Rapid City Hospital
Medical Radiography Program
Student Handbook
2017 - 2018
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Welcome to the Regional Health Rapid City Hospital Medical Radiography Program!

INTRODUCTION

This handbook is designed to facilitate your education and to assist you in understanding the roles and responsibilities of those involved in the Medical Radiography Program (MRP) at Regional Health Rapid City Hospital (RHRCH). This manual shall be reviewed when questions dealing with issues that relate to the MRP arise. A comprehensive understanding of this document will aid in the achievement of your educational goal and the MRP mission, goals, and objectives.

The Program Administration in its sole discretion reserves the right to change any part and/or this entire document at any time as becomes necessary.

Reasonable effort will be made to provide sufficient and timely notice to the student regarding changes to this document.

All content in this handbook is reviewed for accuracy on an annual basis and revised as necessary.

Last Reviewed: August 2017

The MRP website will be updated regarding policy changes on an annual basis or as needed.
REGIONAL HEALTH (RH) ORGANIZATION  Regional Health Rapid City Hospital is an entity of Regional Health (RH). Regional Health Rapid City Hospital is the sponsoring institution of the Medical Radiography Program. Therefore, MRP students will respect and recognize policies and procedures as designated by Regional Health, Rapid City Hospital, and the Medical Radiography Program.

ACCREDITATION

The RHRCH MRP is currently fully accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). A certificate of accreditation is posted in the MRP Office. For additional information regarding the MRP’s accreditation or the Standards for an Accredited Educational Program in Radiography, the JRCERT may be contacted at:

20 N. Wacker Dr., Suite 2850
Chicago, IL  60606-3182
Tel:  312-704-5300
Fax:  312-704-5304
Email: mail@jrcert.org
Website:  www.jrcert.org

CODE OF ETHICS

All MRP faculty and students are required to conduct themselves in a manner that complies with the professional Standards of Ethics as defined by the American Registry of Radiologic Technologists (ARRT). For additional information regarding ethical conduct the ARRT may be contacted at:

1255 Northland Drive
St. Paul, MN  55120-1155
Tel:  651-687-0048
Website:  www.arrt.org

A current copy of the Standards of Ethics will be provided to each student during the MRP Orientation.
Necessary contact information for reference personnel utilized by MRP students will be updated and provided as needed throughout the program.

Off-Campus Clinical Instructors are not shown in this organizational chart.
PROGRAM MISSION

The RHRCH MRP is designed to produce competent, entry-level medical radiographers who, upon subsequent ARRT (American Registry of Radiologic Technologists) certification, are eligible for employment and related educational programs. Therefore:

Regional Health Rapid City Hospital – Medical Radiography Program will provide and support excellence in diagnostic medical radiography education, developing skilled, compassionate, and caring professionals who will benefit and serve our communities.

PROGRAM GOALS & STUDENT LEARNING OUTCOMES

The MRP mission will be accomplished by meeting the following goals and student learning outcomes:

1. Students/graduates will be clinically competent diagnostic medical radiographers.
   a. Students/Graduates will be able to apply patient care, safety principles, and radiation protection principles.
   b. Students/Graduates will be able to apply knowledge of anatomy, positioning, and image evaluation.
2. Students/graduates will exhibit critical thinking skills that are used in problem-solving situations.
   a. Students/Graduates will demonstrate appropriate skills necessary for adapting to varying patient conditions.
   b. Students/Graduates will demonstrate the appropriate skills to manipulate technical factor selection.
3. Students/graduates will demonstrate appropriate skills in communication.
   a. Students/Graduates will utilize appropriate verbal and non-verbal communication skills.
   b. Students/Graduates will utilize appropriate written communication.
4. Students/graduates will model professional behavior.
   a. Students/Graduates will demonstrate accountability.
   b. Students/Graduates will demonstrate self-confidence in the clinical setting.

*Program effectiveness is measured in the following areas:
  1. Students passing the ARRT national certification exam for radiology on first attempt.
  2. Students pursuing employment being gainfully employed within 12 months of graduation.
  3. Number of students successfully completing the program within 24 months.
  4. Students overall satisfaction with their education
  5. Students overall satisfaction with student services offered by RHRCH.
  6. Graduate employers overall satisfaction with graduate’s performance.
MRP INTENTIONS

- Select applicants who demonstrate maturity, motivation, academic aptitude/ability, and the professional aspiration to successfully meet the challenges of the 24 month program MRP
- Provide a safe, secure learning environment in an accredited facility that meets all applicable local, state, and federal standards
- Provide an optimum quality education experience that exceeds minimum accreditation requirements of the Joint Review Committee on Education in Radiologic Technology (JRCERT)
- Provide didactic education based on sound teaching and learning principles, which allows students to master radiographic theory
- Provide simulation and lab experiences designed to bridge didactic and clinical education components of the curriculum
- Provide a clinical environment, rich with radiological patient imaging learning opportunities, using state-of-the-art equipment. These will allow for the mastery of radiographic/imaging procedures.
- Upon successful completion of the program, provide documentation of completion as becomes necessary for subsequent credentialing, employment, or continuing education purposes.

PROGRAM OBJECTIVES

To provide an education that ensures graduation of those who have acquired an entry-level radiographer’s skills and competency, and who are able to:

- Apply knowledge of anatomy, physiology, positioning and radiographic techniques to accurately demonstrate anatomical structures in an image
- Select exposure factors to achieve optimum radiographic techniques with minimum radiation exposure to the patient
- Evaluate radiographic images for appropriate positioning and image quality
- Apply the principles of radiation protection for the patient, self, and others
- Provide care and comfort for patients of all ages
- Recognize emergency patient conditions and initiate life-saving procedures
- Evaluate the performance of radiographic systems, identify the safe limits of equipment operation, and report malfunctions to the proper authority
- Exercise independent judgment, critical thinking, problem-solving and discretion in the performance of medical imaging procedures
- Participate in continuous quality improvement, quality assurance, and quality control programs
- Communicate effectively in the medical environment and function as a team member of a medical imaging department
- Utilize strong customer service skills that will aid in improvement and maintenance of high-level patient satisfaction
- Participation in professional activities and continuing education, demonstrate an understanding of advanced imaging modalities, and use insights gained in various courses to promote continued professional and personal growth leading to life-long learning.
STUDENT RIGHTS & RESPONSIBILITIES

Students have the right to:

- Institutional policies and procedures safeguarding the freedom to learn. Students are responsible for knowledge of and application of the policies and procedures.
- Admission without discrimination on the basis of race, age, creed, religion, sex, color, or disability. Students have the responsibility to accept others without discrimination on the same basis.
- Take reasonable exception to the data or view offered in any course of study and to reserve judgment. Students are responsible for knowing material offered in all courses of study.
- Orderly procedures of academic evaluation without prejudice. Students are responsible for maintaining standards of academic performance for all courses.
- Confidentiality from all employees of the RHRCH MRP. Students are responsible for respective confidentiality.
- A carefully considered policy regarding the information, which is part of the student’s permanent educational and financial record and the conditions of records disclosure. Students are responsible for maintaining confidentiality of their records.
- Discuss appropriate issues and to express opinions. Students are responsible for maintaining positive public relations for RHRCH.
- Printed institution clarification of standards of behavior, which are considered essential in appropriate situations. Students are responsible to know these policies and may be disciplined for violations of these policies.
- Adequate safety precautions within the hospital and its facilities. Students are responsible for practicing safety measures within the hospital.
- Participate with faculty in periodic review of various elements of the program. Students are responsible for seeking clarification or assistance from faculty.
PROGRAM POLICIES AND PROCEDURES

POLICY AND PROCEDURE AGREEMENT & COMPLIANCE

Students shall read the Regional Health Rapid City Hospital Medical Radiography Program Student Policy and Procedure Handbook (referred to as Student Handbook from this point forward) and they shall have the opportunity to ask questions.

Students are required to comply with all of the policies, rules, and regulations of the Radiography Program, the Medical Imaging Services Department, Regional Health Rapid City Hospital, and the Regional Health Standards of Performance.

Upon completion of the Student Handbook review, the student will read and sign the “Handbook Acceptance and Agreement Form.” This form will become part of the student’s file kept in the MRP Office.

STUDENT CODE OF CONDUCT

Students are members of the RHRC team, and as such represent the facility through their interactions with patients, visitors, and the community. Every effort shall be made by students to exhibit a positive, professional image. Students should refrain from wearing their uniform outside the hospital.

Students shall comply with the RHRC Confidentiality policy. Patient data may be communicated to other health-service providers who have a direct, medically related, “Need to know.” Students shall not participate in any activity that compromises the confidentiality of patients’ data.

The MRP subscribes to and promotes the ARRT Code of Ethics. Students shall comply with this code at all times.
ABSENCE LEAVE POLICY

There are various types of absence leave such as: holiday, personal absence leave, compassionate, major/catastrophic, and vacation. Students are responsible for ALL academic assignments missed during any type of leave, and missed clinical leave shall be made up according to the type of leave. The types of leave are outlined below.

Exceeding the maximum leave time WILL result in immediate termination from the MRP. Consideration of re-admittance to the MRP may be made.

Personal Absence Leave (PAL)

Will be granted in two separate blocks of time; each student will start each MRP curriculum year with a bank of sixty-four hours of PAL time. This means that each student will have sixty-four hours to utilize as needed for sick time, personal time, dependent or child care, interviews, college graduation, etc… for each year in the program. A maximum of sixteen hours can be carried over from the first-year bank of time to the second-year bank of time, and use of scheduled PAL will NOT be allowed the last week of the MRP.

1. Scheduled PAL - Requests for scheduled PAL shall be submitted at least two hours in advance, and are subject to approval/denial at the sole discretion of the MRP faculty. Requests must be made during normal operating MRP office hours.

2. Illness - The student is personally responsible for reporting his/her illness/absence to the supervising technologist at their scheduled clinical site and MRP faculty member at least one hour prior to the scheduled shift. The student must call in EACH day of their illness absence (at least one hour prior to his/her scheduled shift, unless other arrangements have been made with faculty). Failure to properly report medical absence leave (illness leave) will result in the application of progressive discipline.

*When a student calls in sick or leaves a shift early due to illness, they are not allowed to come in later or return to work that day. Exception is a physician’s note allowing the student to return to duty.

3. PAL days and hours shall be documented in the Spectrum Time System, as well as the electronic time tracking files. Students will receive a balance summary of their time quarterly and upon request by the student.

Extended Sick Leave

There is a bank of twenty hours. This bank can be accessed if a student misses a minimum of three consecutive PAL days; then the student can utilize time from this bank if additional sick time is needed.

1. A student must bring a doctor’s note to return to school after three consecutive scheduled days have been missed.

2. All time from this bank must be made-up.
**Major/Catastrophic Leave**

This leave is for self, dependent child, spouse; pregnancy/maternity/paternity, major surgery, disease, condition or treatment requiring forty or more consecutive hours of medical leave. This type of leave may be used only once during the two years of the MRP, regardless of the number of hours used. This is not a “bank” of time to be used for more than one “withdrawal”; this leave will allow the student to take up to, but not more than 240 hours of clinical leave. Also the student can miss up to, but not more than two consecutive weeks of academic instruction.

1. All leave time missed utilizing this type of leave must be made up.
2. All academic instruction assignments must be made up.

**Compassionate Leave**

This is leave time granted in the event of a death in the student's immediate family. Immediate family is defined to include the student's spouse, parent, child, grandparent, parent-in-law, brother, sister, guardian, or legal dependent. The student is responsible for notifying MRP faculty.

1. Up to four days will be granted for bereavement leave; the student will not be required to use PAL time for these days.
2. Missed assignments must be made up.
3. An additional three days may be used upon request and these hours will be made up.

**Vacation Absence Leave**

This is leave time during scheduled didactic breaks. Faculty will be responsible for coordinating the schedule during these instructional break periods. Students will be responsible for emailing their schedule requests by the designated deadline to the appointed faculty member. (This will provide the student with documentation the faculty was notified of the student’s vacation schedule preferences.)

1. The faculty schedules vacation absence leave in advance.
2. Once the schedule has been officially posted and distributed to the students it is final.
3. Any further changes to the schedule requested by students will require the use of schedule switches and approval by the MRP Director. The student is also responsible for completing, signing, and turning in a Personal Absence Leave (PAL) Request Form for additional time above and beyond the vacation time scheduled by faculty. The request is not considered approved until the form has been initialed by a faculty member or signed by the MRP Director.
**Holiday Absence Leave**

This leave is granted for up to six holidays each year and is included in the total allotted absence leave time. The scheduled holidays are New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas. These holidays correlate with holidays recognized by RHRCH.

*Any additional time off is solely up to the discretion of the MRP Director

**SUMMARY OF ABSENCE LEAVE TIME**

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<th>TYPE OF LEAVE</th>
<th>MAXIMUM ALLOWABLE TIME - FIRST YEAR</th>
<th>MAXIMUM ALLOWABLE TIME - SECOND YEAR</th>
<th>MAXIMUM ALLOWABLE TIME – TWO YEARS COMBINED</th>
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<tr>
<td>Personal Absence Leave</td>
<td>64 hours</td>
<td>80 hours</td>
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<tr>
<td>Extended Sick Leave</td>
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<td>***</td>
<td>20 hours</td>
</tr>
<tr>
<td>Major/Catastrophic</td>
<td>***</td>
<td>***</td>
<td>6 weeks clinical 2 weeks academic</td>
</tr>
<tr>
<td>Holiday Absence Leave</td>
<td>&lt;=6 days</td>
<td>&lt;=6 days</td>
<td>***</td>
</tr>
<tr>
<td>Vacation Absence Leave</td>
<td>A minimum of 80 hours</td>
<td>A minimum of 80 hours</td>
<td>***</td>
</tr>
<tr>
<td>Compassionate Leave</td>
<td>***</td>
<td>***</td>
<td>No stated maximum number of occasions</td>
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**STUDENTS MUST COMPLETE A MINIMUM OF 3276 HOURS FOR THE TWO YEARS OF THE PROGRAM IN ORDER TO MEET GRADUATION REQUIREMENTS—NO EXCEPTIONS.**
**Make-up Time**

When a student is required to make-up hours they will coordinate the completion of these hours with program faculty.

- When completing make-up time the student must contact the Program Director by email, stating the time frame that will be make-up time.
  - Completion of make-up time is not permitted during holidays observed by Regional Health.
  - If the make-up time results in the student completing more than 10 hours per shift OR results in the student completing more than 40 hours in a scheduled week, the student must state in the email notification that they are voluntarily exceeding these limits.
  - If the make-up time results in the student completing more than 5.5 consecutive hours of training, the student must take a 30 minute meal break.
  - When students arrive to make-up time at a clinical site they are responsible for doing the following:
    - Clock in/out utilizing the Spectrum Time Clock System.
    - Notify the technologist in charge they are making up hours.
    - If applicable at clinical site, put name on scheduling board to notify all technologists working that the student is completing make-up time and the hours they will be present.
    - Ask the technologist in charge for a room assignment.
    - Ensure that staff is aware of the student’s location; if the student is in an exam room practicing they should periodically check with staff to determine if their help is needed.

**Non-Scheduled Voluntary Practice Time:**

If students voluntarily elect to come in for practice with radiography equipment when they are not scheduled to be within the department the following rules apply:

- Students must notify clinical staff they are in the department practicing.
- Students should consult clinical staff to determine which rooms may be used for practicing at the time.
- The MRP does not have an energized lab; therefore it is essential that clinical staff is aware when students are in examination rooms practicing and students know how to contact clinical staff for assistance in emergency situations.
- During these practice sessions all radiation safety policies and procedures must be followed. Students are NOT allowed to expose any person during this practice time. Phantoms and lab objects may be exposed during these practice sessions following notification of clinical staff.
- Students may NOT clock in during these practice sessions to perform an exam on a patient for completion of a Solo or Competency exam.
I understand that personal leave requests are subject to administrative and instructor approval, and are considered on a first come/first serve basis.

I request _______ hours of unscheduled vacation leave. *(Must be in quarter-hour increments)*

Date and time of requested personal absence leave:

_________________________________________________________________________

I understand that I must receive approval and a signature from the instructor for each course I will miss before the request will be considered for final approval.

As stated in the handbook all tests must be completed before the scheduled absence and all homework/assignments must be turned in before the absence begins.

I further acknowledge, accept and understand that I am responsible for all missed assignments, and that any make-up assignments, tests, etc., may be scheduled for completion on my OWN time.

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<th>COURSE</th>
<th>ASSIGNMENT</th>
<th>INSTRUCTOR</th>
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PUNCTUALITY AND ATTENDANCE POLICY

- Students are expected to report for all clinical and classroom assignments in a timely manner. **This requires the student to be clocked in, in their uniform, and at their assigned rotation prior to the start of their shift.** Students will clock in and out, utilizing the Spectrum Time Clock System on RH or Rapid City Medical Center computers.

- Students should allow adequate travel time to meet punctuality requirements at clinical sites. The furthest off campus clinical site is approximately 40 miles from Regional Health Rapid City Hospital.

- Students may be scheduled as early as 6:30 am and as late as 11:30 pm.

- If a student punches in prior to reporting to the assigned clinical rotation, progressive discipline will be implemented.

**Start time**

- The student may clock in up to 10 minutes before their scheduled start time.

- Clocking in more than 10 minutes in advance requires the approval of a program official and the student sending an email to the Program Director of why they clocked in prior to the allotted time.

- If the student clocks in after their scheduled start time, it will be considered an infraction of the attendance policy and result in the implementation of the Progressive Discipline Policy. There is no grace period after the start of the scheduled shift.

**Stop time**

- The student may clock out 2 minutes in advance of the scheduled ending of their shift without being in violation of the attendance policies. **Leaving more than 2 minutes in advance requires authorization from a faculty member.**

- The student may clock out up to 10 minutes after the scheduled ending of their shift without being in violation of the attendance policy. **(If the student is completing an exam and unable to leave at the scheduled time the Program Director must be notified by email to provide documentation of why the student did not leave by their scheduled time.)**
• Failure to clock in/out and/or clocking in/out outside of the allowed time frames will be tracked. Every three infractions in or out, will result in the implementation of the Progressive Discipline Policy.

Example: A combination of 1 missed clocking in, 1 late clocking in and one leaving a scheduled shift early will result in the First Offense of the Progressive Discipline Policy; 4 – 6 combined infractions will result in the Second Offense of the Progressive Discipline Policy.

• Classroom: Students shall report on time or earlier than the appointed class meeting time.

• Classroom and clinical assignments and activities shall not exceed a maximum of forty hours per week. The clinical instructors organize and closely monitor the schedules so as to maintain compliance with this policy. The students are expected to comply with the schedules.

• If students voluntarily come into a clinical setting to practice during non-scheduled hours they must notify staff working of their presence; but they should not clock in/out utilizing the Spectrum Time Clock. (If the student is making up time missed previously, please refer to Make-up Time Policy.)

• If the student is making up time missed previously, please refer to Make-up Time Policy.

REST PERIODS AND MEAL BREAKS

Students are scheduled for a 30 minute meal break and two 15 minutes rest periods each day. Students are required to take their assigned meal break when scheduled for a shift of 5.5 hours or greater and may not request to skip breaks of any kind in order to leave their scheduled shift early. Breaks cannot be added to student’s lunch to create a longer lunch break. Students must punch in and out when leaving the facility for lunch breaks. If due to circumstances beyond the staff’s control, a student does not get their meal break, the faculty will be sure the student’s time is accurately adjusted. Staff will make every effort possible to assure the students receive two 15-minute rest periods per day; however these breaks are not compensated for in the event they do not occur.

*If a student is scheduled for a shift of 5.5 hours or less, they will not be scheduled for a meal break.
DRESS CODE POLICY

Students are required to wear the School uniform while in attendance and/or on duty in a clinical facility, classroom, or required School function as deemed appropriate by the Director - MRP. The students purchase uniforms at their own expense.

All Students:

- **MRP uniform**: Style must allow free range of motion without skin being exposed between the shirt and pants. Must be kept neat, clean, pressed, & in good repair. Faded or stained scrubs should be replaced or treated to maintain a professional image.
  - Black scrub pants
    - Hemmed short enough to avoid dragging on the floor at all times regardless of shoes being worn.
  - Black or white solid scrub tops
    - Solid white or black t-shirt or turtleneck may be worn under the scrub top for warmth.
  - Shoes
    - 95% white or black nursing/athletic style with a closed toe, preferably leather
    - Sole should be non-marking
    - Shoe laces: black or white
    - Duty shoes do not leave the hospital grounds. They remain in the student’s locker when not worn on duty.
    - Socks, nylons, or tights are required: white or black preferred
  - Lab coats
    - Students are not required to wear lab coats
    - Lab coat specifications for students who choose to wear one:
      - White or black in color
      - No longer than knee length or shorter than mid-thigh
      - May be long sleeve, short sleeve, or of vest type style

- **Hospital scrubs**: Can only be worn when specifically authorized
  - Hospital scrubs must never leave the hospital
  - Starting in quarter 2, only students on the following shifts and/or rotations are allowed to wear hospital scrubs: evening shift, surgery rotation, or float rotation.
  - Students in all other rotations are to wear the MRP uniform. If a student needs to go to surgery, he or she may change into hospital provided scrubs but must immediately change back into the MRP uniform when the case is completed.
  - While in the surgical suite a hospital provided cover coat must be worn at all times. For additional warmth a short sleeve top may be worn under the hospital scrub top.
  - The MRP faculty recommends that students keep a spare school uniform or change of clothes at the hospital. Students will be allowed to change into hospital provided scrubs should they become contaminated, but the scrubs may not be worn home. If the student needs to go home and change, PAL time must be used.
• ID tags and dosimetry badges must be worn at all times

• No visible tattoos are permitted

• Fingernails
  o Must be kept clean and short
  o False nails/nail tips and/or gel nails are not allowed
  o **Only clear nail polish is permitted** and must be maintained to avoid chipping

• Excellent personal/oral hygiene is an absolute requirement
  o Perfume/scented after-shave/scented body lotions are strictly prohibited

• Bubble gum blowing and gum snapping will not be tolerated and is considered gross misconduct in the clinical setting.

• Jewelry
  o Shall be kept to a minimum: no bracelets, loose watches, or etc. are permitted
  o Rings
    ▪ Plain bands only – no prongs
  o Body piercings
    ▪ Visible body piercings jewelry, with the exception of the ear, is not acceptable (including the tongue and nose).
    ▪ Unacceptable body piercing must be covered up so that the piercing is not visible.
    ▪ Earrings
      • Limited to no more than two pair and worn in the ear lobe only
      • Earrings no larger than ½” in length or diameter are acceptable
      • No gauges are allowed

• Hair
  o Hair must not impede student vision.
  o If a student’s hair will potentially be in direct patient contact, it must be pulled back.
  o Extreme or exaggerated hair styles are not allowed
  o Men will keep facial hair neat and trimmed

• Hair ornaments/color, jewelry, style of apparel, make-up, and etc. which may be a health or safety hazard for self or others and as deemed inappropriate by the program faculty is **strictly** prohibited.

**Violation of the dress code will result in progressive disciplinary action.**
PROGRESSIVE DISCIPLINE POLICY

Students are subject to the following procedures for due process of disciplinary actions. When a disciplinary or commendatory action is taken, a faculty member completes a STUDENT CONFERENCE FORM; specific details of the action are documented, and the form becomes a part of the student’s permanent record. Some policy violations may require immediate higher-level disciplinary action: immediate suspension or immediate dismissal. These violations are treated in a different manner as described below. A student who has had a disciplinary action brought against him/her, who chooses to file a grievance, must do so in accordance with the DUE PROCESS policy.

Progressive Discipline Offense Levels

- **FIRST OFFENSE**
  The student will be notified as to the occurrence and nature of the violation. This is a **FIRST WARNING**. No penalty is imposed at this level. The student will be notified of the consequences for a second offense.

- **SECOND OFFENSE**
  The student will be notified as to the 2nd occurrence of the violation. This is a **SECOND WARNING**. A 16-hour deduction from clinical leave time or a 3 percentage-point grade deduction Clinical Practicum will be applied. This could result in a failing grade for Clinical Practicum, in which case at the close of the quarter the student will be terminated from the MRP. The student will be notified of the consequences of a third offense.

- **THIRD OFFENSE**
  The student will be notified as to the 3rd occurrence of the violation. This will result in a 5 percentage-point Clinical Practicum grade deduction. This could result in a failing grade for Clinical Practicum, in which case at the close of the quarter the student will be terminated from the MRP.

- **FOURTH OFFENSE**
  Immediate termination
IMMEDIATE DISCIPLINE

The following conduct/behavior, policy breach, etc. may result in application of the Progressive Discipline section “Third Offense”, including the full penalty as described previously.

- Verbal abuse of a student, employee, or other
- Performing unauthorized imaging procedures
- Failure to report an incident (self-related)
- Fraudulent leave of absence (failure to report or call in for duty)
- Failure to report a variance (patient-related)
- Verbal abuse of a patient
- Harassment of another person
- Falsification of RHRCH/MRP documents, papers, examinations, records
- Breach of the RHRCH Confidentiality Policy
- Falsification of attendance
- Misuse of social media
- Violation of RHRCH infection control practices
- Not upholding the RH Standards of Performance
- Disrespectful Behavior

IMMEDIATE TERMINATION

The following conduct/behavior, policy breach, etc. may result in IMMEDIATE TERMINATION from the Program.

- Academic dishonesty; cheating, plagiarism
- Possession of weaponry on RHRCH/RH premises
- Reporting for class/clinical under the influence of alcohol or illegal drugs
- Failing a class, depending on the situation
- Intentional compromise of the safety/life/well-being of patients, self, others
- Theft of RHRCH/RH property or others’ personal property
- Exceeding the limits of the Leave Policy
- Assault, battery, or similar crime against another person
- Conviction of a felony
- Refusal of alcohol or drug test/screen
- A threat of violence against a patient, student, employee, instructor, physician or other person, while on duty/assignment
- A failed repeat of pre-clinical competency.
- Involvement in more than one progressive disciplinary process during the two years of the Program
- Refusals of any clinical facility to have a student return for future rotations due to unacceptable clinical performance.
DUE PROCESS POLICY

Medical Radiography Program (MRP) students who wish to grieve any action by the MRP, including but not limited to termination, shall be allowed to do so pursuant to the following due process procedure:

1. To initiate the due process procedure, the student must submit a letter describing the grievance to the Director - MRP. This letter of grievance shall be submitted within three (3) regular school days (M-F) from the day of the incident prompting the grievance.

2. Upon receipt of a grievance letter, the Director - MRP shall promptly notify the MRP Advisory Committee of the need for a due process hearing. The Advisory Committee shall designate seven (7) Advisory Committee members to act as the due process hearing panel. Any Advisory Committee member who was involved in the action being grieved should not be a member of the panel. Arrangements will be made for a representative from the RH Human Resources Department to serve as moderator for the Committee proceedings. The hearing panel members shall coordinate with the student, the Director – MRP, and the moderator to establish a hearing date within seven (7) days of the Director – MRP’s receipt of the grievance letter, if reasonably possible.

At the hearing, the student shall present the details of his/her grievance to the hearing panel. The student will have the opportunity to provide the hearing panel with any relevant documents and to select and invite two (2) other representatives to speak on the student’s behalf during the hearing. The student’s presentation shall not exceed one (1) hour. After the student’s presentation, the Director – MRP or other appropriate MRP representative shall defend the MRP action being grieved. The MRP representative shall have the opportunity to provide the hearing panel with any further relevant documents and to select and invite two (2) representatives to speak on the MRP’s behalf. The MRP’s presentation shall not exceed one (1) hour. Upon the conclusion of the MRP’s presentation, the student shall be allowed an additional 15 minutes for rebuttal. Upon conclusion of the presentation, the student, the MRP representative, and other student or MRP representatives will be dismissed from the hearing panel room. The hearing panel shall then render a decision to either uphold or reverse the action being grieved. A majority vote of the hearing panel’s members (i.e., a vote of at least 4-3) shall rule. The consideration/voting proceedings of the hearing panel will be limited to two (2) hours. The moderator shall notify the student and the Director - MRP of the hearing panel decision within one (1) school day.

3. If the hearing panel upholds the action of the MRP, the student may, within five (5) school days of receipt of that decision, appeal the hearing panel decision, in the form of a written letter, to the RHRC President. The President shall have the right to request any further information needed from the student or the MRP. The President shall render his/her final decision, in writing, within ten (10) school days of receipt of the student’s appeal and shall notify the student and the Director – MRP of the decision. Notification of the final decision to the student must be postmarked within (1) day of the final decision.
4. If the MRP’s decision is reversed, either by the hearing panel or the RHRCH President, the student, having followed the procedure for due process, may be re-instated in the program with the same academic and clinical status attained prior to the grievance/appeal proceedings. The student shall make up all missed course assignments and requirements, as scheduled at the sole discretion of the Program faculty.

STUDENT ADVOCACY

A student may at any time contact his/her choice of one or more members of the MRP Advisory Committee to serve as the student’s advocate.

The primary function of the Advocate/s is to meet with the student to hear the student’s concerns regarding disciplinary action, academic performance issues, and clinical performance issues, all of which may jeopardize the student’s status with the Program.

The Advocate role was established so that upon implementation of progressive disciplinary measures, a student would have a voice of a person or group with a vested interest in the Program and its students. The intent is that a student would receive guidance from the Advocate/s and thereby improve conduct/performance consistent with established Program minimum expectations. With an Advocate person or group guiding a student, perhaps it would be possible for a student to avoid further disciplinary action, and ultimately complete the MRP.

It is a student’s responsibility to contact the selected Advisory Committee member/s. Committee members are ready to assist students at any time.

It is imperative that students follow the Program communication chain of command for filing complaints, expressing concerns, etc. prior to contacting Committee Members. The first responsibility of the Advocate/s is to determine that a student has pursued resolution through regular, established MRP procedure.

The Advocate/s may choose to discuss issues with the Faculty.

Outcomes of Advocate/s’ activity shall be reported at a subsequent Advisory Committee Meeting.
Committee members’ names and their contact information are listed below.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Area/Facility</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greg Moir</td>
<td>Clinical Instructor</td>
<td>Regional Medical Clinic</td>
<td>55776</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Western Hills Professional Building</td>
<td></td>
</tr>
<tr>
<td>Jamie Madden</td>
<td>Senior Director</td>
<td>MIS</td>
<td>Ext. 58431</td>
</tr>
<tr>
<td>Dr. Robert Durst</td>
<td>Radiologist</td>
<td>Dakota Radiology</td>
<td>Ext. 58439</td>
</tr>
<tr>
<td>Nan Bradeen</td>
<td>Clinical Instructor</td>
<td>MRP</td>
<td>Ext. 58433</td>
</tr>
<tr>
<td>Rachel Jankord</td>
<td>Clinical/Didactic Instructor</td>
<td>MRP</td>
<td>Ext. 57147</td>
</tr>
<tr>
<td>Jenn Lewellen</td>
<td>Clinical Instructor</td>
<td>Rapid City Medical Center</td>
<td>388-5560</td>
</tr>
<tr>
<td>Tracy Iversen</td>
<td>MRP Supervisor (Program Director)</td>
<td>MIS</td>
<td>Ext. 58615</td>
</tr>
<tr>
<td>Jay Dahl</td>
<td>Supervisor</td>
<td>General Diagnostic</td>
<td>Ext. 58429</td>
</tr>
<tr>
<td>Alyssa Gouldin</td>
<td>Clinical Instructor</td>
<td>Regional Health Sturgis Hospital</td>
<td>720-2514</td>
</tr>
<tr>
<td>Robert Schroeder</td>
<td>Clinical Instructor</td>
<td>Regional Medical Clinic- Aspen Center</td>
<td>Ext. 53373</td>
</tr>
<tr>
<td>Dr. Allison Gilmore</td>
<td>Consumer Advocate</td>
<td>SDSM&amp;T</td>
<td>394-2482</td>
</tr>
<tr>
<td>Brooke Stiehl</td>
<td>MIS Quality Consultant</td>
<td>MRP</td>
<td>Ext. 57144</td>
</tr>
<tr>
<td>Cory Holmes</td>
<td>MIS Manager</td>
<td>Rapid City Market Clinics, Urgent Cares &amp; RHRCH</td>
<td>58297</td>
</tr>
</tbody>
</table>

Individuals, who accept an invitation from the Director of the MRP for the Advisory Committee, may be excused as a Committee member at any time, at the sole discretion of the Director of the MRP.

Individuals, who serve on the Advisory Committee, may request to be removed from the committee by notifying the Program Director.
JRCERT COMPLAINT RESOLUTION

Upon notification of a complaint to the Joint Review Committee on Education in Radiologic Technology (JRCERT) about the Regional Health Rapid City Hospital (RHRCH) Medical Radiography Program (MRP), the Director - MRP (PD), or in some cases an RHRCH administrative official, will respond to the JRCERT within a timely manner. Appropriate response will include a minimum of four of the following elements:

- Notify the Advisory Committee of said complaint.
- Acknowledge in writing the JRCERT of the MRP response to the complaint and provide an action plan within 30 days of receipt of the complaint. This is required in all cases.
- Immediately call for a meeting of the Advisory Committee to review/resolve the complaint.
- Investigate specific issues related to the complaint. For example, if a student alleged that he was performing unauthorized exams as directed by a staff technologist, the PD may question the student, technologist, or others about the alleged situation.
- Meet with the student to discuss the complaint if the student has been identified and agrees to the meeting.
- Adjust student, faculty, and staff program-related responsibilities, functions, and duties as necessary until the issue is resolved.
- Provide to the JRCERT a report of final outcome of resolution of the complaint. This is required in all cases.
- Maintain a permanent written/electronic record of all complaints and subsequent proceedings. This is required in all cases.

JRCERT may be contacted at: 20 N. Wacker Dr., Suite 2850
Chicago, IL  60606-3182
Tel:  312-704-5300
Fax:  312-704-5304
Email: mail@jrcert.org
Website:  www.jrcert.org
TUITION & FEES PAYMENT/REFUND POLICY

Tuition

- The current tuition rate is $1500 per year.
- A non-refundable tuition deposit ($250) must accompany a letter of acceptance. This fee is applied to (deducted from) the first year’s tuition.
- First Year Students: Annual tuition is due IN FULL on or before the second day of the academic year for first year students.
- Second Year Students: Annual tuition is due on or before the second day of the academic year. Second year students will be given the option of paying half of their tuition on or before the second day of the academic year with the remaining balance being due on the second day back to scheduled didactic classes in January of the second year.
- A late payment fee is $10.00 for the first day plus $1.00 per day for each additional day to a maximum of $35.00. See Policy MIS-7045-0103 for additional information.

Tuition Refunds

A tuition refund may be made (based on eligibility) in accordance with the following policy:
1. The MRP shall first clear the student who withdraws from or is dismissed from the MRP of obligation in order to be eligible for a tuition refund.
2. A refund for the FIRST year tuition payment may be made, LESS the non-refundable tuition deposit.*
3. No refund shall be made for tuition paid for a previous payment period.

<table>
<thead>
<tr>
<th>For Enrollment Of</th>
<th>Refund Amount (if applicable)*</th>
</tr>
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<tbody>
<tr>
<td>Two weeks or less</td>
<td>100%</td>
</tr>
<tr>
<td>Up to three weeks</td>
<td>50%</td>
</tr>
<tr>
<td>Onset fourth week and beyond</td>
<td>No refund applicable</td>
</tr>
</tbody>
</table>
Books/Software/Professional Organization Fees

Books cost approximately $1700 for the TWO years of the program. Many of the books used by the program include software CD’s or access codes for online resources that may be used by the students. Students may also be required to purchase software programs for courses such as Registry Review. Payment in FULL for books is due upon notification of the balance due. Students are required to purchase ALL of their books through RHRCH – no “used” texts are permitted.

Students will be required to pay membership fees for two professional societies annually. These society memberships will provide students with access to additional resources, scholarship opportunities, and professional development opportunities. The membership fees are built into the books costs for each academic year.

**Payment/purchase of books is FINAL; NO refund will be made by RHRCH under any circumstances.**
## FIRST YEAR

Program and facility orientation will be ongoing from June through September

<table>
<thead>
<tr>
<th>Quarter I (Summer)</th>
<th>Quarter II (Fall)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practicum I</td>
<td>Clinical Practicum II</td>
</tr>
<tr>
<td>Radiographic Procedures/Lab I</td>
<td>Radiographic Procedures/Lab II</td>
</tr>
<tr>
<td>Radiographic Science I</td>
<td>Radiographic Science II</td>
</tr>
<tr>
<td>Patient Care</td>
<td>Medical Terminology</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter III (Winter)</th>
<th>Quarter IV (Spring)</th>
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</thead>
<tbody>
<tr>
<td>Clinical Practicum III</td>
<td>Clinical Practicum IV</td>
</tr>
<tr>
<td>Radiographic Procedures/Lab III</td>
<td>Radiographic Procedures/Lab IV</td>
</tr>
<tr>
<td>Radiographic Science III</td>
<td>Radiographic Science IV</td>
</tr>
<tr>
<td>Special Imaging</td>
<td>Sectional Anatomy</td>
</tr>
</tbody>
</table>

## SECOND YEAR

<table>
<thead>
<tr>
<th>Quarter V (Summer)</th>
<th>Quarter VI (Fall)</th>
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<tbody>
<tr>
<td>Clinical Practicum V</td>
<td>Clinical Practicum VI</td>
</tr>
<tr>
<td>Radiographic Procedures V</td>
<td>Radiographic Pathology I</td>
</tr>
<tr>
<td>Rad Science V</td>
<td>Rad Science VI</td>
</tr>
<tr>
<td>Independent Study</td>
<td>Independent Study</td>
</tr>
<tr>
<td></td>
<td>Radiation Protection I</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Quarter VII (Winter)</th>
<th>Quarter VIII (Spring)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practicum VII</td>
<td>Clinical Practicum VIII</td>
</tr>
<tr>
<td>Radiographic Pathology II</td>
<td>Medical Ethics and Law</td>
</tr>
<tr>
<td>Radiation Protection II</td>
<td>Radiographic Pathology III</td>
</tr>
<tr>
<td>Independent Study</td>
<td>Radiographic Workshop</td>
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</tbody>
</table>

The chart below represents a sample course continuum. Course schedules and continuums are subject to changes as necessary to meet curriculum revisions.
GRADE SCALE POLICY

Students are required to maintain the specified level of didactic and clinical education achievement throughout the duration of the program. Therefore it is the policy of the RHRCH MRP to adopt a grading scale consistent with the high performance standards expected of graduates of the program. The minimum passing grade for all coursework is 80%. Final course grades are calculated at the close of each academic quarter, and/or upon completion of a course. Should a student's interim grade drop below 80%, following the posting of a minimum of 2 tests, the student will be notified during a conference of their academic standing. Further clarification for specific courses follows this policy in an addendum.

<table>
<thead>
<tr>
<th>GRADE SCALE</th>
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<tbody>
<tr>
<td>A = 95-100</td>
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<tr>
<td>B = 89-94</td>
</tr>
<tr>
<td>C = 80-88</td>
</tr>
<tr>
<td>F = 0-79</td>
</tr>
<tr>
<td>WP = Withdrew Passing</td>
</tr>
<tr>
<td>WF = Withdrew Failing</td>
</tr>
<tr>
<td>I = In Progress/Incomplete</td>
</tr>
<tr>
<td>D = Dismissed</td>
</tr>
</tbody>
</table>

The minimum acceptable level for all coursework (didactic and clinical) is 80%.

GPA Calculations:

Determination of the cumulative GPA is made in accordance with the following:

- A = 4 points
- B = 3 points
- C = 2 points

Individual courses vary in credit units as relates to determination of the final GPA.

*Method of determining credit-hour value for courses may be obtained by contacting the MRP Director.*
Grading Policy – Clarification of specific course grading to be used in conjunction with course syllabi specifications.

- **Radiographic Procedure Courses** - are graded as described in the course syllabus. Each test must be passed in order for the student to continue in the course. If the student fails a test, a repeat test is administered. If the student passes the repeat test, the student may continue with the course. The repeat grade is NOT averaged into the student’s grade. Rather, the passing score of ≥ 80% is noted in the student's record as a comment.

  o If the student fails the first repeated test, there still exists an opportunity for remediation. One additional test will be given, provided the student’s course grade is 80% or better with the inclusion of the first failed test grade.

  o If the final attempt is not completed with a score of 80% or better, the student will be immediately dismissed from the program for academic failure.

- **Non-Radiographic Procedures Didactic Courses** - are graded as described in a course syllabus. Upon course conclusion, a student who fails the course will have an opportunity to repeat each failed grade element. If the average score of these repeated elements is ≥ 80% the student will receive a passing score of 80% for the course. All graded elements must be made up before the next quarter begins.

  o Failure to meet the minimum 80% will result in termination from the program for academic failure.

  o If a student does not wish to retake the failed graded elements, they may elect to withdraw from the program or be terminated from the program for academic failure.

  o A student is allowed to fail only 1 course for the duration of the program. A failure of a second course will result in immediate termination from the program for academic failure.

  o **Course exceptions: Special Imaging, Independent Study, and Rad Workshop**

    - Due to the complex, integrated nature of these courses, failure to meet the minimum 80% will result in immediate termination from the MRP for academic failure. There are no opportunities provided to repeat the course.

- **Clinical Practicum courses** are graded as described in a course syllabus. Each quarter must be passed with a score of 80% or better in order for the student to continue in the course. If the course is not completed with a score of 80% or better, the student will be immediately dismissed from the program for clinical failure.
ACADEMIC INTEGRITY POLICY

Cheating on exams or assignments and any degree of plagiarism will not be tolerated and will result in progressive discipline. “Plagiarism is the unauthorized use or close imitation of the language or thoughts of another author and representation of them as one’s own original work.” (Dictionary.com Unabridged (v 1.1)) Plagiarism includes but is not limited to: turning in someone else’s work and claiming it as your own or copying (or downloading) printed or online materials without proper documentation.

ACADEMIC GUIDANCE AND STUDENT COUNSELING

The student who desires academic guidance should speak with the Director - MRP. Counseling Service from the Employee Assistance Program at Regional Health is available to the student at no charge. Students are solely responsible for the cost of outside referrals.

WITHDRAWAL AND RE-ENTRY POLICY

A student may voluntarily withdraw from the program at any time. The student must submit a statement of withdrawal to the Director - MRP in order for out-processing procedures to be initiated. Withdrawal from the MRP results in the student’s forfeiture of his/her right to participation in an Appeals/Due Process procedure.

Upon receipt of a withdrawal statement, the Director - MRP shall have a minimum of two (2) weeks to complete out-processing for the student. Out-processing shall NOT be completed for a student who fails to submit a written withdrawal statement.

A student in good standing* who voluntarily withdraws from the Program and who then wishes to return to the Program must make official application by letter, for re-entry into the Program within 10 business days of the withdrawal date.

If the JRCERT Standards will not be compromised, if sufficient Program resources are available, if the application is accepted, and if the student continues to meet all MRP admission requirements, the student who requests re-entry shall be authorized to re-enter the Program at the onset of the subsequent academic year.

For example, if the student voluntarily withdraws any time during June thru May of a given academic year and then applies for re-entry within 10 business days, and the remaining conditions for re-entry are met, then the student would re-enter the Program in June of the subsequent academic year.

Clinical and academic credit may be awarded upon re-entry for completion of a full year of the Program only. Credit will only be awarded if competency is proven through testing as designed by the MRP faculty.
*Good standing: An enrolled student in good standing is one who currently maintains a minimum GPA of 2.0 for all individual courses and has maintained a minimum GPA of 2.0 for each completed course; a former student (non-graduate) in good standing is one who maintained a minimum GPA of 2.0 for each individual course completed and/or in progress at the time of withdrawal. Furthermore, “good standing” status is not applicable to an enrolled/former student who at any time has/had been suspended or placed on probation for any reason.

TESTING & TESTS

Testing is proctored.* Tests are the property of the MRP, NOT THE STUDENT. Students will have access to their tests through the end of the quarter in which the tests were completed, after that point only midterm and final tests will be kept for review. Students may review their old midterms and finals during office hours under faculty supervision. All other tests will be destroyed at the end of each quarter.

Students are permitted to remove a current quarter test from the office with the expressed permission of the instructor. Typically tests are allowed in the classroom during week 10 and week 11 of each quarter to assist the students in studying for final exams.

*EXCEPTION: Some courses will use a take home test or electronic format that will not be proctored.

Instructors have 5 business days to complete grading of tests. Students will be provided updated grades following each major exam or by student request.

Students who make arrangements to take a test before/after the regular scheduled test date are accommodated knowing (with signed memorandum of understanding) that sharing of information about a test is academically dishonest and grounds for termination from the MRP. Makeup tests in the case of unplanned absence are scheduled for the day the student returns. Makeup tests in the case of planned absence/PAL are scheduled prior to the absence.

Photocopying of tests or sharing of testing information to other individuals (e.g. senior student testing information to a junior student) is academically dishonest and grounds for termination from the MRP.

During testing, phones, e-watches (any watch that can connect to the internet), fit bits, and all other electronic devices will be placed in the student’s backpack.
Test Confidentiality Agreement

Date: ____________________

I understand that the information presented on tests or for testing purposes is confidential.

I agree not to divulge any information to anyone regarding the tests administered by MRP faculty.

I understand that the opportunity to take a test early, at my request, is offered as an act of good will by MRP faculty.

I agree to and accept that if I do not maintain the confidentiality of a test, my conduct will result in both a grade of zero for the test, and subsequent disciplinary action in accordance with the MRP Progressive Disciplinary Policy.

________________________________________
Student signature

________________________________________
Faculty witness
CLASSROOM CONDUCT POLICY

Classroom behavior must be conducted in an educational and professional manner. Students will be held accountable for all information presented in the classroom; this includes but is not limited to: required readings, lecture notes and presentations, classroom discussions, and other multimedia presentations.

Individual participation points will be tracked and earned for each course presented during classroom hours as described in the course syllabus. Failure to participate and acting disrespectful during lessons will result in a loss of points.

Sleeping during class and other forms of disrespect, such as playing on fit bits, e-watches, and phones, to instructors and fellow students will not be tolerated in the classroom or lab setting. If students are sleeping or acting in a disrespectful manner they will receive one warning for the day from the instructor. Any further infractions that day in that course or any other course will result in the student being dismissed for the day and all missed hours will be deducted from their remaining personal absence leave. If this violation results in the maximum allowable personal leave absences are exceeded, the student may be terminated from the program.

At the conclusion of each academic quarter, classroom participation points and overall attendance will be reviewed. If a student has perfect attendance and has received all classroom participation points for the course, 1% point will be added to the final course grade for that quarter.

PERSONAL PAGERS/CELL PHONES/E-WATCHES/FIT BITS

Cell phones & personal pagers are *strictly prohibited when in the clinic*, (meaning they cannot be in the student’s possession.) If e-watches are being used in the clinic to answer texts or emails or searching the internet, they will also be banned from the clinic. These items are allowed in the classroom, but will remain off (vibrate mode is NOT acceptable) during classroom instruction. Smart phone (tablet) devices may be used for research during classroom instruction with instructor permission. If a student’s cell phone or watch rings/vibrates or student attempts to use the electronic device during class, the electronic device will be taken and the student will need to visit with the MIS Leadership to retrieve their electronic device. *Violation will also result in implementation of progressive discipline.*

PERSONAL COMPUTER, PRINTER, AND INTERNET ACCESS

Each student is required to have 24 hour/7 days per week access to a personal computer with a printer, Windows Office applications (including Microsoft Word and PowerPoint), and a personal email account.

Each student will be given a hospital email account and is required to check their account daily during scheduled shifts. Each student is responsible for all information presented in email form from the MRP faculty, including but not limited to, assignment deadlines and changes in department protocols.

Announcements may include but are not limited to clinical process changes, safety notices, MRP meeting minutes, and student resource links.
COMPUTER LABORATORY/ACCESS

The Regional Health Learning and Development Department operates RHRCH’s computer laboratory. Students will have 24-hour access to the lab. The lab is unlocked during regular business hours; Monday – Friday, 8:00 a.m. to 4:30 p.m. Students will be able to access the computer lab during non-regular business hours by swiping their ID badge.

In addition to using standard office software, the students may use the various programs purchased specifically by the MRP. These include professional review materials as well as learning programs.

Students may not use the computer lab for purposes other than those related to the MRP or MIS departmental assignments. Access to the computer lab is NOT a substitute for having personal computer access.

LIBRARY SERVICES

- RHRCH provides students with access to online library services. Students will be able to access multiple search engines and journals for research projects.
- All students affiliated with universities/colleges are encouraged to use the library access granted by those institutions for research projects.
- There are a variety of libraries throughout the city, including that of the South Dakota School of Mining and Technology, Rapid City Public Library, and Western Dakota Technology which a student may be interested in investigating.

STUDENT-FACULTY MEETINGS

- Attendance of student/faculty meetings is MANDATORY for all students scheduled in clinical rotations at RHRCH. Students scheduled at off-campus clinic facilities will have the option to attend the meetings or review and sign-off on the meeting minutes. Meetings are scheduled in advance.
WEATHER CONDITIONS POLICY

The MRP is scheduled in-session, Monday – Friday; regular business hours for the faculty office are from 0700 – 1630.

- The MRP rarely closes due to weather/travel conditions even though public schools and local colleges may close.

- Students should contact the MRP faculty with questions about the possibility of MRP closure at least ONE hour in advance of a scheduled assignment.

- In the event of severe weather/travel conditions, RHRC alerts employees, staff, and students with announcements such as “Condition Snow” or “Condition T.” The MRP Director monitors the weather/travel conditions during these situations and with sole discretion, is responsible to close or to keep open the MRP. In the absence of the MRP Director, the decision will be made by a full time program faculty member and approved by the Manager of Medical Imaging Services.
  o Students who are at RHRC when a travel/weather advisory is implemented are subject to RHRC policy and procedure. Students are not subject to extension of a clinical assignment. However, some conditions such as “Condition T” may require persons in the facility to remain on site until imminent danger has passed. For example, if the student has completed the day’s assignment and RHRC security has implemented a safety alert and is restricting egress from the building, the student must comply with security procedures and remain on site. Competency time is NOT authorized under these circumstances.
  o Students at off-campus clinical sites must contact the MRP faculty if their scheduled clinical site is closing due to inclement weather.

- During severe weather/travel alerts, students and faculty are expected to report for all shifts as scheduled except for the following situations:
  1. The Rapid City Police Department has issued a “NO TRAVEL” restriction. In this case the MRP will be closed. All students must make up all missed assignments as rescheduled by the MRP faculty. In some cases, the student can opt to use personal absence leave time rather than reschedule clinical hours.
  2. When the MRP is open and the student determines that personal travel to/from clinical sites is not safely possible. The student must either use personal absence leave time if available, or make up the clinical hours as rescheduled by the MRP Director/clinical instructor. Didactic assignments must be made up as rescheduled by faculty.
    a. MRP students should monitor severe weather/travel advisory information that is easily available through local TV and radio stations, in addition to internet sites.
    b. Those students who ARE able to report for scheduled shifts during severe weather/travel conditions will not receive a time infraction for reasonable tardiness, as determined by the MRP Director. Any tardiness beyond 15 minutes of shift start time will need to be made up or personal absence leave time used, unless prior authorization is given by the program director.
3. Regional Health Clinic (Aspen Building) – Clinical Site (off-campus) Regional Health Clinic has a weather line with a recorded message for inclement weather. If a student is scheduled at the clinic on a day of inclement weather they should first call the weather line at 755-3373. After calling the weather line, contact a program faculty member at RHRCH to determine what their clinical shift will be for the day.

4. Rapid City Medical Center – Clinical Site (off-campus)
   Rapid City Medical Center has a weather line with a recorded message for inclement weather. If a student is scheduled at the clinic on a day of inclement weather they should first call the weather line at 721-8400. After calling the weather line, contact a program faculty member at RHRCH to determine what their clinical shift will be for the day.

5. Regional Health Sturgis Hospital (RHSH) – Clinic Site (off-campus)
   If a student is scheduled at SRH on a day of inclement weather they should first call the Radiology Department of Regional Health Sturgis Hospital at 605-720-2510. The department is routinely staffed from 0630 – 2130. If there is no answer leave a voice message at this number. After notifying RHSH, contact a program faculty member at RHRCH to determine what the clinical shift will be for the day.

NON-DISCRIMINATION POLICY

RHRCH employees and representatives shall not engage in any practice, behavior or action that is discriminatory in nature as it relates to others’ in regard to race, creed, color, national origin, sex, age, or disability.

The RHRCH – MRP maintains the same policy for staff, students, and/or applicants.

STUDENT HARRASSMENT POLICY

Harassment of any type is not tolerated within the Regional Health (RH) system of facilities and programs. Students who engage in harassment will be disciplined according to MRP policy and may ultimately be dismissed from the MRP for such conduct.

Students who are harassed by others while engaged in academic and/or clinical assignments on site should report the offender to the MRP faculty and/or to the Human Resources Department. The MRP Director will follow up on every reported case of harassment of students and shall notify the Advisory Committee of reports and their outcomes.
REASONABLE ACCOMMODATION ~ ADA

Regional Health is committed to maintaining a work and learning environment where all individuals are treated with dignity and respect. Under applicable laws including: the Americans with Disabilities Act (“ADA”), Sections 504 and 508 of the Rehabilitation Act of 1973, the South Dakota Human Relations Act of 1972 and applicable local laws and Regional Health policies, qualified individuals with disabilities are to be afforded equal access to the privileges and benefits of employment that are available to similarly-situated individuals without disabilities. Regional Health provides reasonable accommodations to qualified applicants or Caregivers with a disability if requested unless it would cause Regional Health an undue hardship.

The Medical Radiography Program will make a reasonable accommodation for the known physical or mental limitations of a qualified applicant or student with a disability unless the requested accommodation will cause undue hardship for the Medical Radiography Program and/or Regional Health.

The process for requesting a reasonable accommodation can be found in the Regional Health Reasonable Accommodation policy. Students will follow the same process as an applicant or Caregiver for submitting a request.

Process:

1. The student/applicant may initiate the accommodation request verbally or in writing to the Program Director or the ADA Compliance Coordinator.
2. The student/applicant will be asked to complete a Reasonable Accommodation Request Form and a Release of Medical Information Consent, which can be obtained by contacting the ADA Compliance Coordinator. The student/applicant may be required to provide additional documentation from their medical provider to assist with the request.
3. The ADA Compliance Coordinator and Program Director will work with the student/applicant and their medical provider, and other subject matter experts throughout the interactive process to determine the best course of action in response to their request.
4. The ADA Compliance Coordinator and the Program Director will make a final determination whether or not a reasonable accommodation request can be granted.
5. Once an accommodation is approved the Program Director will schedule an interactive meeting with the student to review the terms and conditions of the accommodation and take the appropriate steps to implement the agreed upon accommodation. Regional Health reserves the right to suggest or modify an accommodation request as long as the needs of the request are met. Regional Health reserves the right to deny a request if such request is deemed unreasonable, creates undue hardship, disruptive to our business processes, or impedes our learning environment.
6. All medical information will be held in a confidential restricted file separate from the student or applicant records.
7. There are a number of reasonable accommodations that Regional Health may be able to implement based on a student’s/applicant’s request.
   a. Additional testing time
b. Adapting type of fonts used on tests and learning materials

c. Alternative places to test

Examples of improper requests include:

a. Changing admission standards
b. Lowering the grading scale
c. Changing clinical rotations

8. To file a complaint of discrimination or harassment please notify the ADA Compliance Coordinator.

Contact:

Regional Health Human Resource Office
P.O. Box 6000
Rapid City, SD 57709
605-755-5510
DRUG-FREE WORKPLACE/LEARNING ENVIRONMENT

It is the policy of RHRCH – MRP to provide a drug-free learning environment. Violations include, but are not limited to, possessing substances or narcotics that are illegal or controlled under federal, state, or local laws or alcoholic beverages in the learning environment; being under the influence of those substances or using them while participating in educational assignments; or dispensing, diverting, distributing or selling while on the premises of an assigned MRP location.

A student of the RHRCH – MRP who is convicted of violating a criminal drug law statute, or who admits in a court of law to the commission of such a criminal drug law violation (whether or not such an admission results in a conviction), will be subject to appropriate disciplinary action per the MRP Progressive Discipline policy.

For purposes of this policy, the learning environment shall include any approved location where a student performs an assignment from the appointing authority. Conviction means finding of guilt including a plea of nolo contendere or imposition of sentence. Criminal drug statutes include federal or state criminal statute that prohibits the manufacture, dispensation, possession or use of any controlled substance.

Procedure

1. Each student will, as a condition of acceptance and matriculation, agree to abide by the terms of this policy and to notify the MRP of any criminal drug conviction occurring within the learning environment no later than five (5) days after such conviction.
2. Whenever the MRP receives notice that a student has been convicted of a criminal drug violation in the learning environment, the MRP shall notify the Human Resources Department within five (5) days after receipt of such notice.
3. Within thirty (30) days of receiving notice that a student has been convicted of a criminal drug violation in the learning environment, the MRP shall take appropriate disciplinary action against the student per MRP Progressive Discipline policy.
4. RHRCH – MRP will, to the extent feasible, provide a continuing awareness program for students, about the harmful effects of drug and alcohol abuse. Students are eligible for assistance by the Employee Assistance Program provided by Regional Health.

Drug Testing Guidelines

1. Drug testing of students will apply in the following circumstances:
   a. Probable Cause: Should the Department Manager, Supervisor, Clinical Instructor, or MRP Director observe student behavior/performance suggesting impairment, the manager or designee shall request that the student be tested.
   b. A student who is unable to adequately perform clinical/didactic assignments, and for whom potential substance abuse is a suspicion, and/or for any other good cause, shall be required to submit to a urinalysis and/or blood test.
   c. A student who is involved in a variance/incident may be required to submit to drug and alcohol tests.
d. A student who participates in action/behavior that results in damage to hospital equipment/property may be required to submit to drug or alcohol tests.

e. A student who has indicated his/her inability to perform clinical/didactic assignments, or who has given the hospital probable cause to suspect substance usage which leads/has led to the resultant inability to meet minimum performance standards and/or which results in a negative effect on the student’s ability to perform assignments, may be required to submit to drug or alcohol tests.

f. Excessive or unusual absenteeism may be probable cause for drug or alcohol tests.

2. Should a student refuse a blood or urine test, refusal will constitute admission that the student is impaired and will be grounds for IMMEDIATE dismissal from the program.

3. In all instances, the MRP Director or designee shall escort a student to the hospital laboratory for collection of blood and/or urine samples. In the case of probable cause incidents, urine AND blood samples shall be tested. A chain of custody will be established and maintained. The chain of custody formed shall include maintaining established and proper documentation. A copy of the report is sent, “Confidentially”, to the RHRCH Director of Human Resources and RHRCH Director of Medical Imaging. A copy of the results shall be placed in a sealed envelope in the student’s personal file. The Employee Health Department shall be responsible for all charges for all drug/alcohol testing of students.

4. A student who utilizes the Employee Assistance Program at any time PRIOR to drug testing and who opts to participate in a rehabilitation program, may be placed on Major Medical Absence Leave. Refer to the Absence Leave Policy in the Student Handbook for details of leave. Upon return to the MRP the student will be subject to random testing for the remainder of their time in the MRP and shall be subject to other conditions as may be recommended by the rehabilitation program officials responsible for the student’s treatment plan.

5. It is the responsibility of the student to notify the MRP Director within 48 hours, if the student is convicted of selling drugs, and/or convicted of illegal alcohol/drug usage, and/or illegal possession of illegal substances, and/or if the student is convicted of stealing drugs/substances from any appointed clinical site.

6. To help maintain a drug-free environment, Regional Health conducts drug-free awareness programs to inform students/employees about the dangers of drug abuse. The Employee Assistance program is also available to students to provide additional information.

7. If a student is convicted of selling drugs, and/or convicted of illegal alcohol/drug usage, and/or illegal possession of illegal substances, and/or if the student is convicted of stealing drugs/substances from a clinical site, the student will be IMMEDIATELY dismissed from the program and Human Resources will be contacted to assist in all actions taken.
Tobacco, Smoking Device, and Smoke Free Campus

Regional Health Rapid City Hospital under the direction of Regional Health promotes smoke-free environments. The use of any tobacco products including electronic cigarettes (e-cigarette), clove cigarettes, or other similar smoking devices are prohibited on or in any Regional Health campus. The MRP members will be held accountable for the maintaining an atmosphere conducive to physical and mental wellbeing as detailed in policy RHHR-8371-513. Any MRP member in violation of the policy will be subject to progressive disciplinary/corrective action.

Substance Use Disclosure Policy

A student who at any time uses a substance(s) that may adversely affect judgment or their ability to perform at minimum standard levels should USE Absence Leave time as necessary. The student is not required to disclose such information, however, should Major/Catastrophic Leave be necessary for the student themselves, the student will not return to the program without the written release from a qualified medical physician as outlined in the Absence Leave policy.

Examples of potentially adversely affective substances include but are not limited to:

- Some over the counter drugs, such as antihistamine preparations
- Allergy medications
- Cold and flu remedies, etc.
- Medications containing codeine, antitussives, or sleep-aids

If a student is in doubt about any substance, s/he should refer questions to a qualified medical physician.
STUDENT SAFETY AND HEALTH

Personal Health Insurance

Personal health insurance coverage for the duration of the program is required. Students are SOLEY responsible for the entire cost of and provision of their own policy(s) for health insurance coverage for the duration of the program. It is the students’ choice as to which type of plan they participate in, whether individual, college-sponsored, or their parents’. A current copy of the student’s health insurance card will be kept on file in the MRP Office to demonstrate compliance with this requirement. Students are responsible for supplying updated documentation to the MRP Director when documentation expires or is no longer active.

Health Care Services

It is in the best interest of patients, fellow students, and other employees for a student who is ill to remain at home. Students are allotted leave time and are expected to use it when necessary.

When students become ill and/or injured while on duty, they must notify an MRP faculty member IMMEDIATELY, if a faculty member is not available, notify the lead diagnostic technologist in general radiography (or clinical staff at off-campus clinical rotations).

If students require medical attention as a result of an injury while on duty at RHRCH they will be directed to either the Emergency Department or Occupational Health as is appropriate. Students will be responsible for all or portion(s) of the cost of services rendered by RHRCH, as determined by RHRCH on an individual basis.

If students require medical attention as a result of an injury while on duty at an off-campus clinical site, appropriate actions to care for the student will be coordinated by the supervising clinical staff. The student or clinical staff member should contact the MRP Office at RHRCH as soon as possible to report the injury. Students will be responsible for all or portion(s) of the cost of services rendered by the clinical facility or RHRCH if the student is referred to RHRCH for care.

Students shall have the HepVax Hepatitis B series of immunizations available to them at no cost. The school strongly recommends that students participate in this immunization program for their own protection. Those who decline to receive the injections shall sign a waiver indicating their choice to do so. A student may opt at any time during the MRP to participate. Students who choose to participate and FAIL to complete the series in the requisite time frame, AND who later wish to participate in the series may do so at their own expense.
Communicable Disease/Patient Contact

A student who contracts/acquires a communicable/contagious disease and/or condition shall use leave time as appropriate. A physician release following leave for medical reasons is required for absence of 3 or more consecutive scheduled days. Should the student require more than 40 consecutive hours of absence leave for medical reasons and/or potentially put others at risk from exposure to the student, the student shall be required to use Major/Catastrophic Leave as appropriate. (See the Absent Leave Policy regarding Major/Catastrophic Leave.)

Students may be in a health-risk situation should exposure to a patient with a communicable disease occur. Therefore, students shall treat EVERY patient as if s/he has a communicable disease, i.e. using Standard Precautions, including the use of gloves, gowns, and other personal protection equipment/attire/methods as is appropriate for a given examination/procedure.

During clinical education, students WILL have patient contact that could result in possible exposure to potentially communicable disease(s). The students shall follow these guidelines to reduce the probability of contracting a communicable disease.

- Always wash their hands or use alcohol foam, when appropriate, prior to and after each patient contact.
- Check at the nurses’ stations for specific instructions relative to patients who require any type of transmission based precautions.
- Utilize personal protection equipment for Standard Precaution patients.
- Report to any event that is a breach of appropriate infection control techniques/policy to the proper authority or utilize the Communication Hotline. Incident and variance report shall be completed as indicated.
- See RH Policy IC-8415-001 ISOLATION PRECAUTIONS for additional information

MR Safety

Students will have potential exposure to the magnetic resonance environment. To ensure the safety of the student, the student will observe an MR safety video and complete a safety screening sheet. A copy of the screening sheet will be kept on file.
**DOSIMETRY**

Students are issued a radiation dosimeter. The dosimeter is to be worn at the neck level at all times while in attendance as a student radiographer. Dosimeters should remain in the student’s locker when the student is not in attendance. Dosimetry reports are received quarterly; new dosimeters are issued quarterly. The faculty reviews the reports and a copy is available for student review and initialing in the MRP office. Each student will be responsible for initialing the reports provided throughout their time with the program indicating awareness of their cumulative radiation dose. The Radiation Safety Officer maintains permanent records. In the event of an incident that results in the student exceeding institution investigation levels or maximum allowable limits, the MRP follows the MIS department protocol and/or guidelines established by the Radiation Safety Committee and the Radiation Safety Officer in policy CCI-6030-0001. The student will meet with the Radiation Safety Officer or Radiation Safety Committee representative regarding any radiation safety level concerns. The MRP recognizes and abides by the same investigation limits and maximum allowable dose limits determined by the Radiation Safety Committee.

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<tr>
<th>Investigation Levels</th>
<th>Maximum Allowable Level</th>
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<tbody>
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<td>Level I</td>
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<tr>
<td>Whole-Body Badge</td>
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<tr>
<td>Collar/Lens of Eye</td>
<td>375</td>
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<tr>
<td>Finger Badge</td>
<td>1250</td>
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<tr>
<td>Fetal Badge</td>
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PREGNANCY POLICY

Voluntary Disclosure

A student who becomes pregnant is NOT required to disclose her pregnancy. If she chooses to do so it must be disclosed in writing; this disclosure may be withdrawn at any time in writing. The student is encouraged to notify the MRP Director upon suspicion and/or confirmation of her pregnancy. The following options are available to the pregnant student:

1. She may continue in the program without clinical modification.
   a. Material that outlines the possible risks associated with continuation in the program as may be appropriate and specific to pregnancy, namely the Appendix to NRC Regulatory Guide 8.13 Revision 3, would be provided. Review of the material with the student would be available.
   b. Compliance with departmental radiation safety policy would be expected.
   c. Clinical time and all assignments missed for maternity leave would be made up according to the leave policy, and as scheduled by the MRP Director.
   d. Following complete recovery per written medical release from a qualified practitioner, the student would return to the MRP. A maximum Major/Catastrophic Leave of 240 clinical hours would be allowed should the practitioner deem it necessary.

2. She may continue in the program with clinical modification as based on individual need.
   a. All elements outlined in option #1 would apply.
   b. Clinical assignments would be adjusted, with reasonable accommodations, per written medical necessity from a qualified practitioner.

3. She may withdraw from the program.
   a. Applicable academic/clinical credit upon withdrawal would be awarded on an individual basis; determination of the credit awarded would be based on the individual student’s academic/clinical achievement. It would be possible for a student to withdraw and be awarded NO credit.
I (print name) ________________________________ hereby voluntarily choose to give notice of my condition of pregnancy. I have reviewed the pregnancy policies of the MRP and the MIS department. I have read the following:

_NRC documents provided by a representative of the Radiation Safety Committee._

I have been given ample opportunity to ask questions about radiation risks, my options as a student in the MRP, etc.

I personally accept full responsibility for my decision to remain in or withdraw from the MRP.

I understand that should I decide to remain enrolled in the MRP that I must comply with the MRP and MIS pregnancy policies in order to do so.

I understand that I may withdraw my discloser in writing at any time.

It is my intent to: ____REMAIN IN THE MRP ____WITHDRAW FROM THE MRP*

(Check one)

*Withdrawal policy is found within this Handbook. All conditions of the Withdrawal Policy will apply.

Comments
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Student signature/date ______________________ MRP Director signature/date ______________________
FINANCIAL INDEBTEDNESS POLICY

Students who are in any way financially indebted to the MRP and/or who have failed to account for hospital or program property placed in their possession, and regardless of student status shall be:

1. denied release of any student information including transcripts.
2. suspended from official graduation, which includes the graduation ceremony AND registry eligibility. (until satisfactory settlement has been achieved)
3. subject to financial administration policies, regardless of student status. (i.e., dismissed, withdrawn, …)

When a student has questions concerning his/her indebted status, an appointment with the MRP director should be made.

TRANSCRIPT RELEASE POLICY

- A final transcript shall be released upon receipt of the graduate's written request AND payment of the required transcript fee. Transcript release forms may be downloaded from the MRP website or requested by mail.
- ONE unofficial copy of a final transcript will be provided at no charge for a student upon graduation from the program.
- Interim quarterly official transcripts may be provided, on behalf of and at no charge to a student enrolled in a college/university simultaneously with the MRP. The official transcripts will be mailed DIRECTLY to the college/university.
- Transcripts (other than those released to a college/university as described above) shall not be released without a student's express written request.
- Once a Transcript Release Request form is received (together with the required fee), the request will be processed. The RHRC Finance Department may suspend subsequent processing of the transcript request for various reasons including but not limited to the following: Financial Indebtedness - Loan Delinquency - Check Fraud
- Further information regarding the release of transcripts is available utilizing the Policy system of Regional Health: Policy MIS – 7045-0102.

NOTE: The current fee for an academic transcript release is: $5.00 per copy.
STUDENT RECORDS & INFORMATION RELEASE POLICY

- Student records are maintained by program officials in a manner compliant with the *Family Educational Rights and Privacy (FERPA)*
- Students may view portions of their personal file ONLY in the presence of either a Clinical/Didactic Instructor or the MRP Director. Some records shall not be accessible to the student for viewing, i.e. confidential recommendation forms for which the student voluntarily waived rights.
- Further information is available utilizing the ePolicy system of Regional Health: ePolicy MIS-7045-0107.

Students' permanent records may include and are not limited to the following:

1. Initial application form and all attachments.
2. Health records.
3. Interim/Final academic transcript/s.
5. Permanent mailing address.
6. Registry scores (if provided by the student).
7. Due process forms, notes, documentation, etc.

Permanent MRP student/graduate records may be archived in electronic or paper form for an indefinite period.

PARKING POLICY

A map is provided during the orientation process that indicates those areas designated as appropriate for employee parking; students will be required to utilize the same areas designated for RHRCH employees. Students shall register personal vehicles with the appropriate department. A student who violates the hospital parking policy shall be subject to, in addition to RHRCH policy/s and procedures, the MRP Progressive Discipline policy.
SOCIAL NETWORKING SITE PHILOSOPHY AND GUIDELINES

Social networking sites have great potential to connect people across the globe and enhance communication; however, they are also more informal, less structured, and ever-changing. Social networking sites (such as Facebook, MySpace, YouTube, etc.) often include a range of communication platforms including, but not limited to, creation of profiles, blogs, discussion boards, instant messaging and file sharing (text, photos, video, etc.). Utilization of this type of technology by MRP students should be performed in a responsible and professional manner.

Following are the MRP ethical guidelines for social networking sites:

1. MRP students shall conduct themselves in the “virtual” or online world of social networking sites just as they would in all face-to-face human interactions, namely treating others with dignity and respect and observing all other established standards of professional conduct.

2. As a matter of security and respect MRP students will not quote, cite, or reference co-workers (classmates) in social media posts. Always abide by all HIPAA regulations; never share any information about patients or their identity.

3. MRP students acknowledge and agree that when they create or post material on a social networking site they are in effect “content publishers” and as such are subject to a host of ethical and legal obligations including, but not limited to, progressive discipline or termination from the MRP.

4. MRP students shall make every effort to ensure RH Student ID Badges are not in any pictures (snapchats, selfies, class pictures, etc.).

Regional Health Policy RH HR-8371-509 will be referenced for guidance in all potential violations regarding social media resulting from the actions of an MRP student. Regional Health Policy COC-8217-201 Information Security- Acceptable Use of Information Technology will be referenced for guidance in all potential violations regarding inappropriate use of computer equipment and/or systems.
STUDENT REPRESENTATION

There shall be two representatives, one (1) representative for each student group, as elected by a plurality vote of that group. These individuals represent all students from their own class. At the close of QTR I, the 1st year students will select their student representative by a plurality vote. Term of service is voluntary and is for the remainder of the MRP. The student may elect to step down, in which case a replacement shall be selected. The class may choose to replace a sitting representative by a unanimous vote only.

RHRCH - MRP

Student Representative Agreement/Responsibilities

The (JR/SR) student representative shall be the student selected by a plurality vote of his/her student body. The student agrees to serve to the best of his/her ability, to represent the entire student body, as indicated by his/her signature below.

Objectives - The student shall:

1. Serve as a liaison between the student body and the program faculty.
2. Serve as an active member of the Advisory Committee, attending all regular meetings.
3. Report to the student body as necessary, the proceedings of the Advisory Committee.
4. Lead student body meetings.
5. In the event of an unsatisfactory result subsequent to meeting/discussion with the PD/faculty, contact the MIS Department Manager.
6. Act as a liaison between the student body and the diagnostic imaging staff as necessary.
7. Oversee the student body fund-raising activities; reporting to the PD as necessary.

I accept the position of student representative for the student body.

Student representative    Date
PROFESSIONAL ASSOCIATIONS

Students will become a student member of these professional associations. They provide a number of benefits to student members such as: scholarship opportunities, study tools, membership discounts, and professional development opportunities.

1. South Dakota Society of Radiologic Technologists (Annual Student Fee $20)
2. American Society of Radiologic Technologists (ASRT) (Annual Student Fee $35)

Second-year students have the opportunity to attend the SDSRT Annual Educational Meeting, and while in attendance, shall conduct themselves in a professional manner as is consistent with MRP policies. A second-year student may be absent from clinical and classroom assignments with official authorization in order to attend this meeting, provided that:

1. The second-year student attends all classes, presentations and business meetings, and provides documentation of attendance thereof.

2. The second-year student presents his/her paper (if it is selected); AND the 2nd-year student creates a scientific exhibit for the student competition. NOTE: The student must be a member of the SDSRT in order to enter the competition.

3. The second-year student participates in the Student Bowl.

If the items specified above are not completed, the documentation the student does have will be reviewed and the hours not accounted for will be deducted from the student’s personal absence leave time and the violation will result in implementation of the Progressive Disciplinary Policy.

Final approval of educational leave is the sole decision of MRP faculty.

Second-year students who choose not to attend the conference will be expected to complete clinical hours as they are scheduled.

EARLY RELEASE POLICY

The RHRCH MRP does not provide an early release option. All students must complete all attendance requirements of the MRP.

TRANSFER POLICY

The RHRCH MRP does not accept transfer students. Students who leave the MRP prior to completion may request a transcript of completed courses in accordance with the Transcript Policy.
GRADUATION POLICY

The RHRCH MRP shall award a certificate of completion to a student who has met all final competencies and MRP requirements as determined by the faculty.

RHRCH may present the graduate with a token of merit representative of the academic honor and level of individual achievement relative to completion of all graduation requirements of the MRP.

RHRCH may also sponsor an event for purposes of presentation of the above items for which the graduate may wish to invite additional attendees as authorized by RHRCH.

Any OFFICIAL graduation event is essentially approved, scheduled, planned, coordinated, and sponsored by RHRCH in its sole authority.

A graduate need not be present for a graduation event in order to be awarded an earned certificate of completion.

Official acknowledgement and subsequent substantiation of program completion by a Program Official, for purposes of a graduate's needs pursuant to the ARRT Registry Examination eligibility requirements, shall be provided for the graduate ONLY upon receipt of the graduate's written request and/or official notification from the ARRT of a graduate's application for registration for the medical radiography certification examination.

FINAL OBJECTIVES

In order to meet the graduation requirements of the RHRCH MRP, the student shall, meet the following minimum terminal objectives:

1. Satisfactory completion of all required clinical and didactic courses with a minimum passing grade level of 80% for each course.
2. Satisfactory completion of all required clinical competency evaluations with a minimum passing grade level of 80% for each competency.
3. Satisfactory completion of the program attendance requirements.
4. Satisfactory completion of the required graduate final evaluation process.
5. Satisfactory completion of additional required competencies
6. Provide basic patient care/comfort; anticipate patient needs for patients of all age groups.
7. Provide appropriate patient education.
8. Apply knowledge of radiation protection theory and practices.
9. Understand and apply the principles of basic x-ray production and interactions.
10. Safely operate medical imaging equipment and accessory devices.
11. Position patients and utilize medical imaging systems to perform radiographic examinations and procedures.
12. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
13. Apply knowledge of human structure, function and pathology.
14. Demonstrate knowledge of and skills relating to quality assurance.
15. Evaluate the performance of medical imaging systems.
16. Evaluate medical images for technical quality.
17. Apply knowledge and demonstrate skills relating to medical image processing.
18. Apply appropriate procedures relative to safe limits for equipment operation.
19. Recognize equipment malfunctions and report them in a timely manner to the appropriate authority.
20. Demonstrate knowledge of and skills relating to verbal, nonverbal and written medical communication in patient service intervention and professional relationships.
21. Exhibit behaviors, attitudes and values that are supportive of the professional code of ethics and comply with the professional scope of practice.
22. Competently perform a full range of radiographic procedures on patients of all ages in the following general categories:

<table>
<thead>
<tr>
<th>Head/neck</th>
<th>Trauma</th>
<th>Bedside</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgical</td>
<td>Musculoskeletal</td>
<td>Chest/Thorax</td>
</tr>
<tr>
<td>Abdominal</td>
<td>Gastrointestinal</td>
<td>Genitourinary</td>
</tr>
</tbody>
</table>

Upon successful completion of the RHRCH MRP, the graduate is eligible to apply for the national certification examination as administered by the American Registry of Radiologic Technologists (ARRT) following successful application to the ARRT.

**FINAL EVALUATION PROCESS**

In order to successfully complete the MRP and to meet graduation requirements, the Radiography Student shall complete the final evaluation process, which may include but not be limited to the following:

- Final quarter evaluation and conference
- Return of all items that have been entrusted to the student's possession for use in the performance/completion of student assignments, to the appropriate facility official. (i.e. personal dosimetry badge, library materials, Program books & materials, surgical scrubs, student ID badge, etc.)
- Satisfactory completion of the Student Clearance Sheet, pursuant to the student’s graduation from the program.
- Successful completion of final clinical competencies.
CLINICAL SUPERVISION POLICY

- Students will be APPROPRIATELY supervised at all times while participating in clinical education.
- One clinical instructor per 10 STUDENTS is assigned.
- Supervision of students will be provided in one of two categories: Direct or Indirect Supervision.
  - Student schedules will be closely monitored to ensure there is a 1:1 radiographer/student ratio maintained for procedures.
  - Rare exams are the only exception and a list of rare exams is posted in the department at RHRC (Off-campus clinical sites never have more than one student at a time.)
    - Rare exams are the only time that a technologist may supervise 2 students at once. (A list of rare exams will be provided for students and technologists.)
    - The 2nd student may only observe. The 2nd student must remain in the control area while observing the rare exam and he/she may not make exposures.
    - A radiologist may supervise the observing student in the exam room. The student must leave the room or be in the control area when the radiologist is finished.
    - A copy of the rare exam list will be distributed with handbook.

Direct Supervision

Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direct supervision of a qualified radiographer. The definition of direct supervision is:

Student supervision by a qualified radiographer who:

1. Reviews the request for examination in relation to the student’s achievement.
2. Evaluates the condition of the patient in relation to the student’s knowledge.
3. Is physically present during the conduct of the entire examination.
4. Reviews and approves the images or determines which images require a repeat exposure.

- All unsatisfactory images are repeated in the physical presence of a qualified radiographer.
- In the event of ONE unsuccessful attempt at repeating an image, a qualified radiographer will assume control for the additional repeat exposure while the student observes.

Therefore, Direct Supervision is required in the following situations:
- Any exam for which a student HAS NOT demonstrated clinical competency.
- ALL Portable radiologic examinations on ALL patient floors, ICN, ED, & PACU.
- During all surgical procedures.
- **During all repeat image exposures.**
- **All unsatisfactory images are repeated in the physical presence (under direct supervision) of a qualified radiographer.**
Indirect Supervision

Indirect Supervision is allowable for students who have demonstrated competency in a given examination.

Indirect supervision is defined as:

- Supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement.
- “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Indirect Supervision parameters are:

- A qualified radiographer reviews, approves the images or determines if any images require a repeat exposure.

*In the event of ONE unsuccessful attempt at repeating an image, a qualified radiographer will assume control for the additional repeat exposure while the student observes.

Qualified Technologists

A qualified technologist is defined as one who currently maintains ARRT registration in Medical Radiography and who has been “released” to perform assigned responsibilities independently and is therefore fully competent as an entry-level radiographer. A technologist must be registered by the ARRT to supervise students.
New Technologist Orientation Policy

Technologists play an important role in the clinical component of the MRP. Qualified technologists are responsible for appropriate supervision, weekly evaluations, soloing, and competency grading of the students. Newly hired technologists will meet with a program faculty member to review the policies, procedures, and goals of the MRP.

<table>
<thead>
<tr>
<th>Phase 1</th>
<th>New hire: Registered technologist is within probation period.</th>
<th>Cannot supervise students for solo or comping purposes; cannot complete weekly student evaluations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 2</td>
<td>Registered technologist has completed probation period and has &lt; 1 year experience</td>
<td>Allowed to supervise students for solo purposes and complete weekly student evaluations</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Registered technologist has completed probation period and has &gt; 1 year experience</td>
<td>Allowed to supervise students for solo and comping purposes; can complete weekly student evaluations</td>
</tr>
</tbody>
</table>
COMPETENCY-BASED CLINICAL EDUCATION GENERAL PLAN

The clinical portion of the program follows the Competency-Based Clinical Education model used in many allied health and nursing programs. The plan requires the student to progress through sequential steps in the learning process, with each step leading to a higher level of achievement and ultimately to clinical competence. The RHRCH Program plan, however, does not end at that point. The completion of all final clinical competencies marks the terminal point for the clinical education process. The competencies identified as “required” are consistent with the minimum required competencies that must be achieved in order to meet certain eligibility requirements for the American Registry of Radiologic Technologists (ARRT).

The student who achieves clinical competence is provided, for the remainder of the program, the opportunity to perfect acquired clinical skills. The following pages show the progressive steps that are taken in sequence by each student for EACH radiologic procedure for which clinical competency must be achieved.

CLINICAL PROCEDURES

Students will participate in a full range of clinical diagnostic radiographic procedures. Participation shall include observation of, assistance with, and performance of radiographic procedures. Clinical Competency shall be achieved and documented prior to graduation from the MRP. Clinical competency shall be achieved at a level consistent with individual clinical experiences. This is consistent with the MRP mission, goals, and objectives.

STUDENTS’ GENERAL DUTIES

1. The student will observe all aspects of professional ethics and confidentiality with regard to all patients, visitors and staff.
2. With appropriate supervision, the student is expected to perform radiographic examinations for which clinical competency has been demonstrated.
3. The student is expected to perform ancillary duties as required of a staff medical radiographer.
4. The student is responsible for personal observation of official notices, bulletins, memos, etc., for information contained therein as posted in designated areas of the department, and via electronic media.
5. The student will, in the event of an incident/accident, report such an event immediately to the appropriate supervisor. In addition, the student will complete the required documentation, etc. as required. The student will provide prompt notification to an MRP faculty member.
6. Students shall not accept verbal physician orders; they shall refer the requesting party to a registered radiographer.
7. Students shall not place nor receive personal phone calls while on duty or in class. Students shall not receive visitors while scheduled for clinical or class. An emergency situation is the only exception. Students shall check the staffing board in General Radiography for messages, and may make personal phone calls during break periods.

8. Students will perform their tasks quietly and as efficiently as possible. Gross misconduct such as horseplay, raucous laughter and/or other inappropriate behaviors is prohibited and furthermore, will be cause for progressive disciplinary action.

9. The student will communicate with others in person, by phone, etc., with pleasant tone of voice. The student will address others using an appropriate greeting, and when answering the telephone.

10. The student will comply with ALL hospital, department, and program policies and regulations, and will follow all procedures as described in the appropriate Procedures Manual(s).

11. The student shall not leave an assigned area without first notifying the area supervisor and/or their supervising technologist.

12. The student shall NEVER discuss the potential findings of a radiologic examination with the patient, family, or friends.

13. The student shall refer patient questions regarding interpretation of an examination to the patient’s physician and/or the radiologist.

14. The student shall not offer medical advice, nor prescribe treatment or medication.

15. The student shall comply with all hospital and departmental safety policies and procedures.

16. The students shall routinely review and initial each of their dosimetry reports.

17. The students shall comply with all MIS radiation safety and radiation protection policies and procedures.

18. The students shall attend and/or complete all of the RHRCH mandatory safety in-services and compliance courses.

GENERAL CLINICAL OBJECTIVES

Cognitive, Psychomotor, and Affective Domains

- The student will observe all aspects of professional ethics and confidentiality with regard to all patients, visitors and staff.
- With appropriate supervision, the student will perform radiologic examinations for which s/he has demonstrated didactic achievement and subsequent progressive levels of clinical competency, leading to completion of all terminal competencies.
- The student will comply with the Program’s Student Dress Code at all times while on site for clinical and/or classroom assignments.
- The student will practice appropriate procedure(s) as needed for self and/or others for the following:

  - Standard Precautions
  - Lifting and Back Safety
  - Life Safety
  - Non - Aseptic Technique
  - Radiation Protection
  - Isolation Technique
  - CPR - Basic Life Support
  - Sterile Technique
  - Life Safety
The student will comply with clinical and other procedures/policies for participation in the following:

- Quality Assurance Measures/Studies
- Ancillary Radiologic Procedures
- Corporate Compliance
- Annual Safety Reviews
- Patient Diagnostic Imaging Services
- General Communication
- Other RHRCH / RH Activities

**CLINICAL COMPETENCY PROCEDURES**

Upon successful completion of the written examination which follows the didactic presentation, the student progresses to the next level in the sequence leading to clinical competency.

**Pre-Clinical Competency Checklist**

The Pre-Clinical Competency Checklist is utilized in the simulation laboratory environment. Each student is “pre-tested” by a program faculty member in order to document the level of preparedness of the student to perform a specific procedure in the first stage of clinical application. Use of the Pre-Clinical Competency Form will identify any major problem areas that require remediation prior to allowing the student to perform the examination on a patient. A student must pass the pre-clinical competency with 80% or better. Failure requires remedial steps in either or both the didactic sense or for the simulation experience. A “pass” of the pre-clinical competency indicates that the student is prepared to, under direct supervision; apply newly learned skills in the clinical setting on patients. A specified number of “Solo” exams shall be completed in order for the student to be eligible to test for clinical competency for the specific procedure, i.e. progress to the next step.

Pre-Clinical Competency Scoring: If the student passes the pre-clinical competency they will receive a score of 100%. If the student fails the original pre-clinical competency and then passes the repeat pre-clinical competency they will receive a score of 80%. A student is allowed a maximum of 1 repeat attempt at passing the pre-clinical competency. The student who fails the repeat attempt will be immediately dismissed from the program.
Clinical Competency Testing

The student who has accumulated the required number of clinical “solo” exams for a specific procedure is eligible to test for clinical competency in that procedure. The eligible student will notify an instructor or qualified radiographer of intent to “comp” test for a given procedure prior to the start of the procedure. The instructor or qualified radiographer reserves the sole right to deny the student that opportunity to comp, for example, upon review of patient-related criteria.

For example, if the student declares to the radiographer the intent to comp on the “next KUB” patient, and whereupon following review of the patient’s status the radiographer deems the case inappropriate for competency testing, then the student shall proceed as in the case of a “solo” exam situation. Following is example terminology students may use for declaring the desire to comp on an exam. The student may state, “I would like to comp on the next KUB patient if you agree that patient condition will allow me to do so.”

Once the comp testing procedure has begun, the student is committed to completing the examination in the “test” mode. If a student later decides that s/he does NOT wish to test for competency, for whatever reason/s, (once the testing has begun) the student shall complete the exam and accept the earned grade OR accept a failing grade for the competency.

Students’ comping on exams is responsible for verifying that the supervising technologist completes and submits the required paperwork within 24 hours. If for any reason the student cannot verify this completion, the MRP Director should be emailed the exam specifics so program faculty may follow up on the situation.

Each quarter the students are required to meet a minimum number of comps, only the comp paperwork that is graded by a faculty member and then reviewed with the student are counted toward this minimum. Comps that meet this requirement after the Friday in week 11 are credited toward the next quarter’s minimum.

Clinical Competency Scoring: Clinical competency exams must be passed with an average score (practical performance + image evaluation) ≥ 80%.

If a student initially FAILS the practical performance of a clinical competency test, s/he must REPEAT the designated number of “solo” exams for that procedure. This will allow the student adequate opportunity to review the procedure and to perform the procedure under the DIRECT supervision of a qualified radiographer for the extended time period required to re-accumulate the required number of exams.

Once the student has repeated the “solo” exams required for the initially failed competency test, s/he would have only ONE opportunity for a successful competency retest. The retake must be performed with a program faculty member. After successfully completing the practical performance of the repeat competency, the student will earn a grade of 80% for the practical performance. Should the student fail the competency retest, s/he will be immediately dismissed from the program.
Students’ comping on exams will have 3 weeks after the exam date to complete and submit the student image evaluation form. Failure to meet the 3 week deadline will result in the student failing the competency exam. If a student fails the image evaluation portion of the competency exam, they will have one opportunity to correct and resubmit the image evaluation. After successfully completing the image evaluation of the competency, the student will earn a grade of 80% for the image evaluation portion of the competency. Should the student fail the image evaluation revisions, s/he will be immediately dismissed from the program.

Upon successful completion of competency testing for a given procedure, the student may perform the procedure in the clinical setting in accordance with program policies relative to clinical supervision of students.

Clinical competency testing for most examinations shall be performed on actual patients in the clinical setting with appropriate supervision. For a few select examinations, SIMULATION for competency testing shall be allowed ONLY in the event of a lack of patients. If the instructor deems simulated competency testing necessary, it shall take place ONLY during the 8th quarter and may be performed utilizing the phantom or role play methods. Documentation of the level of competency achieved shall be recorded on the official Clinical Competency Form; image evaluation may be completed verbally on simulated exams.

Also all checklists that are required by the program must be completed by a technologist that is able to solo or comp. This means that the technologist must be out of the probation and approved to work solo in order to complete student evaluations, checklists, solos and comps (if qualified to do comps).

Extra Credit Clinical Competency Opportunity

Prior to the starting date for each new class of students the clinical competency requirements of the MRP will be reviewed and compared to the current competency requirements of the ARRT. In addition current student competency records will be reviewed to determine examinations that have become infrequent. Faculty may identify specific examinations that are infrequent and not labeled “Mandatory” by the ARRT as extra credit competency testing opportunities. The classification as extra credit exams will remain in effect throughout the entire program for class of students in which it was developed. This may result in extra credit exams varying from class to class.

Extra credit competency testing will require the student to complete the specified number of “solo” examinations prior to attempting clinical competency on patient. The competency examination must be successfully completed to receive extra credit for that quarter’s clinical practicum grade. The student will be responsible for completing all necessary paperwork regarding the extra credit exam using the same process as described above under Clinical Competency Testing. Extra credit examinations may not be simulated.
Successful completion of the extra credit competency will result in the following:

- 1% increase of the current quarter’s final clinical practicum grade.
- The documented grade earned on the extra credit competency examination will be recorded for record purposes but will not be included in the clinical competency overall grade for the quarter.
- Successful completion of the extra credit competency examination will count toward the total number of required competencies that must be achieved per quarter.

Failure of the extra credit competency will result in the following:

- There will be no adjustment made to the current quarter’s final clinical practicum grade reflecting the attempt of the extra credit examination.
- If the student wishes to attempt the same extra credit competency examination again in the future they will need to first complete the specified number of “solo” examinations.
- Students will NOT be terminated from the program if they fail to successfully complete a repeated attempt of an extra credit examination.

Skills Maintenance and Improvement Competency Testing

During quarters II-VII, the program faculty will “recheck” the clinical skill level of students for a given exam which the student has previously demonstrated pre-clinical competency. There will be no prior notification of the timing of a particular recheck comp.

The purpose and intent of these competency exams is for the student to demonstrate a minimum of continued clinical competency of 80% or better as well as an increase in the level of performance consistent with the length of time spent in the MRP.

Skills Maintenance and Improvement Competency Scoring: If the student passes the skills maintenance and improvement competency they will receive a score of 100%. If the student fails the original skills maintenance and improvement competency and then passes the repeat skills maintenance and improvement competency they will receive a score of 80%. A student is allowed a maximum of 1 repeat attempt at passing the skills maintenance and improvement competency. The student who fails the repeat attempt will be dismissed from the program.

Recheck competency scores shall be included in the determination of the Clinical Practicum grade, as do the other comps.
Final Clinical Competency Testing

Upon successful completion of ALL other REQUIRED clinical competency tests, the second-year student is eligible to participate in required FINAL clinical competency testing. Final clinical testing will take place during the final quarter of the program. The student shall at that time, be prepared to perform a simulation exam from a list comprised of mandatory projections identified by the ARRT. (The list will be distributed to all senior students at the beginning of the final quarter of the program.) The student will randomly draw the projections to be performed and ALL images will be exposed using the phantom. The student must successfully complete ALL final clinical competencies in order to meet eligibility requirements for graduation from the program. If a student fails any one or more final clinical competencies, s/he shall participate in remedial assignments as assigned by the instructor prior to repeating the examination in the “Finals” mode. Should a student fail one or more clinical final competency RETESTS, s/he will NOT meet eligibility requirements and will be dismissed from the program.
CLINICAL COMPETENCY PROGRESSION CHART

1. Didactic Instruction & Written Testing
   • Clinical Simulation

2. Pre-Clinical Testing (Sim-Lab)
   • Grouped in specific procedure sets
   • Successful Competency - Completion confirmed by faculty member at time of testing
   • Failed Competency - Necessary remediation training occurs. Student will repeat examination.
   • Failed Repeat Competency - If student fails same exam on repeat attempt they will be dismissed from the program. Maximum of 1 repeat attempt at passing the examination.

3. Clinical Participation - Documentation of exams performed "Solo"

4. Clinical Competency Testing - Completed under direct supervision of a qualified technologist
   • Review competency image evaluation with faculty
   • Failed Competency - Necessary remediation training occurs. Student returns to beginning of Step 3 and restarts process, the process may only be repeated ONE time.

5. Indirect or direct supervision after successful completion of competency exam

6. Maintenance Competency Examination - completed quarterly to “recheck” skill level
   • Content - Random draw and performance of any 4 previously learned projections (based on Sim-Lab)
   • May be requested from faculty at any point in the quarter without prior notification
   • Successful Competency - Completion confirmed by faculty member at time of testing
   • Failed Competency - Necessary remediation training occurs. Student will repeat examination.
   • Successful completion of repeat examination will be confirmed by faculty member at time of retesting
   • Failed Repeat Competency - If student fails same exam on repeat attempt they will be dismissed from the program. Maximum of 1 repeat attempt at passing the examination.

7. Final Competency Evaluation - performed following successful completion of all required clinical competency examinations
   • Content - Random draw from list of ARRT mandatory projections
   • Successful Competency - Completion confirmed by faculty member at time of testing
   • Failed Competency - Necessary remediation training occurs. Student will repeat examination.
   • Successful completion of repeat examination will be confirmed by faculty member at time of retesting
   • Failed Repeat Competency - If student fails same exam on repeat attempt they will be dismissed from the program. Maximum of 1 repeat attempt at passing the examination.

8. Verify completion of ARRT General Patient Care Requirements for Clinical Performance

Pass comp – progression from one level to the next from top to bottom

Fail comp – repeat process as directed in appropriate level
PATIENT/IMAGE RECEPTOR HOLDING POLICY

Holding patients or image receptors during radiation exposure is not a practice the MRP authorizes. Students must not hold image receptors during any radiographic procedure. Students should not hold patients during any radiographic procedure when an immobilization method can be utilized. It is understandable that extremely RARE instances of an emergent nature, for which student assistance with patient holding is required, may occur. Therefore, the following parameters have been set:

- Appropriate techniques shall always be utilized as the primary method of patient immobilization, thereby making it possible to forego the need for anyone to hold a patient or image receptor.
- The student should not be exposed by the primary beam.
- The student should always be positioned farther from the primary beam than the supervising, qualified radiographer.

EVALUATION METHOD FOR CLINICAL PRACTICUM

This course is competency-based; a student will progress as competency is achieved. Each procedure has a corresponding evaluation instrument for procedural and image evaluation. As a student achieves competency through the didactic and clinical phases, a separate evaluation instrument is utilized. The affective domain is assessed during quarterly evaluations. A quarterly Clinical Practicum Grade is computed as follows:

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Pre-Clinical Comps</th>
<th>Comps</th>
<th>Tech Evaluations</th>
<th>Instructor Evaluations</th>
<th>Midterm Exam</th>
<th>Log Book Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quarter 1</td>
<td>10%</td>
<td>10%</td>
<td></td>
<td>70%</td>
<td></td>
<td>10%</td>
</tr>
<tr>
<td>Quarter 2</td>
<td>5%</td>
<td>10%</td>
<td>15%</td>
<td>50%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 3</td>
<td>5%</td>
<td>10%</td>
<td>15%</td>
<td>50%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 4</td>
<td>5%</td>
<td>10%</td>
<td>15%</td>
<td>50%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 5</td>
<td>10%</td>
<td>15%</td>
<td></td>
<td>55%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 6</td>
<td>10%</td>
<td>15%</td>
<td></td>
<td>55%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 7</td>
<td>10%</td>
<td>15%</td>
<td></td>
<td>50%</td>
<td>20%</td>
<td>5%</td>
</tr>
<tr>
<td>Quarter 8</td>
<td>10%**</td>
<td>15%</td>
<td></td>
<td>50%</td>
<td>20%*</td>
<td>5%</td>
</tr>
</tbody>
</table>

* Final Registry Review Test Score
** Automatically receives full percentage score if all required comps are completed prior to 8th quarter.

Minimum passing final course grade is 80% (C)
DAILY LOG GRADING POLICY

A Daily Log grade will constitute 10% of your clinical grade for Quarter One and 5% of your clinical grade for all remaining quarters.

Grading Scale:

<table>
<thead>
<tr>
<th>Incomplete Pages</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full book with all pages full</td>
<td>100%</td>
</tr>
<tr>
<td>1 incomplete page</td>
<td>95%</td>
</tr>
<tr>
<td>2 incomplete pages</td>
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<td>5 or more incomplete pages</td>
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A complete page consists of 10 lines correctly and fully completed. If any of the 10 lines are not accurately completed the page will be considered incomplete and be graded accordingly.

Books will be checked for accuracy and content as well as level of completeness.

Each logbook must be turned in for credit on or before due date printed on your logbook. If the book is not received on or before the due date the student will receive a “0” for the Daily Log grade.

MINIMUM QUARTERLY CLINICAL COMPETENCY COMPLETION

<table>
<thead>
<tr>
<th>QUARTER</th>
<th>MINIMUM CUMULATIVE TOTAL</th>
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</thead>
<tbody>
<tr>
<td>I</td>
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<td>II</td>
<td>5</td>
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<td>III</td>
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<td>VI</td>
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<td>VII</td>
<td>45</td>
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<tr>
<td>VIII</td>
<td>Completion of all required comps</td>
</tr>
</tbody>
</table>

All clinical competencies must be completed in order to satisfy graduation eligibility requirements.

Failure to meet cumulative totals by Friday of Week 11 of any quarter will result in a third offense of the Progressive Discipline Policy.
RADIOLOGY ASSISTANT

Senior radiography students may be hired by a Regional Health Medical Imaging Department as Radiology Assistant to work as imaging staff. While working in capacity, the assistant is forbidden from supervising an MRP student’s work.

Radiology Assistant

Following are the guidelines for senior radiography students that are hired by the Medical Imaging Department to work as imaging staff.

1. While working in the capacity of a Radiology Assistant, I understand that I am never allowed to supervise a radiography program student. A student may assist me with an exam; however I will be responsible for all exposures taken during the procedure and take full responsibility for images produced.

2. While working in the capacity of a Radiology Assistant, I understand that I am never allowed to approve a radiography program student’s images for any procedure, complete a student evaluation or complete a student competency evaluation.

3. I understand that during scheduled radiography program hours I must abide by all radiology program rules. I will not perform any exams without the appropriate level of supervision as outlined by the program handbook and the Joint Review Committee on Education in Radiologic Technology (JRCERT) standards.

- Failure to abide by these restrictions will place the student in direct violation of the program rules and will result in the immediate implementation of the progressive discipline policy and may result in immediate termination from the program.

I fully understand the above restrictions of the Radiology Assistant position. I agree to follow these restrictions in addition to all responsibilities designated by the Radiology Assistant job description.

__________________________________________ ______________________________
Employee Signature Date

____________________________________________
Print Name

____________________________________________
Witness Signature

**FINAL NOTE: Students NEVER supervise each other under any circumstances.**
Regional Health Rapid City Hospital
Medical Radiography Program

CLINICAL CONDUCT AGREEMENT FORM

I understand the policies listed below and I indicate that I agree to comply with each of them as initialed by me.

________ I will not perform any imaging procedures in rooms 3 and 4 (in ED) unless a qualified radiographer is present.

________ I will not perform any imaging procedures in surgery unless a qualified radiographer is present in the same room.

________ I will not perform any portable imaging procedures unless a qualified radiographer is present.

________ I will not jeopardize my status with the RHRC-MRP by performing unauthorized procedures.

________ I will perform ALL repeats in the presence of a qualified radiographer.

________ I will observe the qualified radiographer if my attempted repeat image is unsatisfactory as they perform additional repeat images.

_________________________________________________________________

Student signature
Date
Faculty

**FINAL NOTE: Students NEVER supervise each other under any circumstances.**