

**INDIANA UNIVERSITY SOUTH BEND
RADIOGRAPHY PROGRAM
CLINICAL STUDENT
HANDBOOK**



The IU South Bend Radiography Program is accredited by: Joint
Review Committee on Education in Radiologic Technology

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Table of Contents

CHAPTER 1:	9
Introduction	9
<i>Introduction</i>	10
<i>Program Description</i>	11
IU SOUTH BEND RADIOGRAPHY PROGRAM CONTACTS	12
<i>Program Advisory Committee</i>	13
<i>Statement of JRCERT Compliance</i>	13
<i>Philosophy of the Program in Radiologic Technology</i>	14
<i>Mission and Goals of the Program in Radiologic Technology</i>	14
<i>Program Goals</i>	14
<i>Student Learning Outcomes</i>	15
<i>AS in Radiography Program Statements</i>	16
CHAPTER 2:	17
University Policies	17
FERPA	18
<i>Division of Radiologic Sciences</i>	18
<i>Program Organizations and Committees Relevant To Student Success</i>	18
PEER MENTORS	18
IU SOUTH BEND HEALTH AND WELLNESS CENTER	18
<i>Radiologic Sciences Assessment Committee</i>	19
<i>Course Instructor Evaluations</i>	19
STUDENT SERVICES, COLLEGE of Applied Health Sciences	19
<i>Division of Radiologic Sciences Scholarships</i>	19
<i>IU South Bend Medical Imaging Club</i>	20
<i>Student Responsibilities</i>	21
<i>Academic Honesty</i>	22
<i>Academic Honesty Statement</i>	22
<i>Academic Dishonesty Statement</i>	22
<i>Title IX Sexual Violence Policy</i>	23
<i>Religious Accommodation Statement</i>	24
<i>Disabilities Statement</i>	24
<i>IU South Bend Student Counseling Center (SCC)</i>	24

<i>Indiana University South Bend Tuition (2016-2017)</i>	25
<i>Tuition Costs</i>	25
<i>University Refund Policy</i>	26
<i>Refund Schedule</i>	26
Chapter 3:	27
Progression Policies	27
<i>Progressing to Completion</i>	28
ATTENDANCE AND BEHAVIOR	28
<i>Clinical Course Attendance</i>	28
<i>Clinical Etiquette</i>	29
<i>Classroom Etiquette</i>	29
<i>Volunteering as a Representative of the Radiography Program</i>	30
PLAGIARISM:	30
<i>Technology</i>	30
<i>Canvas and E-mail</i>	31
<i>Smartphones and Personal Assistant Devices</i>	31
<i>Cell Phones and Text Messaging/Image Capture</i>	31
<i>Writing Guide and Expectations</i>	32
<i>Writing Rubric (Guidelines):</i>	33
GROUP WORK EXPECTATIONS	34
<i>Program Grading Scale</i>	36
<i>Program Grading</i>	36
<i>Calculating GPA</i>	36
<i>Grade Grievances</i>	36
<i>Radiography Program Academic Policies</i>	40
<i>Academic Policies</i>	40
<i>Student Violations</i>	41
<i>Violation of Policy or Procedure</i>	42
<i>Problem Assessment Form</i>	42
<i>Problem Area Assessment Form/Academic and Clinical Alert Form</i>	43
<i>Learning Contract and Professional Improvement Plan</i>	44
<i>Learning Contract and Professional Improvement Plan</i>	45
<i>Faculty/Student Learning Contract</i>	45
<i>Good Standing in the Radiography Program</i>	46
<i>Clinical Promotion</i>	46

<i>Academic Probation</i>	48
<i>Dismissal</i>	48
<i>Appeals</i>	48
<i>Appeal Process</i>	48
<i>Withdrawal</i>	49
<i>Leave of Absence</i>	49
<i>Reinstatement Policy and Procedures</i>	49
<i>Indiana University South Bend Radiography/Medical Imaging Programs Student Drug Screen Policy</i>	51
CHAPTER 4:	53
Radiography	53
Program Policies	53
<i>Chain of Responsibility</i>	54
<i>Radiography Program Roles</i>	55
<i>Program Director</i>	55
<i>Clinical Coordinator</i>	56
<i>Clinical Instructor</i>	57
<i>Clinical Faculty/Staff</i>	58
<i>Adjunct Instructor</i>	58
<i>Student Radiographer Essential Abilities</i>	59
<i>Essential Abilities and Clinical Competency Exams</i>	59
<i>Beliefs about the Adult Learner</i>	60
<i>American Registry of Radiologic Technologists (ARRT) Code of Ethics</i>	62
CODE OF CONDUCT	63
<i>Professional Conduct</i>	63
<i>ARRT Standards of Ethics</i>	63
<i>Patient Confidentiality</i>	65
<i>Impaired Student Policy</i>	65
<i>Statement of Adherence of Internship Facility</i>	67
<i>Student Health Screening</i>	68
<i>Hepatitis B Immunization and TB testing</i>	68
<i>Flu Shots</i>	68
<i>Clinical Malpractice Insurance</i>	69
<i>CPR Certification</i>	69
<i>Health Insurance</i>	69
<i>Social Media Etiquette</i>	69

<i>Cellphone Etiquette</i>	70
<i>Clinical Agency Phones/Pagers/Computers</i>	70
<i>Professional Organizations</i>	71
<i>Program Costs</i>	72
<i>Laptop Requirements for IU South Bend Campus</i>	72
<i>Lead Initial Markers</i>	73
<i>Refund Policy</i>	73
<i>Student Records</i>	73
<i>Student Conferencing</i>	73
<i>Program Grading Scale</i>	74
<i>Academic Standards</i>	74
<i>Issuance of Student Violation(s) and Possible Probation/Suspension/Dismissal</i>	76
<i>Withdrawal from Program</i>	76
<i>Program Graduation Requirements</i>	77
<i>Employment Placement</i>	77
<i>Student Grievance Procedure</i>	77
<i>Weekly Clinical Progress Evaluation</i>	78
<i>Service Learning- Community Service Project for Student Radiographers</i>	80
<i>Pregnancy Policy</i>	82
Chapter 5:	85
Clinical Policies	85
<i>Addressing Staff and Faculty</i>	86
APPEARANCE	86
<i>Dress Code</i>	86
<i>Smoking</i>	87
<i>Attendance</i>	88
<i>Documentation of Clinical Experience</i>	88
<i>Adhering to Scheduled Clinical Rotation Times</i>	88
<i>Personal and Sick Hours</i>	89
<i>Use of Personal Time for Weekend Rotations</i>	89
<i>Absence from Clinical Laboratories</i>	90
<i>Absence from Clinical Assignment</i>	90
<i>Unexcused Absences</i>	90
<i>Funerals</i>	91
<i>Educational Leave</i>	91

<i>Snow Days/Inclement Weather/Campus Closure</i>	<i>91</i>
<i>Jury Duty</i>	<i>91</i>
<i>Indiana University Reserves Policy.....</i>	<i>91</i>
<i>Tardiness</i>	<i>92</i>
<i>Semester Breaks</i>	<i>92</i>
<i>Clinical Experience during Semester Breaks.....</i>	<i>93</i>
<i>Clinical Experience Assignment.....</i>	<i>93</i>
<i>Breaks</i>	<i>93</i>
<i>Lunch.....</i>	<i>93</i>
<i>Slow Periods</i>	<i>93</i>
<i>Guests in Clinical Setting</i>	<i>93</i>
<i>Transporting Patients.....</i>	<i>93</i>
<i>Storage of Student Personal Equipment at Clinical Education Site.....</i>	<i>94</i>
<i>Student Bulletin Board</i>	<i>94</i>
<i>Radiation Monitoring Devices and Safety Policy.....</i>	<i>94</i>
<i>Education – Radiation Safety:.....</i>	<i>94</i>
<i>Radiation Monitoring Policy:.....</i>	<i>95</i>
<i>Radiation Monitoring Devices:</i>	<i>95</i>
<i>Radiation Safety Policy:.....</i>	<i>96</i>
<i>Clinical Experience Supervision Policy</i>	<i>96</i>
<i>Program Medical Image Evaluation Policy.....</i>	<i>97</i>
<i>Program Radiograph Repeat Policy</i>	<i>97</i>
<i>Equal Learning Opportunities</i>	<i>98</i>
<i>Student Computer Access to Clinical Site Computer System</i>	<i>98</i>
<i>Clinical Performance Incident Notes and Records</i>	<i>98</i>
<i>Clinical Performance Incident Notes</i>	<i>99</i>
Chapter 6:.....	100
Clinical Experience	100
<i>Description of Clinical Experience</i>	<i>101</i>
<i>Clinical Placements</i>	<i>101</i>
<i>Clinical Experience Courses.....</i>	<i>101</i>
<i>First Year Clinical Experience</i>	<i>101</i>
<i>Second Year Clinical Experience</i>	<i>102</i>
<i>Determination of Clinical Grades</i>	<i>102</i>
<i>ASR Student Clinical Performance Evaluations</i>	<i>102</i>

<i>Student Clinical Laboratory Evaluations – Simulated Lab Exams</i>	104
<i>Clinical Competency Performance Evaluations – Patient Exams</i>	104
<i>ARRT Statement on Didactic Competency Requirements</i>	105
<i>ARRT Statement on Clinical Competency Requirements</i>	105
<i>Clinical Evaluation System Structure</i>	105
<i>Policy for Signing Off on Evaluations on E*Value</i>	108
<i>Criteria for Clinical Competency Performance Evaluation</i>	109
<i>Clinical Competency Requirements – Essential Abilities</i>	111
<i>Achieving Clinical Competency on Radiographic Procedures</i>	112
<i>Flowchart Summary</i>	112
<i>Clinical Course Descriptions</i>	113
<i>Clinical Assignments</i>	114
<i>Junior Clinical Course Syllabus</i>	115
<i>Junior Student Clinical Lab Schedule: R181</i>	120
<i>Junior Student Clinical Lab Schedule: R182</i>	121
<i>Clinical Summer Course Syllabus</i>	122
<i>Senior Clinical Course Syllabus</i>	124
<i>Fall 2016 Clinic Schedule</i>	127
<i>Spring 2017 Clinic Schedule</i>	128
<i>Summer 1&2 2017 Clinic Schedule</i>	129
<i>AHLT-R181 and AHLT-R182 Clinical Lab Syllabus</i>	130
<i>Laboratory Competency Categories</i>	132
<i>Student Clinical Laboratory Evaluation</i>	133
<i>Clinical Competencies Class of 2017</i>	134
<i>Imaging Procedures</i>	135
<i>*Class of 2017</i>	135
<i>Clinical Competency Rechecks, *Class of 2017</i>	138
<i>Clinical Competencies Class of 2018</i>	139
<i>Imaging Procedures</i>	140
<i>*Class of 2018</i>	140
<i>Clinical Competency Rechecks, *Class of 2018</i>	143
APPENDIX	144
<i>IU South Bend Radiography Program: ASR Student (Clinical) Performance Evaluation*</i>	145
<i>IUSB RADIOGRAPHY PROGRAM: Student Clinical Laboratory Evaluation</i>	146
CLINICAL COMPETENCY PERFORMANCE EVALUATION	147
<i>Clinical Supervision & Repeat Policy</i>	148

<i>Evaluation of Compliance</i>	148
<i>Clinical Experience Performance Summary</i>	149
<i>Clinical Performance Incident Notes</i>	157
STUDENT VIOLATION FORM	158
<i>Problem Area Assessment Form/Academic and Clinical Alert Form</i>	159
<i>Learning Contract and Professional Improvement Plan</i>	160
<i>Faculty/Student Learning Contract</i>	160
<i>Program Radiograph Repeat Policy</i>	161
ETHICAL STANDARDS and CODE OF CONDUCT	162
<i>MRI Student Screening Form</i>	163
<i>Safety Statement – Magnetic Resonance Imaging (MRI)</i>	164
<i>Pregnancy Policy</i>	166
<i>Statement of Adherence of Internship Facility</i>	168
<i>Honor Code for All Students</i>	169
<i>Request for Change in Academic Standing</i>	170
<i>Request for Leave of Absence</i>	170
<i>Student Signature Page</i>	171

CHAPTER 1:

Introduction

Introduction

Welcome to the Associate in Radiography Program at Indiana University South Bend. The Radiography Program is part of the Vera Z. Dwyer College of Health Sciences, School of Applied Health Sciences. We are pleased you have chosen to pursue your degree in radiography with us! The faculty and staff look forward to working with you and wish you much success in the pursuit of your educational goals. In an effort to help you successfully achieve your goals we have put together this handbook of program policies and procedures.

These policies and procedures outline what is needed to successfully progress through the Radiography Program. Student radiographers are responsible for all information in this handbook and should become familiar with its contents. The handbook should serve as a reference during your time in the program.

This handbook has been constructed as a supplement to the Indiana University Code of Students Rights, Responsibilities and Conduct and serves to bridge the overriding policies of the university with the policies of the AS in Radiography program. The policies in this handbook are designed to support the success of the student and to serve as a guide and a reference for students enrolled in the AS in Radiography program. Please note that where the policy of a School/Program is more restrictive, students are held to the more restrictive policy.

A copy of Indiana University Code of Student Rights, Responsibilities, and Conduct is provided to each student upon acceptance to the university and can be located at the IU website at:

<http://studentcode.iu.edu/>.

The IU South Bend AS in Radiography Program is fully accredited by the:
Joint Review Committee on Education in Radiologic Technology (JRCERT).

20 North Wacker Drive, Suite 2850

Chicago, Illinois 60606-3182

www.jrcert.org

Accreditation by the JRCERT is a voluntary process and all programs in radiography and medical imaging can seek accreditation. The JRCERT promotes excellence in education and enhances the quality and safety of patient care through accreditation of educational programs in medical imaging. The JRCERT is currently the only agency recognized by the United States Department of Education for the accreditation of educational programs in radiography and medical imaging.

Program Description

The Radiography Program is an educational program, sponsored by Indiana University South Bend. The program is designed to prepare students as competent, professional radiologic technologists within the regionally served area.

The program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The American Medical Association (A.M.A.), the American Society of Radiologic Technologists (ASRT), the AEIRS (Association of Educators in Radiologic Technology), and the American College of Radiology (ACR) serve as collaborating agencies in the accreditation process.

Upon completion of the program, students receive an Associate of Science in Radiography Degree. Graduates are then eligible to take the national certifying examination given by the American Registry of Radiologic Technologists (A.R.R.T.).

The education of the student radiographer consists of didactic classes, clinical laboratories, and clinical field experience. Each student will be assigned to a clinical agency for the duration of the program. This will be considered the student's primary or home clinical site. During clinical experience, the student rotates through a variety of clinical areas in the hospital imaging departments and is required to complete the affiliate clinic rotations at all the clinical education sites during the twenty- two (22) month clinical/professional program. The student becomes part of the hospital health care team and performs clinically under the direction of the radiologists, with the assistance of a staff of registered radiologic technologists.

IU SOUTH BEND RADIOGRAPHY PROGRAM CONTACTS

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Program Advisory Committee

Indiana University South Bend

Lori Balmer, Director Radiography/Medical Imaging Technology Program

Amy Gretencord, ASR Clinical Coordinator

Maryann Oake, BSMIT Clinical Coordinator

Kristyn Quimby, Ed.D, DH, Assistant Dean, School of Applied Health Sciences

Karen Clark, Ed.D., RN; Interim Dean, College of Health Sciences

Indiana University Health-Goshen Hospital

Melody Ernsberger, Director, Radiology Department

Elkhart General Hospital

William Molen, Radiology Manager, Radiology Department

Memorial Hospital

Derek Taylor, Director of Radiology

Saint Joseph Regional Medical Center-Mishawaka

Dave Hofstra, Director of Diagnostic Imaging Services

Saint Joseph Regional Medical Center-Plymouth

Barbara Cox, Director, Radiology Department

Statement of JRCERT Compliance

The Indiana University South Bend Radiography program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The radiography program strives to make every possible attempt to comply with all Standards established by JRCERT. To review a copy of these Standards please go to <http://www.jrcert.org/programs-faculty/jrcert-standards/>. If at any time during their clinical professional education a student feels that the program is not in compliance with the established Standards, they should contact JRCERT by (1) mail: 20 North Wacker Drive, Suite 2850, Chicago, IL 60606-3182; (2) phone: (312) 704-5304; (3) fax: (312) 704-5304 or (4) email: mail@jrcert.org. Any complaint found to have merit by the JRCERT will be addressed and corrected to the satisfaction of the JRCERT.

Philosophy of the Program in Radiologic Technology

The program is based on the belief that the student radiographer should experience as many forms of educational opportunity as possible in both the didactic and clinical setting as part of their student learning environment. In today's dynamic healthcare field, the student needs to be given the necessary skills to adapt to constant change. It is our belief that general education course work in English composition, mathematics, chemistry, human anatomy and physiology, public speaking, and medical terminology will enhance the abilities of the graduate technologist while the attainment of the associate degree will elevate their professional status.

The program functions in partnership with the University and the medical facilities within the regionally served community. One part of this partnership involves on-site clinical education sites for our students. The second part involves the responsibility of the Radiography Program to provide the community with clinically competent graduate radiographers who will model proper professional behaviors. The students, the community, and the University benefit in an environment of trust and cooperation between all involved parties.

Mission and Goals of the Program in Radiologic Technology

Mission Statement:

The mission of the Radiography Program is to provide our students with a comprehensive education in radiography and prepare them to become clinically competent radiographers who will conduct themselves in a professional manner during their practice of diagnostic radiography. The student will be acquainted with all available methods of instruction in clinical and didactic radiography, to include the cognitive (problem solving, critical thinking, and verbal and written communication), psychomotor, and affective domains. Upon graduation, the student is to be sufficiently prepared to successfully pass the American Registry of Radiologic Technologists certification examination.

Program Goals

1. The student will graduate with the skills needed to function as an entry-level radiographer.
2. The student will provide quality patient care.
3. The student will be able to effectively communicate.
4. The student will demonstrate critical thinking and problem solving skills.
5. The student will demonstrate professional behaviors that are appropriate for the academic and clinical setting.
6. The student will demonstrate engagement in the regional community.

Student Learning Outcomes

Student Learning Outcome 1:

- A. The student will demonstrate mastery of diagnostic imaging skills at the entry-level defined by the program.
- B. The student will complete a variety of diagnostic radiographic exams with 75% accuracy.
- C. The student will apply principles of radiation safety.

Student Learning Outcome 2:

- A. The student will be able to provide basic patient care to patients in the clinical setting.
- B. The student will be able to assess the patient for appropriateness of exam.

Student Learning Outcome 3:

- A. The student will be able to effectively communicate with diverse populations (age, gender, culture) in the clinical setting.
- B. The student will demonstrate good written and verbal communication skills in the clinical and didactic setting.
- C. The student will be able to accurately take patient histories and correlate the diagnosis with the appropriate radiographic exam.

Student Learning Outcome 4:

- A. The student will be able to accurately evaluate radiographic images for diagnostic quality.
- B. The student will be able to adapt to injured patients and successfully perform trauma radiography at an entry level.
- C. The student will be able to accurately complete diagnostic radiography on diverse populations to include geriatric and pediatric patients.

Student Learning Outcome 5:

- A. The student will demonstrate professional behaviors.
- B. The student will be dependable and punctual to clinic and to class.

Student Learning Outcome 6:

- A. The student will complete a community service project that benefits the regional community.
- B. The student will participate in one professional meeting at the regional, state or local level.

AS in Radiography Program Statements

Upon completion of the program, the graduate should be able to demonstrate the ability to:

1. Function as a clinically competent diagnostic radiographer
2. Demonstrate professional behaviors in accordance with the American Society of Radiologic Technologists (ASRT) Code of Ethics during their practice of diagnostic radiography
3. Employ critical thinking and problem solving skills that will enhance their procedural capabilities during the performance of radiographic examinations
4. Demonstrate effective verbal and written communication skills in their interactions with patients, physicians, peers, and other members of the health care team
5. Successfully complete and pass the American Registry of Radiologic Technologists (ARRT) certification examination on their first attempt
6. Apply knowledge of the principles of radiation protection according to ALARA standards to the patient, oneself, and others
7. Apply knowledge of anatomy, positioning, and radiographic techniques to accurately demonstrate anatomical instructions on a radiograph
8. Select appropriate exposure factors to achieve optimum radiographic technique with a minimum radiation dosage to the patient
9. Examine radiographs to evaluate exposure factors, patient positioning, and overall diagnostic quality
10. Exercise discretion and sound judgment while providing compassionate patient care during the performance of diagnostic radiographic procedures
11. Recognize emergency patient conditions and initiate lifesaving first aid
12. Recognize the importance of continued education and active membership in professional organizations for personal development and professional growth

CHAPTER 2:

University Policies

FERPA

Family Education Rights and Privacy Act

Indiana University of South Bend is in compliance with the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment). The Family Educational Rights and Privacy Act (FERPA) gives students certain rights with respect to their education records. Notification of students' rights under this Bill is available at the Office of the Registrar or at https://www.iusb.edu/registrar/ferpa_policy.php .

Division of Radiologic Sciences

Program Organizations and Committees Relevant To Student Success

PEER MENTORS

Peer mentors are available to help you and provide ongoing assistance and service to students in a variety of ways through orientation, registration process, freshmen contacts, U100 Threshold Seminars and through personal interaction. Peer mentors provide a personal resource for students when they have questions or problems that they prefer to discuss with another student. Peer mentors collaborate with fellow mentors, faculty, advisors, and staff within their respective schools and colleges to help incoming freshmen and continuing students learn about IU South Bend and about college life in general. They can also answer questions regarding clinical experience.

The Dwyer College of Health Sciences typically has two peer mentors for the academic year. The peer mentor office is located in Northside Hall room 368.

IU SOUTH BEND HEALTH AND WELLNESS CENTER

The IU South Bend Health and Wellness Center, located in the Student Activities Center (SAC), center level, offers free or reduced rate services to IU South Bend students, faculty and staff. Services for a nominal fee include physical exams, assessment of minor injuries and illness, routine health monitoring such as taking blood pressure, and answering health related questions. For a reasonable fee, lab services including Pap smears and cholesterol testing are offered. Hours vary by semester. Watch IU South Bend mass e-mail or the Bulletin Board for announcements of health and wellness activities offered by the Center or call the Health & Wellness Center at 574-520-5557.

Radiologic Sciences Assessment Committee

The Assessment Committee in the Division of Radiologic Sciences is a standing committee of the Radiologic Sciences Faculty. The members are comprised of two to three faculty members and a student representative. The purpose of the committee is to oversee the evaluation of the radiography program with a goal of improving the program and student outcomes. In order to carry out these purposes the committee plans, evaluates, and revises assessment activities and reports the results to the faculty, administration and other interested parties (such as the Office of Information Technologies and the Library).

Several of the activities included in the evaluation plan rely on student input. Examples of such activities include:

- Clinical evaluations
- Skill assessments
- Graduate Exit survey
- Random collection of selected student work
- Course evaluation data
- One Year Post-Graduate Survey

Each of these activities evaluates student data as an aggregate and not as individuals. Students are not asked to identify themselves on any survey. It is essential that students take these assessment activities very seriously. Student input is invaluable in our efforts to improve our program.

Since the assessment plan does undergo revision, the plan may change. However, the purpose of the activities remains the same, as does the committee interest in a “big” picture and not the evaluation of an individual student or faculty. Students who have concerns about the assessment process may bring them to the attention of the director of the program.

Course Instructor Evaluations

Students are invited and encouraged to complete teacher and course evaluations using the online Explorance Blue survey for each course enrolled in. This information is confidentially compiled and reported and the feedback collected is used to improve course instruction. Your participation is highly valued and appreciated.

STUDENT SERVICES, COLLEGE of Applied Health Sciences

Student Services located on the fourth floor at Northside Hall is dedicated to assisting our growing body of Dwyer college students. The advisors and staff are knowledgeable and skilled in their abilities to counsel students throughout their journey at IU South Bend. Whether it is a question regarding course planning, scholarship and financial assistance, or graduation process, the staff and advisors are available, able and willing to assist you.

Division of Radiologic Sciences Scholarships

The Division of Health Sciences is fortunate to have received monies from several generous donors to fund scholarships for our students. On the IU South Bend campus, the Vera Z. Dwyer Scholarship is available to students in all Dwyer College of Health Sciences programs. Additional scholarships include

the Radiologist Scholarship and the Radiology, Incorporated Scholarship. Students must apply through the online application service. <https://www.iusb.edu/scholarships/>

Student advisors and faculty will attempt to e-mail students with announcements about scholarships. All students requesting scholarship monies must have a FAFSA on file at the Financial Aid office at IU South Bend.

IU South Bend Medical Imaging Club

Students enrolled in the radiography program are invited to participate in the Medical Imaging Club. The Medical Imaging Club is a voluntary organization for students enrolled in either the Radiography Program or the BS in Medical Imaging Technology Program. The purpose of the Medical Imaging Club is to invite fellow medical imaging students to come together as a group. The medical imaging club is also utilized for fund-raising and community outreach activities.

Medical Imaging Club Officers for 2016-2017:

President: Abbey Anderson

Vice President: Ashley Weber

Treasurer: Marisa Troyer

Student Responsibilities

Just as students have rights, they also have responsibilities. Indiana University recognizes its responsibility to support and uphold the basic freedoms and citizenship rights of all students, and it expects students to be responsible for the following:

- A. Uphold and follow all codes of conduct, including this Code, relevant codes and bulletins of respective schools, professional programs or professional societies, and all rules applicable to conduct in class environments or university-sponsored activities, including off-campus clinical, field, internships, or in-service experiences.
- B. Obey all applicable university policies and procedures and all local, state, and federal laws.
- C. Facilitate the learning environment and the process of learning, including attending class regularly, completing class assignments, and coming to class prepared.
- D. Plan a program of study appropriate to the student's educational goals. This may include selecting a major field of study, choosing an appropriate degree program within the discipline, planning class schedules, and meeting the requirements for the degree.
- E. Use university property and facilities in support of their education while being mindful of the rights of others to use university property and facilities.
- F. Maintain and regularly monitor their university accounts including e-mail and bursar accounts.
- G. Uphold and maintain academic and professional honesty and integrity.
- H. Be responsible for their behavior, and respect the rights and dignity of others both within and outside of the university community.

In addition to these on-campus responsibilities, the university may discipline a student for acts of personal misconduct or criminal acts that are not committed on university property.

For additional information on student responsibilities, please visit

<http://studentcode.iu.edu/responsibilities/index.html>

Academic Honesty

Faculty members have the responsibility to foster the intellectual honesty of the students. Should the faculty member detect signs of plagiarism or cheating, it is his or her duty to investigate thoroughly, to take appropriate action with respect to the grades of the students, and to report the matter to the Office of the Vice Chancellor for Student Affairs. For detailed information concerning the procedure to be followed in the case of cheating or plagiarism, the student's right of appeal, and the penalties to be assessed, see the Code of Student Rights, Responsibilities, and Conduct at <https://www.iusb.edu/judicial/> .

Academic Honesty Statement

It is the responsibility of the student to know of the prohibited actions such as cheating, fabrication, plagiarism, academic, and personal misconduct, and thus, to avoid them. All students are held to the standards outlined in the code. Please reference the entire code for a complete listing (<https://www.iusb.edu/judicial/>). Any violation may result in serious academic penalty, ranging from receiving a warning, to failing the assignment, to failing the course, to expulsion from the University.

Academic Dishonesty Statement

Program faculty takes academic honesty very seriously and expects that as a student in the program, you will approach your studies with honesty and integrity at all times. Acts of academic misconduct such as cheating, plagiarism, falsification or fabrication and personal misconduct will result in disciplinary action which could include failing the assignment, failing the course and/or dismissal from the AS in Radiography Program and/or the university. All students should read and be familiar with the Indiana University Code of Student Rights, Responsibilities and Conduct which can be found at <http://www.dsa.indiana.edu/Code/>.

It is the student's responsibility to know what constitutes academic dishonesty. While interpretations of academic dishonesty may vary between individuals or groups some examples of academic dishonesty have been provided in the lists below:

Cheating

1. Submitting work from another course or a previous course.
2. Copying from another student's exam during a test.
3. Consulting, duplicating or distributing old exams from previous students.
4. Providing answers or allowing another student to copy from you during an exam or on an assignment.
5. Discussing test questions or providing answers to an exam to another student.
6. Allowing a student other than you to complete an online exam in your place.
7. Altering or falsifying graded work.

Plagiarism

1. Failure to give credit for ideas, facts and statements that belong to the author.
2. Failure to acknowledge an original author for their material.
3. Failure to accurately cite reference or give credit to an author.
4. Passing another person's work off as your own original work or taking credit for someone else's work.
5. Using undocumented web sources or attempting to use undocumented radiographic images.
6. Submitting a paper that has been purchased from another author or the internet.

Title IX Sexual Violence Policy

Indiana University is committed to the safety and well-being of all members of the University community including students and employees. Indiana University recognizes that sexual misconduct may result in grave and often long-lasting effects on those involved and is committed to timely investigation of allegations of sexual misconduct, use of interim measures when appropriate, and appropriate actions and consequences following investigations. Indiana University is committed to compliance with state and federal laws regarding sexual misconduct, required reporting to state and federal agencies, and to working with law enforcement officials and agencies. The University is also committed to using its resources in research and education to improve preventative programs. For more information, please visit <http://policies.iu.edu/policies/categories/administration-operations/equal-opportunity/sexual-misconduct.shtml> . To learn more about stopping sexual violence, please visit <http://stopsexualviolence.iu.edu/> . If you are seeking help and would like to speak to someone confidentially, you can make an appointment with a Mental Health Counselor on campus (contact information available at <http://stopsexualviolence.iu.edu/employee/confidential.html>).

Religious Accommodation Statement

If any student will require academic accommodations for a religious observance, please provide the professor with a written request to consider a reasonable modification for that observance by the end of the second week of the course. Contact the professor after class, during office hours, or by individual appointment with the professor to discuss the issue. If after discussion no consensus is reached, either party or both should seek the advice of the Dean, and again if no consensus is reached, then the advice of the Executive Vice Chancellor of Academic Affairs (EVCAA). Either the instructor or the student may appeal the EVCAA's decision to the Office of Affirmative Action within ten business days of the determination. Indiana University respects the right of all students to observe their religious holidays and will make reasonable accommodation, upon request, for such observances. Additional information regarding accommodation for religious observances can be found at <http://enrollmentbulletin.indiana.edu/pages/relo.php>

Disabilities Statement

If you have a disability and need assistance, arrangements can be made to accommodate most needs. Contact the Disability Support Services office (Administration Building, room 113/112, telephone number 520-4832 or 4256), as soon as possible to work out the details. Once the DSS office has provided you with a letter attesting to your needs for accommodations bring the letter to me. For more information, please visit the web site for the - Disability Support Services Office www.iusb.edu/disability-support/services.php

IU South Bend Student Counseling Center (SCC)

If you find that life stressors are interfering with your academic or personal success, you are encouraged to contact the SCC as early in the semester as possible. SCC services can help with issues that range from coping with life's transitions to dealing with more serious emotional problems. Group counseling is available for issues such as test anxiety and ADHD. All enrolled students are eligible for personal and confidential short-term counseling services at no cost. Over 80% of students who utilize the SCC report that it helps them with their academic success. The best way to request services is by calling 520-4125. The SCC is located in the Administration Building, Room A130. Hours are generally 9:00-5:00 Monday through Friday but can vary slightly each semester. For more information: <https://www.iusb.edu/student-counseling/index.php>

Indiana University South Bend Tuition (2016-2017)

Once you register, IU reserves specific class space for you and commits resources to provide instruction you have selected. By registering, you assume the responsibility for paying course fees or properly withdrawing from classes when you decide not to attend. Your registration is not cancelled for nonpayment of fees.

Credit hour fees for tuition are based on residency classification, career (class), program, and selected courses.

- All fees are approved by the Board of Trustees, usually in mid-May, and are subject to change without notice by action of the Board
- Tuition costs are not discounted for children of alumni or families with multiple students in attendance.
- IU South Bend does not have a reciprocity agreement with surrounding states.

Tuition Costs

Undergraduate	In-State	Out-of-State
12 - 18 Credit Hours (flat fee)	\$3,238.80/term	\$9,043.95/term
Credit hours above 18 (in addition to flat fee)	\$215.92/credit hour	\$602.93/credit hour
Fewer than 12 credit hours	\$215.92/credit hour	\$602.93/credit hour
Summer Only	\$215.92/credit hour	\$602.93/credit hour

Additional information about university tuition and course fees can be found online at https://www.iusb.edu/bursar/tuition_and_fee_rates/2016-2017-fees.php

University Refund Policy

If you officially withdraw from a course, refunds are made according to the schedule below. See the Bursar Services homepage or the IU South Bend academic calendar for refund dates for a specific semester. Check or e-check refunds will be mailed to your home address or sent to your bank account if you have set up direct deposit. Credit card refunds will be processed to card used for original payment. Additional information about the university refund policy can be found online at <https://www.iusb.edu/bursar/refunds.php>.

Refund Schedule

Refer to the [campus semester calendar](#) for refund dates. Refunds are based on the following schedules:

Nine- to Sixteen-Week Courses

Withdrawal Period	Refund
First week of class	100% of tuition & course related fees
Second week of class	75% of tuition
Third week of class	50% of tuition
Fourth week of class	25% of tuition
After fourth week	No refund

Chapter 3: Progression Policies

Progressing to Completion

The AS in Radiography Program is a competency-based program. In a competency-based program, clinical and didactic courses are taught in a very specific sequence to build upon material previously learned. Students must demonstrate competency and mastery of course material before progressing to the next course(s) in the next semester. This chapter lists the policies and procedures required for progression in the radiography program.

ATTENDANCE AND BEHAVIOR

Course Attendance

1. Students are expected to attend all lectures and are held responsible for content presented.
2. In case of absence, it is the student's responsibility to obtain the information presented from another classmate.
3. Attendance is monitored at the discretion of the instructor and will be taken into consideration when final grades are calculated.
4. All classes canceled due to snow or other unforeseen events will be rescheduled, if possible, or material will be made available.
5. When offered, students are responsible for attending scheduled examination hand-back sessions for review of their examinations. If unable to attend, arrangements must be made with faculty before the hand-back session.

Clinical Course Attendance

Clinical hours are carefully calculated in accordance with national standards in radiography. Published hours can and do vary according to the clinical experience or rotation schedule.

In general, a 4 credit hour clinical course meets for 22.5 hours each week for 15 weeks in the fall and spring semesters of the first year in the program for 15 weeks each semester. A 4 credit hour clinical course meets for 26 hours each week for 15 weeks in the fall and spring semesters of the second year in the program for 15 weeks each semester. A 4 credit hour clinical course meets for 37.5 hours each week for 6 weeks in each summer session.

Clinical Etiquette

- Faculty needs to have current information on how to reach each student during or following each clinical day. The clinical coordinator or clinic faculty member needs to be able to contact the student.
- It is unprofessional and unacceptable to use the clinical telephones or computers for personal calls/contacts. Using a unit/agency telephone should be reserved for emergencies only.
- Most clinical agencies prohibit the use of personal cell phones. Breaching these policies will be considered unprofessional and may jeopardize completion of your clinicals.

Classroom Etiquette

- In order to maintain a respectful environment, collegial behavior is required. Students who do not demonstrate professional, collegial behavior will be asked to leave the classroom and must meet with the instructor prior to the next class session. Any student who continues to demonstrate intimidating and/or disruptive behavior that interferes with a respectful environment conducive to learning may not be permitted to return to the classroom and will be referred to the Admission, Progression, and Graduation Committee of the IU South Bend Programs in Radiography/Medical Imaging for action.
- Following IU South Bend policy, children are not permitted in the classroom, lab or clinical setting at any time.
- Lecture content is presented beyond reading assignments and not all reading assignments are covered in the lecture—please plan accordingly when studying.
- As a courtesy, students are to request permission of the instructor conducting the class to tape/digitally record the class.
- All handouts and test questions are considered to be the intellectual property of the course instructor. Students are prohibited from posting and/or sharing handouts or test questions with other students. Sharing test questions with other students is considered as cheating and will be dealt with according to IU policy.
- Often PowerPoint slides are provided for each lecture on Canvas. It is not mandatory for students to print out the handouts, which are provided as a courtesy to students. Students should be prepared to take detailed notes. These handouts are intended as a tool for students and should not be distributed for uses beyond the class note-taking.

Volunteering as a Representative of the Radiography Program

Volunteering for Health Fairs and special projects:

Students may be asked to help at health fairs and other health related activities. Students should not volunteer as an IU South Bend Radiography/Medical Imaging student unless the activity is an event endorsed by the Division of Radiologic Sciences. Please check with faculty if you are asked to participate before committing to help.

PLAGIARISM:

Students shall complete the plagiarism tutorial during AHLT-R102: Radiographic Principles I or AHLT-R100: Radiographic Procedures I. The certificate shall be filed in the student record. Refer to the IU Code of Student Rights, Responsibilities and Conduct Part 2: Student Responsibilities.

Technology

Computer Competency

Computer competency is required in the study and practice of medical imaging. Students in the Programs in Medical Imaging are required to demonstrate computer competence in the following areas:

1. Word Processing: Students must be proficient in the use of a word processing program compatible with the IU South Bend computer system, such as Microsoft Word.
2. Internet Resources: Students must be proficient in utilizing the Internet to locate resources.
3. Electronic Database Searching: Students must be proficient in utilizing library and other database web sites to search for scholarly resources.
4. E-mail: Students must be proficient in sending and receiving e-mail messages.
5. Power Point Presentations: Students must be proficient in the use of PowerPoint.

The Office of Information Technologies at IU South Bend offers frequent classes/resources for students in all of the areas listed above. Students are strongly encouraged to utilize these resources.

Canvas and E-mail

It is the professional responsibility of the student to check email and Canvas on a regular (daily) basis. Canvas is used for course communication and content and should be checked often for announcements and changes.

E-mail is considered official communication by the University. The student is responsible for monitoring and responding as appropriate.

Students are expected to have and maintain Canvas and general word processing and computer skills. Please seek training and assistance from Information Technology if you have problems with the program or its use. Insufficient skills in using Canvas or computers are not an excuse for getting assignments in. IU South Bend provides resources and training.

Smartphones and Personal Assistant Devices

IU South Bend Radiography Program prohibits the use of laptops in clinic. These should not be brought to the clinical agencies.

Also, flash drives, thumb drives and other portable data drives are prohibited in the clinical units. These are considered breaches of patient record security.

Cell Phones and Text Messaging/Image Capture

Students may not use cell phones during class (or clinic). Cell phones must be turned to silent mode or off (in clinic). In the event of an emergency (i.e., sick child call, etc.) the instructor reserves the right to make exceptions. During exams, cell phones must be shut off and zipped inside the student's purse or book bag.

At no time are students permitted to text message during lectures. Students found using cell phones inappropriately will be asked to leave the class and return during the next class period.

Writing Guide and Expectations

Writing Expectations (Indiana University Programs in Radiography/Medical Imaging)

Writing competency is an expected outcome of the Radiography Program and the University. In an effort to prepare students to meet this vital competency, faculty has developed the following criteria to be used in assessing student writing:

- The writing has a focus.
- The writing is organized with an introduction, purpose, sense of audience, thesis and conclusion.
- The writing shows development, organization and detail; the writing reveals the student's ability to develop ideas with balanced and specific arguments.
- The writing is clear and concise.
- There is coherence within and between paragraphs.
- The writing reflects critical thinking and linking the specific to the general.
- The writing contains appropriate sentence structure, variety, punctuation and spelling; it is free from errors in grammar and punctuation.
- The writing follows APA or MLA style and format unless otherwise specified for a specific purpose.
- The writing demonstrates original work, and where ideas or materials of others are used, appropriate credit is given to original sources.

Writing Rubric (Guidelines):

The following grading rubric is used for most writing assignments. Faculty assigns points and may add expectations to this standard format.

The following grid explains areas of assessment and criteria:

Indiana University South Bend Radiography Program Writing Rubric

Areas of Assessment		Criteria
Organization (pts)	____ ____ ____ ____ ____ ____	An inviting introduction, conclusion leaves a sense of closure Thoughtful transitions Sequencing is logical & effective Pacing is well controlled The title is original Flows smoothly
Voice (pts)	____ ____ ____ ____	The reader feels a strong interaction with the writer The writer takes a risk The tone & voice are appropriate for the purpose & audience Strong commitment to this topic
Conventions (pts)	____ ____ ____ ____ ____	Spelling is correct Punctuation is accurate Grammar and usage are correct Appropriate use of technical terms Paraphrasing tends to be sound
Presentation (pts)	____ ____ ____ ____	APA format is followed Paraphrased & quoted information is referenced appropriately The title makes it easy to access the desired information Timely completion of assignment
Rubric (pts)	____	Hands in rubric with assignment

GROUP WORK EXPECTATIONS

Throughout the program students are expected to work in groups. The medical imaging profession is a team- based profession and learning to manage and work in groups is an essential skill. The following charts can assist you in practicing best group behavior:

Group Project Grading Rubric as a guide for Group Work

Category	Beginning	Developing	Accomplished	Exemplary
Group Cooperation	We did most of the work by ourselves, we talked a little among our group members	We worked together most of the time, sharing information regularly	We worked together so that everyone contributed to the final project	Everyone worked together using his or her abilities and knowledge to make the project come together
Distribution of Group Tasks	Some group members did not complete any of the work	Everyone had a job to do but some jobs were incomplete	We divided up and completed the work equally	Work was shared fairly according to the abilities and interests of the members
Group Leadership	We had no leader so we just did our own thing	No one person was a leader so we usually helped each other get the job done	One or more persons took a leadership role and gave good directions that kept us going	We had a leader who helped us organize and stay on task until the job was complete
Communication among group members	We only talked when we thought we needed to, but received little	We talked about what we were doing	We usually asked each other for help and showed our work to each other	We talked all the time and shared our work for group feedback
Individual Participation	A few people tried very hard, but most didn't do much	Each person did some work and tried to do a fair share	We all seemed to find our place and do what was needed	Everyone did a great job, I would work with these people again
Listening to other points of view	We usually listened to what others were saying but some either did not share ideas or argued	We usually listened to each other and tried to use what they said in the project	We listened while others talked, we learned about different viewpoints, and used some of that information in the project	Everyone listened to each other a lot, and used what we heard to improve our work and the whole project
Showing respect	No one was courteous and opinions were not valued	Some were courteous and some opinions were valued	Most were courteous and most opinions were valued	All were courteous and valued each other's opinions
Rate your experience of this group	I would rather work alone	I learned that group work can sometimes be helpful	I liked learning this way and would probably try it again	It was a valuable and realistic way to learn. My group was great.

Honest evaluation of individual members performance in a group (include yourself).

Category	Beginning 1	Developing 2	Accomplished 3	Exemplary 4
Source of Conflict	Participated in regular conflict that interfered with group progress. The conflict was discussed outside of the group.	Was the source of conflict within the group. The group sought assistance in resolution from the instructor.	Was minimally involved in either starting or solving conflicts.	Worked to minimize conflict and was effective at solving personal issues within the group.
Assistance	Contributions were insignificant or nonexistent	Contributed some toward the project	Contributed significantly but other members clearly contributed more	Completed an equal share of work and strived to maintain equity throughout the project
Effectiveness	Work performed was ineffective and mostly useless toward the final project	Work performed was incomplete and contributions were less than expected	Work performed was useful and contributed to the final project	Work performed was very useful and contributed significantly to the final project
Attitude	Rarely had a positive attitude toward the group and project	Usually had a positive attitude toward the group and project	Often had a positive attitude toward the group and the project	Always had a positive attitude toward the group and the project
Attendance & Readiness	Rarely attended group meetings, rarely brought needed materials,	Sometimes attended group meetings, sometimes brought needed materials,	Almost always attended group meetings, almost always brought	Always attended group meetings, always brought needed materials,
	and was rarely ready to work	and was sometimes ready to work	needed materials, and was almost always ready to work	and was always ready to work
Focus on the task	Rarely focused on the task and what needed to be done. Let others do the work.	Focused on the task and what needed to be done some of the time. Other group members sometimes had to nag, prod, and remind to keep this member on task.	Focused on the task and what needed to be done most of the time. Other group members could count on this person most of the time.	Consistently stayed focused on the task and what needed to be done. Other group members could count on this person all of the time.

Program Grading Scale

The Radiography Grading Scale for didactic and clinical course work is:

100 = A+	91 = B+	82 = C+	73 = D+	64-0 = F
99-93 = A	90-84 = B	81-75 = C	72-66 = D	
92 = A-	83 = B-	74 = C-	65 = D-	

The following grades are used in determining grade point averages throughout the program using the corresponding four (4) point system:

A+ = 4.0	B+ = 3.3	C+ = 2.3	D+ = 1.3	F = 0
A = 4.0	B = 3.0	C = 2.0	D = 1.0	I = Incomplete
A = 3.7	B- = 2.7	C- = 1.7	D- = 0.7	

Program Grading

If a student is unsuccessful in a course, refer to the IU South Bend Bulletin for progression guidelines. It is recommended that the student meet with the faculty member first. Advisors are available to assist students with the procedures. Before repeating a course, it is recommended that the student carefully examine and rectify study/class habits that may have led to difficulties in the course; this may include counseling for text anxiety and time management. Students will be asked to submit a plan for success before repeating a course.

Calculating GPA

Your SIS transcript shows your semester and cumulative GPA. You can also use the GPA calculator found at: www.iusb.edu/registrar/gpacalculation.php

Grade Grievances

If a student disputes their final course grade, the student must discuss the matter with the faculty member assigning the grade. Further information regarding grade grievances can be found in the current IU South Bend Bulletin and Code of Student Rights, Responsibilities, and Conduct. Assistance may also be obtained from a Student Services Advisor.

Testing and Test Make-Up

The only acceptable excuses for missing an exam are serious illness or death of a close family member. The student must contact the faculty member directly, no later than one hour before the exam is to be given. The student must leave their name and phone number. Failure to notify the secretary or faculty member will result in a "0" for that exam. Faculty will decide on the type of examination to be given to the student who is unable to take the original examination. The Radiography Program does not accept late work without penalty. For every day an assignment, quiz, or exam is turned in or taken late 10% will be deducted from the final score.

1. Examinations will be scheduled, and all students are required to take all examinations.
2. The course instructor of the exam will:
 - Distribute the exam and answer sheet
 - Give any instructions and corrections verbally prior to the start of the exam.
 - Write any corrections on the chalkboard.
 - Refrain from answering questions regarding the exam or define any terms on the exam during scheduled exam time.
3. The student(s) taking the examinations will:
 - Arrive at the designated room on time.
 - Be the only persons allowed in the classroom.
 - Leave all books, coats, purses, etc., under the desk or area designated by proctor.
 - This policy also applies to exam hand-back sessions.
 - Note taking is not permitted during exam hand-back sessions.
 - Turn cell phones off and place securely in backpack or purse.
 - Remove hats, hoodies, and jackets with large pockets.
 - If calculators are permitted, only freestanding pocket calculators are allowed and Cell phones cannot be used as a calculator.
 - Refrain from suspicious behaviors such as talking, looking around the room, looking at another student, raising your paper for others to view or glancing at other computer screens.
 - Place yourself in a position or space in the test room to avoid the appearance of cheating.
 - Often seating assignments will be made for exams.
 - Keep answer sheets covered and refrain from looking at other's computer screens.
 - Your exam will be removed and you will receive a zero "0" if suspected of cheating.
 - Report any misconduct or annoying behavior to the proctor during the exam so appropriate action may be taken.
 - Credit will not be given for any answer erroneously transposed.
4. The student will refrain from discussing exam content with class members. Most faculty will provide an opportunity to review exams when all students have taken the exam.
5. Those students coming late will:

- Wait until all initial directions are given and questions answered.
 - Be given the exam and answer sheet or passwords by the proctor.
 - Be given no additional verbal directions.
 - Be given no extension beyond the time allotted for the exam.
6. Questions about test content will not be answered during an exam. If you have some other difficulty, raise your hand and a proctor will come to your seat.
7. Cheating:
- If you display any of the following behaviors: looking around the room, looking at another computer in a computer lab, looking at another student's paper, not covering your answer sheet, raising your paper, you will be suspected of cheating, YOUR PAPER OR COMPUTER WILL BE TAKEN FROM YOU (or your exam blocked on the computer) AND YOU WILL BE GIVEN A "0" FOR THE EXAM.
 - If you have any problems with the above stated behaviors, you need to move to the front of the room at the beginning of the test session.
 - Disclosure of exam material including its nature or content during or after the exam is prohibited and will be considered cheating.
 - Faculty has the right to determine if behavior appears to be cheating. The student Code of Conduct is followed for reporting and discipline.
8. Accommodations for testing are only provided with written documentation from the Office of Disabled Students:
- Test anxiety should be addressed with assistance from the Student Counseling Center.
 - The only acceptable method to avoid distractions, are ear plugs.
9. Policy for make-up tests is as follows:
- Make-up exams are possible, but are the exception.
 - They may be given for such circumstances as personal illness/injury, hospitalization of student's own child, or death in the family.
 - The prerequisite to this is that the student must call the instructor in advance of the test to explain the absence (illness, for example, unless the student is involved in a traffic accident on the way to the test). Documentation may be required.
 - Make-up tests may be the same test or essentially the same test given to the entire class. It should be given on the next work day following the original test date unless extenuating circumstances (such as a continuing illness, death of an immediate family member or funeral out of town) prevent the student from taking the test within 24 hours or the next day. Documentation may be required. For each day the examination is made up late, 10% will be taken from final exam score.
10. Final exams:
- The published exam schedule as provided by the Registrar's Office for the IU South Bend campus is followed and adhered to by the Radiography Program unless otherwise noted. A final examination schedule will be emailed to students well in advance of finals week.

11. Reporting of Exam Results:

- Faculty requires a minimum of 24-hours to review exam results including item analysis.
- It is inappropriate and unprofessional to argue with faculty regarding exam questions.
- Course faculty is the expert on their course content and will provide guidelines for students who identify questions they believe need additional review.
- How faculty handle this is up to the individual faculty or course and will be announced.
- Examination scores will be posted to Canvas within a week of the exam. Please do not call or e-mail faculty regarding exam grades. Results will not be called or e-mailed.
- Students will refrain from coming to faculty offices or congregating in hallways awaiting results following the exam. Faculty will release results of exam via Canvas grade book or in manner deemed appropriate by course faculty.
- Exam hand-back sessions are scheduled at the discretion of the faculty. Note-taking is not permitted during these review sessions unless directed by faculty.
- Final exams are not subject to exam review unless deemed appropriate by faculty.

Radiography Program Academic Policies

All universities establish academic requirements that must be met before a degree is conferred. These regulations concern such things as curricula and courses, the requirements for majors and minors, and university procedures and policies. Each student is individually responsible for fulfilling them. Advisors and faculty are available to advise students on how to meet these requirements. If the requirements have not been satisfied, the degree will be withheld pending satisfactory fulfillment. For this reason, it is important for each student to be knowledgeable of all of the requirements described in the IUSB Undergraduate Bulletin and the Radiography Program Student Handbook.

Students are expected to comply with the:

- Academic Regulations and Policies of Indiana University
- Professional ASRT Code of Conduct
- Professional ARRT Standard of Ethics
- Components of Professional Behavior of the IUSB Radiography Program
- Radiography Program Clinical Student Handbook

Academic Policies

- Students must earn a grade of C or better in all required courses, including general education courses, and maintain a semester and overall GPA of at least 2.0. A student who does not meet the academic regulations of the University and the Radiography Program is placed on probation.
- Students must follow the Radiography Program course sequence as outlined in the IU South Bend campus Bulletin. Failure to follow the course sequence will result in delayed/denied admission to the next course sequence.
- If a student does not pass any one of the clinical practice courses: AHLT-R181, AHLT-R182, AHLT-R281, AHLT-R282 or AHLT-283 or didactic courses: AHLT-R100, AHLT-R101, AHLT-R102, AHLT-R103, AHLT-R201 or AHLT-R250 with a grade of C or better, the student will not be eligible to continue in the clinical practice course sequence and his or her status will be changed to out-of-sequence. Out-of-sequence students must follow the policies and procedures regarding reinstatement in order to complete the program.
- A student will be dismissed from the program if any two clinical or didactic courses or a combination of these courses are not passed with a grade of C or better. There are no options for reassessment or reinstatement.
- Radiography program courses, other than those listed above, that are not passed must be retaken and passed with a grade of C or better the next time they are offered. It is the student's responsibility to enroll in the failed course in the proper semester.

Student Violations

Student violation forms will be issued in the clinic for policy or procedure violations that are inconsistent with program expectations. Violations will be issued by the student's clinical instructor and/or the program clinical coordinator at the time of the violation, with planned remediation and follow-up by the clinical instructor and/or the clinical coordinator. Each violation form is accompanied by a loss of 5 points from the student's clinical course grade.

This student has been found by the clinical instructor to be in violation of a student policy as stated in the Radiography Program Clinical Student Handbook.

Student: _____ Date: _____

Policy Violated:

Comments:

Clinical Instructor Signature

Date:

Student Signature

Date:

Program Director Signature

Date:

Number of Student Violation Forms Given
for Entire Clinical/Professional Program _____

Violation of Policy or Procedure

A violation of any program policy will result in the issuance of a Student Violation Form by the clinical instructor. The student, the clinical instructor, the clinical coordinator and the program director must sign the Student Violation Form. Violation forms are associated with the loss of 5 points from the student's clinical course grade for each violation issued. Violation forms will become part of the student's performance record. A student may receive a Student Violation Form for violating any stated policy or procedure in the Student Handbook. Accumulation of Violation forms during the 22-month program will result in the following:

Number of Violation Forms	Consequences of Accumulation of Violation Forms
2	Student Conference with Clinical Instructor and Clinical Coordinator
4	Issuance of Clinical Performance Alert
6	Issuance of a Learning Contract and Possible Probation and/or Suspension from Clinic
8	Dismissal from the Program

Problem Assessment Form

Alerts within the professional program will be given to inform students when their academic progress is not consistent with program expectations and are at risk for failure in a course(s). Information regarding the issue will be noted along with recommendations for remediation provided by faculty issuing the alert. Failure to remediate and make acceptable progress will result in reevaluation of academic standing and progression within the program.

Upon issuance of a second alert, the student will be issued a Learning Contract and a Professional Improvement Plan outlining the issue, the necessary remediation, and the outcome if the student is not successful at the end of remediation. Two or more academic alerts within a semester or program may be grounds for dismissal from the program.

Students may not appeal Academic and/or Clinical Alerts.

Problem Area Assessment Form/Academic and Clinical Alert Form

Faculty members use the Problem Area Assessment Form to identify specific problems a student may be encountering in a course(s).

College of Health Sciences Problem Area Assessment Form

Student Name _____ Course _____ Sem/Yr. _____

PROBLEM AREAS	COMMENTS
Behavior	
Accountability	
Late Assignments	
Tardiness	
Absenteeism	
Incomplete assignments	
Professional Behavior	
Attitude	
Language	
Lack of preparation	
Difficulty following appropriate chain of command	
Inappropriate dress	
Failure to follow uniform policy	
Difficulty functioning independently	
Difficulty controlling anxiety	
Difficulty accepting constructive criticism	
Communication	
Inappropriate interaction	
Lacks assertiveness	
Difficulty expressing self	
Inappropriate/incomplete documentation	
Difficulty with written work	
Difficulty following directions	
Critical Thinking	
Difficulty applying previously learned knowledge and skills	
Difficulty problem solving	
Difficulty assessing client needs	
Difficulty evaluating self realistically	
Difficulty demonstrating logical thought processes	
Difficulty evaluating consequences of own actions	

Faculty signature _____ Date _____

I have read and understand the identified problem areas. I also understand that this information will be placed in a confidential file for the purpose of tracking my progress throughout the remainder of the program. Repeated receipt of this form by a student may lead to a learning contract, loss of points from course grade, a student violation or other consequences.

Student signature _____ Date _____

Learning Contract and Professional Improvement Plan

Learning contracts are designed to help students succeed in a course when the student has been experiencing difficulties. It is not intended to be punitive but it is a serious effort to identify ways to avoid failure in a clinical course. A learning contract will include competencies not being achieved, description of problem behaviors, goals to achieve in order to be successful in the course, and a mutually developed plan. This plan will include deadlines by which these goals must be achieved. The student is expected to fully participate in developing and implementing the plan for improvement, and to communicate the plan to all relevant faculty members as long as the contract is in effect. If a student is unable to meet the terms of their learning contract, it may become grounds for failure of the course or dismissal from the program.

When a Learning Contract is issued a Professional Improvement Plan will be implemented and the student will have a formal conference with the faculty and Director. The issues leading to the alerts will be discussed; recommendations will be made for remediation with specific due dates and requirements along with the outcome if the student is not successful during the plan. Should the student not be successful, dismissal from the program will occur with or without the option of reinstatement. Once dismissed, the student has a right to appeal the dismissal following the appeal procedures outlined in this handbook.

Learning Contract and Professional Improvement Plan

Indiana University South Bend Medical Imaging Programs

Faculty/Student Learning Contract

A learning contract helps the faculty and student share the responsibility for achieving desired outcomes for success in the course. It also helps increase accountability and provides feedback to the student regarding progress toward meeting course goals.

Student:

Course:

Semester:

Faculty:

Description of Problem:

Competencies/Objectives or Goals not being met (completed by faculty):

Faculty suggestions for success: (include any deadlines):

Student Responsibilities and plan for success with dates to be met:

My signature below indicates that I understand and agree to the following:

_____ I must adhere to the identified plan and demonstrate all expected course competencies/objectives successfully in order to succeed in this course; the inability to do so could result in failure of the course.

Good Standing in the Radiography Program

To remain in good standing, a student must:

1. Maintain a grade of C (2.0) or better in each required course.
2. Not repeat any course more than once.
3. Maintain an overall GPA of 2.0 or above.
4. Demonstrate ethical and professional behavior.
5. Follow the required course sequence

Clinical Promotion

In addition to the general academic policies, students must meet the following requirements to be promoted through the clinical course sequences:

1. Students will be promoted to the R181 Clinical Experience in Radiography upon successful completion of:
 - R103 Introduction to Clinical Radiography
2. Students will be promoted to R182 Clinical Experience in Radiography upon successful completion of:
 - R100 Orientation to Radiologic Technology
 - R101 Radiographic Procedures I
 - R102 Principles of Radiography I
 - R181 Clinical Experience in Radiography
3. Students will be promoted to R281 Clinical Experience in Radiography upon successful completion of:
 - R182 Clinical Experience in Radiography
 - R201 Radiographic Procedures II
 - R208 Computer Applications in Radiography
 - R250 Physics Applied to Radiography
4. Students will be promoted to R282 Clinical Experience in Radiography upon successful completion of:
 - R281 Clinical Experience in Radiography
5. Students will be promoted to R283 Clinical Experience in Radiography upon successful completion of:
 - R282 Clinical Experience in Radiography
6. Students will be promoted to R290 Comprehensive Experience in Radiography upon successful completion of:
 - R202 Principles of Radiography II

- R205 Radiographic Procedures III
- R200 Pathology
- R283 Clinical Experience in Radiography

Academic Probation

A student will be placed on academic probation for the duration of the next regular semester or summer session following the one in which they failed to meet the conditions for clinical promotion and/or failed to abide by the Indiana University Code of Student Rights, Responsibilities, and Conduct.

Dismissal

A student will be dismissed from the program when there is a lack of progress toward the degree. Lack of progress will include, but will not be limited to:

- Failure to achieve a cumulative GPA of 2.0 in any two consecutive semesters.
- Failure to complete all required courses with a minimum grade of C by the second completed attempt.
- Failure to meet the stipulations of probation.
- Failure to meet the criteria Components of the Professional Behavior Contract.
- Failure to remediate following the issuance of an Academic or Clinical Alert, 2 or more alerts occurring within the program, or failure to meet the components of a Learning Contract or a Professional Improvement Plan.
 - Failure to meet all the requirements for reinstatement.
 - Dismissal may occur without prior probation.

Appeals

Students have the right to appeal an academic decision to the Dwyer College of Health Sciences Promotion, and Graduation (APG) Committee for probation or dismissal.

Grade appeals should first be addressed with the course instructor according to the grade grievance policy for IU South Bend: <https://www.iusb.edu/registrar/grievance.php> .

Appeal Process

Students who wish to appeal the APG committee's probation or dismissal decision must appeal to the Assistant Dean of the College. The appeal must be in writing (email) and include the reason for the appeal. The Assistant Dean will set up a meeting with the student and Program Director to discuss the issue. A separate meeting will be scheduled with the student and Assistant Dean of the Dwyer College Student Success Center.

Withdrawal

See General Academic Regulations for all campuses in the *IUSB Bulletin* for policies regarding withdrawal from a class; withdrawal from the university https://www.iusb.edu/finaid/repayments_withdrawals.php

Withdrawal from the Radiography Program

Students who withdraw from the radiography program can apply for reinstatement however; reinstatement is not guaranteed and depends on the availability of clinical site placements. Students who withdraw a second time will not be readmitted or eligible for reinstatement.

Students who are administratively withdrawn from the program are not eligible for reinstatement.

Leave of Absence

Students must submit in writing a request for a leave of absence to the Director of the Radiography Program. Requests for leave of absence will be evaluated and approved on the basis of academic standing and potential for progress toward the degree.

Students granted a leave of absence resulting in the delay of clinical course sequence will result in a change in their status within the radiography program to *out-of-sequence*. The policies and procedures for reinstatement will apply. Reinstatement will be granted depending upon the availability of clinical placements and satisfactory completion of any condition and/or faculty recommendations existing at the time of leave. Reinstatement to the Radiography Program is not guaranteed.

Reinstatement Policy and Procedures

All out-of-sequence students must apply for reinstatement.

Reinstatement Procedure

Step 1: Written Request for Reinstatement

Students who wish to be reinstated must submit a completed “Request for Change in Academic Standing” form to the Director of Radiography Program by the following dates:

March 1 – for Summer Session I Reinstatement
June 1 – for Fall Semester Reinstatement
October 1 – for Spring Semester Reinstatement

The written request for reinstatement form can be found in the appendix and requires the following:

1. An explanation of the extenuating circumstance that hindered academic performance.
2. Personal action plan for student's success.
3. A list of the specific course(s) in which the student must enroll to complete the program.
 - All requests for reinstatement will be evaluated on the basis of successful completion of any requirements or faculty recommendations and available clinical placements.
 - Students who are reinstated must adhere to the academic policies in effect at the time of reinstatement.

Step 2: Validation of Theory and Clinical Competencies

All theory and skill competencies must be validated as outlined by program faculty before a student can re-enroll and begin clinical course work.

Step 3: Reinstatement

Upon successful demonstration of academic and clinical competencies within the designated time, the student will be reinstated into the Radiography Program. The student may re-enroll in the sequential course when it is next offered in the curriculum.

Upon successful demonstration of academic and clinical competencies within the designated time, the student will be reinstated into the Radiography Program. The student may re-enroll in the sequential course when it is next offered in the curriculum.

Indiana University South Bend Radiography/Medical Imaging Programs Student Drug Screen Policy

Purpose: To provide a safe working environment, area hospitals and other healthcare institutions are requiring individuals who provide care to patients to undergo drug testing. For this reason, students in the Radiography/Medical Imaging Programs will undergo drug testing to meet the criteria of clinical agencies. All students entering the Radiography and Medical Imaging Clinical/Professional Programs will undergo drug testing as a condition of admission into the programs. Those admitted prior to the May 1, 2013 policy implementation will be screened prior to the fall 2013 semester in order to allow continued participation in the Radiography Program.

Policy: The IU South Bend Radiography/Medical Imaging Programs enforce a zero tolerance for impairment due to alcohol and/or drug use while on campus or in clinical affiliation experiences. Infringement of this policy will cancel the offer of admission, and for those admitted to the Radiography/Medical Imaging Programs, be subject to disciplinary action up to and including academic dismissal.

1. Student admission to the Radiography/Medical Imaging Program, is contingent upon a drug screening test result indicating no evidence of drug use. A drug screening result indicating dilution of the sample will require a repeat drug test.
2. The student is responsible for the cost of the drug screening which is part of the background check conducted for admission and the screening must be completed by the date designated by the program prior to starting the clinical/professional portion of the program.
3. In the event of a drug screening result indicating use of an illegal drug or controlled substance without a legal prescription, student admission to the Radiography/Medical Imaging Programs will be denied. Results will be submitted to the program director or designee. **Duty to Report:** if the student is a licensed/registered health professional, a report will be made to the Attorney General and Indiana Professional Licensing Agency (or in the state(s) in which the applicant holds a license).
4. Students may be permitted to take legally prescribed and/or over-the-counter medications consistent with appropriate medical treatment plans while on duty. However, when such prescribed or over-the-counter medications affect clinical judgment, the student's safety or the safety of others, the student will be removed from clinical course work. The program director will be consulted to determine if the student is capable of continuing to participate in academic and clinical education programs.
5. After admission to the Radiography/Medical Imaging Programs, at any time faculty or an administrator suspect a student is impaired due to drug or alcohol use while in the clinical environment, classroom, or campus areas, the student will be removed from the area and required to undergo immediate testing for drug and alcohol use at the student's expense. Impaired students will not be permitted to drive and must bear the cost of transportation. The student will be suspended from all clinical activities until the investigation into the situation is complete.
6. In the event of a medical error, accident, or injury, testing will be conducted according to the policy of the clinical agency.

7. Referrals for evaluation and counseling for drug and/or alcohol use will be a part of a plan for a student with a positive screening or incident related to drug or alcohol use.
8. In the event of a positive drug screening of a student currently enrolled, the Radiography/Medical Imaging Programs, the student will be suspended from the program pending review by the program director or designee. **Duty to Report:** if the student is a licensed/registered health professional, a report will be made to the Attorney General and Indiana Professional Licensing Agency (or in the state(s) in which the applicant holds a license).
9. More frequent drug testing (ex. annually) can be implemented at any time and without further notice.

Note: *Students will be notified by mail regarding the time and location of the test. Students will be responsible for the costs incurred. The results of the screening will be submitted to the program director or designee.*

CHAPTER 4:

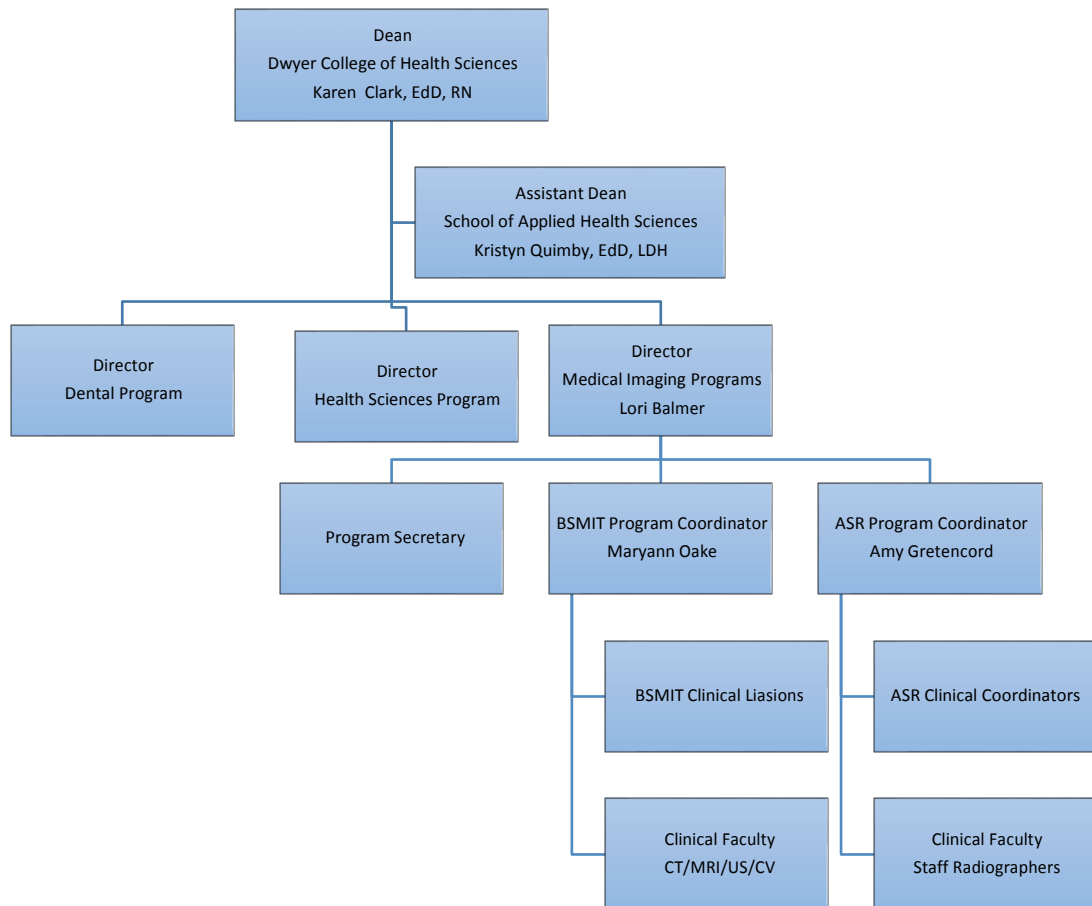
Radiography

Program Policies

Vera Z. Dwyer College of Health Sciences

College of Applied Health Sciences

Chain of Responsibility



Radiography Program Roles

Program Director

The program director is a full-time member of the faculty of the Division of Radiologic Sciences. The Division of Radiologic Sciences is housed in the College of Applied Health Sciences in the Vera Z. Dwyer College of Health Sciences at IU South Bend. The program director must hold the appropriate credentials with the American Registry of Radiologic Technology, the Indiana State Board of Health and must have earned a Master's Degree.

Duties include:

- Teach didactic courses in the AS in Radiography and the BS in Medical Imaging Technology Programs
- Maintain current knowledge of the professional discipline and education methodologies through professional development
- Organize, administer and review program effectiveness
- Evaluate and review clinical education effectiveness
- Develop, organize, review and revise program curriculum in accordance with current ARRT Content Specifications
- Develop ongoing program evaluation through outcomes assessment
- Develop and revise course descriptions and course objectives
- Complete regular clinical site visits to review effectiveness and compliance with program policies
- Provide oversight and guidance for program faculty and staff
- Provide guidance and advising for prospective students and students enrolled in the medical imaging programs
- Engage in recruitment efforts for prospective students
- Demonstrate a positive attitude toward students, faculty and staff and promote an atmosphere of collaboration and mutual beneficence
- Organize and conduct faculty meetings with program faculty
- Oversee the program budget and contribute to the formulation of the budget
- Serve on department, college and university committees
- Engage in community service, service to the profession and service to the university
- Oversee fair and just enforcement of all program policies
- Maintain open lines of communication for faculty and student concerns

Clinical Coordinator

The clinical coordinator is a full-time member of the faculty of the Division of Radiologic Sciences at IU South Bend. The clinical coordinator teaches didactic classes, provides oversight for all affiliated clinical sites and serves as a liaison between the university and the clinical agencies. The clinical coordinator must hold the appropriate credentials with the American Registry of Radiologic Technology, the Indiana State Board of Health and have earned a Bachelor's Degree.

Duties include:

- Teach didactic courses in the AS in Radiography Program
- Provide guidance and advising for student radiographers
- Maintain current knowledge of the professional discipline and education methodologies through professional development.
- Evaluate the effectiveness of clinical education
- Serve as a liaison between the university and affiliated clinical agencies
- Coordinate clinical and didactic education
- Contribute to the development, implementation and evaluation of program goals and objectives
- Evaluate, revise and maintain program policies
- Evaluate and assure effectiveness of clinical education via regular clinical site visits
- Establish methods of evaluation to ensure student progress in the program
- Conduct regular meetings with clinical and program faculty to document students' clinical progress
- Act as a student advocate and representative of Indiana University South Bend to ensure compliance with program and university policies
- Coordinate and maintain student records in a confidential manner
- Serve on department, college and university committees
- Engage in community service, service to the profession and service to the university
- Facilitate the assignment of clinical course grades
- Evaluate, revise and assure adherence to the clinical lab schedule
- Conduct on-site clinical labs when appropriate
- Maintains a positive attitude toward students, faculty and staff and supports the mission of the program
- Maintain open lines of communication for clinical faculty and student concerns

Clinical Instructor

The clinical instructor is a full-time employee of the affiliated clinical agency and functions as a liaison between the students assigned to that agency and the faculty at IU South Bend. The clinical instructor teaches clinical labs, provides oversight for student radiographers at the assigned clinical site and with assistance from the clinical coordinator, assigns clinical course grades. The clinical instructor must hold the appropriate credentials with the American Registry of Radiologic Technology and the Indiana State Board of Health.

Duties include:

- Maintain current knowledge of the professional discipline and education methodologies through professional development
- Teach on-site clinical labs and conduct clinical skills validations
- Adhere to the clinical lab schedule and seek assistance from the clinical coordinator as needed to maintain coordination between didactic and clinical course material
- Understand and adhere to program policies and procedures
- Assign clinical course grades and report course grades to the clinical coordinator
- Provide oversight and guidance for assigned student radiographers
- Evaluates students for clinical competency and assurance of clinical progress
- Conducts student conferences to discuss student progress at mid-term and at the end of each semester
- Routinely shares formative feedback to assure clinical progression
- Maintain open lines of communication for on-site clinical faculty and student concerns
- Utilize the E*Value electronic record-keeping system
- Participate in program faculty meetings
- Supports the program and promotes its ideals and mission

Clinical Faculty/Staff

Clinical faculty consists of staff members employed by the affiliated clinical agency. Clinical faculty/staff provide oversight for student radiographers in assigned clinical rotations and perform student clinical competency evaluations which are reported via the E*Value electronic record-keeping system to ensure clinical progress. Clinical faculty/staff must hold the appropriate credentials with the American Registry of Radiologic Technology and the Indiana State Board of Health.

Duties include:

- Maintain current knowledge of the professional discipline
- Understand and adhere to program policies and procedures
- Support the program and promote its ideals and mission
- Participate in the evaluation of students in clinical rotations
- Evaluate students' clinical competency and reports graded Clinical Competency Exams via the E*Value electronic record-keeping system
- Maintain direct and open communication with the clinical instructor to assure students' clinical progress

Adjunct Instructor

Adjunct faculty consists of appropriately qualified members of the medical imaging community who are contracted by the university to teach a specific clinical or didactic course for a designated period of time. Adjunct faculty must hold the credentials equal to one-degree higher than the level at which they are teaching.

Duties include:

- Teach didactic/clinical courses in the AS in Radiography Program
- Provide guidance and advising for student radiographers assigned to the course
- Understand and adhere to program policies and procedures
- Support the program and promote its ideals and mission
- Understand and adhere to program policies and procedures
- Maintain current knowledge of the professional discipline and education methodologies through professional development
- Establish methods of evaluation to ensure student progress in the course
- Assign course grades and communicate grades to the program director
- Maintains a positive attitude toward students, faculty and staff and supports the mission of the program

Student Radiographer Essential Abilities

The AS in Radiography Program has established a set of clinical requirements called Essential Abilities. Demonstration of essential abilities is required to assure clinical competency and student progress in the clinical setting. All students enrolled in the program must be able to meet these minimum requirements to participate fully in all aspects of clinical education.

Essential Abilities and Clinical Competency Exams

All students enrolled in the AS in Radiography Program must complete a specific number of radiographic exams which are referred to as Clinical Competency Exams. These exams are performed on patients in the clinical setting. To successfully complete a Clinical Competency Exam, the student must demonstrate the following essential abilities.

To successfully complete a Clinical Competency Exam the student must be able to:

1. Perform hand hygiene prior to and after the imaging procedure.
2. Properly identify the patient utilizing 2 identifiers in accordance with departmental policies.
3. Evaluate patient requisition or medical record for patient name, date-of-birth, imaging procedure, ordering physician and appropriateness of exam in regard to patient history.
4. Obtain patient history and document previous exposure to contrast, history of allergies and document patient responses (when applicable).
5. Demonstrate the use of universal precautions as appropriate (isolation patients, gloves, goggles, etc.).
6. Complete patient education by explaining the procedure and answering the patient's questions in a manner that is appropriate for the patient's level of communication..
7. Successfully prepare the exam room by selecting the appropriate equipment to include the image receptor, SID and tube set-up prior to making the x-ray exposure.
8. Successfully position the patient for the selected radiographic exam.
9. Utilize the correct lead marker and the proper lead marker placement.
10. Demonstrate an ability to adapt to special considerations or changes in patient's condition in accordance with the student's level of training.
11. Demonstrate appropriate patient care and professional behavior throughout the procedure.
12. Select the correct radiographic technique for the anatomic part prior to making the x-ray exposure.
13. Select the appropriate lead shielding when necessary and demonstrate compliance with ALARA principles.
14. Perform the radiographic imaging procedure in a timely and efficient manner consistent with departmental protocols.
15. Identify relevant anatomy, image display, archiving, PACS and image retrieval.
16. Properly identify images with patient date and other relevant data.
17. Recognize image quality in accordance with acceptance levels for given department.
18. Confer with radiographer, radiologist or physician as needed prior to discharging patient.

Beliefs about the Adult Learner

Beliefs about Teaching

1. Teaching involves considering cognitive, psychomotor, and affective “domains” to assist learning (Bloom, B.S. (Ed.), 1956)
2. Teachers are encouraged to mentor, guide, and challenge and provide support (Taylor, Marienau & Fiddler, 2000)

Principles of Learning

1. Learning is a voluntary, dynamic process that encompasses a person’s total being throughout the life span.
2. When people learn, they may change their attitudes, values, lifestyle, and method of solving problems.
3. Lifelong learning begins with the acquisition of new knowledge, information, and skills and can produce changes in one’s behavior.

Factors that Facilitate Learning

1. The person must be ready to learn, both physically and emotionally.
2. The person learns more if there is a genuine desire to learn.
3. Learning is facilitated in a pleasant physical environment that is free from distractions.
4. Material is learned more easily when it is presented in a form that has meaning for the person.
5. The person is more successful in remembering and assimilating well-organized materials that proceed from the simple to complex.
6. Learning is strengthened and reinforced when positive behaviors are rewarded.
7. People learn more effectively when they are encouraged to participate in the education process.
8. Repetition of key factors and concepts reinforces learning.
9. People retain information and skills longer when they are allowed to put new information and skills into practice immediately.
10. People occasionally reach learning plateaus, which may be overcome by modifying the teaching-learning methods.

Beliefs about Clinical/Practicum Teaching/Learning

Students pass through 5 levels of proficiency; novice, advanced beginner, competent, proficient, and expert (Brenner, P., 1984).

Assumptions that Characterize Adult Learning: Andragogic Model

1. As individuals mature, they become increasingly self-directed regarding learning.
2. Adult learners approach new learning experiences with a lifetime of accumulated learning and experiences.
3. Adult learners define or characterize themselves in terms of their experiences, which relates to their self-concept.
4. Adult learners are characterized by a readiness to learn in order to cope with real life situations.

Adapted from Marian College Radiologic Technology Handbook 2016; page 9.

http://www.marianuniversity.edu/uploadedFiles/_marianuniversityedu/Academic_Programs/School_of_Nursing_and_Health_Professions/RT%20Student%20Handbook%2010%202012.pdf

American Registry of Radiologic Technologists (ARRT) Code of Ethics


Professionalism: ARRT Standards of Ethics

Medical imaging professionals are guided by a standard of ethics as published by the American Registry of Radiologic Technologists (ARRT) and a Code of Ethics published by the American Society of Radiologic Technologists (ASRT). Students are expected to adhere to the ARRT Code of Ethics.

The ASRT Code of Ethics provides for the safety, protection and comfort of the patients and serves as a guide for ethical conduct to which imaging professionals should adhere.

The rules of Ethics are mandatory and enforceable policies of the profession, which establish minimally, accepted standards for the medical imaging profession. Students enrolled in the medical imaging programs should familiarize themselves with the ASRT Code of Ethics.

The “Code of Ethics” will be part of the evaluation process for the **Clinical Experience Course** grade.




The poster features the ASRT logo on the left, which includes the text "asrt" in a stylized font and "American Society of Radiologic Technologists" below it. On the right, the title "Code of Ethics" is written in a large, elegant serif font. The central content consists of ten numbered ethical principles arranged in three columns. A decorative graphic of a sphere on a diagonal line is positioned behind the text. At the bottom right, there is a circular seal of the American Society of Radiologic Technologists. At the bottom left, a small line of text reads: "Revised and adopted by the American Society of Radiologic Technologists and the American Registry of Radiologic Technologists, February 2003".

asrt
American Society of
Radiologic Technologists

Code of Ethics

- 1 The radiologic technologist conducts herself or himself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.
- 2 The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
- 3 The radiologic technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion or socio-economic status.
- 4 The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purpose for which they were designed and employs procedures and techniques appropriately.
- 5 The radiologic technologist assesses situations; exercises care, discretion and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
- 6 The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
- 7 The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice and demonstrates expertise in minimizing radiation exposure to the patient, self and other members of the health care team.
- 8 The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
- 9 The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
- 10 The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues and investigating new aspects of professional practice.

Revised and adopted by the American Society of Radiologic Technologists and the American Registry of Radiologic Technologists, February 2003



CODE OF CONDUCT

Professional Conduct

As a student enrolled in the AS in Radiography program, you are choosing a career in a health profession that requires of its members high standards of integrity and ethical conduct. It is expected that each medical imaging student will make a personal commitment to a standard of behavior that will establish a solid foundation for future professional conduct and respect for both the clinical/professional setting and the academic setting at Indiana University South Bend. This includes demonstration of respect for the rights and well-being of fellow students, faculty, staff, patients and other members of the health care community.

ARRT Standards of Ethics

Last Revised: September 1, 2015 Published: September 1, 2015

PREAMBLE

The Standards of Ethics of the American Registry of Radiologic Technologists® (ARRT®) shall apply solely to persons holding certificates from ARRT that are either currently certified and registered by ARRT or that were formerly certified and registered by ARRT (collectively, “Certificate Holders”), and to persons applying for certification and registration by ARRT in order to become Certificate Holders (“Candidates”).

Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular, interventional radiography, breast sonography, and radiologist assistant. The Standards of Ethics are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

STATEMENT OF PURPOSE

The purpose of the ethics requirements is to identify individuals who have internalized a set of professional values that cause one to act in the best interests of patients. This internalization of professional values and the resulting behavior is one element of ARRT’s definition of what it means to be qualified. Exhibiting certain behaviors as documented in the Standards of Ethics is evidence of the possible lack of appropriate professional values. The Standards of Ethics provides proactive guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. The ethics requirements support the ARRT’s mission of promoting high standards of patient care by removing or restricting the use of the credential by those who exhibit behavior inconsistent with the requirements.

A. CODE OF ETHICS

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

The Code of Ethics is aspirational.

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

Patient Confidentiality

Each Clinical affiliate has strict guidelines pertaining to protected patient information, computer access, security and documentation, and patient confidentiality. These specific guidelines vary and are available at each agency. A student may be asked to sign a confidentiality agreement at a clinical affiliated agency.

Violation of these guidelines can result in disciplinary action by the AS in Radiography Program and/or the clinical agency. Such action could include dismissal from the clinical site and/or the AS Program.

The following guidelines are adapted from Memorial Hospital of South Bend and in general reflect expectations of all students in all agencies.

1. Original patient records are not to be removed from their location without exception.
2. Students granted record accesses are accountable for the protection of the record and its contents while in their possession.
3. Students accessing records from medical records shall follow the strict guidelines set forth by this department (including providing written request for review, keeping the materials in the department and reviewing the records in the area specified for this purpose).
4. It is prohibited to share the medical record with family, friends, and staff not directly involved in the patient's care. When in doubt, excuse yourself and check.
5. Students are expected to keep the medical records accessible at all times for medical care purposes.
6. Photocopying or printing off any part of the medical record for a student's purpose is strictly prohibited. Students cannot photocopy parts of the record for their learning purposes.
7. When referring to patients in written work for schoolwork purposes, only initials are to be used. When possible all identifying information should be kept to a minimum.
8. Census records used for report should be properly destroyed before the student leaves the unit.
9. HIPPA guidelines are to be followed at all times as outlined by each clinical agency and federal regulations.
10. Professional standards expect that students withhold discussing any patient situations and confidences outside the professional setting. Situations may only be discussed in private, for the purpose of learning, as instructed by the clinical instructor. When discussing patients in the clinical learning situation, anonymity is to be maintained. Information is not to be shared in public settings including personal e-mails, for purposes other than learning, or with family and friends.

Impaired Student Policy

IU South Bend Division of Radiologic Sciences policy regarding Impaired Students states:

1. The Statement of Adherence of Internship Facility Policies and Procedures form will be signed by the student upon beginning the clinical professional portion of the AS in Radiography Program course and will remain in effect while the student is enrolled in the program.
2. The faculty or staff member who suspects impairment will request that the student immediately leave the area while ensuring the student's safety.

3. The faculty member will determine the most appropriate substance testing location. The student is responsible for receiving immediate testing and bears the costs involved in the testing. If the testing location is not on site, the student will bear the cost of public transportation to the site.
4. The student will be suspended from all clinical experience activities until the investigation into the situation is complete.
5. The IU South Bend Division of Radiologic Sciences enforces a zero tolerance for alcohol and/or drug use.
6. Results must be submitted to the Program Director of the IU South Bend Division of Radiologic Sciences by the testing facility.

Statement of Adherence of Internship Facility

The following form is completed upon admission and annually. While the impaired practitioner is highlighted here, students are expected to conform to all agency policies and practices.

Indiana University Division of Radiologic Sciences

Indiana University South Bend Statement of Adherence of Internship Facility Policy and Procedures

As a student at IU South Bend's Division of Radiologic Sciences, I understand that I must adhere to all policies and procedures of the clinical facilities where I have clinical practicum experience.

I also understand that I may be required to undergo drug and/or alcohol testing at my expense if the facility or the Division of Radiologic Sciences requests it.

Signature:

Printed name:

Date:

Witnessed by (IU Faculty signature)

Date

Student Health Screening

All students are required to have a pre-admission health examination. This must be completed prior to entering the clinical site during the initial summer session. The health screening includes the following:

1. History and Physical
2. Immunizations: Rubella, Rubeola (Measles), Mumps; Tetanus, Pertussis, Diphtheria; Varicella (Chicken Pox); Hepatitis B; and Seasonal Flu
3. TB skin test and chest x-ray (if a positive TB skin test)

In addition, the clinical education site's policy regarding infectious disease will be followed. If a student becomes ill or injured at the clinical site, s/he must report it to the clinical instructor. The student is required to fill out an Incident Report documenting the incident. The completed Incident Report should be turned in to the clinical coordinator as soon as possible. In the event that the student contracts, or is exposed to a communicable disease, the student must notify the clinical instructor. All radiography department and hospital policies regarding infection control will be observed.

Hepatitis B Immunization and TB testing

Documentation of TB test and hepatitis B immunization must be provided to the program clinical coordinator prior to the start of the fall semester. Students will not be allowed to continue in clinical experience until this requirement is met. All missed clinical time must be made up by the end of the semester to avoid a grade of "I" incomplete.

Hepatitis B Immunization and TB Testing for Second Year Students

Prior to the start of the fall semester of their second year, all students are required to complete:

- A TB Questionnaire and chest x-ray if necessary (at their expense)
 - Please see the Clinical Coordinator for TB Questionnaire
- Hepatitis immunizations as required by the Center for Disease Control time table

Flu Shots

The CDC has identified Healthcare Workers in the high risk category in prioritizing who should receive the vaccine; therefore the Radiography Program requires all students receive their annual immunization against the flu. Many clinical agencies require this of their employees to reduce the spread of this illness. If an unvaccinated student radiographer is exposed to a patient with the flu, the student may be removed from clinicals and required to begin treatment against the flu. The absence must be made up according to the make-up policy. The student is responsible for the costs related to the treatment against the flu.

Clinical Malpractice Insurance

Indiana University South Bend carries limited malpractice insurance for all students enrolled in the imaging programs. The policy is in effect only during the time the student is engaged in scheduled clinical field experience and does not cover part-time employment or time spent in the clinical setting which is unrelated to IU South Bend student activities.

CPR Certification

Students without current, active CPR status will not be allowed into the clinical setting.

All students must maintain current CPR status during the entire time they are a student in the program. Clinical Health and Education Requirement (Policy) Rationale for the Policy OSHA regulations and clinical agencies affiliated with IU South Bend require that students engaged in clinical contact with patients/clients must provide evidence of current professional-level CPR certification (Healthcare Provider CPR through the American Heart Association, or CPR/AED for the Professional Rescuer through the American Red Cross). The professional level includes: one- and two-man CPR; adult, child and infant CPR; adult, child and infant choking; and use of the AED (automatic external defibrillator). Heart saver certification is inadequate.

Failure to maintain the expected CPR certification will result in withdrawal from Clinical Experience course work until the appropriate requirement is met. Failure to submit documentation of current CPR certification could lead to an unexcused absence which could lead to course failure. Successful completion of clinical courses requires students to make-up any lost clinical hours due to an unexcused absence prior to the end of the semester. Failure to make-up lost clinical time prior to the end of the semester could lead to course failure

Health Insurance

All students are required to maintain personal health insurance coverage while enrolled in the program. Should it be necessary for the student to obtain medical treatment during clinical hours, it would be the responsibility of the student to cover the costs of this treatment. The radiography program has no provisions to cover such expenses.

Social Media Etiquette

The various forms of social media have brought forth a number of challenges for educators and students in the health professions. Social networking sites are frequently used to share personal thoughts, images, experiences and frustrations. While online content has the potential to enhance the medical imaging profession it can undermine the profession as well.

Content posted online, personally or professionally leaves an electronic footprint that is nearly impossible to erase. Once an image, thought or experience is posted online, it remains forever. Program faculty has posted these guidelines and asks that you use the social media responsibly.

- Student radiographers should apply professional practice and ethical standards equally to live and online activities.
- Student radiographers should always refrain from posting images or information about clinical experiences/frustrations and never post information, which potentially identify a patient.
- Posting patient-related information on social media, whether intended or unintended can breach patient confidentiality, and professional standards.
- Student radiographers should not send friend requests or attempt to friend clinical faculty, clinical agency staff or employees of the hospital until they have graduated from the program.

Please keep in mind, even innocent remarks or postings that label groups or experiences can be misconstrued, considered offensive or inadvertently identify a patient with disastrous consequences. Student radiographers have chosen a profession which expects more of its members; an obligation to behave professionally both online and off.

Please refer to the National Council of State Boards of Nursing website <https://www.ncsbn.org/347.htm> for professional standards related to social media. Guidelines and an important video can be found here. This resource for professional responsibility is invaluable

The IU South Bend Office of Communications web page has related guidelines regarding the use of social media that should be reviewed at <https://www.iusb.edu/ocm/branding/social-media-standards.php>.

Cellphone Etiquette

Personal telephone calls and texting on cell phones is not permitted in the clinical setting. The use of cell phones in the clinical setting is considered disruptive and is strictly prohibited. Students' cell phones should be set to vibrate/silent mode and stored in the designated area during clinical hours. Students who are observed with their cell phones on their person in the clinical setting will be asked to leave their rotation and store their phone in the designated area.

The use of cell phones in the classroom is also prohibited, unless required for an interactive teaching platform such as Top Hat. Cell phones should be set to silent/vibrate mode and students should not engage in texting or Internet searches during scheduled class time. Students who fail to adhere to this policy will be asked to leave the classroom and receive a grade of zero for any missed work for that day.

Clinical Agency Phones/Pagers/Computers

Students should not answer telephones or pagers at clinical agencies. Students should not access agency radiology information systems (RIS or HIS) to engage in altering, scheduling or completing patient exams.

Professional Organizations

Students are invited and encouraged to join their local, and state professional organizations.

1. Indiana Society of Radiologic Technologists (I.S.R.T.): www.isort.org
 - Indiana Journal of Radiologic Technologists (ISRT publication)
 - Fall and Spring conventions
 - Membership (students \$10.00 annual dues)

Students are required to purchase a yearly student membership with the American Society of Radiologic Technologists (ASRT).

1. American Society of Radiologic Technologist (A.S.R.T.): www.asrt.org
 - National Society, membership (students/\$35.00 year) includes subscription to: Radiologic Technology and A.S.R.T. Scanner
 - Students are required to purchase and maintain membership in the ASRT while enrolled in the program. Student membership provides access to educational resources that are utilized to enhance student learning.

National Credentialing Exam

American Registry of Radiologic Technologists (A.R.R.T): www.arrt.org

- The national certification examination given to graduates of approved programs. All graduates are eligible to take the examination and upon passing, will be certified registered technologists in radiography and may use the initials – R.T.(R).
- Application Fee: \$200.00

Program Costs

A list of anticipated expenses outside of tuition, textbooks, and dorm or rent fees has been compiled for students to assist with financial planning. This list should not be viewed as all-inclusive, rather a guide to help in planning student-related expenses associated with the clinical professional program.

AS in Radiography Estimated Program Costs

First Year		Second Year	
Laptop or Tablet Computer	\$1,500	Uniforms (2 sets of scrubs)	\$100
Health Physical with Immunizations	\$250	Clinic Shoes	\$75
ASRT Student Membership	\$35	ASRT	\$35
Drug Screen	\$35	Drug Screen	\$35
CPR - BLS	\$65		
Criminal Background Check	\$40	Immunization Boosters	\$100
Lead Initial Markers	\$22	Corectec Software	\$55
Uniforms (3 sets of scrubs)	\$150	Program Patches (2)	\$10
White or Blue Lab Jacket	\$40		
Program Patches (5)	\$18	ARRT Application Fee	\$200
Clinic Shoes (1 pair)	\$75		
Total Cost First Year	\$2,230	Total Cost Second Year	\$610

This list does not include tuition. Information about tuition is listed on the Office of the Bursar website at: [https://www.iusb.edu/bursar/tuition and fee rates/2016-2017-fees.php](https://www.iusb.edu/bursar/tuition%20and%20fee%20rates/2016-2017-fees.php)

*Tuition and fees are assessed on credit hours enrolled per semester and may include parking, activity, and computer/laboratory fees.

* This list does not include travel expenses or fuel costs associated with traveling to/from campus to affiliated clinical agencies.

*This could be subject to change without notice.

*IUSB Banded Tuition at: <https://www.iusb.edu/succeed/banded-tuition.html>

Laptop Requirements for IU South Bend Campus

The following information is from University Information Technology Services (UITS) (core campuses) and is found at this url: <http://uits.iu.edu/page/antk#new>

New Computer Hardware Minimum Recommendations:

To use all the technology services available at IU, UITS suggests the following minimum hardware components for a new purchase. IU students, faculty, and staff can take advantage of special computer deals; see ComputerGuide: Deals by Vendor. Also, on this page, see the networking hardware section.

Lead Initial Markers

Each student radiographer is responsible for purchasing one set of lead initial markers. Lead initial markers are used in clinic. Students should take care not to lose their lead markers and should always have both lead positional markers with them when in the clinical setting. The average cost for one set of markers is \$20.00. It is the student's responsibility to replace lost markers. The new set of markers must be identical to the originals and must be ordered from the same company.

Refund Policy

IU South Bend's refund policy can be found on the Office of the Bursar website:

https://www.iusb.edu/bursar/policy_procedures/index.php

Student Records

Official transcripts can be obtained from the Office of the Registrar. Students may call (574) 520- 4451 or visit the Registrar's web site (<https://www.iusb.edu/registrar/>) for more information.

Additionally, the program will maintain records of the following while a student is enrolled in the program:

1. Clinical Position Acceptance Form
2. Clinical Student Handbook Signature
3. Radiography Repeat Policy
4. Pregnancy Policy Record
5. Buckley Form
6. Health/Immunization Records
7. Buckley Release of Information Form
8. Final Radiation Monitoring Record

Each student's Clinical Education Evaluation Forms, time cards, and other clinical information documents are returned to the IU South Bend Radiography Office after their graduation from the program to be archived (on file) for one-year post graduation. Students may request an opportunity to inspect their records in accordance with the Buckley Amendment of the "Federal Family Educational Rights and Privacy Act of 1974."

Student Conferencing

Instructor feedback is an important component to successfully completing the Radiography Program. Students are encouraged to conference with clinical and program faculty when necessary and appropriate. Clinical and program faculty will schedule periodic evaluation sessions with the students to discuss program progress.

Program Grading Scale

The Radiography Grading Scale for didactic and clinical course work is:

100 = A+	91 = B+	82 = C+	73 = D+	64-0 = F
99-93 = A	90-84 = B	81-75 = C	72-66 = D	
92 = A-	83 = B-	74 = C-	65 = D-	

The following grades are used in determining grade point averages throughout the program with the corresponding four (4) point system:

A+ = 4.0	B+ = 3.3	C+ = 2.3	D+ = 1.3	F = 0
A = 4.0	B = 3.0	C = 2.0	D = 1.0	I = Incomplete
A- = 3.7	B- = 2.7	C- = 1.7	D- = 0.7	

Academic Standards

Students may not receive a grade of less than C in any of the core courses listed below:

First Year (Junior Year)

Summer Session I

R103: Introduction to Clinical Radiography

Fall Semester

R100: Orientation to Radiologic Technology

R101: Radiographic Procedures I

R102: Principles of Radiography I

R181: Clinical Experience in Radiography I

Spring Semester

R201: Radiographic Procedures II R250:
Physics Applied to Radiography

R208: Topics in Radiography: Computer
Application & Imaging

R182: Clinical Experience in Radiography II

Summer Session I

R281: Clinical Experience in Radiography III

Summer Session II

R282: Clinical Experience in Radiography IV

Second Year (Senior Year)

Fall Semester

R200: Pathology

R202: Principles of Radiography II

R205: Radiographic Procedures III

R283: Clinical Experience in Radiography V

Spring Semester

R207: Senior Seminar

R222: Principles of Radiography III

R260: Radiobiology and Protection

R290: Comprehensive Experience

The Radiography Program is considered a competency-based program; mastery of course content is required to progress to the next semester in the program. A course grade of less than C in any clinical course (R181, R182, R281, R282 or R283) would result in the student being out-of-sequence. A student who is out-of-sequence in the program cannot progress to the next semester. There are no exceptions.

A student who is out-of-sequence in the program must withdraw from all courses and re-apply to the program.

To remain in Good Standing in the Radiography Program, the student must repeat the course(s) during the next semester it is offered and complete the course with a grade of C on the second attempt to avoid dismissal from the program. To repeat a clinical course, the student must meet any remediation requirements and/or clinical skills validation as outlined by program faculty and there must be an available clinical placement. A student is not guaranteed a clinical placement.

If a student does not receive a minimum grade of C in the initial summer course, AHLT-R103 or any of the listed didactic courses during the fall semester of the first year (R100, R101, R102) or the spring semester of the student's first year (R201, R250, R208) the student will be considered out-of-sequence and will not be able to progress to the next semester. There are no exceptions. A student who is out-of-sequence in the program must withdraw from all courses and re-apply to the program. To remain in Good Standing in the Radiography Program, the student must repeat the course(s) during the next semester it is offered and complete the course with a grade of C on the second attempt to avoid dismissal from the program.

Issuance of Student Violation(s) and Possible Probation/Suspension/Dismissal

Students may be given a student violation and could face possible probation, suspension and/or dismissed from the program for any of the following:

1. The use of intoxicating beverages and/or illegal drugs during a Radiography Program educational function; attending a Radiography Program educational function appearing as if still under the effects of an intoxicating beverage and/or illegal drugs.
2. Breach of rules and regulations of the clinical education site, or Radiology Department.
3. Breach of rules and regulations of the Clinical Student Handbook.
4. Lack of cooperative ability, having an antagonistic disposition, or lacking empathy for patients.
5. Conduct unbecoming of a professional person, which includes: Insubordination; dishonesty, cheating; theft; fighting on the premises; leaving the premises during on-duty hours; abuse or mishandling of a patient; falsification of facts; falsification of time cards; incompetence; poor attitude toward patients, authority, or cohorts; disruption of the educational environment during didactic classes, clinical laboratories, and clinical experience; and presence in unauthorized areas of the hospital.
6. Accumulation of Student Violation Forms.
7. Poor academic and/or clinical progress.
8. Misuse of radiation monitoring devices: any student who knowingly alters an actual dosage rate of another student's radiation monitoring device will receive a 3 day suspension from clinical experience and clinical laboratories. A second occurrence will result in immediate dismissal from the program.
9. Falsification of Program Evaluation or Clinical Experience Attendance forms.
10. Cheating during any didactic or clinical evaluation process.
11. Failure to disengage the audio mode of a cell phone and/or texting during didactic classes, clinical labs, and clinical experience.

Recommendations for probation, suspension, and/or dismissal shall be initiated by the program director before the dean of the College of Health Sciences. The student shall be informed in writing of any such action by the program director. Any clinical time and clinical rotations missed from the program, due to suspension, must be made up.

Withdrawal from Program

Any student who leaves the program prior to graduation, must submit a written letter of resignation to the program director; the letter must include the date and the reason for leaving. The student is encouraged to complete an exit interview with the program director.

Program Graduation Requirements

In order to graduate, the student must:

1. Receive a passing grade of C or above in all didactic and clinical courses
2. Pay all fees
3. Have all Clinical Experience time completed
4. Not be on academic or clinical probation
5. Complete all required clinical rotations (including affiliate rotations at all available sites)
6. Complete all required clinical objectives for each clinical rotation
7. Fulfill all clinical competency requirements of the Radiography Program in accordance with established professional standards
8. Complete a required community service project
9. Complete an application for graduation
10. Turn in radiation badge.

Employment Placement

The program will assist graduates in securing employment, but does not guarantee placement upon graduation. Recommendations shall be provided based upon overall student performance. Job openings and available educational programs will be posted on the appropriate bulletin boards.

Student Grievance Procedure

Program faculty recognizes student complaints and attempts to deal with those complaints promptly and equitably. If a student wishes to dispute his/her final course grade, the student is encourage to the matter promptly with the faculty member assigning the grade and follow the grievance procedure outlined by the Office of the Registrar as follows:

Student initiated grade changes

Change Request Form from the Office of the Registrar, prepare a personal statement documenting the reason(s) for the change of grade and discuss the grievance with the faculty member assigning the grade no later than the end of the next regular semester. The student should provide copies of applicable, supporting documentation as part of the appeal process. After the student has met with the faculty member and has received their recommendation of Yes or No, they will need to obtain recommendations from the faculty member's department chair or area coordinator (if applicable) and dean. Completed Student Initiated Grade Change Request Forms, personal statements and supporting documentation need to be returned to the Office of the Registrar for review by the AAC. The AAC will review the appeal and forward a recommendation to the Vice Chancellor for Academic Affairs for a final decision. Additional information can be located at <https://www.iusb.edu/registrar/grievance.php>

Weekly Clinical Progress Evaluation

Frequent constructive feedback is an important part of successful clinical course completion and progression in the program. Constructive feedback that is provided in timely manner helps students master the skills needed to become a clinically competent radiographer. Site visits are scheduled each month to allow the AS in Radiography Program Coordinator and the Program Director to evaluate students' clinical progress. Progress is documented on a Clinical Progress Evaluation form that is shared with student.



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND

Radiography

AS in Radiography Program

Weekly Clinical Progress Evaluation

Objective: Evaluate the student's clinical progression by assessing the student's patient care skills, critical thinking and mastery of radiographic procedures at the level that coincides with the student's level of training in the radiography program. Provide any relevant comments related to the student's clinical performance in the areas of professionalism, communication, clinical skills and critical thinking

Student:	Course:		Site:
Category	Met	Unmet	Comments/Suggestions
Professionalism			
Demonstrates initiative and willingly participates in the workflow of the department.			
Accepts the role of the learner and demonstrates a willingness to be guided by faculty.			
Effective Communication			
Demonstrates good patient care skills, is attentive to patient's needs during the exam.			
Demonstrates effective, age-appropriate patient communication.			
Demonstrates effective communication with staff, clinical faculty and other members of the health care team.			
Clinical Proficiency			
Practices radiation safety and utilizes lead shielding on all patients of CBA.			
Demonstrates knowledge of radiographic technique selection appropriate to the exam.			
Accurately applies lead markers and labels radiographic images.			
Demonstrates mastery of exams taught thus far by achieving competency with 80% accuracy.			
Critical Thinking			
Identifies errors related to positioning, technique and image artifacts			
Demonstrates knowledge of how to correct the error prior to the repeat exposure.			
Evaluator:	Role:		Date:

Service Learning- Community Service Project for Student Radiographers

Research suggests that there are a number of benefits associated with students who participate in community based learning opportunities. Students who participate in community based volunteer opportunities tend to do better in school, have better physical and mental health, build skills that are desirable to employers and become more engaged in their communities (www.OnlineCollege.org 2014).

It is with the belief that learning should be a transformative experience that the community service component is incorporated into the program curriculum. The community service requirement strives to provide the experience, skills, knowledge, and values necessary to raise awareness of community problems and encourage civic engagement while helping the students to achieve academic and personal excellence.

Objectives of Service-Learning

1. Create and build partnerships within the regional community
2. Promote civic engagement.
3. Promote experiential learning opportunities for students and help prepare them for a career in the health profession.
4. Excite students about their field of study within the health profession.
5. Heighten cultural awareness and encourage tolerance of diversity
6. Present opportunities for students and faculty to work together and foster effective relationships
7. Enhance campus campaigns and community outreach 8. Raise awareness of community-based problems.

Directions/ Assignment Models

The following assignment models define the different ways of completing the service-learning requirement. Each student enrolled in the AS in Radiography program must complete a community-based service project as a requirement of graduation. The project must be completed prior to the last day of the spring clinical semester prior to graduation and will be tied to the final grade in R222. *The assignment is worth 25 points; a time commitment of at least 4 hours is expected of each student. Student must sign a waiver to keep on file at school.*

Placement Model:

Volunteering your time to a specific organization within the regional community.

- Habitat for Humanity
- Scholars Give Back Day through IU South Bend
- Cesar Chavez Day through IU South Bend Political Science Department
- Participate in a local walk for charity (March of Dimes, Alzheimer's Association, etc.)

Presentation Model:

Students are asked to give a presentation related to the profession as a form of community education outreach.

- Visit a local school or classroom
- Present an exhibit at the ISRT

Project Model

Students devise and arrange their own service-learning project. This could include organizing a food drive or raising funds via the Radiography Imaging Club for a designated charitable organization.

- Sponsor a family during the holidays
- Indiana Food Bank Food Drive

Parameters and Guidelines

As students are considered an extension of Indiana University, the faculty and the radiography program, profession behavior is expected and is a component for successfully completing this requirement. Students should dress appropriately for the event; school uniforms are preferred when possible. Students should arrive on time, be prepared, complete the assignment in the allotted time and behave in an appropriate, courteous and professional manner.

Program faculty supports the service learning component and clinical time (up to 4 hours) can be forgiven under the appropriately approved circumstances.

Pregnancy Policy

The National Council of Radiation Protection and Measurement (NCRP Report No. 39-1971), recommends that during the entire gestation period, the maximum permissible dose equivalent to the fetus from occupational exposure of the expectant mother, should not exceed 0.5 rem (500 millirems during the nine months of pregnancy).

If a radiographer uses the proper radiation protection measures, which include remaining in shielded areas, refraining from holding patients or image receptors during x-ray exposures she should not receive more than 30 millirems/ month. (This converts to approximately 360 millirems, or 0.36 rems per year, which is considerably below the limits of the cited NCRP report.) In keeping with the United States Nuclear Regulatory Commission Regulatory Guide 8:13, if a student becomes pregnant it is her choice whether to notify the Radiography Program and the clinical education site of her pregnancy.

If the student decides to notify the radiography program, she must do so in writing to the program director. The program director will in turn notify the clinical education site and schedule an appointment for the student with the radiation safety officer at the clinical education site. The radiation safety officer will advise the student of potential radiation risks to herself and her unborn fetus and explain the necessary radiation protection measures. The program director and radiation safety officer shall collaborate in a review of the previous occupational radiation exposure of the pregnant student.

Upon confirmation of pregnancy, the student will submit a statement from her physician, verifying the pregnancy and the expected due date. Following written declaration and formal verification of pregnancy, the student will review the following options regarding their continuance in the program with the program director:

- A. Immediate withdrawal from the radiography program
- B. Leave of absence from the program
- C. Continued full-time status with limited rotation in fluoroscopy, portable/surgery procedures, special procedures, CT scanning, including appropriate radiation safety precautions.
- D. Continued participation in the program without modification

The decision regarding the preceding options will ultimately be the student's decision; tempered by the gestation period and the student's level of progress in the program. The student will be required to sign a statement acknowledging explanation of options and her elected option.

If the pregnant student elects to continue, program faculty will make every attempt to schedule the student, at least for the first trimester of gestation, in areas which do not involve fluoroscopy, mobile/operating procedures, specialized procedures, or CT scanning. When it is necessary for the student to be scheduled in the aforementioned procedures, she must wear a lead apron of at least 0.25 mm lead equivalency, when performing radiologic procedures that do not permit protection by structural shielding (i.e. control booth).

In addition, the student will be monitored with a radiation monitoring device worn outside the lead apron, at the collar region, and another radiation monitoring device at the waist level, under the apron. A dosimeter may also be required by the Radiation Safety Office. These monitoring devices shall be worn during the entire gestation period, and the maximum permissible dose, equivalent to the expectant mother from occupational exposure, shall not exceed 0.5 rem (500 mrem). While not required, radiologic procedures and activities may be restricted when possible.

The program director will monitor the student's radiation dosage to insure that compliance with stated radiation standards is being met. A student, who has previously notified the program director of her pregnancy in writing, may rescind her declaration of pregnancy at any time. The student, however, must notify the program director in writing of her decision to revoke her declaration of pregnancy. Following the student's official retraction of her declaration of pregnancy, the lower dose limit for the embryo/fetus will no longer apply.

The physician's statement shall be attached to this copy of the policy. The student must sign this copy as proof that she has read and understands the procedure. If the student withdraws from the program due to a pregnancy, she shall be given the option to reapply for reinstatement within a two-year period. A readmitted student, with a past good-standing status, shall be required to repeat that semester during which she left.

Pregnant students who elect to participate in all education phases with or without modifications are required to review the U.S. Nuclear Regulatory Commission "Regulatory Guide 8.13" which can be located at <http://www.nrc.gov/docs/ML0037/ML003739505.pdf>.

Student Acknowledgement of Pregnancy Policy

I have been advised of potential radiation risks to me and my unborn fetus through a discussion with the radiation safety officer.

Student Signature/Date: _____

Radiation Safety Officer/Date: _____

Medical Advisor Date: _____

Program Director/Date: _____

MRI SAFETY STATEMENT

Magnetic Resonance Imaging (MRI) is a diagnostic tool that utilizes a powerful magnet and radio waves to generate images of the body. All students enrolled in AS in Radiography Program are required to complete a clinical rotation in MRI. The magnet used in MRI imaging is always turned on and certain implanted devices are considered incompatible with this technology.

Implanted devices like pacemakers, neurostimulators and some infusion pumps should not be exposed to the magnetic field. All students considering a career in medical imaging should be aware of the potential hazards of exposure to the MRI scanner and the need for careful metal screening prior to entering the AS in Radiography Program. For safety reasons, all students must be screened for metal, complete a metal screening history form and basic MRI safety training prior to entering clinical practicum. Additional information can be found at www.mrisafety.com . Please refer to the MRI Screening Form in the appendix.

Chapter 5: Clinical Policies

Addressing Staff and Faculty

All physicians shall be referred to as Doctor. Students shall address all staff as Ms., Mrs., Mr., in the presence of patients. Instructors, clinical coordinator, clinical instructors, program director, and departmental supervisors shall be addressed as Dr., Ms., Mrs., Mr., or Professor at the instructor's discretion. All faculty should be addressed as either Dr., Ms., Mrs., Mr., or Professor.

APPEARANCE

Dress Code

Appropriate attire, which meets the program's dress and grooming standards, is required to provide the student a professional appearance during any in-hospital student activity. All student radiographers must wear their radiation monitoring device and name tag as part of the uniform at all times in the clinical site. Radiation monitoring devices are to be left in a secure area at the clinical site at the end of the clinical day. Students are required to pick up their radiation monitoring device at the start of each clinical day.

The clinical instructor shall determine the appropriateness of the student's appearance and dress. Exceptions to the dress code include prescribed attire while in surgery and other activities and must be approved by the clinical instructor.

Inappropriate attire will result in a student violation and loss of 5 points for each occurrence from course grade. Students may be sent home to change, if the clinical instructor determines it to be necessary.

1. Hair and beards must be clean and neatly-groomed. If hair falls below shoulder length it must be pulled back.
2. Perfumes, colognes, and cosmetics should be used moderately.
3. Fingernails should be kept short, neat, and clean. Light nail polish (light pink, clear, etc.) should be used in a conservative manner. No red, bright/dark colors, or chipped finger nail polish is allowed.
4. On clinical days, the only acceptable jewelry is small plain earrings, wristwatches, wedding bands, and a simple chain necklace. No other jewelry is acceptable. In surgical areas, all jewelry must be removed. In the clinical setting, earrings/plugs on men are unacceptable. Any other form of body piercing beyond the ears is unacceptable in the clinical setting. Ear piercing is limited to two sets of earrings.
5. Clothing should be clean and free of wrinkles. Stains, holes, or repairs should not be present on clothing. Tight fitting clothing is not acceptable. Scrub pants should be hemmed to the appropriate length to avoid tripping.
6. Underclothing is required and should not be visible through or outside uniforms.

7. White/or black uniform or leather tennis shoes are required and must be kept clean and polished. Canvas sneakers, sandals, and thongs are not permitted on clinical days. White professional clogs with closed toe and back strap are permissible upon approval by the clinical instructor. "Croc" shoes with the open front are not compliant with the dress code.
8. Denim clothing is not appropriate and may not be worn in offices, or patient care areas.
9. Bodily cleanliness is necessary to prevent offensive personal odor. Oral hygiene is also important.
10. To ensure a consistent professional appearance, female and male dress codes are in place. All students are required to purchase program patches (available in the IU South Bend bookstore) to sew on the left shoulder of all tops and lab coats worn at clinical site.
11. Facility Scrub Attire: All affiliated clinical agencies provide scrub attire for use in designated areas within the hospital. Students are expected to wear facility scrub attire when completing specific clinical rotations. Scrub attire is the property of the agency and should not be removed or worn outside that agency. Wearing facility scrubs outside the clinical agency will result in disciplinary action in the form of a student violation and loss of 5 points from the course grade.

While participating in Clinical Experience, all tattoos are to be effectively covered by the student so interacting parties cannot observe them.

Female clinical attire shall consist of a choice of white or navy blue scrub top and navy blue scrub pants or a white or navy skirt of conservative length. A white long or short sleeve shirt (free of embellishments) may be worn underneath the scrub top if desired. T-shirts, low-cut or sheer, lacy blouses will not be accepted as proper dress. White socks with white tennis shoes or black socks with black tennis shoes that cover the ankle (no footies) or white nylons with skirts are required. White uniform shoes or white or black leather tennis shoes, kept clean and polished, are acceptable. A lab coat may be required for your specific clinical site.

Male clinical attire shall consist of a choice of white or navy blue scrub top and navy blue scrub pants of appropriate length. A white or navy shirt (free of embellishments) may be worn underneath the scrub top if desired. White socks with white tennis shoes or black socks with black tennis shoes that cover the ankle (no footies) are required. White uniform shoes or white or black leather tennis shoes, kept clean and polished, are acceptable. A lab coat may be required for your specific clinical site.

The determination of when the lab coat is to be worn will be made by the clinical coordinator in conjunction with the respective clinical instructor(s). The dress code may be modified by management at selected clinical sites to meet departmental needs with the approval of the program director.

Smoking

Smoking in the clinical sites is prohibited. If excessive odor from smoking is noticeable and considered offensive, clinical faculty has the right to request that a student be sent home to change scrubs. Any missed clinical time must be made up prior to the end of the semester.

Gum Chewing

Gum chewing is not permitted in the clinical setting. Students observed chewing gum in the clinical setting will be asked to remove it.

Attendance

Consistent clinical attendance is an important component to successful completion of the Radiography Program. Program faculty subscribe to the philosophy that while it is possible for a student to achieve minimal technical competence early in a given rotation, clinical competency is best achieved through multiple repetitions of imaging exams on various patients and hands-on clinical field work. In addition, the presence of a student in clinic adds to the professional preparation of the student. Each student is encouraged to maintain good attendance while in the program.

Students are generally in attendance from 7:30 a.m. - 3:30 p.m.; evening rotations begin from 1:30 p.m.- 9:30 p.m. Exceptions require prior approval from the clinical instructor. Students are not to remain in the clinic past their 7.5 hours (including lunch) or scheduled time.

Documentation of Clinical Experience

Students must use the E*Value system for documenting arrival/departures times on a designated computer at their clinical site. The E*Value system is a cloud-based program that is managed through the Internet where students will use the system to record clinic time on an electronic timesheet. All records are kept online and can only be seen by the student and faculty.

All efforts should be made to use the E*Value at the student's affiliated site. If an error occurs (a student forgets to submit a departure time), the student can submit the time with their own personal device. If a time error does occur, the Clinical Coordinator or the Director must be notified immediately; designated computers have an assigned IP address which differs from personal devices. In the event E*Value is experiencing difficulty, the student will document their time on a piece of paper and have the technologist initial the paper. If a student fails to report a documentation error on their time sheet to faculty, the student will receive a student violation.

Adhering to Scheduled Clinical Rotation Times

While students are encouraged to complete radiographic procedures prior to leaving clinic, students are not obligated to stay past the end of their assigned rotation and are strongly encouraged to leave on time. Exceptions would be when a student is participating in an exam or a case that could be completed within 10-15 minutes. Students are highly discouraged from staying beyond 15 minutes after their assigned clinical rotation has ended. Students are not credited this extra time and cannot bank extra minutes. According to JRCERT Standard 1.4, students are prohibited from participating in more than 40 hours combined class/clinic week.

Personal and Sick Hours

Program faculty recognizes that unforeseen circumstances can result in student absences from clinic. All students are allotted 32 hours of personal/sick time during one academic year (start of the Fall Semester through the end of Summer II Session). Students are expected to manage their personal/sick hours to meet their needs. Students who exceed these stated limits for the academic year will be subject to disciplinary action in the form of a student violation and the loss of 5 points from their clinical course grade. Each subsequent absence in one academic year will result in the issuance of student violations and the loss of 5 points from their clinical course grade which could result in course failure and jeopardize progression in the program.

Reporting clinical absences is a two-step process; the student must call the clinical coordinator at 574-520-5461 and their assigned clinical agency to report their absence. Absences should be reported 1 hour prior to the students' scheduled start time. Main department telephone numbers are listed in Chapter 1 of this handbook.

If the clinical instructor is not available, a message should be left with the department to be forwarded to the clinical instructor.

Failure to call in absence:

1st offense = Incident Note/Verbal warning from Clinical Instructor

2nd offense = Violation and deductions of 5 points

3rd offense = Clinical Alert which could lead to learning contract which could lead to course failure.

All times missed beyond the allotted hours must be made up prior to the end of the semester to avoid a grade of incomplete which could prevent progression to the next semester. The student should submit a written description listing the dates/times to make-up missed clinical hours; the clinical instructor must approve the written description by providing his/her signature.

Students are required to give a 24-hour notice to their clinical instructor for requested time off. If personal time is required sooner than the 24-hour notice, the clinical instructor has the discretion to approve the requested time off. Personal time should not be used during the last week of the clinical/professional program. During the last week of clinic for second year-students only, personal and sick hours may only be used for cases of documented illness. Any time taken off from assigned clinical experience during this time period that does not meet the stated requirement must be made up prior to the end of semester to avoid a grade of "I" incomplete.

Use of Personal Time for Weekend Rotations

Each student is required to complete a total of 6 weekend rotation shifts during the course of the clinical program. There will be 2 weekend days scheduled for each semester, Saturday day and Saturday evening beginning in the summer session I of the students' first-year. A weekend rotation consists of 7.5 hours of off-shift clinical experience. Off-shift clinical experience provides the student with the opportunity to experience the clinical setting outside regular (Monday-Friday 7:30 a.m. – 3:30 p.m.)

clinical hours. In order to satisfy this clinical objective, students must complete the entire 7.5 hour weekend shift. Students are not permitted to use personal time to satisfy this requirement. Weekend rotations are scheduled in advance to give the student the opportunity to plan around any scheduling conflicts.

The clinical coordinator is available via cell phone (574) 286-3032 or office phone during regular clinical hours (Monday-Friday, 7:30 a.m.-3:30 p.m.). Students who wish to contact either the program director or the clinical coordinator outside these hours are encouraged to use the following voice mail numbers: Lori Balmer (574) 520-4258 and Amy Gretencord (574) 520-5461. Instructors have access to voicemail from their personal cell phones and will reply in the event of an emergency.

Absence from Clinical Laboratories

Attendance in scheduled clinical demonstration labs is considered mandatory. Clinical instructors are expected to schedule clinical demonstration labs and communicate the scheduled time and place to the students by the start of the clinic day. Students are expected to be punctual and prepared to participate in demonstration labs. Arriving late and/or unprepared to participate in a demonstration lab can impede clinical progression and lead to course failure.

The student shall be held responsible for missed class work and must contact the instructor when they return. The instructor will determine whether an absence is considered excused or un-excused.

Absence from Clinical Assignment

Reporting clinical absences is a two-step process; the student must call the clinical coordinator at 574-520-5461 and their assigned clinical agency to report their absence. Absences should be reported 1 hour prior to the students' scheduled start time to inform the clinical instructor of any absence; in the event the CI is not available, please leave a message with the clinical agency office. Do not call the IU South Bend Radiography Office. If the student is scheduled for clinical assignment on an evening rotation, they must call the assigned clinical site in the department at least two hours prior to their scheduled time and inform them of any absence. Missed weekend rotations will be made up on the student's next weekend off or at the discretion of the student's clinical instructor.

Unexcused Absences

Program faculty acknowledges that emergencies may arise. However, failure to call the clinical instructor or department personnel to inform them of an absence from clinic or class will result in a student violation and a loss of 5 points from the course grade. Students are required to make up the clinical time prior to the end of the semester to avoid a course grade of Incomplete which could delay progression to the next semester.

Funerals

Students are permitted three (3) days of bereavement leave for immediate family. Immediate family includes: great/grandmother & grandfather, grandmother, grandfather, mother, father, in-laws, legal guardians, brothers, sisters, sons, daughters and one (1) day bereavement for friends, aunts, uncles, nieces, and nephews. If additional time is needed, please seek approval from the program director. Students are asked to verify their absence by providing the clinical instructor with documentation.

Educational Leave

Students are encouraged to participate in educational meetings and seminars when possible. A student may request time-off from clinic to attend the RSNA, ISRT, and ARRT annual meetings. Time off will be considered excused and will not require the student to make-up lost time.

Snow Days/Inclement Weather/Campus Closure

When inclement weather forces the closure of the campus of Indiana University South Bend, all students are released from clinic. When a campus closure occurs during a Saturday, students are not required to attend their scheduled Saturday rotation. If a student is in clinic and IU South Bend announces that it will close, they will be dismissed from clinic at that time. All students must leave clinic at that time. Students who decide to stay in clinic are doing so on a voluntary basis and will not be compensated for that time. Students are not required to make-up lost clinical time due to school closures. School closures are generally announced via the local media (television and radio) and can be verified by accessing the IU South Bend website at www.iusb.edu.

Jury Duty

Students called for jury duty will be excused from clinical and/or didactic classes up to 3 days or 24 hours clinical time. Students will be required to make-up all missed course work and clinical time in excess of 24 hours.

Indiana University Reserves Policy

Indiana University realizes that students who are members of the Indiana military reserves may be called to active duty. The following policy is provided to minimize disruptions or inconveniences for students fulfilling their military responsibilities.

Any student called to active duty may withdraw from all courses and receive a 100 percent refund of tuition and fees. Alternatively, with the permission of the instructor(s), a student may receive an Incomplete or a final grade in the courses taken. Either alternative may occur any time during the semester through the end of final examinations. If the withdrawal is processed after the first week of classes, the grade of W will be assigned initially. Students receiving financial aid will be subject to the refund policies of the agencies sponsoring the aid. The request to withdraw needs to be made within one week of being called to active duty and may be made by either the student or other responsible party who has the student's military information.

Students who wish to withdraw from courses as a result of being called to active duty must provide a copy of their orders to the Office of the Registrar on their campus along with a signed note asking to be withdrawn. These materials may be delivered in person, through the mail, or by fax to the Office of the Registrar. The Office of the Registrar will notify the student's instructor, the student's school, and other campus offices. Students or other responsible parties may wish to call the Office of the Registrar first to begin the withdrawal process, with the understanding that a copy of the orders would need to be forthcoming.

Students can download additional information at by <https://www.iusb.edu/veteran/callup.php> . For any questions about this process or to request a withdrawal from all classes due to military orders, contact the Office of the Registrar.

Tardiness

Program faculty acknowledges that emergencies will arise, however students are expected to arrive on time and be punctual for class and clinical experience. A student will be considered tardy if they have not arrived for Clinical Experience in the assigned clinical area within one (1) minute of their scheduled start time. If you anticipate arriving late to clinic, please contact the clinical coordinator and clinical instructor to inform them of your late arrival.

All documented hours will be recorded through the E*Value system. The system will have an accurate recording of all student's time at clinic. The E*Value system will maintain records of the student's arrival/departure time and record any late arrivals to clinic.

Students are allowed two (2) tardies for each fall/spring semester and one (1) for each summer session. Any tardies beyond the total will result in a student violation and a loss of 5 points from their course grade. Students who exceed 5 tardies in an academic year will receive a clinical alert which could lead to a learning contract and possible course failure.

All time missed due to tardies, must be made up within five (5) clinical days of the occurrence. Failure to make-up missed time within the specified time period could result in a grade of Incomplete and prevent progression into the next semester.

Semester Breaks

Students will receive all IU South Bend time-off (breaks, holidays, etc.). For 1st year students, Clinical Experience will be held throughout Summer Sessions I and II.

Clinical Experience during Semester Breaks

Due to medical liability coverage issues, students are not permitted to attend Clinical Experience when the university is not formally in session (spring break, Martin Luther King Day, etc.).

Clinical Experience Assignment

Students are scheduled and rotated through various clinical areas as scheduled by the clinical field instructors. Students are required to attend all clinical assignments as scheduled and are not permitted to alter any posted schedule. Altering a clinical schedule is considered falsification of records and will result in a student violation and a loss of 5 points from their course grade. Students should not leave their assigned clinical area without the approval of the clinical instructor or supervising clinical faculty, the exception is for breaks or lunch.

Breaks

Students may go on a fifteen (15) minute break in the morning and afternoon; students should get approval from supervising clinical faculty prior to leaving their assigned area. Students should not leave the clinical site campus for breaks; students are not required to punch out for breaks.

Lunch

The student is allowed a thirty (30) minute lunch break. The time of the lunch break should be coordinated with the assigned technologist and the scheduled course work. Students are not required to punch out for lunch unless they are leaving hospital grounds, in that case you will need to punch out/in.

Slow Periods

When the assigned clinical education area is not busy and patient flow is slow, the student should remain in the vicinity of their assigned area. During slow periods, the student may study in that area, practice radiographic positioning, attend to linens, etc. Students may also contact the clinical instructor who may grant them permission to leave their assigned clinical area.

Guests in Clinical Setting

Unauthorized guests (friends/family members, etc.) are not allowed in the medical imaging departments in the hospital; this is considered both a liability to the clinical site and a breach of patient confidentiality. While students are welcome to invite a guest to share lunch or a break in common areas outside of the imaging departments, students are not allowed to invite guests into the medical imaging departments. Failure to adhere to this program policy could result in disciplinary action in the form of a student violation/loss of 5 points from course grade.

Transporting Patients

Students should not transport house patients to the patient floors. Students may transport patients to/from the Emergency Department provided it is on the same floor, unless an employee of the facility accompanies them.

Storage of Student Personal Equipment at Clinical Education Site

Storage areas are provided at each student's assigned clinical site for storing personal belongings (lunches, textbooks, book bags, cellphones, etc.). Items should be stored in designated areas during clinical hours and should not be kept in common areas where they might be considered in the way of hospital workflow. Please be considerate and store items in the designated area away from direct patient care areas. Failure to comply with this policy may result in disciplinary action, which will include the loss of points from the student's Clinical Experience grade.

Student Bulletin Board

All clinical sites maintain a student communication area or bulletin board. Students are asked to check the bulletin board regularly. Notices will inform students of classroom and clinical schedules and administrative announcements. Student bulletin boards are located in designated areas in the imaging department.

Radiation Monitoring Devices and Safety Policy

Education – Radiation Safety:

Students must protect themselves, their patients, visitors and members of the health care team from ionizing radiation by practicing radiation safety and complying with ALARA principles. Students are provided instruction on radiation safety and introduced to ALARA principles at the onset of the program in orientation course, AHLT-R103. Radiation safety and ALARA principles are reviewed at the beginning of each semester and throughout the duration of the program.

In keeping with JRCERT Standard Four: Radiation Safety, students are required to employ proper radiation safety practices. Students must understand basic radiation safety practices prior to assignment to clinical settings. Students must practice radiation safety by adhering to the following:

1. Students must never repeat any radiograph without the direct supervision of a registered radiographer. There are no exceptions to this policy and failure to comply with the Repeat Policy will result in disciplinary action in the form of possible probation, suspension or dismissal.
2. Students must not hold image receptors or patients during any radiographic procedure. A student should not restrain/hold a patient during a radiographic procedure when an immobilization method is the appropriate standard of care. When immobilization techniques fail, students are encouraged to solicit assistance from family members and non-radiology members of the health care team; lead shielding must be provided.
3. As students' progress in the program, they must become increasingly proficient in the application of radiation safety practices.
4. Students are required to wear lead aprons during any mobile radiographic procedure; lead aprons and thyroid shields during any fluoroscopic/surgical procedure.

5. Students must successfully complete radiation safety training prior to entering the clinical setting and will be required to review material covering radiation safety and ALARA principles at the beginning of each semester.
6. Program faculty will review the material including but not limited to ALARA concepts, dose limitations, basic limitation and reduction methods and regulatory agencies at the start of each semester.
7. Students must demonstrate and apply basic knowledge of radiation safety and ALARA principles through written and practical application assessments throughout the program.

Radiation Monitoring Policy:

All monthly radiation badge dosimetry readings for students will be monitored by the radiology department's designated radiation safety officer. Student radiographers should adhere to ALARA standards as outlined by the federal regulations of the United States Nuclear Regulatory Commission (NRC) Guide.

Radiation Monitoring Devices:

Students are provided with radiation exposure monitoring badges at the start of the radiography program. When participating in clinical experience, the student must wear their assigned radiation monitoring badge. Radiation badges should not be switched or exchanged between students. Absence of the radiation monitoring badge will constitute a violation of program policy and the student will be asked to leave clinic until the radiation monitoring badge is available. The student will be required to make-up any missed time.

Radiation badges should be worn at the collar and placed outside the lead apron during fluoroscopic/portable/surgical procedures. Radiation monitoring badges should be stored in a secure area when not worn; badges should be handled with care as they are sensitive to heat and microwaves. Lost or damaged badges must be reported to either the Clinical Coordinator or the Program Director for replacement and students will incur the cost of replacement.

In order to verify student compliance with ALARA standards, each student is responsible for reading their badge every month. At the end of the month, the student should log into Instadose and read their badge. Computers with the Instadose software are located on campus across from the bookstore in Northside Hall or on the 4th floor by advising. The student can also read their badge by downloading the Instadose software on their personal computer. Readings should be completed no later than the 5th of each month.

The Clinical Coordinator will review the report and verify the amount of exposure with the student. The Clinical Coordinator will print off a summary of the badge report for the students to initial and date verifying that the report has been reviewed in compliance with ALARA standards. Monthly badge readings will be printed and stored on-campus in a secure file. Students must return their radiation monitoring badges at the conclusion of the radiography program and each student will be provided with a copy of their final badge reading approximately one month after graduation.

Any questions or concerns will be handled by the Radiation Safety Officer, Lori Balmer.

Radiation Safety Policy:

The Nuclear Regulatory Commission (NRC) has established guidelines for annual radiation exposure.

1. Radiation badge readings that equal or exceed NCR dose limitations (Level I -125 mr / q or Level II — 375 mr / q) will require the student to have a counseling session with the program director and/or radiation safety officer (medical advisory).
2. Radiation exposure doses recorded at or above Level II - 30% of Federal Limits or higher – 1500 mr/ month) will be investigated according to NRC regulations.
3. Radiation badge readings that exceed Level I, but do not exceed Level II must participate in a discussion about radiation dose reduction and radiation protection and safety.
4. Radiation badge readings that exceed Level II, are required to submit a written history of their clinical activities as a way to help the faculty and the student determine the cause of the excess exposure dose. Students will also be required to attend a remediation session covering radiation safety, radiation protection and ALARA principles.

Any student who knowingly alters the dosage rate of another student's radiation monitoring device will be suspended from clinical experience and clinical laboratories for a period of *three clinic days*. A second occurrence will result in immediate dismissal from the program.

In addition, students will be expected to wear required radiation protective devices (i.e. aprons, gloves, etc.) when participating in applicable radiographic exams. Failure to adhere to expected standards as stated in the American Society of Radiologic Technologist "Code of Ethics," will result in issuance of student violation/5 points from the course grade. The same standards apply to limiting radiation exposure to the patient through effective shielding techniques and proper selection of exposure factors.

Clinical Experience Supervision Policy

During all radiographic room assignments, the student must be under the supervision of a registered radiographer. Unless clinical competency has been demonstrated, the student must be under the direct supervision of a registered radiographer. The following conditions constitute direct supervision:

1. The registered radiographer must review the request for the radiographic examination to determine:
 - a. The capability of the student to perform this examination with reasonable success; and
 - b. If the patient's condition contraindicates performance of the examination by the student.

Please Note: The student must be evaluated in the laboratory and successfully demonstrate laboratory competency prior to performing *any* examination in the clinical setting.

2. The registered radiographer must be present in the radiographic room while the student is performing the examination.

3. Students who have demonstrated competency on the exam shall be under the indirect supervision of a registered radiographer. The radiographer must be on the premises in the vicinity of the radiographic room and available for immediate assistance to the student.

4. Compliance with the IU South Bend Radiography Program policies regarding direct and indirect supervision will be evaluated by the supervising radiographer and student radiographer at the end of each clinical rotation.

5. Validation of the Clinical Experience Supervision Policy will take place through formal documentation of completion by both the supervising radiographer and the student radiographer on the Clinical Supervision and Repeat Policy Evaluation of Compliance form. This form is part of the clinical objectives for each clinical rotation.

The respective clinical instructor will monitor compliance with these policies. Repeated instances of non-compliance with these policies will be conveyed to the program clinical coordinator.

Program Medical Image Evaluation Policy

All radiographic images produced by student radiographers during the performance of medical imaging studies must be evaluated by a registered radiographer. The evaluation process must take place prior to the release of the patient. Students are not allowed to discharge patients without approval of the supervising technologist. There are no exceptions to this policy. Any student who disregards this policy will be subject to possible suspension and/or probation and will receive a clinical alert which could lead to a learning contract and possible course failure which could delay progression into the next semester.

Program Radiograph Repeat Policy

The Radiography Program, sponsored by Indiana University South Bend, requires that any radiographic image that is repeated by a student must be done in the presence of a registered radiographer. At no time are students (first or second year) to repeat radiographs alone, regardless of their level of competency. There are no exceptions to this policy. Students who fail to adhere to this policy will be subject to probation and/or suspension and will receive a clinical alert which could lead to a learning contract and possible course failure which could delay progression into the next semester.

Compliance with the Radiography Program Radiograph Repeat Policy will be substantiated by completion of the Clinical Supervision and Repeat Policy Evaluation of Compliance Form by the student and the supervising imaging technologist. This form is part of the clinical objectives for each clinical rotation.

Equal Learning Opportunities

The AS in Radiography Program strives to provide equal learning opportunities in all areas of program curriculum. Exclusion of student participation based on gender is considered discriminatory. Areas of concern for equal learning opportunities are associated with the following patient procedures:

1. Cystourethrography (voiding and static)
2. Hysterosalpingography
3. Mammography

With the exception of mammography, which is not provided as part of the curriculum in the AS in Radiography Program, all students must be given an equal opportunity to participate in cystourethrograms and hysterosalpingograms. All affiliated clinical sites must allow students, regardless of gender, the opportunity to observe and participate in these exams to an equal degree. If one or the other gender is restricted from participation, then all students must be restricted from participation equally. In the event that students are restricted from participation at a particular clinical site, the student does have the right to request a 1-week rotation at an affiliated clinical site to observe these procedures when possible. *The student and the supervising technologist may be required to secure and document patient consent to observe/participate prior to the start of the exam. The program coordinator and program director will be responsible for insuring that students are provided an equal learning opportunity.

Student Computer Access to Clinical Site Computer System

Students are discouraged from accessing the clinical site's computer system and should adhere to agency policy regarding the use of computers and protected health information.

Unauthorized use such as accessing the Internet for personal reasons will result in the clinical incident note/verbal warning.

Clinical Performance Incident Notes and Records

A clinical performance incident is any occurrence involving a student, which the clinical evaluator/radiographer believes may affect the educational experience of the student. The incident may be positive or negative. Anyone may fill out a Clinical Performance Incident Note. The signature of the evaluator must be included on the incident note. A clinical instructor will obtain verification of the incident. Blank notes will be kept in the Radiology Department. After the incident note is completed, it is to be returned to the clinical instructor. A master record will be kept in each student's file.

Indiana University South Bend Radiography Program

Clinical Performance Incident Notes

Instructions: A clinical performance incident is any occurrence involving a student, which the evaluator believes may affect the educational experience of the student. The incident may be positive or negative. (Please fill out and return to a clinical instructor.)

In the event that a negative Incident Note is completed, the program clinical coordinator must be notified immediately. Accumulation of 2 negative Incident Notes will trigger a conference with the program clinical coordinator and may result in disciplinary action and/or a Learning Contract.

INSTRUCTIONS: This form is used only for occurrences, which need to be documented. This holds no more severity than would a "verbal warning." It is very important that any agreement be documented for future reference. Signatures are required only for proof of agreement/discussion.

Student Name: _____

Date: _____

Setting where incident occurred: _____

Description of incident:

Comments by evaluator:

Signature: _____ Date: _____

Chapter 6: Clinical Experience

Description of Clinical Experience

The Clinical Experience portion of the curriculum is arranged into six (6) clinical education courses, one course per semester. The clinical education courses are structured to complement didactic coursework. Fall and spring semesters consist of 15 weeks; summer sessions consist of 6 weeks per semester. The program concludes at the end of the spring semester in the second year of the program. The student is involved no more than forty (40) hours per week. These hours are divided between didactic course work, clinical laboratory instruction, and clinical experience. A student must successfully pass Clinical Experience with a grade of “C” or better to progress to the next semester.

Clinical Placements

Each student radiographer will be assigned to a specific clinical site for the duration of the program. This is considered the student’s primary clinical site. All students will have the opportunity to rotate through all affiliated clinical sites during the program. The program director may reassign a student radiographer to another primary clinical education site under the following conditions:

1. If, after a thorough assessment by program faculty, it is decided that a reassignment would be beneficial and in the best interest of the student.
2. A direct request for reassignment from the director of the affiliated clinical agency.

Clinical Experience Courses

Semester	Course <i>All Clinical Experience Courses are 4 credit hours</i>	Days/Times of Attendance
First Year Fall Semester	AHLT-R181: Clinical Experience in Radiography	Tuesday, Thursday and Friday 7:30-3:30
First Year Spring Semester	AHLT-R182: Clinical Experience in Radiography	Monday, Wednesday and Friday 7:30-3:30
First Year Summer I Semester	AHLT-R281: Clinical Experience in Radiography	Monday through Friday 7:30-3:30
First Year Summer II Semester	AHLT-R282: Clinical Experience in Radiography	Monday through Friday 7:30-3:30
Second Year Fall Semester	AHLT- R283: Clinical Experience in Radiography	Monday, Wednesday, Friday 7:30-3:30 Thursday 7:30-11:30
Second Year Spring Semester	AHLT-R290: Clinical Experience in Radiography	Monday, Tuesday, Thursday 7:30-3:30 Friday 7:30-12:30

First Year Clinical Experience

First year student radiographers attend clinic at their assigned clinical site 3 days per week in the fall and spring semesters. Students are in the clinical setting observing, assisting and performing radiographic procedures. Clinical labs are conducted on-site at the student’s clinical site each week. Students attend clinic 5 days per week in both summer sessions. Students will be required to travel to affiliated clinical sites to complete required affiliate clinical rotations during the summer sessions. The program clinical

coordinator will schedule affiliate clinical rotations. The AS in Radiography Program follows the academic calendar established by IU South Bend which can be located on the campus website at: <https://www.iusb.edu/registrar/calendars/>.

Second Year Clinical Experience

Second year student radiographers attend clinic at their assigned clinical site 3 ½ days per week in the fall semester and 3 ½ days per week during the spring semester. Students will be required to travel to affiliated clinical sites to complete required affiliate clinical rotations during the fall and spring semesters. Affiliate clinical rotations will be scheduled by the program clinical coordinator.

Determination of Clinical Grades

During the clinical experience, students are graded on their clinical competency and performance. Below is a summary of each category in which the student's grade is determined.

ASR Student Clinical Performance Evaluations

Students are evaluated at the completion of each clinical rotation assignment by clinical faculty utilizing the ASR Student Clinical Performance Evaluation form located in E*Value. Clinical faculty will assess the student's performance in 13 different categories. Please see Appendix for categories and complete form. The ASR Student Performance Evaluation is worth a possible 100 points; completed evaluations are averaged and account for 21% of the student's clinical grade in the Fall and Spring semesters and 29% of the student's clinical grade in the summer semesters.

In addition to the evaluation is a list of Objectives and Performance Checklist specific to the rotational assignment. Objectives and Performance Checklists are to be completed and turned in to the Clinical Instructor by the end of each assigned clinical rotation. Objectives and Performance Checklists are found in the Canvas course site within the student's clinical course files.

Included within the Objectives and Performance Checklist is the Clinical Supervision & Repeat Policy Evaluation of Compliance. Students are to be directly supervised within the radiographic room in the event of a repeat exposure. The repeat policy and evaluation of compliance is verifying that the technologist and student were in compliance of this policy. The Clinical Supervision & Repeat Policy Evaluation of Compliance is located in the Canvas course site within the student's clinical course files.

ASR Student Clinical Performance Evaluation – Clinical Instructor Evaluation

Each student is evaluated by his or her clinical instructor utilizing the ASR Student Performance Evaluation; twice during the spring and fall semesters at mid-term and at the conclusion of the semester, and once at the conclusion of each summer semester. The mid-term and final evaluations are each worth a possible 100 points. The average of both evaluations (out of 100 points) accounts for 21% of the student's clinical grade. In the Summer Sessions, the Clinical Instructor will evaluate the student at the conclusion of each semester. The summer evaluation carries a possible 100 points and accounts for 29% of the student's clinical grade.

The ASR Student Performance Evaluation is located on E*Value. It is the responsibility of the Clinical Instructor to send this evaluation to clinical faculty at the completion of the assigned rotation.

Number of Clinical Placements

Each clinical site has a designated number of available spots called clinical placements. The number of clinical site placements is negotiated with each affiliated clinical agency for a specific period of time. Students enrolled in the clinical professional program are assigned to a primary clinical site for the 22-month duration of the clinical program. All students are provided access to each clinical site through scheduled clinical rotations.

Clinical Agency	Current Number of Clinical Placements/Year
Elkhart General Hospital	3
Goshen Health	2
Memorial Hospital	6
St. Joseph Regional Medical Center Mishawaka Campus	2
St. Joseph Regional Medical Center Plymouth Campus	2
Total Number of Clinical Placements	15

Student Clinical Laboratory Evaluations – Simulated Lab Exams

Clinical labs are conducted during the fall and spring semesters during the student's first year in the program. The labs are conducted at the students' assigned clinical agency by the clinical instructor. Clinical labs are structured to complement didactic course work and are taught in a specific sequence and increase in difficulty as the semester progresses. Students must demonstrate competency in the lab setting before attempting to perform any radiographic procedure on a patient in the clinical setting.

During the initial fall and spring semesters, the student will be evaluated by their clinical instructor utilizing the Student Clinical Laboratory Evaluation form. The student will demonstrate competency to their clinical instructor on exams taught in lab through simulation of the assigned radiographic exam. The student will be evaluated on fifteen different areas to demonstrate competency on the exam. Please refer to the Clinical Lab Syllabus for complete lab procedures and evaluation within this handbook. The Student Clinical Laboratory Evaluations comprise 4% of the students' clinical course grade and have a possible point value of 20 points each semester.

The Student Clinical Laboratory Evaluations are a paper copy, located at the clinical site in each student's file. It is the responsibility of the Clinical Instructor to keep records of this evaluation in the students file. The clinical coordinator will periodically check the forms to ensure compliance is met.

Clinical Competency Performance Evaluations – Patient Exams

Once competency on a radiographic procedure has been established and documented in the lab setting, Clinical Competency Performance Evaluations afford the student the opportunity to demonstrate mastery of a radiographic exam on a live patient in the clinical setting. These evaluations assess the student's performance regarding completion of the program's clinical competency system (see below). The student is evaluated in 19 areas when demonstrating competency. Please see the Appendix for complete Clinical Competency Performance Evaluation form.

Each semester the student is required to complete a specific number of competencies for their clinical course grade. Students may select an exam to perform from the list of Mandatory and/or Elective Procedures within this chapter. The sum of completed Clinical Competency Performance Evaluations carries 252 possible points and accounts for 53% of the student's clinical grade in the Fall/Spring semesters; 147 possible points and accounts for 42% of the student's clinical grade during each summer semester.

** Due to changes in the ARRT requirements, the Radiography Class of 2017 and 2018 requirements may differ.

The Clinical Competency Performance Evaluations are located on E*Value. It is the responsibility of the student to send this evaluation to the grading technologist upon completion of the exam.

Clinical Competency Evaluation System

Introduction

A Clinical Competency Evaluation System is a standardized method of evaluating the performance of students. The major portion of the system is structured for two types of evaluations (Initial Clinical Competency and Recheck Continued Clinical Competency).

ARRT Statement on Didactic Competency Requirements

The purpose of the didactic competency requirements is to verify that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice and hone affective and critical thinking skills required to demonstrate professional competency. Candidates must successfully complete coursework addressing the topics listed in the ARRT Content Specifications for the Radiography Examination. These topics would typically be covered in a nationally-recognized curriculum such as the ASRT Radiography Curriculum. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified here.

www.arrt.org

ARRT Statement on Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified and registered by the ARRT have demonstrated competency performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the radiography examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.

Clinical Evaluation System Structure

The following are the areas of the Clinical Competency System (refer to Clinical Competency Flow Chart Summary):

1. Cognitive and Psychomotor (classroom and laboratory)

The student will learn examinations in the Radiographic Procedures classes. The clinical laboratory setting is for demonstration and practice of the examination learned in Radiographic Procedures. The student will be evaluated in the laboratory on each examination and must obtain a mastery of minimum 90%. Laboratory competency does not enter into the Category and Final Clinical Competency Evaluation System.

2. Clinical participation (clinical proficiency) consists of the observation, assistance, and performance phase of Clinical Experience. This area is where the student will perfect and expand his/her Clinical Experience. In clinical participation, the student will be evaluated at the end of each clinical rotation by the registered radiographer to whom he/she is assigned.

3. Category Competencies

Once the student has successfully completed the laboratory and clinical participation, the student is eligible to request a Clinical Performance Evaluation in which he/she will demonstrate his/her skill and competency in that particular category of radiographic examinations. The categories are listed within this chapter in the Imaging Procedures List.

Each clinical competency exam will be documented using the *Clinical Competency Performance Evaluation* form on E*Value. Per position for each procedure performed, the student must obtain a minimum mastery level of at least 90% (19 out of 21 points). If unable to master each position, the student must review the positioning and laboratory aspect, as well as clinical participation of the entire category before challenging the exam another time. If a student fails a Clinical Performance Evaluation twice, the score which they receive for the Clinical Performance Evaluation is a zero. Any Clinical Performance Evaluation that is failed should be repeated if possible during the same semester in which it occurs unless circumstances dictate otherwise as determined by the Clinical Instructor. This evaluation is considered a 'retest'. If the student fails to repeat the Clinical Performance Evaluation retest, they will receive a score of zero. The points that the student receives on the failed Clinical Performance Evaluation holds firm. The repeat examination is done to demonstrate competency only. The passing score is not part of the grade. The student will be evaluated by the following point system:

21 points = Consistently performs above average achievement

20 points = Above average achievement

19 points = Average achievement

Below 19 points = Failure to meet standard requirement of achievement

Prior to initiating a clinical competency examination, the student must notify the clinical faculty/clinical field instructor evaluation the exam of his/her intention to perform the clinical competency. Failure to state the intent prior to the start of the exam will invalidate the clinical competency exam. It is the responsibility of the student to send the Clinical Competency Evaluation form to the grading technologist from E*Value upon the completion of the exam.

4. Continued Competency Recheck Evaluations

All students should be aware that they will be evaluated (rechecks) by their clinical instructor several times during each semester, to determine whether the student continues to perform competently in any of the Clinical Competency Categories which the student has previously tested out in. This competency check will be unannounced and unscheduled, and all students are required to

participate in this recheck. This competency check will be figured into the student's Clinical Experience grade. The student will be evaluated by the following point system:

21.0 - 19.0 pts. = passing score

18.9 - 15.8 pts. = student will receive half the total point value

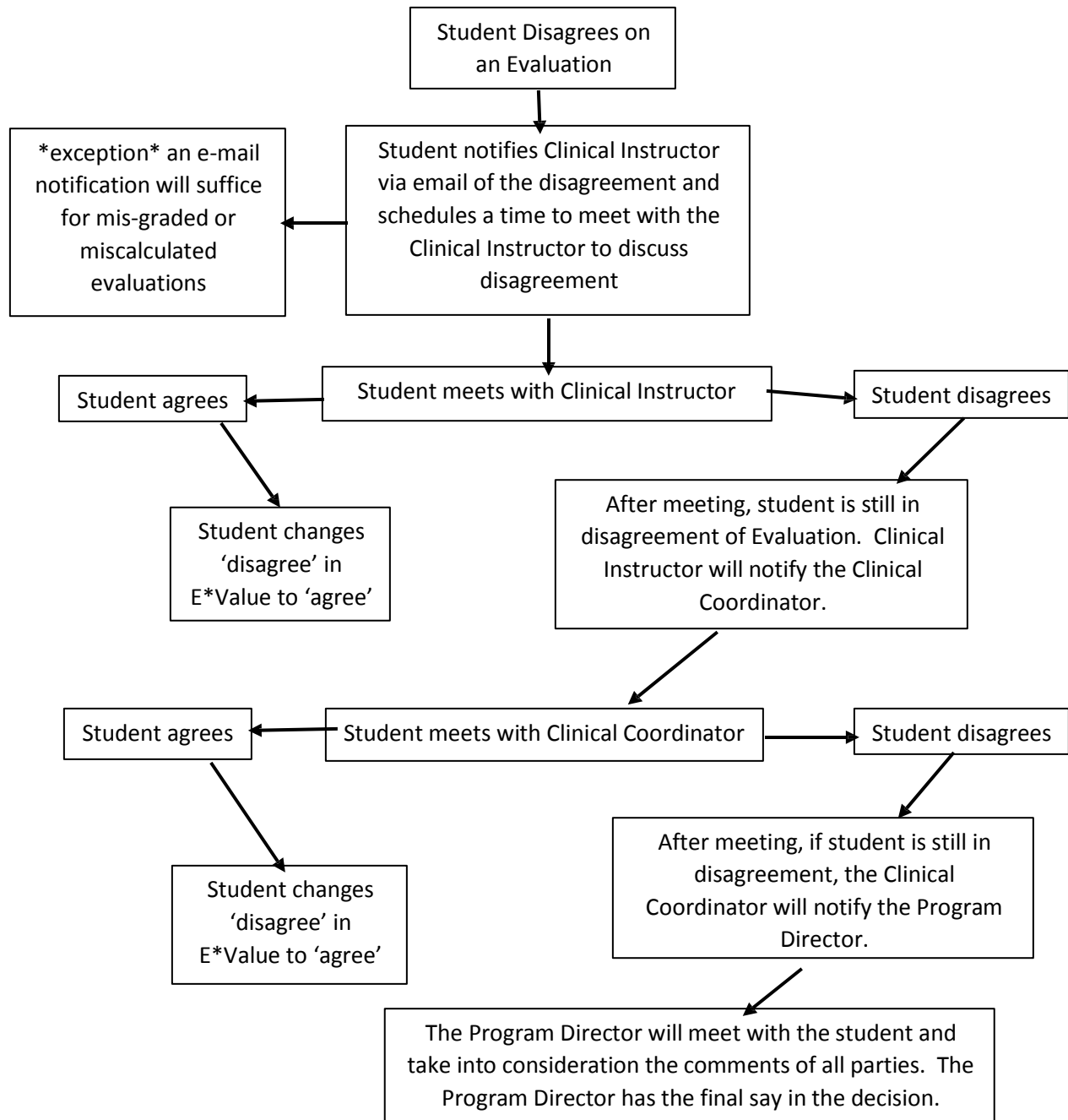
15.7 - 00.0 pts. = student will receive 0 points

The student will be required to repeat the exam until competency is demonstrated. The same assessment format that is used to assess clinical competency will be used for recheck evaluations. It is the responsibility of the student to send the recheck evaluation from E*Value to the Clinical Instructor or grading technologist upon completion of the exam.

Policy for Signing Off on Evaluations on E*value

When a Competency or Rotation Evaluation is completed in E*Value, the student has the option to either agree or disagree with the evaluation. It is strongly suggested that the student view the evaluation in a timely manner and choose either agree or disagree. This should be completed within one week of the graded evaluation so that if there is a disagreement, it can be handled in a reasonable amount of time. The student can disagree on no more than five evaluations per semester. Exceptions to this number are mis-graded or miscalculated evaluations.

Below is a Flowchart of the process of when a student disagrees on an evaluation:



Criteria for Clinical Competency Performance Evaluation

Below is a description of each criteria in which the student is graded within the Clinical Competency Performance Evaluation.

1. Room Preparation and Appearance
 - a. Have all necessary diagnostic equipment in room prior to exam (i.e. image receptors, grid, lead, markers, control panel, etc.)
 - b. Room is presentable and clean prior to patient entering the room
2. Patient Gowning and Artifact Removal

All possible artifacts are removed which could compromise the diagnostic quality of the study. (i.e. glasses, hair pins, snaps on gowns, etc.)
3. Verification of Patient I.D., Patient History and Requisition Evaluation
 - a. Insures proper patient and exam through verbal or physical means
 - b. Regards physician's order/requisition for proper exam
4. Demonstration of Effective Patient Care Skills
 - a. Conducts study in a professional, caring, and compassionate manner
 - b. Gives proper instructions to patient
 - c. Explains the study procedure to the patient
5. Displays Knowledge of Procedure Routines

Performs the required projections (as per department) per procedure
6. Selection of appropriate field of view, image receptor size or collimation
 - a. Selects the proper field of view size for desired study
 - b. Selects proper image receptor size for desired study
 - c. Collimates to anatomical part of interest
 - d. Evidence of collimation is displayed on all studies when it does not interfere with diagnostic quality of study
 - e. Lead dividers are used whenever applicable
7. Proper Usage of Markers, ID Stamper
 - a. Places side markers on the image so that they are visible while not interfering with required anatomy
 - b. Identifies image with proper patient's name
8. Patient Positioning

Places patient in correct anatomical position for each required view. (NOTE: Clinical evaluators may deduct only .5 points for minor infractions as long as study is diagnostic.)
9. Central Ray Placement to Proper Anatomical Centering Point and Image Receptor Alignment (Center of Image Receptor)
 - a. Central ray enters and exits desired anatomical part of interest at correct points
 - b. Central ray placement is directed to center of image receptor
 - c. Part of interest is place in the approximate center of the image receptor. (NOTE: Clinical Evaluators may deduct only .5 points for minor infractions as long as study is diagnostic.)
10. Proper Image Receptor Placement

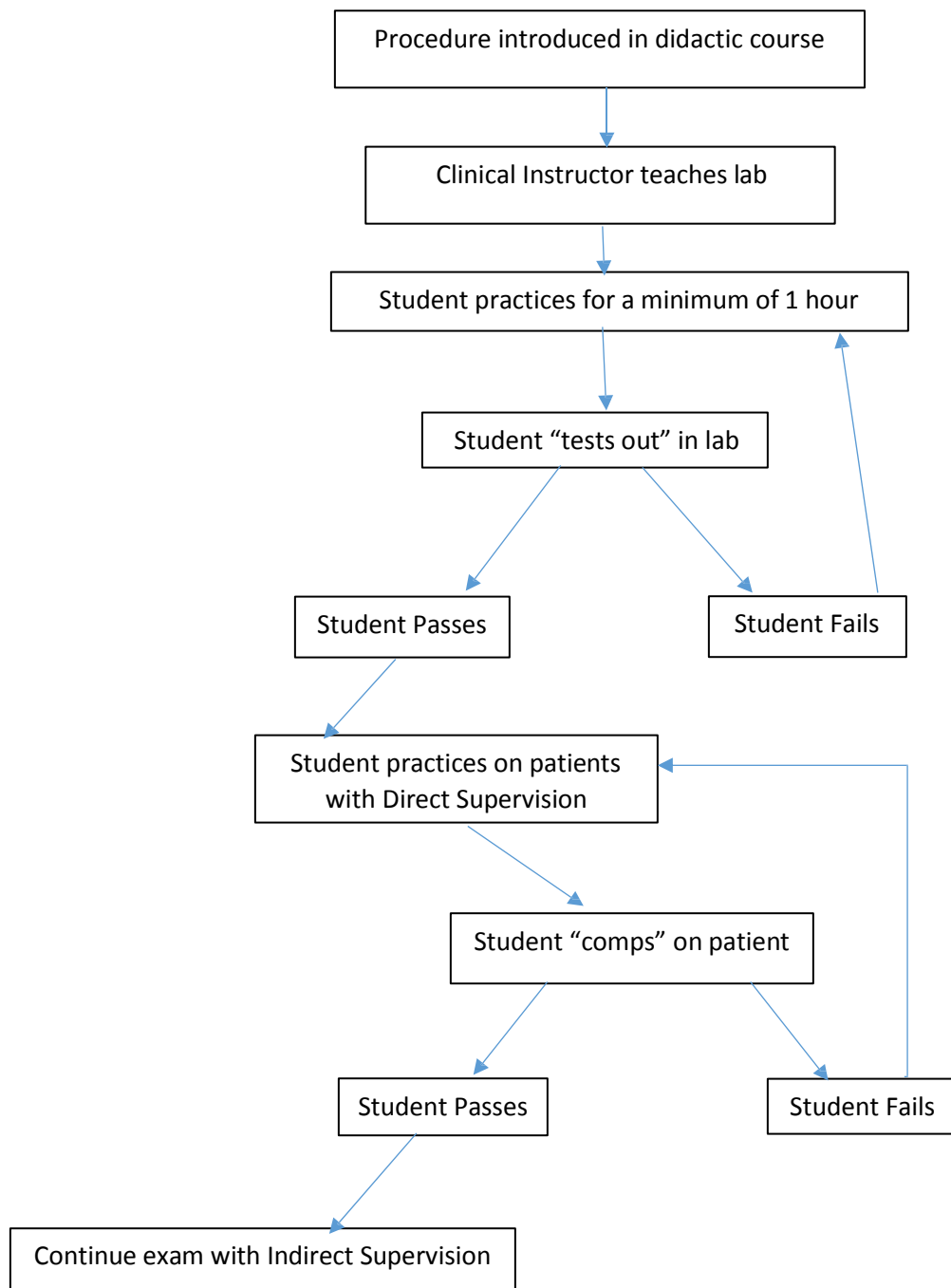
- Properly position image receptor, either transversely or longitudinally, for procedure of projection being performed according to departmental procedure or patient needs
11. Proper Equipment Operation/Correct Tube Angulation
 - a. Shows knowledge of equipment operation and functions
 - b. When required, proper direction and degree of angulation (as per departmental requirements)
 12. Completes Exam in a Timely Manner
Exam is completed in an appropriate length of time
 13. Practices Proper Radiation Safety Measures
 - a. Uses lead aprons, gonadal shielding, and other types of protective devices whenever possible for patient's safety
 - b. Practice proper radiation protection on him/herself and other staff members as required
 - c. Door to radiographic room is kept closed during exposures
 - d. Questions the patient about the possibility of pregnancy
 14. Uses Proper Source-Image Distance
Insures that proper SID is utilized for the study
 15. Selects Proper Exposure Factors
 - a. Selects proper exposure factors after considering all possible variables: mA, time, kV, focal spot, and back-up time (automatic exposure control)
 - b. Utilizes a technique that produces the highest quality radiograph while using the lowest possible dose. (NOTE: Exposure defects due to equipment malfunction does not deduct from the student's score.)
 16. Display of Processed Radiographs
Displays images on the viewing device/monitor in an anatomically correct manner
 17. Demonstration of Knowledge of Related Anatomy
Is able to identify required anatomical points on processed radiograph as requested by clinical instructor
 18. Displays Awareness of How to Improve Overall Diagnostic Quality of Study
Student is able to evaluate the images and articulate methods of improving the overall quality of study (when applicable). i.e. Positioning/Exposure Factors
 19. Radiographic Study of Diagnostic Quality
Overall quality meets the expected standards (per department) to be considered a diagnostic radiographic study. (NOTE: This requirement can only be deducted from student's score when view/projection must be repeated and not be processed for diagnostic interpretation.)
 20. Appropriate exam duration
Exam is completed within an appropriate time frame

Clinical Competency Requirements – Essential Abilities

The clinical competency requirements for all imaging procedures include the following essential abilities and patient care skills. To successfully complete a clinical competency the student should be able to:

1. Perform hand hygiene prior to and after the imaging procedure.
2. Properly identify the patient utilizing 2 identifiers in accordance with departmental policies.
3. Evaluate patient requisition or medical record for patient name, date-of-birth, imaging procedure, ordering physician and appropriateness of exam in regard to patient history.
4. Obtain patient history and document previous exposure to contrast, history of allergies and document patient responses (when applicable).
5. Demonstrate the use of universal precautions as appropriate (isolation patients, gloves, goggles, etc.).
6. Complete patient education by explaining the procedure and answering the patient's questions in a manner that is appropriate for the patient's level of communication..
7. Successfully prepare the exam room by selecting the appropriate equipment to include the image receptor, SID and tube set-up prior to making the x-ray exposure.
8. Successfully position the patient for the selected radiographic exam.
9. Utilize the correct lead marker and the proper lead marker placement.
10. Demonstrate an ability to adapt to special considerations or changes in patient's condition in accordance with the student's level of training.
11. Demonstrate appropriate patient care and professional behavior throughout the procedure.
12. Select the correct radiographic technique for the anatomic part prior to making the x-ray exposure.
13. Select the appropriate lead shielding when necessary and demonstrate compliance with ALARA principles.
14. Perform the radiographic imaging procedure in a timely and efficient manner consistent with departmental protocols.
15. Identify relevant anatomy, image display, archiving, PACS and image retrieval.
16. Properly identify images with patient date and other relevant data.
17. Recognize image quality in accordance with acceptance levels for given department.
18. Confer with radiographer, radiologist or physician as needed prior to discharging patient.

Achieving Clinical Competency on Radiographic Procedures Flowchart Summary



Clinical Course Descriptions

Clinical Experience I, AHLT-R181, Semester 1: Fall, 4 Credit Hours

The student is oriented to clinicals by spending two (2) weeks of one-day clinical rotations in each of the diagnostic imaging areas. Following the orientation period, rotations in General Radiography I, Fluoroscopy I, Emergency Room, I.V.P. and Tomography I, Imaging Processing, and Portables/Surgery I are required. Clinical competency laboratories will be scheduled weekly to allow simulation of radiographic procedures and clinical competency testing of upper and lower extremity, chest, and K.U.B. The student will complete approximately 22.5 hours of clinical experience each week.

Clinical Experience II, AHLT-R182, Semester II: Spring, 4 Credit Hours

Rotations include Emergency Room II, General Radiography, three (3) one-day clinical weekend rotations (1 Saturday, 1 Sunday, 1 Saturday p.m.), Fluoroscopy II, Portables and Surgery II, I.V.P. and Tomography II, and Evenings (1:30 p.m.-9:30 p.m.) are required. Weekly clinical competency laboratories allow simulation of radiographic procedures and competency testing of the spine, contrast studies; all cranial and facial bone related studies and special views of the thorax and abdomen. The student will complete approximately 22.5 hours of clinical experience each week. The completion of three (3) weekend/day/evening clinical rotations is required.

Clinical Experience III and IV, AHLT-R281 and AHLT-R282, Semesters III & IV: Summer I & II, 4 Cr. Hrs.

Clinical rotations include General Radiography III/IV, Fluoroscopy III/IV, I.V.P. and Tomography III/IV, Portable Surgery III/IV, Emergency Radiography III/IV, evening and affiliate site clinical rotations. Three (3) one-day weekend clinical rotations are required. The student will complete approximately 37.5 hours of clinical experience each week during Summer Session I and Summer Session II. A separate clinical education grade will be given for each summer session.

Clinical Experience V, AHLT- R283, Semester V: Fall, 4 Credit Hours

Clinical rotation includes General Radiography V, Emergency Radiography V, Interventional Radiography, IVP and Tomography V, Portable/Surgery V, Evenings, Cardiac Catheterization, Radiation Therapy, weekend and affiliate clinical site rotations. Clinical laboratories will include specialized studies including Trauma Radiography and rechecks of previous studies from the first four semesters. The student will complete approximately 22.5 hours of clinical experience each week.

Clinical Experience VI, AHLT-R290 Comprehensive Experience, Semester VI: Spring, 4 Cr.

Clinical rotations include General Radiography VI, Emergency Radiography VI, Fluoroscopy VI, Portables/Surgery VI, Evenings IV, Nuclear Medicine, Ultrasound, CAT Scan, MRI, and weekend and affiliate clinical site rotations. Clinical laboratories will focus on specialty studies; recheck evaluations of previously attained clinical laboratory competencies and curriculum retention functions. The student will complete approximately 27.5 hours of clinical experience each week.

Clinical Assignments

Clinical rotation objectives must be turned in for each practical assignment. These objectives are due at the end of specific clinical rotations. It is the student's responsibility to submit completed clinical rotations to their Clinical Instructor at the end of each rotation. Failure to submit clinical rotation objectives can adversely impact a student's clinical grade and could result in a grade of "I" incomplete in the course which could delay progression to the next semester. Clinical rotation objectives can be found in Canvas.

Clinical Assignments	Junior Fall	Junior Spring	Junior Summer I & II	Senior Fall	Senior Spring	TOTAL WEEKS
Emergency/General Radiography	6	6	2	3	2	19
Intravenous Pyelography/Tomography	2	2		1		5
Fluoroscopy	3	3	2	2	2	12
Mobile/Surgical Radiography	2	4	2	2	3	13
Evening Radiography (Off-Shift)			2	1	1	4
Office Procedures*	1					1
Imaging Processing/PACS*	1					1
Affiliate Clinical Education Site			4	2	2	8
Vascular Intervention Radiography*				2		2
Cardiac Interventional Radiography*				1		1
Radiation Therapy*				1		1
Nuclear Medicine*					1	1
Ultrasound*					1	1
Computed Axial Tomography					2	2
Magnetic Resonance Imaging*					1	1
Total Weeks in Clinical Assignments	15	15	12	15	15	72
Weekend Clinical Experience Saturday 7:30am-3:30pm Saturday 1:30pm-9:30pm			2	2	2	6 Rotations
* Indicates a Pass/Fail rotation						

Junior Clinical Course Syllabus

JUNIOR CLINICAL COURSES: R181

Clinical Experience I (Fall) R182

Clinical Experience II (Spring)

TIME:

R181: Tues./Th/Fr 7:30a-3:30p

R182: Mon./Wed./Fr. 7:30a-3:30p

CLINICAL COORDINATOR:

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Jamie Jardine, R.T. (R)

TEXTBOOK

Bontrager, K., & Lampignano, J. (2014). *Textbook of radiographic positioning and related anatomy* (8th ed.). St. Louis, Mo.: Elsevier Mosby.

CLINICAL HANDBOOK

Please refer to the Indiana University of South Bend Radiography Clinical Student Handbook for details on specific policies pertaining to the clinical education experience.

COURSE DESCRIPTION (R181)

The student is oriented to clinicals by spending two (2) weeks of one-day clinical rotations in each of the diagnostic imaging areas. Following the orientation period, rotations in General Radiography I, Fluoroscopy I, Emergency Room, I.V.P. and Tomography I, Imaging Processing/PACS, and Portables/Surgery I are required. Clinical competency laboratories will be scheduled weekly to allow simulation of radiographic procedures and clinical competency testing of upper and lower extremity, chest, and K.U.B. The student will complete approximately 22.5 hours of clinical experience each week.

COURSE OBJECTIVES (R181)

1. Apply appropriate professional behaviors, medical ethics and interpersonal interactions with patients, colleagues and other members of the health care team.
2. Achieve clinical competency on simulated exams in a laboratory setting on the radiographic procedures taught in AHLT-R101: Radiographic Procedures I.
3. Demonstrate clinical competency after successful simulation/laboratory competency in a variety of diagnostic radiographic procedures by applying cognitive theory to the actual practice of technical/psychomotor skills on patient exams with 90% accuracy.
4. Achieve competency by completing 3 patient recheck exams with 90% accuracy.
5. Apply skills taught in demonstration labs and AHLT-R101 in the following areas/rotations of the clinical site: Emergency, Generals, Fluoroscopy, IVP, Portables and Surgery.
6. Assess the areas of PACS/Image Processing/Office Procedures and Radiology Transport by completing a clinical rotation through each assigned area with a minimum of 75% accuracy.
7. Complete Clinical Objectives for each specific assigned rotation (ER, Generals, Fluoroscopy, IVP, Portables/Surgery, PACS/Transport and Office Procedures) with a minimum of 75% accuracy.

CLINICAL GRADE (AHLT-R181)

The clinical course grade will consist of successful completion of 9 mandatory competency exams, 3 recheck competency exams, average score of ASR Student Performance Evaluations from assigned clinical rotations, ASR Student Performance Evaluation (filled out by the Clinical Instructor at midterm and end of semester), attendance/professionalism points and laboratory evaluations (see chart).

<u>Category</u>	<u>Scored</u>	<u>Possible Points</u>	<u>Percentage</u>
Clinical Competency Performance Evaluations (including Rechecks)	Total Score for each evaluation x 12	252	53%
ASR Student Performance Evaluation (filled out by Clinical Instructor)	Average Score for 2 Evaluations (1 mid-term and 1 final)	100	21%
ASR Student Performance Evaluations	Average of All Rotation Evaluations Expressed in %	100	21%
Student Clinical Laboratory Evaluations	20 Points Minus Process Deductions for Unsatisfactory Accomplishment	20	4%
Total Possible Points		472	

GRADING SCALE

100	A+	91	B+	82	C+	73	D+	64-0	F
99-93	A	90-84	B	81-75	C	72-66	D		
92	A-	83	B-	74	C-	65	D-		

PLEASE NOTE: A student must receive a grade of C or better in this core course, to progress to the next clinical course in the program course sequencing; AHLT-R182.

COURSE DESCRIPTION (AHLT-R182)

At the assigned clinical site, the student is required to rotate through many different areas in the diagnostic department. These areas include: General Radiography II, Fluoroscopy II, Emergency Room, I.V.P. and Tomography II, and Portables/Surgery II. Clinical competency laboratories will be scheduled weekly to allow simulation of radiographic procedures and clinical competency testing of IVP, Gastrointestinal, Spine, Thorax and Headwork. The student will complete approximately 22.5 hours of clinical experience each week.

COURSE OBJECTIVES (AHLT-R182)

1. Apply appropriate professional behaviors, medical ethics and interpersonal interactions with patients, colleagues and other members of the health care team.
2. Achieve clinical competency on simulated exams in a laboratory setting on the radiographic procedures taught in AHLT-R201: Radiographic Procedures II.
3. Demonstrate clinical competency after successful simulation/laboratory competency in a variety of diagnostic radiographic procedures by applying cognitive theory to the actual practice of technical/psychomotor skills on patient exams with 90% accuracy.
4. Achieve competency on two patient recheck exams with 90% accuracy.
5. Apply skills taught in demonstration lab and in AHLT-R201 in the following areas/rotations of the clinical site: Emergency, Generals, Fluoroscopy, IVP, Portables and Surgery.
6. Complete Clinical Objectives for each specific rotation: Emergency, Generals, Fluoroscopy, IVP, and Portables/Surgery with a minimum of 75% accuracy.

CLINICAL GRADE (AHLT-R182)

The clinical course grade will consist of 9 mandatory competency exams, 1 elective competency exam, 2 recheck competency exams, average score of ASR Student Performance Evaluations from rotations, ASR Student Performance Evaluation (filled out by the Clinical Instructor at midterm and end of semester), attendance/professionalism points and laboratory evaluations (see chart).

<u>Category</u>	<u>Scored</u>	<u>Possible Points</u>	<u>Percentage</u>
Clinical Competency Performance Evaluations (including Rechecks)	Total Score for each evaluation x 12	252	53%
ASR Student Performance Evaluation (filled out by Clinical Instructor)	Average Score for 2 Evaluations	100	21%
ASR Student Performance Evaluations	Average of All Rotation Evaluations Expressed as a %	100	21%
Student Clinical Laboratory Evaluations	20 Points Minus Process Deductions for Unsatisfactory Accomplishment	20	4%
Total Possible Points		472	

GRADING SCALE

100	A+	91	B+	82	C+	73	D+	64-0	F
99-93	A	90-84	B	81-75	C	72-66	D		
92	A-	83	B-	74	C-	65	D-		

PLEASE NOTE:

A student must receive a grade of C or better in this core course, to progress to the next clinical course in the program course sequencing in Summer Session I; AHLT-R281.

Junior Student Clinical Lab Schedule: R181

Clinical Experience I/Clinical Competency Lab Schedule FALL 2016

Week 1	August 23	Orientation to the Clinical Setting
	August 25	Basic Fluoroscopy Demonstration
	August 26	Basic Mobile/Surgery Radiography Demonstration
Week 2	August 30	Evaluation of Orientation Lab Objectives (Written Test)
	September 2	Evaluation of Orientation Lab Objectives (Practical Test)
Week 3	September 6	Demonstration: Chest, Cart Chest, KUB
	September 9	Test Out: Chest, Cart Chest, KUB
Week 4	September 13	Demonstration: Thumb, Finger, Hand
	September 16	Test Out: Thumb, Finger, Hand
Week 5	September 20	Demonstration: Wrist, Forearm, Elbow
	September 23	Test Out: Wrist, Forearm, Elbow
Week 6	September 27	Demonstration: Humerus, Shoulder
	September 30	Test Out: Humerus, Shoulder
Week 7	October 4	Demonstration: Acromioclavicular Joints, Scapula, Clavicle
	October 7	Test Out: Acromioclavicular Joints, Scapula, Clavicle
Week 8	October 11	Spot Check Evaluations (All exams previously demonstrated)
	October 14	Spot Check Evaluations Continued
October 15 th -23 rd Fall Break, no clinic		
Week 9	October 25	Demonstration: Toes, Feet
	October 28	Test Out: Toes, Feet
Week 10	November 1	Demonstration: Ankle, OS Calcis, Tibia/Fibula
	November 4	Test Out: Ankle, OS Calcis, Tibia/Fibula
Week 11	November 8	Demonstration: Knee, Intercondyloid Fossa, Patella
	November 11	Test Out: Knee, Intercondyloid Fossa, Patella
Week 12	November 15	Demonstration: Pelvis, Hip, Femur
	November 18	Test Out: Pelvis, Hip, Femur
Week 13	November 22	Demonstration: Abd. Series, IVP, Cystogram/Cystourethrogram- info. only
	November 23 rd -27 th Thanksgiving Break, no clinic	
Week 14	November 29	Test Out: Abdomen Series, IVP
	December 2	Review/Catch up
Week 15	December 6	Comprehensive Spot Check Evaluations (For all Exams Demonstrated)
	December 9	Comprehensive Spot Check Evaluations Continued
December 12 th -17 th No students in clinic. Final Exam Week		

Junior Student Clinical Lab Schedule: R182

Clinical Experience/Clinical Competency Lab Schedule Spring 2017

Week 1	January 9	Course Review/Demo: Upper GI's (Esophagus, UGI, Small Bowel Follow Through)
	January 13	Test Out: Upper GI's (Esophagus, UGI, Small Bowel Follow Through)
Week 2	January 18	Cont'd Test Out: Upper GI's (Esophagus, UGI, Small Bowel Follow
	January 20	Demonstration: Lower GI's (Single/Double Barium Enema)
Week 3	January 25	Test Out: Lower GI's (Single/Double Barium Enema)
	January 27	Continue Test Out: Lower GI's (Single/Double Barium Enema)
Week 4	January 30	Demonstration: Cervical/Thoracic Spine
	February 3	Test Out: Cervical/Thoracic Spine
Week 5	February 6	Demonstration: Lumbar Spine/Scoliosis
	February 10	Test Out: Lumbar Spine/Scoliosis
Week 6	February 13	Demonstration: Sacrum/Coccyx, Sacroiliac Joints
	February 17	Test Out: Sacrum/Coccyx, Sacroiliac Joints
Week 7	February 20	Demonstration: Sternum, Ribs, Sternoclavicular Joints
	February 24	Test Out: Sternum, Ribs, Sternoclavicular Joints
Week 8	February 27	Mid-Term Spot Check Evaluations (All exams previously demonstrated for Spring)
	March 3	Mid-Term Spot Check Evaluations Continued
Week 9	March 6	Demonstration: Skull, Facial Bones, Orbits
	March 10	Test Out: Skull, Facial Bones, Orbits
March 11th-19th Spring Break		
Week 10	March 20	Demonstration: Sinuses, Nasal Bones
	March 24	Test Out: Sinuses, Nasal Bones
Week 11	March 27	Demonstration: Mandible/Panorex, TMJ's
	March 31	Test Out: Mandible/Panorex, TMJ's
Week 12	April 3	Demonstration: Bone Age, Bone Survey, Orthoroentgenography
	April 7	Test Out: Bone Age, Bone Survey, Orthoroentgenography
Week 13	April 10	Demonstration: Lordotic/Decubitus Chest, Soft Tissue Neck
	April 14	Test Out: Lordotic/Decubitus Chest, Soft Tissue Neck
Week 14	April 17/19/21	Lab on Trauma Radiography/Pediatric Radiography, Catch up
Week 15	April 24	Comprehensive Spot Check Evaluations (For Exams Demonstrated in Spring)
	April 26	Comprehensive Spot Check Evaluations Continued
May 6th-10th No students in clinic. Final Exam Week		

*The lab schedules may be changed at the discretion of the Clinical Coordinator or Instructor.

Clinical Summer Course Syllabus

JUNIOR CLINICAL SUMMER COURSES:

R281 Clinical Experience III

R282 Clinical Experience IV

TIME:

Mon.-Fr. 7:30a-3:30p

COURSE DESCRIPTION (AHLT-R281/AHLT-R282)

At the assigned clinical site, the student is required to rotate through many different areas in the diagnostic imaging department. These areas include: General Radiography III/IV, Fluoroscopy III/IV, Portable Surgery III/IV, Emergency Radiography III/IV, evening and affiliate site clinical rotations. Two (2) one-day weekend clinical rotations are required. The student will complete approximately 37.5 hours of clinical experience each week during Summer Session I and Summer Session II. A separate clinical education grade will be given for each summer session

COURSE OBJECTIVES AHLT-(R218/AHLT-R282)

1. Apply appropriate professional behaviors, medical ethics and interpersonal interactions with patients, colleagues and other members of the health care team.
2. Demonstrate competency on one patient recheck exam for each summer session with 90% accuracy.
3. Demonstrate competency on three mandatory and two elective competency exams with 90% accuracy for each summer session.
4. Apply skills taught in lab and AHLT-R201 in the following areas/rotations of the clinical site: Emergency, Generals, Fluoroscopy, IVP, Portables and Surgery.
5. Complete two weekend rotations: Saturday first shift and Saturday second shift.
6. Complete Clinical Objectives for each specific rotation: Emergency, Generals, Fluoroscopy, Portables/Surgery, Evenings and Affiliate rotations with a minimum of 75% accuracy.

CLINICAL GRADE (AHLT-R281/AHLT-R282, *Class of 2018)

The clinical course grade will consist of 4 mandatory and 2 elective competency exams, 1 recheck competency exam, the average score of Clinical Performance Evaluations from rotations, and final Clinical Performance Evaluations, attendance/professionalism points (see chart). This pertains to each summer session.

*Due to changes in ARRT requirements, class requirements may differ.

<u>Category</u>	<u>Scored</u>	<u>Possible Points</u>	<u>Percentage</u>
Clinical Competency Performance Evaluations (including Rechecks)	Total Score for each evaluation x 7	147	42%
ASR Student Performance Evaluation (Clinical Instructor)	Percentage Score for 1 Evaluation	100	29%
ASR Student Performance Evaluations	Average of All Rotation Evaluations Expressed as a %	100	29%
Total Possible Points		347	

GRADING SCALE

100	A+	91	B+	82	C+	73	D+	64-0	F
99-93	A	90-84	B	81-75	C	72-66	D		
92	A-	83	B-	74	C-	65	D-		

PLEASE NOTE:

A student must receive a grade of C or better in this core course, to progress to the next clinical course in the program course sequencing in Summer Session II; AHLT-R282. A student must receive a grade of C or better in AHLT-R282 (Summer Session II) to progress to the next clinical course in the program course sequencing in the Fall Semester; AHLT-R283.

Senior Clinical Course Syllabus

SENIOR CLINICAL COURSES:

AHLT-R283 Clinical Experience V (FALL)

AHLT-R290 Comprehensive Experience (SPRING)

TIME:

AHLT-R283: Mon/Wed/Fr 7:30a-3:30p, Th 7:30a-11:30p

AHLT-R290: Mon/Tues/Thur 7:30a-3:30p, Fri 7:30a-12:30p

COURSE DESCRIPTION (AHLT-R283)

At the assigned clinical site, the student will rotate through specific rotations throughout the semester. Clinical rotations include General Radiography V, Emergency Radiography V, Interventional Radiography, IVP and Tomography V, Portable/Surgery V, Evenings, Cardiac Catheterization, Radiation Therapy, weekend and affiliate clinical site rotations. Clinical laboratories will include specialized studies including Trauma Radiography and rechecks of previous studies from the first four semesters. The student will complete approximately 26.5 hours of clinical experience each week.

COURSE OBJECTIVES (AHLT-R283)

1. Apply appropriate professional behaviors, medical ethics and interpersonal interactions with patients, colleagues and other members of the health care team.
2. Demonstrate clinical competency on radiographic procedures taught in AHLT-R101: Radiographic Procedures I and AHLT-R201: Radiographic Procedures II.
3. Demonstrate competency in 3 patient recheck competency exams, 7 mandatory and 2 elective competency exams (Class of 2017) with 90% accuracy.
4. Demonstrate competency in 2 patient recheck competency exams, 8 mandatory and 2 elective patient competency exams (Class of 2018).
5. Complete Clinical Objectives for each specific rotation (ER, Generals, Fluoroscopy, IVP, Portables/Surgery, Evening (off-shift), Weekend shifts, Affiliate sites, Cardiac Interventional, Vascular Interventional and Radiation Therapy) with a minimum of 75% accuracy.

CLINICAL GRADE AHLT-R283/AHLT-R290 (*Class of 2017)

The clinical course grade will consist of 7 mandatory competency exams, 2 elective competency exams and 3 patient recheck competency exams, the average score of ASR Student Performance Evaluations from rotations, ASR Student Performance Evaluation (filled out by the Clinical Instructor at midterm and end of semester), attendance and professionalism points (see below chart).

*Due to changes in ARRT requirements, class requirements may differ.

<u>Category</u>	<u>Scored</u>	<u>Possible Points</u>	<u>Percentage</u>
Clinical Competency Performance Evaluations (including Rechecks)	Total Score for each evaluation x 12	252	56%
ASR Student Performance Evaluation (filled out by Clinical Instructor)	Average Score for Percentage Total for 2 Evaluations (1 mid-term and 1 final)	100	22%
ASR Student Performance Evaluations	Average Percentage of Total Percentile of All Rotation Evaluations	100	22%
Total Possible Points		452	

GRADING SCALE

100	A+	91	B+	82	C+	73	D+	64-0	F
99-93	A	90-84	B	81-75	C	72-66	D		
92	A-	83	B-	74	C-	65	D-		

PLEASE NOTE:

A student must receive a grade of C or better in this core course, to progress to the next clinical course in the program course sequencing in Spring Session; AHLT-R290.

CLINICAL GRADE AHLT-R283/AHLT-R290 (*Class of 2018)

The clinical course grade will consist of 8 mandatory competencies, 2 elective competencies and 2 recheck competencies, average score of ASR Student Performance Evaluations from rotations, ASR Student Performance Evaluation (filled out by the Clinical Instructor at midterm and end of semester), attendance and professionalism points (see below chart).

*Due to changes in ARRT requirements, class requirements may differ.

<u>Category</u>	<u>Scored</u>	<u>Possible Points</u>	<u>Percentage</u>
Clinical Competency Performance Evaluations (including Rechecks)	Total Score for each evaluation x 12	252	56%
ASR Student Performance Evaluation (Clinical Instructor)	Average Score for Percentage Total for 2 Evaluations (1 mid-term and 1 final)	100	22%
ASR Student Performance Evaluations	Average Percentage of Total Percentile of All Rotation Evaluations	100	22%
Total Possible Points		452	

GRADING SCALE

100	A+	91	B+	82	C+	73	D+	64-0	F
99-93	A	90-84	B	81-75	C	72-66	D		
92	A-	83	B-	74	C-	65	D-		

PLEASE NOTE: If a student does not receive a C or better in this core course, they will be dismissed from the program. (See the *Student Handbook, Academic Standards 2016*)

Fall 2016 Clinic Schedule

IUSB Radiography Clinic Schedule: Fall 2016

Junior Clinical days: AHLT-R181 Tuesday, Thursday, Friday (7:30am-3:30pm)

Senior Clinical days: AHLT-R283 Monday, Wednesday, Friday (7:30am-3:30pm), Thursday (7:30am-11:30pm)

Week	Date	Junior hours T/TH/FR (7:30a-3:30p)	Senior hours M/W/FR (7:30a-3:30p) Th (7:30a-11:30p)
Week 1	August 22-27	22.5	26.5
Week 2	August 28-September 3	22.5	26.5
Week 3	September 6-10 (Labor day (5 th) off)	22.5	19
Week 4	September 11-17	22.5	26.5
Week 5	September 18-24	22.5	26.5
Week 6	September 25- October 1	22.5	26.5
Week 7	October 2-8	22.5	26.5
Week 8	October 9-14	22.5	26.5
Fall Break October 15th-23rd			
Week 9	October 24-29	22.5	26.5
Week 10	October 30- November 5	22.5	26.5
Week 11	November 6-12	22.5	26.5
Week 12	November 13-19	22.5	26.5
Week 13	November 20-22	7.5	7.5
Thanksgiving Break November 23th-27th			
Week 14	November 28-December 3	22.5	26.5
Week 15	December 4-9 Last day of clinic, Dec. 9 th	22.5	26.5
Semester totals		322.5 hours	371 hours
Finals December 12th-17th			
Winter Break December 18th-January 9th			

Spring 2017 Clinic Schedule

IUSB Radiography Clinic Schedule: Spring 2017

Junior Clinical days: AHLT-R182 Monday, Wednesday, Friday (7:30 am – 3:30 pm)

Senior Clinical days: AHLT-R290 Monday, Tuesday, Thursday, (7:30 am – 3:30 pm), Friday (7:30am-12:30pm)

Week	Date	Junior hours M/W/F (7:30a-3:30p)	Senior hours M/T/TH (7:30a-3:30p) FR (7:30a-12:30p)
Week 1	January 9-14	22.5	27.5
Week 2	January 15-21 Martin Luther King Jr. Holiday off 16 th	15	20
Week 3	January 22-28	22.5	27.5
Week 4	January 29-February 4	22.5	27.5
Week 5	February 5-11	22.5	27.5
Week 6	February 12-18	22.5	27.5
Week 7	February 19-25	22.5	27.5
Week 8	February 26-March 4	22.5	27.5
Week 9	March 5-10	22.5	27.5
Spring Break, no class/clinic March 11th-19th			
Week 10	March 20-25	22.5	27.5
Week 11	March 26-April 1	22.5	27.5
Week 12	April 2-April 8	22.5	27.5
Week 13	April 9-15	22.5	27.5
Week 14	April 16-22	22.5	27.5
Week 15	April 23-26 Last day of clinic, Wednesday 26 th	15	15
Semester totals		322.5 hours	392 hours
Finals April 28th-May 5th			
Commencement May 9th			

Summer 1&2 2017 Clinic Schedule

IUSB Radiography Clinic Schedule: Summer 1&2, 2017

(Tentative)

Summer 1

Junior Clinical days: Monday-Friday (7:30 am– 3:30 pm)

Week	Date	Junior hours M-F (7:30a-3:30p)
Week 1	May 15-20	37.5
Week 2	May 21-27	37.5
Week 3	May 28-June 3 Memorial day off, May 29	30
Week 4	June 4-10	37.5
Week 5	June 11-17	37.5
Week 6	June 18-23	37.5
Semester Totals		217.5

Summer Break June 24-July 4

Summer 2

Junior Clinical days: TBD, Minimal hours

Senior Clinical days: M-F (7:30am-3:30pm)

Summer 2		Junior hours TBD	Senior hours M-F (7:30a-3:30p)
Week 1	July 5-July 8 Independence Day off		22.5
Week 2	July 9-15		37.5
Week 3	July 16-22		37.5
Week 4	July 23-29		37.5
Week 5	July 30-August 5	Minimal Clinical Hours	37.5
Week 6	August 6-11	Minimal Clinical Hours	37.5
Semester Totals		TBD	217.5

AHLT-R181 and AHLT-R182 Clinical Lab Syllabus

Clinical Instructors:

Mark Holcomb, R.T.(R)
Stephanie Lueking, R.T.(R)
Jeanne Renken, R.T.(R)
Jamie Jardine, R.T.(R)
Sarah Howard, R.T.(R)
Sue Lamb, R.T.(R)

Clinical Sites:

Elkhart General Hospital
IU Health Goshen Hospital
Memorial Hospital
Saint Joseph Regional Medical Center-Plymouth
Saint Joseph Regional Medical Center-Mishawaka
Saint Joseph Regional Medical Center-Mishawaka

TIME: Arranged by Instructor

TEXTBOOK: Textbook of Radiographic Positioning and Related Anatomy, Bontrager

ATTENDANCE: Attendance of all laboratory sessions is mandatory.

Objectives/Expected Student Outcomes

Given proper instruction and demonstration, a practice work area (radiographic room) and under simulated conditions, the student will be able to:

1. Prepare the radiographic room prior to the start of the mock exam.
2. Effectively communicate in a technologist role.
3. Demonstrate proper positioning skills with 90% accuracy.
4. Demonstrate knowledge of specific examination procedures with 90% accuracy.
5. Manipulate equipment effectively.
6. Utilize proper radiation safety measures in accordance with (ALARA: As-Low-As- Reasonably-Achievable).
7. Select proper exposure factors for each examination with 90% accuracy.
8. Name the anatomical structures demonstrated for each position/projection

Procedures

The laboratory is a separate work area (a radiography examination room) including necessary equipment for practice sessions. After appropriate instruction and demonstrations by faculty, the student will practice proper positioning methods utilizing role-playing activities with another student. After practicing, the student will have the opportunity to request to complete the clinical laboratory competency evaluation process. All students are required to attend their scheduled Clinical Labs with their clinical instructor. Students are required to be on time for lab. In the event that a student is late, or misses a scheduled Clinical Lab, when the student is in fact present, the student shall receive a Student Violation Form and a loss of 2 points from the student Clinical Laboratory Evaluation Category. Repeated late arrivals in excess of 2 times will result in a Learning Contract. If the student is ill, they should check with the clinical instructor upon their return to reschedule their Clinical Lab as soon as possible.

Clinical lab times and locations must be communicated to the students at the beginning of the day they are scheduled. In the event that the clinical instructor is unable to conduct a scheduled Clinical Lab, they are required to reschedule the missed lab. If a student is scheduled at an affiliated site, they are to return to their respective hospitals for the Clinical Labs.

Assignments

Each student is required to participate in mandatory practice sessions. It is the responsibility of the student to insure that the minimum of 1 hour per week is met. In order to meet the requirements of this assignment, the following conditions must be met:

1. The student must participate in practice sessions with a minimum of one (1) hour per week with an assigned partner. (Whenever possible, only two students should practice together.)
2. The student will be required to sign out on a Practice Lab sheet as provided. They are not required to punch out on time cards.
3. Practice lab time frame will begin on Monday of each week and run through Friday of the same week. Practice labs must be performed during regular Clinical Experience hours.
4. If a practice lab has not been completed by Friday at 3:30 p.m. of each week, lab time must be scheduled with the clinical instructor for the following week.
5. Students will not be permitted to take personal time if the one (1) hour of practice time has not been completed during that particular week.
6. The student who does not complete the required one (1) hour of practice will receive a Student Violation Form and a loss of 2 points from the student Clinical Laboratory Graduation Category. Repeated occurrences of failure to complete practice time in excess of 2 times will result in a Learning Contract.
7. If a student is signed out for Practice Lab and if found not to be practicing, a Student Violation Form will be given.
8. Practice hours will not accrue from week to week.
9. Students should complete a Practice Lab Activity sheet during each lab and at the end of the lab. The student will put the Activity sheet in the designated place at each institution in order to get credit for the lab.
10. The student who has not put in the required one (1) hour of practice time will not be allowed to participate in a regularly scheduled test out Clinical Lab with the clinical instructor.

Examinations

Examinations (testing-out) will be given after the student has had sufficient practice time (may also be given at the discretion of the clinical instructor). It is required that the student maintain a minimum mastery level of 90% in the laboratory. If this requirement is not met, the student will be required to repeat the procedure until the level of 90% is reached.

Laboratory Competency Categories

*Mandatory and Elective Competencies

THORAX	LOWER EXTREMITIES	ABDOMEN	SURGICAL
*Chest (Routine Adult, Geriatric, Pediatric)	*Toes	*KUB	*C-Arm Operation
*Chest (AP Upright)	*Foot	*Abdominal Series (Supine, Upright, Decubitus)	Line Placements
*Ribs	*OS Calcis	Dorsal Decubitus Abdomen	Standard Surgical Imaging
*Sternum	*Ankle (Routine)	GI TRACT	Operative Cholangiography
*Chest Decubitus	Ankle (Stress)	*Esophagus	HIP Pinning
*Chest Lordotic	*Tibia/Fibula	*UGI Series	Retrograde Urography
*Soft Tissue Neck	*Patella	*Small Bowel	HEAD AND NECK
UPPER EXTREMITIES	Intercondyloid Fossa	*Single Contrast Colon	*Skull
*Finger and Thumb	*Femur	*Double Contrast Colon	*Facial bones with Zygomatic Position
*Hand	SPINE AND PELVIS	Digital Fluoroscopy/Image Processing	*Orbits
*Wrist	*Cervical Spine Routine	UROGRAPHY	*Mandible
*Forearm	*Trauma Cervical Spine (Horizontal Beam)	*Intravenous Urography	*Paranasal Sinuses
*Humerus	*Trauma Cervical Spine (Swimmer's Position)	Voiding Cystourethrography	*TMJ
*Elbow (4 positions)	*Trauma Spine (Horizontal Beam)	Retrograde Cystography	*Nasal Bones
*Shoulder	*Thoracic Spine	PORTABLE TRAUMA	TOMOGRAPHY
*Shoulder Trauma: with Y-view, or Transthoracic, or Axillary	*Lumbar Spine w/oblique's	*Portable Chest	Basic Unit Operation
*Scapula	*AP Pelvis	*Portable Abdomen with Grid	SPECIALIZED STUDIES
*Clavicle	*Hip Routine w/lateral	*Portable Orthopedic	Myelography, Enteroclysis
Sternoclavicular Joints	*Trauma Hip w/cross-table lateral	Portable Skull	Arthrography
*Acromioclavicular Joints	*Scoliosis Series	Portable Facial Bones	Hysterosalpingography
*Pediatric, Geriatric Upper Extremity	*Sacrum/Coccyx	*Trauma Lower Extremity	Computed Tomography
GENERAL PATIENT CARE	*Sacroiliac Joints	*Trauma Upper Extremity (non- shoulder)	ERCP
CPR	BONE STUDIES	GERIATRIC STUDIES	PEDIATRIC STUDIES
O ₂ Administration	Bone Age	*Chest	*Chest and Abdomen
Vital Signs (Blood Pressure, Pulse, Respiration, Temperature)	Bone Length	*Upper Extremity	*Mobile Study
Venipuncture	Bone Survey	*Lower Extremity	*Upper/Lower Extremity

Student Clinical Laboratory Evaluation

Name: _____ Date: _____

Exam: _____

	1	2	3	4	5	6	7	8
1. Choose adequate or proper image receptor size.								
2. Properly used side marker								
3. Patient was in proper position.								
4. Center of part aligned to center of image receptor.								
5. Used correct angulation (as required)								
6. Used required SID.								
7. Central ray in proper alignment to part.								
8. Central ray in proper alignment to image receptor.								
9. Used adequate collimation.								
10. Used proper radiation protection.								
11. Maintained good patient care.								
12. Chose proper exposure factors.								
13. Performed the radiographic procedure properly.								
14. Displayed professional behavior during examination								
15. Completes projection in timely manner								

Using the above date, the student has _____ has not _____ mastered the exam.

Clinical Instructor Signature: _____ Date: _____

Deductions for Unsatisfactory Accomplishment:

- Failure to obtain laboratory competency per position -0.25 points for each specific procedure
- Absent from Clinical Laboratory (un-excused) -4.0 points
- Late for Clinical Laboratory (un-excused, 5 minutes) -2.0 points
- Failure to complete required practice laboratory time -2.0 points (Includes issuance of a student violation form)

Clinical Competencies Class of 2017

Required Clinical Competencies for the Entire Clinical/Professional Portion of the Program *Class of 2017

Semester	Mandatory Competencies	Elective Competencies	Rechecks	Totals
Junior Year				
Fall	9**	0	3	12
Spring	8	2	2	12
Summer 1	3	2	1	6
Summer 2	3	2	1	6
Senior Year				
Fall	7	2	3	12
Spring	7	2	3	12
Totals	37	10***	13	60

*Due to changes in ARRT requirements, class requirements may differ.

**A student cannot go over the 9 competencies for the Junior Fall semester. However, the student can 'work ahead' on mandatory and elective competencies during the following semesters.

***Total possible electives equals 25 exams. 2 elective exams from the Head (2) and Fluoroscopy (2) sections must be selected for mandatory competencies.

All Clinical Competencies and Rechecks for each semester must be completed by the last day of the clinical experience schedule.

Imaging Procedures *Class of 2017	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-V
CHEST AND THORAX					
Chest Routine	M				
Chest AP (Wheelchair or Stretcher)	M				
Ribs	M				
Chest Lateral Decubitus	E				
Sternum	E				
Upper Airway (Soft-Tissue Neck)	E				
UPPER EXTREMITY					
Thumb or Finger	M				
Hand	M				
Wrist	M				
Forearm	M				
Elbow	M				
Humerus	M				
Shoulder	M				
Trauma: Shoulder**(Scapular Y, Transthoracic or Axillary)	M				
Clavicle	E				
Scapula	E				
AC joints	E				
Trauma: Upper Extremity** (Non-Shoulder)	M				
LOWER EXTREMITY					
Toes	E				
Foot	M				
Ankle	M				
Knee	M				
Tibia-Fibula	M				
Femur	M				
Trauma: Lower Extremity**	M				
Patella	E				
Calcaneus (Os Calcis)	E				

*Due to changes in ARRT requirements, class requirements may differ.

**Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.

Imaging Procedures *Class of 2017	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-v
HEAD:					
Must select at least 2 procedures**					
Skull	E				
Paranasal Sinuses	E				
Facial Bones w/zygomatic arches	E				
Orbits	E				
Nasal Bones	E				
Mandible	E				
SPINE and PELVIS					
Cervical Spine	M				
Trauma: Cervical Spine (Cross-Table lateral)	E				
Thoracic Spine	M				
Lumbar Spine	M				
Pelvis	M				
Hip	M				
Cross-Table Lateral Hip	M				
Sacrum and Coccyx	E				
Scoliosis Series	E				
Sacroiliac Joints	E				
ABDOMEN					
Abdomen (Supine) KUB	M				
Abdomen Series (including upright OR decubitus)***	M				
Intravenous Urography	E				

*Due to changes in ARRT requirements, class requirements may differ.

**HEAD: Must choose 2 procedures from the list of electives.

***The Abdomen Series must include either an upright abdomen OR decubitus abdomen.

Imaging Procedures *Class of 2017	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-v
Fluoroscopy Studies: Must select either upper GI or barium enema plus one other elective procedure**					
Upper GI Series (Single or Double Contrast)	E				
Barium Enema (Single or Double Contrast)	E				
Small Bowel Series	E				
Esophagus	E				
SURGICAL STUDIES					
C-Arm Procedure (Orthopedic)	M				
C-Arm Procedure (Non-Orthopedic)	M				
MOBILE STUDIES					
Portable Chest	M				
Portable Abdomen	M				
Portable Orthopedic	M				
PEDIATRICS (Age 6 or Younger)					
Chest Routine	M				
Upper OR Lower Extremity	M				
Abdomen	E				
Mobile Study	E				

*Due to changes in ARRT requirements, class requirements may differ.

**Fluoroscopy Studies: Student must choose either an Upper GI or Barium Enema procedure. In addition, one other elective must be chosen for total of 2 exams from the Fluoroscopy Studies section. Overhead views for fluoroscopy exams can be simulated if not needed by the Radiologist.

Clinical Competency Rechecks, *Class of 2017

Each semester the student radiographer will complete an assigned number of patient recheck competency exams. Recheck exams are designed to give the clinical instructor the opportunity to reevaluate the students' level of competency after successful completion of a mandatory/elective exam. Rechecks are selected and completed by the Clinical Instructor (or appropriate designee) and must be done on or before the last day of clinic with the corresponding semester.

Rechecks should include the following exams (13 total):

Student Name:		
Clinical Site:		
Exam	Percentage Score	Date/Semester Completed
Upper Extremity		
Upper Extremity		
Lower Extremity		
Lower Extremity		
Chest and Thorax		
Abdomen		
Pediatric		
Fluoroscopy**		
Headwork		
Mobile Study		
Surgical Study		
Spine or Pelvis		
Spine		
Clinical Instructor Signature:		

*Due to changes in ARRT requirements, class requirements may differ.

** Overhead views for fluoroscopy exams can be simulated if not needed by the Radiologist.

Clinical Competencies Class of 2018

Required Clinical Competencies for the Entire Clinical/Professional Portion of the Program *Class of 2018

Semester	Mandatory Competencies	Elective Competencies	Rechecks	Totals
Junior Year				
Fall	9**	0	3	12
Spring	9	1	2	12
Summer 1	4	2	1	7
Summer 2	4	2	1	7
Senior Year				
Fall	8	2	2	12
Spring	8	2	2	12
Totals	42	9***	11	62

*Due to changes in ARRT requirements, class requirements may differ.

**A student cannot go over the 9 competencies for the Junior Fall semester. However, the student can 'work ahead' on mandatory and elective competencies during the following semesters.

***Total possible electives equals 21 exams. 2 elective exams from the Head (2) and 2 elective exams from Fluoroscopy (2) sections must be selected for mandatory competencies.

All Clinical Competencies and Rechecks for each semester must be completed on or before the last day of the clinical experience schedule to avoid a grade of "I" incomplete in the course.

Imaging Procedures *Class of 2018	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-V
CHEST AND THORAX					
Chest Routine	M				
Chest AP (Wheelchair or Stretcher)	M				
Ribs	M				
Chest Lateral Decubitus	E				
Sternum	E				
Upper Airway (Soft-Tissue Neck)	E				
UPPER EXTREMITY					
Thumb or Finger	M				
Hand	M				
Wrist	M				
Forearm	M				
Elbow	M				
Humerus	M				
Shoulder	M				
Trauma: Shoulder**(Scapular Y, Transthoracic or Axial)	M				
Clavicle	M				
Scapula	E				
AC joints	E				
Trauma: Upper Extremity** (Non-Shoulder)	M				
LOWER EXTREMITY					
Toes	E				
Foot	M				
Ankle	M				
Knee	M				
Tibia-Fibula	M				
Femur	M				
Trauma: Lower Extremity**	M				
Patella	E				
Calcaneus (Os Calcis)	E				

*Due to changes in ARRT requirements, class requirements may differ.

**Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.

Imaging Procedures *Class of 2018	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-v
HEAD:					
Must select at least 2 procedures as Mandatory competencies**					
Skull	E				
Paranasal Sinuses	E				
Facial Bones w/zygomatic arches	E				
Orbits	E				
Nasal Bones	E				
Mandible	E				
Temporomandibular Joints	E				
SPINE and PELVIS					
Cervical Spine	M				
Cross-Table (Horizontal Beam) Lateral Spine	M				
Thoracic Spine	M				
Lumbar Spine	M				
Pelvis	M				
Hip	M				
Cross-Table Lateral Hip	M				
Sacrum and Coccyx	E				
Scoliosis Series	E				
Sacroiliac Joints	E				
ABDOMEN					
Abdomen (Supine) KUB	M				
Abdomen Series (including upright OR decubitus)***	M				
Intravenous Urography	E				

*Due to changes in ARRT requirements, class requirements may differ.

**HEAD: Must choose 2 procedures from the list of electives.

***The Abdomen Series must include either an upright abdomen OR decubitus abdomen.

Imaging Procedures *Class of 2018	Mandatory or Elective	Date Completed	Patient or Simulated	Competence Verified By	Re-v
FLUOROSCOPY STUDIES:					
Must select either upper GI or barium enema plus one other elective procedure**					
Upper GI Series (Single or Double Contrast)	E				
Barium Enema (Single or Double Contrast)	E				
Small Bowel Series	E				
Esophagus	E				
SURGICAL STUDIES					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	M				
Surgical C-Arm Studies (Requiring Manipulation Around a Sterile Field)	M				
MOBILE STUDIES					
Portable Chest	M				
Portable Abdomen	M				
Portable Orthopedic	M				
PEDIATRICS (Age 6 or Younger)					
Chest Routine	M				
Upper OR Lower Extremity	M				
Abdomen	E				
Mobile Study	E				
GERIATRIC PATIENT (Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	M				
Upper Extremity	M				
Lower Extremity	M				

*Due to changes in ARRT requirements, class requirements may differ.

**Fluoroscopy Studies: Student must choose either an Upper GI or Barium Enema procedure. In addition, one other elective must be chosen for total of 2 exams from the Fluoroscopy Studies section. Overhead views for fluoroscopy exams can be simulated if not needed by the Radiologist.

Clinical Competency Rechecks, *Class of 2018

Each semester the student radiographer will complete an assigned number of patient recheck competency exams. Recheck exams are designed to give the clinical instructor the opportunity to reevaluate the students' level of competency after successful completion of a mandatory/elective exam. Rechecks are selected and completed by the Clinical Instructor (or appropriate designee) and must be done on or before the last day of clinic with the corresponding semester.

Rechecks should include the following exams (11 total):

Student Name:		
Clinical Site:		
Exam	Percentage Score	Date/Semester Completed
Upper Extremity		
Lower Extremity		
Chest and Thorax		
Abdomen		
Pediatric Study		
Fluoroscopy**		
Headwork		
Mobile/Surgical Study		
Spine or Pelvis		
Geriatric Study		
Clinical Instructor Signature:		

*Due to changes in ARRT requirements, class requirements may differ.

** Overhead views for fluoroscopy exams can be simulated if not needed by the Radiologist.

APPENDIX

IU South Bend Radiography Program: ASR Student (Clinical) Performance Evaluation*

Student name: _____ Date: _____

Semester/Year: _____

Clinical Rotation: _____

Directions: Select the number which indicates the student's level of skill development					
A	(100-92)	Outstanding achievement	D	(73-65)	Below required standard of achievement
B	(91-83)	Above average achievement	F	(64-0)	Well below required standard of achievement
C	(82-74)	Average achievement			
Categories	100 - 92	91 - 83	82 - 74	73 - 65	64 - 0
	"A"	"B"	"C"	"D"	"F"
1. INITIATIVE Displays energy and motivation in starting and completing tasks.					
2. ATTITUDE Displays willingness to be guided, directed, and instructed while displaying positive emotional and psychological traits					
3. COMMUNICATION SKILLS Interacts appropriately and professionally with patients, staff and physicians					
4. PATIENT CARE SKILLS Perceives patient needs creating a warm, friendly and comfortable experience					
5. PROFESSIONALISM Appearance and behavior consistent with rules and regulations of Indiana University of South Bend Program and its affiliates.					
6. QUANTITY OF WORK FOR CLASS STANDING Participates in the total workload of the assigned clinical area, completing the appropriate volume of work					
7. QUALITY OF WORK FOR CLASS STANDING Demonstrates proper accuracy and thoroughness in procedure performance while maintaining standard of professionalism and patient care. Practices appropriate radiation protection to patient and staff.					
8. ORGANIZATION Performs duties in a logical and efficient manner					
9. CRITICAL THINKING FOR CLASS STANDING Development of analytical and problem solving skills.					
10. ADAPTABILITY Applies information and responsibilities regarding procedures, materials, equipment and techniques.					
11. SELF CONFIDENCE FOR CLASS STANDING Displays maturity and confidence.					
12. DEPENDABILITY Follows through with clinical responsibilities in a reliable conscientious manner.					
13. ACCOUNTABILITY Routinely present and punctual in assigned clinical area.					
TOTAL POINTS: (Out of 1300)	PERCENTAGE SCORE _____				
*Form on E*Value					

IUSB RADIOGRAPHY PROGRAM: Student Clinical Laboratory Evaluation

Name _____ Date _____ Exam _____

The Student: Yes = 1, NO = 0

	1	2	3	4	5	6	7	8
1. Choose adequate or proper image receptor size.								
2. Properly used side marker.								
3. Patient was in proper position.								
4. Center of part aligned to center of image receptor.								
5. Used correct angulation (as required).								
6. Used required SID.								
7. Central ray in proper alignment to part.								
8. Central ray in proper alignment to image receptor.								
9. Used adequate collimation.								
10. Used proper radiation protection.								
11. Maintained good patient care.								
12. Chose proper exposure factors.								
13. Performed the radiographic procedure properly.								
14. Displayed professional behavior during examination.								
15. Completes projection in timely manner.								

Using the above data, the student has _____ /has not _____ mastered the exam.

Clinical Instructor Signature _____ Date _____

IUSB RADIOGRAPHY PROGRAM: Student Clinical Laboratory Evaluation

Name _____ Date _____ Exam _____

The Student: Yes = 1, NO = 0

	1	2	3	4	5	6	7	8
1. Choose adequate or proper image receptor size.								
2. Properly used side marker.								
3. Patient was in proper position.								
4. Center of part aligned to center of image receptor.								
5. Used correct angulation (as required).								
6. Used required SID.								
7. Central ray in proper alignment to part.								
8. Central ray in proper alignment to image receptor.								
9. Used adequate collimation.								
10. Used proper radiation protection.								
11. Maintained good patient care.								
12. Chose proper exposure factors.								
13. Performed the radiographic procedure properly.								
14. Displayed professional behavior during examination.								
15. Completes projection in timely manner.								

Using the above data, the student has _____ /has not _____ mastered the exam.

Clinical Instructor Signature _____ Date _____

IU South Bend Radiography Program

CLINICAL COMPETENCY PERFORMANCE EVALUATION*

Student Name: _____ Date/Time: _____ Semester: _____

Score: 0 = UNACCEPTABLE, 1 = ACCEPTABLE PEDIATRIC _____ ADULT _____ EXAM: _____

POSITIONS: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ PT ID # _____

Scoring Rubric			Radiographic Positions					
Points			1	2	3	4	5	6
1.0	1	Room Preparation and Appearance						
1.0	2	Patient artifacts						
1.0	3	Verification Patient ID, Patient History, Requisition Evaluation						
1.0	4	Demonstration of effective patient care skills (Instruction assistance and ethics)						
1.0	5	Knowledge of procedure routines / necessary positions/projections						
1.0	6	Appropriate Field of View/Image Receptor Size/Collimation						
1.0	7	Proper usage of markers / ID stamper (Deduct .25 to .5 when marker used but not fully visualized)						
.5 to 2.0	8	Patient positioning / per anatomical projection (Diagnostic image with minor error, deduct .5. If retake of position needed, deduct 2.0)						
.5 to 2.0	9	Central ray placement to part / image receptor (Diagnostic image with minor error, deduct .5. If retake of position/projection needed, deduct 2.0)						
1.0	10	Image receptor placement / Departmental routine						
1.0	11	Proper Equipment Operation/Correct tube angle (if required)						
1.0	12	Completes in a timely manner						
1.0	13	Practices proper radiation safety measures						
1.0	14	Uses proper SID						
1.0	15	Selects proper exposure factors for desired study						
1.0	16	Displays processed radiograph properly						
1.0	17	Shows knowledge of related anatomy on radiograph						
1.0	18	Displays awareness of how to improve film quality						
1.0	19	Radiographic study of diagnostic quality						
Maximum Points-21 points/position total								
Total pts. earned _____ ÷ Number of positions _____ = Average pts. earned for study								
Scoring: (Initial Competency) 21 points = Consistently performs above average achievement 20 points = Above average achievement 19 points = Average achievement below 19 points = Failure to meet standard requirement of achievement			Recheck Scoring: 21.0-19.0 pts. = passing score 18.9-15.8 pts. = student will receive half the total point value 15.7-0.00 pts. = student will receive 0 points					

*Form on E*Value

Indiana University South Bend Radiography Program

Clinical Supervision & Repeat Policy

Evaluation of Compliance

Student Name _____ Date _____

Site _____ Rotation _____

Please fill out form:

Description	Student Initials	Radiographer Initials
Student was supervised in keeping with program policies.		
Repeat studies were performed in concurrence with the program repeat policy.		

Comments:

Technologist Printed Name

Technologist Signature

Student Printed Name

Student Signature

Clinical Experience Performance Summary Junior Fall Semester, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (M) (M) (Rev) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Student Clinical Laboratory Evaluation: (20 Points)

20 points - _____ = _____ points

Total Evaluation Points ÷ By Total Possible Points (472) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Junior Spring Semester, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (M) (M) (E) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Student Clinical Laboratory Evaluation: (20 Points)

20 points - _____ = _____ points

Total Evaluation Points ÷ By Total Possible Points (472) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Summer Session I, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (147 Points)

____ + ____ + ____ + ____ + ____ + ____ + ____ = ____ points
(M) (M) (M) (M) (E) (E) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

____% = ____ points

Student Clinical Performance Evaluation: (100 Points)

____% average of all evaluations = ____ points

Total Evaluation Points ÷ Total Possible Points (347) = _____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary

Summer Session II, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (147 Points)

____ + ____ + ____ + ____ + ____ + ____ + ____ = ____ points
(M) (M) (M) (M) (E) (E) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

____% = ____ points

Student Clinical Performance Evaluation: (100 Points)

____% average of all evaluations = ____ points

Total Evaluation Points ÷ Total Possible Points (347) = _____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Senior Fall Semester, Class of 2017*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (E) (E) (Rev) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Total Evaluation Points ÷ By Total Possible Points (452) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Senior Spring Semester, Class of 2017*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (E) (E) (Rev) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Total Evaluation Points ÷ By Total Possible Points (452) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Senior Fall Semester, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (M) (E) (E) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Total Evaluation Points ÷ By Total Possible Points (452) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Clinical Experience Performance Summary Senior Spring Semester, Class of 2018*

Student _____ Date _____

Semester _____ Grade _____

Clinical Competency Performance Evaluation: (252 Points)

_____ + _____ + _____ + _____ + _____ + _____ + _____ +
(M) (M) (M) (M) (M) (M)

_____ + _____ + _____ + _____ + _____ + _____ = _____ points
(M) (M) (E) (E) (Rev) (Rev)

Clinical/Professional Skills Development Evaluation: (100 Points)

_____ % + _____ % ÷ 2 = _____ points

Student Clinical Performance Evaluation: (100 Points)

_____ % average of all evaluations = _____ points

Total Evaluation Points ÷ By Total Possible Points (452) = ____

Strengths _____

Areas in need of improvement _____

Student Signature _____

Clinical Instructor Signature _____

*Due to changes in ARRT requirements, class requirements may differ.

Indiana University South Bend Radiography Program Clinical Performance Incident Notes

Instructions: A clinical performance incident is any occurrence involving a student, which the evaluator believes may affect the educational experience of the student. The incident may be positive or negative. (Please fill out and return to a clinical instructor.)

In the event that a negative Incident Note is completed, the program clinical coordinator must be notified immediately. Accumulation of 2 negative Incident Notes will trigger a conference with the program clinical coordinator and may result in disciplinary action and/or a Learning Contract.

INSTRUCTIONS: This form is used only for occurrences, which need to be documented. This holds no more severity than would a "verbal warning." It is very important that any agreement be documented for future reference. Signatures are required only for proof of agreement/discussion.

Student Name: _____

Date: _____

Setting where incident occurred: _____

Description of incident:

Comments by evaluator:

Signature: _____ Date: _____

Indiana University South Bend Radiography Program STUDENT VIOLATION FORM

This student has been found by the clinical instructor to be in violation of a student policy as stated in the Radiography Program Clinical Student Handbook.

Student: _____ Date: _____

Policy Violated: _____

Comments:

Clinical Instructor Signature

Date:

Student Signature

Date:

Program Director Signature

Date:

Number of *Student Violation Forms* Given
for Entire Clinical/Professional Program _____

Problem Area Assessment Form/Academic and Clinical Alert Form

Faculty members use the Problem Area Assessment Form to identify specific problems a student may be encountering in a course(s).

College of Health Sciences Problem Area Assessment Form

Student Name _____ Course _____ Sem/Yr. _____

PROBLEM AREAS	COMMENTS
Behavior	
Accountability	
Late Assignments	
Tardiness	
Absenteeism	
Incomplete assignments	
Professional Behavior	
Attitude	
Language	
Lack of preparation	
Difficulty following appropriate chain of command	
Inappropriate dress	
Failure to follow uniform policy	
Difficulty functioning independently	
Difficulty controlling anxiety	
Difficulty accepting constructive criticism	
Communication	
Inappropriate interaction	
Lacks assertiveness	
Difficulty expressing self	
Inappropriate/incomplete documentation	
Difficulty with written work	
Difficulty following directions	
Critical Thinking	
Difficulty applying previously learned knowledge and skills	
Difficulty problem solving	
Difficulty assessing client needs	
Difficulty evaluating self realistically	
Difficulty demonstrating logical thought processes	
Difficulty evaluating consequences of own actions	

Faculty signature _____ Date _____

I have read and understand the identified problem areas. I also understand that this information will be placed in a confidential file for the purpose of tracking my progress throughout the remainder of the program. Repeated receipt of this form by a student may lead to a learning contract, loss of points from course grade, a student violation or other consequences.

Student signature _____ Date _____

Learning Contract and Professional Improvement Plan

Indiana University South Bend Medical Imaging Programs

Faculty/Student Learning Contract

A learning contract helps the faculty and student share the responsibility for achieving desired outcomes for success in the course. It also helps increase accountability and provides feedback to the student regarding progress toward meeting course goals.

Student:

Course:

Semester:

Faculty:

Description of Problem:

Competencies/Objectives or Goals not being met (completed by faculty):

Faculty suggestions for success: (include any deadlines):

Student Responsibilities and plan for success with dates to be met:

My signature below indicates that I understand and agree to the following:

_____ I must adhere to the identified plan and demonstrate all expected course competencies/objectives successfully in order to succeed in this course; the inability to do so could result in failure of the course.



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

Program Radiograph Repeat Policy

The Radiography Program, sponsored by Indiana University South Bend, requires that any radiographic image that is repeated by a student must be done in the presence of a registered radiographer. At no time are students (first or second year) to repeat radiographs alone, regardless of their level of competency. Failure to adhere to this policy will result in disciplinary action.

Compliance with the Radiography Program Repeat Policy will be substantiated by completion of the Clinical Supervision and Repeat Policy Evaluation of Compliance Form by the student and technologist. This form is part of the clinical objectives for each clinical rotation.

I have read and understand the above repeat policy for the IU South Bend Radiography Program.

Signature: _____ Date: _____

Print Name: _____



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

ETHICAL STANDARDS and CODE OF CONDUCT

Practicing registered medical imaging technologists are expected to follow a Code of Ethics as stated by the American Society of Radiologic Technologists (www.asrt.org). Contained within the code are statements about proper ethical conduct, patient privacy rights, and the technologist duty to safeguard the patient’s protected health information. The IU South Bend Medical Imaging Technology Programs support the idea that all medical imaging students be held to those same standards of ethical behavior, particularly in regards to ethical conduct, professionalism, disposition and patient confidentiality.

It is of utmost importance that the IU South Bend Medical Imaging Technology students demonstrate high ethical standards, professional behavior, academic and personal integrity and dispositions while in the program. Since they represent the university, improper conduct on their part can adversely affect the inherent integrity of the clinical program. Indiana University has a Code of Student Rights, Responsibilities, and Conduct which can be accessed at <http://studentcode.iu.edu/responsibilities/index.html> . All students enrolled in the AS in Radiography program and the BSMIT Program will be held accountable for the premises in the code including:

G. Facilitate the learning environment and the process of learning, including attending class regularly, completing class assignments, and coming to class prepared

H. Uphold and maintain academic and professional honesty and integrity

My signature verifies my understanding and willingness to comply with the ethical standards as stated in these documents. I have reviewed the ASRT Code of Ethics in the AS in Radiography Program Student Handbook. I have read the Indiana University Code of Student Rights, Responsibilities, and Conduct and will comply with the tenets set forth in the code. I am aware that my failure to uphold these principles can result in my being dismissed from the Indiana University South Bend Medical Imaging Technology Clinical Program.

Date: _____

Written Signature: _____

Printed Signature: _____

Indiana University South Bend Medical Imaging Technology Programs

MRI Student Screening Form



Student's Printed Name: _____ Date: _____

MRI utilizes a powerful magnetic that is always turned "on". For safety reasons, anyone who enters the scan room must complete a metal screening history form. All students must complete a screening form prior to entering clinical practicum. MRI safety screening forms will be kept on file with the program.

Do you have or have you ever had any of the following?

- Yes No Cardiac Pacemaker: _____
 - Yes No Heart Surgery/Heart Valve: If Yes, explain: _____
 - Yes No Implanted Cardiac Defibrillator (ICD): _____
 - Yes No Brain Aneurysm Clips/ Brain Surgery: If Yes, explain: _____
 - Yes No Shunts/Stents/Filters/Intravascular Coil: _____
 - Yes No Eye Surgery/Implants/Spring/Wires/Retinal Tack: _____
 - Yes No Injury to the Eye Involving Metal or Metal Shavings: _____
 - Yes No Orthopedic Pins/Screws/Rods/Joints/Prosthesis: _____
 - Yes No Neurostimulator/Bio stimulator: _____
 - Yes No History of Cancer or Tumors: When: _____ Where: _____
 - Yes No Radiation Therapy/Chemo Therapy: _____
 - Yes No Previous Back Surgery
(Lumbar/Thoracic/Cervical) _____
 - Yes No Ear Surgery/Cochlear Implants/Hearing Aids/Stapes Prosthesis: _____
 - Yes No Vascular Access Port/Catheter: _____
 - Yes No Metal Mesh Implants/Wire Sutures/Wire Staples or Clips/Internal Electrodes: _____
 - Yes No Electrical/Mechanical/Magnetic Implants? Type: _____
 - Yes No Tattoo's/Permanent Make-up/Body Piercing/Patches: _____
 - Yes No Dentures/Partials/Dental Implants: _____
 - Yes No Gunshot Wounds/Shrapnel/BB: _____
 - Yes No Do you have pins in your Hair/Clothes/Hair Extensions/Hair Pieces/Wig: _____
- List Any Previous Surgeries: _____

I attest that the above information is correct to the best of my knowledge. I have also informed the BSMIT program coordinator that I am not pregnant at this time. I have had the opportunity to ask questions related to MRI safety and I understand the information presented to me. I understand that I may be asked to complete an additional MRI screening form at my assigned clinical agency.

Student Name (Printed): _____ Date: _____
Student Signature: _____
Instructor Signature: _____ Date: _____



Indiana University South Bend AS in Radiography Program Safety Statement – Magnetic Resonance Imaging (MRI)

Magnetic Resonance Imaging (MRI) is a diagnostic tool that utilizes a powerful magnet and radio waves to generate images of the body. The magnet used in MRI imaging is always turned on and certain implanted devices are considered incompatible with this technology. All students considering a career in medical imaging should be aware of the potential hazards of exposure to the MRI scanner and the need for careful metal screening prior to entering the AS in Radiography Program. For safety reasons, all students must be screened for metal, complete a metal screening history form and basic MRI safety training prior to entering clinical practicum. Additional information can be found at www.mrisafety.com or you may contact Lori Balmer with any questions at lnbalmer@iusb.edu.

MRI Metal Screening Form

Students with a positive metal history, as indicated by answering “yes” to questions on the Metal Screening Form will need to undergo additional screening by program faculty prior to beginning their MRI clinical rotation. Students should never enter the MRI scan area prior to completing the full screening process. Students may be asked to provide documentation of positive metal history prior to the start of their assigned MRI rotation. Certain implanted devices are contraindicated and should not be exposed to the magnetic field. Examples of these devices include:

- Pacemakers
- Neuro stimulators/Biostimulators
- Implanted Infusion Pumps/Pain pumps
- Aneurysm Clips
- Certain Stents, Coils and Filters
- Metallic Foreign Bodies
- Intraorbital Metallic Foreign Bodies

MRI Screening Policy

1. All students enrolled in the medical imaging programs must complete an MRI Screening Form prior to beginning their scheduled MRI clinical rotation.
2. Students who answer “yes” to any of the questions on the MRI Screening Form may be required to undergo additional screening to insure their safety.
3. Additional screening may consist of further questions, documentation of metal and/or orbit x-rays for students with a history of intra-orbital metallic foreign bodies.
 - ✓ Students must complete a screening orbit x-ray exam (at their own expense) and provide written documentation to clinical faculty prior to the start of their MRI rotation.
 - ✓ In the event the orbit x-rays are positive for metal, the student will need to complete an observation-only MRI rotation as a requirement of AHLT-R290.
4. Students who refuse to complete orbit x-rays or provide written documentation will need to sign a refusal form which will be kept in the student’s file at IU South Bend. Their MRI rotation will be considered *observation only*. The student must agree not to enter the scan room under any circumstances.
5. Faculty will notify the MRI Department of the student’s positive metal history and the need to complete an observation only clinical rotation in MRI.
6. All students enrolled in our medical imaging programs are required to complete a clinical

rotation in MRI as a requirement of successful completion of AHLT-R290. Failure to complete your scheduled MRI rotation will result in a grade of “I” incomplete which could delay your graduation.

Please check the circle next to each statement you agree with:

- I have read the MRI Safety Policy, understand the policy and have been given the opportunity to ask questions.
- I understand and agree to undergo additional screening if I have answered “yes” to specific questions on the MRI Metal Screening Form.
- I have been counseled by program faculty about the dangers associated with the magnetic field used in MRI and understand the importance of metal screening.
- I am refusing to undergo orbit x-rays and understand that my MRI rotation will be observation only. I understand that I cannot enter the MRI scan room under any circumstances.

Student Printed Name: _____
Student Signature: _____
Date: _____
Faculty Signature: _____



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND

Radiography

Pregnancy Policy

The National Council of Radiation Protection and Measurement (NCRP Report No. 39-1971), recommends that during the entire gestation period, the maximum permissible dose equivalent to the fetus from occupational exposure of the expectant mother, should not exceed 0.5 rem (500 millirems during the nine months of pregnancy).

If a radiographer uses the proper radiation protection measures, which include remaining in shielded areas, refraining from holding patients or image receptors during x-ray exposures she should not receive more than 30 millirems/ month. (This converts to approximately 360 millirems, or 0.36 rems per year, which is considerably below the limits of the cited NCRP report.) In keeping with the United States Nuclear Regulatory Commission Regulatory Guide 8:13, if a student becomes pregnant it is her choice whether to notify the Radiography Program and the clinical education site of her pregnancy.

If the student decides to notify the radiography program, she must do so in writing to the program director. The program director will in turn notify the clinical education site and schedule an appointment for the student with the radiation safety officer at the clinical education site. The radiation safety officer will advise the student of potential radiation risks to herself and her unborn fetus and explain the necessary radiation protection measures. The program director and radiation safety officer shall collaborate in a review of the previous occupational radiation exposure of the pregnant student.

Upon confirmation of pregnancy, the student will submit a statement from her physician, verifying the pregnancy and the expected due date. Following written declaration and formal verification of pregnancy, the student will be notified of the following options regarding their continuance in the program by the program director:

- A. Immediate withdrawal from the radiography program
- B. Leave of absence from the program
- C. Continued full-time status with limited rotation in fluoroscopy, portable/surgery procedures, special procedures, CT scanning, including appropriate radiation safety precautions.
- D. Continued participation in the program without modification

Every attempt will be made by the program administration to schedule the student, at least for the first trimester of gestation, in areas which do not involve fluoroscopy, mobile/operating procedures, specialized procedures, or CT scanning. When it is necessary for the student to be scheduled in the aforementioned procedures, she must wear a lead apron of at least 0.25 mm lead equivalency, when performing radiologic procedures that do not permit protection by structural shielding (i.e. control booth).

In addition, the student will be monitored with a radiation monitoring device worn outside the lead apron, at the collar region, and another radiation monitoring device at the waist level, under the apron. A dosimeter may also be required by the Radiation Safety Office. These monitoring devices shall be worn during the entire gestation period, and the maximum permissible dose, equivalent to the expectant mother from occupational exposure, shall not exceed 0.5 rem (500 mrem). While not required, radiologic procedures and activities may be restricted when possible.

The program director will monitor the student's radiation dosage to insure that compliance with stated radiation standards is being met. A student who has previously notified the program director of her pregnancy in writing, may rescind her declaration of pregnancy at any time. The student, however, must notify the program director in writing of her decision to revoke her declaration of pregnancy. Following the student's official retraction of her declaration of pregnancy, the lower dose limit for the embryo/fetus will no longer apply.

The physician's statement shall be attached to this copy of the policy. The student must sign this copy as proof that she has read and understands the procedure. If the student withdraws from the program due to a pregnancy, she shall be given the option to reapply within a two-year period. A readmitted student, with a past good-standing status, shall be required to repeat that semester during which she left.

Pregnant students who elect to participate in all education phases with or without modifications are required to review the U.S. Nuclear Regulatory Commission "Regulatory Guide 8.13" which can be located at <http://www.nrc.gov/docs/ML0037/ML003739505.pdf>

I have been advised of potential radiation risks to me and my unborn fetus through a discussion with the radiation safety office.

Student Signature/Date: _____

Radiation Safety Officer/Date: _____

Medical Advisor Date: _____

Program Director/Date: _____

Statement of Adherence of Internship Facility

The following form is completed upon admission and annually. While the impaired practitioner is highlighted here, students are expected to conform to all agency policies and practices.

Indiana University Division of Radiologic Sciences

Indiana University South Bend Statement of Adherence of Internship Facility Policy and Procedures

As a student at IU South Bend's Division of Radiologic Sciences, I understand that I must adhere to all policies and procedures of the clinical facilities where I have clinical practicum experience.

I also understand that I may be required to undergo drug and/or alcohol testing at my expense if the facility or the Division of Radiologic Sciences requests it.

Signature:

Printed name:

Date:

Witnessed by (IU Faculty signature)

Date



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

Radiography Program

Honor Code for All Students

All Students enrolled in programs in the health professions must agree to abide by the following honor code:

"In accordance with the College of Health Sciences Honor Code, I will not engage in dishonesty in my academic activities, and I will not tolerate such dishonesty by other students."

Signature

Date

Print Name

Indiana University South Bend AS in Radiography Program

Request for Change in Academic Standing

Request for Leave of Absence

Name: _____ Date: _____

Please provide a type-written, detailed explanation for your request for a change in academic standing. Please include the following on your request:

1. Explanation of extenuating circumstances that led to your out-of-sequence status or need for a leave of absence.
2. Personal Plan: Explain what you will do to successfully complete the radiography program.
3. Academic Plan: Outline of courses and their sequence to finish the program.

Academic Semester	Fall Semester Courses	Spring Semester Courses	Summer Courses
Fall 20__			
Spring 20__			
Summer 20__			
Fall 20__			
Spring 20__			



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

Student Signature Page

My signature verifies I have read the IU South Bend Radiography Program Clinical Student Handbook (Revised July 2016) in its entirety and agree to abide by the policies and tenets described in the handbook. I know that these policies are subject to change; therefore, I will retain my copy of the handbook for future reference to reconcile any written notification of such changes. Changes in program policy will be announced to all students in writing prior to implementation. I realize that any change(s) may result in the revision of the degree requirements.

I am aware and understand that my failure to uphold these principles can result in disciplinary action including my dismissal from the IU South Bend Radiography Program.

Printed Student Signature

Written Student Signature

Date



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

Student Service Project Verification Form

Student Guidelines: Professional behavior is expected and is a requirement for successfully completing the service project. Students should dress appropriately for the event; school uniforms are preferred when possible. Students should arrive on time, be prepared to participate fully, complete the assignment in the allotted time and behave in an appropriate, courteous and professional manner.

Please give this form to the project supervisor to validate your participation. Return the completed form to the program director on or before the completion of the final semester in the program.

Student Name: _____ Date of Participation: _____

Name of Organization: _____

Name of Supervisor: _____

Total Hours completed during this project: _____

Student Agreement

I verify that I have completed my service project as stated above and have met the required 4 hours of participation.

Student Signature: _____

Supervisor Agreement

I verify that the student listed on this form participated in the service project described and completed the required 4 hours of participation on this project.

Supervisor Signature: _____

Supervisor Comments:

Thank you for your participation.
Indiana University South Bend AS in Radiography Program
1700 Mishawaka Avenue
South Bend, Indiana 46634



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

AS in Radiography Program Class Schedule Fall 2016

	Monday	Tuesday	Wednesday	Thursday	Friday
Juniors	R101: Procedures I 8:30-9:45 a.m. Room NS09 (Amy Gretencord) R102: Principles I 10:00-12:30 Room NS111 (Lori Balmer)	R181: Clinical Experience I 7:30-3:30	R101: Procedures I 8:30-9:45 a.m. Room NS09 (Amy Gretencord) R100: Orientation 10:00-12:00 Room NS111 (Kelsey Bogard)	R181: Clinical Experience I 7:30-3:30	R181: Clinical Experience I 7:30-3:30
Seniors	R283: Clinical Experience V 7:30-3:30	R205: Procedures III 10:00-12:30 Room NS069 R200: Pathology 1:00-3:00 Room NS09	R283: Clinical Experience I 7:30-3:30	R283: Clinical Experience V 7:30-11:30 R202: Principles II 1:00-3:30 Room NS09	R283: Clinical Experience V 7:30-3:30



VERA Z. DWYER COLLEGE OF HEALTH SCIENCES

INDIANA UNIVERSITY SOUTH BEND
Radiography

AS in Radiography Program Class Schedule Spring 2017

	Monday	Tuesday	Wednesday	Thursday	Friday
Juniors	R182 Clinical Experience 7:30-3:30	R201: Radiographic Procedures II 11:30-12:45 NS0041 (Amy Gretencord) R250: Physics 1:30-2:45 NS09 (Maryann Oake)	R182 Clinical Experience 7:30-3:30	R208: PACS 9:15-11:15 NS09 (Deeann Toth) R201: Radiographic Procedures II 11:30-12:45 NS0041 (Amy Gretencord) R250: Physics 1:30-2:45 NS09 (Maryann Oake)	R182 Clinical Experience 7:30-3:30
Seniors	R290 Clinical Experience 7:30-3:30	R290 Clinical Experience 7:30-3:30	R260: Radiobiology 10:00-12:30 NS09 (Kelsey Bogard) R222: Principles of Radiography III 1:15-3:45 NS039	R290 Clinical Experience 7:30-3:30	Clinical Experience 7:30-12:30 R207: Senior Seminary 2:00-4:00 DW1265 (Amy Gretencord)