



RADIOLOGIC TECHNOLOGY

**STUDENT HANDBOOK AND
PROGRAM POLICIES**

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WELCOME

Welcome to the Yuba College Radiologic Technology Program (hereafter referred to as the Program). You are entering an allied health career that is interesting, diverse, and demanding. The field of radiology is expanding at a rapid rate and the need for skilled technologists is growing. The Yuba College Program is designed to help you develop the knowledge and skills required to perform as an entry-level radiographer.

Upon successful completion of this Program, the graduate may apply for entrance to the examination delivered by the American Registry of Radiologic Technologist (ARRT). California Department of Public Health, Radiation Health Branch (RHB) issues a California Radiologic Technology Permit to those individuals who successfully pass the ARRT Board Exam (this is required to work in the state of California).

The Program faculty as well as all college and clinical staff wish you success in the Program. We are all here to assist you in pursuing your newly chosen career.

Purpose of This Handbook

This handbook is designed to serve as a guide to assist in the orientation of new students and to clarify policies and procedures governing performance while you are a student in the Program.

It is expected that all Program students will be familiar with and understand the content of this handbook.

This information is to be used throughout enrollment in the Program, including the clinical portion when students are assigned to one of the affiliate sites.

Students are required to comply with the contents of this as well as the Yuba College Catalog, Yuba College Harassment Policy, and the Student Code of Conduct all of which can be found on the College Website.

Radiologic Technology Mission Statement

The mission of the Radiologic Technology Program is to provide a high-quality educational environment to prepare ethical, competent, safe, and compassionate medical practitioners who function effectively as a team within the healthcare environment and demonstrate a commitment to professionalism and lifelong learning.

Radiologic Technology Program Goals

Students will:

- Produce diagnostic quality medical images in a competent, safe, and compassionate manner for all basic radiography examinations in a hospital/clinic work environment.
- Communicate effectively and professionally with patients, hospital staff, instructors, and peers.
- Exercise critical thinking and problem-solving skills by adapting radiologic procedures to individual patient needs and conditions.
- Function as an effective health care team member by providing services in a manner that complements those performed by other team members.
- Demonstrate a commitment to professional development.
- 75% of the students will:

- Pass the ARRT exam on the first attempt.
- Be gainfully employed as Radiologic Technologist within 12 months of graduation.
- Will complete the Program.
- Be satisfied with their Program education.

Radiologic Technology Program Learning Outcomes

Upon completion of the Program, students will demonstrate:

- Critical thinking and problem-solving skills.
- Clinical competency of an entry level Radiologic Technologist.
- Appropriate workplace and patient communication skills.
- Model professionalism and ethics.

Program Policies

Accreditation Yuba College Radiologic Technology Program

- Approved by the State of California, Department of Health Services Radiologic Health Branch (RHB), pursuant to the Radiology Technology Act. The school identification number is 1024.
- Accreditation by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The school identification number is 0428.

ARRT Standard of Ethics

- Students in the Program are bound by the ARRT code of ethics.
- <https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/82777f8b-a85d-4d6b-8efc-1b352310eabc/arrt-standards-of-ethics-2020.pdf>

Changes in Personal Data

- Notify the Program Director and the Admission & Records Office if there is a change of your name, address, telephone number, or change of person(s) to notify in case of emergency.

College Graduation and Program Certification

The Associate Science Degree shall be granted to a student who has satisfactorily completed the general education and specific Radiologic Technology major requirements. A Certificate of Completion will be awarded.

- Students must meet all clinical days/hours, all course and Program goals, objectives, and student learning outcomes.
- All college fees must be paid in full before a degree will be awarded, or release of name for ARRT examination.
- All ID badges and dosimeters must be returned to the Program before a degree will be awarded, or release of name for ARRT examination.

Compliance Requirements

- Students must remain current on all compliance requirements.
- Students are responsible for all costs and fees associated with this compliance.
- CPR – American Heart – BLS for Healthcare Providers

- Background Check
- Drug Screens (minimum of 2 while in the program; to be done within 3 days of Program request)
- Physical exam
- FIT Test (provided first week of class- however clinical facilities may also require)
- Immunizations (See Attachment A)
 - TB
 - HEP B
 - Measles
 - Mumps
 - Rubella
 - Varicella
 - TDAP
 - Flu
 - COVID

The Program has many clinical facilities. One facility may have different requirements than another facility. The program promotes equality. The most restrictive policy will be accepted by the program and followed by all students. Example: Oroville does mind if tattoos are visible. Colusa does not allow visible tattoos. The Program therefore will not allow visible tattoos at any facility.

In accordance with the clinical agencies used by Yuba College, a student will be excluded from participating in clinical rotations and therefore unable to enroll in Yuba College Radiologic Technology Program with the following background check results:

Convictions in which there is no contest or found guilty including, but not limited to:

- Any felony within the past 7 years
- Any misdemeanor conviction within the past 3 years
- Crimes against persons and/or property
- Crimes involving drugs
- Driving Under the Influence (DUI or Wet and Reckless) drugs or alcohol (in accordance with above time frames for felony or misdemeanor)
- Medicare/Medicaid fraud
- Any crime resulting in the requirement to register as a sex offender

Computer network policy

The Program follows the Yuba College polices. Please see:

<https://go.boarddocs.com/ca/yccd/Board.nsf/goto?open&id=8VXQVB6B1F80>

Disabled Student Program and Services (DSPS)

The Program follows the Yuba College polices. Please see:

<https://go.boarddocs.com/ca/yccd/Board.nsf/goto?open&id=8VXQVB6B1F80#>

Employment

- Students are not allowed to work in the position of “Radiologic Technologist” while in the Program.
- Students are not allowed to leave their internship to work.

Examination Applications (A.R.R.T. and/or Calif. R.H.B.)

Students will be provided with all necessary information and an application for the ARRT examination and application instructions for the California Radiologic Health Branch in the last Spring Semester.

Convictions or charges may preclude eligibility to take the American Registry of Radiologic Technology examination. The student must contact the A.R.R.T. to determine eligibility (www.arrt.org). It is suggested this be done as early as possible. Waiting may delay the scheduling of the exam. Also, in some rare cases, the student may not be eligible to sit before the exam.

Fraternization

- Students are not to develop close personal relationships with the staff at the clinical settings during their internship.
- Do NOT seek, take, or exchange telephone numbers or address with staff and patients at the clinical facility for which you are assigned. Preceptors are excluded.

Impairment

Yuba College is a drug free campus.

<https://go.boarddocs.com/ca/yccd/board.nsf/public#>

If the student’s behavior indicates impairment, the faculty or Preceptor, in consultation with the College Administration, will take the following steps.

- Require blood and/or urine testing in an approved lab immediately at student expense.
- Program dismissal will occur if student refuses to provide drug screen results, complete documentation, meet with College Administration, or tests positive for drugs or alcohol.

These labs are in:

- The Emergency Department at the assigned facility.
- The closest approved lab (contact Allied Health office).
- In a facility without a lab on-site, the student will be sent by taxi (at student expense) to an approved lab.
- The Allied Health staff or faculty will then notify the student’s emergency contact person to take the student home after blood and/or urine testing has been completed.
- Inform the student, prior to leaving the facility, that they may not return to classes or clinical until they have met with the College Administration.
- If deemed necessary, inform student they may not participate in Program classes, until an evaluation and treatment plan developed by a mental health professional is obtained.
- Provide student with the opportunity to offer further explanation and additional relevant information.
- Review results of student drug screen (student must provide this).

- Review with student the impairment policy and potential academic/clinical consequences.
- Program dismissal will occur if student refuses to follow any of the above listed actions.

Insurance

Health Insurance

- Students are always required to carry their own health insurance while enrolled in the program. This documentation is required before any clinical rotation.
- If a student's health insurance lapses at any point, they will not be able to continue in the program.
- Students will provide proof on insurance within 2 hours of a request by Program or clinical facility.

Liability Insurance

- By enrollment in the clinical course, students are covered by liability insurance.

Worker's Compensation Insurance

- Students are covered by Yuba College worker's compensation insurance. See Trajecsys for required documentation and processes.

Internet access/Computers

Students will need access to the internet and computer with **Google Chrome** to complete assignments and take exams. If you need a computer, please contact the library.

Nondiscrimination Statement

The Program follows the Yuba College policies. Please see:

<https://go.boarddocs.com/ca/yccd/Board.nsf/goto?open&id=8VXQVB6B1F80#>

Sexual Harassment/Harassment

Any student accused of harassment (in any form):

- In the clinical environment will be withdrawn from any clinical rotation until the allegations have been investigated.
 - If the clinical facility asked for the student to be withdrawn from the site, the student will immediately be dismissed from the clinical course and therefore the Program.
 - If the clinical facility wished to retain the student, a student success plan will be implemented as well as requirement of student completing sexual harassment training.
- In the didactic environment will be withdrawn from the classroom until the allegations have been investigated.
 - If allegations are found to be unwarranted, the student can return to the classroom.
 - If the allegations are confirmed, the student will immediately be dismissed from the course and therefore the Program without the opportunity to re-enroll.

Social Media Policy

Students should

- Be aware of the effect their actions may have on their reputation and perception, as well as the Program's image.
- Refrain from posting, publishing, or discussing any clinical experience (this includes photographs) and material that is either inappropriate or harmful to Yuba College, the Program, Clinical Sites, coworkers, or peers.
- Understand that while not an exclusive list, some specific examples of prohibited social media conduct include posting commentary, content, or images that are defamatory, pornographic, proprietary, harassing, libelous, or that can create a hostile environment.

Standard (Universal) Precautions

- These precautions are always to be utilized. Please see the Center for Disease Control (CDC) website. <https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html>

Student code of conduct

- The Program follows the Yuba College policies. Please see:
[https://go.boarddocs.com/ca/yccd/Board.nsf/files/BHN28D00ED6B/\\$file/Student%20Code%20of%20Conduct%20\(Rov.%202019-11-05\).pdf](https://go.boarddocs.com/ca/yccd/Board.nsf/files/BHN28D00ED6B/$file/Student%20Code%20of%20Conduct%20(Rov.%202019-11-05).pdf)

Student Grievance Procedure

These procedures are designed to provide the student a specific avenue of grievance regarding the decisions or actions of the Program officials and serve to address any problem or concern that the student believes needs addressed and/or reviewed.

The following represents the process for formal grievance communication:

- First, attempt to resolve the problem with the instructor.
- If this is a problem with the Preceptor, student should attempt resolution first before contacting the clinical coordinator, if possible.
- Second level of communication is to be with the Program Director
- Third level of communication is with Program Administration. Further guidance will be provided at that time.

If the individual is unable to resolve the complaint with Program/institution officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT (See Attachment B):

Chief Executive Officer

Joint Review Committee on Education in Radiologic Technology

20 North Wacker Drive, Suite 2850

Chicago, IL 60606-3182

Phone: (312) 704-5300

Fax: (312) 704-5304

e-mail: mail@jrcert.org

Student Program Records

- Students may inspect their Program file under the direct supervision of a faculty member. Written request is required at least twenty-four (24) hours prior to review.
- All student records are confidential and information from them will be given only to authorized persons.
- Student records are maintained on a secure drive at Yuba College for 5 years. They are destroyed after that point in time.
- The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records. Yuba College follows these policies.

Student Success

Students who are struggling academically or clinically will meet with the instructor of record and complete a student success plan (See Attachment C).

Academic:

- The first step is a verbal discussion and suggestions for improvement.
- The second step is a written success plan agreed upon by the faculty and student.
- The third step is a review of the plan and revisions to improve student success.

Clinical:

- The first step is a verbal discussion and suggestions for improvement.
- The second step is a written success plan agreed upon by the faculty and student.
- The third step is removal from the clinical site and from the program.

Unsafe clinical practices will result in immediate dismissal from the program.

Transfer Credit & Advanced Placement

- Currently, Yuba College does not have a process in place to accept advance placement and transfer students.

Transportation

- Students are responsible for transportation to and from school and the clinical facilities.
- Students may park only in designated areas, both at the College and clinical sites.

Venipuncture

- Needles provided for practice of IV's are used only with faculty/staff present.
- Students must demonstrate safety precautions while utilizing needles.
- Used needles are never to be recapped, they must be discarded in the sharp's disposal containers provided.
- All needles are to be secured when not in use for student learning experience.
- Needles and syringes are not used on yourself or others.
- Using Program needles for personal use or allowing needles to leave the classroom are grounds for immediate dismissal.

Program Separation

It is the responsibility of the student to comply with the policies of the Program. All identification supplied by the Program or clinical facilities, as well as dosimeters are not student property and are required to be surrendered to the Program immediately upon Program separation. Students are to complete a Program separation form when exiting the Program (Attachment D).

Following are specific but not all-inclusive examples that would result in a student success contract implementation:

- Non-achievement of a grade of at least “C” or “Passing” in all theory and clinical courses in the Program.
- Inability to meet objectives, goals, or outcomes of the Program.
- Demonstrates practices that are below the expected level of competency and/or requires continuous one-on-one supervision or direction from the instructor beyond average for a student at this level of education and competency.
- Disruptive or abusive behavior at any time.
- Failure to correct deficit behavior that has been identified in the student success contract.
- Unsafe operation of radiation equipment at Yuba College or in the clinical environment.
- Radiographing patients without direct or indirect supervision.
- Inappropriate behavior or disrespect of faculty, patients and/or hospital staff.
- Jeopardizing the patient’s or hospital’s confidentiality and HIPPA regulations.
- Performing an examination on a patient for which the student does not have the appropriate level of competency or has not achieved a competency-based goal for that level of education.
- Failure to notify appropriate personnel of absences or changes in shift.
- Falsification or purposely recording of clinical time, exams performed, or competencies inaccurately.
- Any violation of ARRT, ASRT, Yuba Community College District, Yuba College, and/or Yuba College Radiologic Technology Program ethics, standards, code of conduct, Radiation Protection Program, and handbook requirements.

Following are specific but not all-inclusive examples that would result in immediate program separation

- A clinical facility requests a student to be removed from a facility
- Reporting for assignment or class while impaired.
- Any violation of ARRT, ASRT, Yuba Community College District, Yuba College, and/or Yuba College Radiologic Technology Program ethics, standards, code of conduct, Radiation Protection Program, and handbook requirements.
- Any other behavior not previously described that is determined by the Program to be of a nature to cause a significant health and/or safety concern to anyone within the clinical environment.
- Sexual harassment with the student’s removal from a clinical site or class.
- Unsafe clinical practices.
- Refusal to maintain compliance with program and clinical facility.

STUDENTS DISCHARGED FROM THE RADIOLOGIC TECHNOLOGY PROGRAM DUE TO UNSAFE CLINICAL PRACTICE WILL NOT BE RE-ADMITTED.

Program Re-admittance

- If the student is in good standing when withdrawing from the Program, the student may petition to re-enter the Program. This must be completed within 72 hours of withdrawal (See Attachment E).
- If there is space availability with the next cohort, the student may be considered.
- Prior clinical classes must be repeated.
- Prior didactic classes must be audited but student is required to complete all assignments and exams.
- If no space is available, the student may reapply, and if the student meets Program requirements, may qualify for the lottery drawing for cohort placement.

Didactic and Lab Education

Attendance

Students

- Are expected to attend all didactic and lab classes.
- Must bring their dosimeter to all classes.
- Are to notify instructor in advance of the class period of any absence or expected tardiness.
 - Excessive absences (including arriving late and leaving early) prevents the student from meeting the objectives of the course and the Program. If a student is absent more than 10% of the class time they can be removed from the course, and ultimately the program.
 - Extenuating circumstances can be discussed with Program faculty.
 - Absence in no way relieves the student's responsibility for work missed.
 - Arrangements must be made with the instructor for any lecture/lab classes missed for "make-up" assignments.

Recording Lectures

- No recording of lectures in any form unless granted in writing by individual instructor prior to recording and only for the specific class requested.
- Any recording made without the instructor approval will be in violation of policy and student will be counseled and at risk of dismissal from the Program.

Cell Phone Usage - Classroom

- Cell phones are not to be utilized in the classroom unless specifically directed so by instructor.
- If student is using a digital textbook and is accessing this via cell phone, the student must notify the instructor in writing before class and use the phone ONLY for that purpose.
- The phone is to be silenced while in class.

Grade Computation

The percentage value of the alphabetical grading in all radiologic technology courses will be assigned as follows:

- 90-100% = A
- 80-89% = B
- 75-79% = C
- 65-74% = D
- 64% or below = F

- Evidence of cheating on any assignment or exam will result in a grade of zero.
- There is no rounding of decimals for grading.
- Students failing to meet the minimum standard of a “C” (75%) or P (passing) in any Program course may not continue in the Program.
- Students are responsible for all theory content taught in prior semesters and may be tested on this content as well as any new content.
- Classes, which combine a lab and lecture, require passing both parts of the class to receive a passing grade in the class.
- Students must meet all clinical objectives and assignments to be considered for a passing grade in the course. Specifics are outlined in the syllabus.
- Tests, test keys, and completed scantrons may not leave the classroom either during the test or the review. If a student has been found accessing, trying to access, or copying computer or paper exams/quizzes after completion, the student will receive a grade of “0” for that assignment.
- Quizzes may be given unannounced and may not be made up.
- Taking exams on nonscheduled days/times, grades will be lowered:
 - 5% for taking an exam before the scheduled time.
 - 10% for taking an exam after the scheduled time.
 - Any exception to the original test date/time is based on prior approval from the course faculty.
 - In the event of taking the exam early, discussion of the questions with other students will be considered cheating.
- Questions regarding the scoring of an exam must be addressed in writing within 7 days of the exam. This is to include the specific questions, the correct answer, and where the correct answer can be found. After that date, no changes or adjustments will be considered.
- Students are given 3 opportunities to pass a mock exam.
 - If the student cannot pass by the third attempt, they will be receiving a failing grade in the class.

Lab Rules

Students are to follow all rules for safe operation of equipment in the energized and non-energized lab. (See Attachment F.)

Clinical Education

By application and acceptance into the Program, the student has agreed to accept clinical placement in any facility assigned, regardless of geographical location or distance from Program or home location. Student also agrees to work any shift assigned. The clinical internship is scheduled between the hours of 5:00 AM and 11:59 PM, Monday through Saturday semester dependent. Each clinical day is a 10-hour shift.

Participation in clinical rotations includes possible exposure to and illness from infectious diseases including but not limited to:

- Methicillin-resistant Staphylococcus aureus (MRSA)
- Influenza
- Clostridium difficile (c diff)
- Hepatitis

- COVID-19.

Attendance

- Hours and number of days posted in the syllabus must be met to pass that class.
- A schedule of clinical days will be provided to the student at the beginning of each semester.
- Students are scheduled for more days each semester than required, to allow students to make up days missed.
- Students cannot attend a clinical rotation on any non-scheduled day, holidays, or outside of the course dates.
- The student must maintain an accurate log of clinical hours attended and missed (recorded in Trajecsys within 24 hours).
- Students are to contact the clinical facility (and/or Preceptor as determined by clinical policy) and Program faculty before their start time of a missed clinical day, if the student will be late, or to leave early.
- Failure to notify appropriate personnel before the start of a clinical shift will result in counseling.
- A Change of Schedule form is to be completed in Trajecsys by the student, to document any/all schedule changes.

COVID Policy

- Students must wear a mask in the clinical facility at all times if it is a requirement of that facility. If so, most will require students to obtain a new mask when entering the facility.
- Surgical or n95 masks are currently optional to wear in the classroom.
- Students are not allowed to perform images on any declared or suspected COVID patient.
- Should a student test positive for COVID they will need to provide proof to the Program Director that they have tested positive.
- The Program Director (PD) will inform the student's assigned Clinical Coordinator (CC) and the CC will inform the clinical site/department.
- The student may not return to the clinical facility until the time frame that is required by the strictest rule (college, clinical facility, CDC.)
- If the number of clinical hours is such that the student will not meet the requirement for that semester and/or the program's required number, an alternative schedule will be developed with the Program Director with input from the CC.
- The student may not return to the classroom until the time frame that is required by the strictest rule (college, clinical facility, CDC.) Arrangements must be made with the instructor for any lecture/lab classes missed for "make-up" assignments.
- Students must test negative at one of the program's approved testing sites and submit results to the PD 48 hours before being released to return to the clinical site or the classroom.

Breaks & Lunch

- Students are required to take a lunch break after 5 hours of work, but no later than 6 hours of work. Skipping a lunch break to leave the clinical site early is not allowed. Students must work a minimum of 5 hours to count as a half day shift.

Cell Phone Usage - Clinical

- Cell phones can be used in the clinical setting only for recording clinical time.

- Cell phones must be silenced.
- Students may carry a personal cell phone while performing clinical duties, for emergency purposes only, and only if it is permitted at their clinical site.

Clinical Assignment

- Clinical assignments for students will not exceed more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.
- A list of clinic facilities, addresses, and Preceptor information are provided online for students, in Trajecsys.
- Students will
 - Rotate through a minimum of 3 clinical facilities and up to 5.
 - Submit current documentation of all compliance items.
 - Adhere to all requirements of the onboarding processes of the college and clinical facilities.

Clinical Exams

- Students are required to keep a record of ALL radiographic examinations that they have observed, assisted, or performed.
- These records are to be compiled in Trajecsys daily, (within 24 hours), and will be verified by the Preceptor and faculty.
- Before a student can perform a competency, they must document experience with the exam.
- A student may achieve competencies in the Operating Room (OR) and fluoroscopy after completion of the second semester of clinical experience.
- During the last 3 semesters, a student must document 80 hours in the Operating room and 40 hours in fluoroscopy.
- Students may not obtain more competencies than listed each semester.
- Should there be more than the assigned number, a competency will be removed by the faculty. (The competency to be removed will be chosen by the faculty).
- If a competency is removed, the student is NO LONGER allowed to be indirectly supervised for exams. The student has reverted to “not being competent” in the removed exam.
- First semester students will be given a simulated exam in the laboratory. Once the student has passed the simulation, they will be eligible to complete a competency on that body part.
 - **First semester:**
 - Chest
 - Abdomen
 - Upper Extremity
 - Lower Extremity
 - Hip/Pelvis
 - **Second Semester:**
 - Spine
 - Ribs
 - Skull

- The number of exams and hours to be completed each semester are:
 - 6A- 300 clinical hours and 4 competencies
 - 6B- 260 clinical hours and 12 competencies
 - 6C- 390 clinical hours and 12 competencies
 - 6D- 436 clinical hours and 12 competencies
 - 6E- 464 clinical hours and 12 competencies.
 (Total amount of clinical hours vary from 1810-1850)

Clinical Responsibilities

Clinical experiences are unique in that they provide the arenas for progressive application of theory, refining of technical skills, confidence building, decision- making, and the development of leadership skills.

Basic Responsibilities:

- Voluntary hours:
 - The student may request voluntarily to be assigned to additional hours to observe those procedures that may not be readily available during regular shifts or to make-up needed time. These assignments must be pre-arranged, approved, and coordinated with the Program Director, Clinical Coordinator, and the assigned Preceptor. Additional shift requests will not be approved for students with excessive absences. If a student is absent more than 4 days from the clinical site during a semester, a physician’s note must be presented documenting illness and student’s physical ability to complete the program.
- A student must be evaluated on all equipment used in the clinical setting. This must be documented by a completed equipment evaluation (located in Trajecsys) **before** exams on patients can be performed.
- Progress reports, competencies, logbooks, evaluations, and time logs are not final until they have been reviewed, approved, and validated by the Program. If the Program does not approve a particular item, the Program will contact the student as to why the item was disapproved and reserves the right to add additional information and re-evaluate the student.
- Students are to inform college leadership when they become aware of a Preceptor change.
- Students will present images of any exam/competency performed when requested by instructor.
- Any images acquired by the student while in the Program will be property of the Program.
 - Students found to be obtaining and/or retaining images acquired while in the Program and not for program use, will be dismissed. This is a HIPAA violation.
- Use personal L and R positional markers. Forgot the markers? No x-rays can be taken and clinical hours will not be granted for that day.
- Report to faculty, within the first week of a clinical rotation, the day/hours of the shift assigned (form can be found in Trajecsys).
- Any variation in this schedule will be cleared with the Clinical Coordinator and/or Program Director, as well as the facility Preceptor before the change is implemented. This includes any “one time” change. Forms are in Trajecsys.
- Participate in all radiographic procedures and other department procedures.
- Be ready to work at the assigned time the shift begins.
- Do not attend clinical education with braces, splints, casts, or other orthopedic treatments that restrict range of motion of any body part.

Clocking in and out

- Students are to clock in/out of Trajecsys to record time. Student has 3 choices for most facilities. For example:
 - Mercy General has 3 choices – Mercy General, Mercy General Fluoroscopy, Mercy General Surgical. All first-year students will use the clock in/out that does NOT say fluoroscopy or surgical. During the third semester of clinical, students will be required to rotate through surgery and fluoroscopy and record specific hours in each area, as well as competencies. For example:
 - The student arrives at the clinical facility and begins work. The student will clock in under Mercy General. The student is asked to go to surgery with a technologist. The student clocks out of Mercy General, waits one minute, then clocks into Mercy General – surgical. The student is in surgery for 5 hours. When the student leaves surgery they will clock out of Mercy General – surgical, wait one minute, then clock into Mercy General. If the student spends the entire day in surgery or fluoroscopy, the student may log into these areas from the beginning of their day, until the end of the day. There is no need to log into Mercy General if the student spends the entire day in either fluoroscopy or surgery.
- Students must record time from the facility radiology department or appropriate department. If found recording time in other areas (including the parking lot) will no longer be allowed to use a cell phone for recording of time.
 - If a student chooses to use a cell phone for recording clinical time, geolocation services **MUST** be activated. If a student does not activate this service on their phone, student will not be given credit for the clinical hours during the time the geolocation services is not used and will be required to clock in/out using an onsite computer.
- Students are given clinical hour credit for the assigned number of daily hours in the syllabus.
 - Overage of additional time (over 10 hours a day) will NOT be accepted unless approved by Preceptor and Program faculty. Hours worked over prescribed schedule are considered “volunteer hours” and are not counted in required clinical hours. If you are staying late with approval, you need to clock out AS A TIME EXCEPTION and enter your comments.

Grade Computation

Clinical courses are pass/fail.

During each semester, the student must:

- Complete the number of hours required for each course. Students are given clinical hour credit for the assigned number of daily hours in the syllabus. You may not bank hours.
- Complete dosimeter readings monthly.
- Complete all evaluations, time records, logs, and other assignments as documented in the syllabus for each class.
- Competencies are entered into Trajecsys by the student. Competencies must be marked “disapproved” by the student. Only the Preceptor or faculty may mark the Competency “approved”.
- Self-evaluations may be marked as approved.
- End of Semester Clinical Facility Evaluation must be completed before the last day of each semester.

- Time log documentation is due the day of the shift (including any corrections or absences). Should there be errors in recording, contact Clinical Coordinator within 24 with explanation so the error can be corrected. It is NOT the responsibility of the Clinical Coordinator to seek explanation.
- Logbook recording, repeats, evaluations, and time log is due within 24 hours of shift completion and must be accurate, complete, and honest.
- Review every progress report to identify areas that need concentration to ensure completion of the necessary exams.

Mandatory Reporting

- Students are to report suspected spousal/elder/child abuse to Preceptor and CC by the end of their clinical shift.
- Students will also document this in writing (an email to faculty will suffice) and follow clinical facility policy.

Patient Records/Confidentiality Policy

- HIPAA privacy rules are strictly followed!
- This act protects patient confidentiality, restricts access to information, and provides training for employees on privacy and confidentiality.
- Any information regarding a patient (including but not limited to condition, diagnosis, treatment, prognosis, and personal information) is confidential and must never be discussed in public (including areas such as cafeteria, elevators, waiting rooms, hallways, etc.).
- More information can be found on the following website: <https://www.hhs.gov/hipaa/index.html>

Students ARE NOT to Replace Staff at any time during the Program

- Students assigned to areas without adequate staffing must be reassigned to appropriately supervised areas.
- At any time, if a student believes this policy is being abused or ignored, the CC is to be informed.

Strike and/or Clinical Facility Inspection Policy

- If technologists are striking at a clinical facility, or students are asked to abstain from their clinical experience due to a state or federal inspection, students are required to contact the CC.
- Students are assigned more hours than required each semester hours for “makeup” days if needed.
- Students may be assigned to another clinical facility, if necessary, though this is not usually possible due to the limits on how many students we can have at each facility and the extensive onboarding processes.

Student Dress and Grooming

Should a Clinical Facility have stricter rules, they supersede these standards.

Uniforms:

- Must be clean, unstained, and wrinkle-free.
- Must be modest in appearance and not “form-fitting”.
- Undergarments (such as a bra) must be nude or white.

- **Navy Pants** (not black, not royal blue, or any other shade of blue). You may choose any style or number of pockets; however, you may not wear "jogger" style scrubs.
- **White Scrub Top:** You may choose any style or number of pockets; however, you may not wear "jogger" style scrubs. The SRT patch must be sewn onto the left arm (not held on with Velcro, tape, pins, etc.).
- **White jacket:** You may choose any style or number of pockets; however, you may not wear "jogger" style scrubs. It must look like a scrub jacket and not a sweatshirt. It must zip or button up. The SRT patch must be sewn onto the left arm (not held on with Velcro, tape, pins, etc.).
- **Undershirt:** You may wear any style in solid white. These are not to be worn in lieu of a scrub top. They may be short or long sleeved.
- **Shoes:** must be clean, in good repair, conservative, and free of decoration. No boots, open toe, open heel, sandals, heels, or crocs (shoes with "holes" in them) are allowed. If students purchase "nursing" shoes, such as Dansko or Nurse Mates, they may have a design on them. These shoes must have written approval from the Program before they may be worn in the clinical site.

Jewelry

- Watches may be worn (smart watches may be worn but all notifications must be turned off.)
- Facial piercings and tongue studs are not permitted.
- All jewelry must be conservative and adhere to hospital policies.
- 3 Rings may be worn; however, they must be flat (such as a band).
- No more than 2 stud or small earrings are permitted in each ear.
- A necklace may be worn if it does not "dangle" in any way.
- Bracelets are not permitted (medic alert ID's and religious symbols are the exception and must be approved by the CC or PD).

Other Requirements

- Yuba College student ID and facility ID (if required) must always be worn while in the clinical site. Facility ID must be returned to the appropriate facility before the student can attend a clinical rotation at any other site.
- Surgical scrubs may be worn **only** during days and times students are in surgery.
- Dosimeters must always be worn in the clinical area.
- Hair must be clean, neatly groomed; long hair must be pulled back.
- Fingernails must be moderately short and clean; artificial nails are NOT permitted. If polish is worn it must not be chipped.
- Makeup should be conservative.
- Smoking and chewing gum are not allowed.
- All tattoos must always be covered at all clinical sites. No exceptions.
- Personalized R and L markers are always to be carried.

Yuba College and Clinical Affiliates are not responsible for loss or damage of valuables.

Student Supervision

- During the clinical portion of the Program, students are always to be supervised.
- The student is responsible for acquiring the appropriate supervision before performing the procedure.
- If a registered radiographer is unavailable to assist the student with the appropriate supervision, the student may NOT proceed with the assignment.

Direct Supervision Required on:

- Any procedure until competency of a procedure has been met
- Pediatric exams on children under the age of six (6)
- Surgery
- Fluoroscopy exams
- Repeat of an image
- Portable exams

Indirect Supervision is permitted once a student has achieved competency

Change in Preceptors

- Preceptors to inform college leadership when/if they cannot continue as a preceptor and/or become aware of a preceptor change.

Study Time

- Students are not to study when there are exams or department work to be done without permission of the Preceptor and facility staff.

RADIATION PROTECTION PLAN

The Program is committed to maintaining radiation exposure levels as low as reasonably achievable (ALARA) while still allowing each student to obtain all required clinical and didactic competencies.

- Student exposures are maintained in compliance with NCRP Report Number 105 § 20.1201.
- Student/Faculty radiation exposures are monitored during the entirety of the program and are maintained by the Program as part of the students' permanent file.
- The most current radiation monitoring report is posted online in Trajecsys. These reports are stored indefinitely in the college One-Drive – Radiologic Technology Confidential.
- See Attachment G.

GLOSSARY

Accident: An unplanned or unforeseen event that does not involve a patient or patient care.

Accurate: Correct and without any mistakes

Clinical Coordinator (CC): Under the direct supervision of the college administration and indirect supervision of the Program Director is responsible for maintaining clinical site visitations, directs formal classroom instruction, and demonstration.

Preceptor: Registered and licensed Radiologic Technologist appointed in each clinical affiliate department who is directly responsible for student supervision, makes assignments, completes evaluations, attests student hours on the clinical timecards, and communicates directly to the Clinical Coordinator regarding problems or suggestions.

Complete: Containing all the parts or pieces; whole: to supply all the parts or pieces needed to make something whole: to finish doing something.

Direct Supervision: The supervisor of students is always present in the same room with the student. This is required of ALL students before competency has been obtained, repeat exams, pediatric exams, and surgery, mobile, and fluoroscopy exams.

First Year R.T. Student (intern): Student accepted and enrolled through the first 3 semesters of the Radiologic Technology Program who are performing the duties assigned in the clinical setting.

Honest: telling the truth or able to be trusted and not likely to steal, cheat, or lie.

Imaging Supervisor: Employed by a hospital to oversee the operations of a Radiology Department.

Incident: Events or occurrences that adversely affect a patient, facility, or student learning experience.

Indirect Supervision: The supervisor of students is 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 radiology procedure is being performed.

Program Director (PD): Responsible for the total coordination of the Program with direct responsibility to the college administration. Directs formal classroom instruction, demonstrations, and is responsible for coordination of classes for other staff members.

Radiation Safety Officer (RSO): The Program designates a faculty member as RSO. The RSO ensures compliance with regulatory agencies concerning radiation.

Radiologist: A medical doctor that deals with the use of ionizing radiation and other medical imaging modalities for medical diagnosis, especially the use of x-rays in medical radiography or fluoroscopy.

Second Year R.T. Student (intern): Students continuing enrollment in the Program until successful completion and graduation who are performing the duties assigned in the clinical setting.

Sexual Harassment: "Sexual harassment" means unwelcome sexual advances, requests for sexual favors, and other verbal, visual, or physical conduct of a sexual nature, made by someone from or in the work or educational setting, where, among others, the conduct has the effect of having a negative impact upon the

individual's work or academic performance, or of creating an intimidating, hostile, or offensive work or educational environment.

Student Radiographer Patch: (SRP) May be purchased in the student bookstore.

NOTICE: The contents of this handbook, Program policies and procedures are subject to change. This handbook is not inclusive of all standards. New policies and revised policies are considered part of the Program and each student must comply with them. Program students will be notified in writing of any changes. The directives in this handbook are the policies of the Radiologic Technology Program.

This handbook is provided in addition to the following standards:

ASRT practice standards

https://www.asrt.org/docs/default-source/practice-standards- published/ps_rad.pdf?sfvrsn=13e176d0_18

ARRT Standard of Ethics

https://www.arrt.org/docs/default-source/governing-documents/arrt-standards-of-ethics.pdf?sfvrsn=c79e02fc_16

California Department of Health Radiation Health Branch Title 17

[https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=IF5391400D60611DE88AEDDE29ED1DC0A&originationContext=documenttoc&transitionType=Default&contextData=\(sc.Default\)](https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=IF5391400D60611DE88AEDDE29ED1DC0A&originationContext=documenttoc&transitionType=Default&contextData=(sc.Default))

Joint Review Committee on Education in Radiologic Technology Standards

https://www.jrcert.org/sites/jrcert2/uploads/documents/2021_Standards/2021_Standards_Radiography.pdf

Updated 5/2018, 12/2018, 2/2019, 1/2020, 8/2020, 6/2021, 8/2022

Attachment A

Yuba College Radiologic Technology Program Immunization Requirements

Required Immunization	Requirement
TDAP (Tetanus, Diphtheria, Pertussis)	Date of immunization (must be within 7 years)
MMR (Measles, Mumps, Rubella)	Date of positive titer. If you have a negative or indeterminate titer, obtain one dose of vaccine and repeat titer 4-6 weeks post vaccination. If titer is still negative, obtain a letter from physician stating student is a "Non-converter".
Varicella	Date of positive titer. If you have a negative or indeterminate titer, obtain one dose of vaccine and repeat titer 4-6 weeks post vaccination. If titer is still negative, obtain a letter from physician stating student is a "Non-converter".
Hepatitis B	Date of positive titer. If you have a negative or indeterminate titer, obtain one dose of vaccine and repeat titer 4-6 weeks post vaccination. If titer is still negative, obtain a letter from physician stating student is a "Non-converter".
COVID	Date of immunization and Booster
Influenza	Requirement TBD per CDC/Program Guidelines
TB	A 2-step TB test is required between June and August. A yearly TB test is required after that. If TB test is positive, a chest x-ray is required along with a yearly TB screening.

Please note: You must have obtained all vaccines to have positive titer results.

Attachment B



Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312.704.5300 • (Fax) 312.704.5304
www.jrcert.org

Joint Review Committee on Education in Radiologic Technology (JRCERT) Process for Reporting Allegations

Important Note

1. The JRCERT cannot advocate on behalf of any student(s). An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student.
2. The investigation process may take several months.
3. The JRCERT will not divulge the identity of any complainant(s) unless required to do so through legal process.

Process

1. Before submitting allegations, the individual must first attempt to resolve the complaint directly with program/institution officials by following the due process or grievance procedures provided by the program/institution. Each program/institution is required to publish its internal complaint procedure in an informational document such as a catalog or student handbook. (Standard One, Objective 1.6)
2. If the individual is unable to resolve the complaint with program/institution officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT:

Chief Executive Officer
Joint Review Committee on Education in Radiologic
Technology 20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Ph: (312) 704-5300
Fax: (312) 704-5304
e-mail: mail@jrcert.org

3. The Allegations Reporting Form must be completed and sent to the above address with required supporting materials. All submitted documentation must be legible.
4. Forms submitted without a signature or the required supporting material will not be considered.
5. If a complainant fails to submit appropriate materials as requested, the complaint will be closed.

The Higher Education Opportunities Act of 2008, as amended, provides that a student, graduate, faculty or any other individual who believes he or she has been aggrieved by an educational program or institution has the right to submit documented allegation(s) to the agency accrediting the institution or program.

The JRCERT, recognized by the United States Department of Education for the accreditation of radiography, radiation therapy, magnetic resonance, and medical dosimetry educational programs investigates allegation(s) submitted, in writing, signed by any individual with reason to believe that an accredited program has acted contrary to the relevant accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

**Joint Review Committee on Education in Radiologic Technology (JRCERT)
Allegations Reporting Form**

Please print or type all information.

Name of Complainant:

Address:

City: _____

State: _____

Zip Code: _

Signature: _____ **Date:** _____

Institution sponsoring the program:

Name:

City: _____

State:

Type of Program (Check one):

Radiography Radiation Therapy Magnetic Resonance Medical Dosimetry

The following materials must be submitted:

1. Attach a copy of the program's publication that includes the due process or grievance procedure.
2. Provide a narrative that identifies what you did at each step of the due process or grievance procedure and copies of materials you submitted as part of your appeal and copies of correspondence you received in response to your appeal.
3. List the specific objective(s) from the accreditation standards (available at www.jrcert.org/acc_standards.html) and indicate what the program is alleged to have done that is not in compliance with the cited objective(s).

Example

Objective

Allegation

4.4 direct supervision pre-competency

Students often do patient exams without supervision before they have completed a competency check-off.

Attachment C
Yuba College
Radiologic Technology Program
Student Success Plan

Student _____ Date _____

Faculty _____ Course RADT

Documentation of Verbal Notice Written Warning Revision of plan or Dismissal

Issue/Concern: Include objective findings (include examples, objectives, handbook, policy as needed)

Action Plan: Measurable performance improvement goals

Student comments:

Follow-up date: _____

Student Signature _____

Faculty Signature _____

Attachment D

Yuba College Radiologic Technology Program

Student Separation from Program

Student Name: _____ ID #: _____

Address: _____

Phone: _____ Date of Separation: _____

_____ The student has submitted a request in writing to be separated from the program.
(Request is attached)

_____ The student is being dismissed from the program. Attached required documentation along with a narrative.

Student has been notified by _____ via _____.

Approved by:

Program Director Name Program Director Signature Date

College Administrator Name College Administrator Signature Date

Attachment F

LAB TIME AND ENERGIZED LAB

ENERGIZED LAB:

Yuba College has an energized x-ray machine. The equipment is locked when not in use, and access to the generator switch is locked. The CC and the PD, with a copy in the Allied Health Office, keep the keys.

Students are expected to:

- Come to lab prepared.
- Refrain from eating or drinking in the x-ray room or at the operating console.
- Use fellow students to practice positioning and patient care skills (without ionizing radiation).
- Always wear dosimeter devices at collar level, while utilizing the lab.
- Use safe body mechanics moving, lifting, transferring, and positioning patients (other students) or phantoms.
- Clean and put away all equipment before leaving the lab.
- Assume responsibility for yourself and the radiographic equipment.
- Warm up the X-ray machine according to the protocol for the given equipment.
- Actively engage in performing and practicing skills and other appropriate lab assignments.

Safety Regulations:

- Make radiographic exposures only in the presence of a qualified Program instructor.
- Children or unauthorized individuals are not allowed in the lab.
- Equipment is to be used solely for imaging the radiographic phantoms.
- The door to the radiographic room and the control panel area must be closed before making x-ray exposures.
- The x-ray beam should never be directed toward the control panel.
- All students and faculty must be physically located behind the control panel area when exposures are made.
- Students will refer to the technique chart or laboratory manual for appropriate techniques before making exposures.
- Participation in safety and alertness to mechanical problems will help ensure a safe environment in which to practice.
- Bring safety violations or concerns you might have to the attention of the Program faculty and Program director as soon as they are observed.

Contact Personnel: Jackie Bumanglag, Interim Program Director

Office Phone: 530-741-6964

Attachment G

Yuba College Radiologic Technology Program (R.T.P.)

Radiation Protection Program/Policy

June 2021

1. ORGANIZATION and ADMINISTRATION

- Reporting hierarchy: The appointed faculty functions as the Radiation Safety Officer (RSO). In the event of a radiation incident or infraction of policy, the appropriate supervising official involved (clinical instructor, department manager) will notify the RSO of the event. The RSO will take the appropriate action to investigate the problem, remediate the causative factors where necessary, and will notify the CDPH-RHB according to California regulations. The RSO will notify the appropriate college official if notification to the CDPH-RHB is required.
- Radiation Safety Officer: Linda Wood Ibach, Clinical Coordinator
- Qualifications: Active ARRT registrations and CDPH-RHB certification.
- Dosimeter provider: Mirion Technologies/Instadose – 1-800-251-3331
www.instadose.com
- Dosimetry report review: Clinical Coordinator and/or Program Director

2. ALARA PROGRAM

ALARA Policy: The R.T.P. is committed to maintaining radiation exposure levels as low as reasonably achievable (ALARA) while still allowing each student to obtain all required clinical and didactic competencies. Student exposures are maintained in compliance with NCRP Report Number 105 § 20.1201 Occupational dose limits for adults (this Program does not accept students under the age of eighteen (18)):

- An annual limit, which is the more limiting of—
 - The total effective dose equivalent being equal to 5 rems (0.05 Sv); or
 - The sum of the deep-dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 50 rems (0.5 Sv).
- The annual limits to the lens of the eye, to the skin of the whole body, and to the skin of the extremities, which are:
 - A lens dose equivalent of 15 rems (0.15 Sv), and
 - A shallow-dose equivalent of 50 rem (0.5 Sv) to the skin of the whole body or to the skin of any extremity.

3. DOSIMETRY PROGRAM

Radiation Exposure Records: Student/Faculty radiation exposures are monitored during the entirety of the program and are maintained by the Program as part of the students' permanent file. The most current radiation monitoring report is posted in the classroom. These reports are stored indefinitely in the college One-Drive – Radiologic Technology Confidential.

- The radiation Safety Officer (or acting RSO) reviews the reports monthly.
- A copy of the report is posted online for student review.
- Instadose provided immediate access for students to their dose upon upload.
- Infractions are dealt with in accordance with Radiation Monitoring devices below.

Student and Staff Radiation Monitoring Devices: An Instadose Radiation Monitor device is assigned to students before the clinical rotation each year and students are required to download their monitor reading monthly.

To assure compliance students are to:

- Take the extra time to assure they are properly protected under all circumstances (portable, fluoroscope, etc.).
- Practice ALARA.
- Always wear monitor at neck level and OUTSIDE the apron.
- Not allow the body to be in the primary beam.
- NOT hold patients under any circumstances.
- NOT use fluoroscopy to position patients.
- Take proper precautions with film monitors; do not leave it in the radiation area.
- Report lost or damaged monitors to the instructor of record immediately.
- Complete monthly radiation dose acknowledgement form (located in Trajecsys).
- Report to the Program Director any event involving byproduct, source, or special nuclear material used by the student that may have caused or threatens to cause any excess of exposure to student, staff, or the public.

Program Staff will:

- Order, cancel, and monitor the-dose reports.
- Should allowable radiation exposure amounts exceed recommendations, counsel students within one (1) week of monitor report review.
 - i) Average Quarterly Dose less than 50 mrem, no action.
 - ii) Any dose above 50 mrem, discussion with student and possibly with the PRECEPTOR.
 - iii) Should the reading continue be high after the discussion, a **Student Success Plan** will be completed, and Preceptor will be contacted.
- Maintain Dosimetry **Audit Report** (located on the One Drive- Radiologic Technology Confidential).
- Report all infractions to the RSO.

- In the event of an unusual occurrence either where any student or staff member is exposed to a high dose of radiation in a single event or if the monitor reading is exceptionally high, RHB will be notified as in *Program Reporting Responsibility*.

Annual Occupational Dose Limits: Any dose received must not exceed the annual occupational dose equivalent limits established by the California Code of Regulations, Title 17, and Nuclear Regulatory Commission regulations standard 10 CFR subpart C-Occupational Dose Limits 20.1201.

5 rems (0.05 Sv)/year	Whole body	Total effective dose equivalent
50 rems (0.5 Sv)/year	Extremities	Shallow dose equivalent
15 rems (0.15 Sv)/year	Lens of the eye	Eye dose equivalent

Radiation Safety Training: While radiation protection discussion for the patient, student, and staff occurs throughout the program, formal training is provided in the following didactic courses.

First Semester

- R.T. 1 – Introduction and Patient Care (including Program Policies and Procedures)
- R.T. 3a – Radiographic Procedures

Second Semester

- R.T. 3b – Radiographic Procedures
- R.T. 4 – Radiation Protection and Radiobiology

Fourth Semester

- R. T.7 – Advanced Patient Care
- R.T. 8 – Pathology
- R.T.3c – Radiograph Procedures

Fifth Semester

- R.T. 12 – Board Review

Radiation practice always occurs during the clinical courses that are internship.

4. PREGNANCY PROGRAM

Once pregnancy is declared the following procedure is to be followed:

RSO will:

- Provide this policy both orally and in writing.
- Assure all provisions are followed.
- Review this policy with the student/faculty member.
- Order a fetal monitor.
- Make provisions to notify Preceptor of the declared pregnant student.

The declared pregnant student/faculty member will

- Provide the RSO with a doctor's note.
- Ask questions to clarify her responsibilities and this policy.
- Sign and submit the signed declaration – which will be maintained in the student's file.
- Adhere to all Program and Clinical RPP policies and procedures.
- Wear the fetal monitor at waist level in addition to the non-fetal monitor that is worn at collar level.

NOTE: the Yuba College Radiology RSO is substituted in place of user/supervisor for this policy.

Section 30255 of the California Radiation control Regulations states that each RSO must instruct X-ray technologists (occupationally exposed individuals) in the health protection problems associated with radiation. A special situation arises with occupationally exposed young women. The precautions should be taken to limit exposure to young women, especially if they could be pregnant. Exposure to the abdomen of such workers to X-rays would involve radiation dose to the embryo or fetus.

- A. Following California Radiation Control Regulation requirements (section 20.1207 10 CFR 20 incorporated in California Regulations by reference).
- B. Providing the employee with reasons for the requirements.
- C. Explaining the options.
 - a. Dose to an embryo/fetus.
 - b. Definition:
 - i. Declared pregnant woman means a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.
 - ii. Deep-dose equivalent, which applies to external whole-body exposure, is the dose equivalent at a tissue depth of 1 cm (100 mg/cm).
 - iii. Embryo/fetus means the developing human organism from conception until the time of birth.
 - c. Regulatory provisions (10 CFR 20, Section 20.1207):
 - i. The RSO shall ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv).
 - ii. The RSO shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman to satisfy the limit in paragraph (a) of this section.
 - d. The dose to an embryo/fetus shall be taken as the sum of:
 - i. The deep-dose equivalent to the declared pregnant woman; and
 - ii. The dose to the embryo/fetus from radionuclides in the embryo/fetus and radionuclides in the declared pregnant woman.
 - e. If the dose to an embryo/fetus is found to have exceeded 0.5 rem (5 mSv) or is within 0.05 rem (0.5 mSv) of this dose, by the time the woman declares the pregnancy to the RSO, the RSO shall be deemed to be following paragraph (a) of this section if the additional dose to the embryo/fetus does not exceed 0.05 rem (0.5 mSv) during the remainder of the pregnancy.

D. REASONS FOR REQUIREMENTS

Once a pregnancy becomes known, radiation dose of the embryo-fetus shall be no greater than 0.05 rem (50 mrem) in any month (excluding medical exposure).

Some studies have shown that there is an increased risk of leukemia and other cancers in children if the expectant mother was exposed to a significant amount of radiation. The Radiologic Health Branch wants women employees to be aware of any possible risk so that the women can take steps they think appropriate to protect their offspring.

- The first three months of pregnancy are the most important as the embryo-fetus is most sensitive to radiation.
- In most cases of occupational exposure, the actual dose received by the embryo-fetus is less than the dose received by the mother, because some of the dose is absorbed by the mother's body.
- At the present occupational dose equivalent limits, the risk to the unborn baby is small, but experts disagree on the exact amount of risk.
- There is no need for women to be concerned about sterility or loss of ability to bear children.
- The 0.5 rem (500 mrem) dose equivalent limit applies to the full nine months of pregnancy.
- Once a pregnancy becomes known, radiation dose of the embryo-fetus shall be no greater than 0.05 rem (50 mrem) in any month.

E. Practical Options.

- May be temporarily reassigned to tasks which involve less risk of being exposed to radiation (NOTE: any reassignment should not present additional exposure to other students or staff – nor interfere with program requirements).
- Use protective apron (full-size, half-size, wrap-around, or any other protective clothing appropriate to the situation) while exposing patients.
- Whenever possible stay out of the X-ray room and behind protective barriers.

5. PATIENT SAFETY

POLICY: The student is responsible for positively identifying the patient prior to radiographic exam. If the student performs an exam on an incorrect patient, or the incorrect exam on the patient, the student will notify the clinical supervisor/clinical instructor immediately.

PROCEDURE: The student will positively identify the patient by using the patient's name, and additionally at least **two** of the following:

- Medical record number
- Patient birthday
- Patient ID wrist band
- Correlation with doctors written order

- Interview with parent or caregiver.

After positively identifying the patient, the student will perform the ordered radiographic exam in accordance with his/her hospital site protocol for that examination. If the student questions the order or requires further clarification, consultation with the Preceptor, the radiologist, or the ordering physician should be accomplished before proceeding with the radiographic exam.

Failure to positively identify the patient or failure to perform the correct exam on the correct body part must be documented by the student completing an Incident form and submit it to the clinical coordinator or program director. The student will also give a copy of the documentation to the clinical supervisor / Preceptor at their internship site.

Once the Incident Report is filed with the Yuba program, the student will be made aware of the significance of the incident.

- First, student must complete incident report. The Incident report will be filed in the student's folder located on the One Drive – Radiologic Technology Confidential.
- Second, student must complete incident report & college staff will complete a student success plan. The clinical coordinator or program director will counsel the student.
- Third, student is dismissed from the program.

Verification of the Radiation Protection Program

There are three steps to assure verification and clinical training.

- Each student is required to complete a clinical orientation at the beginning of each new clinical rotation/facility. This form is documented in Trajecsys.
- Clinical Instructors Orientation (documentation of training is in the One-Drive – Radiologic Technology).
- In addition, the Clinical Coordinator monitors the posting of the CDPH "Notice to Employees" Form Comp-RHB 2364 at each clinical site during regular visitations and is documented in Trajecsys.

6. EMERGENCY EXPOSURE SITUATION AND RADIATION ACPRECEPTORDENT DOSIMETRY

Excessive Dose Policy: Per the United States Nuclear Regulatory Commission Standard 10CFR 20.2202-Notification of Incidents:

Program Reporting Responsibility: The Program will adhere to the following reporting protocols:

- The State Department of Public Health Radiologic Health Branch will be notified by the Program Director when a student or faculty is exposed to radiation, for other than prescribed medical purposes, more than the limits noted below.

- Notification will include a report by telephone to 916-445-0931 and a confirmation letter to the State Department of Public Health within 24 hours of the incident. In addition, the program director will investigate the conditions under which the overexposure occurred and report the findings to the RHB within 30 days of the incident.
- Immediate notification to RHB by the RSO if an individual has received:
 - A total effective dose of 25 rems (0.25 Sv) or more, or
 - An eye dose equivalent of 75 rems (0.75 Sv) or more, or
 - A shallow-dose equivalent to the skin or extremities of 250 rems (2.5 Sv) or more.
- Twenty-four (24) hours notification is required if an individual has received within 24 hours:
 - A total effective dose of 5 rems (0.05 Sv) or more, or
 - An eye dose equivalent of 15 rems (0.15 Sv) or more, or
 - A shallow-does equivalent to the skin or extremities of 50 rems (0.5 Sv) or more.

7. RECORD KEEPING AND REPORTING

Record Keeping and Reporting: The R.T.P. will follow the record keeping and reporting requirements as specified in 10 CFR 20. The RSO monitors the student and faculty radiation dosimetry records monthly. Students are to document acknowledgement of monthly dose by completing a form in Trajecsys and any corrective actions, reporting, and/or investigation would ensue if a dose received exceeds the regulatory limit. The program will retain the radiation dose records until the Nuclear Regulatory Commission terminates each pertinent license requiring this record. All Radiation Safety dosimetry reports and annual audits are maintained and kept in the One Drive – Radiologic Technology Confidential.

Internal Audit Procedures: The RSO will maintain and review the Radiation Protection Program (RPP) content and implementation on an annual basis. The audit will be complete by December 30 of each year, respectively. Annual reviews are retained for a minimum of 5 years. Documentation includes:

- How well is the RPP working?
- Can the RPP be improved?
- Have pertinent circumstances changed?
- Have Federal or State regulations changed?

8. ENERGIZED LAB:

Yuba College has an energized x-ray machine. The equipment is locked when not in use, and access to the generator switch is locked. The CC and the PD, with a copy in the Allied Health Office, keep the keys.

Students are expected to:

- Come to lab prepared.
- Refrain from eating or drinking in the x-ray room or at the operating console.
- Use each other to practice positioning and patient care skills
- Always wear dosimeter devices while utilizing the lab.

- Use safe body mechanics moving, lifting, transferring, and positioning patients (other students) or phantoms.
- Clean and put away all equipment before leaving the lab.
- Assume responsibility for himself/herself and the radiographic equipment.
- Warm up the X-ray machine according to the protocol for the given equipment.
- Actively engaging in performing and practicing skills and other appropriate lab assignments.

Safety Regulations:

- Make radiographic exposures only in the presence of a qualified Program instructor.
- Children or unauthorized individuals are not allowed in the lab.
- Equipment is to be used solely for imaging the radiographic phantoms.
- The door to the radiographic room and the control panel area must be closed before making x-ray exposures.
- The x-ray beam should never be directed toward the control panel.
- All students and faculty must be physically located behind the control panel area when exposures are made.
- Students will refer to the technique chart or laboratory manual for appropriate techniques before making exposures.
- Participation in safety and alertness to mechanical problems will help ensure a safe environment in which to practice.
- Bring safety violations or concerns you might have to the attention of the Program faculty and Program director as soon as they are observed.

Contact Personnel: Jackie Bumanglag, Interim Program Director

Office Phone: 530-741-6964

9. REPORTS AND FORMS

- Monthly report posted in the classroom
- Dosimetry Audit Report (found in One Drive – Radiologic Technology Confidential)
- Student Pregnancy Acknowledgement Form (found in RPP binder in PD office)
- Student Orientation to Clinical Facility (found in Trajecsys)
- Incident Form (found in Trajecsys)
- Clinical Instructor Orientation Program (acknowledgment found in One Drive – Radiologic Technology)
- Clinical Facility Checklist (found in Trajecsys)

Yuba College Radiologic Technology Program
Acknowledgment & Signature Form

My signature below indicates that:

- I have read the current Student Handbook and Radiation Protection Plan and have been given an opportunity to clarify its content.
- I agree to abide by the guidelines and procedures as stated in the Student Handbook, Radiation Protection Plan, and Yuba College Policies.
- I agree to comply with the process of grievance resolution here at Yuba College and the Radiologic Technology Program.
- I acknowledge I have received a copy of JRCERT's allegations reporting form.

Student's Name (print name legibly) Student ID #

Student's Signature Date

