

NWTC Radiography Program



Student Handbook 2024-2025

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NWTC Program in Radiology Student Handbook- Table of Contents

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I. INTRODUCTIONS/OUTCOMES

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INTRODUCTION

Welcome to the Radiography Program at Northeast Wisconsin's Technical College. This program handbook is provided as a reference relating to the program's policies, responsibilities, behaviors, and expectations of all radiography program students.

This handbook is a general guide and should answer most of the questions that may arise. The radiography program is continually evolving and improving. Program faculty may need to make changes/updates to program information and policies. Program faculty reserve the right to make changes to any policies, assignments, time schedules, courses, grading, curriculum, and all other matters related to the program without prior notice. When changes do occur, the students and clinical sites will promptly be advised of the change(s) as soon as possible either verbally or through email and will also be provided at least one of the following: updated handbook replacement pages, an addendum section of the handbook, or a new (updated) issue of the handbook.

If a question or concern cannot be resolved by using this handbook, the student is encouraged to contact a NWTC radiography program faculty member.

As this handbook is updated annually and cannot cover every situation a student may encounter while in the program, situations/actions not covered by the handbook may be covered by the course syllabus and/or handled on an individual/case by case basis.

The radiography program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). To remain in compliance with the accreditation standards set forth by the JRCERT, the program must establish policies and procedures that are designed to ensure the safety and welfare of the students, patients, and clinical personnel.

Northeast Wisconsin Technical College provides a student handbook that lists all college wide policies. The college's student handbook can be found on the NWTC webpage www.nwtc.edu and searching for "student handbook". As a student of NWTC, you are expected to follow the college wide policies, in addition to the program policies. If there is a conflict between the program handbook and the college student handbook, the program handbook policy will take precedence.

At the beginning of each program course the student will be provided with a course Syllabus. The course syllabus outlines the specific criteria needed for the student to successfully complete the course. Clinical course syllabi will include the number and categories of competencies that must be attained within each clinical course.

PROGRAM PHILOSOPHY

Diagnostic radiography is a continually changing profession in an expanding health care system. The use of X-rays (ionizing radiation) in the production of radiographs for medical diagnosis of health problems, requires a thorough understanding of the biological effects of radiation exposure, the ability to effectively use the necessary equipment, and the ability to select techniques by which patient exposure can be minimized and optimum radiographs can be produced. In achieving the above, it is the program's goal to prepare students to meet the requirements to sit for the American Registry of Radiologic Technologists (ARRT) certification exam.

PROGRAM MISSION STATEMENT (reviewed 04/2024)

Consistent with the vision and mission statements of Northeast Wisconsin Technical College, the Radiography Program will be a leader in diagnostic imaging workforce development by providing an educational experience that prepares graduates with the skills and proficiencies required of an entry-level Radiologic Technologist. Using competency-based evaluations, the program emphasis revolves around the student developing a strong work ethic, attainment of entry level technical skills and critical thinking abilities. A variety of clinical education settings with comprehensive patient care experiences will provide students with a well-rounded education in the imaging sciences.

PROGRAM GOALS:

The goals of the Northeast Wisconsin Technical College's Radiologic Technology (Radiography) Program are:

- Students will demonstrate entry-level competency in radiography procedures.
- Students will communicate effectively while providing quality patient care within a health care setting.
- Students will demonstrate problem solving and critical thinking within the work environment.
- Students will engage in professional growth and development opportunities.

PROGRAM STUDENT LEARNING OUTCOMES:

Upon successful completion of the Program in Radiologic Technology, the student will be able to:

SLO 1.1 - Students will evaluate radiographic images.

SLO1.2 - Students will practice radiation safety principles.

SLO 1.3 - Students will apply computer skills in CR and DR within the radiographic clinical setting.

SLO 2.1 Students will communicate effectively.

SLO 2.2 Student will provide quality patient care.

SLO 3.1 Students will perform non-routine procedures in the practice of diagnostic radiography.

SLO 3.2 Students will perform case study analysis.

SLO 4.1 Students will obtain student membership in the ASRT

SLO 4.2 Students will participate in the WAERT Student Symposium.

SLO 4.3 Students will abide by the ARRT Professional Code of Ethics by demonstrating professional behaviors within the clinical setting.

Joint Review Committee on Education in Radiologic Technology Accreditation (JRCERT)

The Radiography Program at NWTC is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Programs accredited by the JRCERT must demonstrate that they are in substantial compliance with the JRCERT *Standards for an Accredited Educational Program in Radiologic Sciences*. The JRCERT is the only agency recognized by the United States Department of Education for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry.

The JRCERT accreditation process offers assurance to the students and public the program meets specific quality standards.

Standards for an Accredited Educational Program in Radiologic Sciences

Please go to this link to review.

<https://www.jrcert.org/programs-faculty/jrcert-standards/>

JRCERT NON-COMPLIANCE POLICY

Should a student feel that the program is in non-compliance with any of the standards they are encouraged to bring their concern to the radiography program faculty for resolution. If the student feels the program remains non-compliant with a JRCERT standard, they are encouraged to contact the JRCERT with their allegation(s) of non-compliance.

<https://www.jrcert.org/students/process-for-reporting-allegations/>

The JRCERT program number for the Radiography program at northeast Wisconsin Technical College is 0568. Use this program number when contacting the JRCERT.

The JRCERT contact information is:

**Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Phone: 312-704-5300**

***The JRCERT is not a step in the college/program complaint/grievance process. This policy is only used to provide the student an avenue to report an area in which they feel the program is not compliant with a JRCERT standard or objective.

For the NWTC complaint/grievance process refer to page 52 in this handbook.

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II. CONTACT INFORMATION/CLINICAL INSTRUCTORS/COMPETENCY

CONTACT INFORMATION

PROGRAM FACULTY

Radiography Program Director **Mr. Don Borst, MSed RT(R)(MR)(T)**
Office phone number: 920-498-5470
Email: donald.borst@nwtc.edu

Radiography Program Clinical Coordinator..... **Mr. Jesse Anderson, MS, RT(R)(CT)**
Office phone number: 920-498-7189
Email: jesse.anderson@nwtc.edu

PROGRAM ADMINISTRATION/COLLEGE INFORMATION

Dean of Health Science Department.....**Mr. Brian Krough**
Office phone number 920-498-7131

Supervising Health Science Associate Dean... **Ms. Selena Zimmerman**
Office phone number 920-498-5656
Email: selena.zimmerman@nwtc.edu

Radiography Program Academic Advisor..... **Ms. Danielle Dawson**
Office phone number: 920-491-2676
Email: danielle.dawson@nwtc.edu

NWTC Health Sciences Office- general number..... 920-498-5543

Clinical Instructors- Hospitals:

Aurora Bay Care Medical Center-Green Bay..... Mr. Jarret Treu RT(R)
Mr. Charles Radke RT(R)
920-288-4940 -central desk
920-288-8000 hospital

Aurora Medical Center -Oshkosh..... Ms. Jessica Heroux, RT(R)
Ms. Tamara Healy, RT (R)
920-456-6000 (general hosp #)
920-456-7099 (department)

Aurora Pain clinic – Oshkosh.....Ms. Erin Hassman

Door County Medical Center Ms. Samantha Beutel, RT(R)
920-746-3540 (Radiology)

Aurora-Bay Area Medical Center (Marinette).... Ms. Stephanie Bourion RT (R)
Ms. Erin Bickel RT(R)
Ms. Krisi Anderson RT (R)
715 735-4200 ext 6200 (dept)

HSHS, St Clare Hospital Mr. Andrew Sullen RT(R)
920-846-3444 (hospital general#)

HSHS, St. Mary's Hospital Mr. Nick Sawyer, RT (R)
920-498- 4651 (radiology work desk)
920-498-4633 (Hospital Gen number)

HSHS, St. Vincent Hospital Ms. Miranda VanLannen RT(R)
920-433-8193 (front desk)

Clinical Instructors-Clinics:

Prevea Clinic-Allouez Site.....Ms. Rachael Balthazar RT(R)
Ms. Melissa Schreiber RT(R)(M)
920 496-4700 Ext 78584 or 72934

Prevea Clinic-Ashwaubenon Site.....Ms. Rachael Balthazar RT(R)
Ms. Melissa Schreiber RT(R)(M)
920-496-4700 or 920 496-4700 Ext
72934

Aurora-West SideMs. Heidi Coddington, RT(R)
Ms. Karen Wagner RT(R)
Ms. Kayla Kurowski, RT(R)
920-327-7270

Orthopedic & Sports Medicine..... Ms. Arianna Zuraski, RT(R)
(OSMS) 920-430-8113

Marinette Aurora clinic Ms. Annette Steinhorst RTR
Ms. Ashley Dunlap RTR
715-732-8000

Shawano ThedaCare medical center..... Ms. Hope Miles RT(R)
Mr. Adam taufner RT(R)
Main number 715-526-2111

Competency Based Clinical Education- Explanation (CBE) (updated 8/1/18)

Competency Based Clinical Education is a progressive approach to the development of a student's clinical skills and is an important element of the program. CBE is based on the coordination of learning between classroom, lab, and clinical instruction.

In CBE, the students observe, apply knowledge, and practice radiographic positioning, radiographic procedures and radiographic technique at their clinical facility. Students will be assigned to limited off hour clinical assignments to provide them with an increased opportunity to observe and apply critical thinking skills necessary for radiographic procedures involving trauma patients. These experiences are under the supervision of Clinical Instructors and/or staff radiographers and are approved/scheduled prior by College faculty. The CBE procedure is as follows:

- Per the clinical matrix, students will be assigned to specific radiographic rooms or imaging areas to observe/participate in activities and exams being performed.
- After the student has observed and applied their exam knowledge by sufficiently practicing the examination, have previously checked off on the exam in the laboratory setting (Procedures lab), and have demonstrated competency in operating the equipment (completed checklist), they may attempt an exam competency on a patient.

RADIOGRAPHIC EXAM CLINICAL COMPETENCY PROCEDURE

The current system uses both a paper copy and an online system (Trajecsys) to record attempted competency exams. It consists of two parts; 1) performance of the exam and 2) image analysis of the radiographic images produced.

All students attempting clinical competency will follow the procedures listed below:

1. The student will inform the Clinical Instructor or qualified technologist of a competency attempt (be sure the tech has been approved to do competency evaluations) and provide the proper competency paper form prior to beginning the radiographic exam. The Clinical instructor should always be asked first and if unavailable a qualified technologist (a qualified technologist is a registered tech for 1 year and has been given instruction on the competency process) may perform the competency evaluation. The approved tech or CI must observe the entire performance portion of the competency attempt and complete the form. If a comp has been performed with a technologist that is not qualified or has not been approved to perform competencies, the competency attempt is invalid. For a list of qualified technologists at your facility please see your CI.
2. After the performance portion of the competency attempt is complete, the competency exam moves to the image analysis portion of the exam. **Only the CI** can complete this section. The next step(s) will depend upon who observed the performance portion of the exam.
 - If a technologist observed the performance portion, he/she will complete the observation portion of the paper competency form and either hand it to the CI or place it in the designated file for the CI. Note, some sites may prefer to give the partially completed competency form to the student, who will then give the form to the CI, rather than placing it in a designated area.
 - If the CI observed the performance portion, he/she may choose to complete the image analysis portion as soon as the exam is complete or (if the department is busy) the CI

may choose to wait and complete the image analysis portion later. The image analysis portion should be completed within 10 days of the performance observation and the exam entered into the Trajecsys system. (special situations will be taken into consideration)

The Clinical Instructor is responsible for the final approval of the competency which is indicated by his/her signature/data entry into Trajecsys. The competency will be granted if the student satisfactorily meets all criteria. Competency attempts requiring a repeat image are considered unsuccessful (failed).

3. All competencies, **including attempted competencies** must be entered into the Trajecsys online record keeping system. It is the responsibility of the student and/or program faculty to assure this is being done. Any attempted competencies not turned in to the CI or College Faculty within 10 days of completion will be assessed a 5% clinical point deduction. If less than 10 days remain in the semester, then the due date becomes the last day of the semester. Repeated violations of this policy will lead to program dismissal. The faculty reserves the right to make an exception for special circumstances.

For sites in which the CI enters competencies into Trajecsys, the student keeps the original paperwork. In the event of a discrepancy, or the CI fails to enter the comp into the Trajecsys system, the student will be required to show the original paperwork as proof.

For sites in which the CI does not enter comps into Trajecsys, all original completed competency forms are given to the student to be submitted to the Clinical Coordinator or supervising faculty to be entered into the Trajecsys system with the original returned to the student to keep for their records. In the event of a discrepancy, or the Clinical Coordinator or supervising faculty fail to enter the comp into the Trajecsys system, the student would be required to show the original paperwork as proof.

While there is no direct penalty for attempting and failing an exam competency, the program **faculty reserve the right to require remediation and/or place the student on clinical probation if the student has made three or more unsuccessful competency attempts on the same exam.**

4. College faculty, Clinical Instructors, and supervising technologists have the right to assess student proficiency(re-competency) on any exam on which the student has demonstrated initial competency at any time. If the student's skill level is determined to be inadequate, the competency will be withdrawn. The student will need to undergo remediation and then regain the competency. Clinical points will be deducted from the student's grade anytime a comp is removed or withdrawn. Clinical points are also deducted for each failed re- competency attempt.
5. **Clinical competencies can only be obtained during assigned clinical rotations and times.** If a student begins a competency exam before his/her scheduled time ends, they are allowed to stay to complete the exam. The student may not stay beyond their scheduled clinical time to begin an exam. Competency attempts made during hours not assigned by the college will not be accepted and are in violation of program policy.

6. Any time a CI or a technologist is observing a student and feels that the patient is in danger, they may stop the competency attempt and take over completion of the exam. This will result in a failed competency attempt for the student.

Failure to meet the required number of comps and/or re-comps for a clinical course will result in the following:

1st infraction-automatic letter grade of 'C' and placed on program probation

2nd infraction-automatic letter grade of 'D' and program dismissal

***** for first infraction, additional grade deductions may result in a non-passing grade for the course.**

ARRT Clinical Competency Requirements Explanation (updated 8/23)

As part of their educational program, candidates must demonstrate competence in the clinical activities identified in this document. Demonstration of clinical competence means that the program director or designee has observed the candidate performing the procedure, and that the candidate performed the procedure independently, consistently, and effectively. Candidates must demonstrate competence in the areas listed below.

- **10 Mandatory general patient care activities (covered in Introduction to Radiography course)**
 - **36 Mandatory Imaging Procedures**
 - **15 Elective Imaging Procedures to be selected from a list of 35 procedures**
 - **1 Elective imaging procedure from the head section**
 - **2 Elective imaging procedures from the fluoroscopy studies section and one of which must be either an Upper GI or a Barium Enema**
- (Faculty encourage students, when possible, to achieve competency in more than the required 15 electives)**

Demonstration of competence for imaging procedures includes requisition (exam order), (added) evaluation, patient assessment, room preparation, patient management, equipment operation, technique selection, positioning skill, radiation safety, imaging processing and image evaluation.

Minimum Projection List

The program, with input from the clinical sites, determines the positions and/or projections required for each competency exam. This information can be found in the Minimum Projection List. **The minimum projections list is provided for each clinical semester in the student resources area of Canvas or in the documents section on the trajecsys website. Students are encouraged to print a copy for their reference as some competencies cannot be attained until certain semesters.** Students are required to successfully perform these positions and/or projections to achieve competency for the exam. If for some reason, the site or the physician's order does not meet the Minimum Projections, the successful portion of the competency exam will be accepted and considered 'partial'. If the opportunity presents in which another exam with the required minimum projections is ordered, the student is encouraged to repeat the competency exam.

If the student does not get the opportunity to complete a full exam, any remaining positions or projections needed to complete the competency must be simulated during the last week of clinical 6. (see simulation policy below)

Simulation imaging for completion of Fluoroscopy Exams (rev 8/14/15)

For completion of fluoro exams/competencies in which no overhead images are ordered by the Radiologist, the student will need to simulate the minimum projections for the exam with their CI. This should be done as soon as possible following the completion of the exam. The CI or student will ask someone to act as the patient. The qualified technologist or CI can complete the actual portion of the fluoro competency, but the CI must complete the simulation portion of the competency.

Simulation for Exams/Partial Comps other than fluoroscopy

For all other exams, simulations are only allowed to be performed the **last week of Clinical 6** with the Clinical Instructor or program faculty only. If the CI will be unavailable, it is up to the student to arrange a time the week prior to complete the simulations. The student will perform all parts of the procedure from identification of the patient to the point of actual exposure with a mock patient. After the student demonstrates positioning skills on a mock patient, the CI will make every effort to provide radiographic images of the exam for the image analysis portion of the competency.

Students not successful in their simulation will receive a 3% grade percentage reduction.

Students who do not abide by this policy and simulate exams that are not approved will receive a one letter grade reduction.

Students can simulate up to three exams (during Clinical 6 only); however, the following exams cannot be simulated:

- C-Arm Procedure (surgical)
- Any mobile procedures
- Any trauma procedures (upper extremity, lower extremity and shoulder).

ARRT Log (updated 8/23)

Student competency records are maintained by program faculty and are periodically sent to the student for review. Students are required to keep an updated copy for their own records and must provide a copy to the CI (s) when they begin at a new clinical site. The form below is used by faculty to record competencies. *When a student begins a clinical semester, in order to provide an accurate picture of the student's clinical progress, the student's clinical site(s) will have access to the student's ARRT competency log.*

Radiography Clinical Competency Requirements Record/Log

Mandatory exams

Imaging Procedure	M	Date	Pt or Sim	Competence Verified By
Chest and Thorax				
Chest Routine	M			
Chest AP (Wheelchair or Stretcher)	M			

Ribs	M			
Upper Extremity				
Thumb or Finger	M			
Hand	M			
Wrist	M			
Forearm	M			
Elbow	M			
Humerus	M			
Shoulder	M			
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	M			Cannot be comped until clinical 4 minimum
Trauma: Upper Extremity (Nonshoulder)*	M			Cannot be comped until clinical 4 minimum
Clavicle	M			
Lower Extremity				
Foot	M			
Ankle	M			
Knee	M			
Tibia-Fibula	M			
Femur	M			
Trauma: Lower Extremity*	M			Cannot be comped until clinical 4 minimum
Spine and Pelvis				
Cervical Spine	M			
Cross table (Horizontal Beam) Lateral Spine	M			
Thoracic Spine	M			
Lumbar Spine	M			
Pelvis	M			
Hip	M			
Cross Table Lateral Hip	M			
Abdomen				
Abdomen Supine (KUB)	M			
Abdomen Upright	M			
Surgical Studies *Manipulation is defined as rotation of the C-arm to include AP, lateral & oblique positions around a sterile field. See the minimum projection list for clarification.				
Surgical C-Arm Procedure (Requiring *Manipulation to obtain more than one projection)	M			See specific requirements on minimum projections list Cannot be comped until clinical 5 minimum

Surgical C-arm Procedure (Requiring *Manipulation Around a Sterile Field)	M			See specific requirements on minimum projections list Cannot be comped until clinical 5 minimum
Mobile Studies				
Chest	M			
Abdomen	M			
Orthopedic	M			
Pediatrics (age 6 or younger)				
Chest Routine	M			
Geriatrics (65 or older and are physically or cognitively impaired as a result of aging)				
Chest	M			
Upper or lower Extremity	M			
Hip or spine	E			

Elective Exams

Imaging Procedure	E	Date	Pt or Sim	Competence Verified By
Chest and Thorax				
Chest Lateral Decubitus	E			
Sternum	E			
Upper Airway (Soft-Tissue Neck)	E			
Upper Extremity				
Scapula	E			
AC Joints	E			
Lower Extremity				
Toes	E			
Patella	E			
Calcaneus (Os Calcis)	E			
Head – Candidates must select at least 1 elective procedure from this section.				
Skull	E			
Paranasal Sinuses	E			
Facial Bones	E			
Orbits	E			
Zygomatic Arches	E			
Nasal Bones	E			
Mandible	E			
Temporomandibular Joints (TMJ's)	E			
Spine and Pelvis				
Sacrum and/or Coccyx	E			
Scoliosis Series	E			

Sacroiliac Joints	E			
Abdomen				
Abdomen Decubitus	E			
Intravenous Urography	E			
Fluoroscopy Studies – Candidates must select either UGI or BE plus 1 other elective procedure from this section.				
Upper GI Series (Single or Double Contrast)	E			
Contrast Enema (Single or Double Contrast)	E			
Small Bowel Series	E			
Esophagus	E			
Cystoraphy/Cystourethrography	E			

ERCP	E			
Myelography	E			
Arthrography	E			
Hysterosalpingography	E			
Pediatrics (age 6 or younger)				
Upper Extremity	E			
Lower Extremity	E			
Abdomen	E			
Mobile Study	E			

Maintaining Competency/exam proficiency

To ensure continued competency and proficiency of exams, students are required to perform a specific type and number of re-competencies per semester (**see table on page 74**). Each clinical syllabus will list the exam number and categories required. It is the student's responsibility to ensure that he/she is performing the correct number and category of re-comps each semester.

Re-competencies can only be performed in the semester they are required and only on exams a student has achieved competency in a previous semester. Students are allowed to re-comp on an exam only once unless they failed the re-comp and had the initial comp pulled.

Students must announce to the CI or technologist he/she is attempting a re-comp and provide the correct form. (A re-comp form is not a comp form) The same process as the initial competency is used with one exception. At the CI's discretion, a student may repeat an image during a re-comp and still maintain competency if he/she demonstrated competency in performing the exam (knowledgeable regarding direction and location of CR & positioned correctly), understood why the mistake happened, and repeated the image successfully. For example, if a student re-comped on PA & Lateral chest X-ray, centered correctly but had rotation on the lateral image. The student knew how to adjust for the repeat image and repeated the image successfully without guidance from the technologist. The student would still be considered competent. Keep in mind, that it is always the CI's decision. Students are not to challenge the CI's decision.

Failed Re-comp Attempt (Explanation)

If a student fails a re-comp, the student is required to notify college faculty by email of the failed re-comp by the end of the clinical week. The initial competency will be removed from the students ARRT log until re-competency has been accomplished, they must also sign a remedial contract with the Clinical Instructor and provide a completed copy of the remedial contract to College Faculty (the Clinical Coordinator, Program Director, or assigned faculty) within one week. If the failed re-comp occurs during the last two weeks of clinical, the student needs to inform the faculty on the day it occurs.

The remedial contract will require the student to review and outline the positioning section in their textbook for the exam that was failed, demonstrate/practice the failed positions, and to participate or demo on at least one patient prior to re-attempting competency. If the failure is due to artifact(s) (necklace, metal etc) the student needs to outline a plan to prevent future mistakes. For other situations requiring remediation, consult the college faculty.

In addition, the student's clinical grade will be reduced 3 percentage points.

Failure to follow this protocol or having repeated failures of a re-comp exam will result in the

student being placed on program probation.

Failed Re-comp Attempt-Remediation Contract (example)

Failed Re-comp Attempt-Remediation Contract

I, _____, have failed to maintain my competency on the following radiographic examination: _____.
I understand as a result, three (3) clinical points will be deducted for the failing to maintain competency and I will need to do the following to assist in regaining a competent level of knowledge/performance.

2. If the repeat is due to positioning error, review and outline the positioning section of this exam area in my Radiographic Procedures (Bontrager) textbook. I understand I am required to submit this assignment to my clinical instructor within ten (10) work days of the attempted competency or by an agreed date of: _____. I also understand I am required to submit a copy of the agreement to College Faculty within three weeks of the attempted comp or before the end of the semester.
3. Demonstrate the correct positions required to my clinical instructor in a radiographic room.
4. Participate in the completion of at least one actual patient exam and /or perform mock exam of this radiographic procedure in the presence of my CI/or staff technologist and obtain the signatures below of the technologists who observed my performance of the procedure/mock exam.

(technologist's signature)

I am also aware that my original competency exam will be removed from my ARRT log until I have proven competency.

Student Signature

Date

Clinical Instructor Signature

Date

Instructor Comments:

Reminder: Students must obtain all ARRT required competency exams prior to the end of Clinical 6 in order to graduate.

Certification: Eligibility Requirements-American Registry of Radiologic Technologists

Upon successful completion of all radiography program clinical, didactic & general education requirements, as well as financial obligations to the college, the student may petition for graduation. Once approved, the student is also eligible to make application to take the radiography certification examination administered by the ARRT. The ARRT provides a handbook to assist in making application. The initial application requires a fee of \$250.

In addition to the above requirements, the ARRT requires that candidates be of moral character. If an applicant has ever been convicted of a felony offense or misdemeanor, they are encouraged to discuss it with the Program Director and/or ARRT to ensure ability to sit for the certification examination. They also may be required to provide evidence of having served the

entire sentence, including probation and parole, with restoration of civil rights before being admitted to the certification exam. Students who have previous convictions may apply to ARRT for pre-certification prior to program registration.

Clinical Site Supervision of Students

In accordance with the Joint Review Committee on Education in Radiologic Technology (JRCERT) Standards for an Accredited Educational Program, students must have adequate supervision during all clinical assignments. Students must perform all medical imaging procedures under the direct supervision of a qualified (registered-ARRT) radiologic technologist until students achieve competency.

The following conditions constitute direct supervision:

- A qualified registered technologist reviews the procedure in relation to the student's achievement and evaluates the condition of the patient in relation to student's knowledge. This assures that the patient's condition does not require special consideration and additional staff to complete the exam.
- A qualified radiologic technologist is present during the entire procedure.
- A qualified radiologic technologist reviews and approves the procedure before exposure and reviews images for quality prior to an image being submitted for radiologist or doctor interpretation.

Students shall not take the responsibility or the place of the qualified staff!!

However, after demonstrating competency, students may be permitted to perform procedures under indirect/limited supervision of a qualified radiologic technologist that is immediately available to assist students.

The student will always be under direct supervision when working in the OR (operating room), angiographic facilities, CT, MRI, mammography, with traumatic spine patients, or any other exams in which the technologist deems beyond the ability of the student during the entire clinical training time.

The following conditions constitute indirect supervision.

- Immediately available is interpreted as the presence of a qualified radiologic technologist adjacent to the room or location where a radiographic procedure is being performed. (This must be in person not by phone or intercom.) The technologist must be available to hear the student if the student is in need of assistance. This availability applies to all areas where ionizing radiation equipment is in use.
- Students are not allowed to perform independently those exams they have not gained competency in. They must be directly supervised until they gain competency on a specific exam.
- A qualified radiologic technologist **MUST BE** present during student repeat of unsatisfactory radiographic images. Unsatisfactory images shall be repeated ONLY in the presence of a qualified radiographer, regardless of the student's level of competence. In addition, a completed supervised repeat form must be filled out and turned in to college faculty.

Repeat Policy for Radiographs

In accordance with the Joint Review Committee on Education in Radiologic Technology (JRCERT) Standards for an Accredited Educational Program, and for the protection of the patient, **any radiograph repeated by a student must be done under the direct supervision of a registered radiologic technologist regardless of the level of competency of the student.** This means students working under indirect supervision cannot repeat a radiograph until a registered technologist is available and present to observe the change(s). The student is responsible for completing the documentation form and obtaining the supervising technologist's signature.

Repeating a radiograph without proper supervision is in violation of the program's radiation safety policy and the student will be penalized. There is NO exception to this policy. Failure to abide with this policy will include probation and grade deduction. If egregious or repeated violation – program dismissal.

Repeat Policy for Radiographs-Form (example)



Documentation of Supervised Repeat

Radiography students repeating unsatisfactory radiographs are required to repeat the radiograph under direct supervision of a registered radiographer. If the initial exam was performed under indirect supervision, this form needs to be completed documenting the technologists' supervision of the repeat.

Student Name: _____ Date: _____

Clinical Site: _____ Semester _____

Projection/Position Repeated _____

Reason for Repeat: _____

Technologist's Signature _____ Date: _____

Competency Evaluations: Evaluators (8/14/15)

Students should make every effort to attempt competency exams with the site clinical instructor. In the event the CI is unavailable, the student may then ask a **qualified** technologist to evaluate observation portion of the competency. Not all technologists may observe/evaluate students for clinical competency. Technologists must be registered (ARRT) for one (1) year and have completed instruction in the clinical competency process. Clinical Instructors will complete the second part of the competency process and review the images. CI's have final approval of all competency and re- competency exams. If a non-approved technologist observes/evaluates a student, the competency will be considered invalid. For a list of approved technologists please see your CI.

III. CLINICAL POLICIES AND INFORMATION

Accident Insurance

All students are automatically enrolled in the “Wisconsin Technical Colleges Mandatory Accident Only Insurance Plan”. This coverage is provided to students when they are injured in class, clinical (including internships or service learning, etc. if a required part of their classes) or on the way to or from class or clinical. Please note: excess to any other valid/collectable health insurance coverage.

Student Accident Page:

<https://www.nwtc.edu/student-experience/student-involvement/student-health-and-wellness/student-accident-insurance>

Students are encouraged to visit the website and print a copy of the insurance card.

Alcohol, Drugs, and Controlled Substances

The following conduct regarding alcohol and or controlled substances is prohibited: Using, selling, manufacturing, distributing, possessing, storing, dispensing, or being under the influence of alcohol or controlled substances on or off NWTC premises, as part of any College-related activity, (which includes clinical) or in the workplace, except as authorized under NWTC policy or otherwise by NWTC.

Disclaimer

As a student in a health sciences program attending clinical rotations, you will be exposed to patients with communicable diseases. Students must adhere to prescribed safety measures and follow standard precautions while working with patients and/or near blood and body fluids either in the school laboratory or in the actual clinical setting. **Faculty cannot assume the responsibility for assigning students to work with blood or body fluids that are free from communicable diseases such as AIDS or Hepatitis.** It is the responsibility of the student to work safely and take the proper safety precautions to minimize exposure to such diseases. NWTC, its faculty, or clinical agencies will NOT be held liable for accidents, injuries, or infections incurred by students during their course of study.

BLOODBORNE PATHOGEN EXPOSURE CONTROL INFORMATION FOR HEALTH SCIENCE STUDENTS (revised 6/2018)

All students shall receive NWTC’s Bloodborne Pathogen Exposure Control Information for Students. This policy is to be followed on campus and at clinical sites.

Standard Precautions

Standard precautions will be observed to prevent contact with blood or Other Potential Infectious Material (OPIM). All blood and OPIM will be considered infectious regardless of the perceived health status of the source individual. Specific protocol should be followed for exposures.

Exposure Incident (Code of Federal Regulations 1910.1030)

Exposure Incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM.

1. Parenteral means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.
2. Other potentially infectious materials include the following:
 - A. Human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.
 - B. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
 - C. HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.
3. Other routes of exposure, defined as significant in rules promulgated by the Department of Health/Social Services. The department in promulgating the rules shall consider all potential routes of transmission of HIV identified by the Centers for Disease Control.

BLOODBORNE PATHOGEN EXPOSURE CONTROL INFORMATION FOR HEALTH SCIENCE STUDENTS

1. PROTOCOL FOR EXPOSURE INCIDENT AT OFF-CAMPUS CLINICAL SITE **Packets are available on campus or regional center offices.**

1. Student: Immediate first aid.
2. Student: Report injury/incident immediately to your instructor.
3. Student/Faculty: If clinical exposure, follow the clinical site's established bloodborne pathogens exposure control plan.
4. Faculty: Complete a NWTC online Incident Report Injury/Illness with full description of the incident and source of exposure. Check "Email me a copy of this report" and send a copy to the student.
5. Student: Complete Exposure Report. (Available in packets indicated above.) Obtained from department/campus/regional center offices or faculty.
6. Student: Print Student Accident Insurance ID Card, take with you to your healthcare provider. Instructions available at this link: <http://www.nwtc.edu/atnwtc/student-involvement/Pages/Student-Accident-Insurance.aspx>
 - a. All students will be automatically enrolled in the "Wisconsin Technical Colleges Mandatory Accident Only Insurance Plan". The coverage is provided to students when they are injured in class, clinical (including internships or service learning, etc. if a required part of their classes) or on the way to or from class or clinical. Please note: Excess to any other valid/collectible health insurance coverage.
7. Student: You may refuse treatment. If so, you must complete and sign the Student Informed Refusal of Post-Exposure Medical Evaluation.

8. Faculty: Review the Post Exposure Counseling Sheet with the student.

2. **PROTOCOL FOR EXPOSURE INCIDENT ON CAMPUS (NON-DENTAL)**

- Exposed Person: Follow protocol outlined in step 1, listed above.
- Source Individual:
 - Student: If the source individual is a student, complete the Source Information Follow-up and sign. Both the source individual and exposed person should take a copy of this to their healthcare provider (along with the Exposure Report).
 - Non-Student: If the source individual is not a student, the individual will be asked to go to Bellin Health Emergency Room for serological testing and follow-up. NWTC will pay for the baseline testing. Provide the patient with the memo authorizing payment (memo available in Health Sciences & Education Department Office), along with a copy of the Exposure Report, and the Source Information Follow-up.
- Source Individual: Print Student Accident Insurance ID Card, take with you to your healthcare provider. Instructions available at this link:
<http://www.nwtc.edu/atnwtc/student-involvement/Pages/Student-Accident-Insurance.aspx>
 - All students will be automatically enrolled in the “Wisconsin Technical Colleges Mandatory Accident Only Insurance Plan”. The coverage is provided to students when they are injured in class, clinical (including internships or service learning, etc. if a required part of their classes) or on the way to or from class or clinical. Please note: Excess to any other valid/collectible health insurance coverage.
- C. Source Individual: Serological testing and follow-up will be paid by Student Accident Insurance.
 - a. All students will be automatically enrolled in the “Wisconsin Technical Colleges Mandatory Accident Only Insurance Plan”. The coverage is provided to students when they are injured in class, clinical (including internships or service learning, etc. if a required part of their classes) or on the way to or from class or clinical. Please note: Excess to any other valid/collectible health insurance coverage.

Cell Phone, Smart Watch or any other devices capable of recording or imaging Policy-In the Clinical Setting

Unless authorized by the program, cell phones, smart watches or any other devices capable of recording or taking images are not to be carried or worn by the student at any time in the clinical education setting. Cell phones, smart watches or any other devices capable of recording or taking images are not to be carried by a student in any area that may contain patient information or in which patient examinations are being performed. These items are to be stored with the student's personal belongings in a non-patient area (i.e. locker or break room).

Calls can be made when on break but must be done in a non-patient care area as designated by your clinical site. (outside of hospital or clinic, cafeteria etc.)

If you are authorized to use an electronic device during clinical time, the device is only to be used for the authorizing reason (medical: heart, blood glucose, etc monitoring). Abuse of the authorization, may result in revocation of the authorization.

Carrying or using a cell phone, smart watch, or any other device capable of recording or taking images (whether turned off or not) in any area that contains patient information.

If the use of a cell phone at clinical leads to suspected of a HIPAA violation,

The student will leave the clinical facility and the time missed will be counted as unexcused absence for that day and any subsequent days of investigation.

****Note:** If found to be "guilty," of a HIPAA violation, the student will be dismissed from the program, the incident will be reported to the ARRT. The student would never be eligible to take the ARRT certification exam.

Clinical attendance – requirements:

A large portion of the students education will be in the clinical setting. Clinical courses differ from classroom course by the attendance policies used. Clinical course require specific amounts of attendance. The days of clinical attendance are based on the year in the program. During the first year of the program, clinical days are attended on Thursday and Friday. In the second year of the program clinical is attended on Monday, Tuesday, and Wednesday. The majority of clinical hours are scheduled for day shifts and are variable by site from 7 am to 5 pm. There are some limited evening and weekend days included in the program.

Clinical Attendance -Bereavement (funeral) Leave (5/14/14)

Bereavement applies to both didactic (classroom) and clinical education as follows:

Up to a maximum of 3 days for a death in the student's immediate family (i.e., parent, spouse, brothers, sisters, children, grandparents, mother or father-in-law, or additional persons as stated in the most current College Catalog).

Bereavement time will be referred to the college's disability and accommodations office.

Note: Missed time for bereavement will be added on to the end of clinical 6.

Clinical Attendance-Breaks and Lunches

All students assigned to a 6 ½ -hour clinical rotation or longer will have a half hour lunch period. Students assigned to six hour or less clinical rotations, are not required to take a lunch break. Fifteen-minute breaks per four-hour assignments occur as workload permits. Students should follow the meal and break policies of the assigned clinical site.

In rare instances due to heavy caseload, when a student misses a regularly scheduled lunch to assist clinical staff, the student is mandated to take a meal break as soon as possible. Missed lunch periods/meal breaks will not be granted clinical credit.

A student MAY NOT skip lunch or meal break in order to leave early. This practice will only be allowed for an emergent need as students are encouraged to take available lunch breaks for the sake of their personal health and well- being.

Students may not to exceed their semester clinical hour requirement.

While the student is in clinical, he/she is expected to complete the full clinical shift and make good use of the time. Inappropriate use of clinical time (extended breaks, extended lunches and not being in assigned areas etc.) counts as an absence. If assigned area is not busy, seek out additional clinical activities from your supervising technologist. Down-time is a good opportunity to review information or practice positioning skills on classmates or available technologists.

Personal phone calls

No personal phone calls should be received or made while in the clinical area except for emergencies. Cell phones must be turned off and stored with the student belongings and not carried by the student. This is for patient safety, professionalism, and HIPPA. If necessary, students may step outside of the hospital **during scheduled breaks** to use their cell phone.

Clinical Attendance -General Info (updated 5/14/14)

The Clinical site and Clinical Coordinator determine the clinical hours and days based on the clinical objectives of the program. Changes in student schedules are discouraged and should be minimal. **Refer to the Clinical Syllabus for Policy on schedule changes.** Clinical attendance is critically important. Students are expected to attend all assigned clinical rotations with no absences. Students are expected to be on-time to the clinical site and to remain in the clinical facility for the entire clinical experience. A good “rule-of-thumb” is to arrive ten (10) minutes before your shift begins, so that you are prepared and ready to begin on time.

All absences from clinical will be referred to the college’s disability services office. All unexcused absences will result in a 2% grade deduction from the clinical grade.

A student must at a minimum attend 90% of the scheduled clinical days in each semester. If at any point attendance drops below 90%, the student will automatically receive a D grade. Extenuating circumstances such as extended illness, pregnancy (see pregnancy policy), death of an immediate family member, etc. will be evaluated on a case-by-case basis by the program faculty, associate dean, and accommodations/disability office to determine the appropriate course of action.

Failure to properly alert faculty and clinical sites of any absence will result in a 2% grade deduction. All absences will be reviewed. Absences that are determined to be excused will not be assessed the 2% penalty but will still count toward the 90% attendance requirement.

Clinical Attendance-Inclement Weather (updated 5/29/19)

Announcement of Closure

Closing of NWTC and the official cancellation of clinical assignments and/or classes due to inclement weather will be announced on the radio, TV, and the RAVE alert system. Students can sign up for these alerts by visiting <https://www.getrave.com/login/nwtc>. Other options are to check the NWTC website or call the NWTC weather line at 920-498-6380.

Early morning closure

When the Green Bay campus closes all classes and clinical are cancelled. Students are not required to make up missed time due to closure when the campus closes.

Campus closure mid-day

The Radiography Program's clinical sites are located within a large area. Inclement weather may affect one area while having no impact on another. If a regional campus closes and the student's clinical site is located within that region (ie Marinette, Door County) the student is excused from clinical. Students are advised to use caution when leaving a site to return home. (please note the Aurora campus is not Aurora Hospital in Green Bay but rather Aurora, WI located in the town of Florence County)

No closure (rev 8/21)

If the weather is inclement and the campus (or regional center) remains open, the choice to report for class or clinical is ultimately up to the student. Students electing not to travel due to weather conditions must notify both their clinical site and the assigned faculty prior to the beginning of their scheduled clinical time. The absence will be counted as unexcused unless the student has unused personal time.

Clinical Attendance- Personal Illness

Attendance is expected at all clinical rotations except in the case of illness. If a student is ill and cannot attend clinical, he/she is required to notify both the clinical site and the assigned college faculty prior to the scheduled clinical start time. The Clinical site must be notified by phone. The assigned college faculty will be notified by email.

All absences for illness will be referred to the college's accommodation and disability office.

Students showing signs and/or having symptoms of illness may be suspended from program activities (on campus) or patient care (clinical site) activities. (See below-a site's policy on flu vs cold below) Program faculty and/or clinical staff can request that the student see a healthcare provider before returning to class or clinical activities.

Students with a communicable disease are required to bring a physician note stating there are no restrictions before they can return to clinical or class. Examples of communicable diseases

include but are not limited to chicken pox, influenza, conjunctivitis (pink eye), and strep throat.

Make up time











Make up of missed clinical time is only allowed for extenuating circumstances. Extended illnesses, pregnancy, etc..

A student that misses clinical time will need to complete the requirements for their assigned clinical within the scheduled clinical time frame. Extenuating circumstances will be evaluated by program faculty.

All make up time will be added to the end of clinical 6.

If make up time has been allowed by program faculty, the make up time will be added to the end of clinical 6. As the first year students have a summer clinical that begins approximately 10 days after the end of the spring semester, any make-up time allowed for a second year student must be able to be completed before the beginning of summer clinical. Should a student need more time than is available, the student may be required to: move to a different clinical site, or take a leave of absence from the program and cycle back into the program to complete the clinical requirements. See leave of absence policy.

The Difference Between Symptoms

Symptom	Coronavirus (COVID-19) Symptoms range from mild to severe	Cold Gradual onset of symptoms	Flu Abrupt onset of symptoms	Seasonal Allergies Abrupt onset of symptoms
 Length of Symptoms	7-25 days	7-14 days Less than	14 days	Several weeks
 Cough	Common (usually dry)	Common (mild)	Common (usually dry)	Rare (usually dry unless it triggers asthma)
 Shortness of Breath	Sometimes	No**	No**	No**
 Sneezing	No	Common	No	Common
 Runny or Stuffy Nose	Rare	Common	Sometimes	Common
 Sore Throat	Sometimes	Common	Sometimes	Sometimes (usually mild)
 Fever	Common	Short Fever Period	Common	No
 Feeling Tired	Sometimes	Sometimes	Common	Sometimes
 Headache	Sometimes	Rare	Common	Sometimes (related to sinus pain)
 Body Aches and Pains	Sometimes	Common	Common	No
 Diarrhea	Rare	No	Sometimes for Children	No

*Information is still evolving. **Allergies, colds, and flus can all trigger asthma, which can lead to shortness of breath. COVID-19 is the only one associated with shortness of breath on its own. Sources: Asthma and allergy Foundation of America, World Health Organization, Center for Disease Control and Prevention.

bellinhealth

bellin.org/covid19

Pink Eye

You **cannot** attend clinical if you have any signs or symptoms of pink eye or have a confirmed diagnosis of pink eye.

Pink eye is a highly contagious disease process. It manifests itself in two forms, viral and bacterial and there are two conditions that must be met for you to return to the clinical setting. First, you must be on the antibiotic at least 24 hours and your eyes must not show

signs of weeping (heavy tearing) or matting (**yellowish crusty deposits around the eyes and/or in the eyelashes due to the eyes weeping**).

Pink eye is a contact disease transmission mode so when you do return to clinical (for 7 days) you need to limit your contact with the patients (limit touching them especially on the hands and face), wash your hands before and after contact with all patients or if you touch or wipe your eyes or face, and wear gloves for every patient.

Clinical Attendance -Personal Vacations

Personal vacations are to be scheduled during college/program breaks (winter break, spring break, between the end of spring semester and beginning of summer clinical, the end of summer clinical and the beginning of the fall semester).

Clinical Attendance-Record Keeping: (updated 5/15/17)

Attendance at all clinical education assignments is the RESPONSIBILITY OF EACH STUDENT.

- **Students must assure that all clinical hours are completed as assigned.**
- **Daily arrival and departure times are recorded in an online clinical management system (Trajecsys). Each student is responsible for clocking in and out using the online system at his or her clinical site.**
- **Students may not clock-in or out for other students.**
- **Falsifying attendance records is academic fraud and will be cause for removal from the program.**
- **Every day of attendance must be documented upon arrival and departure. If there is a late arrival or early departure during assigned clinical education, or any other departure from routine hours, a time exception must be filed through Trajecsys and validated by the clinical instructor.**
- **Failure to comply with any attendance policy will result in a clinical grade reduction.**
- **Unless authorized by a program faculty member you may not clock in or out with the use of a personal computer or cell phone. Clocking in and out must be done on a computer at your clinical facility. If there is no access to a computer at the scheduled time, the student will notify the CI or supervising technologist and sign in to the Trajecsys system as soon as possible. They will then file a time exception for the late clock in or clock out.**
- **Breaks are not to be recorded but students are required to take a 30 minute meal break if scheduled for more than six hours. (see breaks and lunches)**
- **If a student chooses to stay beyond their scheduled time, the student is to 'clock out' at the actual time they depart. If the 'clock-out' time is 10 minutes beyond their scheduled time, the student needs to file a time exception with an explanation as to the reason for staying late.**
- **Students are not allowed to acquire additional time beyond their scheduled hours. Only the clinical hours a student was scheduled will be applied towards their total clinical hours. It is understood students staying late to complete an exam are doing so as a professional courtesy and to show dedication and good work skills.**

Clinical Attendance-Tardiness (8/4/21)

Tardiness or late arrival is defined as not clocking into Trajecsyst at your scheduled time. There is no grace period for being late, however faculty may take into consideration inclement weather. The following will apply to tardiness:

If a student is late but is within 60 minutes (exactly-no exceptions) of their scheduled time, the late is counted as a strike. **3 strikes will count as an absence.** If the student has unused personal time, it will be used to satisfy the absence as excused. If the student does not have personal time, then the absence will be counted as unexcused and will incur the penalty for an unexcused absence.

If a student is late beyond 60 minutes but within 4 hours of their scheduled time (no exceptions) the late is considered a strike and the student will be deducted for half a personal day if available. If the student does not have a half day of personal time left, then a clinical grade deduction of 2.5% will be imposed.

If a student is late beyond 4 hours of their scheduled time (no exceptions) the late is considered a strike and the student will be deducted for a full personal day. If the student has used all of their personal time, then a clinical grade deduction of 5% will be imposed.

Students exceeding three late arrivals (strikes) will have the following additional consequence:

- **4th late arrival will result in a additional 5% deduction from their clinical grade and a verbal warning.**
- **5th late arrival will receive a 5% deduction and be placed on programmatic probation (written warning). As a result of being placed on probation, the student will have their clinical grade reduced one letter grade. Depending on the student's clinical grade prior to this deduction, this could result in the student failing the clinical course.**

When placed on programmatic probation required corrective actions which must be met during a specified time will be given in writing to the student. Failure to meet the conditions of probation will result in dismissal from the program.

Clinical Benchmarks (updated 8/15)

Clinical benchmarks are provided as a guide to help students understand what skills they should have achieved by the end of the clinical course/semester. Technologists use the benchmarks to assist in completing student evaluations. The amount of time a student has been at the site will be taken into consideration by College faculty and Clinical staff.

Clinical Checklists (updated 5/14/14)

Clinical checklists are designed to ensure specific objectives are accomplished during assigned rotations. To avoid clinical grade deductions, students must complete the assigned checklist prior to the deadline. **Some checklists are pre-requisites** for exam competency such as equipment, mobile, fluoro etc. and must be completed prior to attempting competency. If these checklists are not completed prior to the competency attempt, the competency will be not be valid and will be removed from the students ARRT record. Competency will need to be re-

established after the checklist is complete.

Second year students rotating through the various modalities such as CT, MR etc. also have assigned checklists. If there are questions about a checklist, talk with the site CI or program faculty member.

Clinical Conduct

Students enrolled in the program are expected to exhibit a manner of conduct and appearance that is reflective of the profession. If in the opinion of the Clinical Site and/or Program Faculty, professionalism is not maintained, by conduct or appearance, the program reserves the right to administer the disciplinary action necessary to bring the student's manner of conduct and/or appearance up to acceptable behavior. Failure to bring the conduct to acceptable levels or repeating unacceptable behaviors is grounds for program dismissal.

Clinical Disciplinary Policy/Procedure (Due Process) (updated 8/17/15)

Clinical Site/ College Policies

Students are expected to abide by college/clinical site policies. Violation of these policies will be handled administratively and may result in disciplinary action such as probation or dismissal. In certain situations, in which patient safety has been jeopardized immediate dismissal may be warranted.

Explanation of Disciplinary Policy/Procedure (Due Process)

The following shall be the procedure for disciplinary action of a student.

First offense or when issue identified. If the students behavior or appearance is not dangerous or offensive, then the student may be issued an oral reminder. There is no grade penalty for the first oral reminder. The need for subsequent reminders, for the same offense or new offenses, will result in a written warning (see below)

1. Oral Reminder:

- A. The Clinical Coordinator/Program Director will counsel the student for violation of any minor College or Clinical Site policies.
- B. The Program Director will document the incident, indicating an oral warning was given. The document will be signed by the Program Director and maintained in the student's file.

2. Written Warning (program probation): (rev 8/24)

If the unsatisfactory clinical behavior continues or is more severe the student will receive a program written warning (program probation).

- A. Required corrective action(s), which must be taken during a specified time period will be given in writing to the student.
- B. The students clinical grade will be lowered by one letter grade.

Program faculty will remain in close contact with the student and the Clinical Instructor during the warning time period. At the end of the stated time period, the student must have made

satisfactory improvement in the areas outlined by the written warning. If this has not occurred, the student may be dismissed from the program.

If a student receives a second written warning at any point within the program, they will be dismissed from the program.

Some examples (this list is not all inclusive) of conditions that will warrant a written warning:

- Unsatisfactory clinical performance.
- Breach of patient confidentiality (dependent on level of violation).
- Unethical conduct socially or professionally
- Repeated/excessive absences from clinical.
- Persistent negative attitudes toward constructive criticism and unwillingness to change.
- Repeat infractions on any Radiography program policy or Clinical site policies.
- Failure to meet clinical competency requirements.

3. Program Dismissal:

- A student will be dismissed from the program:
- If the student violates any program policy after receiving a written warning.
- If a student requires a second written warning.
- Falsification of clinical records.
- Endangering a patient, clinical staff or program faculty
- The Program Officials may immediately dismiss a student for any reason it deems justifiable (through documentation) due to the severity of the action.

Clinical Expectations

The following expectations are provided to assist students in understanding their responsibilities while in clinical:

- Arrive to clinical prepared and ready to start on time. A good rule of thumb is to arrive 10 minutes early so you are ready to go at the scheduled time.
- Do not sit down and wait for patients to come in or wait to be told, instead be assertive (not aggressive) and check exam schedules. Take an active role in your clinical.
- Adhere to 'room' (area) assignments-when your room/area is not busy, observe or join in on other exams.
- Find out what tech you are working with daily and if possible, stick with them for the day.
- Dress appropriately for your room assignment (ie surgery scrubs for surgery only)
- Keep your assigned room neat, organized, and clean after each patient. Take inventory of your linen and supplies daily, re-stock when necessary, and empty laundry bags near the end of your shift.
- When there is nothing going on in your assigned room, offer to practice positioning with someone. Other options include brushing up on equipment use

and reviewing procedures.

- Book studying for other classes should be kept to a minimum and only during 'down time'. Clinical time should be focused on learning and performing exams.
- Be part of the team-if someone needs help lifting, cleaning etc offer to help.
- Be respectful of staff and their differences and they will respect you.
- Leave on time but don't just disappear. Radiography exams don't end on your schedule. If you are in middle of exam, complete the exam. If the exam is going to be lengthy or you cannot stay over due to work, appointments, etc, please let tech know.
- You can stay beyond your scheduled time to complete an exam. You cannot stay beyond your scheduled time to accumulate "extra" clinical time. For example, you cannot stay over 30 minutes on one day of clinical and then leave 30 minutes early the next day.
- Do not pack up your belongings 10-15 minutes prior to the end of your clinical day and avoid doing any additional patients for that time but rather stay actively involved in patient exams until your clinical end time
- Keep in mind-your clinical time is a two year job interview!

Clinical Grade Deductions (Infractions)

Student's clinical grades are calculated based on the criteria listed in the course syllabus, however certain infractions can result in clinical percentage point reduction, a clinical grade reduction or dismissal from clinical/program. The severity will depend upon the type, seriousness, and frequency of the infraction.

The examples below are not all inclusive and the percentages are representative and may be cumulative. Faculty reserve the right to apply penalties based on the severity of the infraction and may be different from the examples stated below.

***EXAMPLES:**

½ % deduction per occurrence

- Failure to properly 'clock in or out' more than twice a semester
- Failure to sign/complete clinical checklists (1/2% per infraction)

2 % deduction per occurrence

- Failure to follow proper protocol in reporting an absence
- Failure to return radiation monitor by due date.
- Failure to follow proper protocol in schedule changes.
- Receiving a clinical comment sheet due to poor performance.
- Failure to submit required clinical paperwork/forms by assigned due date.

3 % deduction per occurrence

- Violation of College/Program/Clinical policies (minimum 3%).
- Failed re-competency attempt
- Violation of dress code

5 % deduction per occurrence or Grade reduction

- a. Incorrect marking of radiographic image
- b. Violation of student supervision policy (Direct and Indirect).
- c. Violation of repeat policy.
- d. Smoking in non-designated area.

***If there is a discrepancy between the clinical syllabus and the handbook, the syllabus overrules. This is only a partial list and other percentage points may be deducted at the discretion of the Program Director or Clinical Coordinator.**

CLINICAL INSTRUCTOR INFORMATION

Role

The CI's role is to act as a mentor, student advocate and supervisor of the radiography student's education in the clinical setting. Being an advocate means supporting the student through struggles in clinical, having the patience as he/she learns but also setting clear expectations. It also means treating the student with respect. It does NOT mean acting in a condescending manner or putting oneself on a pedestal. A good CI is admired and respected by the students.

Duties and Responsibilities

- Is knowledgeable of program goals.
- Understands the clinical objectives and clinical evaluation system
- Provides students with clinical instruction/supervision.
- Ensures student orientation to clinical site's policies and procedures to include safety procedures within the first clinical training week. Provide student access to written departmental policies/procedures.
- Performs clinical progress and competency evaluations for students.
- Evaluates students' clinical competence.
- Evaluate student performance and provides feedback to the student.
- Determines which technologists at clinical site may perform student competency & student evaluations
- Is a liaison between the department technologists and college.
- Is as a resource for the clinical staff regarding the clinical evaluation system.
- Is as a resource for students making yourself available and approachable to student during appropriate and reasonable hours
- Maintains competency in the professional discipline and in instructional and evaluation techniques through continuing professional development.
- Maintains current knowledge of program policies, procedures and student progress.
- Provides open lines of communication with Clinical Coordinator and Program Director.
- Enters competency records in the electronic online system (Trajecsys), approves student time records if needed, and completes/communicates with fellow technologists regarding student evaluations. In addition, he/she assists students in completing the following records: (or directs appropriate personnel)
 - *Equipment checklists
 - *Competency forms.
 - *Incident reports
- Assures student professionalism at all times during clinical education.
- Exhibits a positive professional attitude and communication skills toward students and the teaching process.

- Participates in continuing education to improve and maintain competence in evaluation and professional skills.
- Communicates with program officials regarding student progress, strengths, and weaknesses.
- Provides a positive role model for students of radiological science professions.
- Maintains confidentiality in accordance with program policy.
- Meets with individual students as needed to discuss student progress or concerns. May involve College Faculty if, in their judgment, they are needed.
- Facilitates proper student rotations in the clinical setting to achieve NWTC Program goals and objectives
- The Clinical Instructor should be asked first to perform a student competency. In his/her absence, a qualified or recognized technologist may perform the competency.
- Stays informed regarding program updates by reading email and Trajecsyst updates from the Clinical Coordinator and Program Director

Required Qualifications

- Desire to work with student and participate in their education
- Shall be ARRT credentialed and in good standing.
- Shall meet the criteria for the position as established by the sponsoring institution and/or accrediting agencies.
- Shall demonstrate competence in instructional and evaluation procedures and techniques.
- Shall document a minimum of 2 years full-time experience in the profession or as required by accreditation agencies.

Clinical Placement (updated 7/25)

After program acceptance and prior to starting clinical, students complete a clinical choice form that allows them to list up to three preferences for clinical site placement. Placement of the student is solely determined by college faculty using the information from the student choice form and site availability. There is no guarantee that a student will get one of their preferred sites. Students placed at permanent assignment sites will remain at their site for the program duration unless special circumstances justify a change while rotational assignment students will be asked to complete a clinical choice form prior to the beginning of each semester. Rotational students are then placed accordingly.

Clinical Placement- Health Policy Requirements (Revised 06/18)

Students in all Health Science, Public Safety, and the Electronics/Biomedical programs must comply with clinical site requirements specific to immunizations/vaccinations, TB testing, Caregiver background checks and drug screening. **Urine drug screening is required only at select sites in the NWTC district. Program faculty will notify students if this is a requirement for their clinical assignment.

- **Submission of all clinical required documentation is completed through www.viewpoint.com**

No student will be allowed to attend a clinical course until all documentation is

submitted and complete.

Clinical placement must be completed by the clinical coordinator far in advance of the student beginning clinical rotations, therefore, students must upload all required documentation to the viewpoint website by specific dates (dates will be sent out via email from the clinical coordinator). Failure to have all documents uploaded by the required date and time, will result in a delay in clinical placement and clinical attendance. Missed clinical days for this reason are unexcused absences. The clinical coordinator will verify that all clinical documentation has been completed through the viewpoint website.

VACCINATIONS-

Certain vaccinations are required to remain in the program and attend clinical. If a student wishes to request an exemption for a required vaccination, they need to speak with a program faculty member. The student may be referred to disability services. The student needs to provide substantial evidence to support the exemption.

TB Skin Test initial requirements.

- *** Students must have a current annual TB Skin Test while they are in a health program.
- Students cannot attend clinical with an expired TB skin test. Keep in mind that the 2 step skin test requires a couple of weeks time frame to complete. Being "in process" is not acceptable. The test must be completed before the current test period expires.

There must be documentation of one of the following:

- **Two 2-step TB Skin Test (minimum of 1 week apart, and no more than 3 weeks apart)**
- **Past 2 consecutive years annual tests**
- **If TB Skin Test is positive, a negative QuantiFERON Gold Blood Test or T-Spot Blood Test is required.**
- **If QuantiFERON Gold Blood Test or T-Spot Blood Test is positive, a clear Chest X-ray is required, along with the TB Questionnaire.**

Baseline:

- A two-step TB skin test (TST) or single blood assay test IGRA (QuantiFERON Gold or T-Spot).
- If a positive TB skin test, get a blood assay test or chest x-ray. If the blood assay is positive, then a clear chest x-ray is required.

For those with a history of TB disease or LTBI, an initial post-positive chest X-ray and symptom evaluation is required to rule out TB disease. Follow-up will be determined by the facility.

***Annual:**

- Completion of an Annual TB Questionnaire (available in the health portal)

- If you answered YES to any of the questions in the questionnaire form, you fall into a high-risk group and will be required to have a blood assay or chest x-ray
- TB education – This will be completed through the Great Green Bay Healthcare Alliance (GGBHA) before clinical as directed by your instructor

***N.E.W. Clinic at NWTC -Room HS211 (Health Sciences Center, 2nd floor)**

TB Skin Tests are available for a small fee through the N.E.W. Clinic at NWTC. The Clinic schedules appointments 24 hours in advance:

- a. **An appointment is needed to have the TB Skin Test administered on a Monday or Tuesday from 7:30 am - 12:00 pm or 1:00 - 5:00 pm.**
- b. **A second appointment is needed to have the test read (48 hours later) on a Wednesday or Thursday from 7:30 am - 12:00 pm or 1:00 - 5:00 pm.**
- c. **If a student is pregnant, they will need written approval from their physician before receiving the TB Skin Test at the N.E.W. Clinic.**
- d. **The clinic is closed on Fridays. N.E.W. Clinic at NWTC phone number: (920) 498-5436**

*Clinical site policy supersedes this policy and may have stricter guidelines related to annual TB testing. Students will not be accommodated for clinical placement based on site policy.

- **Students will be required to obtain an annual flu vaccine.** The dates for vaccination requirement will be communicated from program faculty but are usually available beginning in September. The deadline for vaccination will be communicated to the students by program faculty.
- **Students exhibiting signs and symptoms of illness may be removed from patient care or program activities at the discretion of the clinic site or program faculty. The student will be referred to disability services.** Students are responsible to immediately notify their instructor, clinical site (if the student is in clinical), and disability services personnel of any changes in their medical conditions/injuries prior to next scheduled clinical day. The student may be counseled to see a healthcare provider. Faculty/disability services may request documentation of the visit and/or healthcare provider clearance to return to class/clinical. For return to clinical, the clearance from the physician must be with “no restrictions!”
- **Incident reports must be filed at clinical agency (with a copy for the College) for any accident/incident involving a student and/or patient.** NWTC’s Injury/Illness Report must be completed if a student or faculty is injured at a clinical agency.
- **NWTC’s Injury/Illness Report must be completed for any accident which occurs on campus.**

Clinical -MRI Screening Policy

Prior to starting clinical, students are informed of the safety hazards of MRI and are required to complete a screening form that is reviewed by the Program Director. If the student's medical history prohibits the student from being in the MRI suite, the student and staff will be notified. Since a student's medical history can change, a second screening will be performed by the MRI staff prior to the beginning of the assigned rotation.

The student must be approved by the site's MRI technologist before they will be allowed to participate in the MRI clinical rotation.

Clinical -MRI Safety

Magnetic Resonance Imaging (MR) machines generate a very strong magnetic field within and surrounding the MR scanner. It is of utmost importance that the student remember that the **magnetic field is ALWAYS ON** and can be dangerous.

Magnetically susceptible (ferromagnetic) materials (steel/iron) even at a distance can become accelerated into the bore of the magnet with sufficient force to cause damage to equipment and/or serious injury to patients and personnel in its path. Therefore, great care is taken to prevent ferromagnetic objects from entering the MRI scanner room. It is the responsibility of the qualified MR department staff, especially the technologist, to control access to the scanner room.

As a Radiologic Technology program student, you are part of the Imaging Team and are obligated to follow all MRI safety policies and procedures.

- It is vital **all metallic objects** are removed before entering the MRI static magnetic field, including watches, jewelry, and items of clothing that have metallic threads or fasteners.
- **Unsecured metallic objects** (paper clips, scissors, pens, etc.) must be removed as they can be carried into the MRI suite can become projectiles that can cause injury or death.
- If you **have a bullet, shrapnel or similar metallic fragments** in your body there is a potential risk that it could change position possibly causing injury.
- The magnetic field of a scanner can damage an external hearing aid or cause a heart pacemaker to malfunction
- History of any surgical procedure that involves implanted electronic device(s) or any implant within/on our body you were not naturally born with will need to be reviewed prior to your clinical rotation.

Clinical Site Orientation (updated 5/19)

Due to federal and state guidelines that are required for health care workers, most sites require students to complete an orientation process prior to beginning clinical department activities. The orientation (or portions of it) may be in one of several methods: on-line, self-study packet, or in-person session.

The following content may be included in the orientation:

- **Mission and core values**
- **Patient/Family rights and responsibilities**
- **Patient Safety**

- **Infection Control**
- **HIPAA requirements**
- **Age-Specific Care**
- **Cultural Diversity**
- **Sexual Harassment**
- **Emergency codes**
- **Acceptable Abbreviations**
- **Hazardous Materials**

It is the student's responsibility to attend and complete any mandated clinical site orientation. The student may be required to provide a certificate of completion to the site or program faculty. Sites not offering self-study programs, or in-person orientation the student may need to meet with his/her site clinical instructor for education in these areas.

Prior to beginning his/her clinical rotation and on an annual basis, students are required to sign the College HIPAA compliance form which includes a statement regarding social media and HIPAA.

Students are also required to complete the site safety agreement checklist within two weeks of their first day at a clinical site.

Dress Code & Conduct

Student personal appearance while in clinical must reflect a professional image.

The following dress code and conduct policy is a result of compliance with our various clinical sites and in consideration of the patients.

DRESS CODE

- NWTC issued picture ID badge must always to be worn at clinical. It must be worn at upper chest level (pocket level) with the student name and photo visible. No pins or other decorations are allowed on the badge. The only item allowed on the badge is an NWCT issued flu shot sticker below the photo. If a lab coat or other program cover up is worn, the badge must be on the outermost garment. Some sites require an additional identification badge. This badge is provided by the site and must be returned upon completion of clinical. Failure to do so may result in a fee issued by the college.
- Radiation- monitoring device (provided by College and must be returned upon completion of program or if requested by program) is also to be worn at the level/upper area of uniform the uniform (on scrub collar)
-
- Hair must be clean, neatly styled and of natural hair color. If hair touches the collar, it must be pulled back and secured.
- Students are required to purchase scrub tops and bottoms and optional cover-ups/jackets for clinical from the following website:

<https://nwtc.mybrightsites.com/>

The first time you order from this site, you will need to create a new account (either before or during checkout). To order scrubs, choose your program on the blue bar on the web site.

The Health Sciences Division office (located on the third floor) has various size scrub tops/pants for you to try on to ensure a proper fit before ordering.

All scrub uniforms must provide a roomy fit. Pants must be full length and not drag on floor.

Flare bottom pants are not acceptable. If scrub pants are too long, they must be hemmed.

Having them rolled at the waist or ankle is not acceptable.

Scrub tops should adequately cover the student's cleavage/upper chest, upper arms, abdomen, and lower back. If there is any chance that one of these areas will show (even when reaching), the student must wear a T-shirt under their scrub top. The T-shirt can be either long or short sleeve and must be long enough to cover the abdomen and lower back (even when reaching).

The T-shirt must be solid in any of the following colors: gray, white, black or navy. No other colors are permitted. No statements or advertising are allowed on T-shirts.

A program approved jacket may be worn in patient care areas, in place of a lab coat. The jacket cannot take the place of a program scrub top. A program scrub top must still be worn under the jacket. When a jacket is worn, the student's clinical name badge must be attached with a retractable badge clip to the outside of the jacket at the upper level of the chest and on the left side of the jacket (attaching to the jacket's upper zipper, slightly below the collar area is acceptable). The attachment must ensure the student name and photo are always visible to patients and clinical staff. Attaching the badge to the jacket's hand pockets or at the waist level is not allowed.

- The use of lanyards for any purpose during clinical is not acceptable
- Undergarments (underwear, t-shirts and bras) must be worn and must not be visible through the scrub uniform.
- Shoes must be athletic type in white, gray, black or navy with minimal enhancements, stripes, or lettering. No neon colors. No open toe or heels, and no clogs or crocs.
- Visible body piercing jewelry is not permitted and must be removed before starting a clinical shift. Some examples that are not acceptable are tongue, eyebrows, lips or any other visible area outside of the ears** and nose***.
***nose piercings. A small single stud nose piercing may either be removed or must be covered during clinical, all other nose piercings (hoops, hooks, bars, ect) must be removed.
- **Ear piercings may be worn during clinical with the following restrictions. For safety and infection control, earrings are limited to small button posts or single studs one per ear located in the ear lobe.

No other jewelry is allowed. I.e. Bracelets, necklaces (including Lanyards) are NOT to be worn.

- Wedding bands and rings with minimal stones may be worn but are limited to one ring per hand. Please keep in mind that at various times during your clinical education, you will be required to wear exam gloves. Rings may interfere with the proper donning and wearing of these gloves and may cause the gloves to tear. Therefore, to be prudent, the

wearing of any rings that may cause interference with the proper wearing of gloves should be avoided. While assigned to surgical rotation, the wearing of any ring that protrudes above the fingers is not allowed

Students are legally responsible and will be penalized for any injury to patients that occurs due to jewelry or fingernails (see hygiene policy).

- Wrist watches must fit comfortably and be of modest size. No smart watches allowed in clinical. During surgery rotations any jewelry that may fall off must be removed.
- All visible tattoos must be covered during clinical by clothing, make up, or bandage.
- Dress code & appearance should be conservative in nature. Extreme perfumes, jewelry, make-up, body adornment and/or hair coloring/styles are not permitted.

When attending clinical, the scrub uniform and cover up (if used) must be clean, neat, and in good repair (not excessively faded, has holes or worn areas). Students are responsible for laundering/washing their own scrub uniforms. If the uniform looks excessively wrinkled, the student is encouraged to iron/press the uniform into a clean, sharp, professional image.

Any violation of dress code will result in clinical point reduction of 1% per infraction. Clinical sites and/or faculty have the right to ask a student to leave the clinic site if the student's attire is inappropriate or unclean. If this occurs, the student will be placed on clinical probation.

PERSONAL HYGIENE:

- **Frequent hand washing is strongly encouraged to prevent the spread of infection.**
- **Cuts should be covered for infection control reasons.**
- Beards and mustaches may be worn but must be trimmed and neat.
- Fingernails must be clean and no longer than 1/8 inch so as not to cause injury to patients. (Not to exceed one-fourth of an inch beyond the fingertip) Artificial nails are prohibited. Nail polish is NOT allowed for infection control purposes. (may chip and fall off)
- Perfumes, colognes or aftershaves are NOT permitted. Most hospitals have a policy requiring individuals with direct patient contact to be free of perfumes and colognes.
- ✓ Good personal hygiene should be such that the student is free from offensive body odors.
- ✓ May not smell of cigarette, cigar or pipe smoke
- ✓ Gum chewing not allowed in the radiography lab or during clinical time.

CONDUCT:

- Students enrolled in the program are expected to exhibit a manner of conduct and appearance that is reflective of the profession.

If in the opinion of the Clinical Site and/or Program Faculty, professionalism is not maintained, either via conduct or appearance, the College reserves the right to administer disciplinary action necessary to bring the student's manner of conduct and/or appearance up to acceptable behavior.

Dress Code in Surgery (5/14/14)

Students assigned to surgery are required to wear hospital issued surgical scrubs for the purpose of minimizing infection in the surgical suite. Students not assigned to surgery or a rotation that warrants the wearing of hospital issued scrubs and is dressed in hospital issued surgical scrubs is in violation of the dress code and will receive clinical point deductions. Continued violation of the dress code will result in a grade reduction and possible dismissal. (see Dress Code)

The scrubs are the property of the hospital and any removal from the hospital is considered theft. Theft is a violation of the program's conduct policy and if proven guilty would result in program dismissal.

If in the opinion of the Clinical Site and/or Program Faculty, professionalism is not maintained, either via conduct or appearance, the College reserves the right to administer disciplinary action necessary to bring the student's manner of conduct and/or appearance up to acceptable behavior.

Technical Standards

The Americans with Disabilities Act of 1990 (42 U.S.C. § 12101, et. Seq.) and Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794) prohibits discrimination of persons because of a disability. In keeping with these laws, colleges of the Wisconsin Technical College System make every effort to insure a quality education for students. The purpose of this document is to provide students interested in enrolling in the Radiography program of the functional abilities required of a student in a Radiography program.

Radiography is a physically and emotionally challenging profession. In order to meet program accreditation standards and Radiographer certification requirements, and the safety of the student, patients, and other health care partners during the course of the Radiography program, students must demonstrate the ability to perform all the functions listed below safely, reliably, effectively, and efficiently.

Students are required to meet all functional abilities at all times while in the program. If at any time there is a change in which functional abilities cannot be met, students will not be allowed to participate in labs, clinical experiences, and possibly classroom activities (depending on the nature of the change). The student will need to work with the Program faculty/ Department Dean and/or Associate Dean to develop a completion plan.

Functional Ability Categories & Representative Activities/Attributes for students in the Radiography Program:

Students enrolled in NWTC Radiography program should be able to meet the established technical standards identified below with or without reasonable accommodation(s). The technical standards for the Radiography program are representative of those found in the radiography profession.

Area	Functions (not inclusive) with or without reasonable accommodations
Physical Skills	<ul style="list-style-type: none"> • Bend, stretch, twist, reach with your body above shoulders, below waist, and in front • Transfer and position patients applying principles of safe body mechanics • Provide direct patient daily cares (feeding, bathing, etc.) • Manipulate, assemble, and move equipment • Document patient condition • Maintain physical activity for several hours
Sensory Skills	<ul style="list-style-type: none"> • Detect differences in body and environmental odors • Understand and respond to patient requests and needs • Detect environmental hazards • Detect warning signals on equipment displays • Detect subtle changes or differences (e.g. pulse, rash, temperature)
Communication Skills	<ol style="list-style-type: none"> 1. Speak, read, and write English 2. Listen and comprehend spoken and written English 3. Collaborate with others 4. Respond to others in an accepting and respectful manner
Critical Thinking Skills	<ol style="list-style-type: none"> 5. Apply knowledge and skills learned in the classroom to a clinical setting 6. Comprehend and follow instructions 7. Follow processes from start to finish; sequence information 8. Adapt decisions based on new information 9. Maintain focus in an environment with distractions 10. Making safe judgements
Professionalism	<ol style="list-style-type: none"> 11. Establish a professional working relationship with the health care team, peers, instructors, patients, and families 12. Demonstrate positive interpersonal skills 13. Demonstrate impulse control and professional level of maturity 14. Maintain appropriate boundaries in relationships with patients and peers 15. Handle demanding and stressful situations 16. Maintain confidential health care information (including by refraining from posting any confidential patient information on social media)
Safety	<ol style="list-style-type: none"> 17. Wear personal protective equipment for safe practices (gloves, masks, eyewear, gown) 18. Tolerate heat and humidity 19. Work in an environment that may contain common allergens 20. Adhere to safety/emergency protocols 21. Recognize and respond to hazardous conditions 22. Maintain health care requirements

Grievance Policy (rev 6/2019)

Should a student complaint arise about some aspect of the program, the student's first step would be to contact the Associate Dean of Allied health (Selena Zimmerman). If the complaint is not resolved at that point, the student's next step would be to contact the Dean of Health Sciences and Education (Brian Krough). If the complaint is still unresolved, then based on the nature of the complaint, the student has two options:

- **Option 1**, for complaints about a grade, the student would use the college grievance process as outlined in the Student Planner and Handbook under Student Academic Grievance Procedure.
- **Option 2**, for complaints of the program's compliance with accreditation standards, the student should contact the Joint Review Committee on Education in Radiologic Technology (JRCERT). Their contact information can be found on pages 9- **11** of this handbook.

Holidays/Off Hours and Clinical Education

Students are assigned during day, evening, weekend and evening hours though-out the program. Off-hour rotations help the student gain independence and speed in the clinical setting. Learning objectives are provided prior to scheduling off-hour rotations. The College supervision policies applies to off-hour and weekend rotations as they would day rotations. (see student supervision policy)

Students will NOT be assigned to clinical during any major holidays, student breaks or when class is not in session. (New Year's Day, Memorial Day, 4th of July, Labor Day, Thanksgiving Day, Christmas Eve and Christmas Day)

Image Identification & Image Quality Assessment (rev 8/8/18)

Students will use their own initialed RIGHT and LEFT markers to properly identify patient anatomy. These markers are to be used during clinical when positioning the patient and on all competency assessments. Students **MUST** use their own lead markers when attempting competency otherwise the attempt is invalid. Under no circumstances will a student lend their marker to anyone or borrow anyone else's marker. **It is highly recommended students purchase 2 sets of markers.**

All students must receive approval from a registered radiologic technologist on the quality of his/her images before they are sent to the radiologist/physician to be read. The student must record his/her own initials manually on the requisition and/or electronically in the computer system, as well as the technologist who has approved the radiograph. **A qualified radiographer**

must provide explanation and be present whenever unsatisfactory images/radiographs are repeated!!

Image identification must be recorded permanently on all images. Students should follow the clinical sites policy in regard to lead marker placement. Markers should never be placed directly on a patient's skin. Lead markers should be used and located in an area on the image that does not obscure radiographic detail. Proper identification is imperative.

If the resultant image lacks markings, they must be computer generated (annotated). This is not considered as permanently marking an image. The annotated marker can be removed from the data set at any point. A lead marker in the image cannot. Correct annotation is extremely critical. Be aware some facilities may require the image to be repeated if proper lead markers are not on the initial image upon exposure.

Mismarking Images (Incorrectly marked image Policy)

The program has a zero tolerance policy regarding incorrect marking of images. If a student creates an image that demonstrates the lead marker on the wrong side of the patients anatomy or (in the absence of a lead marker in the image) places an electronic marker, in the image, on the wrong side of the patient anatomy; regardless of when the mistake is caught (before or after entry into the PACS system) the student will receive a reduction in their clinical grade. Based on the time in the program the following penalties will be applied.

During clinicals 1, 2, and 3. The student will be required to meet with program faculty, will receive a verbal warning, will perform remediation on correct marker placement and will receive a 3% grade reduction from the final clinical grade.

Should a student mark an image incorrectly a second time (does not have to be in the same clinical), the student will receive the same penalty as listed in clinical 4, 5, and 6 below.

During clinicals 4, 5, and 6. The student will be required to meet with program faculty, will perform remediation on correct marker placement, will receive a written warning (placed on program probation), and will receive a clinical grade reduction (see written warning) from the final clinical grade.

During clinicals 4, 5, and 6, should a student mark an image incorrectly a second time (does not have to be in the same clinical), the student will meet with program faculty, will receive a written warning (placed on program probation, and will have the clinical grade reduced one full grade.

A third infraction regardless of clinical occurrence will result in program dismissal.

Leave of Absence/Missed Clinical (rev 6/18/19)

This policy is applicable to students that have incurred an injury, illness, or an unforeseen circumstance while in the program and are unable to participate in their clinical educational experience. Although each situation will be treated on a case by case basis with input from NWTC Accommodations services, the following guidelines apply:

1. The student must contact the Program Director or Clinical Coordinator regarding the injury, illness or unforeseen circumstance. In the event of injury or illness, the ability to attend clinical will be based on the conditions of the student's medical provider and the clinical site.
2. The student must provide written clearance from the health care provider for return to clinical either without restriction or in which reasonable accommodations can be made.
3. If the injury or illness requires an extended time period from clinical that would ultimately cause their clinical (or any other) course grade to drop below 80% for the semester, the student will be encouraged to request a leave of absence from the program.

Requests for a Leave of Absence must be made in writing to the Program Director and can be made for the following reasons:

- Maternity leave – A maternity leave may be granted based on student need or wishes. Students are required to provide documentation of the leave status from their attending physician.
- Medical leave – A medical leave will be granted based on the recommendations of the attending physician. A release from the attending physician must be given to the program director upon return to the program.
- Family/Personal leave – may be granted due to family illness or emergencies.
- Military leave – Students required to serve in the Armed Forces must present their military orders at least six weeks in advance of their anticipated departure and return dates to the Program Director.

If a leave of absence is granted, it is good for 1 year from the date the leave was granted. If the student does not return within one year, they will forfeit their spot and will have to apply for program reentry. Specific questions should be brought to the Program Director or Associate Dean of Health.

Licensure-Eligibility Requirements-State of Wisconsin

Wisconsin requires a state license, as do many other states, in addition to ARRT certification to perform Radiographic procedures. Wisconsin has 2 types of licensure; full licensure and limited licensure. Full licensure allows the Radiographer to perform all radiographic procedures. The limited license, referred to as a Limited X-ray Machine Operator Permit, allows the Radiographer to only perform certain procedures based on education and testing. By completing the Radiography Program and passing the full ARRT certification exam, you will be eligible for the full state license.

Missing in Action — Student Cannot be Located during Clinical Education (updated 5/15/14)

The following are possible consequences:

Deduction of 4 hours from a personal day however if there are no personal days available, -a grade reduction of 2.5% will be deducted from the total score for that clinical education course grade. Continued abuse would result in probation, recommendation for withdrawal from the program or program dismissal.

Modality Rotations (new 5/2019)

To familiarize students with the clinical indications, general imaging considerations and general knowledge of other modalities in medical imaging, students will be assigned to limited rotations in MRI, Nuclear Medicine and Ultrasound.

Students who have completed their ARRT competency requirements may request additional time in the above areas or may request observation in Radiation Therapy, Interventional imaging, Cardiac Cath Lab or Mammography.

Mammography Student Rotation Policy (new 5/2019)

All students upon completion of their ARRT competency requirements will be offered the opportunity to participate in a mammography rotation. If requested, the program will make every effort to place a male student in a mammography clinical rotation; however, the program is not in a position to override clinical site policies that restrict clinical experiences in mammography to female students. Male students are advised that placement in a mammography rotation is not guaranteed and is subject to the availability of a clinical setting that allows males to participate in mammographic imaging procedures. Male students must be aware that if they request a mammography rotation it is likely this request will be denied by the program's current clinical education sites. In addition, should a male be granted a rotation in mammography, the patient(s) has the right to refuse having a male present during their examination. The program will not deny female students the opportunity to participate in mammography rotations if clinical settings are not available to provide the same opportunity to male students.

The program's policy regarding student clinical rotations in mammography is based on the sound rationale presented in a position statement on student mammography clinical rotations adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its April 2016 meeting. The JRCERT position statement regarding mammography rotations is available on the JRCERT Web site, www.jrcert.org. Programs & Faculty, Program Resources.

Patient Bill of Rights (5/15/14) (Reference: www.aha.org))

Another person chosen by the patient can exercise these rights on the patient's behalf. A proxy decision maker can exercise these rights if the patient lacks decision-making ability, is legally incompetent, or is a minor.

- **The patient has the right to considerate and respectful care.**

- The patient has the right to and is encouraged to obtain from doctors and other direct caregivers appropriate, current, and understandable information about diagnosis, treatment, and prognosis. Except in emergencies when the patient lacks decision-making ability and the need for treatment is urgent, the patient is entitled to the chance to discuss and request information about the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their risks and benefits. Patients have the right to know the identity of doctors, nurses, and others involved in their care, as well as when those involved are students, patients, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.
- **The patient has the right to make decisions about the plan of care before and during treatment. The patient has the right to refuse a recommended treatment or plan of care to the extent allowed by law and hospital policy and to be informed of the medical consequences of this action. In case of refusal, the patient is entitled to other appropriate care and services that the hospital provides or transfers to another hospital. The hospital should notify patients of any policy that might affect patient choice within the institution.**
- The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. Health care institutions must tell patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.
- **The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.**
- The patient has the right to expect that all communications and records related to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will stress the confidentiality of this information when it releases it to any other parties entitled to review information in these records.
- **The patient has the right to review the records about his/her care and to have the information explained or interpreted as necessary, except when restricted by law.**
- The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to a patient's request for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permitted, or when a patient has requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

- **The patient has the right to ask and be informed of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.**
- The patient has the right to consent to or decline to take part in research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who declines to take part in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.
- **The patient has the right to expect reasonable continuity of care when appropriate and to be informed by doctors and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.**
- The patient has the right to be informed of hospital policies and practices that relate to patient care treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods

Patient Records (HIPAA)

Confidentiality of Protected Health Information (HIPAA)

The clinical experience requires student to be exposed to protected health information. Protected health information is all individually identifiable information that is transmitted or maintained in any other form or medium including social media. This relates to information about past, present, and future:

- Physical and mental health;
- Provision of health care to the patient; and
- Payment for the patient's health care.

This information will not be shared in any form or medium, including written, verbal or electronic methods, with anyone other than those who are directly responsible for the patient's care and treatment. Patient information will be discussed only in patient care areas, and with acute awareness of who is within hearing range. Records may not be photocopied for any reason. While students may write down essential information for the preparation and care of clients; information that identifies a client in any way or may provide a reasonable basis to identify an individual MAY NOT be taken from the clinical site. Students are to remove any patient data/ID from radiographs or CD's brought in to class for educational purposes. Patient identifiers include, but are not limited to:

- Name
- Medical record number or visit number
- Dates, including birth date, date of admission and date of discharge

Violation of this policy will result in:

- Notification of the privacy officer of the institution from which the disclosure occurred;
- Disciplinary action;
- Possible clinical and /or disciplinary probation, dismissal, or legal consequences.

Pregnancy Policy –Declaration of Pregnancy (Updated 8/10/16)

Students who become pregnant while in the NWTC Radiography program have the option to voluntarily “declare” their pregnancy at any time. If a student chooses to declare the pregnancy, the following steps should be followed:

Submit in writing, proof of pregnancy by a physician with the anticipated due date to the NWTC Clinical Coordinator or College Faculty.

Submit a release of responsibility statement from the physician/health care provider to the NWTC Clinical Coordinator or College Faculty in order to continue in lecture, clinical, and lab.

A student who becomes pregnant while in the NWTC Radiography program is strongly encouraged to contact the NWTC Accommodations Office to connect with College services and resources to further assist with their success. The NWTC Accommodations Office is located in room SC229 or (920) 498-6904.

Once a pregnancy is declared, the student will have 2 options:

1. CONTINUE IN PROGRAM

Students need to successfully complete all didactic and clinical components of the program without restrictions or special conditions, being careful not to exceed the 0.5 rem exposure. If the student’s fetal badge reaches the 0.5 rem exposure, the student will be required to be removed from clinical and may be required to ‘re-enter’ the program to complete the remaining clinical and didactic course work.

The student will:

- A. Be considered in the category of a ‘declared pregnant worker’ and will be required to read and follow the US Nuclear Regulatory Guide 8.13 entitled “Instructions concerning Prenatal Radiation Exposure”. Consultation with program officials would also include methods to reduce radiation exposure during procedures (time, distance & shielding) and an opportunity for the student to ask questions.**
 - B. Be issued a fetal monitoring device which would be worn at the level of the abdomen and worn throughout the entire gestation period while in clinical. The radiation to the fetus must not exceed 0.5 rems of radiation. The student is responsible for returning badges promptly upon receipt of the new monthly badge to help ensure accurate readings. A record of badge readings for the gestation will be kept.**
- A student that has declared a pregnancy has the right to withdraw the declaration of pregnancy at any time by submitting the request to withdraw the pregnancy declaration, in writing, to the NWTC Clinical Coordinator or Program Director.**
 - If the declaration of pregnancy is withdrawn, the pregnancy will no longer be recognized.**
 - In the absence of a voluntary declaration of pregnancy, a student will not be considered pregnant**
 - Certain aspects of the NWTC radiography curriculum may be potentially hazardous to the embryo or fetus. (For a complete copy of the Wisconsin State Laws about Radiation**

Protection (including) Pregnancy please refer to Wisconsin Radiation Protection Code HFS 157 <https://www.dhs.wisconsin.gov/>

- It is recommended that declaration of pregnancy be done as soon as possible. The embryo or fetus is most sensitive to radiation during the first three months of pregnancy.
- Students are advised to consider the physical requirements of the program if a change in health status would limit their ability to meet program requirements.
- While in clinical, as always, the student, should observe and follow the basic rules of radiation safety; reducing the time spent in a radiation area, increasing the distance from the source of radiation, and shielding.

2. REQUEST A LEAVE OF ABSENCE

Students may request a leave of absence. Requests for a leave of absence must be made in writing to the Program Director. Students unable to progress in the radiography program due to a leave of absence may request program re-entry according to the "Program Readmission" policy. Specific questions should be brought to the program faculty.

Pregnancy Policy -Declaration of Pregnancy Form

Pregnancy Policy -Declaration of Pregnancy Form	
This form is to be completed as soon as possible when declaring pregnancy and given to the Clinical Coordinator or if unavailable, the Program Director.	
TO: _____ (Write in Faculty Name/Position/Department)	
In accordance with the Wisconsin Department of Health and Family Services Administrative Code at HFS 157.22(8) "Dose to an Embryo/Fetus," I am declaring that I am pregnant. I believe that I became pregnant in _____. (month and year)	
and my due date is: _____	
I understand the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 5mSv (500mrem) as measured by a fetal radiation monitor.	
_____ (Student Signature)	_____ (Date)
_____ (Please print your name)	
_____ (Faculty Signature)	_____ (Date)

Pregnancy Policy –Withdrawal of Declaration of Pregnancy Form

This form is to be completed when a student has previously declared a pregnancy and now is withdrawing the declaration. Please complete and give to the Clinical Coordinator or if unavailable, the Program Director.

TO: _____
(Write in Faculty Name/Position/Department)

I _____ am withdrawing my declaration of pregnancy. I understand in doing so I will no longer be issued a fetal monitor and will no longer have monthly radiation reports.

(Student Signature)

(Date)

(Please print your name)

(Faculty Signature)

(Date)

The following radiation safety practices/rules have been established for the protection of the patient and personnel from ionizing radiation during radiology clinical education. These rules are a combination of State and Federal regulations and/or laws and additional guidelines in the use of ionizing radiation. These rules are mandatory, and any exception must be reported to program officials immediately. All students shall practice appropriate radiation safety procedures in protecting themselves, their patients and other personnel from unnecessary exposure.

- Understand and apply the cardinal principles of radiation control (time, distance and shielding). Do not allow unfamiliarity to result in poor radiation procedures. Never stand in the primary beam.
- Wear protective apparel to include a lead apron and thyroid collar when involved in fluoroscopy and during mobile procedures (this includes portables). Stand behind a protective barrier for all other exams.
- Always wear the assigned radiation monitor (supplied by NWTC) positioned outside the lead apron at collar level. All radiation workers (students included) may not exceed the annual occupational dose limit of 5 Rems or 5,000 mRems or 1.25 rems (1250 mRems)

per quarter. All personnel dosimetry reports will be reviewed by the Radiography Program Director at NWTC. Personnel dosimetry reports over 150 mRems per three month period will require a conference with College faculty and if needed the Clinical Site Radiology Manager to determine the cause and methods to decrease occupational exposure. If the exposure exceeds the occupational dose limitation he/she is required to be removed from any clinical areas in which they may be exposed and follow recommendation by State. Carelessness in radiation protection will not be tolerated and repeated offenses subject the student to sanctions up to and including dismissal from the Program.

- Student monitors will be read every three months (quarterly) or sooner at faculty discretion. The radiation report will be emailed to the student with the expectation the student confirms it has been received and reviewed by email acknowledgement. Any questions regarding the report should be directed to the Program Director. Students may request a monitor reading at any time.
- Radiation monitors are NOT to be worn outside of the hospital/clinic.
- Students may not be in clinical without their radiation monitor. If a student forgets their monitor, he/she must leave clinical to retrieve it. If a monitor is lost the student may not attend clinical until a replacement monitor is provided.
Any missed clinical time will result in loss of personal time or clinical point deduction(s). Students are fiscally responsible for the replacement cost of a lost monitor.
- If a student monitor breaks he/she needs to report it as soon as possible to college faculty for replacement.
- Students employed as tech aids are prohibited from using their college issued monitor for work purposes and must be issued a separate monitor from their place of employment.
- All female patients within child-bearing age need to be asked if there is any chance they could be pregnant before taking their X-rays. If a patient responds they are pregnant contact clinical site officials before proceeding with the exam.
- Use gonadal shielding on all persons, and breast shielding when it will not interfere with the area of interest.
- Always collimate to the smallest field size appropriate for the examination.

Holding Patients and or Image Receptors during Exposure (updated 8/10/16)

In accordance with the National Council on Radiation Protection, Report #48, "no person shall be employed specifically to hold patients, nor should members of the Radiology Department, who are classified as radiation workers, be asked to do so. Technologists may hold patients at their own discretion however **students are not allowed to hold or restrain the patient or the image receptor during an exposure.**

In instances where patient restraint or image receptor immobilization is needed, the student is encouraged to employ restraining devices such as tape, sandbags, sheets, immobilization boards or Pigg-O-Stat. In the event these devices fail, students are encouraged to solicit assistance from non-radiology workers such as aides, orderlies, nurses, clerical staff or members of the patient's family. Such persons shall be provided with a protective apron and gloves and be instructed to position themselves away from the primary beam. Females should always be asked if pregnant

before being asked to hold. If their response is yes, another non-pregnant person should be used.

Student Employment at their Clinical Site

Students employed at a clinical site **must separate work from clinical**. The proper nametag and scrub uniform must be worn indicating whether they are a student or an employee. The NWTC name tag and scrub uniform must **NOT** be worn when acting as an employee. In addition, as stated in the section on radiation protection, the NWTC radiation badge must not be worn when working as an employee of a site. A separate badge will be issued by the employer to be used when working for the department.

All employee-required activities (orientation etc) must be completed outside of clinical time. Students working in a 'student aid' capacity may not perform competencies or record clinical hours during their work time. At no time do students "replace" or are to be used as a substitute for staff when scheduled for clinical education courses.

Any student 'caught' recording clinical hours or performing clinical competencies in any other capacity than scheduled clinical hours will be found in violation of the Academic and Clinical Integrity policy and will be dismissed from the program.

The state of Wisconsin requires anyone that uses ionizing radiation to produce diagnostic images to have a state issued license. Students hired in imaging departments cannot take x-ray images as part of their duties or to assist a technologist. Any student caught taking images outside of assigned clinic hours, will be immediately removed from the program and reported to the state of Wisconsin and the ARRT and will become ineligible to take the national certification exam.

Student Injury or Incident While in Clinical Area (Updated 8/14/13)

Incident reports must be filed at the clinical site (with a copy for the College) for any accident/incident involving a student and/or patient, and NWTC's Injury/Illness Report must be completed if a student or faculty is injured at a clinical site.

Students injured at clinical must notify college faculty within the clinical rotation shift so together they can complete the electronic /online Injury/Illness report.

If an injury is minor and doesn't warrant being seen by a nurse or physician, the student can return to the clinical site.

If the injury is considered serious and/or requires a consultation with health care provider, the student's return to clinical will be based on the advice of the health care provider.

NWTC's Injury/Illness Report must be completed for any accident which occurs on campus

Student Responsibilities (updated 8/14/13)

Each student must be adequately prepared for scheduled class, lab, and clinical rotation time. The student may be dismissed from clinical if inadequately prepared, or for failure to conform to policies in this handbook relating to conduct and patient care.

All students shall use personalized lead markers on radiographs during their clinical education. Initialized lead markers must be purchased by each student at the beginning of their clinical experience and before any competency exams can be performed. A student who loses their markers must purchase replacement markers as soon as possible. **Students will NOT be permitted to perform any competency exams until the marker is replaced or found.**

The student is required to provide reliable transportation for class and clinical!!

All students are required to purchase the items needed to follow the dress code policy for the College.

Studying While at Clinical (new 5/14/14)

Studying for classes while at clinical is allowed but should be kept to a minimum and only during 'down time'. Clinical time should be focused on learning and performing exams. The clinical site reserves the right to determine where students can study and restrict or prohibit studying if it interferes with student clinical participation.

Venipuncture (revised 8/8/18)

Venipuncture is included in one of the core radiography courses. Students MAY NOT perform venipuncture or inject patients at the clinical site unless the Clinical Instructor at the assigned clinical site provides authorization. A venipuncture authorization form must be signed by the CI before any venipuncture is performed and given to college faculty. Failure to do so will warrant program probation or dismissal.

NWTC Venipuncture Authorization	
I, _____	give _____ permission to perform
CI name	student name
venipuncture for contrast injection on patients undergoing CT exams.	
I understand I am legally responsible for the student and accept the risks that may incur as a result of the student's actions. I also verify that I have checked my institution's policy and in permitting the student to perform venipuncture, I am in accordance with the institution's policy and will provide the a copy of the policy as needed.	
Technologist's signature _____	

Name Printed _____ Date: _____

IV. Program Policies & Important Additional Information

Academic & Clinical Integrity

Professional accountability and integrity are a part of a commitment to self-responsibility. In adherence to a professional code of ethics and professional standards, radiology demands professional integrity and accountability. Accordingly, the Radiography Program cannot tolerate instances of academic or clinical dishonesty.

Students are expected to adhere to the College's policy on Academic Integrity: Plagiarism, Collusion & Cheating; as stated in the student handbook. Academic dishonesty represents active and /or passive participation in giving information, taking information, allowing information to be given, and allowing information to be taken from an unauthorized or unacknowledged source in a situation where individual performance is required.

Academic dishonesty during Clinical includes but is not limited to: falsification of student or patient records, obtaining competency exams during non-clinical hours, lack of truthfulness in repeating of exams and failure to abide by the ARRT code of conduct.

Violation of this policy will result in disciplinary action.

Academic Program Advisor

Your academic advisor will help you coordinate your learning experiences and assist you in your progress toward your educational goals.

As a Radiography Program major, your advisor is Tim Yandila. Tim's contact information can be found at the beginning of this handbook.

Advisory Committee

The Radiography Program's Advisory Committee is composed of the program director, program faculty, radiology administrators, clinical instructors, program alumni, and technologists from program clinic sites.

Two meetings are held each year. One meeting is during the fall semester and the other is in the spring semester.

One of the functions of the advisory committee is to review and comment on the program's assessment plan and outcomes; as well as, comment on proposed changes to the program.

Student input to the advisory committee is welcomed. One (1) first year and one (1) second year student are invited to participate on the advisory committee. If you are interested in participating on the advisory committee, see the program director. If selected for the advisory committee, it is expected that you will remain a member for your 2 years in the program.

Awards-Outstanding Student (updated 5/15/14)

Every year the college recognizes outstanding students from each program of study. For the radiography program faculty select a student based on the criteria determined by the college which includes; high academics, motivation, attitude, and clinical performance. The student selected is honored at the Annual Awards Banquet.

Awards-Outstanding Clinical (JRCERT) (updated 5/15/14)

Every year, the radiography faculty recognizes one (1) student for outstanding clinical performance. The student is given a certificate provided by the JRCERT.

Career Services (updated 5/15/14)

The Career Services Center is a career exploration and job seeking resource serving all residents of the NWTC District. The Center serves prospective students, current students, and community members.

Career assessments are available at no charge to customers. The Center, located in SC235 on the Green Bay campus, also provides resume and cover letter reviews and mock interviews.

Career advising is available by contacting the Career Services Center at (920) 498-6250. An interpretation of the assessment will be assigned to a career professional.

Program Grading system: The grading system used by all health programs at NWTC is different than you may have experienced in general studies courses.

Percentage Grade	93-100 = A
	85-92.99 = B
	80-84.99 = C*
	70-79.99 = D
	69.99 or less = F

* C (80%) is the minimum passing grade to continue in the program. A student earning a "D" grade will not be allowed to continue in the program. (see program re-entry policy)

Graduation Requirements/Program Outcomes

Students are eligible for graduation when they have fulfilled the following requirements:

1. Completion of all clinical and didactic curriculum requirements to include core radiography and general education courses.
2. Completion of all didactic courses with a grade of not less than 80%
3. Completion of clinical courses with a grade of not less than 80%.
4. Demonstration of Program Outcomes
5. Fulfillment of all financial obligations to the institution.

Jury Duty (updated 6/2019)

Students called for jury duty may want to ask the court to delay their scheduled jury duty to a

time that fits within the college break time. If this is not possible, the student should contact the Program Director and/or Clinical Coordinator within 48 hours to discuss the details. Students will also need to contact instructors of any other NWTC courses in which they are enrolled. Students will not be penalized for any radiography homework or radiography class exams that are missed while serving on jury duty, however, when the student returns to class, all work must be made up in a reasonable amount of time. It is expected if a student is called for a half-day service the student report to class or clinical for the rest of the day. The student should meet with each faculty to discuss the deadlines for make-up work. Each case will be reviewed individually based

on the length of time student missed class and/or clinical. If a student incurs an extended absence while on jury duty, refer to program Leave of Absence policy.

Lab Safety/ Rules for procedures lab practice (new 6/2019)

Prior to the beginning of lab practice sessions, the students and instructors will discuss proper lab safety. These safety rules are also posted in the lab.

Both radiographic rooms are energized when the generator lock is open. Under no circumstances will any student be allowed to make an exposure without a registered technologist (faculty) present. During phantom image exposures, students must remain behind lead wall barriers.

The following rules apply to all students:

- **All exposures on practice phantoms will be done with faculty approval**
- **All exposures made on practice phantoms will be made with faculty supervision.**
- **Under no circumstances will any radiation exposure be made on any NWTC employee, student or any visitor to the x-ray lab.**
- **Students must be wearing their assigned radiation monitor is exposures are made on phantoms.**
- **Prior to making an exposure the student operating the equipment/rotor will confirm that no one is in the X-ray room.**
- **All student(s) must be entirely inside the control booth (behind the secondary barrier) before any exposure is made.**
- **The door to the radiographic room must be completely closed prior to any x-ray exposure. X-ray doors have an exposure interlock that prevents exposure if door is open.**
- **The X-ray unit must be warmed up prior to making exposures with the phantom**
- **Students must wear closed toe/heel shoes to participate in the lab**
- **When done, faculty will store all detectors in the locked storage area.**
- **No food or drink is allowed in the radiographic rooms nor near the computer stations**
- **Any unsafe or hazardous conditions (exposed wires, liquid spills, etc.) must be reported to an instructor immediately**

Lab Key Check-Out Procedure (updated 6/2019)

While practice under the supervision of an instructor is encouraged, Radiography students are permitted to check out a door key for the Imaging Lab (Room HS 115) for the purpose of using the room to practice positioning skills during non-class time. The circuit to operate the generator/tube is locked and will remain locked unless a faculty member is present. Only faculty members have keys for the generator locks. The x-ray tube and table are on a separate circuit and the tube, tube light and table functions will operate without the generator on, but exposures cannot be made. In addition, as a secondary precaution. When no detector is installed, exposures are disabled.

The door key is available in the Health Science Division Office, Room HS310. The key must be returned on the day that the key is checked out. Division office hours are:

Monday-Thursday-7:30 am to 6:45 pm

Fridayt-7:30 am-4:45 pm

In order to obtain the door key, students must leave their student ID card or driver's license with the Health Sciences Division staff. The Health Sciences Staff will return the student ID card or driver's license upon receipt of the key.

If the key is not returned according the to this procedure, the student loses the privilege of checking out the Imaging Lab door key

If students would like to access the lab while Health Sciences Division Office is closed, they may call security at 920-498-5699 to unlock the door. Student will need to show security a photo ID (student ID or driver's license. When students are finished in the lab they will need to call security to lock the door. Security will be available the following hours to lock/unlock the lab door.

Monday through Thursday-6:45 pm to 9 pm

Friday -4:45 pm to 9 pm

Saturday-8 am to 5 pm

The Health Science Division is trusting that all students are using good judgement and care while using this equipment. If we notice any vandalism to the equipment we will no longer allow students to use the equipment without supervision.

Principles of Professional Conduct (ARRT)

These Principles are intended to serve as a guide by which Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, other members of the medical care team, health-care consumers, and employers and to assist Radiologic Technologists in maintaining a high level of ethical conduct.

PRINCIPLE 1

Radiologic Technologists shall conduct themselves in a manner compatible with the dignity and professional standards of their profession.

PRINCIPLE 2

Radiologic Technologists shall provide services with consideration of human dignity and the needs of the patient, unrestricted by consideration of age, sex, race, creed, social or economic status, handicap, personal attributes, or the nature of the health problem.

PRINCIPLE 3

Radiologic Technologists shall make every effort to protect all patients from unnecessary radiation.

PRINCIPLE 4

Radiologic Technologists should exercise and accept responsibility for independent discretion and judgment in the performance of their professional services.

PRINCIPLE 5

Radiologic Technologists shall judiciously protect the patient's right to privacy and shall maintain all patient information in the strictest confidence.

PRINCIPLE 6

Radiologic Technologists shall apply only methods of technology founded upon a scientific basis and not employ those methods that violate this principle.

PRINCIPLE 7

Radiologic Technologists shall not diagnose, but in recognition of their responsibility to the patient, they shall provide the physician with all information they have relative to radiologic diagnosis or patient management.

PRINCIPLE 8

Radiologic Technologists shall be responsible for reporting unethical conduct and illegal professional activities to the appropriate authorities.

PRINCIPLE 9

Radiologic Technologists should continually strive to improve their knowledge and skills by participating in educational and professional activities and sharing the benefits of their attainments with their colleagues.

PRINCIPLE 10

Radiologic Technologists should protect the public from misinformation and misrepresentation.

Professional Organizations

NWTC's program in Radiologic Technology promotes professionalism and encourages membership and participation in the professional societies for radiographers.

American Society of Radiologic Technologists (ASRT) Student Membership

The ASRT is the national organization for radiographers. To encourage membership, it offers a reduced rate for second year students. For more information visit www.asrt.org

Wisconsin Society of Radiologic Technologists (WSRT)

The WSRT is a state organization for students & radiographers. For more information visit www.wsrt.net.

Health Sciences Progression Policy (rev 8/17/18)

In order to continue to progress in the program, students must pass each core radiography course with a final grade of 80% or higher. If a student does not achieve 80% in a course, the student cannot continue in the program (see re-entry policy)

Students must receive an 80% or higher in the above core courses to continue in the program.

Radiography Core Courses:

1. 10-526-149 Radiographic Procedures 1
2. 10-526-158 Introduction to Radiography
3. 10-526-159 Radiographic Imaging
4. 10-526-168 Radiography Clinical 1
5. 10-526-192 Radiography Clinical 2
6. 10-526-170 Advanced Radiographic Imaging
7. 10-526-191 Radiographic Procedures 2
8. 10-526-194 Imaging Equipment & Operation
9. 10-526-193 Radiography Clinical 3
10. 10-526-195 Radiographic Image Analysis
11. 10-526-199 Radiography Clinical 4
12. 10-526-195 RT-Image Analysis
13. 10-526-196 Imaging Modalities
14. 10-526-189 Radiographic Pathology
15. 10-526-190 Radiography Clinical 5
16. 10-526-197 Radiation Protection & Biology
17. 10-526-198 Radiography Clinical 6
18. 10-526-174 ARRT Certification Semi

Health Sciences & Education Re-Entry Policy

NWTC Health Sciences & Education department has established a protocol that allows students to request re-entry/re-sequence into their program after a program course (excluding general studies courses) failure or withdrawal of a program course. Students have only one opportunity to request re-entry to their program. Process for program re-entry will include:

- If the student fails a program course the instructor will send the student, Dean or Associate Dean, and advisor an email at the time the grade is entered informing them they were not successful in the course.
 - If the student withdraws from a program course the instructor will email the Dean or Associate Dean and advisor.
 - Once the Dean or Associate Dean is notified a student has failed or withdrawn from a course the Dean, Associate Dean, or Program Director will issue a To-Do Re-entry tracking flag with directions for the student to fill out a re-entry success plan.
 - The student must complete the electronic re-entry success plan at least one week prior to the start of the next program class. Failure to do so, will result in a delay of program progression. The electronic re-entry success plan will be time and date stamped in the order it is received. If a student's electronic re-entry success plan is not received, their program application will be cancelled. Re-entry is dependent upon availability in next program class or clinical.
 - Once the re-entry success plan is received it is reviewed by leadership and program team. *Team discusses approval or denial of re-entry.*
 - *Conditions of re-entry may include (but is not limited to the following):*
 - Audit of program courses
 - Competency demonstration (may include written exam, assignment, skills demonstration, or a combination)
 - Meeting with leadership and faculty
 - Or anything determined by the team
 - *Conditions of denial may include (but is not limited to the following):*
 - Academic performance
 - Employability skills
 - Patient concerns
 - Repeated pattern of behavior
- A decision of the above conditions will be determined by the team.*
- The re-entry plan will be emailed to the student, admission advisor, academic advisor and program team. At this time the To-Do flag will be lowered.
 - Approved requests are subject to clinical space availability. If space is not available, additional remediation may be necessary.
 - If the student has been denied re-entry, the decision is final, and the student cannot apply for readmission to the program. The student would be able to appeal this decision following the HS&E Appeal Process.

Program Course Withdrawal Policy

Students have one opportunity to withdraw from a program course. On the second attempt in

the same course the student must complete the course successfully otherwise it will be counted as a failure. At this time, step 2 of the program re-entry policy will be followed. Extenuating circumstances are reviewed on an individual basis, and documentation may be requested. Radiography courses are only offered one time per year. Should a student elect to withdraw from a program course, the do not meet the program's progression policy and must apply for re-entry into the program.

Health Sciences & Education Dismissal Policy

A student who fails two program courses (the same program course or two separate program courses) will be permanently dismissed from the program. Program Course Withdrawal policy will be applied to the dismissal policy (i.e. two withdrawals is considered a failure). If a program course is taken at another college (in-person/online), while currently in a NWTC program, and the student is not successful in the course it will count toward the dismissal policy.

- **Program dismissal will be sent through Starfish to the student. The Dean or Associate Dean or Program Director will also notify Enrollment Facilitator, Admissions and Academic Advisor. The student's program application will be canceled.**
- **Students have a right to appeal a dismissal following the HS&E Appeal process located in the Health Sciences and Education Handbook.**

Health Sciences & Education Appeal Process

A student may appeal dismissal from their program. The appeal must be submitted within 10 business days, if not submitted the student is permanently dismissed with no opportunity to re-enter or appeal. To begin the appeal process, a student must submit a written appeal to the Dean of Health Sciences & Education. This letter should be detailed and include:

- a. **Explain why the student feels they should be given an exception to the progression policy.**
- b. **Include a description of any extenuating circumstances.**
 - A. **Include any supporting documentation**
- c. **Identify the changes the student has implemented to ensure their success.**

The Dean of Health Sciences and Education will schedule an appeal hearing and notify the student and Health Programs Appeals Committee (comprised of HS&E faculty, Academic Advisor and/or Counselor, and either the Dean of Health Sciences and Education, one of the Associate Deans of Health Sciences, or one of the Program Director/Coordinator) of the meeting time and location. The student will not be invited to participate in the meeting. Faculty will be asked to provide feedback on the appealing student.

The Health Program Appeals Committee considers three primary criteria when reviewing the appeal:

1. **Extenuating circumstances that may have contributed to the student's difficulties.**

2. Evidence of a realistic plan of changes to increase the student's chance for success.
3. Likelihood of success if the student were given another chance.

After the Appeals Committee meets, the student will be notified with one of the following outcomes:

- If the appeal is denied, it will result in permanent dismissal from the program.
- If the appeal is granted, a plan will be developed for program progression. Any further failures in program courses will result in permanent program dismissal without the ability to appeal.

The program team, admissions, and advisors will be notified of the result. The decision of the HS&E Appeals Committee is final. Each student will have only one opportunity to appeal while in a NWTC Health Sciences & Education program.

Program Reentry Application (copy available through HS office)

NWTC ALLIED HEALTH PROGRAM STUDENT PROGRAM RE-ENTRY APPLICATION	
Name: _____	
Student ID Number: _____ Program: _____	
Phone Number: _____ E-mail Address: _____	
Course(s) unsuccessfully completed: _____ _____	
Reason for withdrawing or lack of successful completion: _____ _____	
<i>Please attach a separate sheet if more space is needed</i>	
***** <u>Re-Entry Request</u>	
I wish to re-enter the _____ Program _____ YES _____ NO	
I will make the following changes in order to be successful during a second attempt: _____ _____ _____	

Please attach a separate sheet if more space is needed. The Program Faculty may request documentation of completion of the above list.

Student Signature: _____ Date: _____

This section for Committee use only

Date Reviewed: _____

Recommendation:

_____ Accepted, place on list (attach letter outlining required courses to complete and audit)

_____ Need more information

_____ Schedule interview with committee

_____ Request denied. Reason _____

Radiography Program- Student Club (rev 8/13/2020)

The Radiography club is currently inactive.

Responsibilities of NWTC to the Radiographic Clinical Site

- Orientation of clinical instructor to program academic and clinical education process & mission, program objectives and goals.
- Assignment of a student to the site who is currently completing the didactic portion of the program with satisfactory results.
- Supply or provide electronic access to forms, clinical syllabus, student radiation monitoring devices, policies of program (student handbook), and other materials requested and appropriate.
- Provide support of clinical objectives and assistance in establishing clinical education.
- Perform conflict resolution, if needed.

Scholarships (rev 8/20)

NWTC Scholarships

Scholarships are available to current and future NWTC students through the NWTC Foundation. Over \$750,000 in scholarships is awarded each year to students taking classes through NWTC campuses in Green Bay, Marinette, Sturgeon Bay and the five Regional Learning Centers located throughout Northeast Wisconsin.

Scholarships are similar to grants in that there is no obligation to repay them, however they are awarded through a competitive process. Scholarships are awarded to students who demonstrate:

- Initiative
- Desire and potential to succeed

- Academic progress
- financial need

Applications are accepted from March 1 to April 30 for fall semester. Awards are issued in June. Scholarship information is available through NWTC's Educational Foundation Office, Room DO211, or by calling (920) 498-6914 or (800) 422-NWTC, extension 6914. Or you can check out the following link:

<http://www.nwtc.edu/atnwtc/foundationalumni/Pages/ScholarshipInformation.aspx>

Additional Scholarships

Students are encouraged to contact the human resources department at their clinic hospital to see if there are any scholarship opportunities. The students are also encouraged to look for independent scholarships such as women's auxiliary, American society of radiologic technologist, Wisconsin society of radiologic technologists, American legion, and others.

Spring Symposium/ WAERT Conference (updated 6/2019)

The Wisconsin Association of Educators in Radiologic Science (WAERT) hosts a two (2) day conference that is designed for second year students. The conference consists of educational sessions, a quiz bowl competition, student essays, and exhibits. For complete rules to enter the essay and exhibit competition please see the Program Director. The main focus of the symposium is to help prepare students to take the Radiography (ARRT Certification) board exam.

Attendance at the conference is not mandatory but students are strongly encouraged to attend. A student that does not wish to attend the conference, must notify the Program Director and/or Clinical Coordinator, in writing, at least 6 weeks before the scheduled conference dates. Students that do not attend the conference will attend clinical for any days scheduled and will be required to complete individual assignments in relation to the topics covered at the conference. If a student's clinical records indicate that attendance at the conference may jeopardize their ability to meet clinical requirements, a conference with program faculty will be held to determine the best course of action.

The conference is held in the Wisconsin Dells. Registration fees for the conference are covered by the college. Students are responsible for their own expenses such as: travel, lodging, & meals.

Students that attend the conference, represent the college (NWTC) and are expected to behave in a professional manner. Students must attend all required sessions and activities. In addition, all students attending the conference will be required to sign a college travel waiver and code of conduct form.

Student Records-FERPA (Family Educational Rights and Privacy Act)

1. All student records shall be maintained in accordance with the provisions of the Federal Family Educational Rights and Privacy Act of 1974.
2. All student records accumulated during the program are considered confidential and kept in a locked file. The contents of a student's file are not revealed to any

unauthorized person without the student's knowledge and written consent. Students may review any records, which pertain to them in the Program Director's office during regular office hours or by appointment. Any records maintained by the clinical affiliates concerning individual students are subject to the same considerations regarding confidentiality, security and availability.

Recomp Requirements by clinical course

****Categories of exams and numbers for Re-competencies required for each Semester**

* An exam can only be recomped one time, if you have recomped on an exam and that category comes up again, talk with the instructor to be assigned another recomp category.

** you cannot recomp an exam in the same semester in which you gained the comp. for example, you are in clinical 3 and you comp a femur on June 3rd. You cannot recomp on that exam until at least clinical 4.

CI choice category = The CI is responsible for choosing the exam the student has to perform for re-competency.

**The faculty may change the re-comp requirements for a clinical course, provided sufficient notice has been given at the beginning of the affected semester/clinical.

Semester	Re-Comps Required	Categories/Notes
Clinical 1 fall	0	
Clinical 2 spring	1	1- exam comped on during clinical 1
Clinical 3 summer	3	1-upper extremity 1-lower extremity 1 CI choice*
Clinical 4 fall yr 2	4	1-chest (non mobile) 1- elective exam (any category) 1-abdomen 1-upper extremity (not prev recomp)
Clinical 5 spring yr 2 First 8 weeks	2	1-lower extremity (not prev recomp) 1-peds exam
Clinical 6 spring yr 2 Second 8 weeks	2	1 –mobile/portable 1 CI choice*

