



**RADIOLOGIC TECHNOLOGY
PROGRAM HANDBOOK**

2023-2024

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INTRODUCTION

CLINICAL EDUCATION PLANNING

The program intends to utilize all of the major affiliates for the Radiologic Technology students' clinical assignments; please refer to the first-year clinical objectives. The students will be assigned and evaluated on the general function of radiology, observe and assist with simple radiographic and fluoroscopic examinations, and assist in all aspects of the radiology department procedures. Every effort will be made by the clinical coordinator to assign students to clinical education centers, which are the least traveling distance from the student's home, at least for one semester. The overall clinical center assignment for the second-year students will differ from the first year. Again, referring to the clinical objectives it is noted that the objectives can be accomplished in those centers with a large patient flow and expanded services.

The amount of time scheduled for each clinical rotation is the minimum. If a student does not meet the objectives stated for each rotation then the student will be rescheduled in the areas needing the additional time. Only when the student has met the objectives to date, will he/she be allowed to observe and assist in the specialty area rotations.

There are a stated number of competency clearances to be completed by the end of each semester (during the last scheduled image acquisition and evaluation critique). Failure to obtain the mandatory number will result in a grade of "F" for clinical education and dismissal from the program. Examinations available for clearances (refer to record of competency clearances document) for each semester the students complete, mirror the Radiologic Technology Positioning laboratory sessions.

Your clinical grade will be determined from a number of sources. Specifically, you will gather points from your clearances, clinical evaluations, image acquisition and evaluation critiques, and the final radiographic positioning examination. You will lose points for inappropriate behaviors, tardiness, and lack of attendance. The above will be discussed later in this guideline document.

There will be counseling sessions for the instructors and the student to share information. If the student disagrees with an unfavorable evaluation then the respective clinical preceptor and the program director will investigate the situation and report the student the status of the evaluation. For any disciplinary action, suspension and dismissal the student may wish to appeal the decisions of the Radiologic Technology faculty. The student is advised to refer to the Kaskaskia College course catalog in particular to the areas: student rights and responsibilities, student conduct and redress of grievances.

The standards and guidelines of an accredited educational program for the radiographer revised 2014 by the Program Review Committee of the Joint Review Committee on Education in Radiologic Technology program are available for all interested persons to review. Please refer to the [JRCERT website](#) for that information.

PROGRAM MISSION STATEMENT

The mission of the Radiologic Technology Program at Kaskaskia College is to provide comprehensive educational opportunities that will enable the graduate to become an entry-level radiographer. The program is designed to develop and instill a sense of obligation in the student to become a contributing member to the profession

PROGRAM GOALS

Goal 1: Demonstrate clinical competence consistent with an entry level radiographer.

Student Learning Outcomes:

Students will apply radiographic positioning skills.

Students will practice radiation protection.

Goal 2: Develop critical thinking and problem solving skills.

Student Learning Outcomes:

Students will demonstrate sound decision making.

Students will appropriately evaluate images.

Goal 3: Demonstrate effective communication skills.

Student Learning Outcomes:

Students will use effective oral communication skills with patients

Students will practice written communication skills

PREFACE

These guidelines have been prepared to assist you in successfully completing the Associate in Applied Science Radiologic Technology Program. Thorough understanding of the curriculum, policies, and standards within the program are essential.

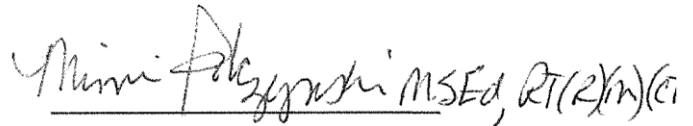
The following guidelines are subject to renewal and revision by the Radiologic Technology faculty and approval of the Dean of Health Sciences.

The certificate program for Computerized Tomography also follow the regulations and guidelines outlined in this Radiologic Technology Handbook as well as the Mammography courses.

SIGNED BY:

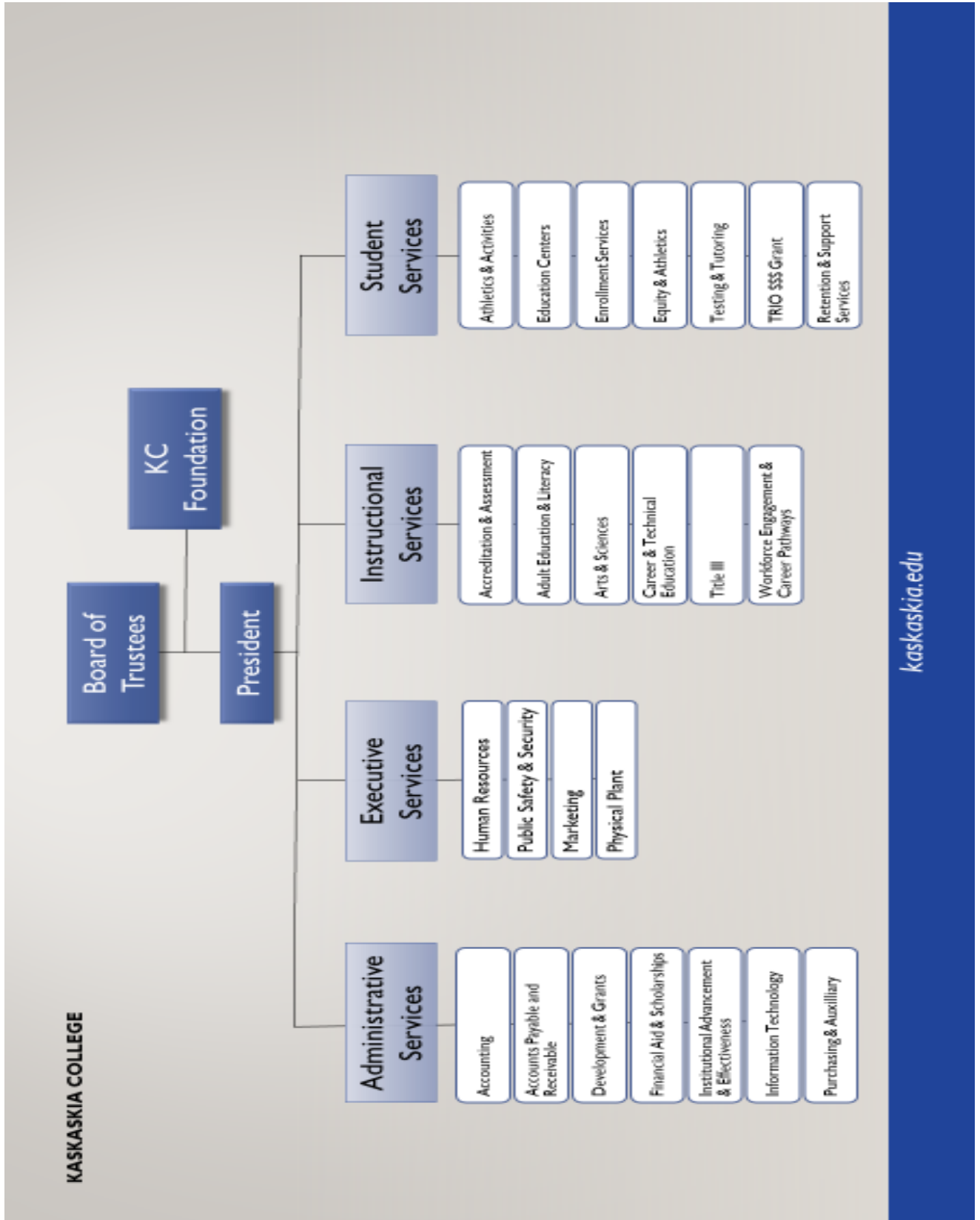


Lisa Ring
Dean of Health Sciences

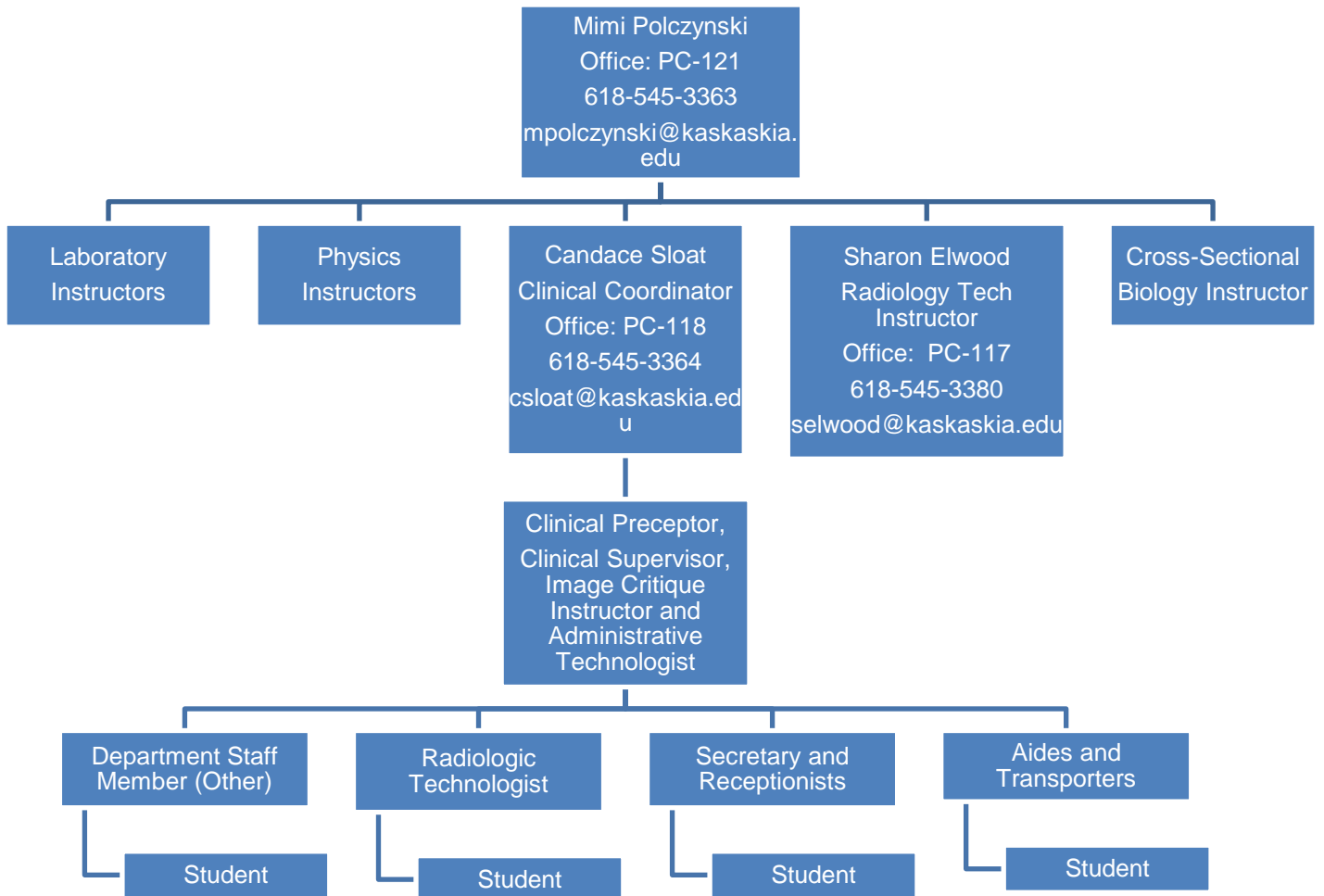


Mimi Polczynski
Program Director
Radiologic Technology

KASKASKIA COLLEGE ORGANIZATIONAL CHART



RADIOLOGIC TECHNOLOGY ORGANIZATION CHART



CERTIFICATE OF ACCREDITATION

Kaskaskia College Radiology Program is accredited by The Joint Review Committee on Education in Radiologic Technology and by the Higher Learning Commission of North Central Association of Colleges and Schools.

The Joint Review Committee on Education in Radiologic Technology
The accrediting agency for programs in radiography and radiation therapy

Presents this

Certificate of Accreditation

To:

Kaskaskia College

for its sponsorship of an accredited radiography program

Michael D. Ward

Michael D. Ward, M.Ed., R.T.(R), FASRT
Chairman



Marilyn Fay

Marilyn Fay, M.A., R.T.(R)
Executive Director

DIRECTORY OF PROFESSIONAL ORGANIZATIONS

THE JOINT REVIEW COMMITTEE ON EDUCATION IN RADIOLOGIC TECHNOLOGY (JRCERT)

The JRCERT was established in 1969 and is the only organization recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. For over 40 years the JRCERT has proven to be the “gold standard” of accreditation for educational programs in the radiologic sciences and currently accredits approximately 750 educational programs. The business of the JRCERT is administered by a full time, permanent staff and the board of directors. The names of the JRCERT board and staff are listed on the [JRCERT website](#). Leslie F. Winter, M.S., R.T.(R) is the chief executive officer at 20 North Wacker Drive, Suite 2850 Chicago Il. 60606-3182. Phone: (312) 704-5300, fax: (312) 704-5304.

Listed on the JRCERT website is the [Standards for an Accredited Education Program](#) in Radiologic Sciences.

THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT)

The ARRT administers a comprehensive written examination to eligible graduates of educational programs in radiography, radiation therapy technology and nuclear medicine technology, which are accredited by a mechanism acceptable to the ARRT. Graduates who pass the ARRT's examination are certified in the appropriate discipline. The American Registry of Radiologic Technologists is not involved in the accreditation process but does require evidence that candidates for certification are graduates of accredited programs. The ARRT maintains a registry of certified technologists in all disciplines of Radiologic Technology. The ARRT requires 24 hours of continuing education in a two-year period to renew certification. ARRT certifications awarded January 1, 2011, and thereafter will be time-limited to 10 years. Prior to the end of the 10-year period, the individual will be required to demonstrate continued qualifications requirements (CQR) in order to continue to hold the certification. For information on the ARRT and other eligibility requirements, contact the agency at 1255 Northland Drive, Saint Paul, Minnesota 55120-1155. (651) 687-0048 OR the [ARRT website](#)

Listed on the ARRT website are the [Standards of Ethics](#).

“Every candidate for certification must, according to ARRT governing documents, "be a person of good moral character and must not have engaged in conduct that is inconsistent with the ARRT Rules of Ethics," and they must "agree to comply with the ARRT Rules and Regulations and the ARRT Standards of Ethics." ARRT investigates all potential violations in order to determine eligibility.

Issues addressed by the Rules of Ethics include convictions, criminal procedures, or military court Martials as described below:

- Felony;
- Misdemeanor;
- Criminal procedures resulting in a plea of guilty or nolo contendere (no contest), a verdict of guilty, withheld or deferred adjudication, suspended or stay of sentence, or pre-trial diversion.

Juvenile convictions processed in juvenile court and minor traffic citations not involving drugs or alcohol do *not* need to be reported.

Additionally, candidates for certification are required to disclose whether they have ever had any license, registration, or certification subjected to discipline by a regulatory authority or certification board (other than ARRT). Primary pathway candidates must indicate any honor code violations that may have occurred while they attended school.

Candidates becoming certified through the primary pathway may complete a pre-application to determine their ethics eligibility prior to enrolling in or during their educational program.”

This [ethics-review-prepplication.pdf \(kc-usercontent.com\)](#) can be found at ARRT website.

THE AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ASRT)

The ASRT is a professional membership organization representing the interests of radiographers, radiation therapy technologists and nuclear medicine technologists according to the purpose and goals stated in its by-laws. The American Society sponsors numerous educational programs for all ranks of technologists with a wide range of professional and continuing education offerings. The ASRT developed and publishes the curriculum guide for educational programs in Radiologic Technology and provides for periodic review of curricula in Radiologic Technology. The ASRT maintains its headquarters at 15000 Central Avenue, SE, Albuquerque, New Mexico 87123-3909. Sal Martino, Ed.D., R.T.(R.), CAE is the chief executive officer at 1500 Central Avenue SE, Albuquerque, New Mexico 87123-3909. Phone: 800-444-2778 or (505) 298-4500. Information can also be viewed on the [ASRT website](#).

The [Practice Standards for Medical Imaging](#) is located on the ASRT website.

ILLINOIS STATE SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ISSRT)

Program faculty members believe in providing opportunities for development of the entire professional person. A student may gain membership in the following professional organizations: [Illinois State Society of Radiologic Technologists](#) (ISSRT) 844-392-3850 or [American Society of Radiologic Technologists](#) (ASRT) 505-298-4500

As a member of a professional organization, the student may participate in the following activities:

- Attendance/participation in local, state and national meetings;
- Preparation/display of professional development exhibits;
- Preparation/presentation of professional development papers;

ILLINOIS EMERGENCY MANAGEMENT AGENCY

Illinois requires state licensure for working radiographers. Upon graduation, students will have to apply for the state license if planning on working in Illinois: [IEMA | Division of Nuclear Safety | Medical Tech Login \(state.il.us\)](#), 2200 South Dirksen Parkway Springfield, IL 62703. Phone 217-782-2700

RADIOLOGIC TECHNOLOGY ADVISORY COUNCIL

I. SPECIFIC OBJECTIVES:

The advisory council's purpose is to evaluate and make recommendations concerning all aspects of the program, including, but not limited to, curriculum and its content, staffing, facilities, equipment, and clinical experiences. Specific objectives are listed for your information:

1. Evaluate program content and objectives.
2. Assist in the establishment of proficiency standards to be met by students.
3. Provide aid in obtaining current instructional materials and equipment.
4. Suggest general abilities necessary for graduates.
5. Advise as to the necessary qualifications of instructors and assist by serving as guest lecturers or part-time instructors.
6. Assist by supplying trade journals and professional readings for student use.
7. Make recommendations concerning equipment and facility needs of the program.
8. Suggest the development of needed new courses to meet program needs.
9. Identify healthy agency resources for utilization in the education and training process.
10. Evaluate on a perpetual basis program content, equipment, and facilities.
11. Interpret employment needs for graduates.
12. Review Program Mission and Goals.
13. Assist in reviewing and implementing assessment plans and results.

II. COMPOSITE OF MEMBERS:

Members of the advisory council are represented by the Administrative Technologist/Clinical Instructor of each clinical site used by the Kaskaskia College Radiology Program, a Radiologist from a local hospital, one lay person, and a sophomore student elected by their classmates.

III. METHODS OF ELECTING CHAIRMAN:

The chairman is selected on an annual basis by a majority vote of the members, and may be re-elected.

IV. TERMS OF MEMBERS:

Members are selected for a three-year term, with one-third being appointed annually. Members may be re-appointed as terms expire. The student member is elected annually by a majority vote of the students.

V. EX-OFFICIO MEMBERS:

Dean of Career and Technical Education, program director, and program faculty.

VI. APPROVAL OF MEMBERS:

Advisory council members are appointed by the President of Kaskaskia College upon the recommendations of the Dean of Career and Technical Education.

VII. ADDITIONAL INPUT FROM AFFILIATES:

Each affiliate will have the opportunity for review, input and evaluation of the program through the following methods: clinical instructor's evaluation of clinical education, employers' evaluation of program graduates, clinical instructor's conferences, and conjoint appointment of clinical instructor.

CLINICAL AFFILIATIONS

ROLE OF THE HOSPITAL CLINICAL PRECEPTOR

The hospital clinical preceptor is a member of the radiology department who is in part responsible for the students' clinical education. This person has a major responsibility for:

1. Conducting an individualized clinical education orientation program for the students and the staff of the Department of Radiology.
2. Maintaining effective liaison between the Kaskaskia College staff and the hospital's Radiology Department.
3. Conducting conferences with the students on clinical matters, responsibilities, and problems.
4. Assisting the students during clinical education to secure reasonable accurate appraisals of their competency in the clinical area.
5. Conferring with the Radiology Department staff on student problems.
6. Encouraging conferences between staff radiographers and the student to increase the effectiveness of the clinical education.
7. Acting as a resource person by suggesting additional material that can be used to enhance the clinical education.
8. Conferring with the staff radiographer throughout the semester regarding the evaluation of the students.
9. Helping the students to make decisions regarding future plans and goals in a specific clinical area.
10. Maintaining good public relationships between the hospital Radiology Department and Kaskaskia College.

ROLE OF THE RADIOLOGY DEPT. STAFF RADIOGRAPHER

The Radiology Department staff radiographer is a full or part-time employee of the hospital who also shares in the responsibility for the daily guidance of the Radiologic Technology student enrolled in the Kaskaskia College program. The staff radiographer occupies a key role in making the student's clinical experience a successful and meaningful one. He or she works closely with the college faculty and is responsible for:

1. Acquiring a thorough understanding of the college program, its general philosophy, and its objectives.
2. Orienting the students to the hospital, its personnel, policies, procedures, and facilities.
3. Providing the student with the information necessary to gain a better understanding of the functions of the radiology facility.
4. Familiarizing the student with the general procedure of the Radiology Department.
5. Observing and evaluating the student as he or she progresses through each clinical rotation.
6. Writing a fair and constructive recommendation of the student to accompany each performance grade given.
7. Conferring with the hospital supervisors and college faculty throughout each academic semester regarding the evaluation of students.

RESPONSIBILITIES OF THE STUDENT

1. The importance of a good appearance cannot be overestimated. Students are expected to comply with the policies of the affiliate and the Radiology Department in regard to dress and grooming.
2. Establish good working relationships with all personnel with whom you have contact.
3. Be responsible for all equipment and materials used during clinical assigned hours.
4. Gain respect of your colleagues by being professional and dignified.
5. Attend and participate in all your scheduled clinical activities.
6. Consult with your staff radiographers, floor supervisors, and/or college faculty for help on problems.
7. Participate in the evaluation of your clinical progress in conjunction with the staff on the hospital's Radiology Department and the faculty of the Allied Health Careers Program.
8. Observe the staff of the Radiology Department at work. This is a learning situation and many ideas and suggestions can be gained from watching these people.
9. Strive to broaden your own knowledge and background on clinical subject matters by reading the professional literature available.
10. No bullying of any kind to patients, radiographers, or fellow students will be tolerated.
11. Be an active and responsible student technologist by joining the state or national professional Radiologic Technology Society.
12. Adhere to the ten work ethics adopted by the program: attendance, character, teamwork, appearance, attitude, productivity, organization, communication, cooperation, and respect. Remember, students are working on their resume everyday they are at clinical and class.
13. **Attendance/tardiness – these two qualities are of utmost importance.** They measure responsibility and dependability, which are two of the most important personality traits future radiographers possess.

CLINICAL EDUCATION POLICIES

AGREEMENT TO ABIDE BY REGULATIONS OF DEPARTMENT

I have read the “**Radiologic Technology Program Handbook**” and these policies/guidelines were also explained verbally by the program director and faculty. I am aware of and understand these regulations which pertain to the Kaskaskia College Radiologic Technology Program and agree to abide by them as a student of the Radiologic Technology Program.

UNDERSTANDING AND AGREEMENT OF CLINICAL TRAVEL

I understand and agree that I may need to drive several hours to a clinical facility. I also understand and agree that my clinical rotations may involve day, evening, and weekend rotations.

CHEATING POLICY

The cheating policy of the Radiologic Technology Program has been reviewed with me by the program faculty. I understand that cheating **of any kind** will **NOT** be tolerated in this program!

I also understand that if I am caught cheating or if my instructor suspects that I am cheating I will receive a zero on the test, quiz, or assignment and that I will have to meet with the program director for counseling.

If there is a second offense of cheating, I will be **immediately dismissed** from the program.

CONFIDENTIALITY AGREEMENT

The undersigned student of the Kaskaskia College Radiology Program hereby agrees that during their time in the program, he/she will not disclose any information or data concerning any patient he/she may interact with at the clinical sites. Further, upon end of enrollment in the program, he/she will continue to treat as private and privileged any and all information or data concerning any patient at clinical sites and will not release any such information to any person, firm, corporation or any other entity.

I have read and understand the contents of the Confidentiality Statement and the above Policies/Statements concerning the Radiologic Technology Program.

Violations of these responsibilities may subject the student to disciplinary actions and dismissal of the program in accordance with the procedure published in the Kaskaskia College Radiology Handbook.

Print Name

KC ID#

Signature

Date

ATTENDANCE AGREEMENT & CLOCK IN/OUT

When a student is assigned to a clinical education center, the following rules have been adopted for clocking in/out:

1. You are required to clock in and out using the e*value tool on the **designated** computer at each facility site. The IP address is noted for each facility and that is the only acceptable electronic device that you may use to clock in/out.
2. You will only use your password and clock in or out for yourself; not for any other individual.
3. You will not attempt to modify the recording system under any circumstances by using any other electronic device besides the designated computer on site at each facility.
4. If you fail to follow the above procedure, your clinical grade will be reduced by 5% for each occurrence.
5. If a student does not follow the Attendance Agreement and Clock In/Out Policy, they will receive a written warning. If the policy is misused by the student a second time or if there is severe unethical abuse to the policy, the student will be dismissed from the program.

I hereby attest to reading these requirements and will abide by each item.

College Radiology Handbook.

Print Name

KC ID#

Signature

Date

BLOGGING, BULLYING AND SOCIAL NETWORKING POLICY

Professional Ethics is outlined in the Radiology Program Handbook Standards of Radiology. Students should avoid all discussion of personalities, etc. involving college faculty, clinical instructors, other students, doctors, hospital personnel, and patients. Students should refrain from discussion of problems, issues, or negative experiences encountered either on campus or in the Radiology Department or other hospital departments on any social network.

The following are guidelines that should be followed when creating blogs, commenting on a blog, creating a LinkedIn profile, using Facebook, Twitter, Instagram, Snap Chats, and/or engaging in any other social networking, including contributing to or through any of the other online media.

PERSONAL EXPRESSION

Personal Blogs and social networking contain the views of a particular student, not the views of the college and/or clinical education setting (hospital). However, readers may not immediately appreciate this concept. Students are ***strongly*** discouraged from discussing clinical experiences while using social networking sites.

PROTECT CONFIDENTIAL/TRADE SECRET INFORMATION

When posting blogs and/or contributing to or through any social networking site, students must refrain from disclosing confidential, proprietary, sensitive and/or trade secret information of the clinical and third parties.

BE RESPECTFUL AND EXERCISE COMMON SENSE

All blogs and social networking contributions must comply with the Radiology Programs policies, including but not limited to the programs Code of Conduct and Kaskaskia College policies and procedures. When posting to your blog and/or contributing to or through any social networking site, be respectful of others. Assume faculty, other students, co-workers, hospital personnel, patients, and future employers are reading your blogs and contributions. Absolutely no information associated with patients should ever be posted on any social media. ***If any patient information is found posted by a student on social media, they will be withdrawn from the program.*** Images and information can only be shared in an educational setting.

BULLYING

The Kaskaskia College Radiology Program is committed to a safe environment for all students, faculty, radiographers, and patients free of harassment, intimidation or bullying. "Harassment, intimidation, or bullying" means any intentional written, verbal, or physical act when the intentional written, verbal, or physical act:

- Physically harms another or damages another's property
- Is severe, persistent, or pervasive that it creates an intimidating or threatening educational environment
- Has the effect of substantially interfering with education or safety
- Has the effect of substantially disrupting the orderly operation of the school or hospital

Harassment, intimidation or bullying can take many forms including: slurs, rumors, jokes, innuendo's, demeaning comments, drawing cartoons, pranks, gestures, physical attacks, threats, or other written, oral or physical actions. "Intentional acts" refers to the individual's choice to engage in the act rather than the ultimate impact of the action(s).

The Radiology Program will determine, in its sole discretion, whether a particular blog or social networking use violates the programs policies. As will all other policies, violation of this policy may result in discipline, up to and including dismissal from the program.

ACKNOWLEDGEMENT OF UNDERSTANDING

I have read and agree to comply with the terms of this policy outlining understanding of my responsibility to the Radiology Program with regards to social networking. I understand that

violation of this policy may result in disciplinary action up to and including dismissal from the program.

Print Name

Signature

Date

CARDIOPULMONARY RESUSCITATION

Students must be certified in basic life support – CPR – prior to the first day of clinical of the freshmen year, first semester. This certification may come from formal classes offered by hospitals, community health agencies, the American Red Cross, the American Heart Association, or other sources.

CELL PHONE USAGE/ELECTRONIC DEVICES

Students are not to use cell phones, tablets, computers, or wearable electronic devices capable of transmitting or receiving personal data or emitting signals while on duty in the clinical affiliate for purposes outside of clinical duties or documentation during regular work hours. Texting or using the phone is inappropriate unless used during **breaks** and **lunches**.

- If this policy is abused, the student will be asked to leave the clinical site for the day and it will be considered an absence. The student will receive a warning concerning this breach of policy.
- After the second warning, the student will receive a **5%** dock in their clinical grade.
- After the third offense of improper using the cell phone, the student will be dismissed from the program.

CLINICAL ATTENDANCE SCHEDULE

CLINICAL SCHEDULE – The scheduling of clinical time will be the first 15 weeks of semesters I, II, IV, and V and 8 weeks of semester III. The 16th week of the former semesters will be for preparation for final examinations in the students' didactic courses. Sophomores will be in clinical on Monday, Wednesday and Friday in the fall semester and Monday and Wednesday in the spring semester. Freshmen will be in clinical on Tuesday and Thursday in the fall semester for 11 weeks and Monday through Friday the last 2 weeks of the semester; Tuesday, Thursday and Friday in the spring semester; and in the summer semester Monday through Thursday.

The only time a student will be in clinical outside these parameters will be to complete make-up time or special circumstances for compensatory time. Make-up time is defined as the last week of each semester and this is the only time allotted for students to complete make-up clinical time or approval by the Program Director to make-up days under unusual circumstances.

Students may not complete or schedule clinical rotations during any designated holidays that the college is closed.

CLINICAL INTERNSHIP IN RADIOLOGIC TECHNOLOGY

The purpose of clinical education in Radiologic Technology is to allow the student to apply theoretical principles of radiography, patient care and departmental procedures to practical experience. The student's role in the clinic setting is one of a learner and not a staff Radiographer.

The college in conjunction with the affiliating clinical facilities will arrange clinical education. While the student is in the clinical department, he/she must observe the regulations imposed by the affiliating clinical facility with regard to patient safety and welfare. Also, the assigned schedule of experience must be followed closely.

IN CASE OF ILLNESS, LEAVING EARLY, OR OTHER EMERGENCY, THE STUDENT MUST PERSONALLY NOTIFY THE CLINICAL PRECEPTOR AND CLINICAL COORDINATOR PRIOR TO THE SCHEDULED CLINICAL PERIOD. Failure to do this will constitute a **5%** dock in the student's clinical grade for each incidence.

While performing various college and clinical duties, the student is directly responsible to the staff member of the affiliating clinical facility in charge of the room to which the student is assigned. If any operational or personal problems arise, the clinical preceptor should be contacted.

The student will progress from the role of the observer and assistant to relative independence according to their initiative and capabilities. Throughout the program, student's will be instructed in the utilization of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure to patients, themselves, and others.

The following categories of learning objectives are outlined to correspond approximately to the time distribution of the total program.

NOTE: EACH SEMESTER YOU MUST COMPLETE THE REQUIRED NUMBER OF CLINICAL COMPETENCY CLEARANCES.

FIRST YEAR

• FALL SEMESTER

1. Observe the general function of the Radiology Department.
2. Participate in procedures of patient reception and processing.
3. Participate in procedures of image recording.
4. Assist in image processing technique.
5. Participate in evening duty.
6. Observe and assist with routine and simple radiography of the chest, abdomen, and extremities.

• SPRING SEMESTER

1. Assist and perform routine radiographic examinations of the chest, GI tract, thoracic cage, abdomen, extremities, spine, fluoroscopic exams, and portable radiography according to the student's initiative and ability.
2. Perform all objectives stated in the first semester on an independent basis.
3. Participate in evening duty.
4. Observe and assist with MRI.

• SUMMER SEMESTER

1. Assist with routine emergency radiography and perform emergency radiographic examinations without assistance, according to the discretion of the supervising staff technologist and supervising clinical instructor.

2. Assist and perform radiographic examinations of the gastrointestinal and genitourinary tract, spine, and pelvis.
3. Perform all objectives stated in the first and second semester on an independent basis.
4. Possibly participate in evening duty (if there is more than one student assigned to clinical site).
5. Observe and assist with NM and US.

SECOND YEAR

• FALL SEMESTER

1. Perform routine radiographic skull, facial bone, portable and fluoroscopic examinations with relative independence.
2. Perform all objectives stated for the first year on an independent basis.
3. Maintenance of clinical competency.
4. Participate in evening duty with relative independence.
5. Observe and assist with Radiation Therapy, and Special Procedures.

• SPRING SEMESTER

1. Perform all objectives stated for previous semesters on an independent basis.
2. Completion of all previously stated clinical education objectives.
3. Assist with difficult, uncommon and surgical radiographic examinations and perform without assistance according to the discretion of the clinical instructor and supervising staff technologist.
4. Participate in weekend shift rotations.
5. Observe and assist with CT.

OPTIONAL ROTATIONS

Students may request addition specialized rotations and this needs to be approved by both Clinical Coordinator and Clinical Instructor.

CLINICAL EDUCATION SCHEDULE

It is understood that the student shall devote 16 hours per week during the first semester, 24 hours per week the second semester, 32 hours per week during the third semester, 24 hours per week during the fourth semester, and 16 hours per week the fifth semester. The following schedule is a suggested guideline and is designed to benefit the student. Variations from this schedule may occur and will not appreciably detract from the total learning objectives. The clinical coordinator will compose and distribute individualized clinical rotations to the students and the clinical education centers. Students will have an evening rotation in the summer if their assigned clinical site has more than one radiology student.

FIRST YEAR

FLUOROSCOPY	7
GENERAL RADIOGRAPHY	21
EVENING SHIFT	6
1 st semester (2 weeks), 2 nd semester (2 weeks), 3 rd semester (2 weeks)	
PORTABLE RADIOGRAPHY	1
NUCLEAR MEDICINE	1
ULTRASOUND	1
MRI	1

This includes summer semester

38 WEEKS

SECOND YEAR

FLUOROSCOPY	8
GENERAL RADIOGRAPHY	11
EVENING SHIFT	2
PORTABLE RADIOGRAPHY	2
SPECIAL PROCEDURES	1
RADIATION THERAPY	1
SURGERY	2
WEEKEND	2
CT	1

30 WEEKS

This clinical education schedule is arranged through the college and the clinical facility. It is understood that this schedule is to be adhered to closely. Only scheduled clinical education in accredited affiliating clinical facilities shall be recognized by the college as meeting the required hours of clinical experience.

CLINICAL SITE SELECTION AND ASSIGNMENT FOR STUDENTS:

Policy: The Radiologic Technology Program at Kaskaskia College is committed to providing a variety of clinical experiences to ensure that all students of the program have quality and equivalent experiences.

Procedures:

1. Prior to the start of each semester, students are given a “Clinical Rotation Options” form that indicates the available clinical sites for the upcoming rotations. The student will fill out this form and then turn it into the Program Director or Clinical Coordinator by the designated date. The “Clinical Rotation Options” form allows the students to choose 2-3 clinical sites of interest.
2. After all the “Clinical Rotation Options” forms are returned, the Clinical Coordinator schedules the clinical rotations, making every attempt to provide students with at least one of their preferred sites during the semester. When there are more students requesting the site than available space, students will be placed in alternate locations. The following will be considered, in order, when placing students at alternate locations:
 - a. Students requiring specific procedural experience may be prioritized to a site that can provide those experiences.
 - b. Proximity of the facility in relationship to the student’s home address.
 - c. Hospital supervisors request.
3. After the clinical schedules have been finalized and all the students have passed the required courses, copies are given to or emailed to the students.

Other Information:

- Vaccination mandates, paperwork requirements, and additional testing required by specific clinical sites is NOT taken into consideration when assigning students to a clinical rotation. If a student is unable to meet the specific facility site requirements, he/she will not be considered priority placement to an alternative facility site.

- In the event a student cannot meet the mandates of a clinical site, the student may not be able to progress in the program.

Changing a Clinical Site:

Once, assigned, clinical sites are not routinely altered. Consideration for changing clinical sites after the schedule has been published may happen in the following circumstances:

- Lack of the clinical site to provide an appropriate clinical experience through patient or procedural availability. Under this circumstance, an attempt to move the student will be made if there is an available, appropriate location. If there isn't one, then the student will remain at the current site but will receive site priority on the next rotation or selection.
- Situations at the clinical site that lead to a reasonable concern for the student's safety and well-being. This may include, but is not limited to sexual harassment or physical abuse. Under this circumstance, every effort will be made to obtain an alternative clinical site for the student. If no alternative location can be found, then the student will not be able to progress in the program.
- Removal of the student (by the clinical site or Program Director) due to behavioral or other minor issues. Under this circumstance, every effort will be made to obtain an alternative clinical site for the student, provided that the student is accepting of behavioral remediation. If the student is not willing to accept remediation or no appropriate, alternative location can be found, then the student will not be able to progress in the program.
- Students that are removed from clinical sites for major issues, will not receive alternative clinical placement and will not be able to progress in the program. These issues include but are not limited to: patient harm or neglect, impairment or intoxication while on duty, and violence against patients or staff.
- Students are not moved to alternative clinical sites for departmental personality conflicts or other minor issues.
- Students move to an area that is more than a two-hour drive from original clinical site that was assigned for the semester. This would only be approved if there is space available at other clinical sites for an additional student.

RELATIONSHIPS WITHIN THE CLINICAL FACILITIES

Students are expected to cooperate with hospital personnel while in the affiliated facility. You must observe regulations imposed by the facility regarding patient safety, welfare, personal cleanliness and hygiene. Failure to observe the same will be evidence of inappropriate behaviors.

As a student learner, you are expected to cooperate with the personnel at all times. If any problems arise about the performance of a task that seems unreasonable, you are to report the incident to the clinical preceptor. The clinical preceptor will be responsible for handling the matter. Please review the radiology program policy and procedures document.

COMMUNICABLE DISEASE POLICY

The Radiologic Technology program enforces current Kaskaskia College policies on communicable diseases. College information is found in the college catalog under the following sections:

- *STUDENTS WITH CHRONIC COMMUNICABLE DISEASES*
- *RADIOLOGIC TECHNOLOGY PROGRAM INFORMATION*

The following indicates the procedures of the Radiologic Technology program relating to communicable diseases.

1. All Radiologic Technology student situations concerning the communicable diseases will be addressed by the health screening committee for evaluation with any and all determinations forwarded to the Dean of Student Services.
2. Students may be administratively withdrawn from clinical courses based on health status.
3. Any student withholding information concerning his or her health status, as it applies to communicable diseases, either for the pre-admittance physical or while enrolled in the program may be dismissed for unethical behavior.
4. As always, the students maintain the right to appeal, through the established grievance procedure, any decision that may affect enrollment status.

COMPENSATORY TIME

This is the time spent in the clinical area in excess of the student's scheduled time. This includes time that the student is requested to stay in clinical, due to patient load, beyond the scheduled departure time, and time recorded in the clinic when the college has been closed due to external conditions. This time must be reported to the student's clinical preceptor. Students may use this built-up extra time later to conduct personal business during clinical time. This time must be requested and cleared with the Program Director and the Clinical Preceptor.

The following rules apply toward comp time:

Compensatory time does not include clocking in prior to starting time or time accrued until after 15 minutes of quitting time. Students may not routinely work over to acquire time for later use. No compensatory time may be completed during holidays (Memorial Day, 4th of July, Labor Day, Thanksgiving, Christmas, and New Year's) that are observed by Kaskaskia College.

Compensatory time during staff workshops, semester breaks and spring break may only be done for situations of extenuating circumstances that will be addressed on an individual basis.

CRIMINAL BACKGROUND CHECK AND DRUG SCREENING

It is the policy of Kaskaskia College to adhere to all policies of clinical facilities with which Kaskaskia College affiliates for student clinical learning experiences. Many of these facilities require criminal background screening for all students within the Allied Health departments. Kaskaskia College has determined that prior to being placed in any such facility for a clinical educational experience, the student must have completed the criminal background check.

Kaskaskia College has determined that prior to being placed in any such facility for a clinical educational experience; the student must have completed the criminal background check, and possesses a current negative drug screen.

CRIMINAL BACKGROUND CHECK

1. The student must sign a "Criminal background screening Consent Form" provided by Kaskaskia College. The student is responsible for the cost of the search and this is considered part of the student's lab fees.
2. The criminal background check must be completed prior to the student beginning her/his first clinical experience.
3. Kaskaskia College will designate the company(ies)/agency(ies) selected to do the

criminal background screening. Kaskaskia College may arrange to have proof sent from any company or agency for Allied Health students.

4. The criminal background check will be a nationwide search of the student's records.
5. If the student can provide a nationwide criminal background check from a valid agency within the past 12 months, the student's lab fees will be refunded. The criminal background check must be sent directly to the college in a sealed envelope from the previous employer or agency.
6. If the background check indicates the student has a criminal conviction, he/she will first be given the opportunity to refute the record. Should the conviction record stand, the clinical facility will be notified, and at the clinical facility's discretion, the student may be prohibited from taking part in the facility's programs.
7. If a facility refuses the student access to the clinical experience at its facility, Kaskaskia College will make reasonable efforts to find an alternative site for the student to complete her/his clinical experience. **NEITHER KASKASKIA COLLEGE, NOR ANY AFFILIATED COLLEGES OR UNIVERSITIES, GUARANTEES THAT A STUDENT WITH A CRIMINAL CONVICTION WILL BE ABLE TO COMPLETE HER/HIS CLINICAL EXPERIENCE.** A student who cannot be reasonably assigned to a clinical site will be dropped from the program.
8. Reasonable efforts will be made to ensure that results of criminal background checks are kept as confidential as possible, with a limited number of persons authorized to review results.

DRUG TESTING

It is the policy of Kaskaskia College to ensure that students performing duties in hands-on career and technical laboratories or clinical and internship sites perform with the utmost safety and not under the influence of illegal or other behavior altering drugs, which would create a safety hazard to the individual or others.

In accordance with this policy, Kaskaskia College has determined that students being allowed to perform duties in technical laboratories or clinical and internship sites are subject to a drug screen prior to performing duties in such settings as well as on a reasonable suspicion basis.

DRUG TESTING

As a condition of participation in a hands-on career and technical laboratory and clinical or internship site, the student is required to comply with and participate in the drug testing program as set forth below, and understands that non-compliance with the program will be a breach of program expectations and may result in dismissal from the Kaskaskia College academic program.

All drug screening shall be conducted in accordance with the procedures of the testing agency selected by Kaskaskia College and shall be a screening laboratory licensed or certified by the Substance Abuse and Mental Health Service Administration.

1. The student shall provide a urine specimen for the drug screen. The urine specimen shall be collected at a testing agency selected by Kaskaskia College, under that agency's procedures and control.
2. The drug screening will encompass the policies and procedures of testing agency. Substances screened for include but are not limited to: THC (Marijuana), Cocaine, Amphetamines, Opiates, and PCP.

3. Drug screenings will not be accepted from any other agency or employer.
4. If the initial drug test indicates a positive result of any tested substance, the student will be given an opportunity to either refute the positive result, or, at the student's expense, have a more extensive test. Repeat tests must be performed at least four (4) business days prior to participating in the hands-on career and technical laboratory or clinical and internship site setting by the same agency designated by Kaskaskia College. The second test shall be collected under direct observation of agency staff, pursuant to the procedures of the testing agency. If the second test is positive for any tested substance, the student, depending upon the rules of the internship or clinical site and the availability of an alternative placement may be unable to participate in hands-on career and technical laboratory or clinical and internship duties and may be dismissed from the program.
5. If the initial drug test results are positive due to prescription medication, the student will be given an opportunity to provide documentation from the prescribing health care practitioner. Prescriptions will be reviewed, and the final decision regarding student participation will be made by the Program Coordinator and/or the Dean of Nursing and Health Sciences, in conjunction with the clinical or internship agency. Marijuana is not considered an allowed drug for medical prescription. Therefore, a positive drug screen of marijuana may result in the student being excluded from participating in hands-on career and technical laboratory or clinical and internship settings depending upon the rules of the internship or clinical site and the availability of an alternative placement.
6. If the testing agency determines that a student has tampered with a sample during testing, the student will be immediately dismissed from the academic program and will not be considered for readmission to the program.
7. Students shall also be subject to the drug testing policy and rules of any clinical or internship sites to which he/she is assigned. The policy or rules of clinical or internship sites may require the student to submit to additional drug testing, in compliance with that agency's individual policies and requirements.
8. Students shall be subject to additional drug testing as requested by Kaskaskia College, for reasonable suspicion of the use of illegal or behavior altering drugs or for exhibiting questionable behavior including but not limited to symptoms of: impaired speech, physical dexterity, agility or coordination; demeanor, irrational or unusual behavior; negligence or carelessness in operating equipment or machinery; or disregard of safety procedures in the work environment.

Clinical healthcare facilities are subject to federal law and have a zero-tolerance policy regarding the use of any form of marijuana due to its behavior alerting effects and lack of federal regulation. Clinical healthcare facilities fall under federal guidelines which prohibits the hiring or employment of anyone using marijuana. Therefore, it is the policy of Kaskaskia College to prohibit students from participating in these clinical or internship settings with a positive drug screen that also indicates the use of marijuana.

CONSENT FOR CRIMINAL BACKGROUND CHECK AND DRUG SCREEN FOR PARTICIPATION IN A CAREER AND TECHNICAL PROGRAM

My signature below indicates that I have read the Criminal Background and Drug Testing policies of Kaskaskia College, and have been provided with a copy of the same. I understand that the results of

the criminal background check and drug screening are to be used for the purposes of determining my eligibility for and continuation in a hands-on career and technical laboratory experience or clinical and internship sites participation. By signing below, I provide my voluntary and irrevocable consent for a criminal background check and drug screen to be conducted on a routine or random for cause basis and for the results of such to be released to Kaskaskia College.

Signature

Date

Printed Name

INTRAVENOUS INJECTION POLICY

Preparation of substances used for direct intravenous administration is to be performed with **direct supervision only**. A student is **not** allowed to administer substances intravenously. Simulated practice and competency evaluation of intravenous injection will be provided in the College lab.

OCCUPATIONAL DOSE LIMITS AND IRREGULAR EXPOSURE OF PERSONAL DOSIMETER

According to the United States Nuclear Regulatory Commission (NRC) occupational dose limits for adults is listed as the following:

- (1) An annual limit, which is the more limiting of—
 - (i) The total effective dose equivalent being equal to 50 mSv; or Cumulative 10 mSv x age
 - (ii) The sum of the deep-dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 0.5 Sv
- (2) The annual limits to the lens of the eye, to the skin of the whole body, and to the skin of the extremities, which are:
 - (iii) A lens dose equivalent of 150 mSv, and
 - (iv) A shallow-dose equivalent of 500 mSv to the skin of the whole body or to the skin of any extremity.

The threshold dose exposure allowed by the Kaskaskia Radiology Program is 3 mSv per year or .25 mSv per month. If this is reached higher by any student, the radiology program director will discuss the matter with the student to evaluate the situation.

The monitoring of an individual's radiation protection badge is of utmost importance and is a serious matter. If a personal dosimeter is damaged or lost, the program director must be notified to inform the radiation monitoring company of the unusual occurrence. If the company detects an irregular or excessive radiation exposure, the radiation safety officer (program director) will talk with the student to determine the cause of the irregularity. If there were no abnormal occurrences that caused the irregular or excessive exposure on the dosimeter, a letter will be written by the program director to the Illinois Emergency Management Agency to remove the irregular reading from the student's live-time dose. If it was determined that the dosimeter was deliberately tampered with or placed in unusual surroundings (under a fluoroscopy tube or near radiation doses), the student responsible will be dismissed from the program.

Every student must wear a personal dosimeter while on duty at the clinicals and in the lab setting on campus.

- Dosimeters are to be worn on the collar outside the apron.
- Dosimeters must be returned in the classroom to the designated Radiology Professor.
- When radiation reports become available, they will be uploaded within 30 school days on eValue as a pdf document. Students will be notified by email when there are updates to eValue and at that time, they can review their reports (email expectations are listed in course syllabi). If there are any concerns or questions concerning the data on the radiation reports, students can review that information with the Program Director.
- Radiation Dosimetry Reports are located within the "S" drive under the folder Rad Tech/Radiation Detection Company.

OUTSIDE EMPLOYMENT

When the student is employed in a hospital in the Radiology Department, there are several rules to which he or she must adhere.

1. Student malpractice does not cover the student when he or she is employed. Students should check with the employing institution and be sure to receive a copy of the malpractice insurance under which they will be covered. **The employer must provide students with a separate radiation-monitoring device.** Students will not wear the badge provided by Kaskaskia College when working at an outside employment.
2. **The student will not seek release time from the clinical education schedule in order to work for pay. Students will be subject to dismissal from the program on grounds of unethical behavior.**
3. According to ILLINOIS PL 82-901 (JANUARY 1, 1984), radiography students will not take radiographs for any kind of compensation.

The student's primary focus should be the program of study. Students are requested **not to work the shift immediately preceding assigned clinical experience.** Students carrying a full-time course schedule should be employed no more than 10 to 15 hours per week. Generally, the student should plan to study 2 to 3 hours per week for each semester hour of credit carried, remembering that radiography courses tend to require more time.

PATIENT HOLDING POLICY

A student must not hold image receptors during any radiographic procedure. A student should not hold or temporarily restrain patients during radiographic exposures when an immobilization method is the appropriate standard of care. They are encouraged to use temporary immobilization devices such as pigg-o-stats, tape, sandbags, sheets, etc. If a mechanical restraint is impossible, a non-pregnant parent, friend, or relative accompanying the patient should be requested to hold the patient. If such a person is not available, a nurse or non-radiology staff member may be asked to help. Those persons assisting in holding the patient shall be provided with protective aprons and gloves and be positioned so that they are not in the path of the useful, primary beam.

PHYSICAL EXAMINATION FORM

A physical examination by a physician is required prior to admittance to a clinical site. The completed physical exam form must be submitted to the Program Director prior to the first day of class. **The student may not participate in clinical experiences until this requirement is met.**

The following is a list of required immunizations:

	Date of Titer	Date of Immunization		
Hepatitis B		1.	2.	3.
MMR (Measles, Mumps, Rubella)		1.	2.	
Tdap				
Varicella (proof of disease is not sufficient)		1.	2.	
Seasonal Influenza Vaccination – will be required in the fall when available (required yearly) All radiology students will be required to have the annual flu immunizations. The only exceptions are documented allergy. These students will be required to wear a mask according to the facility in which they are participating in clinical experience.				
2-Step TB Skin test required at initial acceptance into the program. 1-Step TB Skin test due the following year.				

RADIOLOGY PROGRAM HEALTH FORM

FILL OUT COMPLETELY

PART I: COMPLETED BY STUDENT

Name: _____
last first middle

Address: _____

Telephone: _____

Birthdate: _____

Sex: Male _____ Female _____

BRING COMPLETED FORMS TO SESSION. STUDENT WILL NOT BE PERMITTED TO ATTEND CLINICALS UNTIL COMPLETED HEALTH FORM IS SUBMITTED TO INSTRUCTOR.

IN EMERGENCY NOTIFY:

Telephone: _____

Relationship: _____

PART II: REQUIRED IMMUNIZATIONS COMPLETED BY PHYSICIAN

STUDENT MUST PROVIDE DOCUMENTED PROOF OF IMMUNITY WHICH INCLUDES:

*Physician's signature verifying history of disease; OR

*Physician record, school record, or Health Department record of Immunization: OR

*Laboratory evidence of positive titer.

PHYSICIAN PLEASE INDICATE IMMUNIZATION DATES OR TITER DATES: PROOF OF DISEASE IS NOT SUFFICIENT

	Date of Titer		Date of Immunization		
			1.	2.	3.
Hepatitis B					
MMR (Measles, Mumps, Rubella)					
Tdap					
Varicella (proof of disease is not sufficient)					
Seasonal Influenza Vaccination – will be required in the fall when available (required yearly)					

EXEMPT the student from the following immunizations:

____ Measles ____ Mumps ____ Rubella ____ Tdap ____ Hepatitis B ____ Varicella ____ Seasonal Influenza

Reason:

Will student be eligible at a later date? Y N When? _____

VERIFIED BY (Physician's Signature): _____

PART III: 2- STEP TB SKIN TEST REQUIRED AT INITIAL ACCEPTANCE INTO THE PROGRAM. 1-STEP TB SKIN TEST DUE THE FOLLOWING YEAR.

Please provide copy of results to Instructor.

PART IV: PHYSICAL EXAM TO BE PERFORMED BY PHYSICIAN.

1. Height _____ Weight _____
2. BP (L) _____/_____ BP(R) _____/_____ Pulse _____
3. Hearing Acuity _____ Test: W/R, Whisper, Audiogram
4. Corrected Vision (Snellen): Right 20/_____ Left 20/_____

List known Allergies:

List Medications Taken Regularly:

SYSTEMS ASSESSMENT: Any abnormalities? Please describe on separate sheet.

- | | | | | | |
|------------------------------|---|---|-------------------------|---|---|
| 1. Head, Ears, Nose, Throat. | Y | N | 7. Genitourinary | Y | N |
| 2. Respiratory | Y | N | 8. Musculoskeletal | Y | N |
| 3. Cardiovascular. | Y | N | 9. Metabolic/endocrine. | Y | N |
| 4. Gastrointestinal. | Y | N | 10. Neuropsychiatric. | Y | N |
| 5. Gynecological. | Y | N | 11. Neurological. | Y | N |
| 6. EDC if Pregnant. | Y | N | 12. Skin. | Y | N |

Has the student had hepatitis?

Is there loss or seriously impaired function of any paired organ or limb? If so, please explain.

Physician's comments regarding student's health status that might impact upon clinical radiology practice.

Is the student now under treatment for any medical or emotional condition? If yes, please explain.

Physician's Signature _____ Date _____

Print Name _____

Address: _____ Telephone: _____

RADIATION SAFETY GUIDELINES

The three basic methods of protection from radiation are shielding, distance, and length of time exposed. Radiography students must also follow the following radiation safety guidelines.

1. Personal dosimeters are to be worn during all clinical education experiences and labs. Dosimeters shall be worn at the collar level and outside of any lead protective devices.
2. A student with a declared pregnancy shall be provided two radiation monitors. One is to be worn at the collar level as previously described and the second worn at the waist level under lead protective devices to record fetal exposure.
3. The student shall stand behind a fixed barrier during an exposure when working in a radiographic room.
4. Students shall wear lead aprons and maintain maximum distance when working in radiographic and/or fluoroscopic rooms.
5. Students should wear lead aprons and use maximum distance when performing mobile radiography (minimum of 6 feet and at a right angle to patient and primary beam). Persons in the area should be alerted that an exposure is to be made so that they can move completely out of the area or at least six feet away from the mobile unit. This distance should be increased to at least ten feet if there is a possibility of pregnancy.
6. Students must not hold image receptors during any radiographic procedure. Students should not hold patients. Temporary mechanical restraining devices should be used. Only when all other methods of immobilization have failed should another person be used to temporarily immobilize a patient. If a person is holding a patient, they must wear lead protective garments and if the hands fall in the primary beam, they should be protected by leaded gloves.
7. Proper collimation should always be used.
8. Gonadal shielding (if applicable) under the age of 60.
9. Practice ALARA for personnel protection.

STUDENT DRESS CODE

THE UNIFORM FOR RADIOLOGY STUDENTS SHALL BE AS FOLLOWS:

1. Students must wear clean, unwrinkled navy-blue scrub tops and pants.
2. If the scrub top is a "V" neck, a white or navy t-shirt must be worn underneath the scrub top. Only white or navy can be worn, plain cotton t-shirt material. (No waffle pattern, underarmour, or designed t-shirt). The t-shirt can be either long or short sleeve.
3. Students must wear white or black tennis shoes or white, black, or navy crocs with backs. (Some hospitals do not allow any type of crocs)
4. Students are also required to wear a KC identification nametag along with a Radiology Student identification tag. If the identification nametag is lost or damaged, a replacement will be made at the cost of \$5.00 to the student.
5. Radiation monitor badges must be worn during clinicals and labs.
6. If students want or need something with which to keep warm, they may buy a white or navy **plain** lab coat. Nothing else is acceptable (no sweatshirts, sweaters, etc.)
7. Undergarments must be worn.

ADDITIONAL COMMENTS:

- At all times students have to abide by hospital policies. Hospital dress code policies supersede the Kaskaskia college radiology program.
- Displaying small tattoos is permissible. However, they cannot be offensive, vulgar, or contain nudity. Tattoos larger than 2" x 2" must be covered.

- No more than two sets of earrings are allowed, small post earrings only. Ear cuffs or collars, hoop earrings or other visible articles of body piercing are not allowed. They must be either removed or a clear spacer is to be placed in the hole. If you have gauges, you must put in a clear or flesh colored spacer in for safety reasons.
- Hair is to be clean and worn so that it does not interfere with patient care. Hair color must be of natural tones- no bright colors. Shoulder length or longer must be pulled back from face into a ponytail, braid, etc. Hair accessories are to be plain and inconspicuous.
- Facial hair must be trimmed to less than ½ inch, neatly groomed, clean and must not interfere with work in any way. Students working in some areas of the hospital may have special requirements regarding facial hair.
- One short necklace and one ring may be allowed at the discretion of the clinical preceptor or as required by clinical setting policies.
- Fingernails should be short and at a length and condition that will not be injurious to patients. Artificial nails are not allowed. Nail polish, if worn, should be clear, pale, or transparent and chip-free.
- Good personal hygienic practices are required, which includes cleanliness, oral hygiene, and use of antiperspirant agents. Thong underwear is unacceptable. Uniforms must be laundered after each wear. Shoes must be clean.
- Make-up should be worn conservatively and no heavy cologne or perfume should be worn during clinical experiences.
- Students are not to chew gum or smoke while on clinical assignment. Smoke odor on uniform or person is prohibited. The students will adhere to all legal and/or institutional policies related to smoking.
- If a skirt is worn, legs must be covered with nylons.
- Protocols may vary from each clinical facility and they need to be adhered to when students are participating at that facility

*Students must adhere to hospitals dress code policies or they will be asked to leave clinical. **If a student has continual disregard to policies, they will have a reduction in their grade with a written warning or even dismissal from the program.***

STUDENT LIABILITY INSURANCE

Students are required to have liability and accident insurance prior to admittance into clinical facilities. No student shall be allowed into the affiliate facilities without proper coverage.

Insurance will be purchased through Kaskaskia College and must be purchased during the fall of each year. This policy applies to both first and second-year students. Prior to attendance in clinical education the student must show proof of purchase to the Clinical Coordinator of Radiologic Technology.

The college offers a comprehensive student health and/or accident insurance program to all students carrying five or more credit hours while attending Kaskaskia College. Students pursuing occupational career programs are required to enroll in the student insurance program.

All incidents must be reported in a timely manner to the program director. Claim forms are available in the Human Resource office. Failure to report claims in a timely manner may result in denial of claims submitted.

SUPERVISION/REPEAT

While performing clinical assignments, the staff radiographer in charge of the assigned room/area and the clinical preceptor are directly responsible of the student. The student must have adequate and proper supervision during all clinical assignments.

Each student progresses from the role of observer and assistant to relative independence according to initiative and capabilities. Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the **DIRECT SUPERVISION** of a staff radiographer.

DIRECT SUPERVISION is defined as student supervision by a qualified radiographer who:

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

Students must be DIRECTLY supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency. A student shall not take the responsibility or the place of a qualified staff radiographer and will never be allowed to approve and send images for radiologist interpretation.

After demonstrating competency, the student may perform those procedures with **INDIRECT SUPERVISION** (*A radiographer is IMMEDIATELY available, I.E. adjacent to the room or location where the procedure is being performed to assist the student regardless of the level of student achievement.*)

AT ALL TIMES, REGARDLESS OF A STUDENT'S LEVEL OF ACHIEVEMENT, A STAFF RADIOGRAPHER MUST:

- View the exam requisition and evaluate condition of patient to determine the capability of the student to perform the exam
- Check and approve all radiographs taken by a student prior to dismissal of a patient
A student is never allowed to approve and send images for interpretation.
- Be present during the performance of **ALL SURGICAL and MOBILE RADIOGRAPHY.**
- Be present during the performance of **ALL REPEATS** (*A qualified radiographer must be physically present during the conduct of a repeat image and must approve the student's procedure prior to re-exposure*)

A student is responsible for performing radiographic procedures that have been learned and practiced. If the student is asked to perform procedures for which no instruction or practice has been obtained, it is the student's responsibility to notify the staff radiographer and clinical preceptor of this fact. **The student must also assume responsibility for assuring that all repeat radiographs are performed under the direct supervision of a staff radiographer.**

If a student does not follow the Supervision/Repeat Policy, they will receive a written warning. If the policy is misused by the student a second time, the student will be dismissed from the program.

TECHNICAL ABILITIES

THE RADIOGRAPHY STUDENT MUST POSSESS THE ABILITY TO:

- Perform a full range of body motions including handling and lifting patients, manual and finger dexterity and eye-hand coordination.

- Stoop, bend, stand and walk for extensive periods of time.
- Lift, carry, push, and pull equipment or objects weighing up to 50 pounds on a daily basis.
- Climb steps and ramps daily.
- Reach with arms above the head while standing.
- Kneel and crouch.
- See and hear to normal range with correction.
- Read, interpret, and comprehend technical and medical information.
- Work under stressful conditions and/or work irregular hours.
- Communicate with people of all professional and social levels in writing as well as verbally.
- Wear lead protective devices for extended periods of time.

HEALTH CONSIDERATIONS

Any student participating in the Radiologic Technology Program must be able to perform the essential duties, as required by the program (see above). The student must be free of any contagious condition. A radiology student must be in a state of physical and mental health that would not jeopardize patients or personnel in a clinical setting. (See Drug Testing pg. 24)

Students must submit a completed physical examination, immunization forms and a current CPR card prior to the first patient care day. Students will be prohibited from attending clinical until all required forms are submitted; 5% dock in grade after two absences.

In order to ensure that a student is not placing him/herself, another student, or a patient in physical danger, any student being treated by a physician or other health care provider due to a medical condition, disease/illness, hospitalization, pregnancy and/or delivery of a baby, will be required to provide a statement from their licensed health care provider which indicates that the student is able perform full clinical duties and responsibilities without restrictions. The student will not be allowed to attend clinical without a licensed health care provider's written release to perform full clinical duties and responsibilities without restrictions.

Should the student's medical condition change at any point in the school term, it is the student's responsibility to consult with their health care provider to determine whether he/she is able to continue performing clinical duties. It is also the student's responsibility to obtain a new written release from their licensed health care provider under such circumstances.

A student's failure to notify the Program Director or Coordinator and/or Dean of Health Sciences of a health or medical condition impacting the student's ability to perform his or her duties may jeopardize the student's progression in the program.

Students seeking accommodations under Section 504 of the Rehabilitation Act and/or the Americans with Disabilities Act, please refer to the Kaskaskia College Student Handbook.

Kaskaskia College Release to Perform Full Clinical Duties and Responsibilities Without Restrictions

All students participating in the Radiologic Technology Program must be able to perform their clinical duties. Any student being treated by a physician or other health care provider due to a medical condition, disease/illness, pregnancy and/or delivery of a baby, must provide a written release from their physician or licensed health care provider indicating that the student is able to perform full clinical duties and responsibilities without restrictions. The student will not be allowed to attend clinical without a written release to perform full clinical duties and responsibilities.

The student's treating physician and/or licensed health care provider will need to verify that the student is able to perform the following tasks, without restriction, by indicating "Yes" or "No" in the blanks below.

The student is able to (write "Yes" or "No" next to each item):

- 1. Perform up to eight hours in a clinical/laboratory setting
- 2. Work in a standing position for extended periods of time
- 3. Walk frequently, often carrying equipment or supplies
- 4. Lift and carry up to 25 pounds (transfer client)
- 5. Support 25 pounds (ambulate client)
- 6. Push and pull 25 pounds (position client)
- 7. Frequently lift or move heavy objects and or equipment
- 8. Stoop, bend and maneuver in tight places
- 9. Reach with arms above the head while standing
- 10. Wear lead protective devices for extended periods
- 11. Move quickly in response to an emergency
- 12. Hear sufficiently to detect speaking levels, faint body sounds and equipment alarms
- 13. Have vision to see objects 20 feet away, use depth perception,
- 14. Able to tolerate and distinguish various odors
- 16. Perform professionally and effectively in a stressful environment
- 17. Ability to concentrate and make decisions without interference from prescription medications

I certify that _____(Name of Student) has met all of the above criteria and is able to perform full clinical duties with no restrictions.

Comments (Please include any additional information or details regarding the student's current medical condition, including any anticipated changes in the student's condition):

Physician/Licensed Health Care Provider's Signature _____

Date _____

Adapted from Yocum, C.J. (1996) Validation study: Functional abilities essential for nursing practice. National Council of State Boards of Nursing

ATTENDANCE POLICY

Attendance is mandatory in every Radiologic Technology lecture class, lab & clinical assignment. Regular attendance is necessary for successful completion of the program. As adult learners, the student is responsible for making decisions regarding attendance and accepting the consequences of nonattendance. Students are expected to report to the classroom, lab or clinical site at designated/scheduled times.

Class, lab and clinical attendance policy and requirements, as outlined in the respective program student handbook, are the same remotely/online as they are for traditional on-campus face to face class, lab and clinical time unless directed otherwise by the instructor. Students are expected to be present for all scheduled class, lab and clinical and will be held responsible for any work missed as a result of absences or tardiness. Health Science programs may vary according to program specific accreditation requirements or as outlined by regulatory and advisory approval boards. Attendance will be taken. The instructor is responsible for recording absences or tardiness.

Absences

Certain absences may be allowed without direct penalties and must be **prearranged and approved** by the instructor. It is up to the student in these situations to communicate with the instructors prior to the absence and follow-up in the event of any missed material or work. **These absences must be communicated with the instructor in advance** of the absence. These absences include but not limited to:

- Performances or activities required for institutional scholarships (athletic, theatre, vocal, instrumental).
- Pre-approved religious observances.
- Bereavement for immediate family (spouse, child, parent, grandparent, great-grandparent, sibling, step-parent, step-sibling, and child of sibling). Aunts and uncles are not included.
- Allowable absences for military service personnel and their direct family members include:
 - Temporary Duty (TDY, TDA, TDT, TAD,).
 - VA medical appointments.
 - Deployments.
 - Family preparation for deployment.

Absences due to other circumstances such as jury duty, volunteer emergency service in accordance with Illinois law, documented disability related needs, or required quarantine as a result of Illinois Department of Public Health Guidelines shall be discussed with the instructor and Dean to determine whether exceptions to the attendance policy should be made. In the event of unforeseen circumstances leading to absences that exceed those allowed in a course, the student may request an incomplete grade. In doing so, the student acknowledges that the course and or graduation may be delayed.

Lecture or Lab Course Absences

A student shall be allotted two absences without any penalties to their grade. **For every absence over 2, there will be a 5% dock in the grade.**

X-RAY Lecture or Lab Courses	
X-RAY 104	Lecture
X-RAY 110	Lecture & Lab
X-RAY 145	Lecture & Lab
X-RAY 111	Lecture & Lab
X-RAY 146	Lecture & Lab
X-RAY 210	Lecture & Lab
X-RAY 250	Lecture Only
X-RAY 211	Lecture & Lab

Tardy: If the student is tardy three days, it will be counted as one absence. Tardy is also defined as not in your seat at the specified time after breaks. Leaving after break = 1 tardy

Lab Absence: A lab absence will count in the course that it is associated with (see list above). Any missed lab content must be made up by the end of the semester. It is the student's responsibility to make-arrangements with the instructor for completing the lab skills content.

Absence on a Test Day:

Make up tests and quizzes will not be given unless prior approval by the instructor is given and the instructor was notified by the student of the absence prior to the test/quiz. In this case the student will receive a zero for the test/quiz.

In case of an emergency absence, the student must call the instructor (leave a message if unavailable) prior to the scheduled test or quiz time. In which case, the makeup test or quiz will be given only on the first day back after the absence at the discretion of the instructor with an automatic 5% reduction of total exam score. Make-up exams or quizzes will be scheduled either with the instructor or in the Student Success Center.

Occasionally quizzes will be given in lab. If a student misses lab they will not be allowed to make up the quiz they missed; BUT will be required to make up the lab time they missed.

Student Responsibilities: In the event of an absence for lecture or lab, the student must notify their instructor **prior** to the beginning of class. A voicemail or email left for the instructor after the class begins is **not** sufficient. The student must make every attempt to communicate with and receive feedback from the instructor with regard to the absence. Students are responsible for content areas covered on any given day of an absence. Students are responsible for making arrangements with the instructor for retaking or making up missed tests, quizzes, assignments or exams.

If a student is symptomatic with any infectious conditions, they should stay home so as not to spread potential illnesses.

Clinical Course Absences

A student shall be allotted two absences or 16 hours without any penalties to their grade. **For every absence over 2, there will be a 5% dock in the grade.**

X-RAY Clinical Courses
X-RAY 101
X-RAY 105
X-RAY 103
X-RAY 201
X-RAY 204

Tardy: Tardiness is defined as anything later than the designated start time for arriving at the clinical assignment, or in returning from mealtime or breaks. This should not be abused. If the student is tardy four days, it will be counted as one absence. Any type of tardy should be commented in E*value for clarification when clocking in or out.

Absence/Arriving Late/Leaving Early: Whenever a student is calling in sick for the day, tardy or leaving early for the day, the Clinical Coordinator and Clinical Preceptor **MUST** be notified prior to the start of clinicals. The student or guardian needs to call the Clinical Coordinator and leave a message on the voice mail: Candace Sloat, Clinical Coordinator: 618-545-3364

Clinical Absence Make-up

All absences will have to be made up as assigned by the Clinical Coordinator. Make-up time is defined as the last two weeks of each semester and this is the only time allotted for students to complete make-up clinical time or approval by the Program Director to make-up days under unusual circumstances.

If the student schedules a make-up clinical day & then calls in sick for that day, it will count as a clinical absence. The student must follow the same procedures for notifying the Clinical Preceptor & Clinical Coordinator for clinical make-up day absences!

Proper Notification of Clinical Absences

The student is responsible to contact **BOTH** the **Clinical Preceptor** and **Clinical Coordinator Director** when absent, tardy or leaving early from clinical:

Contacting the Clinical Preceptor:

The student must call the clinical site when he/she is going to be absent! Failure to inform the clinical instructor will result in 5% deduction in final clinical grade for EACH occurrence and could result in dismissal from the program!

Proper notification includes:

1. Personally, notifying the clinical preceptor at least 30 minutes prior to scheduled clinical time.
2. If unable to notify the designated preceptor, the student should notify a Radiologic Technologist at the clinical facility. It is recommended you obtain the name of the person you notify and the time you notified them and request that person to forward the message to the instructor.
 - o Leaving a voicemail on the Radiologic Technology Department manager/director phone is not proper notification
 - o A fellow student bringing a message is not proper notification
 - o Leaving a message with the hospital operator is not proper notification

Contacting the Clinical Coordinator:

The student must also contact the Clinical Coordinator when he/she is going to be absent, tardy, or leaving early. Failure to inform the Clinical Coordinator will result in 5% deduction in final clinical grade for EACH occurrence and could result in dismissal from the program!

Proper notification includes:

1. Emailing the Clinical Coordinator, csloat@kaskaskia.edu, this must be done at least 30 minutes prior to the scheduled clinical time.
2. If running late or leaving early, call and leave a voice message or email the Clinical Coordinator. Candace Sloat: 618-545-3364.

CLINICAL SCHEDULE REVISIONS

If a student's clinical rotation schedule is altered in any manner (i.e. hours, rotations, interview days, etc), a revision request must be completed in writing to the Program Director **prior** to the change so that it may be approved. ***FAILURE TO FOLLOW PROCEDURE WILL RESULT IN A REDUCTION OF YOUR CLINICAL GRADE BY 5% FOR EACH OCCURRENCE.***

FIELD TRIPS

If the College or Radiology Club has paid for a field trip or conference registration/hotel, the student is responsible for attending all activities and following guidelines as addressed in the field trip release form that every student sign prior to field trip. If a student fails to attend the conference or field trip, they are responsible of all payments and bills and will have to reimburse the Radiology Club.

SNOW DAYS

If the college opens late or closes campus due to inclement weather, the students do not attend clinicals (day or evening shifts). Those eight hours will be made-up during the last two weeks of the semester as when all make-up time is completed. If the college closes early due to bad weather conditions, students are requested to leave from clinicals. That time will also be made up. Students should have first alert on their phones and watch the Kaskaskia website www.kaskaskia.edu for closing information. If a student needs to leave clinical early due to inclement weather, the student needs to notify the Program Director prior to leaving and the student will have to make-up that missed time. This missed time will not be counted against the student's number of absences.

VOLUNTARY DECLARATION OF PREGNANCY POLICY

The declaration of pregnancy is voluntary. If the student chooses to voluntarily inform the program officials of their pregnancy, a written declaration of pregnancy with the inclusion of expected date of delivery must be signed and reviewed with the Program Director. If this voluntary declaration is not signed, a student cannot be considered pregnant. If the student chooses to disclose their pregnancy, they will receive counseling on options available for completing the program and radiation protection of the embryo/fetus.

Options for completing program:

- Continue both the didactic and clinical education courses
- Upon request of the pregnant student to the clinical coordinator, clinical rotation schedules may be modified so as to schedule the student through low radiation areas, specifically during the first trimester.
- A leave of absence may be taken and all radiography grades will be recorded as withdrawn (W). This will permit the student to request readmission to the same semester the following year.
- Discontinue didactic and clinical education courses
- The program will follow the pregnancy policies in compliance with Title IX regulations [Pamphlet - Supporting the Academic Success of Pregnant and Parenting Students Under Title IX of the Education Amendments of 1972](#). Any questions or concerns with these policies can be reviewed with the Kaskaskia College Title IX coordinator.

The ultimate decision regarding these options will be the student's in regard to pregnancy issues and student's level of competency in the radiology program.

Pregnant students choosing to remain in all educational courses will be advised with the following radiation protection information:

- Must review the [U.S. Nuclear Regulatory Commission "Regulatory Guide 8.13"](#) Instruction Concerning Prenatal Radiation Exposure
- Must review [U.S. Nuclear Regulatory Commission Section 20.1209](#) "Dose equivalent to an embryo/fetus".
- Must wear an additional radiation monitoring device near the lower abdominal area and under the lead apron (0.5 mm lead equivalent or if available, 1.0 mm lead equivalent)
- Recommended to stay out of the field of radiation and, other than during fluoroscopy, remain in the control booth during the exposure period
- Wear additional lead apron or aprons in fluoroscopy, during portable exams or when otherwise necessary
- Exposure to the pregnant person once the pregnancy is declared should be limited to no more than 0.5 mSv per month and 5 mSv (.05 Sv) for the entire pregnancy. This amount of exposure is considered not to increase the measurable risks.
- The exposure limits will apply until:
 - The student gives birth, or
 - The student notifies the Program Director in writing that they are no longer pregnant, or
 - The student informs the Program Director that they no longer wish to be considered pregnant by revoking her previously declared pregnancy in writing.
 - Must monitor personal fetal monthly radiation dosimetry report. This report will be individually emailed to the student.

The pregnant student radiographer is expected to meet all objectives and clinical competencies of each radiographic course. Any student being treated by a physician or other health care provider due to a pregnancy and/or delivery of a baby, must provide a written release (listed on pages 34-35) from their

physician or licensed health care provider indicating that the student is able to perform full clinical duties and responsibilities without restrictions. The student will not be allowed to attend clinical without a written release to perform full clinical duties and responsibilities.

The student has the right at any time to revoke the written declaration of pregnancy at any time. The revoking of the declaration must be in writing and if rescinded the student is no longer considered pregnant and no allowances for their condition will be made.

WRITTEN DECLARATION OF PREGNANCY FORM

This document is to certify that I, _____, a student of the Radiologic Technology Program, enrolled at Kaskaskia College and currently assigned to _____ (clinical education center) am voluntarily declaring that I am pregnant and I believe that I became pregnant in _____, 20____ and will deliver the baby in _____, 20_____.

I have read the voluntary declaration of pregnancy policy for the radiographer program. I understand the implications of my continued presence in the Radiology Department as part of my clinical education. I will not hold Kaskaskia College or the clinical education center(s) liable in case of abnormalities that may be caused by exposure to radiation during this pregnancy.

I **ELECT** or **DO NOT ELECT** (please circle) to follow my planned clinical rotation. *(If you elect not to follow the clinical rotation plan, you will be required to complete your rotations at a later date.)*

I also understand that the lower dose limit is in effect until I have (1) given birth, (2) informed the department that I am no longer pregnant, or (3) chosen to revoke this declaration of pregnancy in writing.

STUDENT RADIOGRAPHER _____

WITNESSED BY _____

PROGRAM DIRECTOR _____

DATE _____

SUMMARY OF POLICIES AND STANDARDS

Conformity to stringent standards is characteristic of the profession.

This quality, however, is not acquired merely by the donning of the uniform or other badge of a profession. It can be gained only through patient growth and diligent work and thought.

It is impossible to define briefly all the desirable tangible and intangible elements that make up the mature Radiologic Technologist. It is possible, however, to provide an outline of what standards should be followed.

The following suggestions are intended to serve this purpose.

A. PERSONAL/APPEARANCE

1. Shoes and uniforms should be clean and neat.
2. Hairstyle should be conservative and reasonably short. Long hair touching the shoulders should be pulled back.
3. Natural fingernails should be short, clean, and neutral in color if painted.
4. Cosmetics, perfumes, and colognes may be used in moderation.
5. The wearing of jewelry while in uniforms should be conservative (i.e. no dangling earrings or long necklaces). Wedding bands and wristwatches, of course, are acceptable.

B. COURTESY AND MANNERS

1. Students should identify the Radiology Department and themselves whenever answering or calling on the telephone. Students should be brief, and should never make personal calls from the Radiology Department. Use of personal cell phones and texting is not allowed except on breaks and lunches.
2. Students should not interrupt business conversations between others unless there is some urgency.
3. Students should step back to allow elder or senior persons to pass by or enter first.
4. Students should not shout to gain the attention of another.

C. DISCIPLINE AND QUALITY CONTROL

1. All assignments must be carried out as promptly, efficiently, and skillfully as possible, according to routine directives or special instruction as the case may be.
2. Instructions from the next or any higher level of authority should not be questioned unless the instructions seem to contain an error.
3. Whenever students are in doubt or unable to handle a situation, they should seek advice before proceeding further.
4. Breach of discipline, unethical, or unbecoming conduct, etc., will be dealt with according to hospital/college policy.
5. Correction of technical or clerical errors and suggestions for improvement are to be accepted in the same friendly and constructive spirit in which they will be given. Such suggestions are the basis of quality control and maintenance of a high standard of work, as well as the only way that the principle of "learning by doing" can be applied in a practical manner.
6. Cheating of any kind will not be tolerated in this program. If a student is caught cheating or if the instructor suspects cheating, the student will receive a zero on the test, quiz, or assignment and will have to be counseled by the program director. If there is a second offense of cheating, the student will be immediately dismissed from the program.

D. CONSIDERATION FOR THE PATIENT

1. When handling patients, students should always exercise the same consideration that they would wish to receive if they were ill. For example, *students should be gentle and smile; keep patient comfortable and warm; return patient to the ward quickly; and keep the waiting period before examination to a minimum.*
2. Students should always address patients by surname and title to confirm identification, and should introduce themselves to the patient in the same manner.
3. **Students should always check identification**
4. When the radiologist arrives to see the patient, students should perform the introduction.
5. Students should always carefully explain to the patient what they wish the patient to do before carrying out any procedure, thus ensuring the patients' full cooperation.
6. Students should always be alert to the prevention of accidents to the patient or themselves. For example, *students should help patients on and off the table or into and out of their wheelchairs.*
7. Students should refrain from whispering, laughing, conducting irrelevant conversation, whistling, singing, and congregating in groups within view or hearing of patients.
8. Students should respect the patients' privacy and modesty. For example, *students should never allow the patient's genital organs to become exposed. If the patient is wearing a gown or pajamas, he or she should be covered from the waist downward with a sheet. Enema tubes should not be put into the rectum of the opposite sex if he or she is uncomfortable or objects to the procedure.*
9. Students should keep conversation with patients to the minimum required to put the patient at ease and inform him/her as to what he/she is required to do, and should tactfully discourage any tendency of the patient to engage in frivolous remarks. Students should be politely evasive in replying to any questions from the patient (or relatives) regarding the condition of the patient, findings on the x-ray image, or the diagnosis for which he or she is receiving x-ray services. It is the attending physician's responsibility to inform the patient of these matters.

E. PROFESSIONAL ETHICS

1. Students should never discuss a patient, his illness, or his private affairs that come to their knowledge with anyone, either privately or publicly. This is confidential information that may not be disclosed without danger of committing a moral or civil offense. **Use HIPAA regulations in all circumstances.**
2. Students should avoid all discussion of personalities, etc, involving doctors or hospital personnel.
3. Discussion of technical problems and experiences encountered in the Radiology Department or hospital should not be carried on in places where the public may overhear the conversation, such as buses, etc.
4. Students should not attempt to interpret x-ray images for physicians or any other person.
5. Students should not disclose the report of any x-ray or other examination to anyone except the attending physicians.
6. Students should not deliver or loan x-ray images, etc, to anyone unless the images have been signed out properly.
7. Students should not read any patient's chart or records unless authorized to do so in the course of transcription of pertinent information for x-ray examination, treatment, or approved research.
8. Personal gratuities in the form of money should not be accepted from patients.

F. MISCELLANEOUS

1. Complaints of any nature should be submitted in writing.

2. Suggestions that might lead to improvements in the Radiology Department are welcomed and will be given full consideration.
3. When relaying messages or instructions to others, especially patients or ward nursing staff, it is important to be concise, complete, and above all, patient, with the knowledge that what is well known to one person may be new and strange to someone else.
4. Students should not hesitate to help out anywhere in the department where assistance seems to be required, especially if they have completed their own assignments. For example, students may answer a ringing telephone if the receptionist is speaking on another line; offer to take a waiting case from another technologist who has been delayed by a difficult patient (if the student is competent in the examination area and if it is in his or her rotation schedule).
5. Students should be interested in keeping the department clean and efficient by reporting any deterioration, breakages, malfunction of equipment or depletion of supplies. This will facilitate prompt repair and re-stocking.
6. Students should not leave the department for lunch or coffee breaks if this will leave the department unattended by sufficient personnel. If students are out for a break and others are waiting, it is important to be as brief as possible.
7. If a student suffers an accident or becomes ill while on duty, or is unable to report for duty because of illness, the student should promptly inform the supervising technologist so that treatment may be arranged and an incident report completed.
8. It is important to exercise moderation in all things and to maintain a proper balance between duty, recreation, and rest.
9. Students should always do the "reasonable" thing, i.e. avoid extremes.
10. If a student becomes the victim of unwarranted or petty blame or criticism, he or she may wish to follow the hospital grievance procedure.
11. Every image taken must be marked with either a right or left student initialed lead marker.
12. The individual taking the image must be identified on the image or on the requisition.
13. Students should not abuse the internet/computers at clinical sites. Internet and computer use for professional education should be only allowed if given permission by clinical instructor.
14. Students may need to drive several hours each day to a clinical facility. The program director and clinical coordinator will try to arrange clinical sites as closely related to where the student lives, but to achieve clearance requirements and have an adequate educational experience, the student might have to drive further to complete their rotations. Clinical rotations involve day, evening, and weekend rotations.

G. STATEMENT OF CONFIDENTIALITY

It is the responsibility of every student to maintain the confidentiality of patient information, personnel information, and competitive information regarding a clinical agency's plans and operations.

During clinical experiences, students may learn of certain personal matters pertaining to nature of illness, financial background, family life, etc, of a patient. This information should not be discussed with anyone outside the agency, among employees of the hospital, or among students, unless information is required directly for the care of the patient or as a learning tool within the educational setting.

In addition to patient information, students are expected to use the utmost discretion concerning other confidential information, such as that pertaining to hospital employees or operation of the hospital. Unauthorized disclosure of patient information may result in civil and/or criminal liability under Federal or State laws.

The integrity of all data produced by a Hospital Information System should not be compromised under any circumstances. Data includes printed materials, oral communication, and information

displayed on a computer terminal.

Please note: The preceding policies/standards are the minimum requirements for the student Radiologic Technologist. The student will conform to the respective clinical education center's policies/standards where he/she is assigned for clinical education.

If in the opinion of the Program Director or Coordinator any student's work, conduct, or health might have a detrimental effect of the patients or personnel within a healthcare clinical, said student may be withdrawn from the clinical setting. If in the opinion of the Program Director or Coordinator a student's work is determined to pose a risk to patient safety, a student may be removed from the program immediately.

At any time, a student is not following policies set forth by the Radiologic Technology Program or the associated facilities, they will receive a written warning. If the policies are misused by the student a second time, the student will be dismissed from the program.

CLINICAL EDUCATION EVALUATION

CRITERIA USED IN CLINICAL EVALUATION

The following objectives have been developed for several specific areas so that the student and evaluator can use the following objectives to provide guidance and assistance in evaluation. In any educational endeavor, skills must be learned and mastered. In using the following performance objectives, the evaluator must be aware of the level of competency at which the student should be for the amount of time in the program. If the evaluator has any questions concerning this level, he or she should refer to the rationale and general objectives sections.

I. GENERAL RADIOGRAPHY

Upon completion of his or her clinical assignment, the student will be able to demonstrate knowledge, understanding, and dexterity in four areas of general radiography. These areas include: (a) equipment and accessories, (b) radiographic procedures, (c) radiographic technique, and (d) radiation protection and other safety practices. An acceptable level of competence has been attained when:

A. EQUIPMENT AND ACCESSORIES

1. Describe the type of x-ray tube used in the general radiography room.
2. Describe the general type of x-ray machine used in the general radiography room.
3. Select and use accessory items appropriately to include:
 - a. Supporting devices
 - b. Grids and filters

B. RADIOGRAPHIC PROCEDURES

Perform general radiographic studies and evaluate from the standpoint of:

1. Radiographic and diagnostic quality
2. Accuracy of interpretation of the request
3. Positioning of the anatomic parts
4. Appropriate collimation
5. Correct markers or identifying information

C. RADIOGRAPHIC TECHNIQUE

1. Select the proper technical factors for routine situations and make appropriate adjustments for the unusual case or pathology by manipulating the imaging arrangement. The factors to be altered or arranged in varying patterns of use include:
 - a. Kilovolts, milliamperes, distance, time, and AEC
 - b. Processing procedures: CR/DR

D. RADIATION PROTECTION AND SAFETY PRACTICES PERFORM PATIENT HANDLING TASKS SAFELY TO INCLUDE:

1. Transporting and transferring patients
2. Checking for patient identification
3. Handling patients with infectious diseases
4. Providing radiation protection for patients, personnel, and guests by utilizing shields and by employing correct technical factors to eliminate the necessity for retakes
5. Providing safety from electrical hazards by routinely inspecting equipment wiring
6. Ensure safety keeping room furnishings and accessories properly placed and safely positioned
7. Providing safe storage for patient's belongings, e.g. eyeglasses, dentures, jewelry, etc., which may be temporarily removed during the procedure

II. RADIOGRAPHIC IMAGE PROCESSING DIGITAL

Upon completion of the student's rotation in the radiographic processing and quality control area, the student will demonstrate knowledge, understanding and skills in performing tasks related to radiographic processing and quality control. An acceptable level of competence has been attained when the student is able to:

- A. Make post-exposure radiograph identification
Identify proper index number for quality images
- B. Indicate steps used with PACS
Manipulate and adjust image on computer screen
- C. Annotate and label correct projection on images

III. FLUOROSCOPY

At the termination of the student's rotation in fluoroscopy, they will be able to demonstrate knowledge, understanding and skills in five broad areas: (a) equipment and accessories, (b) radiographic and fluoroscopic procedures, (c) contrast media, (d) radiographic and fluoroscopic technique, and (e) radiation protection and other safety practices. An acceptable level of competence has been achieved when the student is able to:

- A. EQUIPMENT AND ACCESSORIES
 1. Describe the basic principles of fluoroscopy.
 2. Describe the type of fluoroscopic tube used.
 3. Describe the type of fluoroscopic instrument available, i.e:
 - (a) Image intensification.
 - (b) Digital equipment- flat panel.
 - (c) T.V. system.
 - (d) Video recording unit for speech pathology.
 4. Select and use accessory items appropriately to include:
 - (a) Supporting devices.
 - (b) Grids.
 - (c) Examination trays and supplies.
- B. RADIOGRAPHIC AND FLUOROSCOPIC PROCEDURES
 1. Perform tasks specific to fluoroscopy, including:
 - (a) Assist in the operation and adjustment of
 - (1) Digital equipment
 - (2) Image intensifier

- (3) Video tape equipment
 - (b) Assist the physician with the non-exposure aspects of fluoroscopic procedures, e.g.
 - (4) Upper and lower gastrointestinal studies
 - (5) Spine and spinal cord studies
 - (6) Gynecological and urological studies requiring fluoroscopy
 - 2. Perform with only remote supervision technical tasks requiring radiography in combination with fluoroscopy.
- C. CONTRAST MEDIAS**
- 1. Prepare barium mixtures using formulas appropriate to the examination.
 - 2. Select the contrast dispenser appropriate for the specific media and/or examination.
 - 3. Use sanitation techniques to prepare contrast media dispensers and other contrast utensils and containers.
- D. TECHNIQUE**
- 1. Select the proper technical factors for routine fluoroscopic studies and make appropriate adjustments for the unusual patient by manipulating the radiographic image arrangements and factors:
 - (a) Kilovolts, milliamperes, distance, and time
 - (b) Grids and filters
 - 2. Make the proper adjustments for optimum visualization with electronic and digital systems.
- E. RADIATION PROTECTION AND SAFETY PRACTICES**
- 1. Perform patient handling tasks safely, including:
 - a. Transporting and transferring patients
 - b. Checking for patient identification
 - c. Handling patients with infectious diseases
 - d. Providing radiation protection for patients, personnel and guests by utilizing shields, screens, collimators, filters, temporary patient immobilizers, and by employing correct technical factors to eliminate the necessity for retakes
 - e. Providing safety from electrical hazards by routinely inspecting equipment wiring
 - f. Ensuring safety in dimly lighted areas by keeping room furnishings and accessories properly placed and safely positioned
 - g. Providing safe storage for patients' belongings, e.g. eyeglasses, dentures, jewelry, etc, which may be temporarily removed during the fluoroscopic procedure

IV. MOBILE AND SURGERY RADIOGRAPHY

Upon completion of the student's rotation in mobile and surgery radiography, the student will be able to demonstrate knowledge and understanding as well as dexterity in the examination and care of the confined patient and patients undergoing surgical procedures. An acceptable level of competence has been attained when the student is able to:

- A. Utilize rules of body mechanics for the safety of both patient and technologist
- B. Provide the necessary radiation protection while performing bedside or surgical radiographic exams (minimum of 6 feet and at a right angle to patient and primary beam)
- C. Adjust exposure factors specific to mobile and surgical procedures
- D. Make the necessary positioning changes and make compensations for these changes
- E. Utilize proper safety techniques and take proper precautions against electrical hazards
- F. Prevent spread of infection and disease by practicing medical asepsis in patient's room by following the established nursing procedures
- G. Perform all routine bedside and surgical radiographic procedures

V. ORTHOPEDIC RADIOGRAPHY

Upon completion of his or her orthopedic radiography training, the student will be able to demonstrate knowledge, understanding, and skills in four broad areas: (a) equipment and accessories, (b) radiographic procedures, (c) radiographic technique, and (d) radiation protection and other safety practices. An acceptable level of competence has been attained when the student is able to:

A. EQUIPMENT AND ACCESSORIES

1. Describe the type of general x-ray tube used to produce radiographs
2. Describe the general construction and type of x-ray machines used
3. Select and utilize accessory items appropriately, including:
 - a. Supporting devices
 - b. Grids and filters

B. RADIOGRAPHIC PROCEDURES

Perform all general orthopedic examinations to include:

1. All routine radiographic bone studies
2. Routine joint examinations
3. Techniques appropriate for the various supports, braces, casts, and fixation and prosthesis devices

C. RADIOGRAPHIC TECHNIQUE

Select the proper technical factors for routine examinations and make appropriate adjustments for the unusual patients by manipulating the imaging arrangement for varying factors, including:

1. Kilovolts, milliamperes, distance, and time
2. Grids and filters
3. Processing images

D. RADIATION PROTECTION AND SAFETY PRACTICES

Perform patient handling tasks safely to include:

1. Transporting patients from one area to another and transferring patients from one position to another, e.g. stretchers and chairs to beds or tables
2. Checking for patient identification
3. Handling patients with suspected spinal fracture or cord injuries
4. Handling patients with infectious diseases
5. Ensure radiation protection shields, screens, collimators, filters, temporary patient immobilizers, and by avoiding the necessity for retakes because of technical errors
6. Ensure safety room electrical hazards by routinely inspecting equipment wiring, etc
7. Provide security for patient's belongings, e.g. eyeglasses, false teeth, jewelry, etc, which may be removed during the radiographic procedure

VI. MAMMOGRAPHY IMAGING

Upon completion of the mammography imaging lecture, the student will describe the basics of mammography imaging. An acceptable level of competence has been obtained when the student is able to:

- A. Describe the type of x-ray equipment used in mammography.
- B. Describe the imaging arrangements, positions, and techniques used in conventional mammography.
- C. Identify artifacts and other technical flaws if present on the image.
- D. Critique a radiograph in terms of diagnostic quality.
- E. List the proper radiation protection for patient and personnel.

The Kaskaskia College Radiography Program adheres to the JRCERT Position Statement on Breast Imaging Clinical Rotation which can be found on the [JRCERT web site](#) and which is stated below:

With regard to breast imaging, the JRCERT has determined programs must make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, programs will not be expected to attempt to supersede clinical site policies that restrict breast imaging rotations/procedures to students. Students should be advised that placement in a breast imaging rotation is not guaranteed.

The JRCERT reiterates that it is the responsibility of each clinical site to address any legal challenges related to a program's inability to place students in a breast imaging rotation. All students should be informed and educated about the various employment opportunities and potential barriers that may affect their ability to work in a particular clinical staff position.

VII. PATIENT HANDLING TASKS

Throughout all segments of clinical practice, the student will develop the necessary skills in patient care and will understand radiologic patient services as provided in the clinical setting, which will enable him/her to perform in an efficient and courteous manner. An acceptable level of competence has been attained with the student is able to perform patient handling tasks to include the following:

- A. Use proper procedure for identifying patients.
- B. Drape or gown patient for examination.
- C. Transfer patients safely to and from stretchers and chairs.
- D. Check patient's chart for contraindications in reference to procedure, e.g. pregnancy.
- E. Ascertain if the patient is prepared for the procedure.
- F. Explain or answer questions about doctor's instructions.
- G. Explain the x-ray procedure to the patient.
- H. Reassure apprehensive parents of pediatric patients.
- I. Reassure and calm children.
- J. Review printed instructions on procedures with patient or patient's family.
- K. Review patient's clinical history.
- L. Check for clarification of conflicting doctors' orders.
- M. Receive patients on arrival, i.e. introduce self, obtain patient's name.
- N. Give precise and adequate direction to patient concerning procedure.
- O. Observe care to maintain the I.V. flow and integrity of the unit.
- P. Make notations of significant patient physical or emotional response to procedures.
- Q. Provide radiation protecting for personnel and patient.
- R. Inspect for electrical and mechanical hazards and observe rules of safety.
- S. Respect rights and expectations of the patients.
- T. Comply with legal requirements pertaining to safe handling of patients.

VIII. EVENING SHIFT

Evening shift is introduced the first semester of the program and continues through the remainder of the time. Students will be scheduled for 6 weeks of evening shift rotations the first year and another 2 weeks the second year. This shift increases the student's clinical proficiency by providing opportunities for more varied and unique radiography experiences.

ALL EVENING SHIFT ROTATIONS WILL BE SCHEDULED 1:00 PM TO 9:00 PM unless otherwise noted or requested by clinical site.

- A. Practice quality and office procedures.
- B. Demonstrate independence relative to technical expertise.
- C. Develop balance between speed and quality radiography.
- D. Assist and perform orthopedic radiography.
- E. Maintain radiographic records.

- F. Maintain clinical competencies.
- G. Develop close working relationship with ED personnel, staff and physicians.

IX. WEEKEND SHIFT

Weekend shift is incorporated into the 5th semester of the program. Students will be scheduled for 2 weekend shift rotations (Saturday/Sunday) during this semester only. Weekend rotations are unique and are required by all students to complete 4 days of this rotation. Weekend shift rotations will consist of:

- A. SATURDAY/SUNDAY ROTATION
- B. DAY SHIFT (8 HOURS EACH DAY)

If a clinical site does not have an 8-hour Sunday shift, then 2 more Saturdays will be scheduled to complete weekend rotation. This shift increases the student's clinical proficiency by providing opportunities for more varied and unique radiography experiences.

- A. Practice quality and office procedures.
- B. Demonstrate independence relative to technical expertise.
- C. Develop balance between speed and quality radiography.
- D. Assist and perform orthopedic, trauma, skull, and portable radiography.
- E. Maintain radiographic records.
- F. Maintain clinical competencies.
- G. Develop close working relationship with ED personnel, staff, and physicians.

X. MODALITY ROTATIONS

Modality rotations are scheduled the 2nd, 3rd, 4th and 5th semester of the program. Travel to other clinical sites may be required to complete rotations. Modality evaluations must be turned in 2 weeks after completion of the rotation or there will be a 5% drop in the grade for every classroom day after. If at any time a student feels that they cannot complete a rotation for safety reasons, the rotation schedule will be adjusted at the discretion of the Program Director. Students are not obligated to reveal why they may be at risk for a modality rotation.

RATIONAL FOR CLINICAL PERFORMANCE EVALUATION

Purpose: To effectively measure the performance of a student Radiologic Technologist at the completion of a clinical evaluation.

OBJECTIVES OF A PERFORMANCE EVALUATION:

1. To provide feedback for the student radiographer on their clinical performance for each rotation, including praise for noteworthy performance and analysis of deficient performance.
2. To improve individual clinical performance and satisfaction by providing communication between the radiology staff and the student regarding the student's performance.
3. Increase the competency of the student by providing feedback that may lead to self-improvement.
4. To assist the student in understanding their part in the achievement of clinical educational objectives and career goals.
5. Provide a vehicle for focusing on important qualities of clinical skills in order to assess competencies achieved.
6. To provide information for use in educational decisions, terminations, revision of curriculum or class content, and student remediation.
7. To conform to the quality assurance guidelines of the Joint Review Committee on Education in Radiologic Technology.

PROCEDURE

The Clinical Preceptor will meet with Radiology staff members to whom the student was assigned to get feedback and the CP will complete the monthly evaluation on E*Value. The Program Director will view the evaluations each month and document the grades. The student will be able to review the electronic scored evaluation each month. Students can view any comments on the evaluation and agree or disagree with the evaluation. They also can make comments themselves on the electronic evaluation. Any questions/concerns can be addressed with the image critique instructor, clinical coordinator or the program director.

Students **will not** approach the staff members in regards to evaluation scores. This is the responsibility of the image instructor, clinical coordinator, or the program director.

On the next several pages are the clinical evaluation tools be used to determine clinical grades.

A student that receives two evaluations with a score of **70% or lower** within the same semester will receive an "F" in that clinical course. Evaluations are very subjective but if there is valid reasons documented for the low evaluation score and the Program Director and Clinical Coordinator have discussed reasons with the Clinical Preceptor, the student will either be withdrawn from the program or receive a failing grade and will not be able to continue in the radiology program.

Kaskaskia College Radiologic Technology Program Clinical Evaluation

Student _____ Clinical Site _____

Month _____ Course: 101 105 103 201 204

Instructions: Please read each statement and check the appropriate box of the descriptor that best identifies the student. Include comments if needed and return this form to the Clinical Instructor or Image Critique Instructor at your facility.

- 1) **Attendance/Punctuality:** Attends clinicals on assigned date, promptly notifies CI of absences/tardies, and reports to clinicals on time (including breaks & lunches)

- Frequently absent (2 or more within the month) or consistently late
- Excellent, consistently prompt & reliable (0 absences or tardies within the month)
- Doesn't call in, "lost" from the dept.
- Usually punctual (1 absence or tardy within the month)

Comments: _____

- 2) **Personal Appearance/Attire: Adheres to student dress code, wears appropriate uniform, wears name tag, & OSL badge, good** hygiene.

- Professional appearance; well groomed
- Poor hygiene; unacceptable
- Occasionally untidy
- Doesn't adhere to uniform

Comments: _____

- 3) **Cooperation/Attitude:** Demonstrates the ability to be cooperative when working with others, share in the work load, and shows interest in assignments. Accepts constructive criticism and exercises self-control.

- Indifferent; is not part of the team
- Shows interest and willingness to work
- Usually cooperative; complains very little
- Occasional conflict with co-workers/can't accept criticism

Comments: _____

- 4) **Patient Care/Professionalism:** Follows professional standards when dealing with patients, radiographers, and other students.

- Courteous; uses good communication skills
- Indifferent to needs of patient and department
- Occasional negative attitude towards patients, co-workers, or fellow students
- Talks out of line; inappropriate language/rude

Comments: _____

5) **Initiative:** Ability to think constructively and willingness to start and complete exams independently when capable.

- Puts forth no effort, indifferent to workload
- Looks for things to do, very enthusiastic & motivated
- Does only assigned work; needs to improve motivation
- Doesn't perform independently; frequently asked to perform exams.

Comments: _____

6) **Quality of Work:** Accurate positioning, acknowledges proper radiographic image quality. Demonstrate room readiness, radiation protection, patient care, and organization of work.

- Quality of work acceptable with level of learning
- Above average level of learning, seldom needs assistance
- Constantly makes careless and repeated errors
- Work is inconsistent; does well, then makes careless errors

Comments: _____

7) **Adherence to Policies:** Ability to comply to policies and procedures pertaining to clinicals.

- Needs frequent reminders
- Very thorough and conscientious
- Satisfactory; sometimes need reminders
- Neglects work; unreliable

Comments: _____

8) **Judgment:** Ability to apply knowledge and skills to practical applications.

- Impressive thought process; rarely needs follow-up
- Frequently uses poor judgment in stressful situations
- Is unable to logically grasp concepts with exams
- Usually uses good judgment; only asks when in doubt

Comments: _____

9) **Organization of Work:** Ability to perform in a logical and efficient sequence in an accurate and desirable speed.

- Unacceptable; often hinders patient flow
- Very efficient; facilitates patient flow
- Acceptable; works at a steady pace
- Occasionally works at a slow pace

Comments: _____

10) **Technical Knowledge/Adaptability:** Level of student's ability in positioning and technique used to produce desirable radiograph. Ability to adjust to new or unusual conditions when routine must be altered.

- Superior; learns rapidly; consistently accurate
- Good; learns well; usually accurate
- Below average knowledge; slow to learn
- Unacceptable; needs constant instruction & guidance

Comments: _____

Overall Impression of Student's Performance Associated to their Level of Education in The Radiology Program

- Extremely Poor Below Average Average Above Average Excellent

Clinical Instructor's Signature _____ Date _____

Or

Image Critique Instructor's Signature _____ Date _____

Student Signature. _____ Date _____

Student Comments:

****This evaluation is in an electronic format on E*Value

KASKASKIA COLLEGE RADIATION THERAPY EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Technologist Initials

Upon completion of the radiation therapy practice orientation assignment, the student will be able to demonstrate knowledge and understanding of the rationale for using radiation in the treatment of malignant and selected benign pathology. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Differentiate between the various treatment machines in terms of exams performed and purpose.		
2. Explain the purpose/procedure for making and using treatment molds multi-leaf collimators.		
3. Describe the process for setting-up a patient's treatment plan (treatment planning and simulation)		
4. Explain the purpose for morning image review sessions		
5. Explain why blood work is done on a weekly basis for all patients. What does the technologist look for on the lab results? What should the technologist do if they see anything abnormal?		
6. List some of the common side effects resulting from radiation therapy. List some of the rare side effects.		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from staff	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and asks questions	
5. Demonstrates good patient care, safety and radiation protection technique	

C. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

KASKASKIA COLLEGE ULTRASOUND EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Technologist Initials

Upon completion of ultrasound, the student will be able to demonstrate knowledge and understanding of the rationale for using sonography in the diagnosis of various medical conditions. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Explain the basic principles of sonography.		
2. Identify the purposes(s) for performing various diagnostic sonography exams.		
3. Correlate patient symptoms and history to the type of exam performed.		
4. Observe scanning.		
5. Identify major body organs/structures on the display screen or on PACS following the exam.		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from sonographer	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and asks questions	
5. Demonstrates good patient care and safety	

D. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

KASKASKIA COLLEGE NUCLEAR MEDICINE EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Technologist Initials

Upon completion of the nuclear medicine practice orientation assignment, the student will be able to demonstrate knowledge and understanding of the rationale for using radionuclides in diagnosis and therapy. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Explain the basic value(s) and principles of nuclear medicine studies: How does diagnostic information differ from different modalities		
2. Explain radiation safety procedures and precautions, including personnel monitoring and area surveys.		
3. Describe how a computer is used to acquire an image in nuclear medicine and to post process the images		
4. Assist in patient preparation for scans		
5. Briefly explain quality control measures in the use of radiopharmaceuticals		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from staff	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and asks questions	
5. Demonstrates good patient care, safety and radiation protection technique	

E. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

KASKASKIA COLLEGE SPECIAL PROCEDURES EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Tech Initials

Upon completion of this special procedures assignment, the student will be able to demonstrate knowledge and understanding of angiographic studies utilizing special equipment and techniques that dynamically demonstrate functioning organs or systems. The student will be able to assist in special procedures examinations. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Assist in the preparation of contrast media for pressure injection		
2. Explain the need and use of special needles, guidewires, and catheters required for certain procedures		
3. Describe observed procedures in terms of: *reason for examination/procedure *anatomy visualized *method and entry for injection of contrast *contrast media *patient preparation *basic procedure *required projections		
4. Practice radiation safety during specials		
5. Assist in opening and preparing sterile tray and instruments utilizing proper technique		
6. Glove and gown utilizing proper technique		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from staff	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and can apply theory to task	
5. Demonstrates good patient care, safety and radiation protection technique	

F. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

KASKASKIA COLLEGE MAGNETIC RESONANCE EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Tech Initials

Upon the completion of the clinical rotation in MRI, the student will be able to demonstrate knowledge and understanding of the rationale for using MRI in the diagnosis of various medication conditions. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Explain the basic principles of magnetic resonance		
2. Explain the diagnostic value(s) of performing MR		
3. Assist in setting-up the imaging room for various exams		
4. Enter client information and scanning parameters into the computer or access patient worklist.		
5. Differentiate between magnets used and needed for diagnostic studies		
6. Assist with obtaining patient history and assist with patient education		
7. Explain why magnetic and radiofrequency shielding may be necessary		
8. Recognize basic anatomy on MRI images		
9. Safety regulations discussed (as detailed on back page)		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from staff	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and asks questions	
5. Demonstrates good patient care and safety	

G. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

MAGNETIC RESONANCE SAFETY REQUIREMENTS

As Per ACR Guidelines (2013)

All readily removable metallic personal belongings and devices must be removed before access to MRI. (E.g. watches, jewelry, pagers, cell phones, body piercings, contraceptive diaphragms, metallic drug delivery patches, metallic fasteners such as hooks or zippers, hair accessories)

Prior to starting your rotation, you will be asked to complete this worksheet with possible items that could pose a risk when working with MRI. The following items are considered incompatible with MRI.

- Person with history of potential ferromagnetic foreign object penetration.
- Person with history of exposures to surgery, trauma, metallic foreign objects
- Person with any of the following:

INCOMPATIBLE ITEMS

- Implanted cardiac pacemakers
- Diaphragmatic pacemakers
- Aneurysm clip
- Biostimulator
- Artificial eye
- Any type of surgical clip or staple
- Medication patch
- Tissue expander
- Diaphragm, IUD, Pessary
- Body piercing wig, hair implants
- Radiation seeds (cancer treatment)
- Any type of metal object (bullet, shrapnel)
- Cochlear implant
- Implanted drug pump
- Spinal device fixation
- Any type of coil, filter, shunt or stent
- Implantable cardioverter defibrillators (ICDs)
- Electromechanically activated devices
- Neurostimulator
- Penile implant
- Eyelid spring
- IV access port
- Artificial limb or joint
- Removable dentures, false teeth or partial plate
- Surgical mesh
- Tattoos or tattooed eyeliner
- Any type of implant held in place by a magnet
- Artificial heart valve
- Hearing aid
- Halo vest
- Spinal fusion procedure

Patient Care:

Only MRI designated stretchers, wheelchairs, and oxygen tanks can be used in the MRI department. All portable equipment should be appropriately labeled.

MRI personnel should also check for the following before bringing patient into the MRI area:

- Endotracheal tube
- Swan-Ganz catheter
- Extra ventricular device
- Arterial line transducer
- Foley catheter with temperature sensor and/or metal clamp
- Rectal probe
- Esophageal probe
- Tracheotomy tube
- Guidewires

These safety regulations have been reviewed with the student prior to entering the MRI area:

Student Signature

Technologist's Signature

Date

KASKASKIA COLLEGE COMPUTERIZED TOMOGRAPHY EVALUATION

Student:	Week:	Clinical Site:
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Days of Attendance	Time In	Time Out	Tech Initials

Upon the completion of the clinical rotation in CT, the student will be able to demonstrate knowledge and understanding of the rationale for using CT in the diagnosis of various medication conditions. An acceptable level of competence has been attained when the student is able to:

Question	Yes	No
1. Describe the machine that is operated at your clinical site, age, type, etc.		
2. Perform the warm ups and QC made prior to the first exam of the day		
3. Enter patient data into log book and computer		
4. Assist in positioning the patient for their exam		
5. Explain why contrast agents are used in certain examinations		
6. Critique a brain CT - including the ventricles and Circle of Willis		
7. Describe the preparation of the patient for having a brain and abdominal scan		
8. Identify the CT system components: gantry assembly and computer control console		
9. Recognize basic anatomy on CT image		

- 3 = student meets expectations
- 2 = student needs improvement
- 0 = student lacks the appropriate skills

A. Personality/Professional Relations

Evaluation Criteria	Score
1. Student adheres to dress code, hygiene, and conduct.	
2. Student is punctual, attends clinical on assigned dates, conforms to clinical requirements	
3. Uses available time effectively	
4. Shows good, professional judgement	
5. Student appreciates and accepts guidance from staff	

B. Performance

Evaluation Criteria	Score
1. Student shows initiative to understand exams	
2. Quantity of work is appropriate	
3. Offers assistance and keeps oneself busy	
4. Student applies the knowledge he/she has acquired and can apply theory to task	
5. Demonstrates good patient care, safety and radiation protection technique	

C. Abstract

_____ 1. To be done on a 4" x 6" notecard including: Title, author, journal, date, summary of article, and your *opinion of article*. Both sides of notecard should be completed with legible writing, correct spelling and grammar. Abstracts are worth 20 points. Staple abstract to the evaluation before turning in evaluation.

Student Signature

Technologist's Signature

Revised 6/19

Total Points: _____

RATIONALE FOR IMAGE ACQUISITION AND EVALUATION CRITIQUE SESSIONS

Purpose: The Image Acquisition and Evaluation sessions are to provide the opportunity for continual review and reinforcement of theoretical concepts with an evaluation of the same.

OBJECTIVES OF THE IMAGE ACQUISITION AND EVALUATION

1. To provide the opportunity for the student/instructor to correlate didactic and clinical education.
2. To review radiographic procedures with specific emphasis on:
 - a. Principles of radiographic exposure.
 - b. Radiographic procedures/routines at each hospital.
 - c. Radiographic image evaluation.
 - d. Methods of patient care in the respective rotation.
 - e. Equipment manipulation in the respective rotation.
 - f. Human structure and function.
 - g. Pathology.
3. To provide all students assigned at the respective affiliate to share in the information gained by other students in their rotations with respect to:
 - a. Routine techniques
 - b. Routine projections/procedures
 - c. Room characteristics
4. To provide information for use in education decisions, revision of curriculum or class content, and student remediation.
5. To conform to the quality assurance guidelines of the JRCERT.
6. To encourage the student to utilize critical thinking techniques.

Procedure

1. The scheduling of the Image Acquisition and Evaluation sessions will be handled individually for each affiliate to minimize the loss of clinical experience.
2. The Image Acquisition and Evaluation sheet will be completed for each student when it is their turn to present a case.
3. The following Image Acquisition and Evaluation procedure sheet will be closely followed.

PROCEDURAL STEPS FOR IMAGE ACQUISITION AND EVALUATION

1. Prepared for critique, knowledge of exam, exam log sheets, attendance, and examples of work ethics
2. Positioning routine views and images – the number and name of projections, the rotation of the part, the angulation of the x-ray tube, evaluation criteria, breathing instructions, image free of error, markers, and collimation
3. Anatomy, Pathologies and Body habitus -bony structures, landmark articulations, normal variances, and physiological function of part examined.
4. Technical factors – kVp, mAs, AEC, Cells, Grids and EI#
5. Image quality factors, Anatomy and Technique Quiz

It is recommended that the above information be prepared before the critique sessions and may be used during the evaluation process. The critique sheet may be used as a guide.

**IMAGE ACQUISITION AND EVALUATION
RADIOLOGIC TECHNOLOGY KASKASKIA COLLEGE**

X-RAY 105, 103, 201, 204

STUDENT NAME: _____ DATE: _____

IMAGING PROJECTION: _____

OBJECTIVES POINTS

A. ATTITUDE/PARTICIPATION (5 points- 1 point each)

- 1. Prepared/Knowledge of Exam/Attendance _____
- 2. Daily Exam Log/Work Ethic _____

B. POSITIONING (20 points- 2 points each)

- 1. Position of Patient & Part/List routine views/Central Ray/SID _____
- 2. Breathing Instructions/Collimation/Marker _____
- 3. Image free of errors/Evaluation Criteria (2 x's) _____

C. TECHNICAL KNOWLEDGE (10 points – 2 points each)

- 1. Technique used- kVp, mAs, AEC, Cells, Grid/non-grid or EI# _____

D. ANATOMY KNOWLEDGE (15 points)

- 1. Anatomy (10 points) _____
- 2. Pathology/Body Habitus-
any change of positioning/technique (5 points) _____

**E. QUIZ: Image Quality, Anatomy, Radiation Protection & Techniques
(25 questions 2 pts. each = 50 points)**

/100

CLINICAL FACILITY _____

STUDENT SIGNATURE _____

INSTRUCTOR SIGNATURE _____

IMAGE ACQUISITION AND EVALUATION
RADIOLOGIC TECHNOLOGY KASKASKIA COLLEGE
X-RAY 101

STUDENT NAME: _____ DATE: _____

IMAGING PROJECTION: _____

OBJECTIVES POINTS

A. ATTITUDE/PARTICIPATION (5 points- 1 point each)

- 1. Prepared/Knowledge of Exam/Attendance _____
- 2. Daily Exam Log/Work Ethic _____

B. POSITIONING (20 points- 2 points each)

- 1. Position of Patient & Part/List routine views/Central Ray/SID _____
- 2. Breathing Instructions/Collimation/Marker _____
- 3. Image free of errors/Evaluation Criteria (2 x's) _____

C. TECHNICAL KNOWLEDGE (10 points – 1 points each)

- 1. Technique used- kVp, mAs, AEC, Cells, Grid/non-grid & EI# _____
- 2. Technique changes- (mAs, 15% rule, grid, & distance) _____

D. ANATOMY KNOWLEDGE (15 points)

- 1. Anatomy (10 points) _____
- 2. Pathology/Body Habitus-
any change of positioning/technique (5 points) _____

**E. IMAGE QUALITY- define each and explain how affects the image (how & why)
(5 PTS EACH = 30 points)**

	Points		Points
Receptor Exposure		Spatial Resolution	
Contrast		Artifacts	
Distortion		Radiation Protection	

CLINICAL FACILITY _____

STUDENT SIGNATURE _____

INSTRUCTOR SIGNATURE _____

CLEARANCE EVALUATIONS – GRADE DETERMINATIONS

Purpose: To effectively measure the performance and knowledge of the student Radiologic Technologist at the completion of a clinical clearance. The student has to identify the following with a 12 or better out of 15. If the student receives below a 12, that grade will be counted into their grade, but the student will not receive a clearance until they receive a 12 or better out of 15.

If clearance is simulated, is a C-Arm, or special procedure with no overhead- student doesn't receive any points/just completion

OBJECTIVES

Position of Patient:	_____	Image free of Artifacts:	_____
Positions of Part:	_____	Marker Placement:	_____
Central Ray:	_____	Evaluation Criteria:	_____
SID/Grid:	_____	Technique:	_____
Collimation:	_____	Breathing Instructions:	_____
Anatomy (5 pts):	_____		

Total Score: _____/15

COMPETENCY CLEARANCES OF SPECIFIC RADIOGRAPHIC PROCEDURES

PHILOSOPHY OF CLEARANCES

The Radiologic Technology Program of Kaskaskia College and its affiliates complies with the ASRT suggestions, as is indicated by the following plan.

The clinical education aspect of the Radiologic Technology curriculum requires the successful student to integrate cognitive, psychomotor and affective skills in the performance of radiographic procedures. The student moves from the role of observer to “doer” during this development process to ensure and reinforce affective and psychomotor domains. After the student has performed a specific task a number of times, there is a display of proficiency. At this point, the student can be evaluated on the complete process of cognitive, affective and psychomotor skills that are employed in completing the specific radiographic procedure.

The Clearance Process is a **two-step process**. The first step is when the radiographer observes and grades the student on a clearance. Then that exam needs to be reviewed and analyzed with the critique instructor. The student needs to obtain at least 85% or better for the clearance to be accepted. Once these two steps are completed, the student is considered cleared on an exam.

A CLEARANCE IS UNACCEPTABLE IF THE CRITIQUE INSTRUCTOR DETERMINES THE POSITIONING IS INCORRECT and/or THE STUDENT RECEIVES LOWER THAN A 12 ON CLEARANCE EVALUATION. If the student receives a grade below 12, that grade will be counted in the gradebook but the student will have to do the clearance again and must receive a 12 or higher for the clearance to be accepted.

PLANS FOR CLEARANCES

1. The cognitive and psychomotor skills are presented in the campus laboratory.
2. The student must complete a number of trials prior to asking for a clearance of the radiographic procedure.

ORIGINAL = 2 trials as evidence in student record of clinical performance- a trial means that the student should perform 75% of the exam. Sophomores may obtain a clearance with only 1 trial.

RECYCLED AT UNACCEPTABLE LEVEL = 2 additional trials as evidence in student record of clinical performance.

RECYCLED AT MINOR IMPROVEMENT LEVEL = 1 additional trial as evidenced in student record of clinical performance.

3. The student must be cleared with a minimum competency level of 80%, as is supported by the ASRT.
4. If a student has to repeat any of the images while trying to obtain a clearance, that examination will not be allowed as a clearance. No repeats are allowed while obtaining a clearance.
5. The student will be permitted two (2) attempts for each clearance (original + 1 recycle). If the student is not successful in two attempts, the requirements for clinical performance have not been met. This constitutes failure of clinical education.
6. The student may request clearance of any of all of the exams indicated for the specific semester of enrollment or previous semesters of enrollment. (Each semester is equal to a category.)
7. **The student must clear the specific number of clearances per semester to ensure successful completion of the specific clinical education. All clearances must be completed on the last scheduled image critique session! If the student does not have the required clearances by the last critique they will fail the course.**
8. The student may not request completed clearance of any of the exams indicated for subsequent semesters.
9. In addition to complying with the clearance procedure, the student must maintain satisfactory clinical participating, as is indicated by the semester objectives and the ongoing evaluation processes.
10. It is the student's responsibility to assure the maintenance of an accurate and up-to-date record of clearances, as is maintained by the clinical coordinator and program director.
11. The program director reserves the right to approve on an individual basis.
 - a. Waiver of the 2 trials for limited specific examination area or when completing a final
 - b. Clearances to be obtained in the campus energized laboratory
12. Pediatric clearance classification: 6 and under.
13. Geriatric patient is considered at least 65 years old and physically or cognitively impaired as a result of aging
14. Pediatric orthopedic and portable extremity can be any combination of extremity exams.
15. Clearances will be completed ASAP.
16. Trauma clearances are defined as the following:

Trauma shoulder must include a scapular Y, Transthoracic or Axillary view, * Trauma upper extremity cannot be a shoulder, *Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.
17. DIGITAL FLUORO CLEARANCES – clearances may be obtained on digital exams even if no overhead images are taken
 - Emphasis will be placed on exam procedure, equipment manipulation, preparation for the exam, assistance to the patient and assistance to the radiologist
 - Images for review may be obtained from another exam or use a textbook for reference
18. One elective has to be from the Head category and two electives from Fluoroscopy section.

PLANS FOR TRIALS

1. Two trials per exam.
2. Trials must have the student's markers visible and must be **MAJORLY- 75% of the exam-** completed by the student.
3. Trials can be obtained on any exams indicated at any time during the program.
4. Trials can be carried from one semester to the next.

NOTE: The student must successfully meet the set minimum number of clearances per semester to meet the requirements of the specific semester clinical education course. If these minimal clearances are not met, the student is unsuccessful in completing the semester's clinical education course, failure of clinical education.

(REFER TO #4 OF PLAN FOR CLEARANCES.)

THE IMAGE PRESENTED FOR A CLEARANCE WILL BE VALID ONLY IF THE STUDENT'S MARKERS ARE VISIBLE. THE CLINICAL COORDINATOR WILL COMPLETE NO CLEARANCES AFTER THE LAST IMAGE ACQUISITION AND EVALUATION CRITIQUE SESSION UNLESS PRIOR APPROVAL.

CLEARANCE EVALUATION FORM RADIOLOGY PROGRAM

Name:		Clinical Site:	1st	2nd	3rd	4th	5th
1st Trial	Date:	R.T. initials	Pt. ID	Clearance Attempts:			Clearance Completion:
2nd Trial	Date:	R.T. initials	Pt. ID	Date:	R.T. initials:	Date:	R.T. initials:
				Date:	R.T. initials:	Date:	R.T. initials:

ONLY EXAMS LISTED BELOW ARE ELIGIBLE FOR CLEARANCES

Exam Name	Man /Ele	<small>Date reviewed with I/C instructor</small>	<small>Eligible for simulation. Pat/Sim</small>	Exam Name	Man /Ele	<small>Date reviewed with I/C instructor</small>	<small>Eligible for simulation. Pat/Sim</small>
CHEST and THORAX				<input type="checkbox"/> Thoracic spine: 2 nd	Man		√
<input type="checkbox"/> Chest Routine: 1 st	Man			<input type="checkbox"/> Lumbar spine: 2 nd	Man		
<input type="checkbox"/> Chest AP-Stretcher or WC: 1 st	Man			<input type="checkbox"/> X-table (horizontal beam) Lat Spine: 2 nd	Man		√
<input type="checkbox"/> Ribs: 2 nd	Man		√	<input type="checkbox"/> Pelvis: 1 st	Man		
<input type="checkbox"/> Chest- Lat Decub: 1 st	Ele		√	<input type="checkbox"/> Hip: 1 st	Man		
<input type="checkbox"/> Sternum: 2 nd	Ele		√	<input type="checkbox"/> Cross Table Lateral Hip: 1 st	Man		√
<input type="checkbox"/> Upper Airway (Soft Tissue Neck) :2 nd	Ele		√	<input type="checkbox"/> Sacrum and/or coccyx: 2 nd	Ele		√
<input type="checkbox"/> Sternoclavicular Joints: 2 nd	Ele		√	<input type="checkbox"/> Scoliosis Series: 2 nd	Ele		√
UPPER EXTREMITY				<input type="checkbox"/> S.I. Joints	Ele		√
<input type="checkbox"/> Finger or Thumb: 1 st	Man		√	ABDOMEN			
<input type="checkbox"/> Hand: 1 st	Man			<input type="checkbox"/> Abdomen Supine: 1 st	Man		
<input type="checkbox"/> Wrist: 1 st	Man			<input type="checkbox"/> Abdomen Upright: 1 st	Man		√
<input type="checkbox"/> Forearm: 1 st	Man			<input type="checkbox"/> Abdomen Decubitus: 1 st	Ele		√
<input type="checkbox"/> Elbow: 1 st	Man			<input type="checkbox"/> Intravenous Urography: 1 st	Ele		
<input type="checkbox"/> Humerus: 1 st	Man		√	** FLUOROSCOPY			
<input type="checkbox"/> Shoulder: 1 st	Man			<input type="checkbox"/> UGI single or double: 2 nd	Ele		
<input type="checkbox"/> Clavicle: 1 st	Man		√	<input type="checkbox"/> Contrast Enema single or double: 2 nd	Ele		
<input type="checkbox"/> Scapula: 1 st	Ele		√	<input type="checkbox"/> Small Bowel Series: 2 nd	Ele		
<input type="checkbox"/> A.C. Joints: 1 st	Ele		√	<input type="checkbox"/> **Esophagus	Ele		
<input type="checkbox"/> **Trauma Shoulder or humerus: 1 st	Man			<input type="checkbox"/> Cystourethrogram/cystogram:2 nd	Ele		
<input type="checkbox"/> **Trauma Upper Ext: 1 st	Man			<input type="checkbox"/> ERCP: 4 th	Ele		
LOWER EXTREMITY				<input type="checkbox"/> Myelography: 4 th	Ele		
<input type="checkbox"/> Toes: 1 st	Ele		√	<input type="checkbox"/> Arthrography: 4 th	Ele		
<input type="checkbox"/> Foot: 1 st	Man			<input type="checkbox"/> Hysterosalpingography: 4 th	Ele		
<input type="checkbox"/> Ankle: 1 st	Man			MOBILE C-ARM			
<input type="checkbox"/> Knee: 1 st	Man			<input type="checkbox"/> **C-Arm Procedure:4 th	Man		√
<input type="checkbox"/> Tibia-Fibula: 1 st	Man		√	<input type="checkbox"/> **Surgical C-Arm: 4 th	Man		√
<input type="checkbox"/> Femur: 1 st	Man		√	MOBILE RADIOGRAPHY			
<input type="checkbox"/> Patella: 1 st	Ele		√	<input type="checkbox"/> Port. Chest: 2 nd	Man		
<input type="checkbox"/> Calcaneus: 1 st	Ele		√	<input type="checkbox"/> Port. Abd: 2 nd	Man		
<input type="checkbox"/> **Trauma Lower Ext: 1 st	Man			<input type="checkbox"/> Upper or Lower Extremity: 4 th	Man		
*HEAD				**PEDIATRIC PATIENT			
<input type="checkbox"/> Skull: 4 th	Ele		√	<input type="checkbox"/> Chest Routine: 4 th	Man		√
<input type="checkbox"/> Facial Bones: 4 th	Ele		√	<input type="checkbox"/> Upper or Lower Extremity: 4 th	Ele		√
<input type="checkbox"/> Mandible (Panorex): 4 th	Ele		√	<input type="checkbox"/> Abdomen: 4 th	Ele		√
<input type="checkbox"/> Temporomandibular Jts: 4 th	Ele		√	<input type="checkbox"/> Mobile study: 4 th	Ele		√
<input type="checkbox"/> Nasal Bones 4 th	Ele		√	**GERIATRIC PATIENT			
<input type="checkbox"/> Orbits: 4 th	Ele		√	<input type="checkbox"/> Chest Routine: 2 nd	Man		
<input type="checkbox"/> Paranasal Sinuses: 4 th	Ele		√	<input type="checkbox"/> Upper or Lower Extremity: 2 nd	Man		
SPINE and PELVIS				<input type="checkbox"/> Hip or Spine: 2 nd	Ele		
<input type="checkbox"/> Cervical spine: 2 nd	Man						

- * **10** mandatory general pt. care activities, **36** mandatory imaging procedures, and **15** elective radiologic procedures. 10 total number of simulations allowed.
- * Trauma shoulder must include a scapular Y, Transthoracic or Axillary view, * Trauma upper extremity cannot be a shoulder,
- *Trauma requires modifications in positioning due to injury with monitoring of the patient’s condition.
- *Head section- must have at least one elective procedure.
- *Cross-Table horizontal beam, Lateral patient recumbent.
- *Fluoroscopy Studies section- must have at two elective procedures and perform per site protocol.
- *Esophagus- NOT swallowing dysfunction study.
- *C-Arm procedure- requiring manipulation to obtain more than one projection
- *Surgical C-Arm procedure- requiring manipulation around a sterile field.
- * Pediatric patient is considered 6 years or under
- * Geriatric patient is considered at least 65 years old and physically or cognitively impaired as a result of aging
- *If student does not complete clearance after 3 attempts, they have to review exam in lab with instructor.

PSYCHOMOTOR SKILL CHECKLIST

Acceptable = 2, Requires Minor Improvement = 1, Unacceptable = 0, Not Applicable = NA

OBSERVATION:

1. Patient identity/Examination order verification	2	1	0	
2. Patient assessment, patient properly attired	2	1	0	
3. Introduce self to patient, directions given to patient	2	1	0	
4. Room preparation/Equipment operation	2	1	0	
5. mAs & kVp/AEC/APR – proper for examination	2	1	0	
6. SID, Tube alignment, and IR alignment	2	1	0	
7. Patient alignment, correct body rotation	2	1	0	
8. Side identification, R or L in the correct placement	2	1	0	
9. Positioning – AP, PA, Frontal, Single Image	2	1	0	
10. Positioning – Lateral	2	1	0	
11. Positioning - _____ (please specify)	2	1	0	
12. Patient management/safety	2	1	0	
13. Evidence of collimation	2	1	0	
14. Image processing/Image evaluation	2	1	0	
15. Correct EI# or S#	2	1	0	
16. Gonadal shielding (if applicable) under the age of 60	2	1	0	N/A
Reason for not shielding _____				

Evaluator Signature: _____

<p><u>CLEARANCE GRADE FORM</u> <u>(For Image Critique Instructors Only)</u> <i>Must receive a 12 or better (80%)</i> <i>If clearance is simulated, is a C-Arm, or special procedure with no overhead- student doesn't receive any points/just completion</i></p>	
Position of Patient: _____	Image free of Artifacts: _____
Positions of Part: _____	Marker Placement: _____
Central Ray: _____	Evaluation Criteria: _____
SID/Grid: _____	Technique: _____
Collimation: _____	Breathing Instructions: _____
Anatomy (5 pts): _____	
Total Score: _____/15	

POSITIONING FINAL EXAMINATION EVALUATOR/STUDENT NOTES

To comply with the ASRT recommendations for competency-based clinical education, this evaluation has been constructed. The student will be evaluated at the end of the semester on an examination listed in the appropriate semester on the competency clearance record. To assure that the student is competent to perform the examinations previously cleared, the clinical instruction staff will select appropriate examinations for the student's performance to be evaluated. This evaluator will note the following items as he/she records the score for each line.

PREPARATION

1. EVALUATION OF REQUISITION – did the student correctly identify the procedure and routine views?
2. ROOM PREPARATION – did the student ensure that the table was clean, appropriate cassettes available, appropriate patient information typed in the CR/DR equipment, tube placement, table in position for start of examination, and ancillary supplies adequate for examination?
3. COLLIMATION- is collimation attempted (automatic collimation override on pediatric examinations)?

PATIENT CARE

1. ASSISTANCE TO PATIENT – did the student assist the patient to the radiographic room, talk with the patient in a gentle manner, give proper instructions for moving and breathing, have the patient gowned properly, and follow the proper procedure for isolation of the patient?
2. WORKFLOW/EFFICIENCY – did the student perform the examination in a timely and effective manner?
3. IMAGE FREE OF ARTIFACTS- were images free of clothing, jewelry or any other artifacts that could interfere with correct diagnosis?

POSITIONS/PROCEDURES

1. CORRECT POSITIONING – are the positions the student is attempting exactly what is required?
2. CENTERING PATIENT AND CENTRAL RAY – is the IR directed to the center portion of the part to be demonstrated in the middle of the image? Is the patient rotated correctly? Is the unnecessary anatomy removed from the image area?
3. BREATHING INSTRUCTIONS/MARKER PLACEMENT – does the student give the patient the correct breathing instructions for procedure? Was the "R" or "L" in the correct place?
4. EQUIPMENT MANIPULATION – does the student know how to work with various locks on the tube head, turn the tube from horizontal to vertical (and vice versa), insert and remove cassettes from the appropriate holders, select factors at control panel, position the tube/portable machine correctly and adapt for technique changes in SID, grid ratio, insert patient data and information for CR/DR, and collimation? Is the correct image size utilized for the examination with respect to the department's routing and the patient's size? Is the CR cassette or DR images receptor's long axis correctly aligned with the part's long axis?
5. KNOWLEDGE OF TECHNIQUE- does the student set the appropriate technique for the anatomy that is being imaged?
6. ANATOMY – is the student able to identify correct anatomy on all projections?

IMAGE QUALITY

1. An IMAGE QUALITY quiz is given worth 30 points concerning the following:

2. RECEPTOR EXPOSURE/CONTRAST – Is the quantity of x-rays appropriate on IR? Does the student theorize the changes in receptor exposure as changes in technique are presented? Does the student recognize the image's contrast, cite the correct criteria for determination of the same and state the effects of technique change on contrast?
3. CONTRAST RESOLUTION/SPATIAL RESOLUTION- Does the student explain contrast resolution and the factors that effect it? Does the student theorize the effects of sharpness of the structural edges recorded in the image? Does the student cite the information that effects spatial resolution?
4. DISTORTION/WINDOWING- Does the student describe the two types of distortion and describe manipulation factors?
5. EXPOSURE LATITUDE/IMAGE SIGNAL- Does the student relate acceptable technical ranges? Does the student describe factors that affect image signal to produce quality images?
6. ARTIFACTS/RADIATION PROTECTION – Can the student list and describe artifacts? Did the student wear a lead apron and gloves when it was appropriate? Does the student wear their personal dosimeter all the time? Does the student utilize proper technique factors and explain the importance of radiation protection?

GRADING OF FINAL EXAM

A student must receive a score of 80% or better on the Imaging Practical to pass the final examination. If a student fails to achieve this score on the initial exam, he/she will repeat the final exam (does not have to be the same procedure). The scores from both exams will be averaged and an 85% or better must be achieved to pass the course. ***IF THE STUDENT FAILS THE FINAL EXAM A SECOND TIME, THIS CONSTITUTES FAILURE OF THE CLINICAL COMPONENT OF THE RADIOGRAPHY PROGRAM AND WILL CONSTITUTE AUTOMATIC DISMISSAL FROM THE PROGRAM.***

PROCEDURE FOR FINAL EXAMS ON DIGITAL IMAGING FLUORO EXAMS

Finals may be completed on digital imaging fluoroscopy exams even if no overhead films are taken.

- Emphasis will be placed on exam procedure, equipment manipulation, preparation for the exam, assistance to the patient, and assistance to the radiologist
- Images for review may be pulled from another exam, or the textbook may be used for reference
- Any items on the final exam form that do not apply will be marked n/a and final total point values adjusted (please refer to the final exam form)

NOTE: THE EVALUATOR RESERVES THE RIGHT TO TERMINATE ANY ATTEMPT ON A SPECIFIC POSITION IF, IN THEIR OPINION, THE IMAGE WOULD NEED TO BE REPEATED DUE TO A TECHNICAL ERROR BY THE STUDENT.

CLINICAL POSITIONING FINAL EXAMINATION FORM X-RAY 101

STUDENT: _____ DATE: _____ COURSE: _____

RADIOGRAPHIC PROCEDURE: _____

POSITIONS: 1 _____ 2 _____ 3 _____

IMAGING PRACTICAL 2 = Above Average 1 = Average 0 = Below Average

PREPARATION

1. Evaluation of requisition	
2. Room preparation	
3. Collimation	

PATIENT CARE

1. Assistance to patient	
2. Workflow/Efficiency	
3. Image free of artifacts (clothing, jewelry, etc.)	

PROCEDURE

POSITIONS:	Image 1	Image 2	Image 3
1. Correct positioning			
2. Centering patient and central ray			
3. Breathing instructions/Marker placement			
4. Equipment manipulation			
5. Knowledge of techniques			
6. Anatomy (4 points per view)			

TOTALS: ONE VIEW /26= _____ %
TWO VIEWS /40= _____ %
THREE VIEWS /54= _____ %

IMAGE QUALITY QUIZ

<ul style="list-style-type: none"> IMAGE TECHNICAL QUALITY QUIZ- 25 points (receptor exposure, contrast, spatial resolution, distortion, artifacts, radiation protection) 	/25
--	------------

COMMENTS:

STUDENT SIGNATURE: _____ EVALUATOR: _____

CLINICAL GRADE DETERMINATION

Final semester grade is based on:

- A. CLINICAL EVALUATIONS – 25% OF FINAL GRADE
******Two evaluations below 75% in one semester will result in the student failing clinicals.**
RECORDED POINTS/POSSIBLE POINTS = %
- B. IMAGE CRITIQUE SESSIONS – 25% OF FINAL GRADE
RECORDED POINTS/POSSIBLE POINTS = %
- C. COMPETENCY CLEARANCES – 25% of FINAL GRADE
RECORDED POINTS/POSSIBLE POINTS = %
The number of clearances required for each semester is listed on the competency progression record sheet. If the student does not meet the specified number of clearances for a semester, then a grade of “F” will be given for clinical and the student will be dismissed from the program.
- D. RADIOGRAPHIC POSITIONING
FINAL EXAMINATION – 25% OF FINAL GRADE
RECORDED POINTS/POSSIBLE POINTS = %
- E. CLINICAL GRADING: To assure competency as a safe radiographer the student must maintain a minimum average of 85.0% to remain in the program. The following scale will apply to courses XRAY 101, 105, 103, 201, and 204.

95.0% - 100% = A 90.0% - 94.4% = B 85.0% - 89.9% = C

FORMULA FOR GRADE COMPUTATION

The percentage scores for each component (clinical evaluations, image critiques, clearances and final examinations) will be added together and then divided by 4 to derive the average percentage score. The percentage scores will be referenced to the Radiology Program grading scale to find the letter grade to be recorded for the clinical education grade. **For every absence over 2, there will be a 5% dock in the grade.**

EXAM LOG SHEET

The student is responsible for maintaining an exam log sheet every day at clinical. The student will write down all the information indicated for each exam he/she majorly completes. At each image critique, the image critique instructor will review the exam log sheets. There are different exam log sheets. The freshmen exam log sheet is used for the first semester, and the sophomore exam log sheet is used for the remainder of the program.

RECOMP POLICY

Periodically each semester, the college instructors may test students on clearances already completed if instructor/clinical instructor feels student is inadequate with those procedures. Instructors will be given clearance summaries for each student prior to the beginning of clinical. During the instructor's clinical visit, they may randomly choose an exam on which the student may recomp.

If the student fails the recomp exam (below 85%), he or she will lose the competency for that exam and must proceed with the original competency clearance plan. **IF THE STUDENT FAILS TO ACHIEVE A COMPETENCY ON THAT EXAM BY THE END OF THE SEMESTER, HE OR SHE WILL RECEIVE AN "F" FOR CLINICAL.**

EXAM LOG for FRESHMAN 1st Semester Only

Date	Exam	O Observe	A Assisted	P Performed	SID	kVp	mAs	Exposure Index#	Grid/Non Grid	AEC or Manual

Name: _____

Faculty reviewed: _____

Date: _____

EXAM LOG for FRESHMAN 2nd Semester Until Graduation

Name: _____ Semester: _____

DATE	EXAM	Index#	KVp	mAs	Clearance or Trial	Collimaton to part/IR (yes/no)	Repeated any view (yes/no)	Supervision with repeat (yes/no)	Comments: (pt. build, level of difficulty,marker, etc.)

Total Repeats _____ in at the end of the semester.

Faculty Reviewed: _____ Date: _____

RECOMP CLEARANCE EVALUATION FORM

KASKASKIA COLLEGE RADIOLOGIC TECHNOLOGY

STUDENT: _____

RECOMP EXAM: _____

CLINICAL FACILITY: _____

PRIOR CLEARANCE DATE: _____

INSTRUCTIONS

Please print the student's name, examination, and clinical facility information for this re-comp clearance. The instructor will inform the student before the re-comp examination is started.

Re-comp clearances will be returned to the Program Director and placed in the student's file. If the re-comp attempt is unsuccessful (below 85%), then the student will lose the original competency for that exam. The student must then proceed with the original competency clearance plan to regain the clearance. If the student fails to achieve another competency clearance by the end of the semester, this constitutes failure of clinical. The instructor is encouraged to make appropriate comments below.

COMMENTS:

COMPLETION DATE: _____

STUDENT'S SIGNATURE: _____

CLINICAL COORDINATOR: _____

Revised 5/18

PSYCHOMOTOR SKILL CHECKLIST

Acceptable = 2, Requires Minor Improvement = 1, Unacceptable = 0, Not Applicable = NA

OBSERVATION:

1. Patient identity/Examination order verification	2	1	0	
2. Patient assessment, patient properly attired	2	1	0	
3. Introduce self to patient, directions given to patient	2	1	0	
4. Room preparation/Equipment operation	2	1	0	
5. mAs & kVp/AEC/APR – proper for examination	2	1	0	
6. SID, Tube alignment, and IR alignment	2	1	0	
7. Patient alignment, correct body rotation	2	1	0	
8. Side identification, R or L in the correct placement	2	1	0	
9. Positioning – AP, PA, Frontal, Single Image	2	1	0	
10. Positioning – Lateral	2	1	0	
11. Positioning - _____ (please specify)	2	1	0	
12. Patient management/safety	2	1	0	
13. Evidence of collimation	2	1	0	
14. Image processing/Image evaluation	2	1	0	
15. Correct EI# or S#	2	1	0	
16. Gonadal shielding (if applicable) under the age of 60	2	1	0	N/A
Reason for not shielding _____				

Evaluator Signature: _____

<u>CLEARANCE GRADE FORM</u>	
<u>(For Image Critique Instructors Only)</u>	
<i>Must receive a 12 or better (80%)</i>	
<i>If clearance is simulated, is a C-Arm, or special procedure with no overhead-student doesn't receive any points/just completion</i>	
Position of Patient: _____	Image free of Artifacts: _____
Positions of Part: _____	Marker Placement: _____
Central Ray: _____	Evaluation Criteria: _____
SID/Grid: _____	Technique: _____
Collimation: _____	Breathing Instructions: _____
Anatomy (5 pts): _____	
Total Score: _____/15	

RECORD OF COMPETENCY CLEARANCES FORM

STUDENT: _____ PROGRAM ENTRANCE DATE: _____

SEMESTER #1 CLEARANCES REQUIRED - 15

SEMESTER #2 CLEARANCES REQUIRED - 30

Exam	Date Accomplished	Patient/Simulated	Exam	Date Accomplished	Patient/Simulated
m=Chest-Routine			m=Ribs ✓		
m=Chest AP- Stretcher or WC			e=Sternum ✓		
e=Chest- Lat Decub ✓			e=Upper Airway ✓		
m=Finger or thumb ✓			e= Sternoclavicular joints ✓		
m=Hand			m=Cervical		
m=Wrist			m=Thoracic ✓		
m= Forearm			m=Lumbar		
m=Elbow			m=x-table horizontal beam lateral spine ✓		
m=Humerus ✓			e=Sacrum and/or coccyx ✓		
m=Shoulder			e=Scoliosis Series ✓		
m=Clavicle ✓			e=S.I. joints ✓		
e=Scapula ✓			e=Intravenous Urography		
e=A.C. Joints ✓			e= UGI single or double		
m=Trauma Shoulder or humerus			e= Contrast enema single or double		
m=Trauma Upper Ext			e=Small bowel series		
e=Toe ✓			e=Esophagus study		
m=Foot			e=Cystourethrogram/cystogram		
m=Ankle			m=Port Chest		
m=Knee			m=Port Abd		
m=Tibia-Fibula ✓			m=Port. Orthopedic		
m=Femur ✓			m=Geriatric chest		
e=Patella ✓			m=Geriatric upper or lower extremity		
e= Calcaneus ✓			e=Geriatric hip		
m=Trauma Lower Ext.					
m= Pelvis					
m=Hip					
m=Cross Table Lateral Hip ✓					
m=Abdomen Supine					
m=Abdomen Upright					
e=Abdomen Decubitus ✓					

SEMESTER #3 (Summer) CLEARANCES REQUIRED: 42

**SEMESTER #4
CLEARANCES REQUIRED - 55**

**SEMESTER #5
CLEARANCES REQUIRED - 61**

Exam	Date	Patient/Simulated	Exam	Date	Patient/Simulated
	Accomplished			Accomplished	
e=Skull	√		Modality Objectives		
e=Facial Bones	√		MRI- Spring semester 1 st year		
e=Mandible/Panorex	√		Nuclear Medicine- Summer		
e=Temporomandibular Jts.	√		Ultrasound- Summer		
e=Nasal Bones	√		Radiation Therapy- Fall semester 2 nd year		
e=Orbits	√		Special Procedures- Fall semester 2 nd year		
e=Paranasal Sinuses	√		CT- Spring semester 2 nd year		
e=ERCP			General Patient Clearances Required		
e=Myelography			m=CPR		
e=Arthrography			m=Blood Pressure		
e=Hysterosalpingography			m=Temperature		
m=C-arm: (Procedure)	√		m=Pulse		
m=C-arm: (Surgical)	√		m=Respiration		
*Checklist must be attached with c-arm			m=Pulse oximetry		
m=Pediatric Chest	√		m=Sterile & Medical Aseptic Technique		
e=Pediatric Upper or Lower Extremity	√		m=Venipuncture		
e=Pediatric Abdomen	√		m=Transfer		
e=Pediatric mobile	√		m=Patient Medical Equipment		

Program Completion:

Clearances Required for Graduation = a total of 61

Mandatory Radiologic Procedures: **36**

Competency must be demonstrated in all mandatory procedures.

Elective Radiologic Procedures: **15**

Competency must be demonstrated in at least 15 of the 35 electives.

Patient Care: **10**

All patient care competencies are mandatory; venipuncture may be simulated and is not included in the total ten imaging procedure that may be simulated.

Simulations:

- Simulation of imaging procedures requires the use of proper radiographic equipment without activating the x-ray beam.
- A total of ten imaging procedures may be simulated. Image procedures eligible for simulation are noted on the clearance form with an √
- If applicable, the student must evaluate the related imaged.

RADIOGRAPHIC LABORATORY

RADIOGRAPHIC POSITIONING LABORATORY RATIONALE

PURPOSE: To provide for the opportunity of student demonstration to the clinical laboratory supervisor the mastery of the theory and practice of essential clinical skills under simulated conditions prior to assuming actual clinical responsibilities.

PROCEDURE: Laboratory exercises in radiographic positioning skills augment the lecture portion of the following courses: XRAY 110, 111, and 210. In addition to the terminology, anatomy and positioning courses, the students will review appropriate collimation and radiation protection. The examinations presented in lecture and video for each semester/course is as follows:

SEMESTER I – XRAY 110

Chest, finger, hand, wrist, foot, os calcis, ankle, forearm, elbow, humerus, lower leg, knee, patella, shoulder, clavicle, AC joints, femur, hip, pelvis and abdomen.

SEMESTER II – XRAY 111

Thoracic, lumbar, thoracic, cervical, sacrum, coccyx, ribs, scapula, sternum, small bowel, GI, IVU, Contrast enema with & w/o air, and portable and c-arm radiography and critical thinking skills.

SEMESTER III – XRAY 210

Skull, nasal bones, facial bones, sinuses, zygomatic arches, mandible, T.M.J.'s, orbits, F.B. of the eye, and quality control testing procedures.

COMPETENCY: The student will have received lecture in each assigned area, complete fact sheets appropriate for examination, and under the supervision of the laboratory instructor, will attempt the examination in the laboratory setting. The students will simulate positioning on each other and where applicable, the student will take radiographs of "pixey" and other phantoms. The student will observe and assist in radiographic procedures until those examinations have been mastered in the laboratory setting. At this time the student will attempt to gain a competency clearance for that examination in the clinical education center.

RADIOGRAPHIC POSITIONING LABORATORY OBJECTIVES

GENERAL COMPETENCY: The student will be able to demonstrate knowledge of the anatomy of the part and competently perform diagnostic radiographic positioning of the part.

COMPETENCY-BASED OBJECTIVES

Upon completion of the laboratory exercises, the student will be able to:

1. Display knowledge and recognition of the anatomy, location, number and functions of the bones involved inclusive of its articulations as indicated by the written examination and oral discussion with 90% competency.
2. Know, recognize, and be able to describe in writing and orally the position and parts demonstrated by each radiographic view with 90% competency.
3. Know and recognize the central ray projection for the indicated radiographic views of the part as described in writing, orally, and identified on the radiograph with 100% competency.
4. Know and utilize protective devices applicable to each radiographic view of the part.
5. Know, utilize, and be able to list the correct views required, instructions to the patient, patient preparation, patient assistance, equipment manipulation, patient positioning and technique with 90% competency in written test, oral discussion, or skills observation by clinical laboratory supervisor.

6. Given a hypothetical situation in the laboratory, written test or oral discussion, role-play as the patient and the technologist to enhance understanding of the patient's situation and condition to develop a courteous, confident, empathetic attitude toward the patient.

METHODS OF EVALUATION

Laboratory demonstration checklist

Laboratory quizzes

Laboratory patient simulation final

Laboratory phantom final

Hourly, midterm, and final examinations in the following classes: XRAY 110, 111, 210

The final evaluation of the student successfully meeting in the laboratory objectives is the successful completion of image critiques and competency clearances of the examination. If the student does not show competence in the clinical area for a particular examination, he/she will complete the laboratory skills demonstration again.

ENERGIZED LABORATORY POLICY

A student will not make any radiographic exposure of any kind without the supervision of a readily available ARRT(R) certified instructor. The door to enter the laboratory setting will remain locked and the x-ray machines turned off while classes are not in session. The only exposures made in the laboratory settings will be on phantoms. Under no circumstance will x-rays be taken on individuals. The x-ray machines will only be turned on during scheduled laboratory sessions.

Under no circumstances will the students be exposed to radiation during lab. Students are not allowed to hold image receptors or phantoms during exposures. Positioning aids will be used on the phantoms to maintain positioning requirements. The students will remain behind the control console lead barrier during all exposures.

During the laboratory session, students must adhere to the following procedures for radiation protection:

1. Wear personal dosimeter
2. Remain behind the control console lead barrier during all exposures
3. Utilize the appropriate techniques
4. Use appropriate collimation
5. Practice radiation shielding

If radiation protection is not practiced, a student will receive an initial warning, second offense a 5% dock in grade, and a third offense will result in dismissal of the program.

LABORATORY DEMONSTRATION FORM

RADIOLOGIC TECHNOLOGY KASKASKIA COLLEGE

STUDENT NAME: _____ DATE: _____

RADIOGRAPHIC PROJECTION: _____

PROCEDURE PERFORMANCE: SATISFACTORY = S UNSATISFACTORY = U

UNDER LABORATORY CONDITIONS UTILIZING A MODEL, THE STUDENT WILL:

- ___ 1. Evaluate a requisition to determine positions required
- ___ 2. Introduce self to patient and explain exam
- ___ 3. Verify correct identification of patient
- ___ 4. Verify correct preparation, if any, of patient
- ___ 5. Manipulate radiographic equipment
- ___ 6. Place "patient" on table
- ___ 7. Select appropriate IR
- ___ 8. Position patient on table
- ___ 9. Immobilize patient/body part as necessary
- ___ 10. Align tube and IR
- ___ 11. Adjust collimator to appropriate size
- ___ 12. Apply gonadal shielding if required
- ___ 13. Select appropriate technique
- ___ 14. Instruct patient
- ___ 15. Make exposure
- ___ 16. Repeat previous steps for each view required
- ___ 17. Assist patient from table
- ___ 18. Evaluate images after exposure
- ___ 20. Use CR or DR equipment
- ___ 21. Identify anatomy

IF A CONTRAST STUDY:

- ___ 1. Select appropriate contrast medium
- ___ 2. Take required "scout" images
- ___ 3. Prepare contrast medium for administration
- ___ 4. Assist in administration of contrast medium
- ___ 5. Observe patient closely for undesirable side effects of contrast medium

RECOMMENDATIONS:

STUDENT SIGNATURE: _____

INSTRUCTOR SIGNATURE: _____

Revised 5/18

LABORATORY POSITIONING FINAL EXAMINATION

PURPOSE: Each didactic course utilizing laboratory sessions will require a positioning final examination. This requirement will serve as an evaluation tool to measure the student competence in the information presented in the laboratory sessions. This tool responds to the competency-based objective #5 in your handbook.

PROCEDURE

1. The supervisor will assign (draw by lot) the examination the student will complete.
2. The student will outline the views, image size and techniques to the supervisor before the examination is started.
3. The student will start and complete the examination without assistance.
4. The student will return the room to its original state.
5. The student will critique the images, identify the anatomy demonstrated and discuss/quiz the technical factors effect on the finished image.

LABORATORY FINAL EXAMINATION FORM

X-RAY 110

STUDENT: _____ DATE: _____

RADIOGRAPHIC PROCEDURE: _____

POSITIONS:

	1	2
PSYCHOMOTOR SKILLS: - 2 points each		
1. Positioning		
2. Central ray		
3. Collimation		
4. Marker placement		
5. Equipment manipulation (detent, bucky alignment, control console and DR selection)		
6. Knowledge of techniques		
ANATOMY: - 5 points each		
DIDACTIC QUIZ: - 30 points <ul style="list-style-type: none">• IMAGE TECHNICAL QUALITY (receptor exposure, contrast, distortion, spatial resolution, artifacts, radiation protection)• POSITIONING, CENTRAL RAY, EVALUATION CRITERIA, ANATOMY		

TOTAL: /60 = _____%

EVALUATOR: _____ STUDENT SIGNATURE: _____

LABORATORY POSITIONING FINAL EXAMINATION FORM

X-RAY 111 and 210

STUDENT: _____ DATE: _____

RADIOGRAPHIC PROCEDURE: _____

POSITIONS:

	1	2
PSYCHOMOTOR SKILLS: - 2 points each		
1. Positioning		
2. Central ray		
3. Collimation		
4. Marker placement		
5. Equipment manipulation (detent, bucky alignment, control console and DR selection)		
6. Knowledge of techniques		
ANATOMY: - 5 points each		
DIDACTIC QUIZ: - 30 points <ul style="list-style-type: none">• IMAGE TECHNICAL QUALITY (receptor exposure, contrast, contrast resolution, spatial resolution, distortion, windowing, exposure latitude, image signal, artifacts, radiation protection)• POSITIONING, CENTRAL RAY, EVALUATION CRITERIA, ANATOMY		

TOTAL: /60 = _____%

EVALUATOR: _____ STUDENT SIGNATURE: _____

CURRICULUM

TECHNOLOGY TESTING PROCEDURES

Testing is an integral component of an educationally sound program. All courses in the Radiologic Technology program will utilize extensive testing techniques. The didactic course will consist of the following testing tools:

1. Quizzes (weekly)
2. Laboratory quizzes/checklists (where applicable)
3. Term papers
4. Hourly/midterm/final examinations

The test tools for the clinical phase of the program (image critique sessions, evaluations and the final positioning examination) are explained in detail in the clinical education section of the student handbook.

The didactic examinations will have the answers placed on computer score sheets. The tests themselves will remain with the instructor. If the examination is given on LMS, the student will be able to see answers after submission of the examination. The objective-based test will be composed of questions in the form of true/false statements, multiple choice, and matching. In the matching sections, each item may be used once, more than once, or not at all. The tests will cover laboratory instruction, classroom lecture, and assigned reading material and handouts.

No assignments will be accepted by email or fax. Assignments need to be turned in directly to the instructor.

MAKE-UP TESTS: All make-up tests in the radiography program will not be the same as the original test. Make-up tests will consist of multiple choice, fill in the blank, and essay. Also, no extra credit will be given with make-up tests. Make-up tests must be scheduled ahead of time with instructor. If a make-up test is not completed within one week (unless specified by instructor) after the original date of the exam, the student will receive a zero on that test. If instructor is not notified about absence before a scheduled regular test, students will not be allowed to take a make-up test.

TEACHING TECHNIQUES

A variety of teaching techniques will be employed during the student's enrollment. The following is a listing of how the program intends to teach representative courses.

- Brain storming – all clinical courses, quality assurance, etc.
- Conferencing – all image critiques
- Demonstration/performance – all laboratory sessions
- Discussion – all didactic and clinical courses
- Guest speakers – radiographic pathology, imaging modalities, radiation safety, introduction to profession
- Peer teaching – all image critiques
- Role play – all laboratory sessions
- Simulation – all laboratory sessions
- Tour – radiographic pathology, imaging modalities
- Critical thinking – all clinical courses, image critiques, all lab sessions

TECHNOLOGY CLASSROOM GRADING POLICY

A (100-92.5%)

Represents a high degree of excellence demonstrated during assignment. Students receiving this grade perform consistently at a high level from the beginning of the assignment through to the end. Such students could be recommended as likely to be highly successful in their initial positions as clinical staff technologists.

B (92.4-85%)

Represents an above average performance and steady growth during assignment, but still displays some definitive identifiable minor areas of weakness. A student receiving this grade has the potential to become a good clinician and can be given a favorable recommendation.

C (84.9-78.0%)

Represents a satisfactory performance and steady growth during assignment. This grade indicates some inconsistent and sporadic growth toward clinical maturity. It suggests a person who might develop into a successful clinician with the help of early supervision and more experience. This person can be recommended but with reservations.

F (BELOW 78.0%)

Reflects an unsatisfactory performance in assignments. This grade indicates that the student is, on the basis of what he or she has shown, unlikely to develop into a satisfactory clinician at any future time.

NOTE: GRADE OF “F” IS NOT ACCEPTED BY THE DEPARTMENT OF RADIOLOGIC TECHNOLOGY FOR CLINICAL or CLASSROOM EDUCATION AND A STUDENT RECEIVING ANY OF THESE GRADES WILL BE DISMISSED FROM THE PROGRAM. THE STUDENT MAY APPLY FOR RE-ADMISSION TO THE PROGRAM FOR THE NEXT ACADEMIC YEAR.

PROGRAM GRADING POLICY

All Radiologic Technology students are required to pass all the XRAY courses (and their substitutes) with a “C” or better. Each student must maintain a minimum overall cumulative grade point average of 3.0. Students who fail to maintain the minimum GPA are subject to academic dismissal. Please refer to the college catalog for additional information.

A progression committee will meet at the end of each semester to review each student’s progress for approval or disapproval for continuance in the program. The student will receive written notice of non-continuance in the program from student services.

RELEASE OF GRADE FORM

Periodically a student will email the instructor and inquire about a grade they received for an individual assignment, quiz or test. This form is to give the instructor permission to post that information in the email.

Please Note- No information will be released to any student over the phone!!!!

Please mark one of the following choices below and return it to the program director:

_____ I give permission for the Kaskaskia College Radiologic Technology Program to email me a grade I received on an assignment/quiz/test, etc.

_____ I do not give permission for the Kaskaskia College Radiologic Technology Program to email me a grade I received on an assignment/quiz/test, etc.

Printed Name

E-Mail Address

Phone Number

Signature

FERPA

The Family Educational Rights and Privacy Act (FERPA) protects the privacy of student's records. Students have the right to get copies of their education records, request that inaccurate information be changed, expect that their school provide privacy protections for the information in their record, have control over disclosure of student's information, and to file a complaint if rights are violated. More information can be found on [Home | U.S. Department of Education](#)

DISCIPLINARY ACTION POLICY

The following is a partial list of the kinds of behavior that may result in disciplinary action up to and including immediate removal. Minor infractions of program guidelines may result in a written warning with a grade reduction. Each student is required to know and abide by all regulations contained in this handbook and other college documents. The XRAY 104 course is designed to allow questions on program/college procedures to occur prior to the beginning of the clinical rotations. If a student has any doubt whatsoever, he or she should contact the instructor or program office for clarification. In all cases, the student will follow the program organization chart to follow up on any and all problems.

- CONVICTION OF A FELONY
- CONVICTION OF A DRUG OR ALCOHOL ABUSE VIOLATION
- VIOLATION OF CURRENT COLLEGE GUIDELINES
- FALSIFICATION OF COLLEGE RECORDS
- PROVIDING FALSE INFORMATION TO COLLEGE/PROGRAM OFFICIALS
- CHEATING
- BREACH OF CONFIDENTIALITY
- FAILURE TO FOLLOW CURRENT STUDENT RADIOGRAPHER HANDBOOK GUIDELINES
- INSUBORDINATION
- IMPROPER CLASSROOM CONDUCT
- FAILURE TO FOLLOW CLINICAL SCHEDULES

RADIOLOGIC TECHNOLOGY CURRICULUM PLAN

	<u>CLOCK HOURS</u>			<u>CREDIT HOURS</u>	<u>Hours/Week</u>
	CLASS	LAB	CLINICAL		
FIRST SEMESTER					
XRAY 145 Cross-Sectional Anatomy	45	30		4	5
XRAY 104 Professional & Interpersonal Responsibilities	30			2	15
XRAY 101 Radiologic Clinical Education			240 (64 hrs. evening)	4	16
XRAY 110 Radiologic Technology I	60	30		5	6
MATH 101	45			3	3
<hr/>					
SECOND SEMESTER					
XRAY 146 Cross-Sectional Anatomy II	45	30		4	5
ENGL 101 English Composition	45			3	3
XRAY 105 Radiologic Clinical Education			360 (96 hrs. evening)	7	24
XRAY 111 Radiologic Technology II	60	30		5	6
<hr/>					
THIRD SEMESTER					
XRAY 103 Radiologic Clinical Education			256 (64 hrs. evening)	6	32
Medical Terminology	15			1	2
<hr/>					
FOURTH SEMESTER					
SPCH 103 Fundamentals of Speech	45			3	3
XRAY 250 Pathology	30			2	2
XRAY 201 Radiologic Clinical Education			360	7	24
XRAY 210 Radiologic Technology III	60	30		5	6
<hr/>					
FIFTH SEMESTER					
PSYH 101 Psychology	45			3	3
Social Science Elective	45			3	3
XRAY 204 Radiologic Clinical Education			240 (32 hrs. evening) (32 hrs. weekend)	4	16
XRAY 211 Radiologic Technology IV	60	30		5	6
TOTAL HOURS	630	180	1456	76	Less than 40/week

CLASS 630 (28%)

LAB 180 (8%)

CLINICAL HOURS 1456 (64%)

TOTAL CONTACT HOURS: 2251

Days 1,088 hrs (79%) and Evening/Weekends 288 hrs (21%)

Program Distribution of Semester Hour Credit (76 hours)

College General Requirements 16 (21%); Radiology Technology Course Work 32 (42%); Radiology Technology Clinical Experience 28 (41%)

Total Didactic and Clinical involvement combined will not exceed more than 40 hours per week.

GRADUATION REQUIREMENTS

Program Graduation Requirements

All radiography students must meet the following requirements for graduation.

College requirements:

1. Complete the specific requirements of the program of study under the degree pursued.
2. Earn at least sixty-four (64) semester hours of credit with at least sixteen (16) of the last twenty-four (24) semester hours earned in residence at Kaskaskia College.
3. Every student must enroll in and successfully complete one of the following courses to receive degree:
Ethics 120, Philosophy 121, Political Science 101, Psychology 101, Sociology 101, or Women in Management 129 to meet requirements of Illinois Public Act 87-581
4. Meet all financial obligations due to the College, and complete all records required by the College office.
5. File an application as a Candidate for Graduation before midterm in the semester in which the candidate's program will be completed.
6. Participate in graduation exercises unless granted permission to receive a degree in absentia from the Director of Admissions.
7. Any student completing graduation requirements at the end of the Summer or Fall semesters may participate in commencement ceremonies at the end of the following Spring semester.

Program Requirements

1. Required to earn a grade "C" or better in all courses with an XRAY prefix (or approved substitute).
2. Attained a cumulative grade point average of at least 2.0 (C).
3. Meets the course requirements for the Associate of Applied Science Degree
4. At midterm in X-Ray 211, students will be given a mock registry review exam. "If a student receives below an 80% on the midterm, it is highly recommended that they take a 1 credit (16 hours) X-Ray 197 review course prior to graduation."
5. Completed a total of 61 competency clearances.

STUDENT COMPLAINT/GRIEVANCE PROCEDURES

A grievance is any claim by a student that there has been a violation of the aggrieved's right to affirmative action. If the staff member is covered by a collective bargaining agreement which provides a procedure for the resolution of such claims, the collective bargaining procedure shall apply in lieu of this Section. The purpose of this procedure is to secure resolutions to grievable EEO/Affirmative Action/Title IX problems which may arise at Kaskaskia College, and to guarantee an orderly succession of procedures wherein these resolutions may be pursued. Attempts to resolve grievable problems with a supervisor/administrator should be undertaken to determine if the problem could be a misunderstanding that could be resolved in a one-on-one situation. If this is not possible or if these attempts are unsuccessful, the individual should consider the informal procedures and contact the Affirmative Action/Title IX/Director of Human Resources. These additional steps can be found in the grievance procedure available in the [Kaskaskia College Student Handbook](#).

The procedure regarding student complaints are grouped in two categories:

1. Student grade complaints
2. Student complaints regarding non-academic matters

The purpose of these student procedures is to provide a mechanism for resolving student complaints against faculty, staff and administrative offices concerning the following:

- Discrimination or intimidating treatment, including harassment on the basis of race, gender, age, weight, height, religion, sexual orientation, national origin, and/or disability, including but not limited to the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and Title IX of the Education Amendment of 1972.
- Any other seemingly arbitrary, capricious, unreasonable, or unprofessional conduct toward a student or group of students by faculty or staff member, or an administrative officer of the College.

The procedure for Grade Appeals and Non-Academic Matters can be found on the Kaskaskia College website:

[Kaskaskia College 2022-2023 College Catalog by Kaskaskia College - Issuu](#) and in the Student Handbook on pages 58-60.

The radiography program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) according to the *Standards for an Accredited Educational Program in Radiologic Sciences*. These *Standards* are implemented to promote academic excellence, stimulate programmatic improvement, and protect the student and the public. A student may obtain a copy of the *Standards* by contacting the [JRCERT](#), 20 N Wacker Drive, Suite 2850, Chicago, IL 60606-3182, (312) 704-5300. Any and all allegations of program noncompliance to the *Standards* may be reported to the JRCERT and the Allegations Reporting Form and Policy is also available on the JRCERT website.

RE-ENTRY

DEFINED AS: Students who are not in normal progression for any reason.

If the student has been out of the program longer than 12 months and is out of normal progression, they have to re-apply by the normal application process to be accepted into the program and will be considered an incoming freshman student.

Students who are enrolled in the Radiology Program who fail or withdraw from any radiology course will be out of normal progression. **Any student that receives a failing grade or withdraws due to unacceptable academic standards from two or more XRAY classes, not within the same semester, will not be eligible for re-entry.**

Students who are out of normal progression must apply for re-entry and sign a re-entry agreement. Re-entry for any semester is on a space available basis. The Program Director will monitor available clinical spaces.

Re-entry candidates **will be required** to successfully complete proficiency exams for all previously completed courses prior to being granted re-entry. This includes:

- Clinical/Lab competency exam(s) must be passed with a score of 85% or better.
- Written exam(s) to evaluate knowledge base must be passed with a score of 77% or better.
- Clinical refresher 2 credit hour course will be required: must complete a minimum of 80 clinical hours. (Student insurance is required to complete clinical refresher at the student's expense and is nonrefundable. A current background check and negative drug screen may also be required at the student's expense.)
- The student will be responsible for the cost of all refresher courses.
- Complete all orientation forms: Physical, Immunizations, Tb, CPR, Agreement to Abide by, Attendance Clock In/Out, Blogging, Bullying, and Social Networking Policy, Clinical Medical Insurance, Release Picture, and Release Grade.

Written proficiency exams & Clinical/Lab competency exams may be taken only **one time!**

For those students failing to progress beyond the first semester of the first year, re-application to the program and restart of the program will be required!

Students who receive approval to re-enter will be subject to policies, procedures & curriculum which are current at the time of re-entry. This will include an updated physical.

Transfer of radiology students from other institutions is not accepted. They have to be admitted into the program with the normal application process.

VISITORS

No children are allowed on campus during regular classroom and lab settings. This can be disruptive to fellow classmates and faculty. Students should plan for childcare emergencies with appropriate alternative plans prior to the start of the semester.

ESTIMATED COST SHEET



RADIOLOGIC TECHNOLOGY

ESTIMATED PROGRAM COST FOR 2023-2024

FIRST SEMESTER				
Tuition	(18 credit hours x \$ 136 )	.....		\$ 2,448.00
Student Services Fee	(18 credit hours x \$ 24 )	.....		432.00
Lab Fee		.....		600.00
FIRST SEMESTER TOTAL				\$ 3,480.00
SECOND SEMESTER				
Tuition	(17 credit hours x \$ 136 )	.....		\$ 2,312.00
Student Services Fee	(17 credit hours x \$ 24 )	.....		408.00
Lab Fee		.....		161.00
SECOND SEMESTER TOTAL				\$ 2,881.00
SUMMER SEMESTER				
Tuition	(9 credit hours x \$ 136 )	.....		\$ 1,224.00
Student Services Fee	(9 credit hours x \$ 24 )	.....		216.00
Lab Fee		.....		93.00
SUMMER SEMESTER TOTAL				\$ 1,533.00
THIRD SEMESTER				
Tuition	(17 credit hours x \$ 136 )	.....		\$ 2,312.00
Student Services Fee	(17 credit hours x \$ 24 )	.....		408.00
Lab Fee		.....		271.00
THIRD SEMESTER TOTAL				\$ 2,991.00
FOURTH SEMESTER				
Tuition	(15 credit hours x \$ 136 )	.....		\$ 2,040.00
Student Services Fee	(15 credit hours x \$ 24 )	.....		360.00
Lab Fee		.....		197.00
FOURTH SEMESTER TOTAL				\$ 2,597.00
Tuition, Lab Fees				\$ 13,482.00
Uniforms, School Supplies, Misc.				500.00
Textbooks				1,824.00
Insurance				79.00
Workshops/Field Trips				125.00
TOTAL ESTIMATED COSTS OF XRAY.0520.DEGR				\$ 16,010.00
Total Tuition and Fees:				\$ 13,482.00
Books, Supplies, Misc.				\$ 2,528.00
Employment/Job Opportunities: Radiologic Technologists				
Please Note: Individual results may vary based on course selection, economic conditions, individual job preferences, etc.				

CLINICAL EDUCATION CENTERS

Normal clinical hours are 8 hour shifts and shall not exceed more than 10 hours per day unless approved in writing by Program Director for unique cases.

BELLEVILLE MEMORIAL

4500 Memorial Dr.

Belleville, IL 62226

Heather Cabrera, Clinical Preceptor, Heather.Cabrera@bjc.org

Sarah Albers, Sarah.Albers@bjc.org

Supervisor: Donna Friedman donna.friedman@bjc.org

Pam Holbrook- Radiology Director, pamela.holbrook@bjc.org

618-257-5005, 618-233-7750

clinical times 7:30am-3:30pm

night 1:00 pm- 9:00pm

BREESE

St. Joseph's Hospital

9515 Holy Cross Lane

Breese, IL 62230

Mary Siebert, Clinical Preceptor, Mary.siebert@hshs.org

Nicole Porter, Clinical Preceptor, Nicole.porter@hshs.org

(618) 526-4511 ext. 455

(618) 526-5460

Clinical times 8:00 am – 4:00 pm and Evenings 12:00 pm – 8:00 pm

CARBONDALE

Memorial Hospital of Carbondale

405 W. Jackson Street

Carbondale, IL 62901

Ashley Williams, Clinical Preceptor, ashley.williams@sih.net ext.64815

(618) 549-0721 ext. 65672

Clinical times 7:30 am – 3:30 am and Evenings 1:00 pm – 9:00 pm

CENTRALIA

St. Mary's Hospital

400 N. Pleasant

Centralia, IL 62801

Alicia Murray, Supervisor

Megan Beaver, Clinical Preceptor, Megan.Beaver@ssmhealth.com

(618) 436-7010

Clinical times 7:30 am – 3:30 pm and Evenings 1:00 pm – 9:00 pm

DECATUR

Decatur Memorial Hospital
2300 N. Edwards Street
Decatur, IL 62526
Tom Williams, Clinical Preceptor, Williams.Thomas@mhsil.com
Office - (217) 876-2347
Tech room – (217) 876-2317
Clinical times 8:00 am – 4:00 pm and Evenings 11:00 am – 7:00 pm

DUQUOIN

Marshall Browning Hospital
900 N. Washington, Box 192
DuQuoin, IL 62832
Kimbra Schafer, Supervisor, Kimbra.Schafer@mbhdq.com
Tammy Eisenhauer, Clinical Preceptor, Tammy.Eisenhauer@mbhdq.com
(618) 542-2146 ext. 1351
Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

EFFINGHAM

St. Anthony's Hospital
503 N. Maple
Effingham, IL 62401
Rachael Hille, Clinical Preceptor, Rachael.Hille@hshs.org
(217) 347-1349
Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

GREENVILLE

HSHS Holy Family Hospital
200 Health Care Drive
Greenville, IL 62246
Terry Beesley, Clinical Preceptor, Terry.Beesley@hshs.org
Rebecca Martin, Director of Operations, Rebecca.Martin@hshs.org 618-690-3444
(618) 664-1230
Direct line to Radiology – (618) 690-3424
Clinical times 7:30 am – 3:30 pm

HERRIN

Herrin Hospital
201 S. 14th Street
Herrin, IL 62948
Callie Bogard, Clinical Preceptor, Callie.Bogard@sih.net
(618) 942-2171 ext.35463
Clinical times 7:30 am – 3:30 pm and Evenings 1:00 pm – 9:00 pm

HIGHLAND

St. Joseph's Hospital
12866 Troxler Ave
Highland, IL 62249

Dee Emig, Clinical Preceptor (618) 651-2789, Dee.Emig@hshs.org
(618) 651-2790

Clinical times 7:00 am – 3:00 pm and Evenings 12:00 pm – 8:00 pm

HILLSBORO

Hillsboro Area Hospital
1200 E. Tremont
Hillsboro, IL 62049

Jillian Collier, Clinical Preceptor jilliancollier@hillsboroareahospital.org
(217) 532- 4196

Clinical times 7:30 am – 3:30 pm and Evenings 12:00 pm – 8:00 pm

MATTOON

Sarah Bush Lincoln Health Centre
100 Health Center Drive
Mattoon, IL 61938

Jessica Miller, Clinical Preceptor, jmiller3@sblhs.org
(217) 258-2146; (217) 258-2194

Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

MT. VERNON

Good Samaritan Regional Health Center
1 Good Samaritan Way
Mt. Vernon, IL 62864

Alex Ritchey, Clinical Preceptor, Alexandrea.Ritchey@ssmhealth.com
Jenny White, Clinical Preceptor (618) 899-2933, jenny_white@ssmhc.com
(618) 899-2943 (Portable)

OP 899-1860 or IP 899-1813

Clinical times 7:00 am – 3:00 pm and Evenings 1:00 pm – 9:00 pm

Orthopædic Center of Southern Illinois

4121 Veterans Memorial Drive
Mt. Vernon, IL 62864

www.orthocenter-si.com

Danielle Easton, Clinical Preceptor, DanielleE@ocosi.org

Sydni Payne, Clinical Preceptor, SydniP@ocosi.org

Aaron Asbury, Administrative Tech/ Clinical Instructor, AaronA@ocosi.org

(618) 731-7110

Clinical times 8:00 am – 4:00 pm

Crossroads Community Hospital (1st semester only)

8 Doctors Park

Mt. Vernon, IL 62864

Bailey Hosick, Clinical Preceptor bhosick@ghcus.com

Paula Dodillet, Supervisor 241-8621 Pdodillet@ghcus.com

Direct (618) 241-8564

clinical times 7:30am-3:30pm

night 1:00pm-9:00pm

NASHVILLE

Washington County Hospital

705 S. Grand

Nashville, IL 62263

Joy Grzegorek, Clinical Preceptor, jgrzegorek@washingtoncountyhospital.org

(618) 327-2323

Clinical times 7:00 am – 3:00 pm and Evenings 1:00 pm – 9:00 pm

O'FALLON

St. Elizabeth's Hospital

1 St. Elizabeth's Blvd.

O'Fallon, IL 62269

Kristin Goedeke, Clinical Preceptor, Kristin.Goedeke@hshs.org

(618) 234-2120 ext 11649

(618)531-4473

clinical times 7:00am-3:00pm

night 11:00pm-7:00pm

PANA

Pana Community Hospital

101 E. 9th Street

Pana, IL 62557

Shelby Brauer, Clinical Preceptor, shelbybrauer1@gmail.com

(217) 562-6366

Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

PINCKNEYVILLE (1st semester only)

Pinckneyville Community Hospital

5383 St. Rt. 154

Pinckneyville, IL 62274

Aby Weathers, Clinical Preceptor, ultrasound@pvillehosp.org

Bekki Kellerman, Clinical Preceptor, ultrasound@pvillehosp.org

(618) 357-2187

Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

SALEM

Salem Township Hospital
1201 Ricker Drive
Salem, IL 62881
Cris Hicks, Clinical Preceptor, chicks@sthcares.org
(618) 548-3194 ext. 8154
Clinical times 7:00 am – 3:00 pm and Evenings 1:00 pm – 9:00 pm

SHELBYVILLE

HSHS Good Shepard Hospital
200 S. Cedar Street
Shelbyville, IL 62565
Robin Storm, Clinical Preceptor, Robin.Storm@hshs.org
Amy Waddington, Supervisor Amy.Waddington@hshs.org
(217) 774-3961 ext. 5171
Clinical times 7:30 am – 3:30 pm and Evenings 10:00 am – 6:00 pm

ST. LOUIS

Barnes-Jewish Hospital
1 Barnes-Jewish Hospital Plaza
St. Louis, MO 62110
Education Specialist:
Niki Stephens niki.stephens@bjc.org (314)906-2126
Fran Knight-Rhodes, Clinical Preceptor Francine.knight-rhodes@bjc.org
Stephanie Erthal, Clinical Preceptor Stephanie.Erthal@bjc.org
Jennifer Suessen, Clinical Preceptor 6 Cam Jennifer.Suessen@bjc.org
X-Ray North (314)-454-8139
X-Ray South (314)-362-7112
GI/GU North (314)-454-8902
GI/GU South (314)-362-7123
Clinical times 7:30 am – 3:30 pm and Evenings 10:00 am – 6:00 pm

VANDALIA

Sarah Bush Lincoln Fayette County Hospital
650 W. Taylor Street
Vandalia, IL 62471
Abbey Giles Salgado, Clinical Preceptor, abbey.giles@sblfch.org
Rena Myers, Clinical Preceptor, rena.myers@sblfch.org
(618) 283-5466
Clinical times 8:00 am – 4:00 pm and Evenings 1:00 pm – 9:00 pm

MODALITY CLINICAL EDUCATION CENTERS

BELLEVILLE MEMORIAL

4500 Memorial Dr.
Belleville, IL 62226

Department	Time
Nuclear Medicine	7:30 am – 3:30 pm
Ultrasound	7:30 am – 3:30 pm
MRI	7:30 am – 3:30 pm
CT	7:30 am – 3:30 pm
Special Procedures	7:30 am – 3:30 pm
Radiation Therapy	To be determined

BREESE

St. Joseph Hospital
9515 Holy Cross Lane
Breese, IL 62230

Department	Time
Ultrasound	8:00 am – 4:00 pm
MRI	8:00 am – 4:00 pm
CT	8:00 am – 4:00 pm
Nuclear Medicine	As available

CARBONDALE

Memorial Hospital of Carbondale
405 W. Jackson St.
Carbondale, IL 62901

Department	Time
Nuclear Medicine	7:30 am – 3:30 pm
Ultrasound	7:00 am – 3:00 pm
MRI	7:00 am – 3:00 pm
CT	7:30 am – 3:30 pm
Special Procedures	7:30 am – 3:30 pm

CENTRALIA

St. Mary's Good Samaritan, Inc
400 N. Pleasant
Centralia, IL 62801

Department	Time
Nuclear Medicine	7:30 am – 3:30 pm
Ultrasound	7:30 am – 3:30 pm
MRI	8:00 am – 4:00 pm
Radiation Therapy	8:00 am – 4:00 pm

DECATUR

Decatur Memorial Hospital
 2300 N. Edwards St.
 Decatur, IL 62526

Department	Time
Nuclear Medicine	8:00 am – 4:00 pm
Ultrasound	8:00 am – 4:00 pm
MRI	8:00 am – 4:00 pm
CT	8:00 am – 4:00 pm
Special Procedures	8:00 am – 4:00 pm
Radiation Therapy	8:00 am – 4:00 pm

EFFINGHAM

St. Anthony's Hospital
 503 N. Maple
 Effingham, IL 62401

Department	Time
Nuclear Medicine	7:30 am – 3:30 pm
Ultrasound	8:00 am – 4:00 pm
MRI	8:00 am – 4:00 pm
CT	8:00 am – 4:00 pm

EFFINGHAM

Crossroads Cancer Center
 Radiation Therapy Department
 905 Medical Park Drive
 Effingham, IL 62401

Department	Time
Radiation Therapy	8:00 am – 4:00 pm

GREENVILLE

HSHS Holy Family Hospital
 200 Health Care Dr.
 Greenville, IL 62246

Department	Time
Nuclear Medicine	7:00 am – 3:00 pm
Ultrasound	7:00 am – 3:00 pm
MRI	7:00 am – 3:00 pm
CT	7:00 am – 3:00 pm

HERRIN

Herrin Hospital
 201 S. 14th St.
 Herrin, IL 62948

Department	Time
Nuclear Medicine	7:00 am – 3:00 pm
Ultrasound	7:30 am – 3:30 pm
MRI	7:30 am – 3:30 pm
CT	7:30 am – 3:30 pm

HIGHLAND

St. Joseph's Hospital
 12866 Troxler Ave
 Highland, IL 62249

Department	Time
CT	7:00 am – 3:00 pm
MRI	8:00 am – 4:00 pm
Ultrasound	8:00 am – 4:00 pm
Nuclear Medicine	As available

HILLSBORO

Hillsboro Area Hospital
 1200 E Tremont
 Hillsboro, IL 62049

Department	Time
CT	7:30 am – 3:30 pm
MRI	M - 8:00 am – 5:00 pm W - 8:00 am – 4:00 pm F- 8:00 am – 3:00 pm
Ultrasound	8:00 am – 4:00 pm
Nuclear Medicine	As available

MATTOON

Sarah Bush Lincoln Health Center
 100 Health Center Dr.
 Mattoon, IL 61938

Department	Time
Nuclear Medicine	8:00 am – 4:00 pm
Ultrasound	8:00 am – 4:00 pm
MRI	8:00 am – 4:00 pm
CT	8:00 am – 4:00 pm
Special Procedures	8:00 am – 4:00 pm
Radiation Therapy	8:00 am – 4:00 pm

MT. VERNON

St. Mary's Good Samaritan, Inc
 1 Good Samaritan Way
 Mt. Vernon, IL 62864

Department	Time
Nuclear Medicine	7:00 am – 2:00 pm
Ultrasound	7:00 am – 3:00 pm
MRI	8:00 am – 4:00 pm
Special Procedures	8:00 am – 4:00 pm
CT	7:00 am – 3:00 pm
Radiation Therapy	8:00 am – 4:00 pm
Cardiac Cath Lab	7:00 am – 3:00 pm

NASHVILLE

Washing County Hospital
 705 S. Grand
 Nashville, IL 62263

Department	Time
Ultrasound	7:00 am – 3:00 pm
CT	7:00 am – 3:00 pm

O'FALLON

St. Elizabeth's Hospital
 1 St. Elizabeth's Blvd.
 O'Fallon, IL 62269

Department	Time
Nuclear Medicine	7:00 am – 3:00 pm
Ultrasound	7:00 am – 3:00 pm
MRI	7:00 am – 3:00 pm
CT	7:00 am – 3:00 pm
Special Procedures	7:00 am – 3:00 pm

PANA

Pana Community Hospital
 101 E. 9th St.
 Pana, IL 62557

Department	Time
Ultrasound	8:00 am – 4:00 pm
CT	8:00 am – 4:00 pm
Nuclear Medicine	As available

SALEM

Salem Township Hospital
 1201 Ricker Dr.
 Salem, IL 62881

Department	Time
Ultrasound	7:00 am – 3:00 pm
MRI	7:00 am – 3:00 pm
CT	7:00 am – 3:00 pm
Nuclear Medicine	As available

SHELBYVILLE

HSHS Good Shepard
200 S. Cedar St.
Shelbyville, IL 62565

Department	Time
Ultrasound	8:30 am – 4:30 pm
CT	7:30 am – 3:30 pm

ST. LOUIS

Barnes-Jewish Hospital
1 Barnes-Jewish Hospital Plaza
St. Louis, MO 62110

Department	Time
Nuclear Medicine	7:30 am – 3:30 pm
Ultrasound	7:30 am – 3:30 pm
CT	7:30 am – 3:30 pm
Special Procedures	7:30 am – 3:30 pm

VANDALIA

Fayette County Hospital
650 W. Taylor St.
Vandalia, IL 62471

Department	Time
Ultrasound	8:00 am – 4:00 pm
CT	7:30 am – 3:30 pm

RADIOLOGY FACULTY CONTACT INFORMATION

Mimi Polczynski: 618-545-3363 mpolczynski@kaskaskia.edu
Candace Sloat: 618-545-3364 csloat@kaskaskia.edu

Sharon Elwood: 618-545-3380 selwood@kaskaskia.edu

If the faculty cannot be reached, please leave a message on their voicemail.
Do not call or contact faculty on the weekends unless extreme emergency.