

CSUN

CALIFORNIA
STATE UNIVERSITY
NORTHRIDGE

BS RADIOLOGIC SCIENCES PROGRAM

Student Handbook & Policies and Procedures



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SECTION I: GENERAL PROGRAM INFORMATION

Introduction

The CSUN BS Radiologic Sciences Program is accountable to the California State University system, the Commission on Allied Health Education Accreditation, the Joint Review Committee of Education in Radiologic Technology, the profession, the consumer and you, the student. The program must ensure that its graduates are academically, clinically and professionally prepared to enter the profession as competent technologist. In order to do so, specific policies have been established for conducting this program.

A full disclosure of these policies is provided in the next few pages. You are asked to review carefully these policies. All policies are consistent with university policies as explained in the current catalog.

If you have any questions or need further clarification of these policies, contact the Program Director immediately.

Program Mission Statement

The mission of the California State University, Northridge BS Radiologic Sciences Program is to provide the community with a competent, professional Radiologic Technologist who possesses additional advanced medical imaging skills in MRI, CT and Interventional Radiography that meet the needs of the medical imaging community through a highly integrated and advanced level clinical and academic curriculum.

Program Goals

Graduates of the Radiologic Sciences Program at California State University, Northridge will:

1. Demonstrate a mastery of basic radiographic medical-imaging skills and advanced medical imaging skills in MRI, CT and Interventional Radiography.
2. Demonstrate effective communication skills that provide compassionate age-appropriate patient care.
3. Demonstrate problem-solving/critical thinking skills that provide ethical and safe patient care.
4. Demonstrate the value of professional development for patient care and medical imaging through life-long learning that meet the needs of the medical imaging community.
5. Maintain program effectiveness through continual assessment.

Program Guidelines

Students enrolled in the CSUN BS Radiologic Sciences Program will be responsible for observing college rules and regulations stated in the current college catalog and student handbook. In addition, they will adhere to work rules and policies of all major and minor affiliated sites.

The rules and regulations stated in this handbook represent a contractual agreement between the CSUN BS Radiologic Sciences Program and the student for 27 months. Failure to comply with the rules and regulations in

this handbook will affect student evaluations and may result in dismissal from the Radiologic Sciences Program; if the student shows no improvement or makes no attempt to correct errors after counseling.

1. Accident Reporting

All accidents that occur while on clinical assignment that involves a patient, hospital personnel, or personal injury, and/or damage to equipment must be reported immediately to the clinical supervisor and clinical coordinator. Students will be required to fully understand the safest methods of performing routine radiographic procedures before undertaking them. Refer to Injury Procedure and Reporting Policy.

2. Checking Films/Images

Students must have **every** film/image checked by a technologist before any case is finished, even if the student has reached competency in a particular type of exam.

3. Clinical Assignments

Students enrolled in the CSUN Radiologic Sciences Program will be scheduled to rotate through various clinical areas by consultation amongst the Clinical Coordinators and in agreement with the clinical area supervisors. Students must maintain a record of clinical experience and submit assessments upon completion of each clinical area.

4. Clinical Course Objectives

Throughout the 27 months in the CSUN Radiologic Sciences Program, the student will participate in clinical assignments in order to:

- Acquire expertise and proficiency in a wide variety of diagnostic radiographic procedures by applying classroom theory to the actual practice of technical skills on specified levels of competency.
- Develop and practice professional work habits and appropriate interpersonal relationships with patients and other members of the health care team.

5. Confidential Information

All hospital and patient records are confidential in nature. Requests for information regarding patient should be referred to the area supervisor or designate. Students are expected to maintain the confidentiality in a professional manner and adhere to all HIPAA policies at all the clinical affiliations.

6. Markers

Students will use their own right and left permanent lead markers with bb's to properly identify the radiographic procedures they perform.

7. Performance Evaluation

Student performance evaluation is based upon psychomotor and affective objective assessments and provides an opportunity for guidance and assistance when student improvement is deemed necessary.

8. BSRS Program Compliance

Students are made aware of the requirements implemented by the program's accreditation body, Joint Review Committee on Education in Radiologic Sciences. The program reviews the JRCERT standards with the students during the program orientation and at some point in the senior level professional development course.

Students are responsible for notifying the appropriate program faculty when there are concerns about

noncompliance with the JRCERT standards. The program director will be informed of all allegations of nonconformity by faculty, who will maintain records of non-compliance, outcomes of investigations of these allegations and resolution. If the student is not satisfied with these actions, the student has the right to notify the department chair of such allegations that are not resolved. The student may also notify the JRCERT if the allegations of non-compliance have not been resolved.

JRCERT standards can be viewed on their website, http://www.jrcert.org/acc_standards.html.

Roles of Clinical Staff Members

The clinical learning environment of the BSRS students is comprised of staff members from the affiliated facilities. The staff members who interact and work with the students are identified by the program as a Clinical Coordinator, Clinical Instructor, or Clinical Staff. The identified staff members are those who help bridge students' didactic work with their psychomotor abilities.

Below are delineations between clinical coordinators, clinical instructors and clinical staff.

Clinical Coordinators are essentially faculty who supervise clinical sites. Clinical coordinators act as supervisors of students while on site. The clinical coordinators oversee the clinical instructors and clinical staff with reference to the clinical education of the students.

Clinical Instructors are the lead technologists who take the place of the Clinical Coordinators when they are off site. They can be teaching and conducting competency assessments, affective assessments, and daily log sign-offs for students during clinical education.

Clinical Staff with two years of CRT experience are staff technologists who can be teaching and conducting competency assessments, affective assessments, and daily log sign-offs for students during clinical education.

Clinical Staff with less than two years of CRT experience are staff technologists who can be teaching clinically for both direct and indirect student oversight and signing off on daily logs for students during clinical education.

List of Fees for the Radiologic Sciences Program

- Tuition See CSUN's current catalog
- Books/eBooks \$500 – \$700 per year
- Background check \$65 – \$110
- Professional Liability Insurance \$60 – \$70
- Electronic Tracking System \$0-currently no cost to student
- Associated Fees:
 - Parking \$0- 20/day (*depending on clinical site*)
 - Uniforms w/logo \$20 – \$40 per set
 - Uniform Jacket \$20 – \$40
 - Shoes \$20 – \$100
 - Lead Markers \$15 – \$25 per set
 - Student Memberships \$35 – \$75 per year (*optional*)
 - Professional Conferences \$50 - \$250 (*per conference –optional*)
 - Hospital Badges \$15-24(*replacement of lost or damage badges*)
 - Medical Clearance varies per individual medical coverage

All Fees are subject to change. These are only close approximations and can vary depending on the quality and/or quantity*.

SECTION II: PROGRAM POLICIES

Academic Dishonesty Policy

The maintenance of academic integrity and quality education is the responsibility of each student within the university and the California State University system. For this reason, academic dishonesty is considered an especially serious offense. Cheating or plagiarism in connection with an academic program at a campus is listed in Section 41301, Title 5, California Administrative Code, as an offense for which a student may be expelled, suspended, or given a less severe disciplinary sanction.

Academic dishonesty diminishes the quality of scholarship on the campus and defrauds those who may eventually depend upon our knowledge and integrity. Such dishonesty includes:

Cheating: Intentionally using or attempting to use unauthorized materials, formation, or study aids in any academic exercise.

Fabrication: Intentionally, without authorization, falsifying or inventing any information or citation in an academic exercise (*includes falsification of student paperwork, daily logs, competencies, and assessments and time fraud*).

Plagiarism: Intentionally or knowingly representing the words or ideas of another as one's own in any academic exercise.

Facilitating Academic Dishonesty: Intentionally or knowingly helping or attempting to help another to commit academic dishonesty.

Policies and Procedures:

Academic Evaluation

Academic performance is exclusively a province of faculty involved. The faculty member may assign a failing grade to an assignment, paper, test, -where warranted- a final course grade for academic dishonesty.

Faculty members may file a detailed report of any instance of academic dishonesty to their department chair and to the Dean or Associate Dean of their school, indicating action taken to date.

The Department Chair and Dean or Associate Dean shall review the report to advise as to the appropriate disposition of the incident.

Student Discipline

Student Discipline (not including the assignment of grades) is exclusively the province of the office of the Dean of Students. Final campus authority is vested in the Dean of Students the president's designee in student disciplinary matters.

The Student Conduct Code is contained in Article 1.1, Title 5, California Administrative Code, and is published in the university catalog, schedule of classes, and the student handbook. The document governing the student disciplinary procedures of the California State University is Executive Order 148,

issued by the Chancellor's Office on March 18, 1972.

Formal written reports of incidents involving violations of the Student Conduct Code (including instances of academic dishonesty) may be referred by a faculty member, school dean, or Associate Dean to the Office of the Dean of Students either for information purposes or with a request for disciplinary action. When disciplinary action is requested, a Student Conduct Code Violation Report form and all other substantiating evidence shall be provided.

The Assistant Dean of Students/Coordinator of Student Discipline is empowered to investigate all instances of academic dishonesty and other alleged violations of the Student Conduct Code.

The Coordinator of Student Discipline shall contact persons having knowledge of the incident and shall conduct an investigation of charges.

Cases of academic dishonesty are resolved either through an appropriate sanction accepted by the student or by disciplinary hearing conducted in accordance with Section 7 or Executive Order 148. Notice of the resolution of a case shall be sent by the Dean of Students to the Dean or Associate Dean, Department Chair, and other appropriate faculty members in the school involved.

Penalties

Section 41301, Title 5, California Administrative Code, as published in the university catalog, Appendix 1, provides that a student may be expelled, suspended, placed on probation or given a lesser sanction for a proven violation of the Student Conduct Code. Among the violations listed in Section 41301, cheating or plagiarism in connection with an academic program is specifically included.

Disciplinary records of any action of academic dishonesty are retained in the office of the Dean of Students for at least five years from the date of final adjudication. These records may be available to prospective employers and other educational institutions, in accordance with federal and state regulations.

Student Discipline

Anyone wishing to report an act of academic dishonesty would call 677-2391 or visit the office of the Vice President for Student Affairs and ask for the Associate Vice President of Student Affairs. The Associate Vice President will investigate such reports. Information may be provided anonymously; disciplinary action, however, cannot be taken on the basis of anonymous reports alone. The Associate Vice President is also available to assist faculty members in the development and presentation of academic dishonesty cases. For more information refer to the CSUN catalog academic dishonesty section.

Academic Dismissal Policy

All students must receive a “C” grade or better in all professional courses in order to graduate from CSUN and the professional Radiologic Sciences Program. Failure to obtain a passing grade in any of the core BSRS courses will require the student to repeat the course and possibly the program. Failure to pass any of the other BSRS courses will be subject to repeat the course which may delay completion of the program. The following are the Radiologic Sciences courses:

BSRS Core Courses:

HSCI 181	Medical Imaging Sciences I*
HSCI 182	Medical Imaging Sciences II*
PSY 376	Radiologic Physics*
HSCI 280	Radiological Sciences: Clinical Education I*
HSCI 281	Radiological Sciences: Clinical Education II*
HSCI 282	Radiological Sciences: Clinical Education III*
HSCI 283	Radiological Sciences: Clinical Education IV*
HSCI 284	Radiological Sciences: Clinical Education V*
HSCI 285	Radiographic Anatomy & Positioning I*
HSCI 286	Radiographic Anatomy & Positioning II*
HSCI 302	Basic Pathophysiology
HSCI 380	Cross-sectional Anatomy for Radiographers
HSCI 384	Computers in Diagnostic Imaging
HSCI 385	Quality Assurance & Evaluation of Radiology Imaging Equipment*
HSCI 386	Radiological Sciences: Clinical Education VI
HSCI 387	Radiological Sciences: Clinical Education VII
HSCI 480	Computed Tomography
HSCI 482	Angiography & Interventional Technology
HSCI 483A	Medical Imaging Pathology
HSCI 485	Principles of MRI
HSCI 486A	Seminar: Advances in Radiologic Imaging I
HSCI 486B	Seminar: Advances in Radiologic Imaging II
HSCI 487	Professional Development for Radiographers

Upper Division Health Sciences Courses:

HSCI 390 & L	Biostatistics and Lab
HSCI 488	Epidemiology: Study of Disease

* If a student receives a grade lower than a “C” in any of the first year’s courses, the student is unable to move forward in the program because all courses are prerequisites for the next semester.

Cheating of any kind during quizzes/tests will result in an automatic F in the course.

Academic Papers/Projects Policy

Academic papers/projects generated in the BS Radiologic Sciences Program may not be submitted more than once to fulfill academic requirements in any other courses. For example, a clinical case study may not be turned in the pathophysiology course to fulfill the writing assignment. Multiple submissions of papers/projects are not allowed and would be considered an infraction of the university's Student Conduct Code, under Academic dishonesty, without the consent of the instructor.

"Substantial portions of the same academic work may not be submitted for credit in more than one course without authorization." (See University Catalog, Appendix E-2, #4).

Also, student teaching projects may not be on any previously submitted topics to any course in the BSRS program.

In an effort to maintain the university high standards of academic integrity, all students are expected to comply with the university's Student Conduct (University Catalog, Appendix E.1-E.4) to avoid academic dishonesty. Such acts of plagiarism, fabrication, fraudulent use of internet sources, false citations or data will result in an automatic "F" on the assignment. **No academic paper/project with less than a passing grade of 75% will be accepted. The student will be given the opportunity to re-submit the assignment for a passing grade within a time frame at the discretion of the CCs.** To determine the final grade on the paper/project, the grades of the two assignments will be averaged.

Students may be required to submit their writing assignments electronically through "turnitin.com" at the discretion of the clinical coordinators/instructor. All references used for the assignment must be easily available upon request within two weeks after the assignment is due. (Checking out textbooks from the Oviatt Library, ensure to have possession two weeks after the term paper has been submitted. Faculty may request to see them.) **Failure to provide references and any violation of the HIPAA principles will result in a failing grade for the particular course.**

If a student fails to comply with this policy, a letter grade of "F" will be assigned to any identical materials/projects.

Section 41301, Title 5, California Administrative Code, as published in the University Catalog, Appendix 1, provides that a student may be expelled, suspended, placed on probation or given a lesser sanction for a proven violation of the Student Conduct Code. Among the violations listed in Section 41301, cheating or plagiarism in connection with an academic program is specifically included.

Affiliated Hospital Requirements

All students are mandated to be qualified for clinical placement at any site throughout the 27 month program. Qualified means **complying with all affiliated hospital requirements**, regardless of what sites the student is scheduled to rotate. Failure to comply with new and/or renewal of hospital requirements prior to expiration will disqualify the student for any hospital placement. Consequently, the student will be suspended from clinical education until requirements are met.

It is the student's responsibility to renew and fulfill requirements of any of our affiliated hospitals. Students are accountable to submit a copy of their new/renewed document(s) for their student file and for the affiliate hospital records. If a student continues to attend clinical without a valid CPR card, the hours will not be counted and the student will receive a misconduct.

Some of the main requirements that need to be renewed prior to expiration are: CPR cards, Northridge Hospital's Annual Fit Testing, Annual TB Skin Testing, Fire and Safety Trainings, and Olive View's multiple requirements.

**Hospital accreditation requires all hospital employees and volunteers to maintain valid CPR certification that is approved by the American Heart Association. Students rotating through Shriners may not attend CPR class during the clinical hours. NHMC offers a CPR courses at various times and students must register in advance.*

It is the **students' responsibility to notify the Clinical Coordinator and Clinical Supervisor** of their intentions on attending CPR, TB skin test, Fit Test, or any other hospital requirements prior to missing clinical. The student will be excused up to 4 hours of clinical for CPR renewal, and 2 hours for all other requirements so please schedule your appointments accordingly.

Cash Management Policy

In order to comply with California State University Northridge policies, the Radiologic Sciences program does not handle or collect cash from students for any reason. However, there are occasions when the BSRS program can provide discounts to students if they purchase materials or documents as a group. The procedures for these purchases are detailed below.

1. Collecting fees for clinical liability insurance after the student is accepted to the program. Each student submits a cashier check or money order made out directly to the insurance company (Mercer Consumer) for students' portion of the fee. The faculty then sends these checks and the application to the insurance company.
2. Collecting fees for lead markers to be used during clinical internship. Each student submits a personal check made out directly to the approved marker manufacturer and then the faculty will mail these checks and the order form to the marker company.

The graduation dinner party is a private party organized and paid for by each graduation class. The BSRS faculty is not involved with these plans.

Clinical Education Attendance Policy

BS Radiologic Sciences students will attend all clinical assignments as scheduled by the clinical coordinators. Time cards will be used to keep accurate record of the clinical attendance and time. At the end of each semester, the total number of hours will be recorded and filed.

If unavoidable circumstances result in tardiness or absence, students are required to notify the area supervisor and the clinical coordinator one hour before starting time or as soon as possible. All tardiness and absenteeism will be made up at the convenience of the clinical supervisor, preferably on the same time card and definitely before the completion of the term in which they occur, in order for students to be considered for a passing grade. Habitual tardiness and absenteeism will result in a reduction of the final grade for the appropriate clinical course. Absences of three or more days for reasons of illness will require a physician's statement regarding student capability to resume clinical assignment. Students will not be allowed to resume clinical assignment until they are able to perform all their duties without restriction.

An inconsistent clinical education does not allow student progressive psychomotor clinical growth. Therefore, a BSRS student may not owe more than 40 hours of clinical education at any time; unless, a **documented** medical excuse, family emergency, or life event (at the discretion of faculty) has been presented to the program faculty. **If a student accrues more than 40 hours of unapproved clinical time at any point of the semester, he or she will accrue an additional 40 hours of clinical education and will not earn a grade higher than a C for the corresponding clinical course.** The student will be required to make-up the additional 40 hours plus the number of hours originally missed towards the end of the program. The area of make-up will not necessarily be in the same area missed, but any area available during that time.

Example: student X missed 42 hours not due to documented illness during summer clinical the student X will accrue an additional 40 hours. The student now owes 82 hours of clinical that can only be made up after December of the graduating senior internship earn a grade no higher than a C, as per the other grading policies.

Students who have less than 40 clinical hours owed during any one semester must complete those hours during that semester or the student forfeits the grade higher than a C. If the student fails to complete the owed time before the last day of make-up week of that semester, the remaining owed time of the previous semester will carry over into the next semester.

To avoid quality of the education being adversely affected, a student who is absent for 60% or more of the clinical rotation will have to repeat the entire rotation. Thus, the student will not be allowed to make-up the rotation on an intermittent schedule. The rotation will be scheduled in a continuous block of time at the discretion of the program director and clinical coordinators.

All make-up must be preapproved with the Clinical Coordinators. Failure to seek approval will result in not earning credit for the make-up time.

Clinical Grading Policy

Your clinical grade is comprised of six separate items and is detailed in the clinical syllabus.

The Clinical Grade Breakdown for <u>Junior</u> Students: (in points)	
1. Comps	10
2. Image Review	10
3. Clinical performance (Assessments)	5
4. Clinical Objectives	5
5. Professionalism	38
• Misconducts	20
<i>(Starting from the 2nd misconduct, since 1st one is a verbal warning)</i>	
• Dress code	10
• TLD badges	10
6. Writing Assignment	30
<i>(Each semester has a different assignment)</i>	
<hr/>	
TOTAL	100

The Clinical Grade Breakdown for <u>Senior/Grad Senior</u> Students: (in points)	
1. Comps	12
2. Image Review	10
3. Clinical performance (Assessments)	5
4. Clinical Objectives	5
5. Professionalism	38
• Misconducts	20
<i>(Starting from the 2nd misconduct, since 1st one is a verbal warning)</i>	
• Dress code	8
• TLD badges	10
6. Writing Assignment	30
<i>(Each semester has a different assignment)</i>	
<hr/>	
TOTAL	100

Grade Percentage Breakdown

A = 93-100% B = 85-92% C = 75-84% D = 65-74% F = Below 65%

Note: A "C" is the highest grade possible for any incomplete, once that work has been made up. If a student receives a grade lower than a "C" in any of the core courses that are prerequisite to the following semesters course work, the student may not continue in the program.

Students are graded based on the following: exam competencies, image review, affective assessment, and clinical objectives (see below, items 1-4). The fourth item: professionalism, is a combination of factors that reflect clinical performance like tardiness, dress code, and misconducts (see below, items 4-7 and Tardy and Late Calls policy, Dress Code Policy, and Misconduct Policy).

**** Missing 1 assessment or 1 objective for the semester will drop your grade by one grade. If you miss two or either/or an assessment or an objective, your grade will drop two grades. If 3 are missing you will receive an incomplete. *****

The fifth item of the grade comes from the professional writing assignment, e.g. technique book or case studies. The effect of these papers on your final grade will be discussed at the end of this policy (see below, item 8 and Clinical Assignments and Test Criteria Policy).

1. Satisfactory progress in the clinical area is contingent upon fulfilling the minimum **number of competencies** required in clinical for each semester. These minimum numbers are as follows:

Semester and Year	Number of Competencies
Fall #1 (Junior Yr.)	5
Spring #1 (Junior Yr.)	10
Summer #1 (Junior/Senior Yr.)	10
Fall #2 (Senior Yr.)	6 + 6 re-comps
Spring #2 (Senior Yr.)	6 + 6 re-comps
Summer #2 (Grad Sr. Yr.) & Fall #3 (Grad Sr. Yr.)	6 re-comps each semester + finish all remaining competencies mandated for graduation, and obtain two terminal competencies on a fluoroscopy and a general diagnostic exam.

Proficiency testing is competency retesting and will be required as a senior and as a graduating senior student. Senior students must retest on 6 competencies in the fall and again in the spring semester. A re-competency may not be obtained on an exam that was just obtained that semester, except for post-grads' observed comps. A student may not re-comp in an exam that was previously re-comped. Post-grads will be required to obtain 6 re-comps during both the summer and fall semester. In addition, prior to graduation each graduating senior will be proficiency tested by terminal competencies on a fluoroscopy and a general diagnostic exam (complete L-spine or C-spine) by the clinical coordinator or designee.

2. **Image Review:** Three hours of image review are documented using the Image Review Log sheet. The log must be turned into the CSUN Student Drop Box at the end of each semester. Some portion of image review hours must be completed **before** make-up week. Image review accounts for 10 points of the Final Clinical Grade.
3. **Affective Assessments.** Affective assessments must be turned in within two weeks of the end of every rotation. A satisfactory rating must be reached. If a satisfactory rating has not been achieved, the assigned clinical coordinator will mentor the student. If a student misses more than 60% of any rotation, a new assessment must be turned in at the end of that rotation.
4. **Clinical Objectives.** Clinical Objectives must be turned in within two weeks of the end of every rotation. If the student does not turn in all clinical objectives points will be deducted accordingly.
5. Student must adhere to all rules of conduct for both the professional program and the clinical site. Refer to Code of Conduct. Remember, **professionalism** is important, and you will be expected to uphold the standards of the institution and the BSRS program.
6. **Tardiness:** Student must strive for punctuality throughout the entire program. Each tardy will result in a 2-point reduction of the final clinical grade. If the student were to get 4 or more tardies, then the base grade will drop a letter grade.
 - 4 tardies- drop one letter grade
 - 8 tardies - drop another letter grade
 - 13 tardies - would drop the grade to a "D", which is not acceptable in the professional program.

Time-missed should be made up that same day to complete 8 hours. If more than 15 minutes are missed permission must be obtained first!

The last two semesters of the BSRS program, tardiness will be strictly enforced. If a graduating senior

receives more than 5 tardies, he/ she will be required to submit a case study.

7. All **owed clinical hours** are made up by the end of the designated make-up time following the semester. Failure to complete owed time will result in an incomplete in the course. Any undocumented hours still remaining from the previous semester, will carry over into the new semester or summer clinical.
8. **Dosimeters and TLDs:** The BSRS student is required to turn in or exchange his/her monthly dosimeter or quarterly TLD within the first five days of the month that it is due. Failure to turn in or exchange the dosimeter in time will result in point reduction from the Final Clinical Grade. Reminder, the student will have up to four dosimeters badges/TLDs assigned to him or her. Failure to turn in more than one could greatly affect the clinical grade. **Dosimeters may not be removed from any clinical site. In addition, CSUN will be supplying a dosimeter that must be worn at all times. At some sites students will wear 2 monitor badges, one for the site and one for CSUN.**
9. The professional **writing assignment** will be graded with a grading rubric specific to each assignment.
*** Papers may not contain more than 40% quotes from other sources. ****

An assignment grade of less than 75% will result in resubmitting the paper and the two grades will be averaged.

Failure to submit a professional paper or the submission of an unsatisfactory paper will result in an incomplete. If the incomplete is not made up with a resubmission of a satisfactory paper, student will resubmit the assignment until a satisfactory score is met.

Any form of HIPAA violation (patient's name, DOB, Accession #, Medical Record #, etc.) will result in an automatic failure of that assignment. The student will then be required to resubmit the assignment with all identifiers removed and will complete a HIPAA violation assignment assigned by the RS faculty/Clinical Coordinators. Upon completion of that assignment, the student's assignment grade will be no higher than a 75%.

Academic dishonesty will not be tolerated, and will result in dismissal from the professional program. This includes all forms of academic dishonesty, plagiarism, cheating on tests, time card fraud and all other forms of dishonesty will result in a "F."

You will be required to complete a professional assignment or test for each semester of clinical education. These assignments will change depending upon which semester you are in as follows:

Semester Year	Clinical Writing Assignment
Fall Junior Year	Technique Book Part 1
Spring Junior Year	Technique Book Part 2
Summer Junior Year	Venipuncture
Fall Senior Year	Critical Thinking/self-Evaluation
Spring Senior Year	Case Study
Summer Post-grad Year	Advanced Imaging Protocol Book
Fall Post-grad Year	ARRT study modules

Writing Assignments accounts for 30 points out of 100 of the Final Clinical Grade (see Clinical Final Grading Policy). Failure to submit and/or complete the appropriate assignment for the semester will result in an incomplete for their clinical grade.

Grading Scale for Writing Assignments:

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

A clinical misconduct shall be defined as: an infraction against any rule or policy pertaining to clinical education, the program in general, and the clinical site.

Misconducts are continuously recorded throughout the duration of the program. However, the severity of each misconduct is different and therefore outlined below:

Junior Year: Starting the beginning of the 1st fall semester through the end of 1st summer semester

- The **first** misconduct, the student will receive a verbal warning, and the student will also owe 4 hours of clinical in the rotation that the misconduct occurred.
- Upon a **second** misconduct, the student will receive a written warning; in addition, 20 points will be deducted from the student's clinical grade for the corresponding semester (see Final Clinical Grade).
- For each additional misconduct for the year, an automatic 20 points will be deducted from the students' clinical grade for the corresponding semester (see Final Clinical Grade).
 - After the first misconduct/verbal warning, if the student receives 2 misconducts in the same semester the student's grade **will result in an F for the corresponding clinical semester**; thus, not being able to move forward in the program. (See Academic Dismissal Policy).

Senior Year: Starting the beginning of the 2nd fall semester through the end of 2nd summer semester

The clinical misconduct record from the junior year is cleared and all students will receive a clean slate for their 2nd year.

- The **first** misconduct, the student will receive a verbal warning, and the student will also owe 4 hours of clinical in the rotation that the misconduct occurred.
- Upon a **second** misconduct, the student will receive a written warning; in addition, 20 points will be deducted from the student's clinical grade for the corresponding semester (see Final Clinical Grade).
- Upon a **third** misconduct:
 - If the 3rd misconduct occurs in a different semester than the 2nd misconduct: 20 points will be deducted from the student's clinical grade for the corresponding semester (see Final Clinical Grade).
 - If the 3rd misconduct occurs in the same semester as the 2nd misconduct: Instead of another 20 points being subtracted from the clinical grade, the student will owe 40 hours of clinical education for each infraction.

Graduating Senior Year: Starting the beginning of the 3rd fall semester through the end of completing the program.

- The **first** misconduct, the student will receive an automatic written warning; in addition, 20 points will be deducted from the student's clinical grade for the corresponding semester.
- For every additional misconduct thereafter, the student will owe 40 hours of clinical education for each infraction.

Additional clinical assignments will be based on clinical availability and determined by the clinical coordinators. If the hours cannot be made up by the end of fall semester, the student will receive an *incomplete* grade for clinical. The student will need to return in spring to finish the clinical hours owed resulting in a clinical grade no higher than a C and a delay in taking the National Registry Exam.

Time fraud and falsification of paperwork and security (e.g. daily logs, affective assessments, competencies) and breaches in confidentiality is a form of academic dishonesty, which will result in failure of the clinical course. Any "F" in a clinical course results in the student not being able to move forward in the program.

Any serious infraction of professional conduct that potentially jeopardizes patient safety and/or site integrity shall be evaluated by the program director and/or faculty for additional disciplinary action.

Clinical Re-entry Requirement

If a BSRS student does not complete clinical while satisfactorily completing the academic component of the RS Program, he or she may not be signed out of the professional program. The student will not be qualified to sit for either the state or national test. If he or she returns after 15 weeks he or she will have to be re-comped. The type and quantity of competencies will be determined by the clinical coordinators. Moreover, acceptance is required prior to a student being allowed to complete the remaining clinical components of the BSRS program.

Code of Conduct Policy

The Department of Radiology at major and minor clinical affiliates reserve the right to refuse admission to any BS Radiologic Sciences student who is involved in any activity not considered professional or conducive to proper patient care.

The following policy serves as a foundation for the CSUN BSRS Program that demonstrates commitment and professionalism. The following are the expectations of each individual student:

- Report to the clinical assignment in an alert condition.
- Report to the clinical assignment in the proper complete uniform. (Refer to the Dress Code Policy)
- Not be in possession of drugs or liquor, nor engage in their use while on clinical assignment. The clinical affiliation must comply with the State and the Federal laws regarding drugs and alcohol abuse.
- Report alert and do not sleep on clinical assignments.
- Adhere to all major and minor affiliates' radiology departments' rules and regulations and the CSUN BSRS Student Handbook while on clinical assignment.
- Be on time and do not engage in habitual or excessive tardiness and/or absenteeism from clinical assignment.
- Adhere to appropriate guidelines as published by the college for initiation of grievances concerning any aspect of clinical course-work. This includes maintaining a professional attitude when in the presence of other students, staff technologists, program faculty, physicians, and patients.
- Eat in areas specifically designated for that purpose.
- Use of the department's telephone for personal use is prohibited. Turn off all electronics during clinical hours. Cell phones may be used during breaks and meals but must be put away during clinical time.

- Utilization of internet during clinical hours is only permitted when students are on their breaks and from their own personal devices.
- Loitering in the Radiology Department is not allowed.
- Accept assignments by the clinical supervisor adequate with their capabilities, or to take directions from an individual designated by the clinical supervisor.
- Stay in their assigned area within the Radiology Department. If need be, do not leave without notification from a CI or CC.
- Leave patients attended while undergoing diagnostic procedures.
- Adhere to the time reporting policy.
- Gratuity or "tip" of any kind shall not be accepted from a patient or a patient's family.
- Not study during clinical time unless authorized by a Clinical Coordinator.
- Keep in mind that we expect you to follow the job description of that of a technologist.

Communication Policy

Written and verbal communication is a mandatory requirement throughout the BSRS Program. Students shall pick up email every day. Failure to do so may result in a misconduct. Not picking up email everyday may result in the inability to acquire pertinent information.

If the student does not have or has limited access to email at home, CSUN's Oviatt Library offers free internet access to all students. All registered CSUN students are assigned a CSUN email account upon their initial registration to the university.

Public libraries are another option for free internet access. There are no excuses for not being able to check email.

Verbal communication includes phone calls for absences, tardies, leaving early, incidences, site issues, technology issues, emergencies, etc.

Furthermore, clinical education is a privilege. No personal phone calls from or to any site unless an emergency arises. Use of emails is only permitted when students are on their breaks from their own, personal devices and not from any hospital computer.

Community and Cultural Diversity Policy

Civility, understanding, and mutual respect toward all members of the University are intrinsic to excellence in teaching and learning. California State University, Northridge is committed to creating and maintaining a campus community free of behavior, policies, or practices that denigrate, humiliate or stigmatize individuals on the basis of race, religion, color, disability, sex, sexual orientation, national origin, ancestry or age.

The California State University reflects California's rich cultural diversity. The varied background of students, faculty, and staff enrich the university's intellectual life and create its unique community.

While the university views diversity as a great source of strength, some people on campus, as elsewhere in society, feel threatened by those who are different and act in disregard of the personal dignity and rights of others. Discrimination and harassment have no place in a university community. They damage the educational

aspirations of students, interfere with the performance of faculty and staff and destroy the environment of tolerance and mutual regard that must prevail for a university to fulfill its mission.

The university is therefore committed to maintain an environment free from discrimination and harassment. To fulfill this commitment the university will work to prevent discrimination from occurring and will ensure that federal and state laws as well as university regulations prohibiting discrimination are fully enforced.

Demeaning and gratuitously offensive conduct sometimes takes expressive forms that, although repugnant, cannot be prohibited or punished. Both the First Amendment to the Constitution of the United States and Article I, Section 2, of the California Constitution limit the university's power to punish free speech. To do so, even in the case of speech that is offensive and demeaning, would undermine basic principles of free discourse fundamental to any university.

As an educational institution, the university will use its intellectual and persuasive powers to discourage offensive and harassing speech from occurring and to encourage civil exchange. The university will attempt to teach its students and employees to listen as well as speak and to do both with an open mind. This is consistent with the university's mission to foster dialogue that educates students and prepares them for citizenship. That mission requires respect for differing viewpoints, but not license for demeaning language and harassing behavior that stifle free exchange of ideas and compromise the university's educational goals.

Respect throughout the University the dignity and rights of others, including the right to be free from discrimination and harassment and the right to speak freely, is essential to creating and maintaining an environment conducive to learning.

Competency Based Clinical Education Policy

The competency based clinical education for the CSUN BS Radiologic Sciences Program is a three phase process that shall be followed by all BSRS students to insure radiation safety and decreased radiation exposure to the patient.

Phase One

1. All BSRS students shall receive basic radiation protection guidelines prior to entering the patient care areas.
2. All BSRS students shall receive three weeks of formal instruction on radiography of the human anatomy and positioning including lab simulations prior to entering the patient care areas.
3. The BSRS student shall observe a qualified technologist perform a specific radiologic exam in the clinical site prior to attempting to perform the exam by him/herself under direct supervision.

Phase Two

1. The BSRS student may attempt to perform a radiologic exam under direct supervision of a qualified radiologic technologist, if the supervising RT agrees that the student is ready to do so. The supervising RT must review the doctor's order, assess the patient's condition in relationship to the student's knowledge and experience, approve the student to perform the exam under direct supervision and approve the radiographs prior to the student dismissing the patient and submitting the exam for the radiologist to read. A radiologist may also approve the resulting radiographs.
2. All BSRS students must adhere to the CSUN Repeat Image Policy that mandates direct supervision by a qualified radiologic technologist while the repeat is performed.

Phase Three

1. A BSRS student may attempt to obtain competency for a radiologic exam once the student has covered that specific material in the classroom/ lab, been successfully tested on it, and feels confident in his/her technical and patient care abilities. In order to obtain competency the following guidelines must be followed:
 - The student must perform the exam under direct supervision.
 - The qualified RT must have two years' experience and holds active registration with the ARRT/CRT.
 - The qualified RT must understand CSUN's Clinical Based Competency Education Process, Clinical Objectives and Competency Evaluation System.
 - The competency must be on a complete series with the exception of the skull projections.
 - The correct competency form must be used for the exam being tested or no credit will be given.
 - The student must receive a passing competency evaluation.
 - The technologist's signature is required on the competency form.

2. Once the student obtains competency for a specific exam, the student may perform the exam under indirect supervision with the exception of portable examinations and mammography. Indirect supervision means the qualified radiologic technologist is adjacent to the x-ray room or location where the radiographic procedure is being performed. The RT should be within vocal proximity (not by phone or pager) and be able to assist the student immediately as needed.

3. At any time, should the technologist find it appropriate to intervene due to the student's experience and or technical abilities, patient condition, or patient care requirements, the student may not receive competency.

4. **Competency exam simulation.** If the student is not able to obtain all required competencies by the post-grad fall rotation, the student may request to perform up to 3 competency simulations. Simulation may only be performed during the last 4 weeks prior to last clinical day in fall at major sites or at the RT lab at CSUN only. All simulation requests must be approved by the corresponding Clinical Coordinator or faculty before they could be performed.

Competency Based Clinical Agreement

A BS Radiologic Sciences student may attempt to obtain competency for a radiologic exam once the student has completed the BSRS program's Radiologic Anatomy and Positioning courses (HSCI 285 & 286) and has covered that specific material in the classroom/lab, been successfully tested on it, and feels confident in his/her technical and patient care abilities.

I understand that this policy means that I may not attempt any competency in clinical education on a procedure that has not been covered in the Radiologic Anatomy and Positioning class (HSCI 285 & 286).

Print Name

Signature

Date

Conference Attendance/Written Assignment Policy

Conference attendance such as the ACERT conference is a privilege and not a right. Students are expected to engage in responsible behaviors that reflect well upon the BSRS program and CSUN as noted by the CSUN Student Conduct Code. Student behavior that is not consistent with the Student Conduct Code will result in necessary disciplinary actions. According ASRT rules of Continuing Education, you must be present and awake through the whole course in order to receive credit, there will be no late admissions after lecture begins at any of the conference. There is zero tolerance for cheating, forgery and misrepresenting the University at any event. Students who do not respect the Student Conduct Code and ASRT rules, will not be credited any hours for the entire conference and will owe the time excused from clinical. In addition, the student will not be allowed to attend any other conferences for the duration of the program.

[*http://www.csun.edu/catalog/policies/student-conduct-code/](http://www.csun.edu/catalog/policies/student-conduct-code/)

Conference Written Assignment for Attendants and Volunteers

All BSRS program students who act as attendants or volunteers during faculty approved seminars and educational opportunities must submit a paper answering all the following questions regarding their experience. Please keep all the events confidential and relate to individuals anonymously.

Also, for each unit CE given, one hour of clinical credit is issued not to exceed a total of 100 hours for the duration of the program (# of CE units = # of clinical hours). Travel time will not have to be made up for clinical time missed. Submission of a scientific display board or essay will count toward this assignment. **The assignment must be uploaded to CANVAS by the end of the 15th day following the last day of the conference.** Submission after the deadline will not qualify for clinical credit. In addition, proof of attendance may be required for some seminars such as ACERT, notification in advance will be provided. If for any reason the student is not able to provide proof of attendance, a minimal amount of hours will be credited to the students as decided by faculty.

Attendants:

1. Why is this conference an important part for student education and/or professional development?
2. Which session or two did you find the most helpful to your practice as a radiography student? Why?
3. Which session did you find the most enjoyable? Was it the speaker, the topic, etc. and explain why.
4. Which session did you find the least beneficial? Explain why? What advice would you give to that speaker for the future?

Volunteers:

1. What were some of the highlights of your volunteer experience?
2. How did you benefit from your interaction with the seminar coordinators, attendees, and vendors?
3. Would you volunteer again in another seminar or educational activity? Why?
4. Did anything go wrong during your experience and what happened?
5. What would you do differently if you volunteer again next time?

Credited Clinical Hours Policy

As a radiologic sciences' student, 1 personal day will be rewarded each semester and each 11-week summer rotation for perfect attendance. Perfect clinical attendance means: no absences, no tardies, no call-ins, no leaving early, and no owed time during any part of that semester or summer rotation. These privileged personal days can be carried over throughout the program. **Students may not receive more than 100 hours of credited clinical hours throughout the entire program. All hours acquired may be used at any given time. However, the student may not use the hours to miss more than 60% of any rotation.**

Below is a table to show you where you can acquire credited clinical hours:

Perfect Attendance	8 hours per semester if applicable
CSRT Conference	1 hour credit per 1 hour session
ASRT Conference	1 hour credit per 1 hour session
ACERT Conference	1 hour credit per 1 hour session
RTCC Meeting	Up to 8 hours per seminar
UCLA Ultrasound seminar	Up to 4 hours per day (8 hours max at half-credit per hour)
Student Bowl	+2 hours if student participates

No credit for these alternate educational experiences will be given until the summary paper is submitted as noted in the Conference Attendance/Written Assignment Policy.

Completing affiliated hospital clinical requirements such as TB skin test, flu shots, CPR renewal, on a students' own time will not result in any "credited clinical hours".

However, clinical time may occasionally need to be missed in order to complete the affiliated hospital clinical requirements such as fit test, flu shot, TB, OV manager meeting, etc. Please refer to the Affiliated Hospital Requirement Policy to view instructions the amount of hours a student may miss in order to fulfill these requirements.

Daily Log Policy

Completed daily logs must be turned in every day and they will be picked up once a week. Logs must be in the designated files at the time of pick up. A completed daily log means, the log is tallied and signed by the technologist. If there were absolutely no cases and the student was not able to be reassigned, the technologist must verify on the front of the log that there were no cases.

Students must indicate the level of participation for each individual case by marking assisted or unassisted on the daily log. Furthermore, student must denote whether he/she performed a repeated image for the study. If an image was repeated, the supervising radiologic technologist's must initial the daily log in the corresponding space.

All daily logs should be turned in order to be signed out of the program.

Assisted exam: a procedure completed with the help of a technologist intervening in a technical manner (adjusting technique), with patient positioning, radiation/patient safety.

Unassisted exam: a procedure completed without the help of a technologist intervening in a technical manner (adjusting technique), with patient positioning, radiation/patient safety. The student may still be under the direct supervision of a technologist when performing an unassisted exam as long as the technologist does not intervene.

In order to assure that the graduating student is able to function in a radiology department independently, a minimum number of unassisted patient examinations will be required. A student will not be signed out of the program until 1000 unassisted patient exams have been completed.

It is imperative that all examinations be documented on your daily log sheet so that an accurate record is available.

Students not having a sufficient number of unassisted exams may need to extend their clinical time until a minimum of 1000 unassisted exam have been achieved. **No student shall exceed a length of 40 months for program completion that is 150% of the required program length.**

Doubles Policy

In order to eliminate any confusion regarding a student working a double shift, please refer to the following:

A "double" shift is defined as voluntarily working past an eight-hour continuous period during a single day. For instance, a student may elect to work in a certain rotation from 8:00am - 7:30pm in order to make up time. Working "doubles" is not required by a student; however, it is an option for making up hours owed as long as the appropriate criterion is met.

Students will be allowed to work "doubles" at the start of their post grad year only. Returning BSRSs may use these hours through the semester. Doubles may not be used to make-up time missed as a junior or senior student.

No student may work past a twelve hour shift, no later than 9pm, in any rotation. Not all rotations have doubles or extended hours available. It is the students' responsibility to check with their clinical coordinator regarding the hours they may work in any particular area.

"Doubles" will be allowed for make-up time only, not for pre-making up time. As usual, all time must be scheduled in advance with the clinical coordinator (no later than 4:00pm that day). Any request to work a "double" that comes at 4:05pm, for example, for that evening will be denied.

In accordance with labor laws, a lunch or dinner break must be taken for each 6 hour period worked. The first lunch must be taken by the first 6 hours. The time is then documented from the end of the first lunch break. For example, if a student takes lunch at 12:00 to 12:30 then the second lunch break should be taken by 6:30pm.

Finally, no student will be allowed to complete more than 56 hours of "doubles" during his or her entire graduating seniors period, unless he or she has a documented medical excuse for the absence.

Any clinical work done that is not in compliance with these guidelines will be considered clinical misconduct and the student will be disciplined in accordance with the program's clinical misconduct policy.

All clinical time is calculated by 15 minute increments.

Doubles Policy Agreement

In order to eliminate any confusion regarding a student working a double shift, please refer to the following:

A "double" shift is defined as working past an eight hour continuous period during a single day. For instance, a student may elect to work in a certain rotation from 8:00am - 7:30pm in order to make up time.

Students will be allowed to work "doubles" at the start of their post grad year only. Doubles may not be used to make-up time missed as a junior or senior student.

No student may work past a twelve hour shift, no later than 9pm, in any rotation. Not all rotations have doubles or extended hours available. It is the student's responsibility to check with their clinical coordinator regarding the hours they may work in any particular area.

"Doubles" will be allowed for make-up time only, NOT FOR PREMAKING UP TIME. As usual, all time must be scheduled IN ADVANCE with the clinical coordinator (no later than 4:00pm that day). Any request to work a "double" that comes at 4:05pm, for example, for that evening will be denied. There will be no exceptions.

In accordance with labor laws, a lunch or dinner break must be taken for each 6 hour period worked. This means that any student working past 6:30pm (in addition to their day shift) MUST take a half-hour dinner break (in addition to their daytime lunch break). Therefore, an additional half hour dinner break will automatically be deducted from the total number of hours completed for any student working past 6:30pm.

Finally, no student will be allowed to complete more than 56 hours of "doubles" during their entire post grad period, unless they have a documented medical excuse for their absence.

Any clinical work done that is not in compliance with these guidelines will be considered clinical misconduct, and the student will be disciplined in accordance with the program's clinical misconduct policy.

I have reviewed the above policy,

Student Signature

Date

Student Name

Dress Code Policy

The personal appearance and demeanor of the Radiologic Sciences students at CSUN reflect both the university and program standards and are indicative of the student's interest/pride in their profession.

Uniforms will be clean and pressed. Shoes will be polished and in good condition at all times. The hospital's scrubs will be worn **only** during performance of the surgery, special procedures, and cardiac cath lab assignments. Any student reporting to the clinical area in improper uniform or accessories, or in a **soiled or untidy uniform or with dirty shoes will be sent home** by the Clinical Coordinator (or by the Area/Dept Supervisor for those a minor sites or in the absence of the CC).

Males:

- Clean, pressed, BSRS approved red/black scrub pants and top with logo
- Must be at least a 60% polyester/ 40% cotton blend
- A clean, pressed, solid white, gray or black short sleeved t-shirt may be worn underneath. A solid white, gray or black long sleeved t-shirt may be worn if the clinical site allows it.
- White, black, or gray shoes or; white, black, or gray nursing clogs may be worn as long as there is a heel strap or 1" heel cover.
- Clean, pressed black or red scrub jacket with logo
- Hair must be neat: hair that falls past the shoulders must be tied in a ponytail
- Facial Hair must be groomed or shaved
- No visible tattoos

Females:

- Clean, pressed, BSRS approved scrub pants and top with logo
- Must be at least a 60% polyester/ 40% cotton blend
- A clean, pressed, solid white, gray or black short sleeved t-shirt may be worn underneath. A solid white, gray or black long sleeved t-shirt may be worn if the clinical site allows it
- White, black, or gray shoes or; white, black, or gray nursing clogs may be worn as long as there is a heel strap or 1" heel cover.
- Clean, pressed black or red scrub jacket with logo
- Hair must be neat: hair that falls past the shoulders **must** be tied in a ponytail and/or pulled off the face
- No visible tattoos

All Students:

- Wear your CSUN issued dosimeter at all times while at the hospital
- Wear the official hospital ID
- Remove all loosely adorned jewelry from their hands and wrists
- Present themselves neat and clean (clean fingernails, hands, hair, clothing, etc.)
- Have a ballpoint pen and a pocket notebook handy
- Carry your personalized lead identification markers at all times
- Show restraint from using strong perfumes or after-shave lotions that might offend patients

Dress Code Agreement

I, the undersigned, agree to adhere to the professional dress code stipulated by CSUN's Radiologic Sciences major clinical affiliates, NHMC, HMNMH, UCLA, VAGLAHCS, VPH, and all minor sites. Additionally, I will maintain good personal hygiene and launder my lab coat/ uniform often. I will wear appropriate ID badge, and dosimeter while involved in clinical. I will **not** wear or have:

1. a hairstyle consisting of hair height or width of more than 3"
2. inappropriate hair color
3. unpolished shoes
4. inappropriate accessories
5. nail length of more than 1/8" from the tip of the finger (no artificial nails)
6. no nail polish color
7. strong perfume or after shave cologne
8. any piercing other than ears without it being covered or bandaged
9. visible tattoos without it/them being covered or bandaged

In addition, I understand that I will be sent home by the clinical coordinator or department supervisor if I am not in appropriate/proper uniform attire and/or proper hygiene. Consequently, I will owe clinical time missed.

Student Signature

Date

Print Name

Drug Testing Policy

Students selected for the CSUN BS Radiologic Sciences Program will be drug tested and may be subject to random drug testing by the clinical affiliates at any time in accordance with Public Law 100-71. If a student refuses drug testing, he/she will not be placed clinically and therefore will not continue in the professional program. A student who receives a positive test result will adhere to the protocols of the clinical site.

Emergency and Natural Disaster Policy

Emergencies/Disasters occurring during clinical:

All students are responsible to the needs of the patients and departments of their facility during emergency situations, such as power outages and earthquakes. Students should report to their area or department supervisor and assist as so directed by the supervisor or hospital administration. The normal reassignment policies of the program are not operational during such events. During emergency events, the student is to abide by the department and hospital policies and procedures.

Natural Disasters occurring outside of clinical:

Natural disasters are extreme, sudden events caused by environmental factors (e.g. floods, landslides, fires, and earthquakes) and often occur without much warning. In these circumstances, if you do not feel safe or healthy enough to go to clinical, then please do not go. However, students must follow the communication policy and inform the clinical site and your clinical coordinator of your absence. The hours missed for natural disasters must be made up by the end of the program, preferably in the semester in which they were missed. These missed hours will not negatively affect the students' perfect attendance record nor will they contribute towards the 40-hour rule (See *Clinical Education Attendance Policy*).

Note: Natural disasters do not include freeway/road closures due to motor vehicle accidents, roadway fatalities, or sig alerts.

Evening/Cedars ER Rotation Policy

Due to the higher risk of personal harm, the radiologic sciences student should adhere to the following safety precautions:

1. Park in a well-lighted area.
2. At the end of the shift, do not leave the clinical site alone. Walk to the parking lot with a student, technologist, or clerk. If you cannot find someone to accompany you, please call the Escort/Security office at:
 - UCLA: Ext. 77100
 - VA: Ext. 84524
 - Northridge: Ext. 4645
 - USC Keck: Ext. 7488
 - Cedars-Sinai ER: Ext. 9385 (Roland)
3. Have your car keys ready before leaving the building.

4. Be aware of your surroundings as you walk.
5. At NHMC, know the location of the panic buttons in the hospital and parking structures. The panic buttons will alert security.

In order to reduce the risk of personal harm, the evening rotation hours will parallel the technologist's hours at each faculty whenever possible.

Hours at Northridge Hospital are:	2:30pm to 11:00pm
Hours at the VAGLAHCS are:	12 noon to 8:30pm
Hours at UCLA are:	12:30pm to 9:00pm
Hours at USC Keck are:	11:30am to 8:00pm
Hours at Cedars-Sinai ER are:	11:00am to 7:30pm

Energized Lab Usage Policy

All BSRS Students are to understand that while using the RS lab, they will only be positioning other students or phantoms. Students will not perform x-rays on any human beings. Students will not energize the x-ray tube or touch the control panel to make any exposures unless a licensed BSRS faculty is on site. Failure to follow these rules will result in an expulsion from the program because this violation would be against California State Law Title XVII.

During any energized lab usage students and faculty must wear their CSUN issued dosimeter.

The dosimetry readings are available at any time during business hours at CSUN's Radiation Safety Officer's office. All permanent records will be kept at RSO's office. Any reading above 100mr will be investigated and follow the policy for radiation protection at Cal State Northridge.

Graduating Senior Clinical Policy

1. In keeping with the Final Clinical Grade Policy, item #5 regarding tardies, any graduating senior **receiving more than 5 tardies** during the summer clinical or fall clinical will be required to write a satisfactory case study in order to receive a passing grade in the class. Failure to turn in a satisfactory case study will result in an incomplete.
2. **Elective Rotations:** The Elective rotation is 160 hours in length and may be split into two 80 hour rotations with the exception of Mammography; **students selecting Mammography as the elective rotation must complete the entire 160 hours** It is the graduating senior's responsibility to seek pre-approval from the appropriate clinical coordinator for all elective rotations in the area they choose.. Pre-approval means you have received a verbal response or confirmation by email. Pre-approval must be obtained **one month prior** to the elective rotation is to begin. **Failure to choose an elective area** may result in the student being reassigned by the Clinical Coordinators.
3. Graduating senior proficiency testing (Terminal Competencies): The graduating senior student must complete 6 re-competencies in the summer and 6 in the fall semester. In addition, the student will be retested by the clinical coordinator or clinical designee on two exams. One exam will be a fluoroscopy exam (UGI) and the other will be a general diagnostic exam of either a complete C-spine series or a complete L-spine series.

4. Simulations: *See “Competency Based Clinical Education Policy.”
5. Prior to completion of the BSRS program, each graduating senior must demonstrate competency for the following patient assessment areas:
 - Vital signs
 - CPR
 - Oxygen administration
 - Contrast reaction recognition and response

Demonstration of competency will either be by a written, or an oral quiz or physical demonstration, i.e., taking vital signs by a registered nurse or clinical coordinator.

6. Graduating seniors are to complete their summer and fall clinical hours at the end of each semester, failure to do so will subsequently add 40 hours of additional clinical time.
7. Clinical Assessment: Based on the following point system identified in course syllabus:
 - Competencies: 10
 - Image Review: 10
 - Clinical Performance (Assessments): 5
 - Clinical Objectives: 5
 - Writing Assignment: 30
 - Professionalism: 40

Receiving a “0” in any of the above categories will result in an incomplete for the semester. An earned incomplete grade can result in a grade no higher than a C, when the incomplete is completed.

At the completion of the clinical course, each student must have the following items checked off:

- Daily logs
- Clinical time completion
- Assessments
- Competencies, recomps, and terminal comps
- Photo ID badges
- Dosimeters or TLDs
- Venipuncture log
- Valid CPR
- Vital signs log
- Exit Interview
- Image Review

Holidays or Limited Departmental Staffing Policy

No student shall be assigned for required clinical or clinical make-up on CSUN observed holidays (CSUN campus is closed for the holiday) or when a clinical site is observing a holiday or schedules for limited staffing. However, students may be reassigned by program faculty to another clinical site for a holiday when the CSUN campus is open and the student's liability insurance will be active.

Students will be informed of the upcoming holidays and/or clinical reassignment on the rotation schedule for the semester or summer.

The following holidays are observed by CSUN (when the campus is closed your insurance is inactive):

- Martin Luther King Jr. (January)
- Cesar Chavez Day (March 31st)
- Memorial Day (May)
- 4th of July
- Labor Day (September)
- Veteran's Day (November)
- Thanksgiving and Friday after Thanksgiving
- December 24-January 1

The holidays, in addition to those listed above, which may be observed by some clinical sites and in that case, clinical reassignment may occur are:

- President's Day
- Columbus Day

Injury Procedure and Reporting

In case of personal injury, a student **must** report it immediately to the Clinical Coordinator and a Department Supervisor. The student is responsible for medical attention needed for the injury or exposure. However, the clinical site will stabilize the student, if necessary.

Reporting:

1. Immediately report to a Clinical Instructor for any serious injury or incident and contact the Clinical Coordinator. If the Clinical Coordinator is unavailable and could not be reached, contact any other Clinical Coordinator. You must talk to someone, no voice messages.

If the injury is a blood borne pathogen exposure, follow the following guidelines:

1. *Cleanse area (eye splash, use eye wash, scrub with antiseptic if needle stick).*
2. *Report to Supervisor/Clinical Instructor (if clothing is soiled obtain clean clothes).*
3. *Notify site Clinical Coordinator (if not available, any CC).*
4. *Obtain Patient Release of Information form (if applicable) and the Incident Report.*
5. *Obtain Patient permission for/ and Labs.*
6. *Seek medical treatment at the corresponding department. (See next page for medical treatment at corresponding clinical sites) Student has the choice to seek medical treatment through their health insurance's urgent care.**
7. *If labs positive, or if unable to obtain labs, student should be given prophylactic treatment within an hour of exposure.*
8. *Fill out Incident form and obtain copy of Patient Information Release form.*
9. *Follow ups must be coordinated with physician caring for the student.*

**If the student is exposed to blood borne pathogens they need an immediate occupational exposure assessment by the Emergency Department, their Physician, or Student Health Center's physician for the reason that if prophylaxis is needed, it should be administered within the hour*

2. Medical treatment at corresponding clinical sites:

Clinical Site:	Person to report to: <i>(if unavailable, seek shift supervisor)</i>	Department to report: <i>(student may opt to seek their own personal urgent care at their own cost)</i>	CSUN's Patient Info. Release form needed.
Cedars-Sinai	Roland Martinez Robert (Bobby) Milan	Occupational Health	No
Children's Hospital LA	Todd Anderson	Employee Health	No
Holy Cross	Brian Hildebrand	ER	No
Northridge Hospital	Felix Negron Cynthia Dillingham	ER	No
Olive View Medical Center	Mike Ruiz Evelyn Fernandez	ER	Yes
Shriners	Rose-Lynn So	Student Health Center**	Yes
Simi Valley Hospital	Katherine Hillard	ER	Yes
St. Joseph Medical Center		ER	Yes
Student Health Center	Corey Hidalgo	Student Health Center**	Yes
Tarzana		ER	Yes
Tower Imaging	Jeanne Garcia	Emergency: ER Non-emergency: Student Health Center**	Yes
UCLA	Any Clinical Instructors	ER	No
UCLA - Santa Monica	Any Clinical Instructors	ER	No
UCLA- Arthur Ashe Student Health Center	Any Clinical Instructors	ER	No
USC Keck – IP	Mary Falkner	Employee Health	Yes
USC Keck - OP	Sam Valencerina	Employee Health	Yes
VA GLAHCS	Randy Jones	Emergency: ER Non-emergency: Employee Health	No
VA - Sepulveda	Barbara Garrison	Student Health Center**	No
Valley Presbyterian	David Castillo, Celica Carbajal or Any available supervisor	ER	No

****The Student Health Center hours of operation are Monday through Friday from 8AM to 5PM. Report to the Triage and inform them you are a BSR students who has had a blood borne pathogen exposure. Students are to seek their own urgent care, during after hours.**

3. Fill out an Incident Report, if have not done so already.
4. Turn in a copy of all the paperwork and documentation (i.e. Incident Report, CSUN Release of Information Form, Release forms) to the Clinical Coordinator for CSUN records and may be needed for billing reimbursement.
5. Once cleared from the physician, student may resume to his/her clinical assignment.

The student will be responsible for the financial expenses of their medical treatment.

Clinical Coordinators' Contact Numbers:

Lisa Naugle (Northridge Hospital)	818 885-8500
Lisa Grate (VA and Sepulveda VA)	310 268-3657
Raymond Medina (USC Keck IP)	323-442-8710
Teni Piroomian (UCLA and Santa Monica UCLA)	310-267-3216
lisha Coleman (All Minor Affiliates)	818-687-8978

Each student upon entering the professional program and prior to starting clinical rotations shall receive an introduction to communicable diseases during the general summer orientation by program faculty members. Disease transmission, infection control, universal precautions and isolation procedures are included in the mandatory orientation. Once at the clinical site, the student will again receive in-services on infection control as it pertains to that particular site's policies and procedures. Records of in-service attendance and acknowledgment of information will be kept at the clinical site.

Guidelines for reporting actual or suspected exposures of communicable diseases while at the clinical site shall include the immediate notification of the clinical coordinator. Upon clinical coordinator's absence, the radiology supervisor shall be immediately notified who will begin proper infection documentation and direct the student to employee health and/or emergency room.

It is each student's responsibility to adhere to exposure control procedures while at the clinical site.

Infectious Diseases Exposure Non-Clinical Policy

Students with infectious diseases or non-immune students who have had known contact outside the clinical setting with an infectious disease listed will follow the guidelines set by the Centers for Disease Control (CDC). Students with exposure to non-listed pathogens as well as infectious skin rashes will be referred to their physicians for evaluation; **a physicians' release is necessary to return to clinical.**

Acknowledgement of Receipt: CSUN BSRS Injury Procedure and Reporting Policy



I, _____ (print name), have understood the policies and procedures when it comes to any type of injury during clinical assignment. I also acknowledge the ability to seek my own urgent care for medical treatment and have provided my urgent care information below.

Urgent Care Center

Phone Number

Address

City and Zip Code

Signature

Date

Integrity Policy

The CSUN BS program in Radiologic Sciences is committed to excellence in radiologic technology education and its administration. As a goal of graduating clinically competent and professional radiographers, acts of dishonesty, deceptive practices, falsification of documents, plagiarism, unprofessional conduct, insubordination, or any other actions or behaviors by students deemed as unprofessional by the program, will not be tolerated.

The CSUN BSRS program expects all students to be familiar with the university's policy on integrity and will not accept a claim of ignorance, as a means of defense.

Unprofessional and dishonest acts include, but are not limited to:

- Unauthorized duplication or inspection of testing material(s)
- The use of unauthorized materials/equipment during testing procedures
- Theft from a patient or associate, supplies other materials or equipment from the School or clinical sites, i.e. books, software, examinations, teaching aids, supplies and/or equipment.
- Cheating or attempting to cheat during examination sessions
- Using deceptive practices
- Falsification of documentations i.e. patient information, sign-in-sign-out sheets
- Misrepresentation
- Plagiarism
- Altering grades on examinations or assignments
- Post examination alterations
- Lying
- Leaving clinical site premises while on clocked clinical time
- Disrespectful or discourteous actions or behaviors
- Sexual harassment
- Illegal, inappropriate, unethical actions or behaviors

The university's actions/response to a student's particular behavior/action will be guided by the nature of the action/behavior, circumstances surrounding the event, history of the student/review of the student's records, and discussions with involved parties. The university's response will take into consideration the student's openness over the matter, and willingness to extinguish the behavior/action. University actions may be, though are not limited to, consultation/verbal correction, documented consultation, suspension, grade reduction, or a dismissal not necessarily preceded by probation. Documentation of each infraction will become a part of the student's permanent file

Academic Integrity

Sanction(s) which may be imposed for the infractions including academic integrity are:

- **Issuance of a letter grade of "F" for the course**
- Minimum penalty of 0% issued for plagiarized assignments or for examinations/quizzes in the student is found cheating
- Issuance of a letter grade of "F" on the individual examination or assignment
- Suspension from class(es)
- Reduction in the final course grade by one letter
- Dismissal from program

I have read and understand the Integrity Policy. My signature on this form acknowledges that the information has been reviewed with me. I agree to abide by the standards listed in this policy.

Signature

Date

Print Name

Jury Duty Policy

As your civic duty, you may be required to serve for jury duty sometime during the Radiologic Sciences program. It is the students' responsibility to notify faculty immediately when summoned. The faculty may be able to aid postponement of your jury until completion of the BSRS program. Faculty will provide a letter confirming you are a current CSUN student in the BSRS program that is 27 consecutive months long. It is the student's responsibility to request for the initial postponement of the summons, not faculty.

Failure to comply with this policy may result in an inability to accommodate with the best interest of the student.

If you are unable to seek postponement, faculty will provide academic and clinical accommodations necessary for you to serve with appropriate notification.

Liability/Malpractice Insurance Policy

All students must have liability insurance in order to obtain and/or maintain a clinical internship. The Program offers liability insurance through Mercer Consumer. Payment is only accepted in the form of Money Order or Cashier's Check to Mercer Consumer.

The insurance expires every July.

Students will be asked to purchase the insurance from Mercer Consumer. All students will be notified of the payment deadline. Any student, who fails to meet the deadline, will be required to purchase his or her own liability insurance. In addition, the student(s) who fail(s) to meet the deadline will not be allowed to return to the clinical site until the faculty receives proof of adequate liability insurance coverage.

Make-Up Hours Schedule

If the student misses any clinical hours, the student is allowed to “make-up” the time missed. These make-up hours are to ensure that all students will receive a good clinical experience, therefore the make-up hours must be in the rotation and clinical site that the hours were missed in. All make-up time and pre-make-up time must be arranged through the Clinical Coordinator. Any variations in schedule work hours must be noted on E*Value. The program faculty will identify make-up dates at the beginning of each semester. Please be aware that there are specific time frames for each rotation/area for each hospital.

If a student fails to complete the required clinical hours for any semester, an incomplete will be issued until the missed time has been completed. Once the owed clinical hours are completed for the corresponding semester, a grade no higher than a C will be submitted. In case of an approved life event or medical excused absence, the student the student will receive the grade that was earned.

Students will not be allowed to make-up time on official holidays (i.e., July 4), but will be allowed to make-up time during their vacation periods. Make-up will never be allowed during scheduled class periods. If a student skips a scheduled BSRS class to make-up, the student will not receive clinical credit.

Make up time is computed minute to minute with 15 increments. All clinical policies are applicable during make-up time.

If unavoidable circumstances will result in tardiness or absence, students are required to notify the area supervisor and the clinical coordinator one hour before starting time or as soon as possible. All tardiness and absenteeism will be made up at the convenience of the clinical supervisor, preferably on the same time card and definitely before the completion of the term in which they occur, in order for students to be considered for a passing grade.

Habitual tardiness and absenteeism will result in a reduction of the final grade for the appropriate clinical course and possible dismissal from the BSRS Program. Absences of three or more day's duration for reasons of illness will require a physician's statement regarding student capability to resume clinical assignment. Students will not be allowed to resume clinical assignment until they are able to perform all their duties without restriction.

Students are reminded that in order to advance within the CSUN Radiologic Sciences Program, a grade of "C" or better must be maintained in the entire core Radiologic Technology courses.

Saturday Clinical Make-up

Students are allowed to make up clinical time only at Tower Imaging Valencia or Northridge Hospital Medical Center on Saturday only if the Clinical Coordinator/faculty for these site are available and working on that day.

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The student must have been to this site previously. Also, the student must have Urgent Care coverage in their insurance policy.

In addition, students must have this clinical make up pre-approved by the clinical coordinator of Tower Imaging or Northridge Hospital Medical Center at least 1 week prior to the make-up day.

The hours of make-up on Saturdays are:

Northridge Hospital

Between 7:00am to 3:30pm and can only be in General, Portable, and CT areas.

Tower Imaging Valencia

Between 8:30am to 5:00pm and can only be in MRI and CT areas, and only if cases are scheduled.

Medically Excused Absence Policy

If a student is absent for 60% or more of any particular rotation, the faculty feels that the quality of the education obtained in the rotation is adversely affected. Therefore, the BSRS student will not be allowed to make-up the rotation on an intermittent schedule. The rotation must be scheduled in a continuous block of time for make-up by the program.

Also, medical notes from physicians will only be accepted the first day back to clinical. Notes received after the first day back will not be used for medically excused absence and missed time will be charged against the 40 hours of maximum time owed for that particular semester.

MRI Safety Policy

In order to prevent any injuries in the MRI setting, all students **must** fill out the MRI screening form and update it annually. If the student is concern about safety in MRI it must be reported immediately to the Clinical Coordinator and a Department Supervisor. If the student suffer any injuries while in MRI, the student must follow the Injury Reporting Policy.

Technical Standards

The following standards are capabilities related to successful practice in the radiography profession. These are non-academic criteria and include physical capabilities required of radiography students and radiography professionals. Students must be able to meet these standards in order to successfully complete the program. Please read each item carefully to determine if you are able to meet each requirement.

Motor Function Ability – good manual dexterity, motor skills, and eye-hand coordination are necessary in order to:

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Stand up and walk unassisted for 8+ hours on a tiled or carpeted surface. |
| <input type="checkbox"/> | <input type="checkbox"/> | Lift up to 25 lbs. of medical equipment and carry a distance of 20+ feet several times per hour. |
| <input type="checkbox"/> | <input type="checkbox"/> | Wear a 10 pound leaded apron for duration of 3+ hours. |
| <input type="checkbox"/> | <input type="checkbox"/> | Provide strength to move and operate equipment and patient care carts and wheelchairs. |
| <input type="checkbox"/> | <input type="checkbox"/> | Provide strength to transfer and position patients without placing patient at risk. |
| <input type="checkbox"/> | <input type="checkbox"/> | Bend, stoop, or crouch to reach a lower object several times per hour. |
| <input type="checkbox"/> | <input type="checkbox"/> | Rotate your forearm to manipulate machine locks and control knobs. |
| <input type="checkbox"/> | <input type="checkbox"/> | Reach overhead in order to manipulate an x-ray tube. |
| <input type="checkbox"/> | <input type="checkbox"/> | Handle various sized objects (i.e. image receptors, sand bags, sponges, sliding boards, etc.). |
| <input type="checkbox"/> | <input type="checkbox"/> | Don surgical gloves, fill syringes, and handle sterile trays and equipment. |

Communication Ability – The ability to communicate both orally and in writing as it relates to:

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Obtaining and recording patient history. |
| <input type="checkbox"/> | <input type="checkbox"/> | Explaining or discussing procedures. |
| <input type="checkbox"/> | <input type="checkbox"/> | Discussing patient consent forms. |
| <input type="checkbox"/> | <input type="checkbox"/> | Providing clear verbal instructions to patients either face-to-face or from the radiography control area, which is a distance away from the patient. |

Visual Acuity – The ability to see fine lines and to distinguish gradual changes in blacks, grays, and whites necessary to evaluate:

- | Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Radiographic images in dimmed lighting |
| <input type="checkbox"/> | <input type="checkbox"/> | Assess the direction of the central ray to the anatomical part being imaged |
| <input type="checkbox"/> | <input type="checkbox"/> | Read department protocols for imaging procedures, examination requests, monitors, and any written directions or orders. |

Hearing Ability – The ability to hear sounds is necessary in order to:

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Respond to patient questions, concerns and needs. |
| <input type="checkbox"/> | <input type="checkbox"/> | Respond to physician directions, questions, and needs. |

*MRI Safety – The ability to perform magnetic resonance imaging (MRI) requires not having any contraindications that would be adversely impacted by being around a strong (1.5-3 tesla) magnetic field. Do you have any of the following:

- | Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Pacemakers, ICD, or pacing wires |
| <input type="checkbox"/> | <input type="checkbox"/> | Aneurysm clips prior to 2000 |
| <input type="checkbox"/> | <input type="checkbox"/> | Cochlear ear implants |
| <input type="checkbox"/> | <input type="checkbox"/> | Non-removable neurostimulators or bone growth stimulators |
| <input type="checkbox"/> | <input type="checkbox"/> | Other metal implants and magnetic makeup: _____ |

If you would like to request accommodations, please speak with a BSRS academic advisor and contact disabilities resource and educational services (DRES) at (818)677-4932 for assistance. Upon acceptance into the program and your functional abilities change, please meet with the RS program director for assistance.

Print Name

Signature

Date

7/31/2019

Patient and Image Receptor Holding Policy

Under Title 17, Section 30308, Group 3 of the California Code of Regulations it states:

“**NO** individual occupationally exposed to radiation shall be permitted to hold patients during exposures except during emergencies, **nor** shall any individual be regularly used for this service. If the patient must be held by an individual, that individual **shall** be protected with appropriate shielding devices such as, protective gloves and apron and **shall** be so positioned that **no** part of their body will be struck by the useful beam.”

It is the policy of California State University, Northridge Department of Health Science and the CSUN BSRS Program that no student under any circumstance be required or allowed to hold a patient or **Image Receptor** during radiographic exposures.

Although students are not classified as staff of the radiology department, they have the same potential of receiving radiation exposure as does a certified technologist. The BS radiologic sciences student is therefore, not considered a member of the general public and **may not be allowed to hold patients or image receptors**. All students are required to have controlled monitoring of radiation exposure.

Patient Requisition and Documentation Policy

All BSRS students are required to write their initials and the initials of the technologist that approved the student's images on the patient's requisition at all program affiliates. If the hospital's computer system allows the student to enter their initials and the approving technologist's initials, the student is required to enter both.

Both individuals' initials are required in case the radiologist, department manager, or supervisor needs further information or the diagnostic quality of the image is poor. Responsibility for the quality of the image(s) will be placed on the approving technologist. However, if the student fails to note the technologist's initials, the responsibility may be placed on the student.

At no time may the BSRS student document a technologist's initials on a requisition without the technologist approving every image for the particular requisition.

All images, by all students, must be checked by a technologist even if the student has reach competency on the exam.

Photography Policy

In order to be in compliance with HIPAA students must adhere by the following:

1. There will be no photographing on a cell phone, camera, iPad, computer or any photography device of any patient data, images or patient information.

2. Students may not email requests to a coordinator from a CSUN email account or a private account for the images they need for a case study. Email is going through a non-secure internet and has a patient accession number.

*Exceptions: you may still scan your own data to upload to Castlebranch. Since it is your data, it is presumed you accept the risk of a non-secure environment.

3. Cell phones will no longer be allowed to be carried by you to any patient care area at any time.

During clinical education random checks of phone location will be conducted by the CSUN Clinical Coordinators. Any violation will result in a verbal warning or misconduct.

Please be aware that we understand that RTs are not abiding by these best practices. However, in order to re-contract with our affiliates we must ensure that you are setting a standard that the affiliate medical center is comfortable with. If you have questions please feel free to ask.

Portable Exams Policy

In order to comply with the State of California Radiation Health Branch and the JRCERT, students on a portable rotation shall always work under the direct supervision of a certified radiologic technologist. Direct supervision is defined as the supervising technologist being in the same room.

In the operating room, the BSRS student shall be under the direct supervision of a certified radiologic technologist or supervisor operator. It is recommended that the student should work under the direct supervision of a certified RT rather than a supervisor operator.

Let it be emphasized again, **portable and fluoro exams must be completed under the direct supervision of a certified radiologic technologist.**

Pregnancy Policy

POLICY FOR PREGNANT STUDENTS WHO ARE EXPOSED TO IONIZING RADIATION IN THE COURSE OF THEIR EDUCATION

This policy has been adopted for those students who may be pregnant while enrolled in a program in which they are exposed to ionizing radiation. California State University, Northridge is very interested in the protection of the unborn child, and will take every reasonable step to ensure the safety of the mother and the unborn child throughout the pregnancy. Current radiation protection standards and scientific evaluations have demonstrated that, with proper protection, the student may work safely throughout the term of the pregnancy. The purpose of this policy is to provide the pregnant student with necessary protection in accordance with all standards and regulations while at the same time assuring the performance of assigned tasks throughout the pregnancy.

Declared Pregnant Worker

Federal and State regulations were modified in 1994 to introduce the term “declared pregnant worker.” A declared pregnant woman is defined as a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception. The regulations allow a pregnant woman to decide whether she wants to formally declare her pregnancy to take advantage of lower dose limits for the embryo/fetus. This regulation has been applied to student radiographers as well. The pregnancy may be declared as soon as conception is confirmed, or at any time during the pregnancy.

Once the pregnancy is declared this institution is required to ensure that the unborn child does not receive more than 500 millirem (5 mSv) during the term of the pregnancy, as determined by the radiation dosimeter, which is worn at waist level under the apron. In the event that the student has already received 450 millirem (4.5 mSv) or greater from the date of conception to the date that the pregnancy is declared, the regulations permit the unborn child to receive a maximum of 50 millirem (.5 mSv) during the remaining term of the pregnancy. It is up to each student to make her own decision regarding the declaration of pregnancy. In all cases, the school requires that radiation doses to the student as well as to the unborn child shall be maintained, “As Low As Reasonably Achievable (ALARA)”.

When a student confirms that she is pregnant, she has several choices. She may choose to NOT declare the pregnancy, in which case no changes will be made to the student’s schedule and the embryo/fetus will be subject to the same radiation dose limits that apply to other occupational workers.

At no time will absence due to a declared pregnancy affect the student’s clinical grade. All call-in policies are still in effect.

If the student decides to declare the pregnancy, she must do so in writing. Once the student completes a “Declaration of Pregnancy” (see attached form), she needs to meet with the Radiography Program Director and/or the Radiation Safety Officer to discuss her options. These include the following:

1. She may choose to withdraw from the program and re-enter after delivery to complete the program.
2. She may choose to continue the program without interruption of the clinical rotations. However, the Program Director must assure that the radiation exposure to the embryo/fetus does not exceed .5 rem (5 mSv) during the entire pregnancy.

3. She may choose to alter her clinical schedule to avoid areas of clinical practice that may expose the student to higher radiation doses, i.e., mobile C-arm fluoroscopy, mobile radiographic exams and fluoroscopy. This option might result in a delay in graduation until those clinical rotations are completed.
4. She may choose to discontinue clinical rotations and remain in the academic classes until after delivery, and then complete clinical rotations. This option may delay completion of the program.

The BSRS student may revoke the Declaration of Pregnancy, in writing, at any time if she believes that it is in her best interest to do so, and the lower dose limit for the embryo/fetus would no longer apply.

I have been advised about this BSRS pregnancy policy and understand my rights.

Name (Print)

Signature

Date

BSRS Program Director

Date

Program Agreement Form

1. I understand that successful completion of the academic course work for the Radiologic Science program is required for continuance in the program; grades of C- and below are not considered acceptable.
2. I understand that successful completion of the clinical courses of the Radiologic Science program is required for licensing/certification eligibility.
3. I understand that clinical education consists of approximately 16 hours per week during the first two semesters, 24 hours per week during the second fall and spring semesters, and full time hours during winter, summer breaks, and the last semester.
4. I understand that didactic education, laboratory practice and didactic testing are mandatory prior to attempting a clinical competency.
5. I understand it is necessary to commute to all other clinical educational centers for classes and field work not available at CSUN.
6. I understand that I must anticipate the following financial obligations in the professional course of study:
 - Regular fees of the University (Full time student for four semesters to complete the B.S.R.S. degree and one graduating senior semester to complete the clinical eligibility requirements for licensing).
 - Clinical expenses such as: uniforms, books, health insurance, malpractice insurance, background check, clinical supplies, electronic tracking system, meals, travel, and parking.
 - Professional expenses such as: society memberships, journal fees, and attendance/participation of professional meetings.
7. I understand that I must obtain medical clearance by a physician to insure the safety of individuals, patients, and staff for acceptance and continuation in the clinical professional program.
8. I understand I must comply with all affiliated hospital requirements for clinical placement.
9. I understand that it is my responsibility to comply with the rules and regulations identified in the BSRS Student Handbook.
10. I understand I must adhere to all clinical facilities' policies and procedures. They have the right to refuse any student who is involved in any activity considered unprofessional or not conducive to proper patient care.
11. I understand that any form of academic dishonesty as defined by the CSUN catalog will result in my dismissal from the R.S. Program in addition to the disciplinary action taken by the University.
12. I will have completed all general education requirements before entering the program.

_____ Yes _____ No

13. I will have completed all prerequisite course work with a C or better before entering the professional program.

_____ Yes _____ No

I accept the position in the Radiologic Sciences Program under the terms herein specified.

Print Name

Signature

Date

*****To be completed on R.S. Program Orientation Day.*****

Radiation Monitoring/Radiation Safety Policy

Students must wear the dosimeter or TLD while at the clinical sites. CSUN will supply a TLD badge for each individual student to wear at all times during clinical assignments. In addition CSUN's TLD badge, many affiliated clinical sites will also supply a form of radiation monitoring device. As a result, students at some point may be wearing both the clinical site and CSUN's radiation monitoring device. All clinical site radiation monitoring badges must remain at that clinical site and should not be taken to other clinical rotations.

Lost or damaged dosimeters: Students who misplace their dosimeter/TLD badge may not return to clinical until a spare badge is issued to them. In case of a lost or damaged badge, notify a faculty member immediately so a new badge can be issued. Any students who go to clinical without their dosimeter will be sent home and issued a misconduct.

The hospital specific radiation exposure reports are kept in the radiology departments and available upon request from your clinical coordinators.

The CSUN Dosimeter/TLD reports are kept in the Environmental and Occupational Safety office at CSUN. The reports are reviewed by the Radiation Safety Officer (RSO) within 10 days following the results, and they are available to the student within 30 days following results. Hard copies of the reports are printed and given to the students. Students will sign a document to indicate that the dosimeter report has been received. All permanent records will be kept at the Radiation Safety Office. The student will be advised on radiation protection if he/she receives more than the maximum permissible dose of 100mrem for that time period on a CSUN TLD badge. As stated in the CSUN Radiation Monitoring/Radiation Safety policy,

"To achieve radiation exposures as low as reasonably achievable (ALARA), CSUN maintains an ALARA program. This program includes elements in training, audits, dosimetry and license review. CSUN has established a campus limit of ten percent (10%) of allowable limits prescribed by 10 CFR Sections 20.1201 - 1206. Furthermore, exposures to the public will be maintained as low as reasonably achievable, and below levels specified in 10 CFR 20.1301-20.1302. The RSO will investigate, and mitigate when possible, any occupational exposure in excess of 100 mrem / quarter. All users are encouraged to mitigate any exposure by reasonably achievable means."

The RSO and alternate RSO for the University are:

Tony Pepe
Director / RSO
Environmental Health and Safety
(818) 677-2401
Tony.Pepe@csun.edu

Daniel Castellon
Assistant Director / Alternate RSO
Environmental Health and Safety
(818) 677-2401
Daniel.Castellon@csun.edu

The CSUN Radiation Safety manual can be found on the following website,

<https://www.csun.edu/EHS/radiation-safety>

Dosimeters/TLDs are exchanged on a monthly/quarterly basis. The BSRS student is required to turn in or exchange his/her monitoring badge within the first five days of the month that it is due. Contact the clinical coordinator for expiration dates or it can be found on the badge itself. Failure to turn in or exchange any of the four monitoring badges will result in a point reduction in his or her clinical grade (see Clinical Grade Policy).

Religious Holiday Policy

It shall be the policy of California State University, Northridge, in administering any tests or examinations, to permit any student who is eligible to undergo the test or examination to do so, without penalty, at a time when that activity would not violate the student's religious creed. This requirement shall not apply in the event that administering the test or examination at an alternate time would impose an undue hardship that could not reasonably have been avoided. The burden of proof is on the institution to sustain the issue of undue hardship.

Any request for a religious accommodation should be given to faculty at least two weeks prior to the exam.

Repeat Image Policy

In order to prevent unnecessary radiation exposure, any student needing to repeat an image or images on a patient must do so in the presence of a RT. The student may take the repeat, but a RT must be in the room with them to oversee the repeat.

This policy applies to ALL BSRS students even if the student has obtained a competency on the exam.

The BSRS student must document on the student daily log whether or not a repeat was performed. If a repeat was performed, the BSRS student must have the radiologic technologist who provided direct supervision initials the repeat on the log in the space provided.

Required Clinical Competencies

Upon graduating, each student in the Radiologic Sciences Program must reach competency in the exams required by the ARRT and CSUN BSRS Program. Therefore, a student's clinical program may be extended until all these clinical competencies have been reached:

Abdomen Supine (KUB)*	Skull (Caldwell/AP/PA)
Abdominal Series (upright & supine abdomen)	Skull (Lateral)
Abdomen or Chest decubitus*	Skull (Waters)
Ankle Series	Tibia/Fibula Series
Cervical Spine Series	Thoracic spine Series
Chest (PA & Lat)	Toe Series
Chest Pediatric (PA & Lat) <6 years old	Trauma lower extremity (2+ views)*
Chest – Wheelchair or Stretcher	Trauma upper extremity (2+ views)*
Clavicle Series	Trauma shoulder <u>with</u> “Y”
Elbow Series	X-table lateral Spine (C, T or L)*
Femur Series	X-table lateral hip*
Finger Series	Wrist Series
Foot Series	
Forearm Series	Ba Swallow/Esophagram
Geriatric Chest (PA & Lat)	UGI (single or double contrast)
Geriatric Portable Chest*	UGI and small bowel
Geriatric Lower Extremity	
Geriatric Upper Extremity	CT abdomen
Hand Series	CT brain
Hip Series	CT chest
Humerus Series	CT extremity (including hip)
Knee Series	CT pelvis
Knee Series WT Bearing	CT sinus complete
Knee Patella - Sunrise view*	CT trauma C-spine
L-Spine Series	CT/A additional choice
Pelvis – AP*	MRI brain
Portable Abdomen*	MRI lumbar spine
Portable Chest*	MRI additional choice
Portable Orthopedics (2+ views)*	
Ribs (unilateral or bilateral) Series	Surgery C-arm sterile field (orthopedic)
Shoulder Series	Surgery C-arm sterile field (non-orthopedic)
Shoulder Axial or “Y” View *	Surgery C-arm (2+ projections)

ARRT definitions:

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

Geriatric: physically or cognitively impaired as a result of aging.

Prior to attempting to be tested for competency of an exam, the student shall notify a staff technologist of his or her desire to be tested for competency. The technologist must have two years of experience in the field and registered by the ARRT. The technologist must be present while the student performs the exam without assistance of proper radiographic technique, image size, positioning of tube or body part. All exams tested for competency must be a complete series not limited studies with listed exceptions noted above (*).

Satisfactory progress in the clinical area is also contingent upon fulfilling the minimum of competencies required in clinical for each semester. These **minimum** numbers are as follows:

Fall #1	5
Spring #1	10
Summer #1	10
Fall #2	6 + 6 recomps
Spring #2	6 + 6 recomps
Summer #2	Finish remaining comps/terminal comps required for graduation + 6 recomps
Fall #3	Finish remaining comps/terminal comps required for graduation + 6 recomps

If you only do the minimum requirements throughout your clinical time you will owe about 18 competencies in your last two semesters.

You may obtain up to two competencies per accession number/case number, with the exception of skull series, facial series, and bone surveys (i.e. myeloma bone survey, histiocytosis bone survey, arthritis bone survey, metabolic bone survey). The VAGLAHCS has some exceptions. Please advice with clinical coordinator.

Proficiency Testing

Proficiency testing is competency retesting and will be required as a senior and as a graduating senior student. Senior students must retest on 6 competencies in the Fall and again in the Spring. Graduating seniors will be required to obtain 6 recomps during both the Summer and Fall semesters. In addition, graduating seniors are encouraged to obtain all spine and GI competencies prior to the graduating senior year. Prior to graduation each graduating senior will be proficiency tested on a fluoroscopy and a complete L-spine or C-spine exam by the Clinical Coordinator. See Clinical Grading Policy.

Terminal Competency

(Clinical Coordinator/Clinical Instructor Observe Competency)

Prior to graduation each graduating senior will be tested on a terminal competency for a fluoroscopy exam and a radiographic spine exam. **The terminal competency must be observed by the clinical coordinator or authorized designee (list posted on every department).** The fluoroscopy exam must be an upper GI or a contrast enema. The spine exam must be a complete 5V series on a cervical or lumbar spine. See Clinical Grading Policy.

Sexual Harassment Policy

Definition of Sexual Harassment (California Education Code, Section 212.5):

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, under any of the following conditions:

- (a) Submission to the conduct is explicitly or implicitly made a term or a condition of an individual's employment, academic status, or progress.
- (b) Submission to or rejection of, the conduct by the individual is used as the basis of employment or academic decision affecting the individual.
- (c) The conduct has the purpose or 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.
- (d) Submission to, or rejection of the conduct by the individual is used as the basis for any decision affecting the individual regarding benefits and services, honors, programs or activities available at or through the educational institution.

The BSRS Program, in accordance with California State University, Northridge policies, will not tolerate sexual harassment in any form, including student/student, student/faculty, or faculty/student harassment, and could ultimately result in strong disciplinary action, such as the possibility of suspension and or dismissal from the program and/or university. Sexual harassment including employee/student harassment occurring while on the clinical site is handled by the clinical site, as per their policy. If sexual harassment occurs on the clinical site, the student is to immediately inform the Clinical Coordinator of the behavior, who will ensure that appropriate action is taken. Manipulation of the clinical schedule may be considered in the event that a grievance procedure is activated, in order to protect the quality of the student's clinical education environment.

Every allegation of sexual harassment will be taken seriously and pursued as outlined in the California State University, Northridge catalog. Refer to APPENDIX C regarding policies on sexual harassment complaints and student code of ethical conduct.

Student Background Check Policy

The use of background checks on individuals working in clinical settings is one of the mechanisms that agencies use to help protect their clients/patients. While obtaining background checks on employees is not new for clinical agencies, the Joint Commission (TJC) has recently added to their Human Resources Standards (HR.1.20) a section related to criminal background checks for all persons placed or employed in an accredited facility. This includes volunteers and students accepting assignments in the clinical settings.

Therefore, background checks will be one of the mandatory requirements for entrance into the CSUN Radiologic Sciences Program for clinical placements. Students must obtain the required background check before starting the professional program and submit the results to the affiliate hospitals directly. The background check is submitted directly to the designated person in the Human Resources department of each hospital. A student may purchase this background check service by going on line and contacting different background agencies that are specified by CSUN's BSRS program.

The BSRS faculty will not be responsible for obtaining or monitoring the background checks on individuals. If a student was not cleared by all the major affiliate hospitals for clinical placement because of findings on this background check, that student will not be able to enter the professional program because he/she would not be able to complete the degree in Radiologic Sciences at California State University, Northridge.

Summer Semester Policy

Summer School Classes

Students who would like to attend summer school for classes other than clinical must make a plan-of-action request to program faculty. The plan-of-action should obtain the following:

- Dates of attendance
- Days of attendance
- Hours for the class
- Proposed make-up days and times

The clinical coordinators will do their best to accommodate the student's class schedule but cannot guarantee any student that his/her rotations will not conflict with the students proposed class schedule. **Pre-approval for morning classes must be obtained.** A copy of the student's summer class schedule **must be submitted** once it is received by the student.

Evening Rotation Requests for Summer

Any student may request to have the evening rotation during the summer or academic semester. The request must be in writing. Again, the clinical coordinators will do their best to accommodate the student's request but cannot guarantee any student that his/her request will be accepted or denied. Acceptance or denial is based on the availability of rotations, the student's previous clinical experiences (previous rotations), and clinical competency (ability to work independently).

Tardy and Late Calls Policy

In a professional environment tardies are unacceptable behavior; however, a BSRS student may be excused from a tardy in case of an extenuating circumstance or emergency. Tardies are part of your clinical grade each semester. If you are going to be late due to traffic, overslept, etc. you must call in **both** to the Clinical Coordinator **and** the clinical site and that time missed must be made up. It is necessary to call both the clinical site and the clinical coordinator whenever you will be late, absent, or leaving early. This is both a good business practice and common courtesy.

If you receive a tardy, your base grade will drop as indicated below:

- 1 tardy: minus 2 points for each
- 4 tardies - drop a letter grade
- 8 tardies – drop 2 letter grades and may be close to a failing grade (below 75%) for clinical.

The student's attendance is computed to the nearest quarter of an hour. Time clocked in prior to or clocked out

after the assigned time is not counted. If a student punches in:

- 1 - 15 minutes late, the students owes 15 minutes
- 16-30 minutes = half hour late
- 31-45 minutes = 45 minutes late
- 46-59 minutes = hour late

A student who punches in late must make up the time owed that day if the time owed is a half hour or less. The time made up must be done in **15 minute increments** the day the student clocked in late. If time owed for clocking in late is not made up the same day, it must be made up during make-up week since a student cannot complete more than 8 hours of clinical time until the graduating senior semesters.

Also, during the graduating senior semester, any graduating senior receiving more than 5 tardies during the summer clinical or fall clinical will be required to write a satisfactory case study in order to receive a passing grade in the class. Failure to turn in a satisfactory case study will result in an incomplete.

Time Reporting Procedure and Policy

Time punches:

- Shift hours are found on the clinical schedule handed out each semester and can be updated at any time.
- All students are required to clock in and out on **E*Value** and must do so at the designated location as to where they are scheduled. **NO EXCEPTIONS!!**
- BSRS students are not allowed to log in or otherwise fill in attendance records of another student.
- **If a student forgets to clock in or out**, the name of the area supervisor or technologist has to be included in the comment section of E*Value for verification. The student will be allowed 5 per semester. On the 6th, a verbal misconduct will be given and 4 hours will be owed to that rotation's clinical hours.
- **Clocking in and out with personal mobile devices is not allowed.** IP address checks are done at random.
- **ALL** make-up hours **must be pre-approved** by the Clinical Coordinator of that site in order to receive credit for hours worked.
- If the student is going to be absent from clinical, **BOTH** clinical site/area and Clinical Coordinator **MUST** be notified at least one hour prior to start time.

Usual required hours:

Juniors	Tuesday and Thursday 8:00 - 16:30
Seniors	Monday, Wednesday, and Friday 8:00 - 16:30
Graduating Seniors	Monday thru Friday 8:00 - 16:30
Summer and Winter Breaks	Monday thru Friday 8:00 - 16:30

Meal breaks: It is the discretion of the clinical site when meal periods are assigned. CSUN BSRS students are expected to follow the California Meal Break Law which states lunches must be started by the end of the 4th hour.

For example, if a student starts at 8:00am, a meal break must be started by 12:59pm. Students must take a full 30 minute meal period. No Partial lunches are allowed. Shifts of 6 hours or more require a 30 minute lunch. "No lunches" are **only** allowed on days when the required time is 6 hours or less.

On partial clinical days, students are required to stay in their rotation until the assigned time to leave. If a student rotation begins at 7:00 and is to leave early for a class or an BSRS meeting, the student must stay until the assigned time to leave by the program faculty. **If the student works passed 6 hours a 30 minute lunch break will still be required on the shortened day.**

Computations:

The student's attendance is computed to the nearest quarter of an hour. Time clocked in prior to or clocked out after the assigned time is not counted.

If a student punches in:

- 1 - 15 minutes late, the students owes 15 minutes**
- 16-30 minutes = half hour late**
- 31-45 minutes = 45 minutes late**
- 46-59 minutes = hour late**

For example, if the time card indicates 10:03am to 15:28pm, the time counted will be 10:15 to 15:15. The total time worked will be 5 hours. However, during make up week, time is minute by minute with **15 minute increments.**

Time recording:

In the absence of computer access or if **E*VALUE is down** at the clinical site the student must **CALL THE CLINICAL COORDINATOR and leave a voice message** as a means for time recording. The area supervisor or technologist present must be included on the call for verification (see clinical coordinator for site specific exceptions). The student should then try to clock in when time allows and add comments in E*Value.

If EVALUE is down for the entire shift the student must repeat the procedure at the end of the day. If directions are not followed the student will be considered absent for that day.

- **Forgetting to clock in or out:** The student **will not** be awarded any time until he/she remembers to clock in and includes a comment in E*Value (include verifying technologist name). Allowed 5 per semester without repercussions. The 6th turns into a verbal misconduct and 4 hours will be owed to clinical
- **Leaving early:** A student will be deducted for leaving early if he/she clocks out prior to the half hour. A comment needs to be included in E*Value.
- **If a student is absent three or more days:** the student must provide a doctor's note stating whether or not they are able to return to clinical without restrictions. No student may be at a clinical site on "light duty".
- **Tardies:** If a student is tardy one minute past the hour, 15 minutes will be deducted. The deductions will continue until the student clocks in. If you have to leave early, you must notify your coordinator and the lead techs. For each tardy the student will be deducted from their clinical grade:
 - More than 3 tardies = drop 1 letter grade
 - 8+ tardies = drop another letter grade
 - 13+ tardies = drop another letter grade = D (grade less than 75%) = not acceptable in program.

Clinical make-up hours identified:

All make-up time and pre-make-up time must be arranged through the Clinical Coordinator. Any variations in

schedule work hours must be noted on E*Value. The program faculty will identify make-up dates at the beginning of each semester. Please be aware that there are specific time frames for each rotation/area for each hospital.

If a student fails to complete the required clinical hours for any semester, an incomplete will be issued until the missed time has been completed. Once the owed clinical hours are completed for the corresponding semester, a grade no higher than a C will be submitted. In case of an approved life event or medical excused absence, the student the student will receive the grade that was earned.

Students will not be allowed to make-up time on official holidays (i.e., July 4), but will be allowed to make-up time during their vacation periods. Make-up will never be allowed during scheduled class periods. If a student skips a schedule BSRS class to make-up, the student will not receive clinical credit.

Make up time is computed minute to minute with 15 increments. All clinical policies are applicable during make-up time.

If unavoidable circumstances will result in tardiness or absence, students are required to notify the area supervisor and the clinical coordinator one hour before starting time or as soon as possible. All tardiness and absenteeism will be made up at the convenience of the clinical supervisor, preferably on the same time card and definitely before the completion of the term in which they occur, in order for students to be considered for a passing grade.

Habitual tardiness and absenteeism will result in a reduction of the final grade for the appropriate clinical course and possible dismissal from the BSRS Program. Absences of three or more day's duration for reasons of illness will require a physician's statement regarding student capability to resume clinical assignment. Students will not be allowed to resume clinical assignment until they are able to perform all their duties without restriction.

Students are reminded that in order to advance within the CSUN Radiologic Sciences Program, a grade of "C" or better must be maintained in the entire core Radiologic Technology courses.

Pre-make-up

Pre make-up may only be done with advanced approval of the whole BSRS Program Faculty. Faculty will consider major life events (at the discretion of faculty), medical excuse, and family emergencies. All pre make-up will be prearranged by the Clinical Coordinators and will NEVER infringe upon another regularly scheduled student's rotation. Pre make-up may NEVER be done on an overtime or double schedule.

Saturday Make-up

Please see Make-Up Hours Schedule: Saturday Clinical Make-up.

Meals and Breaks

Students are required by law to be given and take a lunch break. When working an eight hour day the students are allowed two 10 minute work breaks and one 30 minute meal break. When working less than 5 hours but more than 4 hours per day, the student is entitled to one ten minute break. Any time a student works 6 hours or more it is mandatory to take a 30 minute meal break by the end of the 4th hour. Schedules will be assigned at the discretion of the area supervisor when students are on clinical assignments. **However, no BSRS student is to take a break without approval from the clinical instructor/supervisor.** Students may not assume they will all get to go to break at the same time. Under no circumstances will a student be allowed to leave early due to a missed lunch. Punitive actions will be taken on lunch abuses.

*Please refer to Credited Clinical Hours Policy.

Vacation Schedule Policy

During the professional portion of the BSRS Program, students will have scheduled vacations. During most vacation periods students may make up clinical hours missed upon pre-approval of program faculty (see Time Reporting and Procedure Policy). Students may not reschedule a vacation period without pre-approval of all program faculty due to the impact on clinical assignments. The vacation periods are as follows:

- After December finals through January 1 (usually one week)
- Spring break
- After May finals until summer clinical begins (usually one week)
- One week before Fall semester begins (usually during make up week)

CSUN Holiday's off:

Veteran's Day (November)

Martin Luther King Jr Day (January)

Cesar Chavez Day (March)

Memorial Day (May)

Independence Day (July)

Labor Day (September)

Thanksgiving Recess (November)

Vacations exceeding 40 hours (even with pre-approval) will still have 40 hours penalty for going over 40 hours. However, life events, family emergencies, and medical excuses are exempt from the 40 hour penalty

Venipuncture Policy

All BSRS students must have attended the venipuncture course and successfully passed the final venipuncture post examination, in order to obtain 10 directly supervised patient sticks. Venipuncture is now a requirement for the program. As a result, students will need to obtain ten venipuncture sticks in order to be signed out of the program.

Students have the opportunity to obtain all 10 sticks at Northridge Hospital, Providence Holy Cross Medical Center, and Keck USC. The ten venipuncture sticks must be performed on patients only, not on mannequins or students/family members. When performing a stick, **a student must be directly supervised by a registered nurse, Radiologic Technologist with venipuncture certification, or physician** that is staffed by the approved venipuncture sites (NHMC, Holy Cross, and Keck USC only). Students may not obtain their sticks in a non-approved venipuncture site, even if the registered nurse or physician is willing to sign off students. **A student may never perform venipuncture without direct supervision, even after 10 successful supervised venipuncture sticks.**

Students are to review the venipuncture course material before attempting venipuncture. If a student is unable to attain all 10 sticks at one site, he or she may seek the other site to obtain the remaining of the ten sticks. It is the students' responsibility to be proactive in obtaining the ten venipuncture sticks. Please plan accordingly.

Any student that is observed not following the above guidelines for performing venipuncture by the clinical

coordinator or a staff member will receive disciplinary action.

Remember, the practice of venipuncture is a **privilege** as well as a requirement to be signed off from the program.

Note: Registered technologist involved in the 2+2 BSRS courses and registered for summer clinical have the right to attend the venipuncture course. They do not have to complete the required 10 sticks in our program. If the required 10 sticks are obtained and documented at the RT's place of employment within two years of the venipuncture course, a venipuncture certificate will be provided.

SECTION III: PROFESSIONALISM

Accepting Constructive Criticism

Students will inevitably be the recipient of criticism from faculty, staff technologist and radiologists. It is vital to the educational process of the student that the criticism be viewed as an attempt toward improvement in the student's competence or professional growth. What is seen as criticism by the student may actually be only a difference of opinion, a difference in instruction, or a demonstration of the "art" of radiography expressed as an individualized method. The student should accept the criticism without argument. A defensive attitude is expected initially, but should be displayed as little as possible until the student has taken the time to examine the circumstances more fully. The student should attempt to understand the criticism and should further study films (film review), procedure books, reference books, or ask faculty members to help with an explanation.

At no time is it acceptable for a student to disagree with criticism in front of a patient. It is also **unacceptable** for criticism to be given in front of a patient, and faculty members should be made aware of any such instances.

In the event that criticism is given in a non-constructive manner, the Clinical Coordinator should be notified as soon as possible in order to rectify the situation. Time is important in this instance as details tend to be distorted proportionately with increases in time.

Body Mechanics

Mary Kay Campbell, R.P.T.

A. Pulling/pushing/lifting chairs

"Think about how you performed that action and why"

Push:

- Bend knees
- Aim feet in proper direction
- Back straight
- Stay close to object

Pull:

- Get help
- Push when you can
- Use legs & body weight

Lift:

- Get close to object
- Aim feet in proper direction
- Stay close to object
- Back straight
- Use body weight

B. Sitting positions :

Sitting properly

- Seat at correct height
- Frequent stretching
- Back straight
- Shoulders relaxed
- Arms at right angle

Sitting and rotating:

- Get up and face object
- No twisting

C. Carrying:

- Hold objects close to body
- Distribute weight to both arms
- Make two trips or use carts

D. Standing and leaning

- Weight shift
- Stool, if possible
- Stretch

Transfer Technique

The purpose of this lesson is to instruct you in basic transfer techniques with emphasis on safety for both you and the patient. Some patients who require a wheelchair may be able to transfer themselves with little or no assistance. Many will need some assistance, and there are some who will need total assistance. Transferring is a time when accidents can and do occur, unless safety is assured. One principle that will help you carry out a safe transfer is to think about what you are doing and plan each move with the patient and anyone who is assisting you.

Begin the transfer by previewing the job to be done:

- Is the patient able to bear any weight?
- Does the patient have good balance?
- Is the patient able to understand directions?
- Does the patient want to help him/herself?
- How heavy is the patient?
- Is one side stronger than the other?

The first time a patient is transferred, have two people present in the event that the patient is unable to assist. The standing transfer is easier and safer for both the nurse and the patient. The process of standing benefits the patient because:

- The tendons and ligaments in the legs are stretched and straightened, helping to prevent contractures of the hip and knee.

- Bearing weight on the long bones, such as the femur, helps slow the process of osteoporosis.
- Standing provides for better function of the urinary system through gravity drainage.
- Placing the feet on the floor and standing helps prevent foot drop.

If the patient has one side which is stronger, the wheelchair should be placed so that the patient moves toward his stronger side. This allows the patient to use his strength to a greater advantage. The chair is placed at approximately a 45° angle to the bed with the brakes locked and the foot pedals raised. In transferring the patient from wheelchair to bed, the same principles apply. Some patients are too heavy or too weak to accomplish a standing transfer. In this case, the use of a mechanical lift might be indicated or two people will be needed.

When two staff members are working together, a decision must be made in advance as to which one will give directions.

Once the patient is placed in the wheelchair, proper alignment is important. The feet should be resting on the foot pedals and the trunk of the body must be balanced. With male patients who are paralyzed or confused, be sure to check that the patient is not sitting on his testicles. This results in a painful condition which causes swelling, pain and fever in the patient.

If it becomes necessary to move the patient back in the chair, the easiest technique is to cross the patient's arms over the waist. Standing behind him/her, grasp the wrists and simply stand up straight.

Principles of Lifting

- Always push, rather than pull.
- Keep load as close as possible to you and avoid twisting.
- Work at proper height, i.e., raise or lower bed, use of foot stool.
- When stooping, bend hips and knees, and keep trunk straight. Use leg muscles
- Have sufficient assistance and give adequate explanation to patient of what you will do.

Transfers

Bed to chair:

- Assist patient to sitting position with feet flat on floor - more extended knee gives an advantage to standing with severe muscle weakness.
- Test for sitting balance; if it is poor sitting, it will be worse standing.
- Test for patient's cooperation and understanding of directions.
- Position yourself in front of patient with knees available to brace patient's knees - give support at back or buttocks with hands to maintain extension.
- Place chair at an angle to bed with strongest side leading in transfer, i.e., left hemi - transfer to right side; right tib-fib fracture - transfer to left side.
- Place chair so that good side is again leading for return to bed.

Bed to gurney:

- Position draw sheet under patient.
- Position people to help: 2 on one side, 2 on the other additional support for head or feet as needed.
- On the count of 3, all slide patient to edge of bed. Get up onto bed so you don't stretch back with a load at a distance,
- Position gurney. On count of 3, lift patient to edge of gurney.
- Reposition. On count of 3, get patient to center of gurney.

Lifting patient up in bed:

- If patient can assist by using trapezius muscles or by bending knees and pushing, encourage them to do so.
- Lower head of bed to flat position.
- If patient cannot assist, have one person on either side. On count of 3, slide patient up.
- Use draw sheet, if possible.

Prevention of Injuries

- Keep your muscles in tone so that injuries have a decreased chance of occurring. Strengthen abdominal, stretch hip flexors/hamstrings/back extensors - practice pelvic tilt standing and sitting.
- Plan out activity prior to movement - including possible hazards.
- Have sufficient help.
- Explain fully to patient.
- Use of bed locks and other safety equipment.

Remember: Proper precautions and techniques prior to lifting or transferring are essential. If patient starts to fall, you increase the risk of injury to yourself, as well as the patient.

Critical Thinking in the Clinical Environment

1. The Ability to Adapt to New Situations

As the student progresses, it should become easier to adapt each exam to the patient and circumstances surrounding the exam. The student should be able to adapt the routine method of performing the exam in the areas of positioning, central ray angulation, film position, focal film distance, film/screen/grid combinations, technique and patient mobility. The student should always attempt to perform the examination in the way that is easiest and least harmful to the patient. The student should observe and assist whenever possible with this type of exam in order to gain experience and helpful insight.

2. Instilling Confidence in Patients

The student should demonstrate to the patient that he/she is capable of doing the examination and is confident in him/herself. This may be demonstrated by an even, calm tone of voice, steady hands, organization, efficiency, conversation, thorough explanations, acknowledgment of questions, providing answers when possible, and by seeking assistance, if necessary. The patient should respond to the student in manner that suggests trust and confidence. The patient may demonstrate this by conversing easily, relating symptoms and problems associated with disease, laying in a relaxed position, speaking with a calm, even tone of voice, and responding to the student's instructions properly.

3. Student Confidence

The student should keep in mind that while he/she is enrolled in the program, the educational process is taking place. While the student's body of knowledge is appreciated, it is also recognized that there is always more to learn. Students should not pretend that they know how

to do an exam of which they are unsure; it is never acceptable to perform an exam without being reasonably sure of the outcome of one's actions related to patient care and film quality. The student should use his/her knowledge and reasoning and should share this with other students and technologists in an atmosphere of cooperation and assistance, not superiority. The outward signs of overconfidence will be in the student's tone of voice, facial expressions, and reactions to other person's acceptance of the information.

4. The Ability to Perform Under Pressure

In instances where quick concise decisions are necessary, the student should develop the ability to decide quickly based on the knowledge and the circumstances surrounding the examination. Such instances may range from the child patient to the disoriented older patient to the uncooperative emergency patient. The student should, as much as possible, remain calm and self-confident and perform the exam as routinely and efficiently as possible. The student should not cease to function in the capacity of student technologist and revert to the role of observer. Experience will greatly help the student's ability to achieve this. Therefore, the student should observe and assist whenever possible with this type of examination.

5. Always Striving for Quality Care and Films

The student should combine knowledge and reasoning in the performance of the exam in order to ensure quality care and films. In the instance that a film is less than optimal, the student should evaluate the film quality and patient condition with a staff technologist or radiologist in order to determine if a repeat film is indicated. The student will not make this decision entirely on his/her own. If a repeat is needed, the student should perform this willingly under the supervision of a staff technologist and should not give the person requesting the repeat a difficult time. Opposition to the decision should not be expressed verbally or nonverbally; requesting an explanation of the reason for the repeat is acceptable. The student should be certain of how to correct the error. The student should strive for the perfect film, accept the good film, and be willing to repeat the poor one if necessary.

Proper Professional Respect Policy

Professional respect should be extended to the following persons: 1) Radiologist, 2) Staff Technologists, 3) Program Faculty, 4) Staff Physicians, 5) Hospital Staff and 6) all members of the Radiology Department. In order to define "proper professional respect", a description of the relationship between the student and selected groups will be offered. The term "public" is assumed to mean any verbal indication of thought, i.e., anything but in the student's thoughts.

1. Radiologists

The student should recognize the relationship that exists between the student technologist and the radiologist. The radiologist is highly trained in the area of interpretation of radiographs, while being minimally trained in their production. The student, on the other hand, is in the process of being highly trained in the area of production and only minimally in the area of interpretation. Therefore, one cannot exist without the other. It is imperative that each acknowledge the other's area of expertise. The respect that is granted to a person older and more

educated than oneself is the minimum required.

Respect for the radiologist will be displayed by:

- a. Introducing the radiologist to the patient in any exam in which the two come in contact.
- b. Referring to the radiologist using proper title and surname.
- c. Not questioning the radiologist's instructions regarding a specific examination. Clarification of instructions is appropriate and encouraged.
- d. Not questioning the radiologist's interpretation of a film in a public way. The student's base of knowledge does not justify that disagreement.
- e. When appropriate, questioning the radiologist about films, pathology seen, reasons for requiring given projections and film quality, etc. Questions which enrich the student's understanding of radiography and the radiologists requirements are appropriate and encouraged. Questions which in any way "question" the radiologist's competence are not. Questions should be asked on an individual basis and when time allows (not during exam).
- f. Being loyal to and supportive of the radiologist's role and competence in public. Privileged information obtained in the hospital setting must be kept in the utmost confidentiality. Personal opinions of the radiologist must be kept as such - personal, not public.

2. Staff Technologists

Staff technologists should be viewed by student technologists as providers of information, examples to be followed and authorities in the field. The student should recognize that radiography is an art; not an exact science; several different methods may achieve the same end. The classroom teaches one way, working technologists develop variations of this way to achieve the images necessary per given patient and situation. Students should take advantage of this knowledge and learn as many ways as possible to achieve the desired results. Students should not expect staff technologist to be the ultimate source of information, as recall of specifics may differ after the formal educational process has ended.

Respect for the staff technologist will be displayed by:

- a. Accepting the technologist's decisions regarding positioning, procedure and technique. This should be done without question in light of the education and experience of the staff technologist.
- b. Questioning the staff technologist's decision **in private** and in the atmosphere of increasing knowledge, not passing judgment on the competence of the staff technologist.
- c. Recognizing that each staff technologist may have individualized any given procedure while keeping in mind the method that was taught to the student by the program faculty.
- d. Being loyal to and supportive of the staff technologist's role and competence in public. Privileged information contained in the hospital setting must be kept in the utmost confidentiality. Personal opinions of the staff technologists must be kept as such - personal, not public.

3. Radiology Department Staff

The student's relationship with other Radiology Department staff should be one of respect for the other's area of expertise. Radiology clerks and secretarial personnel should be acknowledged for their special skills and should be viewed as a source of information by the student. At no time during the student's training should

he/she display a condescending attitude toward these personnel. They are a vital part of the department without which the department would not function. Respect will be displayed by:

- a. Allowing personnel to perform their job to the best of their ability.
- b. Asking for assistance in performing tasks - not demanding it.
- c. Asking questions of the staff in an appropriate place and time to broaden the student's base of knowledge.
- d. Not asking staff to perform tasks for which they are not qualified or are not allowed to perform.

Respect for Patients Policy

A general attitude of respect for the patient as a human is desired. Part of that includes respect when addressing a person with whom the student is unfamiliar. Upon initial contact, a patient should be approached using proper titles, i.e., Mr., Mrs., Ms., Miss, Reverend, Sister, etc. All students are to use the patient's surname, except when given permission by the patient to use their first name, or in pediatric cases. At no time shall the use of slang terms, i.e., Honey, Sweetie, Dear, etc., be used. The student will not reach the point of familiarity with a patient that would permit the use of such terms.

Students are to maintain patient respect by:

1. Maintaining patient modesty.

Students are expected to observe the patient's right to privacy and modesty as if he/she were the patient. This need should be met under all circumstances including transportation to and from the Radiology Department, within the Radiology Dept and during examinations. For example, patients should be covered as much as possible at all times. Examination room doors should be closed during all exams; the student should provide a method of restricted access to the room if patient modesty is especially compromised by the nature of the examination. Instructions to the patient should also be given in private to prevent embarrassment to the patient.

2. Keeping patient information confidential.

The student is expected to observe the rule of confidentiality of patient information. For example, exam results, patient's hospital record, personal history, behavior in the Radiology Dept., and any information obtained from the patient during the exam should be kept confidential and only passed on to those professionals directly involved in the patient's care. Patient information is not to be discussed with co-workers not involved in patient care, other students, student's family and friends or the patient's family. Students should not extend personal favors to family and friends based on their access to patients' radiology results and hospital records.

3. Showing concern for patient's comfort.

The student is expected to demonstrate concern, in the form of empathy for the patient's physical and emotional comfort. For example, providing support in the form of pillows, sponges, and/or chairs aid in a patient's physical comfort. Explaining the examination process and keeping the patient informed of the examination process will help dispel fear or anxiety and provided a source of emotional comfort. The patient's need or self-esteem should be met by allowing the patient to do as much as possible for him/herself without violating hospital policies. The student will need to use judgment in determining what the patient should be allowed to do, and remember, not all patients are invalids.

4. Patient Privacy

Do not enter an X-ray room when there is a patient on the table that you are not working with. If you need an item from the room, ask the technologist working in the room for the item or ask if it will be all right to enter.

It is everyone's responsibility to insure patient privacy in the radiology department. Do not let unnecessary visitors of patients in the work area or control rooms. Visitors or relatives tend to look in other patient care rooms and at paperwork lying around. Do not allow other patients, visitors, or relatives to look at another patient's radiographs. This is a breach in patient privacy.

Seeking Assistance when Necessary

1. Proper Patient Care During Exam

The student should use sound judgment when seeking help with difficult aspects of an examination. If the student is unaware of the required nursing skills in order to care for a given piece of equipment, assistance should be sought from a staff nurse or technologist. When transporting a patient the student should be certain which apparatus may be discontinued while in x-ray and which ones must accompany the patient before disconnecting anything. Once in the department, the student is responsible for the operation of the apparatus and should seek assistance from a staff technologist or staff nurse should any problems or questions arise. When it comes to patient care, caution is preferred over negligence; therefore the student should not hesitate to ask for help. Some areas of patient care where assistance may be needed are:

Isolation policies	Naso-gastric tubes and suction
IV operations	Oxygen administration
Chest tubes and suction	Catheter care

Patient care should also include other items beyond care of equipment. The student should also be concerned about the personal cleanliness of the patient if the patient is unable to perform those acts alone. A patient should **never** be returned to the patient floor in an unclean state. Patients that are incontinent or without bowel control should be cleaned before leaving the department. Outpatients as well as inpatients should be provided with necessary items to clean themselves of barium and should be assisted if necessary.

2. Technical Aspects

Students should seek assistance with an exam whenever there is doubt about its performance. This includes the areas of technique, positioning, central ray angulation, nature of exam, department routine, and difficult patients. The student is encouraged to try to use his/her knowledge and common sense to reason out the problem, but should not hesitate to ask for help if necessary.