENCIES BY THE DESIGNATED TIME WILL RESULT IN 5 POINTS BEING TAKEN FROM THE CLINIC GRADE FOR EACH SECTION NOT COMPLETED. (Checkoffs and re-checks are different sections of the fifth category and are valued at 5 points each.)

ALL COMPETENCIES MUST BE COMPLETED BEFORE THE BEGINNING OF THE NEXT SEMESTER.
AT THE DISCRETION OF THE INSTRUCTOR, AN INCOMPLETE (for extenuating circumstances) CAN BE GIVEN AND THE REQUIRED EXAM OR EXAMS MUST BE COMPLETED BEFORE THE START OF THE NEXT SEMESTER.

Once course requirements are completed, students will be able to attain additional competencies without penalty for failure. (**Free Zone: Go for it!**) Students can also schedule time in other modalities to experience what they do and how radiology all works together.

Circumstances may arise to cause a lack in clinical performance which leads to not meeting program standards. Therefore, *instructors will recommend that the student receive additional clinical practice during college breaks to ensure their progress in the program.*

Excessive failure could result in either clinical probation or suspension. *All required work must be completed prior to the start of the next semester.

ETHICS, DRESS CODE, CLINICAL EDUCATION REQUIREMENTS - Demerits will result in any violation of these areas. Read policy on pages 26-41.

CLINIC EVALUATIONS

Satisfactory clinic evaluations must be maintained in all clinical assignments. Failure to meet clinical requirements will affect the clinical grade and could result in probation or suspension from the program.

Rules:

1. Evaluations should be submitted from each rotation into Trajecsys.
2. Satisfactory evaluations must be maintained.

3. The number of required evaluations will vary each semester and the exact number will be included in each clinical course outline.
4. One **(1) demerit** will be given for **any missing eval**. These must be made up prior to start of next semester.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Requests staff evaluations. 2. Follows up on the return of evaluations. 3. Keeps site coordinator informed of staff that do not complete evaluations. 4. Signs evaluations.
Site Coordinator	1. Completes an evaluation on student they work with. 2. Reviews all evaluations with student. 3. Evaluations in proper documents. 4. Notifies student of unsatisfactory performance. 5. If the score is "6" or below on a junior evaluation, 1st & 2nd semester; or "7" on a senior evaluation, 4th & 5th semester, the rotation will be rescheduled to prove a better score during the second rotation. 6. Recommends to program director a probationary status when Student is not meeting expectations. 7. Recommends dismissal from the program for unsatisfactory performance in the clinical area.
Program Director	1. Reviews all records and has final decision concerning the clinical evaluation policy and procedure.

Midlands Technical College – Lexington Medical Center Radiologic Technology
Junior Evaluations (semesters 1-2)

Name _____ Date _____ Clinical Area _____

Punctuality	Prompt	Sometimes Late/ Wanders	Inadequate	Comments/suggestions
Personality	Congenial	Acceptable	Rude, unfriendly, or Disregards others	
Cooperation	Above Average	Acceptable	Below Average	
Initiative	Above Average	Average	Never Volunteers	
Comprehension	Learns Rapidly	Normal Ability	Inadequate	
Attitude	Enthusiastic	Acceptable	Unacceptable	
Self Confidence	Above Average	Average	Below Average	
Patient Care	Acceptable	Needs minimal supervision	Needs Constant Supervision	
Communication Skills	Above Average	Average	Below Average	
Ability to Follow Instructions	Average	Needs Reassurance	Below Average	
Understands Use of Equipment	Average	Needs Reassurance	Below Average	
Organizational Skills	Above Average	Average	Below Average	

Radiographer Signature

Student Radiographer Signature

mt 9/21/12

Some categories may be slightly different in Trajecsys.

Midlands Technical College

Radiologic Technology Program

Senior Student Evaluation (3rd – 5th Semesters)

Semesters 4 & 5 when a score less than 7 is earned, student will be scheduled to return for additional.

Week to improve evaluation score.

Student Technologist _____ Date: _____ Staff Signature: _____

	Excellent	Above Average	Good	Below Average	Below Average
Cooperation and Attitude	Excellent team worker, positive leader	Consistently works well with others	Average impression	At times arrogant; passive; impudent and/or surly	Causes problems, inclined to be quarrelsome; refuses
Professional Ethics	Excellent relationship w/ patients and staff	Above average impression; takes charge	Does what is expected	Often uses poor professional judgement	Frequent negative comments; attitude: rude
Quality	Superior - always produces quality work	Consistently above average in performance	Average - does what is required	Frequent repeats necessary	Requires constant supervision and must be told to repeat
Quantity of Work	Superior amount of quality work	Very industrious; above average	Satisfactory - meets minimum requirements	Slow - just enough to get by	Has to be prodded, works very slow
Ability to follow instructions	Learns rapidly; implements and retains knowledge	Above average; follow instructions well	Average retention	Hesitant to respond; needs reassurance	Headstrong; ignores instructions
Self Confidence	Superior - self reliant	Above average self esteem	Average self assurance	Below average self-assurance, stands back	Too independent; ignores policy and procedures
Care for patients	Justifies complete confidence; makes wise decisions, takes charge	Usually selfreliant; requires little help	Average, needs some instructions	Afraid to take charge	Inadequate skills
Use and care of equipment	Justifies complete confidence	Very knowledgeable	Adequate	Needs to be told	Careless and wasteful
Ability to read charts & adjust techniques	Excellent abilities	Makes few mistakes	Average; requires little help	Careless errors	Constantly needs assistance; frequent

					repeated mistakes
Positioning skills	Superior skills; rarely needs assistance	Above average; makes few mistakes	Average; normal mistakes	Below average application of knowledge	Makes frequent mistakes
Organization of work	Superior; knows what to do first and does it	Above average; needs little help - learns from mistakes	Average	Below average; needs to be told when to do things	Confused; appears lost
Initiative	Superior-looks for things to do always	Very industrious	Meet minimum requirements	Has to be told or reminded	Lazy
Problem Solving	Justifies Confidence	Knowledgeable	Adequate	Needs to be constantly told	Inadequate
Speed	Superior	Above Average	Average	Below Average	Inadequate

Comments:

Some categories may be slightly different in Trajecsys.

mt 9/21/12

MIDTERM CLINIC CONFERENCE- RADIOLOGIC TECHNOLOGY

STUDENT _____ DATE _____

SEMESTER Summer 2025 Rad 165

ACHIEVEMENT OF COURSE OBJECTIVES

1. Practical assignment evaluations - of 13 staff evals= Site Coordinator eval=

2. Written objectives - of 13 Rm. Obj., of 8 procedure sheets, of 3 pathologies,

Ch 11 & 12 _____, Film presentations _____, PM comparison _____,

3. Attendance -

4. Ethics, dress code -

5. Midterm Exam-

6. Completion of competency objectives -of 15 checkoffs & 7 rechecks

12 from 3rd Sem.

7 recheck

failed checkoffs

Failed Rechecks

Sims UTD?

Strong Points:

Weak Points:

Total Demerits: _____

Comments:

Student Signature _____

Instructor Signature _____

Program Director _____

Midlands Technical College
School of Radiologic Technology
Site Coordinator's Performance Evaluation

Purpose: To take an inventory to pinpoint weaknesses and strengths, and to outline and agree upon a practical improvement program.

Grading System: There are five categories under each heading. Beginning with number five and ending with number zero. They are graded as follows:

Point Scale: 60-57 = 10 Excellent

56-53 = 9 Above Average

52-49 = 8 Average

48-45 = 7 Average

44-41 = 6 Satisfactory

40-37 = 5 Satisfactory

36-33 = 4 Below Average

32-29 = 2 Unsatisfactory

28 & Below = 0 Unsatisfactory

1. **Attendance:** The faithfulness of coming to work daily and contributing to the clinic requirements (scheduled vacation excluded). Reporting to the clinical assignment on time.

- 5. _____ (No days missed – no tardies) Consistently prompt and reliable; volunteers for overtime when needed.
- 4. _____ Very prompt; reliable in attendance. (Normal time 1 or 2 days missed – 1-2 tardies). Is absent only when necessary.
- 3. _____ Usually present on time. (2 or 3 days missed – 2-3 tardies).
- 1. _____ Frequently late or absent (more than 3 or 4 days missed or 3 tardies).
- 0. _____ Consistently absent or late with/without excuse. (More than 4 days missed or 4 tardies).

Comments:

2. **Personal Appearance:** Cleanliness, grooming, neatness and shoes.

- 5. _____ Consistently presents a professional image, always well-groomed and careful about appearance.
- 4. _____ Meets published dress code completely and consistently.
- 3. _____ Meets basic uniform, but lacks items such as name or student badge, markers, etc.
- 1. _____ Meets basic uniform but lacks aesthetics (wrinkled, stained clothing, unwashed hair)
- 0. _____ Personal appearance unsatisfactory, does not meet published dress code. Comments:

Comments:

3. **Cooperation and Attitude:** The ability to work with others, share the workload and to accept instruction or constructive criticism.

- 5. _____ Excellent attitude and spirit of cooperation. Has the potential to be a leader.
- 4. _____ Highly enthusiastic and cooperative; works well with others, positive attitude.
- 3. _____ Satisfactory; does what is expected.
- 1. _____ Sometimes accepts direction in a manner showing displeasure, does not apply suggestions for improvement.
- 0. _____ Inclined to be argumentative, indifferent to comments, has difficulty working with others. Comments:

Comments:

4. **Professionalism and Ethics:** Integrity, loyalty, impression student makes on others, professional judgment.

- 5. _____ Conducts self in an ethical manner at all times, inspiring others, impressive in professional performance.
- 4. _____ Above average impression; uses good judgment in stressful situations.
- 3. _____ Average impression; adheres to professional standards in an acceptable manner.
- 1. _____ Sometimes does not follow professional standards when dealing with others.
- 0. _____ Negative attitude, rude, arrogant to patients, peers and staff technologists, uses poor professional judgment.

Comments:

5. **Initiative:** Ability to originate action in meeting objectives. Willingness to learn new skills.

- 5. _____ Looks for things to do, hard worker, self-directed, always productive.
- 4. _____ Consistently above average, needs minimum supervision, uses time efficiently.
- 3. _____ Does assigned work only, needs to improve initiative.
- 1. _____ Takes some initiative, but occasionally needs to be prodded along.
- 0. _____ Avoids work.

Comments:

6. **Productivity:** Output of satisfactory work.

- 5 _____ Superior work, always productive, consistently does more than is required.
- 4. _____ Consistently completes work in an efficient timely manner.
- 3. _____ Completes work in a reasonable amount of time.
- 1. _____ Needs constant urging to complete exams at an acceptable rate.
- 0. _____ Slow in completing assigned tasks.

Comments:

7. **Quality of work/Application of knowledge:** Positioning progress, technical & equipment manipulation, knowledge of protocol, applies classroom to clinic.

- 5. _____ Superior, consistently competent, exceptionally high quality of performance in all phases of practical applications, uses critical thinking skills to problem solve & adapt to changing situations.
- 4. _____ Is exact, precise, requires little correction, consistently above average. Recognizes mistakes and can correct them.
- 3. _____ Usually accurate, makes only average number of mistakes. Needs help thinking problems through.
- 1. _____ Careless, makes recurrent errors. Unable to adjust to changes, often becomes frustrated in stressful situations.
- 0. _____ Makes frequent errors, does not retain, uses poor judgment in stressful situations. Unable to apply classroom knowledge in clinical practice. Comments:

Comment:

8. **Concern for Patients and Communication Skills:** Consider patient care and communication skills ex: eye contact, patient comfort, addressing patient.

- 5. _____ Always attentive to patient's condition and needs, routinely uses effective verbal, nonverbal and/or written communication skills.
- 4. _____ Usually concerned for patient's welfare, communicates effectively.
- 3. _____ Sometimes indifferent to patient's condition and needs, does not always communicate effectively.
- 1. _____ Is indifferent to patient's condition and needs, needs improvement in verbal, nonverbal and written communication skills.
- 0. _____ Unconcerned for patients, actions may jeopardize patient's welfare. Comments:

Comment:

9. **Organization of Work:** The ability to perform tasks in an orderly manner, follows Task Analysis

- 5. _____ Able to determine logical work order, room always ready, excellent time management skills
- 4. _____ Organized most of the time, follow through with small details
- 3. _____ Organized most of the time, needs improvement in follow-up on small details, paperwork, etc.
- 1. _____ Rarely organized, needs major improvement
- 0. _____ No organizational skills, disoriented and confused. Comments:

Comment:

10. **Radiation Protection:** Efforts made to protect self and others from unnecessary radiation exposure.

- 5. _____ Always conscious of rad. protection, makes every effort to adequately protect self/others
- 4. _____ Uses protective devices, is conscientious about shielding and collimation
- 3. _____ Uses protective devices, sometimes forgets film badge, shielding, or proper collimation
- 1. _____ Needs improvement protecting self and others
- 0. _____ Actions could be detrimental to self and/or others Comments:

Comment:

11. **Ability to Follow Directions:** Ability to listen and apply instruction to clinical performance.

- 5. _____ Excellent ability to listen, understand and apply instruction to clinical performance.
- 4. _____ Follows directions without errors.
- 3. _____ Occasionally makes mistakes in following directions.
- 1. _____ Initially follows directions, but does not retain, headstrong.
- 0. _____ Does not follow directions.

Comments:

12. **Application of Knowledge:** The ability to apply classroom knowledge to clinical applications. Based on midterm and final examination scores in the "Patient Care" portion of class. The testing scales is: 100 – 92% = 5 pts; 91-84% = 4 pts; 83- 75% = 3; 74 -0 = 0 pts).

- 5. _____ Always uses knowledge well, uses critical thinking skills to problem solve and to adapt to changing situations.
- 4. _____ Able to apply knowledge, able to solve problems and adjust to changes.
- 3. _____ Usually able to apply knowledge, needs help in thinking things through.
- 1. _____ Unable to adjust to changes, major improvement needed in applying critical thinking skills to clinical applications.
- 0. _____ Unable to used knowledge in clinical practice, unable to adjust to changes.

Comments:

This is the opinion of the instructors and does not reflect in point value.

Total Performance: Professional opinion of ability and potentiality.

_____ Consistently above average, superior skills in all areas of performance.
_____ Above Average, Excellent
_____ Average, Satisfactory
_____ Below Average, Below Satisfactory
_____ Unsatisfactory, Not Acceptable

Recommendations:

Student's Signature: _____

Site Coordinator's Signature: _____

Date and Semester: _____

Midlands Technical College – Radiologic Technology Program
Applied Radiography RAD 165

STUDENT _____ **DATE** _____
SEMESTER Summer 2027 **GRADE** _____

ACHIEVEMENT OF COURSE OBJECTIVESScore:

1. Practical Assignment Evaluations: (13 staff req./2 instructor) _____ Site
Coordinator Evaluation Score at Midterm:
Instructor evaluation Score at Semester End:
(Midterm + End of Semester divided by 2) =
Average of 13 staff evaluations: Total score/13=
(Average instructor score + average of staff evaluations) =

Written Objectives:

Room Objectives of 13: _____
Pt. Number Sheets of 8:
Pt. Care Chapters 11, 12:
Papers: 3 GI Pathologies, Comparing Trauma to Regular
2 film presentations

3.Attendance:**Absences:****Tardies:**

4. Professionalism: **Ethics:** **Dress Code:**

5.Completion of competency objectives:

Check offs: _____ (15:12req/3rd semester.)
Failures: _____
Rechecks: _____ (7 req.)
Failures: _____

6. Patient Care Test Scores:

Midterm: _____ Final: _____ Ave: _____
(100-95%= 10pts, 94-89=9pts, 88-83=8pts, 82-77=7pts, 76-71=6pts, 70-65=5pts, 64-60=4pts)

Total Score: _____
Merits**Demerits** **Grading**

Each Achievement = 10 points

60 - 56 = A

55 - 51 = B

50 - 46 = C

45 - 0 = F

Comments:

Comp time available to student: _____

Student Signature _____

Clinical Instructor Signature _____

Program Director Signature _____

CLINICAL MERITS

Merits - A numerical documentation of performance which exceeds the expectations of clinical performance to a notable degree. Merits are assigned by the site coordinator and are used only for comp. time. **One merit equals one hour of comp. time.**

A merit cannot be used in any way to increase the clinic grade

One merit coupon will be given for:

1. Unusual case studies. (Limited to two per semester)
2. Perfect attendance. (No days missed and no tardies in a semester.)
3. Written thanks from patients or physicians.
4. Exceeding the required number of competencies by two or more.
5. Other merits may be given at the instructor's discretion.
6. Difficult or rare examinations.

Rules:

One merit coupon equals 1 hour comp time.

Merit coupons can be carried from one semester to the next.

CLINICAL DEMERITS

Demerits - A demerit is a numerical documentation of unsatisfactory performance which will affect a student's clinical grade. Demerits are assigned by the site coordinators. **The number of demerits given will depend on the seriousness of the infraction and the frequency of the infraction.** Demerits will be taken from the clinic grade. Demerits given for poor affective behavior will double. **The assignment of demerits will not start over at the beginning of each semester.** Students are expected to maintain a consistent professional attitude and behavior.

Demerits may be given for:

1. Not properly calling in when absent from clinical practice. (-2 demerits)
2. Late call in when reporting to clinic up to 1 hour after start time (one demerit), after one hour (-2 demerits)
3. All absences after three (3). (Only two absences for summer semester see page 39)
(-1 demerit for each) *Keep in mind this time is to be made up prior to the end of the semester.*
4. Leaving clinic without permission. (-1 demerit) *This time will be made up prior to the end of the semester.*
5. Failure to complete Competency Exams – Rechecks – Papers (-5 demerits each section)
6. Students will not wear jeans, shorts, t-shirts or low cut shirts, flip flops to the clinical areas.
Demerits will begin at 2 and will double with additional incidents.

7. Failure to turn in evaluations and written assignments (room objective within 2 weeks of rotation & Procedure sheets -1 demerit each)
8. Violation of dress code while in uniform. (-1, then double)
9. All tardies after two (2) (-2 demerits for each).
10. Not cleaning radiographic room as assigned. (-1)
11. Not following professional standards. (-1, then double)
12. Not having radiographic markers or hospital ID in clinic area. (-1, then double)
13. Being unprepared for clinical assignments or patient care class. (-1, then double)
14. Using another person's marker. (-1)
15. Inappropriate use of markers. Failure to put correct marker on exam/ or no marker on radiograph. (-1 per incident)
16. Failure to finish entire exam. (Example: release patient; finish paperwork; reschedule patient.) (-1 demerit)
17. Inconsistent performance in clinical setting. (-1, then double)
18. Not having staff check images prior to sending to PACS. (-3 demerits)
19. Not entering appropriate data in the computer. (-1 demerit) (Temporary on hold until further notice)
20. Failure to verify order in chart/outpatient (-3 demerits to start)
21. Radiograph wrong patient or wrong body part (-5 demerits to start)
22. Attempting to radiograph the wrong patient or wrong body part, but stopped (-2 demerits)
23. The student must never attempt to diagnose an exam. The student must **NEVER** discuss the patient's condition, **show an image or give a report** to a patient or his family unless given a direct order to do so by the attending physician or radiologist. (-3 demerit)
24. Failing a recheck examination. (-1 demerit)
25. Parking in non-student areas. Students are assigned specific parking areas at each location. See Page 52.
26. Failing to do a "Final Check" on a patient with a technologist or instructor. (-2 and will double)
27. Failure to question pregnancy on childbearing –age females, ***If site permits*** (12- 60 years). (-1)
28. Failure to clock in and out for clinic day and lunch on the facility computer. (-1).
29. Clocking in to the wrong facility or clocking in/out using a cell phone. (-1)
30. Cell phone in ANY clinical area. (-2, then doubles)
31. Accidentally exposing a technologist or classmate to unnecessary radiation. (-2 and will double)
32. Ignoring patient exams in favor of studying textbooks while in the clinical area. (-1 demerit, and will double with additional incidents) Textbooks can be in lockers and used to study at lunch/dinner break.
33. Hospital computers being used for personal usage. (-2, will double)
34. Dropping the digital plate. (-1) "Failure to care for radiographic equipment."
35. No sitting during clinical rotations at any clinical site.
36. Failure to give technologists a pink slip to record a failed competency or recheck. (-1 demerit)

**** THIS IS ONLY A PARTIAL LIST; OTHERS MAY BE GIVEN AT THE DISCRETION OF INSTRUCTORS.**

Demerits for Affective Behavior: If continuation of the violation of policies and procedures persist, the number of demerits will double, i.e., 1 demerit goes to 2 demerits, next offense goes to 4 demerits,

etc. **The assignment of demerits for “Affective Behavior” DOES NOT start over each semester.**

Students are expected to maintain a consistent professional attitude and behavior.

The following question will be on your ARRT application: “Have you ever been subjected to a sanction as a result of violating an academic honor code? Or suspended or dismissed by any Radiology program?”

YES or NO

Unprofessional behavior such as cheating or unprofessional conduct could put the student in violation of #10 and #19 of the ARRT Code of Ethics. If yes is checked or if the student is not truthful, then either violation could make them ineligible for ARRT certification and SCRQSA license.

THE FOLLOWING DEMERIT LIST WILL BE UTILIZED DURING THE SENIOR YEAR ONLY
(4th & 5th semesters).

SENIORS-TWO DEMERITS FOR EACH OFFENSE.

1. Improperly identifying patients by failing to use the “Final Check” method. Failing to check the patient (inpatient and outpatients) orders for correctness before the patient is placed on the table or the examination is started. (-3 for senior)
2. Not checking the chart for inpatient orders or Doctor’s request for outpatient orders. Make sure the orders are correct before putting the patient on the table or otherwise beginning the exam.
3. Not assisting a patient on and off the table, stretcher and out of the wheelchair.
4. Never leave a patient alone on the x-ray table. Never leave a patient alone on a stretcher without the side rail.
5. Not recording data, patient history, manual technics used, or the number of images on the request.
6. Not providing manual techniques for competencies.
7. Not using sheets on table at all times.
8. Not correctly marking all images.
9. Not doing a left lateral Decubitus Abdomen when the patient is unable to stand for an upright abdomen.
10. Not practicing standard procedure.
11. Not wearing gloves for body fluids.
12. Discussing diagnosis or showing images to a patient or their family.
13. Re-capping needles or discarding needles in improper containers.
14. Not reading labels on contrast, Barium, Glucagon, etc. Always read the label before and after preparing such materials. (Check for correct content and expiration date.)
15. Not checking oxygen levels on patients who are on oxygen while they are in my care.

CLINICAL DISCIPLINARY PROCESS

The clinical disciplinary process will occur as follows:

- First offense will be a verbal warning with a memo written for documentation of discussion. No demerits will be given unless the infraction is of serious or legal nature.
- Second offense will be in writing with the assignment of demerits in the memo. If demerits were given on the first infraction, the demerits will double on the second meeting.
- Third offense will require the student to go Counseling Services if applicable. The demerits assigned will be doubled from the second infraction. This could lead to dismissal from the program due to failure from the demerits.
- Incidents of very serious nature will be dealt with independently with assistance from the Dean, School of Health Care.

PARKING AT CLINICAL SITES

All of MTC's clinical sites have specific areas to park for students. ***This parking policy is designed to ensure that patients and visitors will always be able to find convenient and accessible parking close to their destination. This is an important policy and those students who put their own parking convenience about that of the clinical sites patients and visitors will face significant consequences detailed below.***

1. First Offense: Discussion with 2 demerits, memo for documentation of discussion.
2. Second Offense: Written memo with a doubling of the demerits above.
3. Third Offense: Written memo with a doubling of the above demerits and a required session at the Counseling Services area at MTC.
4. Fourth Offense: Dismissal from program due to lack of following policy and or accumulation of demerits.

If a student is caught parking in a **handicap parking spot** without the appropriate documentation for their self, the severity of the punishment will increase as now a law is being broken (SC Code of Laws 56-3-1970). If you are caught by the clinical site security/police personnel a parking immobilization device will be applied to your tire or your car may be towed. You will be issued a ticket ranging in cost from \$500.00-\$1000.00. You may also be charged with court costs causing the fees to escalate to near \$2000.00.

Parking locations approved for students per site:

Prisma Health Richland: Day hours: Gravel lot next to 1801 Sunset Blvd, Columbia.

Evening/weekend Trauma shifts: North employee parking garage (this is attached to the hospital).

Prisma Health Baptist: Third Floor of garage M, corner of Marion and Hampton.

Lexington Medical Center: Parking Lot "P" and take shuttle in. When scheduled on weekend trauma rotation, park in garage attached to North Tower and use crosswalk into building. Parking Lot P is the

same for Lexington Orthopedics office in Med Park 2. When on Trauma rotation weekends, 2:00-10:00 PM park in Garage #2 attached to the North Tower.

Prisma Health Baptist Parkridge: If entering from Palmetto Health Parkway go past visitor lots on left, go down the hill and to the left into the employee's lot. This lot is also accessible from Parkridge Drive.

Prisma Health Orthopedics offices: In employee parking behind buildings.

Midlands Orthopedics on Blanding Street: Employee lot to right of building and behind the yellow line.

CLINICAL PROBATION AND SUSPENSION

Clinical Probation - When a student demonstrates a consistent lack of performance in the clinical requirements of the program and is performing below average (grade "C") the student is placed on clinical probation status for one or more semesters. A student can also be placed on **clinical probation, or suspension** for a severe infraction of program policy, or the continuation of an unprofessional attitude or behavior that has required previous counseling.

If a student is placed on clinical probation, the student will have a time frame designed to demonstrate the weakness in clinical performance can be overcome. At the time of assigning the probationary status the student will be advised of the problem and be offered suggestions and ways to improve. If the student does not show improvement within the given time frame, the student could be suspended from the program.

Probation can result in the student being removed from the program for failure to meet or abide by published program requirements and policies. The student will be allowed due process.

SECTION III: ATTENDANCE & SCHEDULING

LATE POLICY

As an allied health professional one is expected to be dependable in all job assignments. Punctuality is one of the most important assets to a radiographer in the medical field.

As a student in this program, you know punctuality is strictly enforced to help the graduate better adjust to the work force. Since punctuality is a vital part of dependable performance, records of your tardies are kept to help give future employers accurate information.

If the student has excessive tardies from clinical assignments, this could affect the student's chances of gaining valuable knowledge and also affect the clinic grade. The student is allowed two (2) tardies per semester regardless of the reason. More than two (2) tardies will be considered excessive and demerits will be given. A tardy is considered to be two (2) minutes passed the start time.

Rules:

1. The student must notify an instructor as soon as possible if he/she expects to be late.
2. If late due to unavoidable circumstances on the way to clinical assignments, the student is to report to an instructor immediately upon arrival in the clinic area.
3. All time missed must be made up at the end of same day or at the discretion of the instructor.
4. The student is required to call the Clinical Site Coordinator and the supervisor of the area one (1) hour prior to start time to notify of absence. (E.g. LMC must call by 7:00 AM and PHR/ PHB/PHBP must call by 7:00 AM). Texting or email the instructor is not acceptable!
5. More than two tardies in one semester will result in demerits and points will be taken from the clinic grade as follows:
 - 0 - 2 tardies = no demerits
 - 3 & 4 tardies = 2 each offense
 - 5 or more tardies = 3 demerits each offense and will be considered totally unsatisfactory. In addition to demerits, disciplinary action will be given at the discretion of the instructors.

Procedure:

Responsibility

Action

Student

1. Notifies instructor as soon as possible.
2. Reports to instructors when arrives in clinic area.
3. Makes up time at end of day.

Site Coordinator

1. Documents all tardies.
2. Gives demerits for all tardies over two.
3. Keeps student informed.
4. Counsels' student when necessary.
5. Keeps program director informed of potential problems.

Program Director

1. Reviews all records.
2. Advises instructors.
3. Counsels student when necessary.
4. Makes final decision concerning disciplinary actions.

INCLEMENT WEATHER POLICY

Academic:

1. If classes at Midlands Technical College are canceled due to inclement weather conditions the courses in the hospital will also be canceled. **The MTC general information number is 738-8324. Students are strongly encouraged to sign up for MTC text alerts each year for notification of cancellation/closing of the college.**

Clinical:

1. Due to requirements of the program, any clinical time missed due to inclement weather conditions should be made up at the discretion of the instructors. **Do not come to clinic if you feel the weather conditions are hazardous to your well-being, or if the college is closed.**
2. Students not reporting to clinic because of bad weather are required to call the appropriate persons at the hospital by the hour they are to report. (See Clinical Education Requirements, #2.)
3. If the college is closed for any unscheduled reason and a student is off for vacation, clinic assignments, etc., the time missed will not be taken from approved leave as long as the college does not make up the time; i.e., if a student is assigned to clinic on Sunday and off on Friday and it snows and the college is closed, then the student will be given an additional day of comp time to be used for scheduled time off.
4. Refer to Contingency Plan on page 80.

POLICY ON VOLUNTEERING FOR CLINICAL PRACTICE

Students that wish to volunteer for additional clinical practice must follow specific guidelines:

1. The student must get prior approval from the site coordinator with specific dates and times which match current clinical rotations and level of skill. Students are not allowed in the clinical environment without instructor approval over breaks. Students are not allowed to volunteer in clinic on any of the college's "legal holidays." This only applies to the specific day not the entire college break. Students cannot volunteer during the week of finals.
2. The student must provide the site coordinator a list of objectives the student would like to accomplish during their rotations.
3. A clinical supervisor must be present during the rotations.
4. All program policies are in force while volunteering.
5. Volunteerism time cannot be utilized for makeup time unless extenuating circumstances prevail.
6. Failure to meet the scheduled obligation will result in the following:
 1. The student will be counted absent for failure to meet their obligation and commitment.
 2. The student may forfeit future volunteer opportunities.
 3. The student must notify the clinical rotation site and an site coordinator if there is an emergency and the obligation cannot be fulfilled.

TIME GRANTED FOR INTERVIEWS/ORIENTATION

Up to two (2) days clinical time will be granted for potential interviews and job orientation. The events must be verifiable, with documentation being given to Site Coordinator at the time of request. Time will be given to job shadow at a facility for potential job opportunity. This is to be arranged and approved by the Site Coordinator.

FUNERAL LEAVE

Funeral leave is given for immediate family only. Immediate family is defined as the spouse, great-grandparents, grandparents, parents, legal guardians, brothers, spouse of brothers, sisters, spouse of sisters, children, spouse of children, grandchildren, and great-grandchildren of either the student or the spouse. Three consecutive school days are granted for funeral leave. This time is not to be made up. Any clinical time for funeral leave not considered immediate family will need to be made up per regular attendance policy (page 26). If out of state travel is needed to attend up to 5 days may be given.

LEAVE POLICY

As an allied health professional, you are expected to be dependable in your job and assignments after graduation.

As a student in this program, your personal/sick days are recorded to make you aware of your strengths or weaknesses in this area as well as to provide your future employers a record of your attendance in school.

If a student has excessive absences from clinical assignments, this could affect the chances of getting valuable clinical experience needed to ensure clinical competency and possibly prolong training, as well as affect the student's chances of future employment.

Your attendance record in clinic is a vital part of the overall recommendation from the school to future employers.

Rules:

First year students will receive time off during scheduled college breaks. Refer to the Class and Clinical schedule form in section I of this manual. Students will report to clinical practice 3 days earlier than specified in the college calendar for orientation, conferences and a preview of the clinical course outline for the upcoming semester.

1. The junior student has no sick/personal days. All time missed in clinical education should be made up during college breaks or at the instructor's discretion. The student will make up the time in the same area as missed to allow for the completion of clinical objectives and competencies.
2. Senior students will receive time off during scheduled college breaks. Students will report to clinical practice 3 days earlier than specified in the college calendar for orientation, conferences and a preview of the clinical course outline for the upcoming semester. During the last semester, students will be scheduled for clinical practice during the spring break, if they choose, and be granted the same number of days off during the semester to take as the student wishes.
3. EXCEPT for sick time (call-ins) all personal leave should be scheduled, in writing, at least one week in advance with the site coordinators.
4. Students **cannot take personal leave** during scheduled special rotations such as Trauma PM's, Trauma weekends, Room #6 at Prisma Richland, and affiliates (CT). If sick, the student must make up time in this area.
5. Unscheduled time off will be considered call-ins and treated as sick time.
6. If sick, THE STUDENT must call the site coordinator and clinical supervisor prior to the hour they are to report to clinic (see Clinical Education Policy, Student Manual). When the student has a

fever above 100°F they should stay home. The student should be free of fever for 24 hours prior to returning or on antibiotics for 24 hours prior to returning to clinic. A doctor's excuse is not necessary as "call ins" are not excused.

7. After three (3) call-ins during the semester (2 during the summer semester), **one demerit** will be taken from the clinic grade for each additional absence (consecutive days will be considered as one call-in).
8. If hospitalized or upon doctor's orders, the student is to report progress to site coordinator daily. The student cannot return to clinic until released by physician and can provide a written document of such.
9. If the student is on any prescribed medication that may cause injury to themselves or patients, they should not report to the clinic area.
10. Time missed for prolonged illness or injury must be made up according to the policies of Midlands Technical College.
11. The program does not have a "leave of absence" option. For example, a student cannot miss a semester and then return to complete the program. The rationale for this is the courses are only offered once per year. The student cannot sit out a year and return as too much knowledge is lost and experiences missed in clinic. The student would have to consider withdrawing from the program or restarting the program the next fall semester.

Procedure:

Responsibility

Action

Student

1. Calls site coordinator daily if absent.
2. Strongly encouraged to make up all time missed to keep up with clinical objectives.
3. Keeps site coordinator informed of progress.
4. Notifies site coordinator if taking medication that will alter total performance.
5. Schedules in writing all personal leave at least one week in advance.

Site Coordinator

1. Documents all absences.
2. Keeps students informed of demerits.
3. Counsels and advises students.
4. Reviews missed assignments.
5. Grades students accordingly to demerit documentation.
6. Assigns students to noncritical areas if necessary.
7. Schedules personal leave.

8. Keeps program director informed of student status.

Program Director

1. Reviews all records.

2. Advises site coordinators.

3. Counsels and advises students when necessary.

4. Makes final decisions concerning extended or prolonged absences.

MTC INSTRUCTOR'S ABSENCE FROM STUDENTS AFFILIATE CLINICAL ROTATIONS

Statement:

Occasionally it will become necessary for all MTC radiologic technology site coordinators to be out of the affiliate departments due to MTC in-service or meetings, educational seminars, student conferences, etc. When this occurs, the clinical preceptor is informed in advance and accepts responsibility for the student's competencies and clinical education.

The clinical preceptor will make all schedule changes and will assume the responsibility for educational experiences. The site coordinator of the program will be notified of such changes.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Reports directly to Adjunct faculty (will be used if possible) or clinical preceptor in faculty's absence. 2. Follows all MTC policies as stated in the student manual. 3. Responds to Adjunct faculty/clinical preceptors request as directed. 4. Notifies chief or designee if it becomes necessary to leave assigned areas.
Site Coordinator	1. Advises Adjunct faculty/clinical preceptor in advance of non-routine activities. 2. Advises students of non-routine activities when necessary. 3. Communicates with adjunct/preceptor upon returning to the affiliate. 4. Designates the adjunct/clinical preceptor to do re-checks.
Clinical Supervisor	1. Accepts responsibility of student's clinical education in absence of all instructors. 2. Informs site coordinator of schedule changes and reasons for changes in schedules. 3. Assists or appoints someone to assist the students in areas where the instructors are normally involved (direct supervision, rooms 6 and 7). 4. Assigns student to lunch or supper schedule. 5. Checks in students on the daily schedule
Program Director	1. Reviews and approves all activities.

SECTION IV: HEALTH & SAFETY

HEALTH AND SAFETY POLICY

All students are required to have a pre-admission health examination to ensure the safety and well-being of students, staff and patients. In addition, the hospital's policy regarding infectious diseases will be followed, as well as random drug testing if required. *We will abide by each hospitals or other facilities policies regarding vaccinations.*

If a student becomes ill or injured at the clinical site, he/she must report to the site coordinator or clinical preceptor who may send the student home, to the employee health nurse or the emergency room. The student will be required to fill out an incident report in the event of an injury. In the event that the student is exposed to a communicable disease, the student must notify the site coordinator. All of the program's affiliate department and hospital policies regarding infection control will be observed. It is recommended that the student maintain individual health insurance coverage.

RADIOLOGIC TECHNOLOGY PROGRAM-HEALTH FORMS

The MTC Health Form packet will be distributed at the April class meeting. This document is quite extensive and must be completed in its entirety. When you go to your health care practitioner for your appointment is it important they complete all sections, sign and date.

You are to have a blood test drawn to test, titers, to confirm your immunity to MMR, HepB and Varicella.

Although you may have had the vaccines as a child, it doesn't guarantee you will have protection against these diseases. This is a policy of our hospitals. The results of the titers **MUST** be transferred onto the MTC Health form by the practitioner, signed and dated. MTC cannot accept results from MyChart as it is not signed. **We only accept the MTC forms.** These forms are to be uploaded into View Pointe Screening (VPS) and My Clinical Exchange (MCE).

LIABILITY INSURANCE

All radiology students are required to have liability insurance. This insurance is purchased through Midlands Technical College and is included with the tuition each semester.

A copy of the liability insurance policy is available through the Dean, School of Health Care at Midlands Technical College. Each faculty member has a copy in the office at each hospital. Each student is given an insurance packet to keep with them during clinical rotations.

DRUG TESTING AND PRESCRIBED DRUG USE

If a clinical affiliate requires mandatory or random drug testing, students in the Radiography Program must comply, or they will be suspended from the Program for failure to do so. A student that is on prescribed medication which could hinder their discretion and judgment in dealing with patients **will not be allowed** in the clinical area. If a student is taking any prescribed medication that could cause drowsiness, impairs their judgment or psychomotor skills the student must inform the site coordinator or clinical preceptor prior to starting clinical rotations. If in doubt, the student should question the site coordinator. Failure to do so will result in clinical demerits and could jeopardize the student's continuation in the program.

CRIMINAL BACKGROUND CHECK & DRUG SCREENING

Applicants to the program **are required** to notify the Program Director as soon as possible of any misdemeanors or felonies, and prior to the information session. Also, current RAD students **must notify** the Program Director of arrests while in the program.

All radiology students are required to have a criminal background check completed once they have been fully acceptance to the program. The Program Director will provide the information to the students. This is to be completed prior to the start of the orientation class. Prisma Health requires this background check to not be over one year in age.

All radiology students are required to pass a drug screen test. This will be done prior to the orientation class in August. Failure to pass either of these two tests will result in the student not being able to start the program. This test also must be within one year of starting the program.

NOTE: Students can also be requested to participate in random alcohol and drug screens at the request of any clinical site at any time. Refer to page 117.

INCIDENT REPORTS AND EMERGENCY HOSPITAL INSURANCE

Rules:

1. Accident school coverage is only provided by MTC for the student while attending class or clinical practice.
2. When an incident occurs, notify a site coordinator (or clinical preceptor in charge in the absence of a site coordinator) as soon as possible.
3. An incident report (use MTC incident report packet) is written documentation of the facts concerning injury to patient or student.
4. Fill out a form as soon as possible no matter how trivial the incident may appear to be at the time (within 24 hours).
5. In addition to the incident form, submit a summary of the incident to be kept in the site coordinator's file.
6. Personal injuries and illness requiring medical treatment becomes the financial responsibility of the student.
7. When injured while in clinic rotations, if necessary, the charge person will refer the student to the emergency room for treatment. Insurance forms can be obtained from the Instructors office at PHR, PHB and LMC. The College's insurance policy can change at any time due to the type of coverage and insured company.

Procedure:

Responsibility

Action

Student

1. Notifies site coordinator or clinical preceptor (in the absence of coordinator) as soon as possible after incident (within 24 hours).
2. Goes to department supervisor if incident involves patient.
3. Go to the site coordinator's office at PHR, PHB, and LMC to pick up MTC health insurance form if you don't have your copy.
4. Obtain patient/visitor incident form from Joseph Lewis at PHR, Paul Hensley at PHB, Andre Perkins at LMC and Emily Atkinson at MUSC Kershaw.
5. Take MTC form and incident form to ER physician. (Student fills in all other areas.)
6. Gives fully completed incident form to radiology supervisor.
7. Gives incident summary to instructor, as well as a copy of the incident form.
8. Arranges payment for personal injury or sickness.

Site Coordinator

1. Assists student in filling out forms.
2. Files summary in coordinator's office.
3. Reports documentation to program director.
4. Provide student with Health Insurance form.
5. Advises student to seek medical attention if injured.

- | | |
|-----------------------------------|---|
| Chief Tech
or Designee | 1. Accepts responsibility for student in absence of instructor.
2. Assists student in filling out forms. |
| Program Director | 1. Reviews all documentation. |

FIRE PREVENTION AND PROTECTION POLICY

Rules:

1. Know procedures in the event of fire.
2. Know locations of fire alarms and fire equipment in department.
3. Know how to use fire extinguishers and which to use for various fires.
NOTE: ABC extinguishers are located throughout the department and can be used for any fire which may occur.
4. Never endanger yourself or your patient should a fire exist.
5. Report fire and electrical hazards to supervisor.
6. **Smoking, and vaping, are prohibited** on all hospital campus grounds, and at all orthopedic clinical sites.
7. **Smoking, and vaping, is prohibited** at all **MTC** campuses.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	A. Prevention of Fires

1. Investigates suspicious fire hazards.
2. Keeps passageways, fire exits and corridors clear at all times.
3. Knows location of all firefighting equipment and their use.
4. Reports fire hazards to immediate supervisor.

B. Event of Fire

1. Removes patient from immediate area when fire or smoke exists.
2. Pulls fire alarm.

3. Calls operator reporting location.
4. Calls front desk to announce location of fire.
EXAMPLE: CODE 500 FILE ROOM.
5. Controls fire using proper extinguishers or hose.
6. Closes all doors, thereby confining the fire.
7. Disconnects electrical equipment, i.e., circuit breakers and combustibles, those not engaged in extinguishing the fire.

MIDLANDS TECHNICAL COLLEGE RADIOGRAPHY PROGRAM RADIATION SAFETY

POLICY STATEMENT: All radiography students and faculty are expected to follow established safety procedures for working around sources of radiation. Disregard for radiation safety policies will result in disciplinary action.

RULES AND PROCEDURES:

1. ALWAYS wear a lead apron and thyroid shield when in the room during an x-ray procedure (fluoroscopy). If one's hand must be in the primary beam, lead gloves are available. This also includes when making the exposure on portable imaging.
2. While in the room during an x-ray procedure, wear lead apron and stand as far as possible (at least 10 feet) from the portion of the patient being examined.
3. Students and faculty **SHALL NOT HOLD PATIENTS OR THE IMAGE RECEPTOR** as a method of immobilization or support during an x-ray examination, immobilization devices are available.
4. ALL RADIOLOGY students and faculty will be issued a personal radiation monitor. The monitors are read monthly. If a lead apron is worn, the monitor is to be worn at the collar and outside the lead apron. Radiation monitors must be turned in by the last class day of each month. This is important for the radiation safety officer to be able to obtain a reading in a timely manner. If monitor is not turned in demerits will be issued.

5. Radiation monitor reports will be reviewed as they are received. Each student and faculty are responsible for checking their own results and will initial the report.
6. Although the maximum permissible exposure levels are set by DHEC at 5,000 mrem WB, 15,000 mrem lens of the eye, and 50,000 mrem skin extremity, we will function. At the ALARA limits of 10% of the annual limits (WB 500 mrems, lenses of the eye 1,500 mrems, 5,000 for the skin extremity) per quarter. Exposures exceeding the Alara level will be investigated by the Program Director and the Radiation Safety Officer with a report of the findings completed.
7. We encourage the earlier disclosure of pregnancy in confidence to the Program Director. The Program Director will notify the Radiation Safety Officer about the pregnancy and the need for an additional badge.
8. If it appears the cumulative readings will exceed the recommended maximum permissible exposure to the embryo/fetus (500 mrems), a critical review of the workload will be initiated by the Radiation Safety Officer.

Millie Massey, M. Ed., RT(R)(CV)

Shaun Williamson, MS, RT(N)(CT)(ARRT), CNMT, RSO
Radiation Safety Officer, Environmental Manager,
MTC School of Health Care

Radiation Safety:

To ensure the safety of the student, radiation safety regulations must be followed at all times.

1. Never expose yourself or a fellow student for test exposure or demonstration.
2. Stay behind protective barriers during radiographic exposure.
3. During fluoroscopic procedures maintain as much distance as practical.
 - i Use the protective drape on the image intensifier if practical for the examination.
 - ii Wear a lead apron of at least 0.25 mm of lead or equivalent and preferably 0.50 mm. Wear a thyroid collard. If not actually assisting the radiologist or PA, you should step back from the exam table to reduce their radiation exposure. Every step back greatly diminishes the exposure to the student.
4. Always wear the personal monitoring device at the collar level or upper chest on the outside of the lead apron. These will be changed monthly and the program director and RSO will review the exposure levels listed on reports. These reports will be available for Review by the students within 30 days of receipt of reports. NOTICE: FAILURE TO WEAR THE MONITOR OR RETURN IT IN A TIMELY FASHION WILL RESULT IN DISCIPLINARY ACTION AND/OR GRADE REDUCTION.
5. Students are not to be in the routine room during exposures. If the patient needs to be held during an exam, a parent/family member (over 18 & not pregnant), preferably male, ancillary staff, or technologist may hold.
6. Routine Imaging: Reducing exposure to Staff, Student, and Patient: Is of great concern positioning tools/devices should be utilized to minimize the need for holding the patient. The person holding must be shielded, unless it will cover anatomy of interest on patient. Lead aprons are not designed to completely block the primary beam. Collimation (limiting the beam size) is of great importance. ALARA (as low as reasonably achievable) is always to be utilized. This means the lowest mAs possible to achieve a quality diagnostic image.
7. Lost monitors must be reported immediately to the site coordinator. It is the student's responsibility to order and purchase a replacement badge from the company as soon as possible. This cost is \$60.00.

Classes on radiation safety will be taught during Rad 100 orientation, the August orientation before the student begins clinical rotations and in RAD 101, fall semester, as well as RAD 235 during the spring semester. RAD 235 is a more advanced course which also deals with radiobiology and State and Federal radiation regulations.

The program conforms to "Title B" which involves the State regulations for the use of ionizing radiation. Students and instructors conform to the various affiliates' policies regarding radiation safety and patient shielding. Variances in these policies will be covered in class.

Policies involving pregnant technologists are also covered. Students must never perform a radiographic procedure without a physicians' order. DHEC Regulation 61-64 Part B

STUDENT RADIATION MONITORING

To help insure that the student is working in a safe environment, the amount of radiation received will be monitored. Radiation monitors will be purchased by each student at the start of the program for a two-year period.

It is the responsibility of the student to wear the assigned monitoring device at all times while in the clinical setting. *If the monitoring device is lost the student will be responsible to pay a replacement (\$50.00) fee to the cashier's office in Reed Hall.* The student must use caution as not to lose or damage the badge. The G1 (total body) badge is to be worn on the outside of the apron. The badge will be placed in a holder which must face forward at all times for an accurate reading. At the end of each month, Mr. Dantzler will collect the monitors and read them from his office computer. He will bring the printed report to the next class for review and initialing by the student. The readings from the badges will be recorded in the student's permanent record at MTC and will be reviewed each month by the Radiation Safety Officer and the Program Director. If the radiation level exceeds acceptable limits, the student will be complete the "Overexposure" paperwork and counseled by the Program Director and the RSO. All monthly recordings will be reviewed and must be initialed by the student.

After graduation, the permanent record of radiation dose will be placed with the Program Director. To obtain a copy of these records, the student must request the information to be released.

It is the goal of this program and each graduate to practice safe radiation practices which leads to dosages as low as reasonably achievable. (ALARA)

Midlands Technical College- Radiologic Technology Program

Overexposure Report

Student Name _____ Monitoring Period _____

Clinical Site: _____ Exposure Reading _____

Midlands Technical College has set the ALARA limits for the program at 10% of the annual allowable dose for professional radiation workers. Limits for MTC students are: 500 mrem DDE (Whole Body); 1500 mrem LDE (lens of the eye); 5000 mrem SDE (skin/extremity) per quarter.

1. Where did you store your monitor when not wearing it? _____
2. Were you accidentally exposed to ionizing radiation? _____
3. Has your monitor been misplaced during this monitoring period? _____
4. Have you held a patient during any procedure? _____
5. What clinical site and fluoroscopy room # were you in during this period? _____
6. How many fluoroscopic exams did you participate in during this period? _____
7. Did you perform any defagrams during your rotation? _____
8. Where did you typically stand during fluoroscopy? _____
Did you wear an apron and thyroid collar during these exams? ____Y ____N
9. How many mobile exams did you participate in during this period? _____
10. Where did you typically stand during mobile exposures? _____
Did you wear an apron and thyroid collar during these exams? ____Y ____N
11. How many C-arm exams did you participate in during this period? _____
12. Where did you typically stand during exposures utilizing the C-arm? _____
Did you wear an apron and thyroid collar during these exams? ____Y ____N
13. What other factors may have contributed to the higher than acceptable dose?

_____ Action
plan discussed by the program officials and student to reduce the amount of exposure received by the
student in the future:

Follow up date: _____

Student Signature

Date

Program Director Signature

Date

Radiation Safety Officer Signature

Date

5/24

Student Injury - Exposure Continued

Infectious Diseases

Each clinical facility is expected to practice Standard Precaution procedures in the care of patients with infectious diseases. The student technologist is educated in, and is expected to be knowledgeable in the practice of these precautions and care for these patients.

Clinical grades are awarded according to student performance. Refusal to render care to any patient in a manner which follows the hospital guidelines may result in dismissal from the program.

Procedure for Accidental Exposure to Blood or Body Fluid

All contaminated needle sticks or bloody body fluid splash to mucous membrane or open skin should be treated as if there is a potential risk of pathogen exposure.

1. If the student sustains a puncture wound:
 - A. Withdraw needle or another object immediately
 - B. Immediately wash hands/area of puncture wound using soap and water; follow application of povidone iodine and/or alcohol.
 - C. Do not encourage increased bleeding due to contamination and damage to the capillaries at the puncture site.
 - D. Wipe away any blood.
2. If the student receives a spray or splash of body fluids:
 - A. To eyes, nose or mouth - irrigate with a large amount of water.
 - B. To a break in the skin, follow procedure for puncture wound (#1 above)
3. The student will report the incident immediately to the site coordinator, to the agency clinical supervisor, and to the agency Infection Control Practitioner/Safety Office/Employee Health Services. The student must complete an exposure form according to the policy of the clinical agency.
4. The student will follow the clinical agency's procedures for reporting and follow-up of the exposure. Any required incident report should be completed before leaving the facility.
5. The student will seek a risk assessment and determination of recommended screening, treatment and/or follow up from the Infection Control Practitioner, or clinical supervisor.

STUDENT INJURY - EXPOSURE REPORT

Student Name: _____ Date: _____

Clinical Faculty: _____

Description of Injury - Exposure:

Faculty Responsibilities:

- _____ Assist the student in completion of required reports and evaluation as required by the clinical agency policy.
- _____ Assist the student accessing risk assessment.
- _____ Inform the student of his/her rights, responsibilities and required procedures.
- _____ Inform the student regarding resources for risk assessment, screening, advice, referral for testing, treatment and counseling.
- _____ Assist the student to analyze the occurrence regarding implications, if any, for future practice.

Student Signature

Date

Faculty Signature

Date

Program Director Signature

Date

Upon completion, this form will be placed in the student's program file.

Midlands Technical College
Contingency Plan
Disaster Plan While in Clinical Rotations

Part 1: Contingency Plan

The program has developed a contingency plan to deal with situations that may require emergency schedules and procedures to be followed by all program personnel. In times of a catastrophic event, each faculty and student is part of the organized plan and is responsible for conducting the procedures accordingly.

1. Preparing a Contingency Plan:
 - A. In South Carolina, we are most likely to be affected by hurricanes. In this situation, we have the flexibility to move from the Airport Campus classroom in Health Sciences # 235 to the LMC CMC-Irmo classroom # 104 for academic classes.
 - B. If both classrooms are damaged, we will revert to Zoom sessions or TEAMs meetings to maintain didactic coursework.
 - C. Communication will be maintained by cell phone/text messaging following the calling tree activation for administration, program faculty, adjunct faculty, and preceptors. Additional needs will be discussed at this time. All faculty have computers with internet access at home.
2. Implementing Contingency Plan:
 - A. Assess the current situation with the Chair of Health Sciences on the impact on the program's didactic and clinical components.
 - B. Communicate with faculty via group text on availability of internet service from home for classes.
 - C. Communicate with students via group text on availability of internet services from home for classes.
 - D. Provide this information to the Department Chair of Health Sciences. The Chair will communicate with the Dean of the School of Health Care on the needs of program. A decision will be made at this time to implement the Contingency Plan.
 - E. Program Director will activate plans amongst faculty members and students.
 - D. If surrounding area is damaged making travel hazardous students will not go to clinical rotations. Schedules will be altered accordingly.
 - a. Faculty will front load didactic coursework in preparation to return to clinic when able to safety travel.
 - b. Virtual simulations on family members will be implemented.
 - c. Assignments from Cloverleaf Learning, RAD Boot Camp and/or Corectec will be given.
3. Program Leadership/Administration:
 - A. Communications will be maintained between the program director and the Chair of the Health Sciences department and the JRCERT.
 - B. Maintain regular communications with the faculty and students regarding the status of the catastrophic event.
 - C. Communicate any deviation from the plan to faculty and students as they present.
 - D. Seek input from the faculty and students on the plan and progression thereof.

- E. Program Director will maintain communications with clinical site administration.
On the college's implementation of the plan.
 - F. Adjust the plan as needed as the situation is fluid.
 - G. Provide relevant website information to the faculty and students regarding emergency preparedness and hotlines for updates.
4. Sponsoring Institution/Midlands Technical College:
- H. Determines financial aid requirements if didactic and/or clinical courses are disrupted.
 - I. Determines if course grading will change in response to the catastrophe (i.e., Pass/Fail)
 - J. Provide guidance for temporary alteration(s) to the curricular sequence.
 - K. Provide funding to maintain student support and safety during the catastrophe.
 - L. Provide faculty support for resources not typically utilized by the program.
 - M. Assure that student support services are not interrupted.
 - N. Provide wellness support services for students and faculty.
5. Prepared Recovery from a Contingency Plan:
- O. When the campus is deemed safe to return and the surrounding area allows travel, the students will return to the campus classrooms.
 - P. Program Director will confirm with the hospital administration when the student can return to clinical rotations.

Part 2: The Disaster Plan while in Clinical Rotations:

1. Preparing a Disaster Plan while at Clinic:
 - a. Identify the aspects of an "External Disaster."
 - b. Identify the aspects of an "Internal Disaster."
 - c. Faculty and students' roles during an event
2. Implementing the Disaster Plan
 - a. Identify the type of disaster plan being activated.
 - b. Students report to faculty office area or adjacent room to this location.
 - c. Faculty will report to department administration for assignment.
 - d. Faculty will assign students to their technologist in all diagnostic rooms, portables, emergency room-radiography suite, and surgical suite.
 - e. Faculty will contact Program Director about occurring situation.
 - f. Program Director will notify Chair of the Health Sciences department.
 - g. Chair will notify the Dean of the School of Health Care.
3. Prepare for Recovery Stage:
 - a. Hospital administration will notify faculty of the end of event.
 - b. Faculty will notify Program Director
 - c. Program Director to report time to Chair of Health Sciences.
 - d. Chair of Health Sciences to notify the Dean to the School of Health Care ending time.
 - e. Faculty and students will clean areas.

- f. Faculty and students will find a location to debrief and discuss events while maintaining HIPAA and FERPA rules.

4. Resume normal activity

SECTION V: OTHER CLINICAL POLICIES

LOST AND FOUND POLICY

If a student finds any article, item, etc., in the Radiology Department they are to immediately turn the item over to the technologist in charge and give them a brief summary as to where the item was found. The technologist in charge will then report this to security and turn the found item over to security.

If a student finds an article on hospital property, it should be returned to security. You must report this to your site coordinator if an incident should occur.

If a student finds an article at MTC, turn the item over to the faculty member who will turn it over to the college's "Lost and Found" area located in Student Life.

OVERTIME POLICY

Periodically there will be time when the department is extremely busy with emergency patients or has a tremendous overload of patients. As an allied health professional, you are expected to assist the radiology department staff as needed, even if it is time for you to leave your clinical assignment. All students will leave clinic on Friday afternoons at 3:00 PM (one hour early) to compensate for overtime.

Schedule:

1. Schedule changes are not to be made without permission from site coordinator.
2. Do not write on schedules.
3. No double shifts are allowed or more than ten (10) hours per day/ 40 hours per week.
4. If you wish to switch weekends, days off must be switched also.
5. Any vacation requested after schedule is posted **cannot** be taken during special rotations, PM's or Weekends Trauma, Room #6 at Prisma Richland or CT Scan.
6. Time off needs to be requested on the student's Absence and Leave Form so it can be placed on the calendar. This should be **one week in advance** if possible.

SORTING ROOM POLICIES

Rules:

1. Students are **NOT** allowed to smoke, or vape, on the hospital campus. All hospitals are “Smoke Free Environments”. This also applies to our orthopedic clinical sites. Demerit will be applied per the disciplinary process on page 52.
2. Students may only **EAT** in the sorting room on special occasions.
3. Students are **NOT** permitted to chew gum in the hospital.
4. Students are allowed to drink coffee, cokes, etc., in the designated non-patient areas. These **MUST** be in a twist top leak proof containers at all times (a container that if dropped will not come open.)
5. Students are not allowed to be in clinic on their off time, unless they are being seen as a patient.
6. Students are NOT allowed to use internet for personal use, and should only be using for research purposes, clocking in/out of clinical sites, and verifying information in Trajecsys. Check with Clinical Site Coordinator prior to using.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Adheres to above stated rules of no eating, gum chewing, or smoking or vaping in the sorting room or being out of dress code. 2. May drink coffee or soft drinks in sorting room (All drinks must be outside of the break rooms and must have a twist top leak proof lid. 3. Must not leave cokes, cups, etc., around processors or computers.
Site Coordinator	1. Enforces above stated rules by issuing demerits for failure of student to comply.
Program Director	1. Reviews all rules and makes final decisions pertaining to the sorting room and to any disciplinary action taken.

TELEPHONE PROCEDURES

Rules:

1. The student is prohibited from using the hospital phone for personal reasons.
2. The telephones located in the radiology department are to be used for professional and business use.
3. **No audible cell phones or smart watches are allowed in the clinical area.**
4. You may use your cell phone during your lunch break but must be kept in a locker during regular clinic hours on silent mode or off.
5. If you have a pending emergent situation, inform your Gracyn Johnson, Administrative Specialist at 803-822-3589. She will directly contact your Site Coordinator of situation. The Site Coordinator will contact you directly. If a family member or day care/school needs to contact you for an emergency follow this procedure.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Adheres to above rules to not use hospital phones for personal reasons. 2. Checks periodically with the Site Coordinator for phone messages. 3. Makes phone calls only when assigned area or room is not currently doing a patient.
Site Coordinator	1. Enforces above stated rules and issues demerits for repeated infractions.
Program Director	1. Reviews all rules and makes final decisions pertaining to same and to any disciplinary action.

WORKING FOR PAY AS A LIMITED RADIOGRAPHER

Rules:

1. The student's first responsibility is to the training program. No outside job can interfere with scheduled clinic or classroom hours.
2. The student must apply for a limited radiography-second year student and meet the requirements of this certificate. This can occur after midterm of the second fall semester.
3. When a student is working for pay as a Limited Radiographer, the student is to notify the Clinical Site Coordinators.
4. The student must not have MTC patch or name tag visible while working for pay. The student must not wear their MTC radiation monitor while working for pay.
5. The student cannot check off on exams, re-checks or document patient numbers while working for pay.
6. When working as a Limited Radiographer, the student cannot approve another student's images for release. This can only be done by a credentialed radiographer.
7. Limited radiographers are not allowed to do portables, trauma cases, surgery or any contrast studies by themselves under this certification.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Adheres to above rules. 2. Notifies site coordinator when working for pay. 3. Does not perform competency checks while working for pay. 4. Does not count numbers of patients done while working for pay. 5. Cannot check other student's images.
Site Coordinator	1. Enforces above stated rules and issues demerits for infractions.

2. Gives performance review to prospective employer.

Program Director

1. Reviews all rules and makes final decisions pertaining to working for pay and to any disciplinary action taken.

Basic Life Support Training:

When medical personnel are functioning in their official capacities, they have a positive obligation to initiate CPR when indicated. Often, within the routine examinations initiated by the technologist, patients are at risk for cardiac and/or respiratory arrest. Therefore, it is imperative that each student successfully complete an approved Basic Life Support course for Healthcare Providers. This course should include, but is not necessarily limited to:

- cardiovascular disease prevention
- adult, child, and infant one-rescuer CPR
- adult and child two-rescuer CPR
- adult, child and infant foreign body airway obstruction management
- AED training

No student will be allowed to participate in the clinical experience portion of the Radiologic Sciences program without this training. Certification should be current, and copies of cards should be forwarded to the Clinical Coordinator. It is the student's responsibility to maintain current certification status. CPR is good for two years. If the students' card expires during the program, it is the student's responsibility to get recertified as soon as possible to avoid missing time in clinic.

Faculty will review Basic Life Support skills during an exercise in the MTC Simulation Center in the Health Sciences building during the third semester.

Student Malpractice Blanket Liability Insurance Program

Questions and answers on how this policy works:

- Q. What does the policy provide?
- A. Coverage is provided by the insurance company for claims arising out of a real or alleged medical incident when the injury being claimed is the result of an act or omission. Payment of court costs is also provided. Expert legal counsel and claims adjusters are immediately available in all sections of the country to aid and defend the insured without cost.
- Q. What if a claim is presented years after the medical incident occurred?
- A. There is an "Occurrence Form Policy" which means that you will be fully protected at any future date even though your policy may not be in effect at that time, provided that your policy was in effect when the medical incident occurred. This is an important feature due to the extended period of time that can elapse before a claim is made, but only if proper notification of incident was reported at the time of occurrence.
- Q. Are students covered if they are doing part time work?
- A. Yes. Under this program, students are covered for malpractice related to their normal curriculum, studies and assignments 24 hours a day, working in or out of school. They are not covered if they are working for the facility as an employee.
- Q. Who is covered?
- A. This program offers coverage to all students in the radiologic sciences program and to the faculty.
- Q. Many clinical training facilities require evidence of malpractice coverage before students are admitted to the facility. How is this handled?
- A. Certificates of Insurance can be provided to all facilities.
- Q. What are the limits of liability?
- A. The limits of Professional Liability are \$250,000/\$300,000. This plan pays up to \$500,000 for each claim.
- Q. Who pays the premiums?
- A. All premiums are paid by the student through tuition.
- Q. What is the name and address of this policy's company?
- A. S.C. Insurance Reserve Fund
Post Office Box 11066
Columbia, SC 29211

SECTION VI: GENERAL INFORMATION

RADIOLOGIC TECHNOLOGY CURRICULUM

The general education classes and pre-requisite courses need to be completed with a 2.5 GPA. The student would then be permitted to make application for an interview. The new GP would eliminate the need for a waiting list.

Freshman Year

Term 1 (Su)

		LECTURE	LAB	CREDIT
MAT 155	Contemporary Mathematics	3.0	0.0	3.0
ENG 160	Technical Communications	3.0	0.0	3.0
PSY 201	General Psychology	3.0	0.0	3.0
BIO 210	Human Anatomy & Physiology I	3.0	3.0	4.0
AHS 102	Medical Terminology	3.0	0.0	3.0
COL 106	Skills for College Success	<u>1.0</u>	<u>0.0</u>	<u>1.0</u>
				17.0

Term 2 (Fa) **7 credits if pre-requisites are completed**

BIO 211	Anatomy & Physiology II	3.0	3.0	4.0
PHI 115	Contemporary Moral Issues	3.0	0.0	3.0
RAD 101	Introduction to Radiography & Anatomy	1.0	3.0	2.0
RAD 102	Patient Care Procedure	0.0	6.0	2.0
RAD 153	Applied Radiography	<u>0.0</u>	<u>9.0</u>	<u>3.0</u>
				14.0

Term 3 (Spr)

RAD 110	Radiographic Imaging	2.0	3.0	3.0
RAD 130	Radiographic Procedures I	1.0	6.0	3.0
RAD 155	Applied Radiography I	0.0	15.0	5.0
RAD 235	Radiography Seminar	<u>1.0</u>	<u>0.0</u>	<u>1.0</u>
				12.0

Senior Year

Term 4 (Su)

		LECTURE	LAB	CREDIT
RAD 136	Radiographic Procedures II	2.0	3.0	3.0
RAD 165	Applied Radiography II	<u>0.0</u>	<u>15.0</u>	<u>5.0</u>
				8.0

Term 5 (Fa)

RAD 121	Radiographic Physics	3.0	3.0	4.0
RAD 258	Advanced Radiography I	<u>0.0</u>	<u>24.0</u>	<u>8.0</u>
				12.0

Term 6 (Spr)

RAD 220	Selected Imaging Topics	1.0	6.0	3.0
RAD 268	Advanced Radiography II	<u>0.0</u>	<u>24.0</u>	<u>8.0</u>
				11.0

TOTAL CREDITS 74.0

ACADEMIC CLASS POLICIES

Rules:

1. Any radiology course grade less than "75%" can lead to automatic dismissal from the program.
2. If a student fails a general education course required for graduation, he/she will be required to repeat the course at a time that would not conflict with their radiology curriculum schedule.
3. No student will be excused from scheduled classes to take general education courses.
4. During RAD 220, a student can miss one class to obtain a surgical or diagnostic competency needed for graduation.
5. All academic records will be locked in a locked cabinet in the faculty members office for security purposes. The faculty office will be locked at all times. All tests will be kept for 3 years. All final examinations will be kept for 5 years.
6. During the week of final examinations there will be no clinical hours scheduled. Clinic conferences will be completed at MTC in the site coordinator's office by appointment.

Procedure:

<u>Responsibility</u>	<u>Action</u>
Student	1. Maintains radiology course grades of "C" (75%) or better. 2. Makes up failed prerequisite course at a time that will not conflict with radiology curriculum schedule. 3. Must observe scheduled classes (if taking a general education evening course, must trade with fellow classmate or save cuts for those classes scheduled for evening rotations). 4. May appeal to program director if grade is below "C".
Site Coordinator	1. Advises student at mid-term conferences, and when deemed necessary, that grade is below "C" and is unsatisfactory. 2. Enforces above stated rules. 3. Recommends to program director that student be placed on academic probation when grade is a "C". 4. Informs program director at mid-semester of students with below a "C" (75%) average. 5. Secure all academic records in a locked desk or file cabinet within a locked office.

Program Director

1. Reviews all rules and makes decisions pertaining to disciplinary action. Determines the potential for an academic course contract.

ACADEMIC GRADING SCALE

A = 100 - 92

B = 91 - 83

C = 82 - 75

F = 74 or Below

ACADEMIC PROBATION

Academic Probation: If a student makes a 'C' grade in any RAD academic (non-clinical) course, that student will be placed on academic probation. They will be given remediation material relevant to the course(s) with the 'C' grade, along with a corresponding due date for this material. Upon satisfactory completion of this material by the due date, the student will have the Academic Probation status removed. Failure to complete the remediation material in a satisfactory manner by the due date will cause the student to be placed perpetually in the Academic Probation status.

ACADEMIC SUSPENSION

Academic Suspension: If a student makes below 75% grade in any single RAD academic (nonclinical) course, that student will instead be given an Incomplete 'I' for that course and be placed on Academic Suspension. They will be given a contract that states the following three terms: 1. The student will satisfactorily complete a detailed remediation plan of material assigned by the instructor of the course with the 'F' grade by a corresponding due date, 2. After completion of the remediation material, the student will re-take the final exam for this course with a minimum passing grade of 75% or higher, and 3. This opportunity will be given only once, for a single academic RAD course. After signing the contract, satisfactorily completing the remediation by the due date, and passing the re-take of the final, the student's grade will be updated from the Incomplete 'I' to a grade of '75%', and the Academic Suspension status will be removed. Students who are in perpetual Academic Probation status will not be given this opportunity. If a student does not have their Academic Suspension status removed, the grade will revert from the Incomplete 'I' to the original 'F (74%)' grade, and they will be dismissed from the program."

STANDARDS OF PROFESSIONAL PRACTICE POLICY- SCHOOL OF HEALTH CARE

Date Established: January 2025

PURPOSE:

The Standards of Professional Practice Policy is to guide student behavior, establish and define professional standards expected of the health care professional graduate, and to facilitate the students, preceptors, and faculty recognition of student behaviors, appearance, and dispositions that could affect student learning and professional practice. Standards of Professional Practice include expectations of behavior, ethics, codes of conduct, and professionalism ascribed to by the specific health profession (program of study). Dispositions are the values, qualities, and professional ethics that influence one's behaviors toward students, families, patients, colleagues, and communities. Identifying Standards of Professional Practice and dispositions of students, allows faculty to identify students who may need intervention to successfully complete both the pre-professional and professional requirements for their program of study.

DISPOSITIONAL EXPECTATIONS:

1. Demonstrates ethical behavior as defined by the profession. See code of ethics in Student Handbook for program of study.
2. Demonstrates professional behaviors as defined by each program in the School of Health Care (SHC). See SHC Student Handbook and Policy Manual, Student Handbook/Clinical Manual in program of study, and SHC Professionalism Rubric.
3. Adheres to college, class, and clinical policies. Classroom examples include punctuality; adhering to schedules; and observing the classroom structure as outlined in the course syllabi.
 - Clinical examples include adhering to policies of the Student Handbook/Clinical Manual in program of study; adhering to workplace policies of various clinical sites; punctuality; and meeting the expectations of clinical sites.
4. Exhibits appropriate and professional interactions with faculty, staff, preceptors, and peers.
 - Examples include demonstrating the ability to work with diverse individuals; demonstrating courtesy and respect for all; commitment to diversity; unbiased support of others; and willingness to accept constructive feedback from preceptors and faculty of the program of study.
5. Maintains a professional appearance, communication, and mannerisms.
 - Examples include dressing appropriately for the situation and learning environment; exhibiting competence and professionalism in oral, written, social media, and electronic communications; exhibiting fair and equitable treatment of all; maintaining confidentiality of client records, correspondences, and conversations; demonstrating truthfulness as well as honesty; and working collaboratively with peers, faculty, and staff.
6. Exhibits an appropriate level of preparedness in the classroom and clinical settings.

- Examples include communicating with faculty regarding absences; being prepared to contribute to class discussions on the selected topic; being respectful and attentive in class and at clinical sites; fulfilling course and clinical obligations; completing assignments on time; exhibiting critical thinking skills; providing ongoing and competent client/patient care; willingness to approach tasks in an organized and skillful manner; demonstrating self-reflection and the ability to make improvements based on preceptor and faculty feedback.
- Demonstrates a collaborative approach with peers, faculty, patients, patient's parents/guardians, clinical preceptors, and administration when seeking solutions to problems. Demonstrates problem-solving skills in the classroom, among peers, and at clinical sites.
- Examples include: asking questions when unsure about content material or ongoing client/patient care; sharing thoughts and ideas to better problem solve; and interacting positively with others to create a team-driven, client/patient-centered approach to problem-solving.
- Displays qualities of lifelong learning through engagement in completion of course requirements, continuous professional development, and academic preparedness. Lifelong learning is a term that applies to continuing one's education through college, community-based, or profession-based programs.
- Demonstrates responsibility and accountability as health care professionals, with the ultimate goal being health promotion and prevention of harm to others. The SHC and the programs of study believe that this goal will be attained if each student's daily on-campus or clinical behaviors are guided by the Standards of Professional Practice and the Professionalism Rubric.
- Through interpretation of the Standards of Professional Practice and the Professionalism Rubric, SHC faculty and administration shall observe the professional behaviors of students to ensure compliance with the provisions of this policy directive and rubric. Lack of conformity with the provision of this policy directive and rubric shall be promptly and appropriately addressed by counseling, remediation, and/or disciplinary action.

In summary, the student must conform to the policy of Standards of Professional Practice and the Professionalism Rubric when on campus, in class, lab, clinical settings, simulations, and any external events such as professional conferences or community outreach initiatives. Professionalism also extends to remote or hybrid learning environments, requiring appropriate conduct during virtual classes, labs, and clinical simulations, or representing SHC programs in any environment. Every effort has been made to create a clear/concise/comprehensive rubric and examples. Any behaviors that are not addressed by this rubric will be evaluated by the professional judgment of the SHC faculty and administration and will be subject to their interpretation of the behavior and the expected consequences. This evaluation will uniformly apply the same standards across all settings to ensure fairness and consistency in expectations. Students are also expected to demonstrate cultural competency and sensitivity in all professional interactions, reflecting the diverse nature of healthcare settings.

EXAMPLES OF ACTIONS NECESSITATING COMPLETION OF STANDARDS OF PROFESSIONAL PRACTICE DISPOSITION REPORT AND RUBRIC

(INCLUDING, BUT NOT LIMITED TO):

- Excessive absences or tardiness for class or clinical assignments (see college policy and course syllabus).
- Lack of professional dress or demeanor when interacting with other students, clients/patients, preceptors, or faculty as defined by program of study, SHC, or the college.
- Disruptive behavior toward faculty, staff, preceptors, peers, or guest speakers. This includes disruptive classroom behavior. It also extends to clients/patients and preceptors when in a clinical area.
- Inability to contribute effectively in a group setting.
- Lack of proficiency and/or professionalism in written and/or oral language skills, including electronic forms of communications (i.e., email, text, social media, etc.).
- Lack of professionalism, responsibility, respect for others, confidentiality, and accountability on social media.
- Lack of content/clinical knowledge, including appropriate skill progression, in any content area at the student's current level. Appropriate content knowledge and skill progression are important when working with clients/patients.
- Any action that jeopardizes patient safety or compromises the well-being of a client/patient, or colleague.
- Any action in which a student functions outside the scope of student practice.
- Any action warranting removal from a clinical experience.
- Any action or behavior violating agency policies and procedures.
- Plagiarism, cheating, or falsifying any graded or ungraded activity/course assignment including clinical preparation activities or clinical documentation (see college and program of study's Academic Integrity policy).
- Any act of dishonesty.
- Breach of confidentiality (Any action that compromises patient confidentiality under the Health Insurance Portability and Accountability Act, including confidential information of peers discovered during course activities and/or simulations that are part of the student learning process).
- Harassment of clients, preceptors, peers, faculty, or staff.
- Any action that does not uphold standards of the profession of study or MTC policies.
- Any other disposition issues outlined by the student's major/field of study.

PROCEDURES FOR ASSESSING STANDARDS OF PROFESSIONAL PRACTICE AND DISPOSITIONS:

A student's professional dispositions will be assessed in class, clinical, and community settings utilizing the MTC Student Handbook and Student Code, SHC Student Handbook and Policy Manual, SHC Standards of Professional Practice Policy, Program of Study Handbook, and Clinical Manuals, and the SHC Student Professionalism Rubric. The faculty or preceptor who identifies a deficiency or behavior inconsistent with established Standards of Professional Practice and dispositions will follow these procedures:

1. Upon a student's action which necessitates the completion of a Standards of Professional Practice Disposition Report and the Student Professionalism Rubric, the faculty or preceptor will schedule an informal meeting. The purpose of the meeting with the student is to discuss the area of concern and offer possible solutions and remedies.
 - a. On the date of the meeting, the faculty-specific concerns and potential solutions will be documented in the Standards of Professional Practice Disposition Report.
 - b. The student will be rated on the Student Professionalism Rubric, and this will be attached to the Standards of Professional Practice Disposition Report and placed in the student's academic file.
 - c. A remediation plan will be assigned to the student with dates for completion.
 - d. Any single incident considered a significant or egregious violation of ethical or professional behavior, may result in the student's immediate removal from their program of study. Ethical and professional behaviors are referenced above and are defined by the SHC and each profession in the SHC.
 - e. Both faculty and student will receive a copy of the completed forms.
 - f. If applicable, the faculty will complete an Academic Misconduct Referral to the Director of Student Affairs.
 - g. The Director of Student Affairs office will be notified if behavior poses risks to the student, peers, patients, faculty, administration, or the public.
2. Any unsatisfactory infraction occurring in any setting may be assigned a **violation** that will be documented in the student's academic file. A violation of Professional Practice Standards always includes, but is not limited to the following behaviors:
 - a. Any action that jeopardizes patient safety.
 - b. Any action that compromises patient confidentiality.
 - c. Any action in which a student functions outside the scope of student practice.
 - d. Any action or behavior violating agency policies and procedures.
 - e. Any action that does not uphold standards of the health profession or MTC policies.

3. If the behavior and/or disposition being addressed results in an “unsatisfactory” performance on the Professionalism Rubric, it will result in a **violation** of Standards of Professional Practice. SHC faculty will review the documented circumstance and the remediation plan with the student. The documentation outlined above will then be referred to the Program Director/Department Chair for review. The student will be required to meet with the Program Director/Department Chair to discuss the violation. The severity of a violation may warrant dismissal from the program at any time, at the discretion of the Program Director, Department Chair, and/or clinical facility. Due to affiliation agreements and clinical policies, students removed from the program based on clinical facility decisions will have no further appeal process.
4. There will be no appeals for the assignment of a **violation** of Standards of Professional Practice (first offense) unless the violation results in dismissal from the program of study. The remediation assigned to the student must be completed in the specified time frame for the student to continue in the program of study.
5. Students receiving more than one **violation** will be allowed to appeal this decision using the program of study’s chain of command, including meeting personally with faculty members and the Academic Program Director/Department Chair. This meeting must occur within 5 college business days of the second violation’s reported deficiency or behavior and assignment. If the assignment of a second violation of the Standards of Professional Practice is upheld by the Program Director/Department Chair, the student will be presented to the Dean of the School of Health Care for determination if the second offense warrants removal from the program of study. Typically repeat offenses for behaviors that have already been identified, addressed, and remediated are grounds for program dismissal.
6. A review of violations by the Dean of the School of Health Care is the last step of the Departmental (program of study) appeal procedure. The Dean has the authority to remove a student from their program of study based on violations of Standards of Professional Practice.
7. The student will have the opportunity to explain their position and provide additional relevant information by professional letter of appeal only. The student must submit the written appeal within five business days of the decision to the Program Director/Department Chair in order to be referred to the Dean.
10. The result of meeting with the Dean may be a recommendation that the student is allowed to continue their program, develop a remediation plan (with required completion while in the program of study or before return to the program of study), or a determination to remove the student from the program of study.
11. The Dean will notify the student of the final recommendation and ensure the decision is delivered to the student within 5 college business days of the meeting occurring.
12. Any written agreements or action plans will be included in the notification. Agreements and action plans may be placed in the student’s academic file if applicable.
13. As noted in the Midlands Technical College Academic Complaint Policy, the decision of the Dean is final and may not be appealed.

14. If a student that has received two violations of Standards of Professional Behavior is successful in the appeal process, they will be allowed to remain in the program of study. Upon receiving the third violation, the student will be removed from their program of study. There will be no appeals process for this decision. Ethical and professional behaviors are referenced above and are defined by the SHC and each profession in the SHC.
15. Students may be allowed to stay in progression while appealing. If the infraction is clinical- related, the student will not be allowed to attend clinical during the appeal but will be allowed to attend the didactic portion of the course until there is a final decision. Attendance policies will apply.

SCHOOL OF HEALTH CARE STANDARDS OF PROFESSIONAL PRACTICE VIOLATION REPORT

Student Name: _____ Instructor Name: _____

ID No: _____ Appointment Date & Time: _____

Major: RADIOLOGIC TECHNOLOGY PROGRAM

1. Infraction of the Standards of Professional Practice assigned (check all that apply):

☐ Violation-First Offense

☐ Violation-Second Offense

☐ Recommending Dismissal from Program

☐ Loss of Professionalism Points (indicate number of points lost _____)

2. Policy Violated:

3. Faculty statement on area(s) of concern: (attach copies of documentation)

4. Action plan/Remediation plan (if applicable): _____ Due Date: _____

Faculty Statement:

I have met with the student and discussed the concern(s), policy violations, and Standards of Professional Practice expected.

An action plan has been outlined and discussed with the student.

Signature: _____ Meeting Date: _____

Student Statement (must initial each statement):

I understand that failure to comply with the outlined action plan may result in my not completing my program of study.

— I understand that this infraction has resulted in a Violation in the Standards of Professional Practice.

- I understand that a second Violation in the Standards of Professional Practice will result in removal from my program of study.
- I have received a copy of the applicable policy in question regarding Standards of Professional Practice.

Signature: _____ Meeting Date: _____

Department Head or Designee Statement: (Required only if Violation of Standards of Professional Practice)

I have met with the student and discussed the concern(s), policy violations, and Standards of Professional Practice expected.

Policy(s) Reviewed:

An action plan has been outlined and discussed with the faculty member and the student.

Signature: _____ Meeting Date: _____

Distribute copies of this form and relevant policy(s) to the Student, Student Academic Folder, Department Head, and Faculty Member.

SCHOOL OF HEALTH CARE STANDARDS OF PROFESSIONAL PRACTICE COACHING REPORT

Student Name: _____ Instructor Name: _____

ID No: _____ Appointment Date & Time: _____

☐ Coaching

☐ Coaching with Probation

☐ Loss of Professionalism Points (indicate number of points lost _____)

PROBLEM DESCRIPTION (to be filled in by student)
Student's statement of problem:
Student's suggested solution for the problem:

INSTRUCTOR ASSESSMENT (to be filled in by instructor)
Instructor's comments:
Plan for resolution (include timeline, goals, etc., as appropriate):

By signing this form, the student acknowledges that a meeting with the instructor has occurred, and the above information was discussed. The student signature does not necessarily indicate that the student agrees with the instructor's statements or proposed resolution.

If this occurrence is Coaching with Probation, the student understands that another instance of inappropriate behavior will result in a Violation in the Standards of Professional Practice.

The student is to be provided with a copy of this completed form.

_____	_____	_____	_____
Student Signature	Date	Instructor Signature	Date

ACADEMIC ABSENCES

For clinical attendance see clinical procedure course outline.

Rules:

1. Radiology students will be allowed two times the class meeting times per week (2 x 2=4) for fall and spring semesters. Three absences are allowed for a class meeting once per week during fall and spring semester.
2. Summer semester is less absences due to the shortness of the semester. Classes that meet twice per week are allowed three (3) absences. Summer classes that meet once per week are allowed two (2) absences.
4. Fall and spring semester courses, the 5th absence will result in dismissal from the course (dismissal from radiology courses results in dismissal from the program. During the summer semester the 4th absence will result in dismissal.)
5. A tardy is the arrival to class after the roll has been taken at the start of the class. Two tardies make one absence.
6. When the patient care section is missed, equal time will be made up in the clinical area. This is in effect for the second through the fifth semesters.

Procedure:

Responsibility	Action
Student	1. Does not exceed cuts as specified in course outline. 2. Get approval of the instructor when extenuating circumstances present.
Site Coordinator	1. Advises student in writing when student has achieved 50 % of their absences. 2. Advises student after maximum absence in writing and by completing a withdrawal form online and has the student sign the memo. 3. Gives copy of memo to the student, program director, and places a copy in grade book and the students folder. 4. Informs program director.
Program Director	1. Reviews rules and makes decisions pertaining to academic attendance and disciplinary action is taken.

TEST POLICIES:

Rules:

1. All tests must be made up within three (3) class days after original test was given.
2. Failure to make up a test within the given time results in a zero for a grade.
3. The student is responsible for scheduling the make-up test time with the instructor.
4. The instructor will deduct 5 points from the test score for every class day up to three that the student does not make up a test if a make-up date wasn't established.
5. The student is to come to the next scheduled class prepared to take a make-up test if the instructor so expresses.
6. Cheating of any kind during the exam will not be tolerated. Being caught will lead to disciplinary action from altering of grade to dismissal from the program.
7. Cell phones and all smart watches will be placed on the front table during all tests.
8. A test score below 85% will require remediation. This will be established by the instructor. A due date will be assigned. If remediation work is not submitted by date an *additional 2 points will be lost from the test score*.
9. A student who scores below an 85% on another test in the same class will be required to attend mandatory tutoring with the instructor. If a student does not attend an additional 3 points will be removed from the test score.

ACADEMIC/CLINICAL REPEAT POLICY

Students must attain a grade of "75%" in all Radiology, Math, and Science related courses to successfully complete the program. **Students may not repeat Math, Science, or related courses more than once.** Students are permitted to repeat no more than two different Radiology prerequisite curriculum courses. **Radiologic Technology core classes cannot be repeated as they are only given once per year. Math, Science and Medical Terminology courses have a five year expiration date from the end of the course. If expired, a "refresher" course will be taken.**

DUE PROCESS/ PROGRAM GRIEVANCE

The program respects the students' right to grieve or appeal decisions which may seem unfair. The program follows the College's Grievance Policy found in the MTC Student Handbook (page 41) on the student pages. The handbook for the program is found on the MTC Radiologic Technology webpage. The students will also acknowledge their right to question program conditions through the JRCERT by signing the Grievance and JRCERT Acknowledgement form on page 112.

The purpose of the student academic appeals process is to provide an informal but structured system of academic review for students who have questions, concerns, and/or serious disagreements concerning academic matters. This procedure is to be used only when a student has an academic concern listed below that cannot be resolved to the student's satisfaction at the faculty, program director or the Dean for the School of Healthcare.

***Refer to the Student Handbook online for detailed steps to follow.**

<https://www.midlandstech.edu/student-handbook/appendix-III-student-grievance>

PROFESSIONAL ORGANIZATIONS

All students will join and may attend the South Carolina Society of Radiologic Technologists annual meeting.

Students are encouraged to prepare scientific exhibits, a scientific presentation or the RAD Tech Bowl for competition at the SCSRT annual meeting during the senior year of the program.

Attendance at Professional Meetings:

1. Students attending society and educational functions will be excused from radiology classes but not general education classes.
2. Students that attend society functions will not be required to make up clinical education time. These students will leave clinic one day prior to travel to the meeting location. Those students who do not attend the society functions will attend clinical education practice on Wednesday, Thursday and Friday.
3. Those students attending society functions and do not attend the specific classes as agreed upon will receive extra class assignments.

CLASSROOM ETIQUETTE

Rules:

1. Smoking/vaping is prohibited on all MTC campuses.
2. **Eating in classroom/lab is not allowed.** You can heat up food in the darkroom but need to eat elsewhere. ***There will be no eating during class time or lab times. This includes snacks.***
3. Students may bring drinks to class and lab **ONLY** if the container has a leak proof lid. This lid must not come off when dropped on the floor. (Use twist top)
4. Students are responsible for all information discussed during classes.
5. No cell phones, beepers or pagers allowed. In case of potential emergency situations, request permission from the instructor. Put them into your book bag during class lectures.

Application for Limited Licensure

After successful completion of the second fall semester the student can apply to SCRQSA (South Carolina Radiologic Quality Standards Association) to receive a limited General License to allow work in hospitals or offices while in school. Students cannot perform exams out of the limited licensure scope of practice, (No portables, trauma cases, surgical cases or fluoroscopy cases)

All of SCRQSA's class and clinical competencies will have been met by the end of the second fall semester.

Steps to Follow:

1. Request from the Program Director a Limited Certificate request form at midterm of the second Fall semester, **only if a B or higher in course work (RAD 121- Radiographic Physics) and in clinic is obtained.**
2. Any student with affective behavioral issues/conferences cannot apply.
3. Complete and submit the form and clinical grid to the Program Director for signature upon completion.
4. The student then is to apply and communicate with SCRQSA for additional information if needed.
5. The limited certification will expire at the time of graduation.
6. Once the student receives the ARRT documentation they are to reapply to the SCRQSA for a "Radiologic Technologist-Permanent." Certificate.

If the student fails a course in the fall semester or final spring semester, SCRQSA will be notified immediately to revoke the application process.

No student will be allowed to sit for the SCRQSA Limited Exam unless they are in good standing with the program. This means the student must be passing all coursework and clinical education courses and/or have successfully graduated from the program.

The S.C.R.Q.S.A can be reached at:

South Carolina Radiation Quality Standards Association
P.O. Box 7515
Columbia, SC 29202
1927 Thurmond Mall, Suite 101 - Columbia, SC 29201
Toll-Free (877) 771-6141
(803) 771-6141 (803) 771-8048 Fax
www.scrqsa.org

EARLY RELEASE POLICY

Graduation from the Radiography Program is based on the successful attainment of program terminal competencies, goals and objectives. The average completion time for these competencies, goals and objectives ranges between April 1st and graduation day in May of the second year. The student may petition the Program Director for early release after April 1st of the second year. A student's early release will be based on verification of the completion of all academic and clinical terminal examinations established by the A.R.R.T and the objectives established by the site coordinators. To qualify, a minimum of a B in each clinical education course must be maintained in the previous summer, fall and current spring semester (RAD 165, RAD 258 and RAD 268). The student must meet the requirements for all classroom work during the last semester. Those students who are working on an additional certificate (Surgery or Orthopedics) will not be eligible for early release.

A student may also continue an additional semester if program objectives are not met by graduation date.

Considerations for Early Release:

- Carefully review the SCRQSA Competency Checklist for “hard to obtain procedures” and competency requirements during the fourth semester.
- One can plan and volunteer over the winter break (between fall and spring of senior year) and begin working on patient numbers, competencies, room objective, evaluation and 10 of the 17 required rechecks for the final spring semester. One should consider a rotation in Room #6, Trauma Weekend or Trauma evening rotation if these fall at the end of the schedule for spring semester.
- Due to the number of students, the site clinical coordinators will not be able to adjust a rotation in the schedule to accommodate your request for schedule adjustment.
- Early release can be used to begin a job early for pay or used to prepare for the ARRT registry examination.

STEPS TO APPLY FOR EARLY RELEASE

1. Request early release application from Program Director after April 1st of the last semester.
2. Have Site Coordinator complete the MTC request and the SCRQSA Competency checklist. The Clinical Coordinator is given the form to sign.
3. Bring the completed form and SCRQSA Competency checklist to the Program Director.
4. Early release will start, if approved, after April 15 (on April 16th)

REQUIRED COUNSELING NOTIFICATION POLICY

Affective behaviors are extremely important in the educational process and employment of radiographers. Due to the medical professions' emphasis on customer service excellence and teamwork affective behaviors such as professionalism, attitudes, the proper use of discretion, and judgment, etc. are extremely important.

It is the purpose of this program to graduate competent and caring radiographers who exhibit the necessary affective behaviors as deemed important by the ASRT's Scope of Practice for the Radiographer as well as the ARRT's Code of Ethics for the Radiographer.

The Radiography faculty will assist the student in forming the necessary behaviors. If after two counseling sessions with Radiography faculty the negative affective behavior has not changed the student must make an appointment with the College's Counseling Services office or additional help in order to continue. If after the referral the behavior or related problems continue, the student's continuation in the program is in jeopardy due to an accumulation of demerits. Career counseling would then be offered.

Counseling Services

As a partner in the mission of the college, the Counseling Services' staff at the College plays a vital role in creating a college environment that maximizes student success and the total development of the individual.

Counseling Services' staff takes a proactive role in working with faculty, staff, administration and students to design and implement programs and services that positively affect identified student goals and outcomes.

Programs and services include personal, academic and career counseling, computerized information delivery systems, and advising students with undeclared majors. In addition, Counseling Services offers support and assistance by arranging appropriate accommodations for students with disabilities.

Please refer to the College's online Student Handbook for specific services and information regarding counseling services available.

Counseling/Advisement Policy Regarding Academics/Behavioral/Clinical

All faculty have open door policies regarding the students' progress in the program. Each student will receive a minimum of two instructor conferences per semester regarding their academic/behavioral and clinical progress.

Advisement for course scheduling will be with the program director at the end of each semester. Course considerations beyond the normal radiography curriculum will be on an individual basis. Career counseling for post-graduate radiography will be provided anytime at the student's request.

Learning Resources Available

- College library
- Program library
- Computer labs at the College
- Self-tutorial computer discs
- Access to program library/labs on weekends and after hours
- RAD Boot Camp
- Corectec Online Review
- ASRT Student Membership SEAL program

Student services are available to all students

- Student Employment Services
- Counseling for career/personal needs
- Financial aid
- Tutoring after hours by instructors
- Additional clinical instruction during break
- Volunteer clinical time
- Minimum of two conferences per semester with site coordinator (midterm and end of semester)

Classroom/Lab/Computer Use After Hours

The program encourages' students to utilize the facilities and equipment after normal school hours. Therefore, students may, request the lab be available to them for additional clinical practice or study time. No exposures are to be made during this time. An instructor must be present for exposures to be made.

PROGRAM ASSESSMENT AND GOVERNANCE

The students' input in the program's governance is extremely valuable. There will be several areas of the programs operation that will be evaluated during the students' educational experience. Suggestions for improving the program through assessment surveys, or in class or personal discussions are welcomed and encouraged.

Students' also have decision making responsibilities by serving as class representatives, holding a position on the program's Advisory Committee as well as through the Radiologic Technology Club and the Student Advisory Board (SAB).

SECTION VII: FORMS TO BE SIGNED

(Print 2 copies of each page so you can keep one in your book for reference.
The other copy will be signed on the first Friday of orientation week. This allows you
to ask questions of clarification.)

RADIOLOGIC TECHNOLOGY

I have read and understand the Midlands Technical College Radiologic Technology Student Handbook and agree to abide by the policies therein.

Signature of Student

Date

**RADIOLOGIC TECHNOLOGY AUTHORIZATION TO
RELEASE REFERENCE INFORMATION**

I hereby authorize the program director and/or instructors in the Radiologic Technology Program of Midlands Technical College to release information concerning my performance while enrolled in the program.

This information should only be released to prospective employers of which I have given the Program Director and/or instructors as references.

This information may be given out by letter or via telephone conversation.

Signature of Student

Date

Midlands Technical College does not discriminate against any student on the basis of pregnancy, parenting or related conditions.

Students seeking accommodations for pregnancy and/or parenting are encouraged to discuss with the instructor or contact the college's Title IX Coordinator, Deborah Walker, PO Box 2408, Columbia SC 29202, or at 803-822-3204, or walkerd@midlandstech.edu.

PREGNANCY POLICY

A student who becomes pregnant at any time during the program may declare the fact to the Program Director as soon as possible, but is not required to do so. Once declared, the Program Director and a Radiation Safety Officer will counsel the student and the student will choose one of two options.

- A. If the student wishes to continue in the program, the student will not be treated any differently than a non-pregnant student. Course objectives, attendance, clinical rotations, etc. will all be adhered to as scheduled. The National Council on Radiation Protection and Measurement recommends radiation dose to the fetus not to exceed 0.5 rem during the gestation period. The radiation dose will be carefully monitored during this time to assure this amount is not exceeded. The student will be provided a second badge referred to as a "fetal" badge. The student will be required to read NRC Reg 8.13 which are "INSTRUCTION CONCERNING PRENATAL RADIATION EXPOSURE."
- B. Should pregnancy occur during the early part of the program, the said student may drop the program at that point and return the following year at approximately the same time to complete the program. If pregnancy occurs during the second year of the student's program, the student's competency status would be evaluated to determine if competency could be met without arbitrarily affecting their clinical objectives and rotations. Information regarding a student's leaving due to pregnancy will be held in utmost confidence.

WITHDRAWAL OF PREGNANCY DECLARATION:

A student may withdraw a declaration of pregnancy by submitting the request in writing, signed, and dated to the program director. The fetal badge will then no longer be provided.

It is both the procedure and practice of this program to offer maximum radiation protection to the student. The program always requires safe radiation practices in accordance with the ALARA concept.

I have read the pregnancy policy and understand its contents.

_____	_____
Student Signature	Date
_____	_____
Program Director Signature	Date
_____	_____
Radiation Safety Officer Signature	Date

MIDLANDS TECHNICAL COLLEGE- RADIOGRAPHY PROGRAM

SUBJECT: PREGNANT RADIOLOGY STUDENT

POLICY STATEMENT: DURING PREGNANCY, IF DECLARED, RADIOLOGY STUDENTS MUST ADHERE TO THE FOLLOWING RULES AND GUIDELINES:

RULES:

1. A student may declare their pregnancy to the Program Director as soon as possible.
2. A Declaration of Pregnancy Statement will then be completed by the student.
3. The Program Director and RSO will review radiation safety devices with the student.
4. The radiation safety officer will be notified by the Program Director. At this time, an additional radiation monitoring badge will be provided to monitor the student's unborn fetus.
5. A student may withdraw her declaration of pregnancy at any time.

PROCEDURE:

RESPONSIBILITY ACTION

Student:

1. May inform her Program Director of Pregnancy.
2. Completes a Declaration of Pregnancy Statement.
3. Will exercise good judgment in protection from radiation exposure by using the devices provided by the radiology department.
4. Will wear additional radiation badge provided by the radiation safety officer.
5. May withdraw her declaration of pregnancy.

Program Director:

1. Will review radiation safety devices with the student.

Radiation Safety Officer:

1. Will provide student with additional radiation badge to monitor unborn fetus.
2. Will answer any questions concerning exposure to radiation.

Student Signature

Date

Radiation Safety Officer

Date

Millie Massey, M. Ed., RT(R)(CV), Program Director

Date

RADIOGRAPHY PROGRAMS
Declaration of Pregnancy Form

NAME: _____

Last

First

Middle

STUDENT IDENTIFICATION NUMBER: _____

DATE OF BIRTH: _____

Month/Day/Year

PROGRAM _____

CONCEPTION DATE: _____

Month/Year

I HAVE BEEN GIVEN A COPY OF U.S. NRC GUIDE 8.13 YES _____ **NO** _____

This is to certify that I am voluntarily notifying Midlands Technical College/Radiography Program of my pregnancy and that I have read and understand the U.S. Nuclear Regulatory Guide 8.13 (Instruction Concerning Prenatal Radiation Exposure). I also understand that the above information is for Radiation Safety use only.

STUDENT'S SIGNATURE

DATE

*South Carolina Department of Health and Environmental Control's Rules and Regulations for radiation control Title A paragraph 3.12.1 requires that "the licensee shall ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)."

A "declared pregnant woman" is defined as a woman who has voluntarily informed her employer or educational program, in writing, of her pregnancy and the estimated date of conception (RHA 3.2.14).

WITHDRAWAL OF DECLARATION:

This is to certify that I am voluntarily notifying Midlands Technical College/Radiography Program of my withdrawal of Declaration of Pregnancy. I understand that I will no longer be provided a fetal badge.

STUDENT'S SIGNATURE

DATE

Program Director Signature

Date

MIDLANDS TECHNICAL COLLEGE

GROUND FOR DISMISSAL

The Grounds for Dismissal are listed below. It should be pointed out that a student can be suspended from the program at any time during their training for violation of any one of the grounds listed either for academic reasons or for disciplinary reasons. Due process would be allowed in applicable situations.

1. Failing grades in radiology and/or college courses.
2. Insubordination.
3. The conviction and distribution of, or possession of illegal drugs or controlled substances.
4. Failure to accomplish clinical assignments and objectives.
5. Unprofessional or unethical conduct.
6. Cheating in related or professional courses and falsification of clinical documents. Please do not discuss your grades or counseling session with any other student or staff.
7. If a clinical site refuses to allow a student on hospital property for violations such as theft or misconduct, the student will not be allowed to continue.
8. Failure to clear the Criminal Background Check and or a Drug Screen test at any time.
9. Violation of the Standards for Professional Practice-School of Healthcare

Please sign this form. This means that you are aware of these policies before entering the program.

Date

Signature of Student

RADIOGRAPHY PROGRAM PROFESSIONAL STANDARDS

A student entering the profession of Radiologic Technology must understand that they are entering a field of medicine that requires certain professional standards that other career choices may not. Professional dress, appearance, and modes of communication must be of certain standards in order to maintain the confidence and care of the patient. Patients under the care of a radiographer present themselves in all ages, cultures and of various ethnic origins; therefore trendy modes of dress and appearance are not allowed.

The program has an established dress code and a code of conduct you must follow throughout the academic year.

Your signing of the “Professional Standards” form indicates that you understand the requirements of the program and that you agree to abide by these standards.

Applicant Signature

Date

College Representative Signature

MIDLANDS TECHNICAL COLLEGE

MIDLANDS TECHNICAL COLLEGE

CONFIDENTIALITY STATEMENT – STUDENT

Students, Clinical Instructors, and all others Requiring Access to Patient/ Employee/Business Information

I understand that information concerning patients, their illnesses or their families is private. I will preserve this right to privacy by not discussing their conditions, treatments, or any other private matters in public settings either in the Hospital or outside of the Hospital.

Any information obtained from the patients' medical record will be used only for the authorized purposes. I will preserve and protect contents of the records and any other confidential information obtained.

Information concerning employees, and employee records, is private and confidential. I understand that this private information shall be distributed only to authorized personnel. Financial information of patients, employees, or the organization shall be distributed only to authorized personnel.

Computer access codes are recognized as electronic signatures to access automated patient and employee records. I understand that due to the confidential nature of the documentation in the medical record my password should not be shared with another person. I hereby agree not to reveal my password, nor will I attempt unauthorized access to the system. If I suspect the security of my password has been compromised, I agree to report this to the Security Administrator immediately.

I understand that any violation of these rules of confidentiality may subject my association with Prisma Alliance to be terminated. I understand that a breach in confidentiality may be in violation of federal and/or state statutes and regulations, and subject to prosecution under the law.

Student's Signature

Date

Printed Name

Student ID #

Program Director- Radiologic Technology

Date

RADIOGRAPHY PROGRAM

TIMECLOCK POLICIES Form

Students must clock in and out through Trajecsyst Online Reporting System on a clinical facility computer, NOT personal cell phones. Failure to do so will result in 1 demerit. If the facility's internet access is down, please contact your clinical instructor as soon as possible to document it. The instructor will investigate the issue and verify the downtime, as this is an extremely rare occurrence. You will then do a time exception on Trajecsyst when access is returned. Also remember, clocking in at the wrong facility is unacceptable and 1 demerit will be assigned. These demerits are subject to doubling.

I agree to abide by the program's Timeclock policies.

Date

Signature of Student

Printed Student Name

MIDLANDS TECHNICAL COLLEGE

CLASS AND CLINICAL SCHEDULING

All radiology classes will follow the College's academic calendar. However, due to the clinical requirements needed for graduation the clinical rotations do not follow the published college calendar. Radiology students come to clinic and college 3 days prior to the start of semester's classes. The purpose of this is to practice with equipment, listen to guest speakers, review syllabi and tour areas of rotation for the upcoming semester.

The radiography program's curriculum is based on six semesters of academic study and clinical rotations to acquire clinical competency. The purpose of clinical rotations through hospitals and offices is to provide students the variety and number of radiographic procedures they need to be evaluated on to be performed before competency and graduation can be obtained.

In order to graduate from the program within the published six semesters a standard number of radiographic procedures must be competently completed by each student as well as other written assignments and the completion of specific clinical objectives.

Due to shorter than normal sixteen week semester as published in the College's catalog, the radiography's clinical schedule cannot follow the normal college schedule. Students will receive specified breaks as noted in the college calendar, however, those students who have not obtained the required number of competencies would be strongly encouraged to schedule designated break days for clinical rotations in order to achieve the number of exams as required. There will be break days that all students receive. Students who are on schedule with their clinical assignments and competencies would not need to be in clinical rotations during certain semesters unless they desired to be. There could be occasions during the program all students will be scheduled for clinical rotations during breaks in order to meet clinical objectives in special rotations or other areas of clinical rotations that are difficult to schedule.

The purpose of clinical scheduling during college breaks is to assist those students that have not met established program clinical requirements during the semester. This additional time provides the clinical time and rotations necessary to meet semester requirements. This would assist the student in graduating as scheduled, and to be able to sit for the National Board Examination with their classmates.

A student entering the radiography program must be willing to devote their time and energies into a medical technical specialty that requires dedication and commitment.

I have read this information about class and clinical scheduling and understand that due to my own progression of clinical competence I may or may not receive all of the college's academic breaks as designated by the College's calendar.

QUESTIONS WILL BE ANSWERED BY THE RADIOGRAPHY FACULTY OR STAFF PRIOR TO SIGNING.

APPLICANT/STUDENT

DATE

Program Director

DATE

All course outlines specifically state the required objectives, goals, and outcomes of each course which will lead to all terminal objectives being met and the Program's mission completed.

RADIOLOGIC TECHNOLOGY TRAVEL FORM

DATE: _____

This is to confirm that (student's name) _____ has permission to participate in any trip necessary to the Radiologic Technology Program. I understand that the trips may involve going out of town for overnight or for several days. I will not hold Midlands Technical College or any faculty thereof responsible for any accidents or bodily injury that may occur to the above named student. If using RAD TECH Club funds we also will be completing a liability release form and travel request.

Printed Name Student

Student Signature

If monies are used from fundraisers to attend the SCSRT Annual Meeting, the SAB Director requires the students to complete additional forms. These forms are MTC "Request for Travel" and "Student Behavior Expectations" forms. Registration, rooming expense and mileage items can be reimbursed from the RAD Tech Club.

HEPATITIS B VACCINE INFORMATION

I. The Disease

Hepatitis B virus, one of at least three Hepatitis viruses, is an important cause of viral Hepatitis. The illness caused by or related to Hepatitis B is serious, resulting in death in about 1% of those infected. Complications of the disease include a variety of liver disorders, including cirrhosis and cancer. Most patients recover completely, but about 6-10% become chronic carriers and can continue to transmit the virus to others. There may be as many as .5-1.0 million carriers in the United States.

II. Transmission and Risks

The disease is transmitted chiefly through contact with infected blood and blood products. Hospital staff; therefore, are at increased risk of acquiring the disease. The risk for Hospital personnel can vary, both among hospitals and within hospitals. Though the risk of acquiring Hepatitis B through the clinical experience is probably lower than in some facilities due to the low incidence of the disease in Idaho, the decision to receive or decline the vaccine deserves your careful consideration.

III. The Vaccine

Vaccines which provide protection from Hepatitis B have been developed by various pharmaceutical companies. Field trials have shown 80-95% efficacy in preventing infection among susceptible persons. The duration of protection and the need for booster doses is not yet known. Adult vaccinations consist of three intramuscular injections of vaccine. The second and third doses are given at one and six months respectively, after the first. Lexington Medical Center requires the three (3) vaccine series for clinical rotations. A titer must show positive for immunity after this series of vaccination.

IV. Waiver Format

- Consistent with guidelines developed by the CDC and the American Hospital Association, certain employees have been identified as being at relatively higher risk of exposure to Hepatitis B. Radiography, at certain institutions, has been designated in this group.
- Perhaps one in fifty employees may have an acquired immunity to Hepatitis B through previous illness or exposure and would not need to vaccine. This can be determined by a laboratory screening test, called a titer.
- The Hepatitis B viral vaccine is available through the Health Departments or personal physicians offices.
- As with any immunization, there are disadvantages and risks. If you wish further advice, please contact your personal physician.
- I have read and fully understand the above:

- () I have already received the Hepatitis B vaccine.
- () I will obtain the Hepatitis B vaccine – 3 shot series
- () I will not obtain the Hepatitis B vaccine

Student Signature

Date

GRIEVANCE AND JRCERT ACKNOWLEDGEMENT FORM

MIDLANDS TECHNICAL COLLEGE
RADIOLOGIC SCIENCES PROGRAM

I have been explained the purpose of accreditation and have been provided the opportunity to review and question “The Standards for an Accredited Program” by the JRCERT.

I also have been informed of the College’s grievance procedure, as well as concerns regarding accreditation and how to convey such concerns.

The Joint Review Committee on Education in Radiologic Technology

20 North Wacker Drive, Suite 2850
Chicago, Illinois 60606-3182 312-704-5300 mail@jrcert.org

Student Signature

Date



RADIOLOGIC SCIENCES
52 Years of Excellence
Through Practice

Millie Massey, M.Ed., RT(R)(CV)
Russ Dantzler, BSRS, RT(R)(CT)
Lori Smith, A.A.S, RT(R)
Dr. Lisa Willson, Ed.D., RT(R)(T)

To: All Students

From: Millie Massey, M. Ed., RT (R)(CV)

Subject: "C" work in Radiology courses

"C" work is below average- refer to Policy and Procedure Manual.

Any student that makes a "75%" or below on any radiology exam or course must demonstrate satisfactory knowledge of that material to their instructors by performing assigned written work, and orally explain missed questions. The procedure is as follows:

1. The instructor will assign each student written assignments for remediation in the area of weakness.
2. The student will turn in the written work to the instructor at the designated time for approval. If approved, the student will orally explain their work and must answer Questions over their missed answers on their final exam. All work must meet the instructor's approval. This work will **NOT** elevate the grade above a "75%".

The purpose of this procedure is to insure a satisfactory working knowledge of radiographic principles before continuing. An equally important aspect is that it should enhance the student's results on the ARRT National Board exam.

The time of the makeup work will be designated by the instructor and will normally be done prior to the beginning of the next semester.

Student Signature

Date

Cc: Dr. Jeffrey McCarty, Ph.D., Dean, School of Health Care

Midlands Technical College Radiologic Sciences Code of Conduct

The following are professional standards by which all students must adhere. The Radiologic Sciences involves professional behavior, honesty and integrity of students and graduates.

An accumulation of demerits which will affect the students' clinical grade which could lead to temporary suspension or dismissal will be assigned for the following actions or behaviors:

1. Falsifying clinical information such as evaluations, competencies, patient exam sheets, etc. (immediate dismissal)
2. Negative attitude toward instructors, staff, patients and fellow classmates- (demerits/conference).
3. Instigating a negative climate among classmates or others (cliques)-(demerits).
4. Sharing test information with others, e.g. Asking what is on the test, using previously submitted reports, cell phones (messaging), etc. (Immediate dismissal- College Policy).
5. Cheating in any form on academic or clinical tests or assignments, i.e. Using previous submitted reports, cell phone (messaging), etc. (Immediate dismissal)
6. Insubordination to a staff member or an instructor. (Immediate dismissal)
7. Plagiarizing assignments by books, magazines or Internet access. (Immediate dismissal)
8. Disruptive behavior in class and/or clinical-remove from area/demerits/dismissal. (College Policy)
9. Failing to meet course (academic/clinical) objectives with a minimum of "C". (Dismissal)
10. Excessive absences in class/clinical
Class = "W" withdrawn from class/program
Clinical= demerits – refer to course outlines
(College Policy)

11. Required counseling will result if attitudinal problems require a third conference with Site Coordinator or with Program Director. Severe demerits will accumulate if problem continues. The attitudinal problems involve all aspects of affective behaviors. Refer to the student policy and procedure manual.
12. Failure to follow established policies and procedures- (demerits)
13. Lack of discretion and judgment – (demerits).
14. Jeopardizing patient care – (demerits).
15. If a staff evaluates you as competent on a particular exam, and you know you did not perform the exam competently according to the program’s requirements, you must notify the site coordinator of the unsuccessful competency- (demerits).
16. Violation of Instructors “Rights of Privacy”. This includes divulging contents from a conference and/or meeting held between and instructor and a student. This is Confidential information to both the student and instructor. (Demerits)

Students in the Radiological Sciences are responsible for their behavior. Any student who has information that another student is violating the “Code of Conduct” or program policies is to report the violation(s) to their instructors or Program Director.

I have read the program’s “Code of Conduct” and understand the seriousness of any violations. I also have had the opportunity to question the code.

Student Signature

Date

Program Director Signature

Date

IN-PROGRAM CONVICTIONS
Radiologic Technology Program Midlands Technical College

If a student obtains a misdemeanor or felony while enrolled at Midlands Technical College's Radiologic Technology Program, they must report it to the Program Director as soon as possible. If it is not reported immediately, dismissal from the program and/or ARRT testing would be withheld.

Printed Name

Signature

Student MTC ID #

Date

Program Director Signature

To: Health Science Program Directors

From: Dr. Jeff McCarty, Dean School of Health Care

Re: Health Sciences Department "Use of Social Media" Policy Statement

Date: August 11, 2026

In response to a request that the School of Health Care develop a "Professionalism in the Use of Social Media" policy statement, I submit the following:

Health Science students are responsible for their actions on-line and may be dismissed from the program should the content posted breach rules of patient privacy/confidentiality or professional behavior.

The concerns that have been expressed by MTC S of HC faculty about postings via social media have centered on: 1) patient privacy; 2) disclosure of protected health information; and 3) defaming colleagues. clinical supervisors/clinical sites. Educating the health sciences student about their legal and ethical responsibilities as novice health care professionals is routinely included as part of the curriculum.

Faculty efforts to educate students on inappropriate or illegal communications about patients/colleagues and clinical sites have historically been limited to apply to "bricks and mortar locales". The exponential growth of social media requires the faculty member to incorporate learning experiences/scenarios to increase the student's awareness that inappropriate communication about patients, colleagues and clinical affiliates extends to these electronic venues.

Program faculty are encouraged to integrate social media guidelines into their program and course documents related to ethics, patient privacy, to HIPAA and to professionalism. Some guidelines and good scenarios can be found in a National Council of State Boards of Nursing White Paper: A Nurse's Guide to the Use of Social Media at <https://www.ncsbn.org/388.htm>.

THIS POLICY APPLIES TO RADIOLOGIC TECHNOLOGY STUDENTS WHILE ENROLLED AT MIDLANDS TECHNICAL COLLEGE.

I AGREE TO ABIDE BY THE ABOVE POLICY.

Printed Name

Signature

MTC Student ID #

Date

Program Director Signature

STUDENT RANDOM ALCOHOL AND DRUG CONSENT TO TEST FORM

I fully understand that my performance as a student in the Radiology Program, both in class and in clinic, could affect classmates and patients. I am subject to testing as required by Midlands Technical College or any clinical site that I am rotating in to conduct a test on urine and/or breath. I will provide whatever is requested of my on-site to test for drug and alcohol use. This can be on a random basis or if my behavior is such that it is questionable. I also authorize the release of information concerning the results of such tests to the Program Director of Radiologic Sciences.

Positive test results will immediately result in dismissal from the program. Because some medications can cause a positive test result, it will be my responsibility to provide proof that the medication causing the positive test result was legally prescribed to me by a physician.

Radiologic Technology students may be required to complete a second background check and drug screen prior to the start of the fourth (4th) semester. The background check will be uploaded into both the VPS and MCE onboarding systems used by MTC and our hospital affiliates.

Student Signature

Date

Printed Name

MTC Student ID #

Program Director signature and date

DIRECT/INDIRECT SUPERVISION Form

Until the student has been deemed competent in a given procedure, all clinical assignments should be carried out under the **direct** supervision of qualified radiographers. This means that a qualified radiographer oversees every aspect of the exam and the student does not perform any portion of the exam unless the radiographer is present in the room. The student must be under **direct** supervision during any surgical or mobile case, regardless of competency level.

After the student has met the requirements for competency of a given procedure, the student may then perform under **indirect** supervision. This means that a qualified radiographer is in the immediate area and is available to assist the student.

This means that NO student can perform any exam unless a qualified radiographer is in The immediate area (i.e., in the sorting area or adjoining room).

The student is **never** to perform a **repeat radiograph** on a patient unless under **direct supervision** of a credentialed technologist, regardless of competency level.

I understand and agree to abide by the above policies and am aware that failure to comply will result in demerits deducted from my clinical grade.

Student Signature

Date

Program Director Signature

Date

ADA Accessible M3

