

# MATC

## RADIOGRAPHY PROGRAM MANUAL



2021-2022

# **MISSION STATEMENTS**

## **MILWAUKEE AREA TECHNICAL COLLEGE MISSION STATEMENT**

Education that transforms lives, industry, and community

## **SCHOOL OF HEALTH SCIENCES MISSION STATEMENT**

The Healthcare Pathway provides quality educational experiences that enrich and empower students for service in healthcare through collaboration with community partners.

## **RADIOGRAPHY MISSION STATEMENT**

The Radiography Program will provide a quality education to include both didactic and clinical experiences. This will prepare graduates to obtain the necessary certification and licensing required for medical imaging professionals in today's dynamic workplace.

# RADIOGRAPHY DIRECTORY

## MILWAUKEE AREA TECHNICAL COLLEGE

700 WEST STATE STREET

MILWAUKEE, WI 53233

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# MILWAUKEE AREA TECHNICAL COLLEGE HEALTH OCCUPATIONS DIVISION

## Program Expectations Radiology

### I. Program Philosophy and Goals

The Associate Degree Program in Radiologic Technology at Milwaukee Area Technical College is designed to provide students with technical skills and competence to perform basic Radiologic procedures and eligibility to write the National Certification Examination (American Registry of Radiologic Technologists in Radiography). To achieve these goals, the curriculum is planned with courses that provide knowledge and skill in radiography as well as sciences, communication and humanities.

Faculty and administration believe that education should be contemporary, meaningful and involve a shared responsibility. Active involvement of students is necessary in an effective teaching-learning process. Thus, the program provides planned opportunities and resources to:

- Gain knowledge and develop technical skills needed to perform radiologic procedures using techniques that protect humans from unnecessary radiation.
- The radiography program complies with the following statement: MATC is an Affirmative Action/ Equal Opportunity Institution and complies with all of the Americans with Disabilities Act.

### II. Program Prerequisites

See Current MATC Bulletin.

Costs have been projected as accurately as possible. However, all costs must be considered approximate. Semester and total program costs include tuition, books, fees, supplies, and special tooling and/or equipment.

- Lead Marker  
\$25.00 per set replacement markers- must order sets only
- Film Badge  
\$50.00 badge replacement fee – must be ordered through Program Clinical Coordinator
- Books: Required textbooks will be listed on each course syllabus distributed on the first day of class. The students will be required to purchase books from the MATC bookstore.

*The major textbook expense occurs in Semester 1. Although there are additional book expenses in other semesters the cost is less significant.*

**MATC PROGRAM INFORMATION SHEET**

**PROGRAM NAME: RADIOGRAPHY**

**2021-2022 Program Costs**

Costs have been projected as accurately as possible. However, all costs must be considered approximate. Semester and total program costs include tuition, books, fees, supplies, and special tooling and/or equipment.

General Education Courses	\$2540.80
First semester	\$2865.31
Second semester	\$1588.70
Summer	\$476.40
Third semester	\$1829.20
Fourth semester	\$1429.20
Summer	\$317.60

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Total \$11, 047.21\*

\*Costs are subject to change

**Graduate Employment (2016)**

Graduate employment data is gathered from a survey of graduates and from data provided by instructors, deans, and others. Entry-level wage and salary information is calculated only for jobs which were acquired during enrollment or after graduation from MATC.

Percent Employed Related	Average Annual Median Wage
100%	\$45, 756 (taken from the WI Technical College System database 2021)

### III. Specific Program Objectives

Successful Participants will:

- Apply radiation protection principles when performing radiologic procedures
- Apply knowledge of anatomy, positioning and radiographic techniques when performing radiologic procedures
- Apply knowledge when evaluating radiographs for technique, positioning and other technical qualities.
- Provide patient care essential to radiologic procedures.
- Recognize emergency patient condition as and initiate lifesaving first aid. Student must obtain CPR certification from a certified agency before the start date of RADT 168. Current certification must be maintained.
- Be eligible to write the National Certification Examination given by the American Registry of Radiologic Technologists in Radiography. ARRT mandates completes of 37 procedures, 10 mandatory patient care activities and 15 elective radiographic procedures.
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### IV. Program Curriculum Sequence for Technical Courses

- This is a full-time program with course sequencing that encompasses: four semesters, a six-week summer session and six-week externship.
- The curriculum focuses on theoretical aspects of radiography, and applied clinical experiences in radiography departments. Radiation safety is practiced at all times.

#### Semester 1 Fall

Technical Courses	Duration	Credits
RADT 149 Radiographic Anatomy and Procedures 1	16 weeks	5
RADT 158 Intro to Radiography	16 weeks	3
RADT 159 Radiographic Imaging 1	16 weeks	3
Radiography Clinical Practice 1	16 weeks	2

#### Semester 2 Spring

Technical Courses	Duration	Credits
RADT 191 Radiographic Anatomy and Procedures 2	16 weeks	5
RADT 230 Advanced Radiographic Imaging	16 weeks	2
Radiography Clinical Practice 2	16 weeks	3

### Semester 3 Summer

Technical Course	Duration	Credits
RADT 193 Radiography Clinical Practice 3	6 weeks	3

### Semester 4 Fall

Technical Courses	Duration	Credits
RADT 189 Radiographic Pathology	16 weeks	1
RADT 194 Imaging Equipment Operation	16 weeks	3
RADT 231 Imaging Modalities	16 weeks	2
Radiography Clinical Practice 4	16 weeks	3

### Semester 5 Spring

Technical Courses	Duration	Credits
RADT 174 ARRT Certification Seminar	16 weeks	2
RADT 195 Radiographic Quality Analysis	16 weeks	2
RADT 197 Radiation Protection and Biology	16 weeks	3
RADT 190 Radiography Clinical Practice 5	16 weeks	2

### Semester 6 Summer (Externship)

Technical Course	Duration	Credits
RADT 198 Radiography Clinical Practice 6	6 weeks	2

## V. Grievances

Throughout your academic experience, you may be faced with a problem or even a situation you may not understand. We have a system that will assist you in resolving problems efficiently and effectively. Should you encounter a problem – academic or nonacademic – the college provides two avenues for your concern. If your concern involves discrimination or harassment, complete the Discrimination-Harassment Reporting Form. For all other concerns or comments, please complete a Student Feedback and Concerns Form.

**See Attachment A**

## VI. Program Attendance Policy : Didactic and Clinical

- Learning experiences in Health Occupations programs proceed from the simple to the complex. Regular and punctual attendance is essential. Tardiness interferes with the education process of others. Student attendance is monitored, and an early alert system will be utilized in order to inform a student when he/she is at risk of being dropped for absenteeism before the end of a course whenever it is no longer possible through make-up work or individual study, or the student to meet the course objectives as determined by the instructor. The instructor will counsel the student as soon as it becomes apparent that the student can no longer meet the course objectives in the time remaining. This applies to lecture, school, laboratory and clinical off-campus experience.  
**See Attachment B**
- Every program in Health Occupations has unique requirements needed to accomplish clinical and classroom objectives. These requirements are stated in individual course syllabi and must be adhered to by students. Students should refer to the course attendance policy given out with each syllabus for additional information.
- Absence From Examination:  
See individual course syllabus.
- Notification of Absence:  
For a lecture or lab, e-mail your instructor as designated on the course syllabus before 6:30 a.m. For a clinical course, **email instructor and call** the clinical site by 6:30am.
- **Auditing:** Students must have the permission of the appropriate Health Science administrative member to audit a course(s) in a Health Science program. Students who have permission to audit are subject to the same policies as the regularly enrolled students with regard to attendance and fees. The number of individuals auditing any one course may be limited. Attendance Policy for MATC as it appears in the Student Handbook.

## VI. Pregnancy Policy

### ANY STUDENT WHO BELIEVES SHE MAY BE PREGNANT MUST FOLLOW THESE PROCEDURES

#### Title IX Statement

- Milwaukee Area Technical College does not discriminate against any student on the basis of pregnancy or related conditions and will comply fully with the Title IX regulations. Absences due to medical conditions relating to pregnancy and maternity leave will be excused for as long as deemed medically necessary by a student's doctor and students will be given the opportunity to make up missed work. Students needing assistance can see accommodations from Student Accommodation Services located on all campuses. Please contact Catherine Bohte, Coordinator/Instructor at 414-297-6750 or bohtec@matc.edu.  
**See Attachment C**



## VII. Conduct

See School of Healthcare Pathway Student Handbook, pg 45.

Please note that *no* guests (this includes children) are permitted to attend lectures, labs, exams or clinical.

## VIII. Radiation Safety

### Radiation Safety

- Sign Radiation Risk form provided during program orientation on the first day of radiography classes. The form will be submitted for your permanent file.  
**See Attachment D**
- **Radiation Monitor Program**
  - ALL PARTICIPANTS IN RADIOGRAPHY are required to wear a radiation monitor during all experiences using ionizing radiation.
  - Radiation dosimetry monitors are exchanged monthly
  - Each participant shall review monthly dosimetry reports and initial document for verification
  - The radiation monitor is to be worn near the neck and outside a lead apron if worn.
  - Fetal monitors will be made available to pregnant students. An additional fee is required.

## IX. Health Requirements

- **RECORDS:**

It is expected that you now have completed and submitted all health records. If for some reason this has not been accomplished, the Clinical Compliance Assistance of the Healthcare Pathway **will give you a final date for submitting these records. If the records are not in by the stated date, you will receive a cancellation notice and your place in class is given to another student.**
- Program admission is contingent upon completion of medical exam requirements established in the admissions office.
- CastleBranch requirements  
**See Attachment E for CPR requirements.**

## X. Background Information Disclosure Instructions

Students involved in patient care services are required to complete a self-disclosure Background Information Disclosure Form and an electronic criminal history search from the Wisconsin Department of Justice. **This step is completed through Castlebranch.**

## XI. Graduation Requirements/ Moral Fitness for Registry Examination

- **Graduation Requirements**

To graduate from the Radiography Program, students must fulfill the following requirements:

- Complete all course and clinical requirements.
- Receive an 80% or better in Radiography courses.
- Complete "Application for Graduation" form.
- Fulfill all financial obligations at MATC.

- **ARRT Standards of Regulations: See Attachment F**

The ARRT Ethics Committee reviews all potential violations of the ARRT Rules and Regulations. For students applying for examination this includes anyone convicted of a misdemeanor or felony. Students who have been convicted of or plead guilty to or pled nolo contendere to a crime may request a pre-application review of the violation in order to obtain a ruling on the impact on their eligibility for examination. Students who are still under any sentence of the courts, including probation or parole, will be denied eligibility for examination until the sentence is completed and the Committee can complete the review. A special pre-application review form can be requested from ARRT office. Submitting a pre-application during the first year of the education program, the student may avoid delays in processing the examination application which is made at the time of graduation. See address below for form request:

ARRT

1255 Northland Drive

Telephone: (612) 687-0048

St. Paul, MN 55120

- **ARRT 3- Time 3 year rule**

Applicants found to be eligible for examination are allowed three attempts to pass the certification examination. The examinees must complete the three attempts within a three year period of time. When either three unsuccessful attempts have been made or three years have expired, the individual is no longer considered eligible. This rule applies only to the three basic examinations. Eligibility to retake the examination one additional time may be obtained by submitting documentation indicating completion of remedial activities acceptable to the ARRT following the last participation in the examination. Remediation must be completed after the failing attempt must occur within the one-year period following the third unsuccessful attempt.

Those individuals failing the fourth attempt or waiting longer than one year following the third unsuccessful attempt may only become eligible by re-entering and graduation from an accredited educational program. Certificates of completion will be accepted from those programs which will not allow individuals to re-enroll and re-graduate after exceeding the three time, three year limit.

ARRT

1255 Northland Drive

Telephone: (612) 687-0048

## XII. HIPAA

### The HIPAA Privacy Rule

The HIPAA Privacy Rule establishes national standards to protect individuals' medical records and other personal health information and applies to health plans, health care clearinghouses, and those health care providers that conduct certain health care transactions electronically. The Rule requires appropriate safeguards to protect the privacy of personal health information, and sets limits and conditions on the uses and disclosures that may be made of such information without patient authorization. The Rule also gives patients rights over their health information, including rights to examine and obtain a copy of their health records, and to request corrections. **See Attachment G**

### STANDARD PRECAUTIONS

- Standard precautions will be used in the care of all patients (**see Attachment G**)
- Principles of body mechanics must be utilized to lift instruments, move equipment and transfer and assist in positioning a patient.
- Unnecessary exposure to radiation should be avoided.
- Students present when ionizing radiation is used must shield themselves with protective devices. **See Attachment D**

## XIII. Methods of Teaching

Specific teaching methods for individual courses vary. However, campus lectures usually discuss Radiologic theory, concepts and principals. Campus laboratory sessions usually include an instructional demonstration and hands on experience in a simulated situation. Clinical sessions include hands on experience in a real situation. **See Attachment H**

- **Faculty Responsibilities:** Each instructor has the responsibility to:
  - Meet course objectives
  - Develop and follow a course syllabus
  - Develop assessment mechanisms and techniques
  - Assess, document, and discuss assessments of student performances

- Maintain strict confidentiality regarding each student and their performance
- **Assessment**
  - Assessments are based on achievements of course objectives. Lecture and campus laboratory experiences are usually presented a semester before specific clinical assignments.
  - Objectives and assessment forms are given to students and personnel involved in the assessment process.
  - Students are assessed throughout each course and conferences are scheduled periodically with the program faculty
  - A composite overall assessment is performed at midterm and at the termination of each semester. Certain situations may require more frequent assessments.
- **Advising**
  - Faculty will schedule student conferences at week 6 and week 12 of the semester and as needed through the school year to discuss grades, progress, and difficulties. In addition, school counselors are available to assist with other student needs/inquiries.
  - Students may schedule appointments with faculty, school counselors, or Retention coaches of the Healthcare Pathway to discuss scholastic concerns.

- **ADA ACCOMODATIONS:**

**ADA Statement:**

If you have a disability that impacts your classroom performance and wish to request an accommodation, contact the Center for Special Needs at (414) 297-6838. They may require documentation regarding your disability to enable them to comply with your request. Admission of a disability is voluntary and will be handled in a confidential manner. MATC does not discriminate against individuals with disabilities and fully complies with the Americans with Disabilities Act.

- **Grading Scale**

- Individual student assessments are prepared periodically by instructors. Each student will be afforded an opportunity to discuss these assessments privately with the instructor and given the opportunity to respond to teacher’s comments. The reports become a part of the student’s active record and are considered in grade computation.
- In order to continue in the Radiography program, students must maintain a minimum of 80% “C”
- Student grades are determined by achievement of course objectives. The quality of work in the academic Radiography courses are expressed by the following

A	100-95	B	89-87	C	81-80
A -	94-92	B-	86-85	U	Below 80

B+ 91-90

C+ 84-82

#### **XIV. Clinical Course Assignments**

- A. Specific course assignments are identified at the beginning of each course in the course syllabus.
  - B. Students are assigned a hospital affiliation for RADT 168 and a clinic location will be added in RADT 191. In RADT 199 the students will change hospitals to maximize clinical experiences.
  - C. All clinical assignments in radiography clinical courses are made in advance by college faculty. Students are required to complete a total of 1584 clinical hours, this includes a mandatory two-week rotation at Children’s Hospital AND second shift rotations in senior year.
  - D. Students will perform radiologic procedures according to program policy. In the absence of an MATC instructor, the clinical supervisor for the department will direct and supervisor learning activities.
  - E. Lead identification markers for imaging shall be purchased by the student at the cost indicated in Fee Information Sections XV. Lead markers are to be used in the hospital and labs. Students will incur the cost of replacements markers when they are lost.
  - F. Questions concerning clinical assignments should be directed to MATC faculty first. In the absence of a faculty member immediate concerns should be directed to the clinical supervisor.
  - G. Students are required to keep a log of procedures performed independently during clinical experiences.
  - H. Students must achieve safe, competent practice in all clinical skills.
  - I. **All repeated radiographs must be performed under the direct supervision of a registered technologist to insure minimal radiation exposure to the patient.**
- **Cancellation of Clinical Assignments:** Cancellation may be due to:
    - Unsatisfactory performance
    - Health status that is detrimental to the successful completion of the assignment.
    - Determination that continuance in the program is not in the best interest of the facility, the college or the student.
  
  - **Transportation**
    - Clinical assignments
      1. The student is responsible for transportation to and from all clinical facilities.
      2. Clinical sites are not all accessible by public transportation. Students will have to make their own transportation arrangements to be in attendance.

- **ACCIDENTS OR INJURY TO STUDENT WHILE IN CLINICAL AGENCY:** Students are responsible for securing their own health insurance. Students are responsible for expenses incurred resulting from accidents or illnesses occurring while they are in classrooms at MATC, in a clinical agency, or while they are in route to or from a clinical agency. In case of injury or illness in a clinical agency, the policy of the agency is to be followed regarding emergency services to be given. **The cost of such services will be incurred by the student.**
- A continued state of good physical and mental health must be maintained during the program
- Consult your physician for all medical information and advice on Hepatitis B Vaccine.
- Students must adhere to the prescribed safety practices in both the school laboratory and clinical facility
- Clinical instructors cannot assume the responsibility for assigning student clinical experiences with patient contacts that are free from communicable diseases, therefore, it is the responsibility of the student to work safely and to take proper precautions.

**See Attachment I:**

- **Clinical Dress Code**
- **Direct/indirect Supervision**
- **Performance Warning**

## **RADIOGRAPHY CONTINGENCY PLAN**

In response to a catastrophic event including, but not limited to the physical location of the campus, classroom(s), laboratories, faculty offices, student services, and clinical setting access.

## **1. Communication**

- a. Students- All didactic coursework communication with students will be delivered through the MATC's Blackboard platform and the college's student gmail account.
- b. Clinical Affiliations- All communication will be delivered by the Program Director/ Clinical Coordinator via MATC's college email. A virtual meeting will be scheduled to disseminate information and answer questions.
- c. In the event of a program disruption, the Healthcare Pathway Dean and Dean of Student Services will be notified.

## **2. Resources**

- a. Blackboard will be utilized for didactic instruction in the events of disruption.
- b. Faculty training is assigned, completed, and tracked annually through MATC's Sum Total Learning platform.
- c. Resources are currently being utilized.

## **3. Situational Implementation of the Contingency Plan**

- a. Any didactic disruption will pivot to online instruction. The college has a resource center for students to secure a Chromebook for the duration of the disruption.
- b. In the event of a long term clinical interruption the program will implement MATC's course requirement of 80% completion of clinical hours. The remaining 20% of course work will be fulfilled by additional didactic assignments related to the clinical experience via Radiography Professional Standards and Educational Organizations.
- c. Missed clinical time due to a catastrophic event will result in delayed course/ program completion within the JRCERT guidelines.

## **4. Program Leadership/Administration**

- a. The Program Director will maintain communication with MATC and JRCERT.
- b. The program will communicate updates and any deviation from the prepared contingency plan based on the disaster situation.
- c. The program will schedule a meeting with the Advisory Board and Clinical Affiliates for feedback to assure appropriate program operations.

## **5. Sponsoring Institution**

- a. The program will work with the college resources to identify changes in financial aid, course grading, and course sequencing.
- b. The college offers wellness support services for students and faculty.

**6. Prepared Recovery from a Contingency Plan**

- a. To maintain integrity of the radiography professional standards and meet the JRCERT requirements, the radiography program will ensure any course credit awarded meets the requirements of 80% of course/clinical outcomes and hours are met.
- b. The contingency plan will be reviewed annually. Any modifications will be presented to the Radiography Advisory Board.

## **INDEX FOR ATTACHMENTS**



- A) Grievance Policy**
- B) Program Attendance Policy**
- C) Pregnancy Policy**
- D) Radiation Exposure Risks**
- E) CPR Requirements**
- F) ARRT Standards of Ethics**
- G) HIPAA/Standard Precautions/Communicable Disease**
- H) Energized Lab Policy and Receipt form**
- I) Clinical Policies**

# ATTACHMENT A

## Grievance Policy

<b>Reviewed and Approved By:</b>	<b>Original Adoption:</b> January 2008
	<b>Reviewed and Revised:</b>

Faculty	December 2018
Associate Dean	

**GRIEVANCE POLICY**

GRIEVANCES/CONCERNS/PROBLEMS

Throughout your academic experience, you may be faced with a problem or even a situation you may not understand. We have a system that will assist you in resolving problems efficiently and effectively.

- The instructor will meet with the student after the student files a complaint. (If situation is not resolved)
- Meet with the instructional chairperson or program coordinator within five business days. (If situation is not resolved)
- Complete a “Student Appeal” Form within five business days. (available in H116) or on-line at <http://www.matc.edu/search.html?q=student%20feedback%20and%20concerns#gsc.tab=0&gsc.q=student%20feedback%20and%20concerns&gsc.page=1>
- Meet with Associate Dean within five business days. (If situation is not resolved)
- Meet with Dean of Health Sciences within five business days. (If situation is not resolved)
- Contact the Professional Standards Committee in the Office of Student Life, Room S303 within five business days.

Link to MATC Student Code of Conduct at

<https://www.matc.edu/student-life-resources/student-life/studentcodeofconduct.pdf> (refer to page 16)

# **ATTACHMENT B**

## **PROGRAM ATTENDANCE POLICY**

**MILWAUKEE AREA TECHNICAL COLLEGE**

MATC is an Affirmative Action/ Equal Opportunity Institution  
and complies with all requirements of the Americans with Disabilities Act

## CLASSROOM ATTENDANCE POLICY

Reviewed and Approved By:	Original Adoption: 2014
Faculty	May 2014
Associate Dean	December 2018
Attendance policy is reviewed annually. Students are required to follow the most current policy.	

- **On-time attendance is required.**
- **Students who are absent 3 consecutive class/lab periods will receive a U for the course.**
- **For courses that contain both lecture and lab sessions, students who incur a fourth (4<sup>th</sup>) absence for a scheduled class &/or lab period during the semester will receive a U for the course.**
- **For courses that are lecture only, students who incur a third (3<sup>rd</sup>) absence for the semester will receive a U for the course.**
- **Three tardies do equal 1 absence.**

# **ATTACHMENT C**

## **PREGNANCY POLICY**

<b>Reviewed and Approved By:</b>	<b>Original Adoption: Jan. 2011</b>
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	December 2018
Pregnancy policy is reviewed annually. Students are required to follow the most current policy.	

**PREGNANCY POLICY**

**Title IX Statement**

Milwaukee Area Technical College does not discriminate against any student on the basis of pregnancy or related conditions and will comply fully with the Title IX regulations. Absences due to medical conditions relating to pregnancy and maternity leave will be excused for as long as deemed medically necessary by a student’s doctor and students will be given the opportunity to make up missed work. Students needing assistance can see accommodations from Student Accommodation Services located on all campuses. Please contact Catherine Bohte, Coordinator/Instructor at 414-297-6750 or bohtec@matc.edu.

Since ionizing radiation has been determined to be harmful to the developing embryo/fetus, the following compliance is required to protect the health of the student and child.

The pregnant student **MAY ELECT** to notify the Program Director and/or Clinical Coordinator of the pregnancy. Once the pregnancy is declared, a conference will be held with the Program Director and/or Clinical Coordinator to review radiation risks, dose limit guidelines, and the cardinal principles of radiation protection. The student must present a written statement from her physician that indicates the expected date of delivery and her fitness for clinical education. The declared pregnant student will be administered a fetal badge to be worn at the waist.

The recommendations of the National Council on Radiation Protection Report #116 states that a dose to the fetus from occupational exposure of the pregnant mother shall not exceed .05 rem per month not to exceed .5 rem for the entire pregnancy.

The student may request a leave of absence when she, the physician, or the Program Director believes that it is no longer viable for her to function in a manner conducive to learning. The return of the student must be approved by her physician along with a written release that she may return to her clinical assignment with no restrictions.

The student will be informed of her options with regard to this policy prior to enrolling and again during program orientation.

The student may elect to continue in the radiography program, fulfilling all program requirements as contained within the curriculum, and adhere to all radiation protection guidelines and recommendations as follows:

- The student will be provided an additional dosimeter to monitor exposure to the fetus. An additional fee is required.
- The student will be required to adhere to the provisions of ALARA.
- The recommendations of the National Council on Radiation Protection Report #116 states that a dose to the fetus from occupational exposure of the pregnant mother shall not exceed .05 rem per month not to exceed .5 rem for the entire pregnancy.

The student **MAY WITHDRAW in writing** the declaration of pregnancy at any time. Retraction of the pregnancy declaration requires the student to abide by the general guidelines for radiation workers. Therefore, after pregnancy declaration retraction, the student will be monitored according to general guidelines for radiation workers as described by the National Council on Radiation Protection Report #116 and State Laws.

The student may choose not to declare the pregnancy to the program.

#### **Radiography Program requirements for the pregnant student**

**All** missed clinical hours due to the pregnancy must be made up. The student will receive an "I" (incomplete) for the semester clinical grade in which hours were missed. The missed hours will be made up during the dates of the next college clinical session. **ALL MISSED CLINICAL HOURS ARE REQUIRED FOR PROGRAM COMPLETION.** (Please refer to the attendance policy)

**\*\*THE PROGRAM WILL NOT BE RESPONSIBLE FOR ANY INJURIES TO THE EMBRYO/FETUS SHOULD THE STUDENT DECIDE TO REMAIN IN THE PROGRAM DURING THE ENTIRE GESTATIONAL PERIOD\*\***



**Milwaukee Area Technical College  
Radiography Program**

**Pregnancy Declaration Form**

TO WHOM IT MAY CONCERN:

In accordance with state regulations, I wish to declare that I am pregnant. My estimated date of conception is: \_\_\_\_\_ My estimated delivery date is: \_\_\_\_\_

In making this declaration, I wish to be afforded the protection which is specified under this regulation specifically that the unborn child shall not receive in excess of .5rem during the term of pregnancy. I understand that if records show that the unborn child has received 450millirem or greater at the time of this declaration, the unborn child is permitted to receive an additional dose of no more than 50millirem during the term of the pregnancy.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Declaration

Name of Student (Printed)

Signature of Student

RECEIPT OF DECLARATION ACKNOWLEDGED:

\_\_\_\_\_

Program Director Signature

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*In accordance with state regulations, I wish to withdraw my declaration of pregnancy.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of withdrawal

Signature of Student

Program Director Signature

# **ATTACHMENT D**

## **RADIATION EXPOSURE RISKS**

# RADIATION EXPOSURE RISKS

Research studies show that the risk of medical disorders such as leukemia and other cancers increase when individuals are exposed to significant amounts of radiation. With new diagnostic imaging systems the radiation dose required to perform radiologic procedures has been greatly reduced for both the patient and x-ray machine operator. In addition to technological advances in the equipment, the following measures will reduce the amount of radiation a patient or radiation worker could receive during a radiologic procedure.

## Implement the ALARA principle

Radiation exposure should be limited to *As Low As Reasonably Achievable*

## Area of Radiation Exposure

The smaller the area of radiation exposure the greater the reduction in radiation exposure to individuals in the room

## Cardinal Rules

Apply the three principle methods that protect against unnecessary radiation:

### 1. Time

Any exposure to radiation increases with the time an individual is exposed. Time spent in a radiation exposure area should be as limited as possible.

### 2. Distance

A greater distance between the radiation source and the individual will greatly reduce the radiation exposure dose.

### 3. Shielding

Shielding with lead barriers will eliminate most radiation used in diagnostic radiography.

## MILWAUKEE AREA TECHNICAL COLLEGE RADIATION EXPOSURE RISKS

All participants in the programs identified in this memo are required to wear a film badge during all experiences using radiation. The film badge records show how much radiation a participant receives. Radiation dosage reports are reviewed monthly by the Program Director and Clinical Coordinator then given to all participants. The effective dose limit a participant can receive is calculated in accordance with federal regulations.

Although informing the Program Director is voluntary, it is strongly recommended so that continual monitoring of radiation exposure to the fetus can occur. Pregnant students are encouraged to submit a written statement from their physician that indicates the expected date of delivery and her fitness for clinical education. The student may choose to take a leave of absence during her pregnancy or she may continue with her clinical education.

The following National Council on Radiation Protection and measurement (NCRP) are strictly adhered to:

<b>NCRP Report No. 39</b>	<b>Basic Radiation Protection Criteria January 15, 1971</b>
<b>NCRP Report No. 53 Women</b>	<b>Radiation Dosage Limit for Embryo and Fetus in Occupationally Exposed March 1, 1982</b>
<b>NCRP Report No. 54 Women</b>	<b>Medical Radiation Exposure of Pregnant and Potentially Pregnant September 15, 1979 July 1, 1974</b>
<b>NCRP Procedure No. 4 September 1, 1983</b>	<b>Radiation Protection and new Medical Diagnostic Approaches</b>

<b>Wisconsin Administrative Code</b>	<b>Radiation Protection HHS 157 September, 1982</b>
<b>NCRP Report No.91</b>	<b>Recommendations on limits for Exposure to Ionizing Radiation</b>
<b>NCRP Report No.116</b>	<b>Limitation to Exposure to Ionizing Radiation (replaced NCRP Report No.91)1993</b>
<b>NCRP Report No.160</b>	<b>Ionizing Radiation Exposure of the Population of the United States</b>

<b>Reviewed and Approved By:</b>	<b>Original Adoption:</b> January 2008
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	
	January 2011
	January 2012
	May 2013
	March 2022

**RADIATION DOSIMETER POLICY**

The purpose of this policy is to specify the requirements for personnel radiation monitoring for the enrolled students.

Each Radiography student is subject to the occupational exposure limits and the requirements for the determination of the doses which are stated in the NCRP.

All students are instructed to implement the ALARA principle – As Low As Reasonably Achievable and the three Cardinal Principles of utilizing radiation Time, Distance and Shielding. These concepts are instructed during orientation and curriculum courses: Intro to Radiography, Imaging 1, and Radiation Protection.

Since ionizing radiation has been determined to be harmful to the developing embryo/fetus, the following compliance is required to protect the health of the student and child. The pregnant student **MAY ELECT** to notify the Program Director and/or Clinical Coordinator of the pregnancy. Once the pregnancy is declared, a conference will be held with the Program Director and/or Clinical Coordinator to review radiation risks, dose limit guidelines, and the cardinal principles of radiation protection. The declared pregnant student will be administered a fetal badge to be worn at the waist.

The estimate of radiation exposure made from the monitoring devices will only be correct if these rules regarding the wearing of the badges are observed:

- The radiation dosimeter shall be worn at the collar all times while working at assigned clinical campuses.
- Wear the badge at collar level outside the lead apron
- The radiation dosimeter shall be worn at all times while attending classroom labs that utilize the energized equipment.
- Leave the radiation dosimeter in a safe place.
- Never wear a radiation dosimeter issued to another person.
- The radiation dosimeter issued to you is your responsibility.
- Turn it in at the right time in exchange for the most current dosimeter.
- Do not tamper with the radiation dosimeter. This act may result in the suspension of the student from the Radiography program.

- Report loss of badge immediately to a member of the faculty. It is the student's responsibility to cover the replacement fee.
- Report any other incident relative to the wearing of the radiation dosimeter (such as possible accidental exposure when badge is not worn) to a member of the faculty. This will be placed in the student's file for future reference.
- The MATC radiation dosimeter is not to be worn while on duty at facilities not assigned by the program.
- The badge is the property of the college and meant to indicate the efficiency of student's safety while actively enrolled in the program.
- It is the responsibility of the faculty to see that the above rules are observed and to report radiation protection problems to the Clinical Coordinator or Program Director.

Report reviewed upon receipt by the Program Director or designated faculty. Students and faculty will view monthly dosimeter reports. Students are required to initial their reading for verification of the monthly report.

Regarding all student reports:

- Dose of 50 mrem or less – No action taken.

Any student receiving a high reading in one monitoring period:

- Dose of 51 mrem – Will be counseled in radiation protection within one school week.
- Dose of 100 mrem or more – Will be immediately removed from clinical until the incident is investigated and a resolution is decided upon.

# **ATTACHMENT E**

## **CPR REQUIREMENTS**



## **RADIOGRAPHY PROGRAM CPR REQUIREMENTS**

**A Health Care Provider Cardiopulmonary Resuscitation (CPR) certificate is a prerequisite for entry into the first clinical course (RADT 168).**

**CPR certification is required due to the variable health care needs of clients students are assigned to care for in clinical settings.**

**CPR class must include CPR for infant, child, and adult. It must also include CPR performed by one person and two people.**

### **American Heart--CPR**

- Classes can be taken from MATC, health care employers, or American Heart
- Students must remain certified through graduation from their program.

Verification Process:

1. Initial proof of CPR certification must be shown to the program coordinator.
2. Proof of continuous CPR certification must be shown to a program coordinator each semester thereafter.
3. Program coordinator will verify certification prior to the first clinical course and validate currency until graduation.

Effective: 2011

# **ATTACHMENT F**

## **ARRT Standards of Regulations**

## **ARRT STANDARDS OF ETHICS:** <https://www.asrt.org/main/standards-regulations>

### **National Certification Requirement Process**

#### Eligibility for Certification

- **General Qualifications**

Candidates must comply with the "Rules of Ethics "contained in the ARRT Standards of Ethics. The Rules of Ethics are standards of minimally acceptable professional conduct for all presently Registered Technologist and applicants. The Rules of Ethics are intended to promote the protection, safety and comfort of patients. Registered Technologists and applicants engaging in any of the conducts or activities noted in the Rules of Ethics, or who permit the occurrence of said conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described. One issue addressed by the Rule of Ethics is the conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the sole expectation of speeding and parking violations. All alcohol and/or drug related violation must be reported. Conviction as used in this provision includes a criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld or not entered, or a criminal proceeding where the individual enters a plea of guilty or nolo contendere. Convictions which have been expunged must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility. Those who do not comply with the Rules of Ethics must supply a written explanation, including court documentation of the charges, with the application for examination. Additional information may be found in the ARRT Rules and Regulations and in the ARRT Standards of Ethics (ATTACHMENT L). Individuals who have violated the Rules of Ethics may file a pre-application with the ARRT in order to obtain a ruling of the impact on their eligibility for examination. The individual may submit the pre-application at any time either before or after entry into an accredited educational program. This process may enable the individual to avoid the delays in processing the application for examination which is made at the time of graduation. The pre-application is not contained in this Handbook and must be requested directly from the ARRT. Submission of a pre-application does not waive the application for examination, the examination fee, the application deadline or any of the other application procedures.

- **Educational Requirements /Regular Eligibility**

Candidates must have successfully completed a program of formal education which is accredited by a mechanism acceptable to the ARRT. Applicants for registration as radiographer,

nuclear medicine technologist, or radiation therapists must have successfully completed an educational program in radiography, nuclear medicine technology or radiation therapy technology, respectively, which has been accredited by a mechanism acceptable to the ARRT. Application for examination must be made within three years of graduation.

- **Application Procedures**

**Application forms**

All accredited educational program directors receive a supply of Examinee Applications in the fall of each year. Requests for additional information should be directed to the ARRT at 1255 Northland Drive, St. Paul, MN 55120-1155. Website: [arrt.org](http://arrt.org)

**Eligibility Deadlines**

All applicants must have completed the eligibility requirements by the date of the examination. The director of the educational program indicated on the application is contacted to verify that the applicant has successfully completed both clinical and didactic phases of the approved program.

**Examination Fees (Subject to change)**

The fee changes periodically. The average cost is \$225.00. All information needed for the application process is located in the application handbook.

# **ATTACHMENT G**

## **HIPAA COMPLIANCE / STANDARD PRECAUTIONS/COMMUNICABLE DISEASE**

CONFIDENTIALITY AGREEMENT

Student: \_\_\_\_\_

Program: \_\_\_\_\_

Milwaukee Area Technical College ("MATC") provides learning experiences for health science students from outside our settings. These students have the opportunity to observe and participate in the care of patients. Federal and state laws, accreditation standards, and professional ethics require that all health science students maintain the confidentiality of patient information to the greatest extent possible. The purpose of this agreement is to establish the following understanding between clinical sites and the health science student regarding confidentiality of patient information.

I understand that I am responsible for reading and understanding the attached HIPAA training document. Should I have questions regarding the content, I will consult with my clinical supervisor and/or MATC's HIPAA Privacy Officer.

I understand that during my participation in my clinical experience, I may come in contact with the PHI of clinical patients. PHI means any information that identifies a patient, including demographic, financial, and medical, that is created by a health care provider or health plan that relates to the past, present or future condition, treatment, or payment of the individual.

I understand that HIPAA includes all patient identifiable information in any medium, including, but not limited to oral, written, hard copy, and electronic (whether retrieved on screen or contained on a computer disc).

I understand that HIPAA is to be held in strict confidence and I agree that I will not:

1. Review any individually identifiable information not directly related to my participation in an educational experience.
2. Discuss any PHI with anyone who does not have a legitimate, professional need-to-know the information.
3. Disclose the information to any person or organization outside MATC without proper, written authorization from the patient.

I understand that the obligations outlined above will continue after my participation in this educational experience.

I understand that violation of any of the above will result in termination from participation in the educational experience and may lead to civil and/or criminal penalties pursuant to the Health Insurance Portability and Accountability Act of 1996.

Signature of Student \_\_\_\_\_ DATE \_\_\_\_\_

## MILWAUKEE AREA TECHNICAL COLLEGE RADIOGRAPHY

### STANDARD PRECAUTIONS FOR RADIOGRAPHY

#### I. PURPOSE

This statement provides guidelines to be used by employees/volunteers when dealing with patients' blood, body fluids, and secretions. Employees/volunteers are to take precautions to protect themselves from HIV/AIDS and other infections in the work environment.

This items falls into OSHA Category I: All job related procedures involve an inherent potential for contact with blood, body fluids, or tissues and/or a potential for spills or splashes of them. Use of appropriate protective measures is required for every employee engaged in these procedures.

#### II. POLICIES

##### A. Hand washing

- Hand washing with soap and water is required before and after contact with patients.
- Hands must be washed after gloves have been used.

##### Rationale:

- Gloves are NOT 100% protective and powder from gloves causes dry skin.
- Hand washing with soap and water is required when collecting or handling blood and/or body secretions or specimens, i.e., sputum, blood, spinal fluid, stool, urine, surgical specimens, etc.
- Hands and other skin surfaces must be washed immediately and thoroughly with soap and water if contaminated with blood or other body fluids.

##### B. Gloves:

- Gloves are to be worn when having direct contact with blood, sputum, wound drainage, urine, feces, mucous membranes and/or other body secretions.
- Gloves are to be changes after contact with each patient.
- If a glove is tom or punctured, it is to be removed and a new glove used as promptly as patient safety permits.
- Gloves are located in exam and treatment rooms, patient rooms, and other pertinent areas within departments and nursing units.

#### C. Masks/Protective Eyewear:

- Masks and safety glasses are required with a risk of splattering blood, body secretions, or body fluids is likely to occur as in suctioning, intubation, bronchoscopes, wound irrigations, surgical procedures, deliveries, etc. (this is not an all- inclusive list).
- Safety glasses are provided to nurses and other patient care employees. Otherwise glasses are combined with masks for urgent situations.
- Boxes of masks are located on isolation carts and in other strategic locations.

#### D. Clothing:

- When soiled with bloody fluids or blood occurs, a scrub suit may be worn for the remainder of the day.
- Ordinary laundry procedures are adequate for cleaning soiled clothing.
- Impervious gowns are to be worn if soiling of clothing may occur during a procedure or if soiling is possible during isolation.

#### E. Needle/Sharps:

- Sharp objects should be handled in such a manner as to prevent accidental cuts or punctures.
- Used needles should not be bent, broken, reinserted into their original sheath or unnecessarily handled. They must be discarded INTACT immediately after use into an impervious needle disposal box which is accessible in all clinical areas, including patient rooms.
- Needle boxes will be in patient rooms, exam rooms, med carts and other rooms where needles are used.
- Full needle boxes are locked and disposed by proper protocol.
- Grossly contaminated containers are to be cleaned with a disinfectant solution prior to delivery to another department.
- Blood spills should be cleaned up promptly with a disinfectant solution provided by Housekeeping. Gloves are to be worn during the process.
- Hands should be washed with soap and water after handling specimens.
- Specimens will be in rigid containers with a secure lid and placed in sealed clear plastic bags prior to transport.
- Lab specimens will be handled according to the hospital internal lab policy and be sterilized prior to removal from lab.



G. Delee/Pipetting:

- No mouth pipetting/delee suctioning is to occur at any time. Invasive Procedures (including post mortems):
- All procedures where blood or body fluids may have contact with employee's skin or mucous membranes, the employee MUST wear protective gown, mask, and eye protection.

H. Housekeeping:

- Housekeeping shall follow routine cleaning procedures as described in their internal policy/procedure manual to maintain a clean environment.
- Blood spill cleaning procedure
- Department will contact Housekeeping.
- If the spill is on tile floor, the employee put on gloves and uses paper towels to wipe up gross spill. A germicidal disinfectant is then used to clean the floor. All items are placed in red plastic infectious waste bag for disposal.
- If the spill is on carpeting, the employee wears gloves, covers the spill with paper towel and calls Housekeeping. (If on night duty, the employee will use carpet spot or cover with a wet towel)

I. Waste Disposal:

- Housekeeping Maintains solid waste disposal system including infectious waste disposal.
- Infectious waste from the nursing units and departments other than Lab or Respiratory Care's blood gas area are bagged in red plastic bags with Biohazard label and sealed.
- Needle boxes have the Biohazard label used to identify sharps/needles.

J. Cleaning of Reusable Equipment:

- Each department will maintain procedures for cleaning reusable equipment. The procedure will include protective garb to be worn during the process.
- Equipment to be returned to Central Service for reprocessing from isolation rooms will be placed in clear Biohazard labeled plastic bags.

## COMMUNICABLE DISEASE POLICY

A communicable disease is a disease which may be transmitted directly or indirectly from one individual to another due to an infectious agent or toxic product produced by it.

The diseases listed in the Wisconsin Statutes, Chapter H45 and Chapter 143, and the Wisconsin Administrative Codes, HSS 145, are declared to be communicable diseases. All suspected cases of communicable diseases shall be regarded as actual cases until proven otherwise, and all rules and regulations applicable to actual cases shall be applied to them. The guidelines established by the American Public Health Association in CONTROL OF COMMUNICABLE DISEASES IN MAN shall be followed in these cases. When isolation is required, staff and/or students will not be allowed to attend classes or work. Isolation is the separation of cases or carries from other persons in such places and under such conditions as to prevent the direct or indirect conveyance of the infectious agent.

### MILWAUKEE AREA TECHNICAL COLLEGE WILL:

- Provide upon request, educational information for staff and students to increase awareness of communicable diseases and how they are transmitted.
- Be familiar with sources of and refer persons for screening tests and diagnostic services when requested or if Health Center staff observe symptoms of a communicable disease.
- Preserve the privacy rights of infected individuals.
- Student or staff members with a suspected communicable disease should report to the Health Center for evaluation and referral to their private physician or local health department.
- In the event that the Health Center is not staffed, any teacher, supervisor, or day care worker knowing of a CASE or suspected CASE in the school shall notify the local health department. This should be followed by a written report to the Health Center. It is your responsibility to send the person home.
- Any student or staff member with a known communicable disease to attend school or work after providing a release from the doctor stating they are no longer contagious, or have been treated.

# **ATTACHEMENT H**

## **Energized Lab Policy and Receipt Form**

<b>Reviewed and Approved By:</b>	<b>Original Adoption: Jan. 2011</b>
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	December 2018
	March 2022
Energized lab policy is reviewed annually. Students are required to follow the most current policy.	

**ENERGIZED LAB RADIATION SAFETY POLICY**

**ENERGIZED LABORATORY ACTIVITIES POLICY**

1. At no time is the radiographic laboratory x-ray unit to be energized without permission and supervision of an instructor who is registered by the ARRT.
2. At no time shall the radiographic laboratory x-ray machine be used to x-ray human beings. Student experience in the laboratory requires a simulated patient (phantom) for use.
3. At no time shall a student hold a phantom during the radiographic exposure.
4. At no time shall a student hold an image receptor (IR)during the radiographic exposure.
5. The machine circuit breaker is to be open when machine is not in use by the students or instructor who is supervising their work.
6. All laboratory activities are assigned to coincide with the instructor’s schedule to ensure maximum supervision.
7. Formal classroom instruction shall be given to the student in the use of safety factors concerning the use of the x-ray unit.
8. The machine shall undergo periodic inspection by the State Inspection Committee on Radiation Safety.
9. A written report shall be submitted and at this time all deficiencies will be corrected so that the machine is safe for use.
10. At no time shall an exposure be made on the phantom or other types of apparatus when a person is in the laboratory exposure room.
11. All students are required to wear a radiation dosimeter on their collar when working in the energized site. Failure to have a radiation monitor on the student’s person will result in the student being dismissed from the lab until a monitor is worn. Make-up of the lab assignment is the responsibility of the student.

**ENERGIZED LABORATORY ACTIVITIES POLICY**

**RECEIPT FORM**

I have received and understand the policy. I understand the consequences of violating any of the policies, which will result in a written performance warning. A second written warning of similar violation will result in immediate dismissal from the Radiography program due to unsafe practice.

Student Name \_\_\_\_\_

Date \_\_\_\_\_

# **ATTACHMENT I**

## **CLINICAL POLICIES**

<b>Reviewed and Approved By:</b>	<b>Original Adoption: Jan. 2011</b>
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	January 2020
Dress Code Policy for Clinical Assignment is reviewed annually. Students are required to follow the most current policy.	

## **DRESS CODE FOR CLINICAL ASSIGNMENT**

### **Uniform-**

- Official program uniform (2 piece) clean, pressed, and in good repair. Student patch **MUST** be sewn on uniform scrub top.
- Name tag/ID worn on right side of uniform.
- An official program matching lab jacket (grey) may be worn. The lab jacket must have student patch sewn on left sleeve (2) inches below seam. Uniform patch must be visible to patients at all times. Name tags must be on jacket if worn over official uniform.
  - If more warmth or coverage is desired, a long sleeved ALL BLACK crew neck shirt is permissible under the scrub top.
  - Female students may wear a black crew neck short sleeve t-shirt under their scrub top.
  - Male students **MUST** wear a crew neck short sleeve BLACK shirt under their uniform.
- Sweaters/sweatshirts are not permitted.
- Shoes- must be conservative in style. Clogs/crocs or backless shoes are **NOT** allowed. They are to be clean, polished & in good repair. Only solid colored socks are permitted.
- Name tag, dosimeters, and lead markers (given to you at the beginning of the semester) are a required part of your uniform while you are at clinical.

### **Appearance**

- Mustaches and beards must be neatly trimmed and/or styled so as not to come in contact with patients or interfere with job performance or safety. Hair must be clean and worn in conservative style. If hair is longer than shoulder length, it must be secured so as not to come in contact with patients or interfere with job performance or safety. Hair must be a conservative style and color as acceptable to the clinical site.
- Facial hair must be well groomed.
- Body piercing adornment (exception, ears) is not permitted at clinical sites to include tongue rings. Only small post earrings (no more than two per ear) in LOWER LOBE on the ear only. Gauges are not to be started after the start of the program. Existing gauges cannot get any larger. Only clear gauges can be worn in clinicals.
- Body art should **NOT** be visible outside the uniform at any time. Existing tattoos must be covered.
- Nails must be short and clean. Only clear or light colored nail polish will be allowed. Acrylic nails are not allowed.
- A watch with a second hand is recommended. Necklaces will not be permitted. No bracelets.
- Daily personal hygiene is required.
- **NO GUM CHEWING.**

**The dress code will be strictly enforced. In the event the student does not adhere to these responsibilities, a warning will be issued.**

## SUPERVISION OF CLINICAL ASSIGNMENTS

In compliance with the revised Essentials and Guidelines of the Joint Review Commission on Education in Radiologic Technology, 1990 the following policy is to define criteria for educationally valid clinical supervision:

A. Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direction supervision of qualified radiographers. **The parameters of direct supervision are:**

- A qualified radiographer reviews the request for examination in relation to the student's achievement.
- A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge.
- A qualified radiographer is present during the conduct of the examination.
- A qualified radiographer reviews and approves the radiographs.

In support of professional responsibility for provision of quality patient care and radiation protection, unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency.

B. After demonstrating competency, students may perform procedures with **indirect supervision**.

Indirect supervision is defined as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement.

Immediately available" is interpreted as the 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.

**Students will perform surgery and portables under direct supervision throughout the entire program.**

C. Supervision radiographers shall be registered by the American Registry of Radiologic Technologists in diagnostic radiologic technology. Radiologists must be certified by the American College of Radiology.

D. The supervisory radiographer or radiologist shall be identified on the students' daily clinical education record.

E. In the absence of the College faculty, the clinical supervisor shall be responsible for maintaining student's records and ensuring that appropriate learning experiences are being assigned to students.



<b>Reviewed and Approved By:</b>	<b>Original Adoption: Jan. 2011</b>
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	December 2018
Clinical radiation and safe practice policy is reviewed annually. Students are required to follow the most current policy.	

## **CLINICAL RADIATION AND SAFE PRACTICE POLICY**

### **CLINICAL ACTIVITIES POLICY**

1. Never leave a patient alone in the diagnostic room. If you physically cannot stay with the patient, relocate them to a common area; such as a waiting room.
2. Unsatisfactory radiographs shall be **repeated only in the presence of a qualified radiographer.**
3. All participants are required to wear a radiation monitor (dosimeter) on their collar when working in the energized clinical site. Failure to wear a monitor on the student's person will result in the student being dismissed from the clinical until monitor is worn. Student must refer to Clinical Attendance Policy for missed time.
4. All participants are required to have with them attendance cards, markers, competency forms, and ARRT Master Competency List at all times. Failure to have any of the above clinical materials will result in the student being dismissed from clinical until in possession of the essential items listed. Student must refer to Clinical Attendance Policy for missed time.
5. At no time shall a student hold a patient during the radiographic exposure.
6. At no time shall a student hold an image receptor (IR) during the radiographic exposure.
7. At no time shall a student approve/delete any radiographic images at any facility.
8. Do not dismiss a patient unless instructed to by the technologist.
9. Do not give diagnostic information of any kind to a patient.
10. Students must achieve an ARRT competency prior to performing independently with indirect supervision. If a violation of this occurs, the instructor will recommend learner withdrawal from the program.
11. When a student is cited for unsafe practice the instructor will recommend learner withdrawal from the program.
12. Students will perform surgery and portables under **direct supervision** throughout the entire program.
13. Cell phones are NOT allowed on any clinical unit. Students may only use their phones when they are away from the imaging department **on scheduled breaks/lunches.**

14. Absences MUST be emailed to the instructor and called to the clinical affiliate by 6:30 am.
15. Students who violate MATC CODE OF CONDUCT are subject to dismissal from the program.

**RECEIPT FORM**

I have received and understand the policy. I understand the consequences of violating any of the policies will result in a written performance warning or immediate dismissal from the Radiography program due to unsafe practice.

Student Name \_\_\_\_\_

Date \_\_\_\_\_

<b>Reviewed and Approved By:</b>	<b>Original Adoption: 2000</b>
Faculty	January 2018
Associate Dean	
Warning policy is reviewed annually. Students are required to follow the most current policy.	

**PERFORMANCE APPRAISAL WARNING**

9

**MILWAUKEE AREA TECHNICAL COLLEGE /RADIOGRAPHY PROGRAM (RADT)**

<b>DESCRIPTION OF UNSATISFACTORY CLINICAL PERFORMANCE</b>	<b>1st</b>	<b>2<sup>nd</sup></b>	<b>3<sup>rd</sup></b>
MILWAUKEE AREA TECHNICAL COLLEGE /RADIOGRAPHY PROGRAM (RADT)	<b>Written Warning</b>	<b>Written Warning</b>	<b>Course Failure</b>
<b>1. Compromised good patient care (ex. left patient unattended in radiographic room)</b>			
<b>2. Repeatedly performs poor radiographic procedures (ex. mismarking films, performing incorrect procedures)</b>			
<b>3. Lack initiative; unproductive (avoiding exams/refusing exams)</b>			
<b>4. Displays unacceptable reaction to corrective feedback</b>			
<b>5. Demonstrates poor working relationships with radiology staff, faculty, or peers</b>			
<b>6. Violates program dress code/does not have film badge/markers/name tag/pocket guide</b>			
<b>7. Attendance/tardiness program policy</b>			
<b>8. Does not notify proper personnel at school and affiliation for absence or tardiness by 6:30am or 1:00pm for 2<sup>nd</sup> shift</b>			

<b>9. Lacks written clinical documentation (timecards, evaluation forms, comp sheets)</b>			
<b>10. Conducts inappropriate conversation or uses profanity</b>			
<b>11. Eating/drinking in patient areas</b>			
<b>12. Equipment Abuse</b>			
<b>13. Other (any professional infraction/code of conduct not listed above)</b>			

**COMMENTS:**

**Any conduct that compromises or has the potential to compromise the hospital/clinic affiliation with MATC or interrupts the medical services will result in an unsatisfactory course grade.**

*If the clinical supervisor or faculty request that you do not work alone due to previous observations, you will receive an “unsatisfactory” grade for the course.*

*HIPPA violation will result in an “unsatisfactory” grade for the course.*

**I understand the consequences of receiving this warning.**

---

**Student Signature** **Date**

---

**Instructor Signature** **Date**

## **Explanation of Violations**

### **Tardy/Attendance Policy**

A tardy is considered when a student is signed in any time after their designated start time, up to 30 minutes

An absence occurs when a student is either greater than 30 minutes late or any time they need to leave the clinical setting after being signed in.

A warning will be issued when a student fails to comply with the assigned clinical schedule, such as special assignment like 2<sup>nd</sup> shift, surgery, CT or any other rotation noted on the schedule.

### **Equipment Abuse**

Radiography students have an ethical responsibility to ensure proper care and handling of all medical equipment. If a student is reported for misuse of equipment or supplies, such as any activity outside of its intended use, a written warning will be issued.

Anytime a student is asked to leave a clinical site due to misuse of equipment, the student will receive a "U" for the course and potentially be removed from the program depending on the severity of the circumstance.

<b>Reviewed and Approved By:</b>	<b>Original Adoption: 2000</b>
Faculty	May 2015
Associate Dean	December 2018
Attendance policy is reviewed annually. Students are required to follow the most current policy.	

## Absence

- These absences are to be used for personal circumstances that require time off during the clinical assignment.
- **An absence is defined as any time not in the clinical setting (i.e.; calling in, leaving early).**
- Hours may not be borrowed, carried over or accumulated from semester to semester.
- Time must be taken and made up in 4 or 8 hour increments.
- It is the student's responsibility to complete all assignments and objectives for the course. Instructors cannot alter their schedules to accommodate the student's absence or make-up time.
- If the student must leave clinic assignment for any reason, the clinical instructor must be contacted prior to leaving the clinical site.
- If the student is calling in prior to the start time they must call the clinical site AND clinical instructor by 0630.
- Consequences for tardiness are described in the warning process document.
  - If you are more than 30 minutes tardy, you must take a half day. This will count as an absence and will need to be made up.
- Students may be absent the following number of days PER clinical course and will need to be made up at the end of the semester:

Semester	Clinical Course	Required Hours	Allotted Make up days
1 Fa	RADT 168	128	1
2 Sp	RADT 192	256	2
3 Su	RADT 193	192	1
4 Fa	RADT 199	384	2
5 Sp	RADT 190	384	2
6 Su	RADT 198	240	1
<b>Total clinical hours required :</b>			<b>1,584</b>

***Exceeding the allotted absences will result in a grade of Incomplete (I) for the course.***

### Extra Hours

- Students are required to complete assigned hours and cannot exceed those hours.
- If a student stays late to finish a procedure, he/she must have a technologist initial their time card and give a reason for staying late.

### TIME CARDS (Signing in/Signing out)

- You **MUST** get signed in by a registered technologist or the clinical supervisor - do not just put your card on the counter - get signed in as soon as you get to the quality area.
- **IF YOU DO NOT GET SIGNED IN OR OUT AND TURN IN YOUR CARD WITHOUT A TECHNOLOGISTS SIGNATURE, YOU WILL BE PENALIZED 4 HOURS AND MUST BE MADE UP. YOU WILL ALSO RECEIVE A WARNING FOR THIS-no exceptions.**

<b>Reviewed and Approved By:</b>	<b>Original Adoption: Jan. 2020</b>
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	January 2020
<b>Withdrawal of clinical competency.</b>	

## CLINICAL COMPETENCY/ REMOVAL OF COMPETENCY

### EXPECTATION FOR ACHIEVING COMPETENCY

To be done before getting the patient in the room

- Evaluate the requisition
- **Notify the technologist if this will be your patient 1, 2 or 3.**
- Gather the appropriate materials and set up the room accordingly
- Double check the routine/reference technique book if needed.
- Select the standard technique for the exam

To be done before starting the exam

- Introduce yourself to the patient / verify patient identifiers
- Get an accurate & detailed history
- Verify the proper prep / appropriate attire / removal of jewelry
- Communicate the process of the procedure to the patient

To be done during the exam

- Adjust the technique if needed
- Communicate all patient movement/touching of the patient prior to it actually happening
- Utilize the appropriate verbal instructions to accomplish the exam. (Example, good verbal cues for the patient to follow, inspiration/expiration)
- Display a confidence with equipment manipulation
- Modify the exam to meet the needs of the patient/display common sense to positioning flow.
- Display confidence in the routine & positioning skills to ensure good pace

To be done after the exam

- Evaluate images for quality & the need for repeats. (Ensure a technologist reviews/approves the films, & ensure the tech is present for any repeats)
- Answer any of the patients questions
- Guide the patient back to the changing room or front lobby
- Annotate images and record Hx in Pacs/RIS if the site allows.
- Clean and restock the room if needed.



**Any extra views that are needed due to the body habitus of the patient, that were not the fault of the student, shall not be counted against the student.** Provided the technologist feels that they themselves would not have done anything different.

The technologist will decide if the competency was performed to the appropriate standard, with the expectation that a student may have a little help completing the exam if it is a patient 1.

For a patient 2 competency only minor corrections should be allowed and with the thought process that it would be less help required than a patient 1 performance.

For the patient 3 competency the MANDATORY competency sheet should be used. In addition, the student should receive only help with technique adjustment for a non-standard technique. All other aspects of the exam should be accomplished by the student. Once the pink sheet has been signed the student is allowed to work with indirect supervision on those procedures going forward. ELECTIVE competencies do not require a patient 1, and 2.

## REMOVAL OF COMPETENCY

**Goal: To ensure consistent clinical outcomes and quality diagnostic images**

Any time a student demonstrates the inability to consistently perform an exam **independently** in which they have achieved a competency, the student will be evaluated for competency removal.

Concerns for removal of the competency can fall in any of the categories, which are designed to lead to a successful outcome, and listed in detail above:

- To be done before getting the patient in the room
- To be done before starting the exam
- To be done during the exam
- To be done after the exam

### **Process of competency removal:**

After identifying the area/areas of concern the student will have their independent status of those exams removed on the direction of the clinical coordinator/ faculty of record.

1. Negative feedback communicated from the clinical site in any form( i.e. verbal, written, blue evaluation sheet)
2. Verification of negative feedback by faculty to include discussion with the student and clinical site
3. Communication to student about confirmation of negative feedback to include notifying the student that a competency has been removed.
4. Student will be re-trained on the withdrawn exam in the clinical environment and will be expected the re-comp the procedure in the clinical setting.
5. Previous independent points will be forfeited on the removed competency. After re-demonstration the student can start accumulating independent points from zero in the identified exam.

<b>Reviewed and Approved By:</b>	<b>Original Adoption:</b> March 2016
Faculty	<b>Reviewed and Revised:</b>
Associate Dean	December 2018
<b>MRI SAFETY POLICY</b>	

**RADIOGRAPHY PROGRAM  
STUDENT MRI SAFETY POLICY**

**RADIOGRAPHY STUDENTS**

All incoming radiography students will view an MRI safety video, and complete an MRI safety screening form at the time of orientation. The Clinical Coordinator will review the MRI safety screening sheets with any student who has indicated the potential for a MRI safety contra-indicator. Students will also be told of the potential hazards in the MRI department.

No student shall enter any MRI scan room without first being screened by the hospital/clinic MRI staff.

Once students have viewed the MRI safety video and reviewed the screening form with the clinical instructor, they will be allowed to transfer patients **outside** of the MRI scan room.

NO STUDENT SHOULD ENTER THE MRI SCAN ROOM WITHOUT FIRST BEING SCREENED BY THE HOSPITAL/CLINIC STAFF.

**RECEIPT FORM**

I have received and understand the MRI SAFETY policy. I understand the consequences of violating any of the policies will result in a written performance warning or immediate dismissal for the Radiography program due to unsafe practice procedures.

Student Name \_\_\_\_\_

Date \_\_\_\_\_