

FRESNO CITY COLLEGE

Radiologic Technology Program

ASSOCIATE OF SCIENCE DEGREE



2024

Developed by

FCC Radiologic Technology Faculty

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FRESNO CITY COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM 2024

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NOTATIONS

The content of this handbook may be subject to change throughout the program.

NOTE: All courses in the Radiologic Technology Program must be completed with at minimum grade of C.

THIS INSTITUTION DOES NOT DISCRIMINATE ON THE BASIS OF RACE, SEX, AGE, HANDICAP OR RELIGION.

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INTRODUCTION

Welcome to the Fresno City College Radiologic Technology Program. This student handbook is a supplement to the Fresno City College catalog.

The purpose of the handbook is to provide information specifically related to the Radiologic Technology Program. As new policies relating to student activities are formulated, they will be added to the handbook. It is important that you keep this book as a reference throughout the program.

The faculty wishes you success in this important venture in your radiography education.

PURPOSE OF THE PROGRAM

Fresno City College offers an associate degree program in Radiologic Technology with classes beginning each August.

You are entering a paramedical career program that is interesting, diversified, and demanding. The program is designed to help you develop the knowledge and skills required to perform in a specialized area. Many subtle qualities besides knowledge and skills are required to complete the program successfully. An important personal quality that will be closely evaluated throughout your training is your ability to relate with the patient and to provide them with both physical and emotional support. Another quality or trait is your ability to work as part of a team and interact successfully with department and hospital personnel. Weaknesses spotted in any area of performance will be expected to be resolved promptly. Counseling will be arranged if problems are significant.

The Radiologic Technology faculty wishes you success in the Program. We are here to assist you in pursuing your newly chosen profession.

The Board of Trustees of the State Center Community College District shall confer upon a student who has satisfactorily completed the general education and program requirements, the Associate of Science Degree. The specific major requirements being consistent with those prescribed by the Board of Governors of the California Community College and the Board of Trustees of the State Center Community College District.

THE MISSION OF FRESNO CITY COLLEGE

As California's first community college, Fresno City College provides access to equity-centered, quality, innovative educational programs and support services. Committed to a culture of anti-racism, we create dynamic communities of respect and inquiry which encourage student success and lifelong learning while fostering the sustainable economic, social, and cultural development of our students and region.

FRESNO CITY COLLEGE INSTITUTIONAL STUDENT LEARNING OUTCOMES

In developing suitable Institutional Student Learning Outcomes (SLO's) for implementation of the philosophy and purposes of the College, the college recognizes that students differ greatly in experience, needs, capacities, interests, and aspirations. With this diversity in mind, staff members work with students to help them achieve the following SLO's:

Communication

Students will demonstrate effective communication and comprehension skills.

- Comprehend, analyze and respond appropriately to oral, written, and visual information.
- Effectively communicate information through speaking, writing, and other appropriate modes of expression.

Critical Thinking and Information Competency

Students will demonstrate critical thinking skills in problem solving across disciplines and in daily life.

- Identify vital questions, problems, or issues and evaluate the reasonableness of a solution.
- Analyze, assess, and evaluate the validity of an argument.
- Analyze multiple representations of quantitative information, including graphic, formulaic, numeric and verbal.
- Select and evaluate the accuracy, credibility, relevance of information sources.

Community and Global Awareness and Responsibility

Students will demonstrate knowledge of social, cultural, environmental and aesthetic perspectives.

- Examine individual and group responsibilities in society.
- Participate in active citizenship.

Personal, Academic and Career Development

Students will assess their own skills, and abilities, to develop personal, educational, and career goals, work independently and in group settings, and identify lifestyle choices that promote self-reliance, financial literacy, and physical, mental and social health.

- Assume personal responsibility for identifying academic and psychological-social needs, determining resources, and accessing appropriate services.
- Evaluate progress towards achieving personal goals, academic goals, career goals, and career resilience.

(Updated 10/31/23)

RADIOLOGIC TECHNOLOGY PROGRAM PHILOSOPHY

Fresno City College's Radiologic Technology Program believes in the overall philosophy and SLO's of the State Center Community College District. Being an integral part of the community college, the Radiologic Technology Program serves the educational needs of individuals within its sphere. It provides graduates capable of working in structured health care facilities and in various community settings.

Person/Client

The concept of person/client includes individuals, families, groups and communities. *Client* refers to an individual, his/her support groups, and/or to any group participating in and/or receiving radiology care. Each client is characterized by dynamic components that are physiological, psychological, cultural, ethnic, developmental, and spiritual. All of these areas interact by influencing the client's response to internal and external needs. The client has a right to self-determination in meeting his/her needs. Each client is worthy of respect and concern.

Environment

The environment has internal and external components, which are constantly changing. The internal environment consists of cognitive, developmental, physiological and psychological processes, while the external environment consists of the physical and social world. The dynamics of the internal and external environments constantly affect the client's ability to adapt and to maintain homeostasis.

Health

Health is regarded as a state of equilibrium on a wellness-to-illness continuum. Individual health practices impact the value and meaning of health as determined by culture and society. Wellness is identified as successful management of multiple stresses from internal and external environments. Illness results when the bio-psycho-social system is disrupted. The person/client's ability to cope with illness is influenced by how successfully he/she is able to adapt within the health care environment. The perception of wellness to illness is a highly individualized process, which is influenced by the client's health beliefs and health behaviors.

Education

Education is a process involving active participation of both the student and the instructor. Radiologic Technology education blends the science and the art of technology as well as integrating concepts from support courses and the prerequisite courses required. Education is facilitated by communication between the faculty and students in the traditional and technologically enhanced learning environment.

Students possess unique individual qualities that reflect their backgrounds, goals, and learning styles. The Fresno City College students are characterized by their unique cultural and ethnic diversity. In addition, differences in age, life experiences, support

systems, education, and economic resources influence the students' learning process. Students are empowered to be self-motivated, independent critical thinkers who accept personal accountability and responsibility in the learning process. Students will learn best when learning goals are perceived as immediately useful and realistic as well as important and relevant to a person's personal, professional and career needs.

College-wide support services exist to meet the individual needs of the student. These include health services and counseling, library and learning resource center, radiology skills lab for individualized tutoring and mentoring, student clubs and activities, learning disability specialists, childcare center, job placement, and financial aid.

Faculty members share the belief that learning occurs best in an atmosphere of mutual respect in which there is an appreciation for and consideration of different learning styles. Faculty recognizes the varied backgrounds and experiences that each student contributes to the learning environment. Individual learning styles and needs are considered when designing learning experiences to maximize the potential for success of each student. The faculty functions as educators, facilitators, resource persons, mentors, coaches, and role models to create and maintain a positive learning environment.

Students

Students possess unique individual qualities. Students are encouraged to become self-motivated, independent critical thinkers who accept personal accountability and responsibility in the learning process. Cognitive skills essential to the learning process in radiology education include analysis, synthesis, and the ability to transfer learning. The learning process of radiologic technology students is augmented by the application of other academic disciplines of the college. The program is open to all individuals regardless of ethnicity, gender, religious preference, or age who have met admission standards.

Radiologic Technology Faculty Members

Faculty members are committed to the goal of graduating individuals who will function safely and efficiently as a Registered Radiologic Technologist in the health care community. The faculty possesses competent theoretical knowledge and clinical skills. They facilitate learning by directing, providing opportunity, and assisting students with the acquisition of knowledge and the mastery of clinical skills. Faculty members respect the differences unique to each student's ethnic, cultural, spiritual, and learning needs.

RADIOLOGIC TECHNOLOGY PROGRAM MISSION

It is the mission of the Radiologic Technology Program at Fresno City College to prepare and graduate students with the entry-level skills required for careers in radiography, and to become employable in the community, the state of California, the Nation, and the international arena.

RADIOLOGIC TECHNOLOGY GOALS

It is the policy of the Fresno City College Radiologic Technology Program to ensure excellence in education through a means of goals, SLO's and assessment. Continuous monitoring of the Program's mission, goals and outcomes has been implemented to enable the Program to consistently maintain student success. Compliance is aided through a multitude of surveys that cover the degree of satisfaction with all aspects of the Program. Survey feedback is the driving force by which the Program implements positive changes and monitors its success. The goals are as follows:

1. Students will graduate with a high degree of clinical competency and knowledge.
2. Students will graduate with effective oral and written communication skills.
3. Students will graduate with critical thinking and problem-solving abilities.

Program Assessment Plan

To ensure continuous program improvement, the program employs an ongoing and systematic assessment process to measure and document student learning outcomes. The Fresno City College Radiologic Technology Program uses the following assessment plan to monitor its success:

GOAL # 1 Students will graduate with a high degree of clinical competency and knowledge.

Student Learning Outcomes	Measurement Tool	Timeframe	Benchmarks	Actual Data Results	Past 3 Years Data Results
Students will produce diagnostic images.	Laboratory Image Evaluation form, line items 3, 4, and 5.	Second Semester	Students will achieve an average score of 3.0 or higher. (0 to 5 point scale)		
	Clinical Image Evaluation form, line items 3, 4, and 5.	Fifth Semester	Students will achieve an average score of 3.0 or higher. (0 to 5 point scale)		
Students will apply appropriate positioning skills.	Laboratory Positioning Book, procedure evaluations	Second Semester	Students will attain an average score of 75% or higher. (0 to 100% scale) Random sampling of two procedures per student. (0 to 100% scale)		
	Student Clinical Evaluation form area D1, demonstration of positioning skills.	Fifth Semester	Students will attain an average score of 75% or higher. (0 to 100% scale)		
Students will select appropriate technical factors.	Laboratory Image Evaluation form, line #3 appropriate technique selection.	Second Semester	Students will attain an average score of 3.0 or higher. (0 to 5 point scale)		
	Student Clinical Evaluation form area D2, proper selection of technical factors.	Fifth Semester	Students will achieve an average score of 75% or higher. (0 to 100% scale)		

Student Learning Outcome 1.1

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.2

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.3

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.4

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.5

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.6

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

GOAL # 2 Students will graduate with effective oral and written communication skills.

Student Learning Outcomes	Measurement Tool	Timeframe	Benchmarks	Actual Data Results	Past 3 Years Data Results
Students will display effective oral communication skills.	Student Clinical Evaluation form area B1, proper introduction and patient identification.	Third Semester	Students will attain an average score of 75% or higher. (0 to 100% scale)		
	Student Clinical Evaluation form area B2, appropriate procedure explanation to patient.	Fifth Semester	Students will achieve an average score of 75% or higher. (0 to 100% scale)		
Students will display proper written communication skills.	APA style grading rubric for pathology research paper.	Third Semester	Students will achieve an average score of 75% or better. (0 to 100% scale)		
	Student Clinical Evaluation form area B3, proper written patient histories and exam close outs.	Fifth Semester	Students will attain an average score of 75% or higher. (0 to 100% scale)		

Student Learning Outcome 2.1**Analysis:****Action Plan Based on Analysis:****Results/Improvement(s) noted based on the action plans that were implemented:****Re-evaluation Date:****Student Learning Outcome 2.2****Analysis:****Action Plan Based on Analysis:****Results/Improvement(s) noted based on the action plans that were implemented:****Re-evaluation Date:****Student Learning Outcome 2.3**

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 2.4

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

GOAL # 3 Students will graduate with critical thinking and problem-solving abilities.

Student Learning Outcomes	Measurement Tool	Timeframe	Benchmarks	Actual Data Results	Past 3 Years Data Results
Students will possess critical thinking ability.	APA style grading rubric, line #5	Third Semester	Students will accomplish a score of 15 points or better out of a possible 20 points.		
	Student Clinical Evaluation form area D2, proper selection of technical factors.	Fifth Semester	Students will attain an average score of 75% or higher. (0 to 100% scale)		
Students will adapt positioning for trauma patients.	Trauma positioning final examination score.	Second Semester	Students will achieve an average score of 75% or higher. (0 to 100% scale)		
	Student Clinical Evaluation form area D1, demonstration of positioning skills.	Fifth Semester	Students will attain an average score of 75% or higher. (0 to 100% scale)		

Student Learning Outcome 1.1**Analysis:****Action Plan Based on Analysis:****Results/Improvement(s) noted based on the action plans that were implemented:****Re-evaluation Date:****Student Learning Outcome 1.2****Analysis:****Action Plan Based on Analysis:****Results/Improvement(s) noted based on the action plans that were implemented:****Re-evaluation Date:****Student Learning Outcome 1.3****Analysis:**

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Student Learning Outcome 1.4

Analysis:

Action Plan Based on Analysis:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Results/Improvement(s) noted based on the action plans that were implemented:

Re-evaluation Date:

Program Effectiveness Data

Student Learning Outcomes	Measurement Tool	Timeframe	Benchmarks	Actual Data Results	Past 3-5 Years Data Results
Students will complete the 1st year of the program.	The number of students entering the second year will be compared to the number beginning the program.	End of third semester	85% of the students entering the program will continue on to the second year of the program. (0 to 100% scale)		
Students will complete the 2nd year and graduate from the program.	The number of students graduating from the program will be compared to the number beginning the program.	End of second year	80% of the students entering the program will continue on to complete the program. (0 to 100% scale)		
Students will pass the ARRT National Registry Examination on the first attempt.	ARRT Examination Results	Annually upon receipt	Over a rolling 5-year period, 80% of the students graduating from the program will pass the National Registry on their 1st attempt. (0 to 100% scale)		
Graduates will be satisfied with their education.	Intern Exit survey line #9, "Overall, knowledge gained from the program was sufficient for entry level practice".	End of program	80% of returned Intern Exit surveys will score agree or better.		
Employers will be satisfied with the graduate's performance.	Clinical Education Setting Evaluation of Program survey line #9, "Overall, the program and graduates are performing satisfactorily".	Up to three months after graduation	80% of returned Clinical Education Setting Evaluation of Program surveys will score agree or better.		
Graduates who desire employment will be employed within 1 year after graduation.	Graduate Employment Telephone Survey.	1 year after graduation	Over a rolling 5-year period 75% of the graduates who desire employment will be employed within 1 year after graduation. (0 to 100% scale)		

ACCREDITATION

Fresno City College

The Chancellor of the California Community Colleges and Accrediting Commission approves Fresno City College for Community and Junior Colleges and Western Association of Schools and Colleges. It meets all standards of the California State Department of Education and is listed in the Education Directory, Higher Education, Part 3 published by the United States Office of Education. The University of California and other colleges and universities of high rank give full credit for appropriate courses completed at Fresno City College.

Radiologic Technology Program

The Joint Review Committee on Education in Radiologic Technology (JRCERT) accredits the Radiologic Technology Program, which currently has an accreditation status of 8 years, and leads to eligibility to apply for the examination by the American Registry of Radiologic Technologists (ARRT).

Joint Review Committee on Education in Radiologic Technology
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Tel: (312) 704-5300, Email: mail@jrcert.org, Website: <https://www.jrcert.org/>

Students may submit an application to the California Department of Public Health to receive their state radiography and fluoroscopy license upon passing the ARRT radiography examination. These certificates are issued under the authority of the State of California, Department of Health Services pursuant to the Radiologic Technology Act.

STUDENT

The student population is comprised of adult learners who come with varied educational backgrounds. The faculty view the adult learner as a person who is self-directing, accountable, and responsible, as well as being capable of making decisions regarding his/her own learning. The ability, motivation, and responsibility to learn are the properties of the individual student. Learning for the professional practice of radiology is a life-long endeavor.

A synthesis of learning theories and principles of adult learning is utilized in curriculum design and program delivery. The role of the teacher is to facilitate the learner in achieving desired educational goals. The teacher provides an environment that enables students to become increasingly self-directed and responsible. This environment includes the social process of acculturating the student to the art of radiology practice. Students are encouraged to utilize prior experiences to enhance their own and other's learning.

SETTING

Learning is achieved by active and direct participation in the classroom and clinical situations. The setting is composed of the Associate Degree in Radiologic Technology, which is an integral part of the Allied Health Division of Fresno City College. The local health care community provides a variety of clinical experiences. These facilities are located in Fresno, Kings, and Tulare Counties, and include hospital inpatient and outpatients, ER departments, pediatrics, imaging centers and physicians' offices. Program personnel, faculty, students, and staff avail themselves of the campus resources. Offices for the Radiologic Technology faculty and staff are located in the Health Sciences Building on the Fresno City College campus. Didactic instruction and the positioning laboratories are also located in this building. The Learning Resource Center, affiliated divisions and support services are located on the FCC campus. The teaching/learning sites and the affiliated clinical agencies are conveniently located in the immediate Fresno metropolitan area and south valley. Current learning technologies essential to effective education and learning are employed and adapted to meet student needs.

PROFESSIONAL BEHAVIOR

The Radiologic Technology program follows State Center Community College District and Fresno City College policy regarding academic standards, policies and procedures. Please refer to the Fresno City College Catalog for details on those policies. There are however issues and policies that are also specific to radiology that the student must be aware of, and they include the following:

The highest ethical standard is required by students in the Radiologic Technology Program.

Students are accountable for information and skills learned in previous courses.

Students need to have respect for themselves, fellow students, faculty, administrators, other professionals, and the chain of command.

Integrity is required to be demonstrated by the students including honesty, following the honor code, not enabling others who are not doing their own work, reporting cheating or plagiarism, not lying in the patient care setting, forging, or omitting care.

No aggressive, disruptive, or stalking behaviors or any types of verbal threats including bullying will be tolerated in the Radiologic Technology Program and will be reported following Fresno City College policy outlined in the college catalog under Causes for Discipline. This may also result in dismissal from the Program. This reporting may go on your legal record and could cause a delay in your obtaining your Radiologic Technology license.

Cell phones are required to be turned off during class and either turned off or left in your locker at the clinical facility, whichever the clinical facility policy dictates.

Be aware of your responsibility as well as the legal implications (HIPAA) in respecting the rights of others, especially the right of privacy.

Do not discuss any patient, any member of the health team, or any disease or symptoms in a place where one might be overheard and possibly infringe on someone's right to privacy.

The student will not entertain visitors (personal) in the Radiology Department or classroom/laboratory at any time without specific permission.

The American Registry of Radiologic Technologists
Standard of Ethics

Last Updated: October 31st, 2023

Last Revised & Published: September 1, 2023

PREAMBLE

The *Standards of Ethics* of The American Registry of Radiologic Technologists (ARRT) shall apply solely to persons holding certificates from ARRT that are either currently certified and registered by ARRT or that were formerly certified and registered by ARRT (collectively, “Certificate Holders”), and to persons applying for certification and registration by ARRT in order to become Certificate Holders (“Candidates”). Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular- interventional radiography, breast sonography, and radiologist assistant. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

STATEMENT OF PURPOSE

The purpose of the ethics requirements is to identify individuals who have internalized a set of professional values that cause one to act in the best interests of patients. This internalization of professional values and the resulting behavior is one element of ARRT’s definition of what it means to be qualified. Exhibiting certain behaviors as documented in the *Standards of Ethics* is evidence of the possible lack of appropriate professional values.

The *Standards of Ethics* provides proactive guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. The ethics

requirements support ARRT's mission of promoting high standards of patient care by removing or restricting the use of the credential by those who exhibit behavior inconsistent with the requirements.

A. CODE OF ETHICS

The Code of Ethics forms the first part of the *Standards of Ethics*. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of humankind.
3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.
5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.
11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

B. RULES OF ETHICS

The Rules of Ethics form the second part of the Standards of Ethics. They are mandatory standards of minimally acceptable professional conduct for all Registered Technologists and Candidates. ARRT certification and registration demonstrates to the medical community and the public that an individual is qualified to practice within the profession. The Rules of Ethics are intended to promote the protection, safety, and comfort of patients. Accordingly, it is essential that Registered Technologists and Candidates act consistently with these Rules.

The Rules of Ethics are enforceable. Registered Technologists are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence or during their annual renewal of certification and registration, whichever comes first. Applicants for certification and registration are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence.

Registered Technologists and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

The titles and headings are for convenience only, and shall not be used to limit, alter or interpret the language of any Rule.

Fraud or Deceptive Practices

Fraud Involving Certification and Registration

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain or reinstate certification and registration as issued by ARRT; employment in radiologic technology; or a state permit, license, or registration certificate to practice radiologic technology. This includes altering in any respect any document issued by ARRT or any state or federal agency, or by indicating in writing certification and registration with ARRT when that is not the case.

Fraudulent Communication Regarding Credentials

2. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding any individual's education, training, credentials, experience, or qualifications, or the status of any individual's state permit, license, or registration certificate in radiologic technology or certification and registration with ARRT.

Fraudulent Billing Practices

3. Knowingly engaging or assisting any person to engage in, or otherwise participating in, abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws.

Subversion

Examination / CQR (Continuing Qualifications Requirements) Subversion

4. Subverting or attempting to subvert ARRT's examination process, and/or ARRT's Education Requirements, including the Structured Self-Assessments (SSA) that are part of the Continuing Qualifications Requirements (CQR) process. Conduct that subverts or attempts to subvert ARRT's examination, Education Requirements and/or CQR or SSA processes, includes but is not limited to:

- i. disclosing examination and/or CQR SSA information using language that is substantially similar to that used in questions and/ or answers from ARRT examinations and/or CQR SSA when such information is gained as a direct result of having been an examinee or a participant in a CQR SSA or having communicated with an examinee or a CQR participant; this includes, but is not limited to, disclosures to students in educational programs, graduates of educational programs, educators, anyone else involved in the preparation of Candidates to sit for the examinations, or CQR participants; and/or
- ii. soliciting and/or receiving examination and/or CQR SSA information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations or CQR SSA from an examinee, or a CQR participant, whether requested or not; and/or
- iii. copying, publishing, reconstructing (whether by memory or otherwise), reproducing or transmitting any portion of examination and/or CQR SSA materials by any means, verbal or written, electronic or mechanical, without the prior express written permission of ARRT or using professional, paid or repeat examination takers and/or CQR SSA participants, or any other individual for the purpose of reconstructing any portion of examination and/or CQR SSA materials; and/or

- iv. using or purporting to use any portion of examination and/or CQR SSA materials that were obtained improperly or without authorization for the purpose of instructing or preparing any Candidate for examination or participant for CQR SSA; and/or
- v. selling or offering to sell, buying, or offering to buy, or distributing or offering to distribute any portion of examination and/or CQR SSA materials without authorization; and/or
- vi. removing or attempting to remove examination and/or CQR SSA materials from an examination or SSA room; and/or
- vii. having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination or CQR SSA of ARRT; and/or
- viii. disclosing what purports to be, or what you claim to be, or under all circumstances is likely to be understood by the recipient as, any portion of or “inside” information concerning any portion of a future, current, or previously administered examination or CQR SSA of ARRT; and/or
- ix. communicating with another individual during administration of the examination or CQR SSA for the purpose of giving or receiving help in answering examination or CQR SSA questions, copying another Candidate’s or CQR participant’s answers, permitting another Candidate or a CQR participant to copy one’s answers, or possessing or otherwise having access to unauthorized materials including, but not limited to, notes, books, mobile devices, computers and/or tablets during administration of the examination or CQR SSA; and/or
- x. impersonating a Candidate, or a CQR participant, or permitting an impersonator to take or attempt to take the examination or CQR SSA on one’s own behalf; and/or
- xi. using any other means that potentially alters the results of the examination or CQR SSA such that the results may not accurately represent the professional knowledge base of a Candidate, or a CQR participant.

Education Requirements Subversion

5. Subverting, attempting to subvert, or aiding others to subvert or attempt to subvert ARRT’s Education Requirements for Obtaining and Maintaining Certification and Registration (“Education Requirements”), including but not limited to, continuing education (CE), clinical experience and competency requirements, structured education activities, and/or Continuing Qualifications Requirements (CQR). Conduct that subverts or attempts to subvert ARRT’s Education Requirements or CQR Requirements includes, but is not limited to:

- i. providing false, inaccurate, altered, or deceptive information related to CE, clinical experience or competency requirements, structured education or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or
- ii. assisting others to provide false, inaccurate, altered, or deceptive information related to education requirements or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or
- iii. conduct that results or could result in a false or deceptive report of CE, clinical experience or competency requirements, structured education activities or CQR completion; and/or
- iv. conduct that in any way compromises the integrity of ARRT's education requirements, including, but not limited to, CE, clinical experience and competency requirements, structured education activities, or CQR Requirements such as sharing answers to the post-tests or self-learning activities, providing or using false certificates of participation, or verifying credits that were not earned or clinical procedures that were not performed.

Failure to Cooperate with ARRT Investigation

6. Subverting or attempting to subvert ARRT's certification and registration processes by:

- i. making a false statement or knowingly providing false information to ARRT; or
- ii. failing to cooperate with any investigation by ARRT in full or in part.

Unprofessional Conduct

Failure to Conform to Minimal Acceptable Standards

7. Engaging in unprofessional conduct, including, but not limited to:

- i. a departure from or failure to conform to applicable federal, state, or local governmental rules regarding radiologic technology practice or scope of practice; or, if no such rule exists, to the minimal standards of acceptable and prevailing radiologic technology practice.
- ii. any radiologic technology practice that may create unnecessary danger to a patient's life, health, or safety. Actual injury to a patient or the public need not be established under this clause.

Sexual Misconduct

8. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the

patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to any unwanted sexual behavior, verbal or otherwise.

Unethical Conduct

9. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm the public; or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established under this clause.

Scope of Practice Technical Incompetence

10. Performing procedures which the individual is not competent to perform through appropriate training and/or education or experience unless assisted or personally supervised by someone who is competent (through training and/or education or experience).

Improper Supervision in Practice

11. Knowingly assisting, advising, or allowing a person without a current and appropriate state permit, license, registration, or ARRT certification and registration to engage in the practice of radiologic technology, in a jurisdiction that mandates such requirements.

Improper Delegation or Acceptance of a Function

12. Delegating or accepting the delegation of a radiologic technology function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not be established under this clause.

Fitness to Practice

Actual or Potential Inability to Practice

13. Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material; or as a result of any mental or physical condition.

Inability to Practice by Judicial Determination

14. Adjudication as mentally incompetent, mentally ill, chemically dependent, or dangerous to the public, by a court of competent jurisdiction.

Improper Management of Patient Records

False or Deceptive Entries

15. Improper management of records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing, or permitting anyone to make false, deceptive, or misleading entry in any patient record and/or any quality control record.

Failure to Protect Confidential Patient Information

16. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law, or viewing, using, releasing, or otherwise failing to adequately protect the security or privacy of confidential patient information.

Knowingly Providing False Information

17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.

Violation of State or Federal Law or Regulatory Rule

Narcotics or Controlled Substances Law

18. Violating a state or federal narcotics or controlled substance law, even if not charged or convicted of a violation of law.

Regulatory Authority or Certification Board Rule

19. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual's professional license, permit, registration, or certification being denied, revoked, suspended, placed on probation or a consent agreement or order, voluntarily surrendered, subjected to any conditions, or failing to report to ARRT any of the violations or actions identified in this Rule.

Criminal Proceedings

20. Convictions, criminal proceedings, or military courts-martial as described below:

- i. conviction of a crime, including, but not limited to, a felony, a gross misdemeanor, or a misdemeanor; and/or
- ii. criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld, deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters an Alford plea, a plea of guilty or nolo contendere (no contest); or where the individual enters into a pre-trial diversion activity; and/or
- iii. military courts-martial related to any offense identified in these Rules of Ethics; and/or

- iv. iv. required sex offender registration.

Duty to Report

Failure to Report Violation

21. Knowing of a violation or a probable violation of any Rule of Ethics by any Registered Technologist or Candidate and failing to promptly report in writing the same to ARRT.
22. Failure to Report Error 22. Failing to immediately report to the Registered Technologist's or Candidate's supervisor information concerning an error made in connection with imaging, treating, or caring for a patient. For purposes of this rule, errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper (commission). Errors also include behavior that is negligent or should have occurred in connection with a patient's care but did not (omission). The duty to report under this rule exists whether or not the patient suffered any injury.

C. ADMINISTRATIVE PROCEDURES

These Administrative Procedures provide for the structure and operation of the Ethics Committee; they detail procedures followed by the Ethics Committee and by the Board of Trustees of ARRT in administering challenges raised under the Rules of Ethics, and in handling matters relating to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the ARRT Rules and Regulations, in which case, there is no right to a hearing) or the denial of renewal or reinstatement of certification and registration. All Registered Technologists and Candidates are required to comply with these Administrative Procedures. All Registered Technologists and Candidates are expected to conduct themselves in a professional and respectful manner in their interactions with the ARRT Board of Trustees, Ethics Committee and/or staff. Failure to cooperate with the Ethics Committee or the Board of Trustees may be considered by the Ethics Committee and by the Board of Trustees according to the same procedures and with the same sanctions as failure to observe the Rules of Ethics.

1. Ethics Committee

(a) Membership and Responsibilities of the Ethics Committee

The President, with the approval of the Board of Trustees, appoints three Trustees to serve as members of the Ethics Committee, each such person to serve on the Committee until removed and replaced by the President, with the approval of the Board of Trustees, at any time, with or without cause. The President, with the approval of the Board of Trustees, will also appoint a fourth, alternate member to the Committee. In the event that the full Committee is not available for a meeting, an alternate member may participate on

the Committee. If an alternate member is not available, the remaining members of the Committee will hold the meeting and act irrespective of the composition of the Committee. The Ethics Committee is responsible for: (1) investigating and reviewing each alleged violation of the Rules of Ethics and determining whether a Registered Technologist or Candidate has failed to observe the Rules of Ethics and determining an appropriate sanction; and (2) periodically assessing the Code of Ethics, Rules of Ethics, and Administrative Procedures and recommending any amendments to the Board of Trustees.

(b) The Chair of the Ethics Committee

The President, with the approval of the Board of Trustees, appoints one member of the Ethics Committee as the Committee's Chair to serve for a maximum term of two years as the principal administrative officer responsible for management of the promulgation, interpretation, and enforcement of the Standards of Ethics. In the event that the Chair is not available for a meeting, the Chair may appoint any remaining member to act as Chair. The President may remove and replace the Chair of the Committee, with the approval of the Board of Trustees, at any time, with or without cause. The Chair presides at and participates in meetings of the Ethics Committee and is responsible directly and exclusively to the Board of Trustees, using staff, legal counsel, and other resources necessary to fulfill the responsibilities of administering the Standards of Ethics.

(c) Preliminary Screening of Potential Violations of the Rules of Ethics

The Chair of the Ethics Committee shall review each alleged violation of the Rules of Ethics that is brought to the attention of the Ethics Committee. If, in the sole discretion of the Chair: (1) there is insufficient information upon which to base a charge of a violation of the Rules of Ethics; or (2) the allegations against the Registered Technologist or Candidate are patently frivolous or inconsequential; or (3) the allegations, if true, would not constitute a violation of the Rules of Ethics, the Chair may summarily dismiss the matter. The Chair may be assisted by staff and/or legal counsel of ARRT. The Chair shall report each such summary dismissal to the Ethics Committee.

At the Chair's direction and upon request, the Chief Executive Officer of ARRT shall have the power to investigate allegations regarding the possible settlement of an alleged violation of the Rules of Ethics. The Chief Executive Officer may be assisted by staff members and/or legal counsel of ARRT. The Chief Executive Officer is not empowered to enter into a binding settlement, but rather may convey and/or recommend proposed settlements to the Ethics Committee. The Ethics Committee may accept the proposed settlement, make a counterproposal to the Certificate Holder or Candidate, or reject the proposed settlement and proceed under these Administrative Procedures.

2. Hearings

Whenever ARRT proposes to take action in respect to the denial of an application for

certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the ARRT Rules and Regulations, in which case there is no right to a hearing) or of an application for renewal or reinstatement of certification and registration, or in connection with the revocation or suspension of certification and registration, or the censure of a Registered Technologist or Candidate for an alleged violation of the Rules of Ethics, it shall give written notice thereof to such person, specifying the reasons for such proposed action. A Registered Technologist or Candidate to whom such notice is given shall have 30 days from the date the notice of such proposed action is mailed to make a written request for a hearing. The written request for a hearing must be accompanied by a nonrefundable hearing fee in an amount to be determined by ARRT. In rare cases, the hearing fee may be waived, in whole or in part, at the sole discretion of ARRT.

Failure to make a written request for a hearing and to remit the hearing fee (unless the hearing fee is waived in writing by ARRT) within such period or submission of a properly executed Hearing Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or the Board of Trustees pursuant to such notice. A Registered Technologist or Candidate who requests a hearing in the manner prescribed above shall advise the Ethics Committee of their intention to appear at the hearing. A Registered Technologist or Candidate who requests a hearing may elect to appear in person, via teleconference, videoconference, or by a written submission which shall be verified or acknowledged under oath.

A Registered Technologist or Candidate may waive the 30-day timeframe to request a hearing. To request a waiver of the 30-day timeframe, the Registered Technologist or Candidate must complete a Hearing Waiver form that is available on the ARRT website at www.arrt.org. The Hearing Waiver form must be signed by the Registered Technologist or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Hearing Waiver form and may be assisted by staff members and/or legal counsel of ARRT. Any sanction proposed by the Ethics Committee would become effective on the date the hearing waiver is processed.

Failure to appear at the hearing in person or via teleconference, videoconference, or to supply a written submission in response to the charges shall be deemed a default on the merits and shall be deemed consent to whatever action or disciplinary measures that the Ethics Committee determines to take. Hearings shall be held at such date, time, and place as shall be designated by the Ethics Committee or the Chief Executive Officer. The Registered Technologist or Candidate shall be given at least 30 days' notice of the date, time, and place of the hearing. The hearing is conducted by Ethics Committee members other than any members of the Ethics Committee who believe for any reason that they would be unable to render an objective and unbiased decision. In the event of such disqualification, the President may appoint Trustees to serve on the Ethics Committee for the sole purpose of participating in the hearing and rendering a decision. At the hearing, ARRT shall present the charges against the Registered Technologist or Candidate in

question, and the facts and evidence of ARRT in respect to the basis or bases for the proposed action or disciplinary measure. The Ethics Committee may be assisted by legal counsel. The Registered Technologist or Candidate in question, by legal counsel or other representative (at the sole expense of the Registered Technologist or Candidate in question), shall have up to 30 minutes to present testimony, and be heard in the Registered Technologist's or Candidate's own defense; to call witnesses; hear the testimony of and to cross-examine any witnesses appearing at such hearing; and to present such other evidence or testimony as the Ethics Committee shall deem appropriate to do substantial justice. Any information may be considered relevant or potentially relevant. The Ethics Committee will be afforded 15 minutes in addition to any unused time remaining from the Registered Technologist's or Candidate's time allotment, to ask questions and shall not be bound by any state or federal rules of evidence. The Registered Technologist or Candidate in question shall have the right to make a closing statement before the close of the hearing. A transcript or an audio recording of the hearing testimony is made for in person, teleconference, and videoconference hearings only. Ethics Committee deliberations are not recorded.

In the case where ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the Rules and Regulations of ARRT) or the denial of renewal or reinstatement of certification and registration, the Ethics Committee shall assess the evidence presented at the hearing, or continue the matter and request the Registered Technologist or Candidate provide additional evidentiary information prior to making its decision, and shall subsequently prepare written findings of fact and its determination as to whether grounds exist for the denial of an application for certification and registration or renewal or reinstatement of certification and registration, and shall promptly transmit the same to the Registered Technologist or Candidate in question and to the Board of Trustees at the next Board of Trustees meeting.

In the case of alleged violations of the Rules of Ethics by a Registered Technologist or Candidate, the Ethics Committee shall assess the evidence presented at the hearing, or continue the matter and request the Certificate Holder or Candidate provide additional evidentiary information prior to making its decision, and shall subsequently prepare written findings of fact and its determination as to whether there has been a violation of the Rules of Ethics and, if so, the appropriate sanction, and shall promptly transmit the same to the Registered Technologist or Candidate in question and to the Board of Trustees at the next Board of Trustees meeting.

Potential actions available to the Ethics Committee are set forth in Section 4 (Range of Actions). Unless a timely appeal from any findings of fact and determination by the Ethics Committee is taken to the Board of Trustees in accordance with Section 3 below (Appeals), the Ethics Committee's findings of fact and determination in any matter (including the specified sanction) shall be final and binding upon the Registered Technologist or Candidate in question.

3. Appeals

Except as otherwise noted in these Administrative Procedures, the Registered Technologist or Candidate may appeal any decision of the Ethics Committee to the Board of Trustees by submitting a written request for an appeal within 30 days after the decision of the Ethics Committee is mailed. The written request for an appeal must be accompanied by a nonrefundable appeal fee in an amount to be determined by ARRT. In rare cases, the appeal fee may be waived, in whole or in part, at the sole discretion of ARRT.

Failure to make a written request for an appeal and to remit the appeal fee (unless the appeal fee is waived in writing by ARRT) within such period or submission of a properly executed Appeal Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or Board of Trustees pursuant to such notice.

A Registered Technologist or Candidate may waive the 30-day timeframe to request an appeal. To request a waiver of the 30-day timeframe, the Registered Technologist or Candidate must complete an Appeal Waiver form that is available on the ARRT website at www.arrt.org. The Appeal Waiver form must be signed by the Registered Technologist or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Appeal Waiver form and may be assisted by staff members and/or legal counsel of ARRT. Any sanction proposed by the Ethics Committee would become effective on the date the appeal waiver is processed.

In the event of an appeal, those Trustees who participated in the hearing of the Ethics Committee shall not participate in the appeal. The remaining members of the Board of Trustees, other than any members who believe for any reason that they would be unable to render an objective and unbiased decision, shall consider the decision of the Ethics Committee, the files and records of ARRT applicable to the case at issue, and any written appellate submission of the Registered Technologist or Candidate in question, and shall determine whether to affirm or to modify the decision of the Ethics Committee or to remand the matter to the Ethics Committee for further consideration. In making such a determination to affirm or to modify, the findings of fact made by the Ethics Committee shall be conclusive if supported by any evidence. The Board of Trustees may grant re-hearings, hear additional evidence, or request that ARRT or the Registered Technologist or Candidate in question provide additional information in such manner, on such issues, and within such time as it may prescribe.

All hearings and appeals provided for herein shall be private at all stages. It shall be considered an act of professional misconduct for any Registered Technologist or Candidate to make an unauthorized publication or revelation of the same, except to the Registered Technologist's or Candidate's attorney or other representative, immediate superior, or employer.

4. Range of Actions

(a) No Action

A determination of no action means that there is little or no evidence to substantiate that a violation even occurred. In a situation lacking even a preponderance of evidence, the complaint is determined to be unsubstantiated.

(b) Clear

A determination that there was a violation of the Rules of Ethics but that no further action will be taken against a person's eligibility for certification and registration or for continued certification and registration. The determination of cleared/eligible can be made administratively by staff, by the Chair, or by the Committee depending on the nature of the violation and existing policies addressing authority for taking action. After a violation has been cleared, the applicant or registrant will not be required to report the violation in the future.

(c) Private Reprimands

A private reprimand is a reprimand that is between the individual and ARRT and is not reported to the public. Private reprimands allow for continued certification and registration.

(d) Public Reprimands

A public reprimand is a sanction that is published on ARRT's website for a period of one year. Public reprimands allow for continued certification and registration.

(e) Conditional

Conditional status may be assigned administratively to Candidates and/or R.T.s in those cases where there are additional requirements that need to be met before the ethics file can be closed (e.g., conditions mandated by the court, regulatory authority and/or Ethics Committee). Conditional status is an administrative action and is not considered adverse.

(f) Suspensions

Suspension is the temporary removal of an individual's certification and registration in all categories for up to one year.

(g) Summary

Suspensions Summary suspension is an immediate suspension of an individual's certification and registration in all categories. If an alleged violation of the Rules of

Ethics involves the occurrence, with respect to a Registered Technologist, of an event described in the Rules of Ethics, or any other event that the Ethics Committee determines would, if true, potentially pose harm to the health, safety, or well-being of any patient or the public, then, notwithstanding anything apparently or expressly to the contrary contained in these Administrative Procedures, the Ethics Committee may, without prior notice to the Registered Technologist and without a prior hearing, summarily suspend the certification and registration of the individual pending a final determination under these Administrative Procedures with respect to whether the alleged violation of the Rules of Ethics in fact occurred. Within five working days after the Ethics Committee summarily suspends the certification and registration of an individual in accordance with this provision, the Ethics Committee shall, by expedited delivery or certified mail, return receipt requested, give to the individual written notice that describes: (1) the summary suspension; (2) the reason or reasons for it; and (3) the right of the individual to request a hearing with respect to the summary suspension by written notice to the Ethics Committee, which written notice must be received by the Ethics Committee not later than 15 days after the date of the written notice of summary suspension by the Ethics Committee to the individual. If the individual requests a hearing in a timely manner with respect to the summary suspension, the hearing shall be held before the Ethics Committee or a panel comprised of no fewer than two members of the Ethics Committee as promptly as practicable, but in any event within 30 days after the Ethics Committee's receipt of the individual's request for the hearing, unless both the individual and the Ethics Committee agree to a postponement beyond the 30-day period. The Ethics Committee has the absolute discretion to deny any request for a postponement and to proceed to a hearing with or without the participation of the individual. The applicable provisions of Section 2 (Hearings) of these Administrative Procedures shall govern all hearings with respect to summary suspensions, except that neither a determination of the Ethics Committee, in the absence of a timely request for a hearing by the affected individual, nor a determination by the Ethics Committee or a panel, following a timely requested hearing, is appealable to the Board of Trustees.

(h) Ineligible

An individual may be determined ineligible to obtain or renew certification and registration or ineligible for reinstatement of certification and registration. The time frame may be time limited or permanent.

(i) Revocation

Revocation removes the individual's certification and registration in all categories. The time frame may be time limited or permanent.

(j) Alternative

Dispositions An Alternative Disposition ("AD") is a contract between an individual and the ARRT (as represented by the Ethics Committee) that allows for continued

certification and registration in lieu of revocation, provided the individual performs certain requirements, including, but not limited to, providing documentation, attending counseling and/or submitting to random drug and/or alcohol screening. A Registered Technologist or Candidate who voluntarily enters into an Alternative Disposition Agreement agrees to waive all rights set forth in these Administrative Procedures.

(k) Deny Removal of a Sanction

After a predetermined time, an individual may request removal of a sanction that had been previously imposed by the Committee. Sufficient compelling evidence must be provided to convince the Committee the sanction should be removed or modified. If evidence is not provided, the Committee may deny removal of the sanction. Situations that may result in denial of a sanction removal request include: additional violations of the Rules of Ethics after the sanction was imposed, failure to demonstrate that there has been adequate rehabilitation, and/or continued denial of responsibility.

(l) Civil or Criminal Penalties

Conduct that violates ARRT's Rules of Ethics may also violate applicable state or federal law. In addition to the potential sanctions under the Standards of Ethics, ARRT may, without giving prior notice, pursue civil and/or criminal penalties.

5. Publication of Adverse Decisions

Summary suspensions and final decisions (other than private reprimands and Alternative Dispositions) that are adverse to a Registered Technologist or Candidate will be communicated to the appropriate authorities of certification organizations and state licensing agencies and provided in response to written inquiries into an individual's certification and registration status. The ARRT shall also have the right to publish any final adverse decisions and summary suspensions and the reasons therefore. For purposes of this paragraph, a "final decision" means and includes: a determination of the Ethics Committee relating to an adverse decision if the affected individual did not request a hearing in a timely manner; a non-appealable decision of the Ethics Committee; an appealable decision of the Ethics Committee from which no timely appeal is taken; and, the decision of the Board of Trustees in a case involving an appeal of an appealable decision of the Ethics Committee.

6. Procedure to Request Removal of a Sanction

A sanction imposed by ARRT, including a sanction specified in a Settlement Agreement, specifically provides a sanction time frame and it shall be presumed that a sanction may only be reconsidered after the time frame has elapsed. At any point after a sanction first becomes eligible for reconsideration, the individual may submit a written request ("Request") to ARRT asking the Ethics Committee to remove the sanction. The Request must be accompanied by a nonrefundable fee in an amount to be determined by ARRT. A Request that is not accompanied by the fee will be returned to the individual and will not

be considered. In rare cases, the fee may be waived, in whole or in part, at the sole discretion of ARRT. The individual is not entitled to make a personal appearance before the Ethics Committee in connection with a Request to remove a sanction or to modify a Settlement Agreement.

Although there is no required format, Requests for both sanction removal and Settlement Agreement modification must include compelling reasons justifying the removal of the sanction or modification of the Settlement Agreement. It is recommended that the individual demonstrate at least the following: (1) an understanding of the reasons for the sanction; (2) an understanding of why the action ARRT © September 2023 Standards of Ethics Page 11 of 11 leading to the sanction was felt to warrant the sanction imposed; and (3) detailed information demonstrating that the individual's behavior has improved and similar activities will not be repeated. Letters of recommendation from individuals, who are knowledgeable about the person's sanction imposed; and current character and behavior, including efforts at rehabilitation, are advised. If a letter of recommendation is not on original letterhead or is not duly notarized, the Ethics Committee shall have the discretion to ignore that letter of recommendation.

Removal of the sanction is a prerequisite to apply for certification and registration. If, at the sole discretion of the Ethics Committee, the sanction is removed, the individual will be allowed to pursue certification and registration via the policies and procedures in place at that time as stated in Section 6.05 of the ARRT Rules and Regulations.

If the Ethics Committee denies a Request for removal of the sanction or modification of a Settlement Agreement, the decision is not subject to a hearing or to an appeal, and the Committee will not reconsider removal of the sanction or modification of the Settlement Agreement for as long as is directed by the Committee.

7. Amendments to the Standards of Ethics

The ARRT reserves the right to amend the Standards of Ethics following the procedures under Article XII, Section 12.02 of the ARRT Rules and Regulations.

(Updated 11/14/23)

NOTE: NEW PHONE EXTENSION FOR THE ETHICS DEPARTMENT IS 8580

American Registry of Radiologic Technologists®
1255 Northland Drive
St. Paul, MN 55120
(651) 687-0048

<https://www.arrt.org/pages/resources/ethics-information>

CURRICULUM

The Fresno City College Radiologic Technology curriculum is designed to go from simple to complex. By the completion of the program the student is expected to demonstrate competence in analysis, synthesis, implementation and prioritization in diagnostic radiography. The ability to integrate previous learning from the sciences, humanities and mathematics, into the art and science of radiologic technology, as well as apply it and prioritize it correctly to the specific needs of the patient/client are part of the critical thinking component of patient care and expected of students at the completion of this program. The following lists the program curriculum:

**Fresno City College Radiologic Technology Program
Fall Semester First Year Schedule**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00		RAD 10B Positioning Lab 8:00 – 10:50 <small>Student picks 1 lab section only</small>		RAD 10C Clinical Orientation Lab 8:00 – 5:30	
9:00	RAD 10A Radiation Physics 9:00 – 10:50		RAD 10A Radiation Physics 9:00 – 10:50		RAD 10A Radiation Physics 9:00 – 10:50
10:00					
11:00	RAD 10D Nursing Procedures 11:00 – 11:50	RAD 10B Advanced Positioning Lab 11:00 – 1:50 <small>Student picks 1 lab section only</small>	RAD 10D Nursing Procedures 11:00 – 11:50		RAD 10D Nursing Procedures 11:00 – 11:50
12:00					
1:00					
2:00		RAD 10B Positioning Lab 2:00 – 4:50 <small>Student picks 1 lab section only</small>			
3:00					
4:00					
5:00					

**Fresno City College Radiologic Technology Program
Spring Semester First Year Schedule**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00		RAD 20B Advanced Positioning Lab 8:00 – 10:50 Student picks 1 lab section only		RAD 20C Clinical Observation Lab 8:00 – 5:30	
9:00	RAD 20A Radiation Biology 9:00 – 10:50		RAD 20A Radiation Biology 9:00 – 10:50		RAD 20A Radiation Biology 9:00 – 10:50
10:00					
11:00	RAD 20D Quality Assurance 11:00 – 11:50	RAD 20B Advanced Positioning Lab 11:00 – 1:50 Student picks 1 lab section only	RAD 20D Quality Assurance 11:00 – 11:50		RAD 20D Quality Assurance 11:00 – 11:50
12:00					
1:00					
2:00		RAD 20B Advanced Positioning Lab 2:00 – 4:50 Student picks 1 lab section only			
3:00					
4:00					
5:00					

**Fresno City College Radiologic Technology Program
Summer Semester First Year Schedule**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	RAD 30 Basic Clinical 8:00 – 4:30	RAD 30 Basic Clinical 8:00 – 4:30	RAD 30 Basic Clinical 8:00 – 4:30	RAD 30 Basic Clinical 8:00 – 4:30	RAD 30 Basic Clinical 8:00 – 4:30
9:00					
10:00					
11:00					
12:00					
1:00					
2:00					
3:00					
4:00					
5:00					

**Fresno City College Radiologic Technology Program
Fall Semester Second Year Schedule**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	RAD 40B Advanced Clinical 8:00 – 5:15	RAD 40B Advanced Clinical 8:00 – 5:15	RAD 40B Advanced Clinical 8:00 – 5:15		RAD 40B Advanced Clinical 8:00 – 5:15
9:00					
10:00					
11:00					
12:00				RAD 40A Pathology 12:00 – 2:50	
1:00					
2:00					
3:00				RAD 40C Computed Tomography 3:00 – 4:50	
4:00					
5:00					

**Fresno City College Radiologic Technology Program
Spring Semester Second Year Schedule**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	RAD 50B Specialized Clinical 8:00 – 5:15	RAD 50B Specialized Clinical 8:00 – 5:15	RAD 50B Specialized Clinical 8:00 – 5:15		RAD 50B Specialized Clinical 8:00 – 5:15
9:00					
10:00					
11:00					
12:00				RAD 50A Special Procedures 3:00 – 4:50	
1:00					
2:00					
3:00				RAD 50C Cranium Positioning 12:00 – 2:50	
4:00					
5:00					

Fresno City College Radiologic Technology Program
Summer Semester Second Year (6-week Course)

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8:00	Rad. 60 Concentrated Clinical 8:00 – 4:30	Rad. 60 Concentrated Clinical 8:00 – 4:30	Rad. 60 Concentrated Clinical 8:00 – 4:30	Rad. 60 Concentrated Clinical 8:00 – 4:30	Rad. 60 Concentrated Clinical 8:00 – 4:30
9:00					
10:00					
11:00					
12:00					
1:00					
2:00					
3:00					
4:00					
5:00					

RESPONSIBILITIES OF STUDENTS

FINANCIAL EXPENDITURES - (based on 2023/2024 catalog)

Legal residents of the State of California are required to pay nominal fees. In addition, students may expect other fees and expenses during the length of the Program.

A. Fees – Total for 24 month program

1. Student Health Fee	\$ 126.00	{ \$21.00 per semester – 6 semesters }
2. Enrollment Fee	\$ 3,174.00	{ \$46.00 per unit x 69 units (with no cap) }
3. Parking Fee	\$ 120.00	<u>{ \$30.00 per semester – 6 semesters }</u>
TOTAL		\$ 3,420.00

B. Additional Expenses - (estimates based as of 2024)

1. ARRT & State Examination Fees	\$ 500.00
2. Kettering Seminar	\$ 140.00
3. Identification Markers	\$ 36.00
4. Background Check/Drug Screen	\$ 180.00
5. Name Badge	\$ 1.00
6. Program Pin	\$ 20.00
7. Textbook Bundle (entire Program)	\$ 900.00
8. Uniforms minimum:	
4 sets of scrubs	\$ 280.00
1 Jacket	\$ 60.00
9. Thermoluminescence dosimeter	\$ N/A
10. Trajecsyst	<u>\$ 150.00</u>
TOTAL	
	\$2,267.00

*Non-resident students are required by state law to pay non-resident tuition. For current fees consult the Fresno City College Catalog.

*** Students are advised that prices are approximate and may change without notice.*

TRANSPORTATION

All transportation arrangements are the responsibility of the student. The student must submit current automobile insurance if they are using a car for transportation to and from school and/or any clinical or radiology related school activities/work. Students are responsible for transportation to and from school and the clinical facilities. Students may park only in designated areas both at the College and clinical sites. Refer to the Campus Parking Regulations, outlined in the College Catalog and Hospital Parking Policies provided by the clinical site. Tardiness or absence from clinical facilities due to a poorly functioning automobile is the responsibility of the student. Student will make up tardiness or absence from clinical rotation caused by lack of transportation or unreliable transportation. It is the responsibility of the student to be on time for his/her clinical rotation. Simply put, if your transportation is unreliable, take the appropriate steps to ensure your timely arrival.

CURRENT ADDRESS

Each student must keep their current address and telephone number on file with the Health Sciences Division Office and Radiologic Technology Program officials. This information will be kept confidential unless the student requests otherwise.

BEFORE YOU GET STARTED

Organize your life and time; use a planner, calendar or other device to keep track of assignments, clinical schedules and family obligations.

Get help with daily chores from family and friends - do not try and do it all as you did before the program.

Prepare that school is a full-time job taking 40-60 hours per week of classes, studying and clinical.

Discuss your needs and goals with your family before beginning the Radiologic Technology Program; it will change their life as well.

Make sure you always make it to class and the clinical facilities. Attendance is mandatory while in the program. Personal appointments to your physician and others are to be scheduled outside of the regularly scheduled Program hours.

Make use of time management. Employing a physical activity routine while studying can help with stress and the possible resulting weight gain some people experience.

Find childcare and a reliable back-up for unexpected events.

Consider investing in a computer and the programs that will make your papers and presentation professional. Computer familiarity is a requirement of the school and the Radiologic Technology Program.

Read and organize your syllabus to ensure you know when reading, papers and testing occur so you can prepare ahead of time.

If you need extra units to be full time for financial aid, take those courses that will be less stressful. Check with the Program Director to obtain assistance with identifying a course suitable for enrollment while in the Program.

Be flexible and understand that the faculty and administration are working very hard to provide you with the best radiologic technology education possible.

Rather than aim for a C, aim for an A, you are more likely to succeed, and it will pay off later for passing the ARRT examination and in your professional life as a Radiologic Technologists.

Be aware of your surroundings, assignments, and patient care at all times. You cannot slide- that's when mistakes and disastrous events happen.

The faculty wants you to succeed and they are there to help you. There are also faculty who specialize in mentoring students- seek them out early if you are having problems.

Keep up with your reading in your textbooks and other assignments. Your test questions will come from all sources including the textbook and other reading assignments.

Get enough rest so your mind can absorb the material being provided.

Be prepared for clinical, show up 15 minutes early (this is on time), dressed in a clean official uniform. Ready yourself to embrace the challenges of the field and provide excellent patient care. You are caring for a person who will rely on your expertise.

Consider forming study groups that will help with studying the objectives required for each class.

Support each other. Be kind, remember radiology is the art and science of caring. Practice caring in all settings.

Remember this is a twenty-four-month journey and you develop your knowledge and skills each day. Make the most of each day for your learning, yourself and your friends

and family. This is NOT about the grade; this is about your learning to care for those who ill or need your expertise.

Remember you need to buy all your books in the current edition. Older editions are not acceptable and may be missing vital information needed for assignments or studying.

Try your best not to work while you are in the program. If you must work keep it under 10 hours per week.

Remember there is a Chain of Command in the Radiologic Technology program. With questions, issues or disputes in the clinic, please see the clinical instructor or lead first, then the program director or clinical coordinator, then the Dean of Health Sciences, and last, if necessary, either the Dean of Instruction or Dean of Students. It does not help your case to bypass the chain of command.

Faculty, staff, and administrators have office hours- please use those resources to help with your success. You may be able to drop in sometimes but otherwise make an appointment.

There are many scholarships available through financial aid on campus. Apply for them [here](#) so you can work fewer hours and study more.

See the health science counselors at least once in your first year of the program to make sure you are on the right track with your courses and future plans.

Join the American Society of Radiologic Technologists and the California State of Radiologic Technologists. These professional organizations will help you stay up in the field of Radiologic Technology.

STUDENT SUCCESS

One of the Radiologic Technology Program's educational goals is to help ensure student success. There are several ways that this is accomplished:

Contact the instructor about any assistance, aid, or study strategies that may be useful to employ. The instructor will have information on the test-taking strategies. It is important, if the student is having trouble with the course that the student keeps in contact with the instructor and any available tutoring, counseling or mentoring. Although it is the responsibility of instructors to contact students if the student begins to fail, it is also the student's responsibility to contact the instructor.

Study groups have been shown to be effective, and students are encouraged to form study groups immediately to help with studies throughout the program. Research states that

study groups are predictors of success for successful completion of radiologic technology classes. Study groups are a form of peer teaching, the most successful form of learning.

Scholarship applications for FCC are available at the Student Services Building. Obtain one as soon as possible and file for a scholarship before the deadline.

EMPLOYMENT

Due to the concentrated and intensified nature of the Radiologic Technology Program, full-time employment is not possible while enrolled in the program. However, if a student must accept part-time employment, this implies that the student will:

1. Not function under the job description of a Radiologic Technologist.
2. Not use the abbreviation "R.T. Intern" after their name for any purpose.
3. Not accept employment hours, which conflict with class/clinical time.
4. Not work more than 10 hours per week.

Students will be counseled not to work if grades warrant concern.

REQUIRED DOCUMENTATION

Individual student SharePoint folders are created for each student after the New Student Orientation. These personal folders are private folders where student records are uploaded and maintained throughout the program. Student records within these folders are ONLY available to the individual student whose name is on the folder and program faculty members. All required documentation must be uploaded into student SharePoint folders prior to attendance in any radiology classes. In addition, students must upload all immunization records into their personal SharePoint Immunization folder after orientation and prior to the first day of clinical assignments. Students are required to take a Health Care Provider CPR course at Fresno City College, which is held over the summer prior to starting the program. All students are required to complete a background check and drug screen to comply with hospital requirements prior to starting the program. There is NO flexibility regarding these requirements. Students will not begin their clinical rotations until all required documents are uploaded into the students personal SharePoint folders and they have been cleared to start by the hospitals.

Students will be dropped on July 15th prior to the start of the program due to non-compliance if all records are not uploaded into the SharePoint folders.

Students are also required to begin uploading all immunization records after the "new student orientation" within American Databank's Complio system. Complio is used to release all immunization records to our affiliated hospitals to complete their onboarding process.

You must carry your Clinical Education Competency Record & Logbook with you to present to the hospital upon request and for the instructor to sign off when you perform skills in the clinical area. The instructor may send you back to the skills lab if you do not demonstrate proficiency in the skills required from previous classes and this new class.

IMMUNIZATION

Hepatitis B can be prevented with the Hepatitis B vaccine, which is offered at Fresno County Department of Public Health or by your physician. The student must submit a positive titer, regardless of their immunization status. Your body can make Hepatitis-B antibodies through vaccination (3-series dose or 2-series dose – Heplisave-B {Dynavax}) or having recovered from the disease. The series must be completed before entering the second rotation of the student's second semester. (*Timetable 3-dose: Injection #1 – one month – injection #2 - five months- injection #3*) or (*Timetable 2-dose: Injection #1 – one month – injection #2*). The student must show documentation of a yearly Influenza vaccine or signed paperwork of declination. Please note, some of our affiliates require students to have Influenza vaccinations and DO NOT accept declinations. The student must show proof of immunity to: Rubella (positive titer or 2 documented dose), Rubeola (positive titer or 2 documented doses), Mumps (positive titer or 2 documented dose), and Varicella (positive titer or 2 documented doses). It is also required that students are current on Tetanus, Diphtheria, and Pertussis injections.

It is the responsibility of the student to demonstrate their eligibility for hospital entrance during the 24-month program by uploading and maintaining current immunization records within their personal SharePoint Immunization folder and within American Databank's Complio system. Students will not be allowed in the clinical setting if current records are not available to program faculty and the hospitals.

TB SKIN TEST

It is mandatory for you to have a TB skin test every year while you are in the Radiologic Technology Program unless you have tested positive for TB (see below). The results of that test must be provided to the Radiologic Technology faculty members and uploaded into the students personal SharePoint Immunization folder. It is also advised that you retain a copy for your records. More information will be given during your orientation about the timing of your TB skin test.

T.B. CLEARANCE FOR RADIOLOGIC TECHNOLOGY STUDENTS WHO ARE POSITIVE REACTORS

Purpose:

To determine that a student is free from T.B. upon entry into the Radiologic Technology Program.

Policy:

Students entering the Radiologic Technology Program who have a history of a positive T.B. skin test with documentation and have been treated with INH, may be cleared by a QuantiFERON-TB Gold test annually.

Students who have a history of a positive T.B. skin test and do not have proper documentation or have not been treated with INH must be cleared by a QuantiFERON-TB Gold test annually.

HEALTH EXAMINATION FORM

All radiologic technology students are required to have a physical examination by a medical doctor. The M.D. is attesting to the fact that the student is capable of carrying out the duties of a radiologic technologist as specified in this handbook as **Essential Job Functions of a radiologic technologist.** In addition, the M.D. is documenting that the student is free of any diseases, physical or mental limitations that would impair the student, be harmful to those around them or make it unlikely for them to provide safe effective care to the patients under their care. The radiology technology department will provide the examination forms that must be completed by the doctor. **We will only accept this form!** This completed form must be uploaded into the students personal SharePoint folder.

CPR

Prior to beginning the Radiologic Technology Program and throughout the program, you are required to have a valid CPR Card. Classes to earn this card are available through Fresno City College only. Students must take a CPR class with their cohort. You will be given the date of the CPR class at orientation.

GENERAL LIABILITY INSURANCE/MALPRACTICE INSURANCE

The college carries general liability insurance on students who are participating in college activities. **THIS POLICY HAS SOME RESTRICTIONS.**

1. The policy pays only if there is no other coverage.
2. The policy has a strong pre-existing clause. Accordingly, if an old injury or condition is aggravated, the claim will be denied.
3. Students will be given the phone number to “Company Nurse” with instructions in case of workplace injury.

It is essential that program faculty members be informed about all injuries including those at the hospital or other health facilities as soon as possible. The reason for this is that the FCC insurance carrier must be notified within 10 days of injury. This includes needle sticks; patient induced injuries, or any other accident or injury that occurred while actually participating in your class assignments as part of the Radiologic Technology Program.

According to State Center Community College District Board policy, all students with Health Career Majors at Fresno City College are required to carry professional malpractice insurance coverage of at least \$1,000,000 per occurrence and \$5,000,000 per year. **This is the financial responsibility of the College.**

The Radiology Department will provide a copy of the insurance policy to the hospitals where our students attend their clinical rotation.

If you have any questions regarding the insurance and/or procedure, please contact the Allied Health Division at 244-2604.

Accident Insurance

Student insurance coverage is provided for all students for accidents that occur on campus or at college related activities including clinical education. All injuries sustained by students in the clinical areas or on campus must be reported to the Radiologic Technology Program Director and the “company” nurse. It is the responsibility of the student to file that report in order to be covered by Workmen's Compensation through the school. Failure to report accidents and complete the required paperwork within ten (10) days from the time of the injury may result in rejection of the claim by the student insurance.

Students may go to their personal physician or be treated in the Hospital Emergency Room if medical attention is needed. **Treatment of students in the Emergency Room is not free** regardless of whether or not hospital personnel suggest they go there.

Incidents

Incident reports will be completed and placed in the student's file when a safety violation or injury occurs in the clinical area. This will be done even if the health agency does not require that an official report be submitted. The student and Clinical Instructor must sign the report. A copy of the incident report should be forwarded to the Radiologic Technology Program Director. Should you observe any injury to a patient caused by someone else and are asked to sign an accident report, sign it as a witness.

IMPORTANT! IF YOU WERE NOT RESPONSIBLE, SIGN REPORT, BUT DESIGNATE YOURSELF AS A WITNESS.

AMERICAN DISABILITY ACT FOR RADIOLOGIC TECHNOLOGY ESSENTIAL JOB FUNCTIONS

1. Work Hours:

Student must be able to work 40 hours per week at Clinical Education Setting.

2. Physical Demands:

Move and operate varied medical equipment and perform duties such as but not limited to:

- a. Lifting patients of various sizes and weights onto and out of beds.
- b. Maneuvering, pulling, pushing, lifting, and turning of patients in awkward positions.
- c. Performing related tasks which require use of hands, arms, shoulders, feet, legs and spine.
- d. Participating in work related activities that require extensive bending, kneeling, crouching, stopping and standing and critical movements.

3. Work Environment:

- a. Must be aware of potential risks in health care settings which require wearing of safety equipment such as masks, head coverings, glasses, latex or non-latex gloves, shoe coverings, etc.
- b. Must be able to meet hospital and college performance standards.
- c. Must travel to and from training site.

4. Cognitive Abilities:

- a. Must be able to understand and work from written and verbal orders.
- b. Must possess effective verbal and written communication skills in English

sufficient to safely work in academic and clinical settings.

- c. Must be able to understand and implement related academic and health regulations, health care facilities, hospital policies, and procedures.
 - d. Must follow all state, federal and local hospital policies regarding confidentiality rules on patients personal, family and health related information.
 - e. Must possess technical competency in patient care and related areas.
 - f. Must be able to perform mathematical calculations to determine correct radiation dosages and contrast administration.
 - g. Must be able to speak in English to individuals and small groups in a manner that can be readily understood.
 - h. Must be able to conduct personal appraisals on patients.
 - i. Must be in a functional state of mental health.
 - j. Must be able to demonstrate the ability to adapt to changing patient care and professional situations.
 - k. Must not have any disability that would interfere with cognitive, physical or sensate ability to function safely in patient care radiology situations.
5. CPR:

Prior to beginning the Radiologic Technology Program and throughout the program, you are required to have a valid CPR Card. Each cohort will take the CPR class together, which is normally held in June at Fresno City College. You will be given the date of your CPR class during orientation.

DISABLED STUDENTS PROGRAM AND SERVICES

Fresno City College has a program designed to assist students with various disabilities. If you have a physical, mental, sensate, or learning disability, or think that you might have one, please go to the office for disabled student's services for counseling and evaluation. Faculty cannot assist you with any special accommodations until you have been evaluated and determined what special assistance you may need. Make an appointment to see a DSP&S (Disabled Student Programs and Services) counselor at (559) 442-8237 to determine the best next action for you.

If you do have special needs as identified by DSP&S, then special testing considerations will be conducted by the radiology faculty. If radiology faculty cannot accommodate the special testing need, then schedule testing will occur with DSP&S in their offices.

PRE-APPLICATION REVIEW OF ELIGIBILITY BY ARRT

Policy:

Individuals having been convicted of crimes will file a pre-application with the American Registry of Radiologic Technologists (A.R.R.T.) to obtain a ruling on the impact of the convictions on their eligibility for certification and registration. A conviction of, a plea of guilty to, or a plea of nolo contendere to an offense which is classified as a misdemeanor or felony constitutes a conviction for A.R.R.T. purposes.

This process may enable the individual who has criminal convictions to avoid the delays in processing an application for examination which will be made at the time of graduation from Fresno City College, Radiologic Technology Program. The pre-application for examination must be made prior to the start of the program. Submission of the pre-application does not waive the application for examination fee, the application deadline or any of the other application procedures.

The pre-application review applies only to crimes specified on the pre-application and does not apply to any crimes occurring after submission of the pre-application or otherwise not reported on the pre-application.

Pre-application fee is \$100.00 (fee is subject to change) and can be accessed here:

[ARRT Pre-Application](#)
(hyperlink updated 10/31/23)
Fee is NOT REFUNDABLE.

Procedure:

Prior to the start of the program, students who qualify or think they qualify for a Pre-Application Review of Eligibility will contact the Program Director immediately. The Program Director will answer any questions as to the student's eligibility and will assist the student in filling out the pre-application form (*see Attachment B*). It is the student's responsibility to ensure the application is to the satisfaction of the A.R.R.T. Ethics Committee.

APPLICATION FOR EXAMINATION BY ARRT

Policy:

Students that successfully complete the Radiologic Technology Program at Fresno will sit for the Registry Examination by the American Registry of Radiologic Technologist (ARRT). The ARRT is interested in the mission to identify individuals qualified in the use of both ionizing and non-ionizing radiation for the purpose of diagnostic medical imaging. To achieve this mission, the ARRT requires that all candidates seeking registry must submit to an examination. Successful candidates will receive a national recognized certificate allowing them to practice Radiologic Technology nationally with the addition of a possible State license.

Procedure:

The Program Director will ensure that each student is eligible to receive their AS degree in Radiologic Technology at FCC, and provide students a link to the [ARRT Primary Eligibility Pathway Handbook](#) no later than April 1. The program director will assist students in completing the online application for examination. It is the student's responsibility to complete the online application form once they are eligible to apply, which is 3 months prior to the last date of the program.

JOB PLACEMENT

As they become available, students should periodically review the job opportunities posted in the classroom. Students are encouraged to become familiar with employment patterns as well as salary ranges. For this purpose, membership to professional periodicals, such as, [ADVANCE](#) for Radiologic Science Professionals, [Journal of the American Society of Radiologic Technologist](#) and [R.T. Images](#) can be obtained online to assist future graduates, recently graduated technologists are requested to inform the radiologic technology staff of openings within their departments once they enter the work force.

ACADEMIC DISHONESTY

It is the belief of the program faculty that academic honesty translates to personal and professional integrity in the clinical setting. We, in the radiology profession, are held to the highest level of integrity due to the special circumstances associated with the care of the patient in our charge. It has been demonstrated that those who seek to gain advantage through questionable means, either in theory or clinical courses, compromise the safety of their patient. They also place their instructors who manage the care of the patient in the clinical setting and the hospital or health care facility at risk. Academic dishonesty ultimately results in lack of trust and creates turbulence in the teaching environment. It is the consensus of the faculty that those who are proven to be dishonest or have compromised patient safety will be given the minimum of a fail grade for the assignment. This will result in loss of points and further, the student may be referred to the Dean of

Students for disciplinary action or dropped from the program. Students may seek due process through the student grievance process.

Academic dishonesty is unacceptable and will not be tolerated by Fresno City College. Cheating, plagiarism, and collusion in dishonest activities erode the college's educational and social role in the community. Academic dishonesty in the Radiologic Technology Program may include but is not limited to:

Any student not following the requirements and guidelines of this Student Handbook, course syllabi, and instructors' directions. Students must maintain accurate clinical time records and clock into the program's online program management system (Trajecsys) only within the hospital setting.

All course evaluations must be done by the clinical instructor, NEVER by the student. Actions that circumvent the rules and regulations established by the Fresno City College Radiology Department, affiliated hospitals, course syllabi, and instructor's directions constitute acts of dishonesty.

CHEATING

Cheating is the act of deception by which a student misleadingly demonstrates that he/she has mastered information on an academic exercise. Examples include but are not limited to:

1. Copying or allowing another to copy a test, paper, project, or performance.
2. Using unauthorized materials during a test, for example notes, formula lists, or "cheat sheets".
3. Taking a test for someone else or permitting someone to take a test for you.
4. Removal of the exam booklet and/or answer sheets from the classroom and/or instructor's office without express permission is a form of cheating.
5. Any falsification of clinical hours/time records on Trajecsys will be an immediate dismissal from the program, and students will not be allowed re-admittance into the program.

PLAGIARISM

Plagiarism is the act of representing the work of another, as one's own without giving credit. Plagiarism includes but is not limited to:

1. Incorporating the ideas or works of another's work without giving appropriate credit.
2. Representing another's artistic or scholarly works such as musical compositions, computer programs, photographs, etc. as one's own.

DISCIPLINARY PROCEDURES

When a faculty member discovers a violation of the cheating or plagiarism policy, the faculty member:

Will arrange a conference with the student and at that time advise the student of the allegations.

Will notify the Program Director and the Dean of the Allied Health as well as the Dean of Students in writing that an act of dishonesty has occurred. This report will become a part of the student's permanent record. A copy will be mailed or given to the student.

May give the student an F for the assignment and/or for the course, disciplined by the Dean of Students or dropped from the program, depending upon the seriousness of the infraction.

If the student's permanent record indicates more than one occurrence of cheating or plagiarism, the student may be placed on probation, suspended, or expelled.

A student may appeal to the Academic Standards Committee any sanctions based upon an allegation of dishonesty. Such an appeal must be made within fifteen (15) days after notification is mailed or given to the student.

Ethical Issues – Those students who engage in questionable ethical behavior may be subject to dismissal from the Radiologic Technology Program after review by the faculty and Fresno City College administration. The student appeal process is the same as cheating and plagiarism. (*See the Fresno City College Catalog*)

A student will be removed from the program due to aggressive, disruptive, or stalking behaviors or any type of verbal threats, including bullying.

SUSPENSION

A situation may arise that may require immediate and effective discipline, where extremely serious infractions of rules have occurred. When this situation develops, the student will be suspended from the clinical setting pending a full investigation of the situation. An example of actions that may lead to immediate suspension and possible dismissal include:

1. Under the influence of drugs or alcohol while on duty.
2. Physical abuse to a patient, visitor, coworkers, or other personnel.
3. Petty Thefts.
4. Sexual misconduct.
5. Intentional negligence toward patients.

6. Students who falsify Clinical Education Setting Timesheets or Evaluations will be immediately removed from the program and not re-admitted.

GUIDELINES FOR PROFESSIONAL CONDUCT

The fact that you have entered the profession of radiology intensifies the standards which you present as an individual. Your personality is the total of the behavior patterns by which you are known as a unique person. In taking inventory of your standards, consider the following:

Personal Appearance

The patient care environment includes the appearance and behavior of those caring for the patient. Therefore, the student technologist's appearance is to provide a therapeutic environment for the patient and is NOT a place for the student technologists to express individuality in a manner that is not therapeutic for the patient. Asepsis and comfort are integral parts of patient care. Student interference with these aspects of patient care due to uniform, hair, rings, nails, jewelry, or any other contributing factors must be corrected as determined by the instructor. Appropriate dress in the classroom setting is also a reflection of professional behavior so please come to class in a clean and neat uniform, which is conducive to a positive learning environment.

Uniform

Only the approved uniform can be worn by the students. **This uniform can ONLY be purchased in the bookstore!** The uniform must be clean, neat, pressed, complete, and in good repair. Each hospital reserves the right to have students comply with the individual hospital uniform code. The hospital policy can supersede that of Fresno City College.

The uniform is to be worn only during assigned hospital experience, when given specific permission to do so by the Program Director or Program Instructors, and to the hospital to research assignments. The uniform is to be worn during didactic and laboratory classes on campus as well. Because uniforms are worn daily, you will need to purchase a minimum of 3 scrub tops and 3 scrub bottoms to start with. As you progress in your training and your scrubs begin to wear, you may need to purchase more to maintain a professional look.

The standard approved uniform for all students includes black pants, red tops with approved Fresno City College Radiologic Technology Program Logo, red jacket with Radiologic Technology Program Logo (*from bookstore only*), black calf-length socks,

and black shoes (constructed to ensure safety and support). All shoes worn in clinical areas should be black, clean, in good condition and enclosed - NO OPEN areas on shoes (ex: no clogs or Birkenstocks). Any undergarments or long sleeve shirts worn under scrub tops must be black. Any long sleeve shirts under the scrub tops must be fitted and not loose. Visible tattoos must be covered with a black sleeve in the clinical setting.

All students are required to wear a name badge (college ID) at all times.

Pins or any other paraphernalia, including lanyards, **must not** be worn at any time. Students **are not** to use the abbreviations CRT, A.R.R.T. after their name until they have verification of a passing national examination test score and proof in hand (which can only happen after graduation from the program).

"Fanny packs", "cell phones" and "pagers" **are not** permitted as part of the uniform. Cell phones and pagers **are not allowed** in the hospital and must be silenced while in the classroom.

Students may also wear red jackets with approved Fresno City College Radiologic Technology Program Logo (received from the bookstore) over their scrub tops on cold days or during the winter. No other sweaters, jackets, or vests or allowed over the uniform.

Hair

Hair must be neat and clean, and not styled in such a manner that it could interfere with patient care or safety while on clinical assignments.

For women students, hair must be neat and clean and the guideline for length of hair is off the collar. No extreme hairstyles or colors are permitted. The hospital, in support of their patients, may ask for modification in hairstyles. Long hair must be worn up or tied back neatly.

For men students, hair must be neat clean and off the collar. No extreme hairstyles or colors permitted. The hospital, in support of their patients, may ask for modification in hairstyles. Sideburns should be neatly trimmed and groomed (not long and bushy) If required by hospital policy, beards must be shaved off. Beards may not be started during the semester.

Make-up and Perfume

Moderate, simple makeup, if any, is recommended. Extreme eye makeup (including false eyelashes) and extreme shades of lipstick and heavy cake makeup are discouraged. Clinical instructors, at their discretion, may ask students to alter makeup, nails, and jewel. Consideration must be given to the patient. Heavy fragrances are often offensive to those

who are ill, and many people are allergic to perfume so do not wear it at any time while in the clinics or the classroom.

Nails

Fingernails will need special care to ensure patient safety and asepsis and must be worn according to hospital nail policy guidelines. No artificial nails, acrylic nails or nail polishes are allowed. Natural nails must not extend beyond the tips of the fingers.

Jewelry/Piercings

Only stud earrings are allowed. No hoop earrings or spacers are allowed. No other jewelry shall be worn while in the hospital except an engagement ring and/or wedding band. (Jewelry is discouraged in the interest of asepsis and safety.)

Piercings are allowed per hospital guidelines. Hospitals have the right to request the removal of piercings, and this must be honored while at that rotation. Failure to do so will result in the removal from the hospital and the student cannot receive a final semester grade higher than a “C.”

Speech and Conversation

Be aware of your responsibility as well as the legal implications in respecting the rights of others, especially the right to privacy. Confidentiality of patient information must never be violated.

- Be aware of and follow the HIPAA regulations and any others determined by the health care setting you are learning or working in.
- Do not discuss any patient, patient family member or any member of the health team, or any disease or symptoms in a place where you might be overheard and possibly infringe on someone's right to privacy.
- You must never take any patient personal, family or health related information out of the hospital setting.
- Any written assignments must not have any patient identifying information on them and are to be treated with confidentiality, i.e., **do not share any of the information or paperwork with others** and only give that information to the instructor who can then provide feedback and grading.

Quality of Care

Patients have the right to safe care.

Radiology students are expected to maintain a physical and mental state, which will enable them to meet these professional responsibilities. This includes having sufficient and proper rest and nutrition prior to class attendance so that proper learning and clinical care can be accomplished. They must be intellectually and technically prepared to give proper patient care. Improper student conduct in the clinical area can result in civil liability, loss of clinical facilities, and loss of program accreditation or loss of licensure. At no time would a student assume responsibility for patient care without the knowledge and supervision of his/her instructor.

Determination of unsatisfactory performance in the clinical area will be based on clinical objectives, clinical observations, film critique sessions, a student's professionalism, and the ability to follow college and hospital policy based on safe and competent practice.

A conference will be held for failure to transfer classroom knowledge to clinical training, for failure to adhere to hospital, college, or Program policy; or failure to demonstrate knowledge skill and judgment at the expected level. The Program Director will meet with the student and discuss the reasons for, and means of, correcting the cause for the conference. A re-mediation plan will be drawn up for discussing/documenting the cause of the Radiologic Technology Departmental Probation, the terms of the probation and the length of time identified for improvement and re-evaluation.

Students removed from a facility due to unsafe practices, unsafe patient care, or HIPAA violations will be removed from the program and reentrance will not be allowed.

Students who are removed from a facility due to any reason, except those stated above, cannot receive a final semester grade higher than a "C."

Should students have the misfortune of being dismissed from two separate clinical facilities due to any reason, except those listed above, will be removed from the program and not allowed to re-enter.

Patient Records

Patient records may be used only for the purpose of providing patient care. They may not be removed from the department. No information may be acquired from patient records for classroom or outside purposes.

Guidelines and Policies for Clinical Education

Clinic Attendance

Students must attend clinical the full assigned hours. Any time a student is away from a clinical setting, whether planned or unplanned, is considered an absence. Leaving a clinical session without instructor permission is contrary to program policy, and students will receive a demerit. It is expected that students will be on time (15 minutes early) and will stay the entire time. Those leaving early without instructor permission will be considered absent and subject to discipline. All absences will be recorded and there are no excused absences. Actual reporting times, dates assigned, educational affiliate and individual assignments are distributed during orientation at the start of each semester.

Students are required to clock-in and clock-out every day in the clinics. Failure to do so may result in the loss of the hours in question. The program's computer-based time clock software Trajecsys will keep a running total of the student's clinical hours as well as a record of clinical rotations with clock-in and clock-out times. Students asking clinical preceptors to falsify clinical hours will lead to immediate dismissal from the program and re-admittance will not be allowed.

Students will be given a demerit for each recorded tardy or absence to the clinical educational site. If a student receives 3 demerits due to tardiness or any other reason, their final semester grade will lower by one letter. Six demerits due to tardiness or any other reason in one semester will lower their final semester grade by two letters, nine demerits in a semester will result in their final semester grade lowering by 3 letters, etc.

Clinical absence is recorded on an hourly basis for each course of the program and can impact negatively on the student's performance evaluation.

Students who are ill on a clinical day and unable to report to the hospital where they are assigned will be responsible for notifying the clinical coordinator, and the clinical instructor at least one-half hour prior to the scheduled start time. Failure to comply may result in an infraction on your evaluation and a demerit.

According to college policy students who miss two successive weeks of classes in a semester long course will be dropped from the course and program.

Making-up Clinical Education Setting Missed Hours

Individual consideration will be given to the student with a valid excuse after consultation with the Clinical Instructor, college faculty and Program Director. If the student is allowed to make-up clinical hours, the following will hold true:

1. All hours must be made-up before the end of the semester agreed upon by faculty and director.
2. All make-up of clinical education setting hours must be performed at the clinical setting where the student is currently scheduled during that particular semester.

3. If the student fails to make-up delinquent hours, that student will not be allowed to graduate or sit for the national examination.
4. Student may not put in more than 40 hours total, combined clinical and academic hours per school week unless they are “voluntarily.”

Falsification of Clinical Education Setting Timesheet and Evaluation

Each affiliated clinical facility has designated computers with accepted IP Addresses for students to “clock-in” and “clock-out” throughout the day. Students *must* use these designated computers only, and not personal computers or cell phones to “clock-in” or “clock-out.” The IP Addresses for all “clock-in’s” and “clock-out’s” will be closely monitored by the program Faculty and its Clinical Instructors. Any unaccepted computer and IP Address used to “clock- in” or “clock-out” will be considered falsification of program documents, resulting in disciplinary action up to and including expulsion from the program. Also, falsification of any information on evaluations will not be tolerated and will lead to expulsion from the program as well. The Clinical Education Setting Clinical Hours and Evaluations are permanent records and serve as documentation of the student’s and intern’s time spent, quality of performance, and overall evaluation in each facility.

Being dropped from a clinical course requires that the concurrent lecture course be dropped also, and the student will be dropped from the program.

Students cannot on their own, stop going to one course that is concurrent. If a student does so, he/she will be dropped from the program and will need to see the Dean.

Regardless of the circumstances, those courses in which a student receives a "D", or an "F" grade will be dropped from the program.

If students, by their absences, cannot meet objectives of the course by the time designated for each objective, and to the degrees of mastery designated by the instructor, students may be dropped from the program.

Students who fail to complete clinical hours during any semester will be given an Incomplete “I” and not be allowed to start the next semester.

Clinical Grades

Clinical grades are derived by utilizing the Clinical Grade Evaluation Process. The intent of this evaluation tool is to objectively arrive at a clinical grade by utilizing a point system that correlates weighted values to those factors that are of our opinion, important in assisting the student to become a competent, responsible radiographer.

Students may not receive a final grade for the semester higher than a “C” should they have the misfortune of being removed from a clinical setting and asked not to return. A student will be permanently removed from the program after two hospital removals and not allowed to return.

Clinical grades will be factored on a point value. Students will be graded on the following basis: Professional Behavior Evaluation by staff technologists, final performance evaluation by the clinical instructor, completion of assigned clinical competencies, attendance and punctuality, up-to-date time sheets, and exams completed. If a student is short hours at the end of a semester, a deduction of 10 points for every hour short will be enforced. The following grading system will be used for clinical grades:

A – 100 – 92%
B – 91 – 83%
C – 82 – 75%
D – 74 – 65%
F – 64 – 0%

Clinical Exams

Students are required to keep a record of radiographic examinations they have observed, assisted, or performed. These records are to be compiled daily, utilizing the computerized Daily Record of Examinations and the Clinical Education Competency Record and Logbook. All competencies will be verified by the Clinical Instructor and then submitted into the programs computer-based clinical records tracking system located at each facility.

Clinical Advisement

If a student is experiencing difficulties or clarification related to their clinical assignment, the student must notify their supervising technologist. If the situation is not resolved to the satisfaction of the student or technologist, the student may request the help of the clinical instructor (technologist who is responsible for the overall educational experience within the Education Setting). If either party cannot reach satisfaction, the clinical coordinator (faculty instructor) must be notified. If agreement cannot be reached the Program Director will reach a settlement.

If a student receives an unsatisfactory clinical supervision evaluation in the clinical area, at midterm, the student may be placed on probation for the remainder of the semester. **Failure to show satisfactory improvement and/or comply with the re-mediation terms will result in dismissal from the Program.**

Determination of unsatisfactory performance in the clinical area will be based on clinical objectives, clinical observations, radiograph critique sessions, a student's professionalism, and the ability to follow college and hospital policy based on safe and competent practice. **Students dropped due to unsafe clinical practice or unsafe patient care or have the misfortune of being dismissed from two separate clinical facilities due to any reason will be removed from the program and not allowed to re-enter.**

Students may not receive a final grade for the semester higher than a "C" should they have the misfortune of being removed from a clinical setting and asked not to return. A student will be permanently removed from the program after two hospital removals.

Student Orientation to Clinical Facilities

Policy

All students must be oriented to the Education Setting where clinical experience is provided and to specialized areas such as Computerized Tomography, Magnetic Resonance Imaging, Ultrasound, Nuclear Medicine, Radiation Therapy, Interventional Angiography, Operating Room, Emergency Room, Nursery, ICU and CCU. It is the responsibility of the Clinical Instructor to provide this orientation either personally or by arrangement with other staff members.

Procedure

Orientation will include:

- a. Parking regulations
- b. Cafeteria procedure:
 - i. Times and duration of meals and coffee breaks.
 - ii. Provisions for students carrying lunches.
- c. Washroom facilities for male, female, or non-specific.
- d. Locker facilities and/or proper location for books, outer clothing, purses, and valuables storage.
- e. Safety and emergency procedures:
 - i. Fire regulations
 - ii. Codes (resuscitation team) (fire)
 - iii. Security guard services

- iv. Reporting accidents and incidents
 - v. Disaster plan
- f. Absence or tardiness in the clinical area:
 - i. When to notify
 - ii. Where to notify
 - iii. How to notify
 - iv. Who to notify
- g. Location of student assignment:
 - i. Where posted, specific objectives, etc.
- h. Learning resource materials:
 - i. Library (if provided): rules and privileges
- i. Orientation to Department:
 - i. Review of routine views for procedures
 - ii. Patient transportation procedures to and from department.
 - iii. Operation of equipment:
 - 1. Fluoroscopic and Radiographic machines
 - 2. Mobile units: C-arm and portables
 - iv. Location of equipment and supplies:
 - 1. Cassettes and grids
 - 2. Contrast media
 - 3. Immobilization aides
 - 4. Lead protective devices
 - 5. Lead markers
 - 6. Emergency cart/supplies
 - 7. Linens
 - 8. Other accessory items; needles, syringes, tourniquets, I.V. tubing, emesis basins, bandaging materials, etc.
 - v. Operation of Special Equipment, Monitors, I.V.'s, Oxygen
- j. Introduction to key personnel:
 - i. Radiologist (s)
 - ii. Chief Technologist/Manager

- iii. Staff Radiologic Technologist
- iv. Key Ancillary Staff

k. Conference facilities

- i. Location of rooms
- ii. Special regulations (need for quiet, etc.)

l. Communications during clinical assignment:

- i. Contact in case of emergency
- ii. Making outside phone calls from hospital
- iii. Cell phones not permitted in clinical facility, leave in locker
- iv. Visiting patients
- v. Contacting other students

m. Information about hospital:

- i. History
- ii. Bed capacity
- iii. Administrative personnel
- iv. Telephone protocol

Clinical Education Policy

All students must be appropriately enrolled in their courses before going into the clinical setting. It is the responsibility of the student to ensure that all their academic financial responsibilities are met prior to attendance at class. Students who are not on the class roster will be asked to leave and it is the student's responsibility to get the problem corrected with proof provided of the correction.

The clinical education received in this Program provides the student with the necessary clinical background in the manipulation of equipment, the handling of all types of patients, the setting of proper radiographic techniques, image processing, and archiving skills. The Program requirement is a minimum of 1850 clinical education hours. All areas of these basic skills must be mastered before the student can successfully complete the Program and be eligible to take the examinations for the American Registry of Radiologic Technologists and certified by the California State Department of Health.

Clinical Assignments

Policy

By application and acceptance into this Program the student has agreed to accept clinical assignments in whatever hospital/clinic she/he is assigned, regardless of geographical distance.

Procedure

The Clinical Instructor, with the approval of the Program Director, is responsible for arranging the diagnostic and ancillary clinical education rotations. Criteria that are utilized to provide a student the necessary opportunity for achieving acceptable clinical competency objectives include the following:

1. Several reports are considered when selecting clinical assignments in an effort to insure a balanced clinical educational experience in terms of quantity and variety of radiographic examinations and clinical hours. These are:
 - a. Student Progress Report - Clinical Hours
 - b. Student Progress Report - Evaluations
 - c. Distribution of Radiographic Exams by Regions
2. Students will be assigned to the clinical education setting by lottery. A student will not be assigned to education setting more than once, if at all possible.
3. Students are not permitted to switch clinical experience assignments. If the student is unable/unwilling to complete a clinical assignment for whatever reason, that student will be dropped from the program. Reinstatement into the program will be at the discretion of the Program Director.

During the two-year training Program, the student may rotate through the following clinical assignments for the length of time prescribed by the Program Director and Clinical Instructors:

1. Front Desk (admissions)
2. Diagnostic Radiologic Procedures (IVP's, BE's, GI's, routine examinations.
3. Portable Radiography
4. Surgery
5. Special Procedures Radiography (vascular)
6. Computerized Tomography
7. MRI (elective)
8. Nuclear Medicine (elective)
9. Radiation Therapy (elective)
10. Ultrasound Technology (elective)

Miscellaneous

When not busy, there will be no loitering. Use idle time for studying. Now is the time to ask questions if answers are needed regarding a specific topic.

Breaks and Lunch Periods

Generally, there will be morning, lunch and afternoon breaks. Observe the departmental policy regarding breaks and lunch periods, and do not take excess advantage of the coffee room/lounge. Lunch breaks are for 30 minutes and are not to be counted as hours towards clinical experience and should not be included in the total hours worked per day.

Personal Phone Calls

No personal phone calls are permitted while in the clinical area except for emergencies. Departmental telephones may not be used for personal calls and cell phones are not permitted in the clinical facilities. Students found using personal or departmental phones for personal use will be given a demerit. Students may ask for the department number to give to immediate family members for contacting the student in case of an emergency.

Jury Duty

Students who are called for jury duty should advise his/her clinical instructor and the director of the Radiologic Technology Program as soon as the summons is received.

Student Supervision

Policy on Supervision of Radiologic Technology Students

- Students must have adequate and proper supervision during all clinical assignments (*see appendix D*). Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under **Direct Supervision**. The definition of Direct Supervision is as follows:

Direct Supervision - Student supervision by a qualified practitioner, who reviews the procedure in relation to the student's achievement, evaluates the condition of the patient in relation to the student's knowledge, is present during the procedure, and reviews and

approves the procedure. A qualified radiographer is present during student performance of a repeat of any unsatisfactory radiograph.

- Students that have achieved and have documented competency in any given procedure may perform procedures with **Indirect Supervision**. Indirect Supervision is defined as follows:

Indirect Supervision - For radiography, supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

Repeat Examinations – All repeat examinations for students/interns, regardless of competency level, shall be conducted under **Direct Supervision** of a qualified practitioner

Mobile (Portable) Examinations – All mobile (portable) examinations must be conducted, regardless of competency level, under **Direct or Indirect Supervision** of a qualified practitioner. Students are never allowed to conduct a mobile (portable) examination “on their own” without **Direct or Indirect Supervision** (*See appendix D*).

Policy on Fluoroscopy by Radiologic Technology Students

Students are exempt from the regulations concerning the use of fluoroscopic equipment established by the Department of Health Services (Section 30450, Title 17, Group 4, Article 1) while enrolled in a State registered and JRCERT accredited school of radiologic technology and are allowed to perform the following:

- a. Students may expose a patient to X-rays in the fluoroscopic mode only while under the direct supervision of a radiologist or other physician operator.
- b. Students may position a patient under fluoroscopic control when requested to do so only while under the direct supervision of the radiologist operating the fluoroscope.
- c. Students may select exposure factors, set up fluoroscopic equipment in preparation for a fluoroscopic exam, and adjust or select exposure factors (i.e., gain control or photo timer sensitivity) while the fluoroscopic tube is emitting x-rays only while under the direct supervision of the radiologist operating the fluoroscope.
- d. Students must be under “Direct Supervision” while performing fluoroscopic examinations.

Mammography and Hysterosalpingography Policy for Radiologic Technologist Students

The Program considers mammography to be a specialty. The Program faculty will cover only the didactic portion of mammography and hysterosalpingography as it pertains to state and national requirements for entry level technologist.

If the Education Setting allows observation of mammography and hysterosalpingogram procedures, (voluntarily or mandatory) it must offer this equally to all students, male or female. Currently, the program has no clinical affiliates that can offer mammography and hysterosalpingography equally to male and female students. Therefore, no students are allowed in these procedures.

MRI Safety Screening

Magnetic Resonance Imaging (MRI) is a modality within the Radiology Department that utilizes a very strong magnet to produce internal images of the body and can be harmful to an individual who may have metallic materials in their body. Radiologic Technology students potentially have access to the MRI suite, so all students must be screened prior to starting their clinical experience. If a student indicates they have aneurysm clips, stents, neurotransmitters, or any metallic object within their body, they will be appropriately counseled and must not enter the MRI suite. Also, if a student has previously done welding/grinding without using goggles, or any activity that may have resulted in a metallic substance being introduced into the eyes, they must provide a current negative orbital x-ray report stating the eyes are clear of metallic foreign bodies. (*See appendix G*). Students must immediately notify program faculty members should their MRI screening status change during the program.

Clinical Education Requirements

Clinical Education Requirements are designed to help the student learn to adjust to policy and procedure of the professional work force.

Rules

1. Prompt attendance in all clinical assignments must be maintained.
2. The student must rotate through assigned Education Setting and gain working knowledge of the equipment and procedures.
3. If a student is short hours at the end of a semester, a deduction of 10 points for every hour short will be enforced. *If a prolonged illness or injury occurs, contact the Program Director.* All missed time must be made up before graduation.

4. The student must satisfactorily complete all clinical competency objectives on or before the required deadlines set each semester.
5. The required number of clinical evaluations, time sheets and examinations completed, and the clinical objectives must be turned in by the deadline date of each semester.
6. The student must satisfactorily complete rotations through any of the specialty areas such as Special Procedures, Emergency Room, Computerized Tomography, Portable Radiography, Surgery, Magnetic Resonance and Fluoroscopy.
7. The student must maintain satisfactory clinical evaluations completed by staff technologists and clinical instructors.
8. The student must satisfactorily handle emergency room patients and produce satisfactory radiographs within the specified time as designated by the Program.
9. The students must demonstrate compassion and professional conduct at all times while working with patients.
10. The student must communicate properly with patients.
11. The student must be able to communicate and work with fellow students and technologists.
12. The student will exhibit professional conduct and dress at all times while assigned to the clinical area.
13. The student must be able to cope and function during stressful situations.
14. The student must complete the required competencies within the specified time and is expected to retain proficiency.
15. The student will conduct radiologic examinations to the satisfaction of the clinical instructors.

Any infraction of the above rules will result in the necessary disciplinary actions. The student must display professional behavior at all times.

Student Clinical Probation

Policy:

Clinical Probation is designed to address ongoing concerns or problems with a student's performance and/or professional behavior while at a clinical facility site, or the student has not benefited from instruction. Determination of unsatisfactory performance in the clinical area will be based on clinical objectives, clinical observations, radiograph critique sessions, a student's professionalism, and the ability to follow college and hospital policy based on safe and competent practice. **Students dropped due to unsafe clinical practice or unsafe patient care or have the misfortune of being dismissed from two separate clinical facilities due to any reason will be removed from the program and not allowed to re-enter.**

Procedure:

Insufficiencies noted by the clinical instructor will be discussed with the student. At which time, the student will be reminded of the program/hospital standards and expectations, be provided with extra supervision, and the program director or director of clinical instruction will be sent an email documenting the students' deficiencies.

Students requiring a second notification will be placed on a one-week probationary period and sign the "Student Clinical Probation form" (see *appendix H*) for acknowledgment. The lack of progression or the desire to learn and improve their performance upon the end of the one-week probationary period will result in immediate dismissal from that clinical facility. The clinical instructor will inform the program director or director of clinical instruction of the dismissal, and a student evaluation will be completed by the clinical instructor documenting reasons for dismissal.

Clinical Radiation Protection Rules

Policy

The following safety rules have been established for the protection of the patient, other personnel and the student technologist from ionizing radiation during your hospital observation and clinical education. These rules are a combination of state and federal regulations and/or laws and additional guidelines condensed from the fields 100+ years experience with ionizing radiation. These rules are mandatory and any exception must be reported to the Clinical Instructor and Program Director as soon as possible.

Procedure

1. Regarding Optically Stimulated Luminescence dosimeter:
 - a. A dosimeter, properly placed, must be worn at ALL times during class, laboratory, observation and clinical education phases.
 - b. When protective aprons are used the dosimeter must be placed outside the apron, at collar level.
 - c. Dosimeters shall be turned in every quarter.
2. When an X-ray exposure is about to be made, you **MUST**:
 - a. Leave the room, or
 - b. Get behind the lead shield or protective barrier, or
 - c. Be otherwise suitably protected for surgery, portable and fluoroscopic work.
3. Students must not hold image receptors during any radiographic procedure.

4. Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.
5. Students may not observe the patient during exposure from an adjacent room or hall unless through a lead-glass protective window. Students must NOT "peek" around a door or through a crack between door and wall.
6. When sitting down to rest in the hall do not sit in direct line with the tube or radiographic table even if it is not being used.
7. During an exposure or procedure the student will not stand in direct line with the central ray, even though the student is wearing a lead apron.
8. Under no circumstances will the student or any other human being serve as "patients" for test exposures or experimentation.
9. If during fluoroscopic procedures, the student is to remain in the radiographic room the following will prevail:
 - a. A lead apron must be worn at all times, or the student must remain behind an adequate lead protective screen and not in visible line with either tube or patient.
 - b. The dosimeter must be worn on the collar above the lead apron.
 - c. Students must stand as far from the patient and tube as possible, consistent with the conduct of the examination.
 - d. When practical stand behind the radiologist.
 - e. Student must wear lead gloves if the proximity to the patient dictates their use.
 - f. Student must wear a thyroid shield.
 - g. The student must have "Direct Supervision" during the fluoroscopic procedure.
10. Do not, during the observation periods, make exposures on patients.
 - a. Student may assist by helping patients onto tables, etc., but only under direct supervision and observation of a staff technologist. This means that the staff technologist must be observing the student and patient during exposure.
 - b. When the Clinical Instructor or Clinical Supervisor are of the opinion that students are competent to do so, students may make exposures on patients, but only under the direct supervision and observation of a staff technologist. This means that the staff technologist must be observing you and the patient during exposure.
 - c. All repeat examinations for students/interns, regardless of competency level, shall be conducted under **Direct Supervision** of a qualified practitioner

11. With permission of the program faculty you may make test exposures on inanimate objects in the x-ray labs. In so doing, all radiation safety rules must be followed as well as tube safety factors.
12. When observing radiographic procedures in surgery and bedside portables:
 - a. A lead apron must be worn.
 - b. A dosimeter must be worn above the lead apron.
 - c. Stand as far from the patient and tube as practicable.
 - d. Stand so that the central ray is pointing away from your body.
 - e. Observe all regulations which apply to work in surgery, such as preserving sterile fields, wearing surgical garments etc.
 - f. In addition, when observing, student must step outside the room if they cannot stand at least 10 feet from the patient or stand behind the staff technologist during actual exposure.
 - g. Students must have "Direct Observation" during portable and fluoroscopic examinations.
13. Permission to make actual exposure on patients shall be determined by:
 - a. The opinion of the Clinical Instructor or staff technologist.
 - b. The opinion of the Program Director or program faculty.
14. If students are in doubt about practical procedures or practices regarding radiation protection, please contact the Program Director, Clinical Instructor, or program faculty for clarification or instructions.

Safety

The following policy applies to instructor-initiated drops for students who are unsafe in the clinical setting.

1. Safety is directly concerned with the patient. Students are entrusted with the responsibility of providing safe care to patients. Safety encompasses:
 - a. Meeting the objectives of a course by the times designated for each objective and to the degree of mastery designated.
 - b. Responsible actions based on good judgment that insures the well-being of the patient at all times.
2. Students will be dropped immediately from clinical courses and program due to demonstration of **unsafe clinical practice or unsafe patient care behaviors**. It is up to the clinical instructor and facility to deem or define unsafe patient care behaviors.

3. Actions, which are taken against students in the clinical setting, may result in a request from affiliate representatives that a student be removed from the affiliate in accordance with the affiliation agreement. In such a case, the Program Director requests prior notification. However, there may be cases of other disciplinary actions and the procedures for appeal are as follows:

Student presents the action being appealed to the Program Director within five days of the action.

The Program Director reviews the appeal and contacts the Clinical Instructor of the student's assigned clinical facility for further information regarding the incident. The Clinical Instructor then provides the student and Program Director with the written answer within five days of the receipt of the appeal.

The student may request that the Clinical Instructor refer the appeal to the Program Director. The Program Director reviews the appeal and provides the student with a written answer within five days of receipt of the appeal. The Program Director's decision is final.

The hospital reserves the right to deny entrance onto its premises based on its belief that the student is not benefiting from instruction or that the student is unsafe or poses a problem for the institution. No special arrangements can be made for the student.

Students dropped due to unsafe practices or unsafe patient care or have the misfortune of being dismissed from two separate clinical facilities due to any reason will be removed from the program and not allowed to re-enter.

Radiation Exposure Records

Student radiation exposures are made known to students by collecting their dosimeters quarterly. The RSO will review the dosimetry report within 10 days upon receipt, and then individually review the dose with each student, if any. Each student is required to initial and date next to their name indicating acknowledgment of their dose. All confidential information in the report has been removed to maintain student privacy. The reports are then placed in a permanent file and secured in a locked cabinet.

Student Annual Occupational Dose Limits

Any radiation dose received by students during their education in the program must not exceed 1 mSv (100 mRem) per year or 0.25 mSv (25 mRem) per quarter.

The following chart outlines the dose limits established by the National Council on Radiation Protection and Measurements (NCRP).

Education and Training Exposures (Annual)

1. Effective dose: 1 mSv (100 mRem)
2. Equivalent dose for tissues and organs:
 - a. Lens of the eye: 15 mSv (1,500 mRem)
 - b. Skin, hands, and feet: 50 mSv (5,000 mRem)

If a student exceeds the 0.25 mSv (25mRem) quarterly limit, the student will be notified immediately and investigated to determine the cause of the dose limit violation. The student will be counseled on radiation protection safety principles and procedures. In conjunction with the investigation, a Student Radiation Dose Violation Form, (*see Appendix I*) will be completed and sent to the CDPH RHB within 30 days of the discovery in the Dosimetry Report. Repeated dose limit violations may subject the student to disciplinary actions up to and including program dismissal.

Guidelines and Policies for Didactic (Lecture) Courses

Attendance

Students who receive deficiency notices may be expected to make an appointment to meet with the Director and or Dean before they can attend their next class session. If referred to the Director, the students **must be seen** within one week (if the Director is unavailable the student may be seen by the Division Dean).

1. Leaving a lecture class without instructor permission is contrary to program policy. It is expected that students will be on time and will stay the entire time. Those leaving early without instructor permission will be considered absent. **All absences will be recorded and there are no excused absences.** Students who are ill on a didactic (classroom) day and unable to report to class will be responsible for notifying the instructor at least one-half hour prior to the scheduled start time. Failure to comply may result in an infraction on your evaluation and a demerit.
2. According to college policy, students who miss two successive weeks of classes in a semester long course will be dropped from the course. If enrolled in a 9-week course, students who miss one week of classes will be dropped. When petitioned, reinstatement will be considered under the college reinstatement procedure. (See Fresno City College catalog, section on attendance)
3. Students will be given a demerit for each recorded tardy or absence to the classroom

or clinical educational site. Three demerits per course for any reason in one semester will equal a drop of one grade in the course. Six demerits per course for any reason in one semester will equal a drop of two grades in the course. Nine demerits per course for any reason in one semester will equal a drop of three grades in the course.

Grading in Didactic & Laboratory Radiology Courses

The Radiologic Technology Program has a different grading scale than other parts of the college. **To remain enrolled and to advance in the Radiologic Technology Program the student must maintain a grade of "C" or higher in all radiologic technology and required courses.**

For *all* laboratory positioning courses (Rad. 1B, Rad. 2B, and Rad. 4C), multiple laboratory positioning exams & written exams are given throughout each semester. The scores from each (positioning exams & written exams) are added together and averaged to get the final score. ***However, students may not be failing in either of the two areas (positioning or written exams) and still pass the course regardless if the averaged score of the two is a passing score. If the student receives a failing score in either of the two areas, that failing score will be given as the final score for the course. The student must show mastery in both the positioning lab and the written examinations to pass the course.***

- A- 100-92%
- B- 91-83%
- C- 82-75%
- D- 74-65%
- F- 64-0%

Students who are removed from a clinical site cannot receive a final grade higher than a “C” regardless of other course assignment grades in that class.

Grade Deficiencies

Students with a midterm lecture grade of less than 75% at midterm:

1. Will receive written notification from the instructor.
2. Are required to meet with the instructor.
3. That fail any examinations (74% or lower on written or laboratory exams or other written work) will meet with the instructor as soon as the grade is earned.
4. May be required to enter into an academic contract regarding their performance for the remainder of the course. All areas of concern and contract objectives must be met prior to any credit being awarded for other written assignments. If the student does not meet contract objectives, they will be dismissed from the program.
5. Will be subject to referral to the Division Dean.

6. Who are in disagreement with the grade can meet with the Director of the Radiologic Technology Program. The Director cannot change the grade but can discuss the issues with you and the instructor.
7. After meeting with the Director of the Radiologic Technology Program, if there is no resolution, at the completion of the course the student may complete a “Grade Review Petition” form.

Withdrawal from the Program

Being dropped from a lecture course requires that the concurrent clinical course be dropped also. Students may not continue in the concurrent clinical course since it depends on the body of knowledge in the theory course. Student cannot stop going on their own to one of the courses and continue going to the other. Students pursuing this action will be dropped from the program.

Any student who withdraws from the Radiologic Technology Program must fill out a Course Withdrawal Agreement form (*see appendix E*).

Re-Admission

Any student who withdraws or who is dropped due to grade deficiencies from the Radiologic Technology Program must request in writing, prior to the next Program sequence, a hearing for re-admission before the Allied Health Dean, Radiologic Technology Program Director and Program Faculty. The student seeking re-admission will be admitted on space available criteria. Final decision for re-admission will be made by the Program Director. **After a second withdrawal due to drop or grade deficiency, the student will not be eligible for re-admission to the Program.**

If a student is seeking advanced placement re-admission, **re-admission is based on a space availability factor.**

Transfer Students

1. Students requesting transfer from another accredited Radiologic Technology Program into the Fresno City College Radiologic Technology Program, if space is available, must submit the following to the Radiology Department:
 - a. Application form to Fresno City College and the Health Sciences Division
 - b. Transcripts from all previously attended colleges
 - c. Copies of catalog descriptions of transferring radiology courses
 - d. Copies of course syllabi from transferring radiology courses

- e. Letter of referral from the previous Radiologic Technology Program attended that you were a student in good standing in radiology.
- 2. A Fresno City College Health Sciences Counselor or designee will review the submitted material for meeting the required transfer entry criteria for non-radiology courses and the Director of Radiology will review the radiology courses, including the following:
 - a. 2.75 cumulative GPA
 - b. “C” or better in all established program prerequisites. A Health Science Counselor or subject area dean and where necessary in consultation with subject area faculty must grant equivalencies.
 - c. Minimum 2.75 cumulative GPA from radiology courses in previous Radiologic Technology Program(s).
 - d. Taken radiology courses at a previous JRCERT accredited Radiologic Technology Program within the past year from time of transfer into Fresno City College
 - e. Transfer students must meet the same criteria as students in the program. Students should be alerted to the general education requirements and prerequisites.
 - f. It is the student’s responsibility to check for equivalency to FCC graduation requirements.
- 3. Transfer students, after consultation with the Director of Radiology, will be placed by the Director depending on space availability.
- 4. Assurance of placement into program does not assume that students will be matriculating with the initial or subsequent placement group. Space availability and successful completion of the courses will determine if the student will progress through the program.
- 5. Placement into the program does not mean that the student will be graduating on the same timelines as the original Radiologic Technology Program or the graduating date of the initial or subsequent groups.
- 6. Fresno City College returning students will have priority as well as students previously placed.
- 7. Students who are transfer and out-of-sequence should contact the office for placement at the end of each rotation, after final exams.
- 8. If a transfer student is found to be deficient in critical areas the instructor will, in consultation with the Director of Radiology, determine whether the student will continue in the class or will be asked to return to the beginning semester. The Director of Radiology may place the student in a previous more appropriate course as the need arises.

Program Policy for Pregnant Student Technologist

Policy:

Pregnant Student Technologist is allowed the option of whether or not to inform program officials of her pregnancy. If the woman chooses to voluntarily inform officials of her pregnancy, it must be in writing and indicate the expected date of confinement (delivery). The student can use the program “Declaration of Pregnancy” form for this purpose (*see appendix C*). In the absence of this voluntary, written disclosure, a student cannot be considered pregnant.

If the student chooses to disclose her pregnancy, she must have the option of continuing the educational program without modification or interruption.

The student may withdraw her written “Declaration of Pregnancy” at any time. The withdrawal of the “Declaration of Pregnancy” must be in writing and submitted to program officials.

Purpose:

The basic premise is that the pregnant student be allowed to make an informed decision based on her individual needs and preferences.

Procedure:

If the student technologist elects to notify the Program Director of a pregnancy, the student technologist has the option of requesting the Program Director to counsel her on radiation protection and radiation risks along with the review of her individual Education Setting and Laboratory work habits and previous radiation exposure history. If she requests a counseling session, the student technologist will acknowledge the counseling session by signing the form titled “Radiation Safety for Occupationally Exposed Female Student Technologist of Childbearing Age” (*see appendix C*).

The student technologist has the option to have the Program Director restrict the student technologist’s Clinical Education Setting and Laboratory assignments to ensure that the Dose Equivalent Limits (DEL) to the fetus is less than 50mrem (0.5mSv) per month and less than 500mrem (5mSv) over the entire gestational period as recommended by the Nuclear Regulatory Commission (NRC). To maintain compliance with NRC recommendations, a second radiation monitor must be provided to the student technologist to be worn at the waist to monitor her fetal dose. **This monitor is to be worn beneath the lead apron over the fetal area during fluoroscopy and portable radiography.**

Any education setting assignments missed due to pregnancy must be completed as soon as possible to fulfill graduation requirements. All makeup of education setting assignments must be accomplished during normal education setting hours, and when the

Professional Liability Insurance is in effect.

The student technologist is expected to return to full student status as soon as possible, after her delivery, with the approval of her physician.

Outcome:

To meet NRC and Federal Regulations regarding radiation safety (NRC Regulatory Guide 8.13, Federal Regulations - 10CFR20.1208).

Extended Sick Leave - Post Surgery and/or Extended Illness

1. The student must present a written clearance from a physician to the Director of Radiology on the specialized forms from the college. Those forms can be obtained from the Department of Radiology secretary. The physician must certify that you are able to perform all the Essential Functions of a Registered Technologist prior to your reentry.
2. The student must be able to meet all weekly objectives to remain in good standing in the program.
3. The maximum absence college policy will apply.
4. The clearance letter from the physician must state that the student is able to return to the full duty and functioning as outlined in the ADA Registered Technologist Essential Job Functions.

Communicable Disease

It is the intent of the Program to protect students from exposure to communicable diseases that pose a reasonable risk of harm to the community. It is also the intent of this Program to protect the rights of those infected with a communicable disease.

Guidelines

- a. The term "infected person" shall include students who have been medically diagnosed as infected with a communicable disease.
- b. An infected student can continue as long as the student can perform regular responsibilities satisfactorily and so long as the best available medical evidence indicates that their continued status does not present a health or safety threat to self or others.
- c. An infected student returning to school after a leave of absence for reasons related to a communicable disease must provide a statement from their treating physician

indicating current medical status. The student will submit the physician's statement to the Program Director.

- d. No infected student shall be dismissed from the Program solely based on a diagnosis of an infection of a contagious disease. A decision to dismiss or discharge will only be made after reasonable accommodation has been attempted and an examination of facts demonstrate that the infected person can no longer perform as required or poses a reasonable threat to the health and safety of those around them.
- e. Disciplinary action will be taken when a student refuses or fails to perform their responsibilities on an infected person who has not been deemed to pose a present health or safety threat to self and others. These measures shall range from counseling to expulsion.
- f. As with any medical condition, students must not disclose information regarding another student to anyone except those people with a medical or administrative need to know. The Program shall take every precaution to ensure that confidentiality is maintained. Breach of such confidentiality shall result in disciplinary action.

Evaluations

(Student, Clinic, Course, and Program)

Student Evaluation

- 1. At the beginning of each semester, the student is given a course outline with specific objectives and expected outcomes. Requirements and assignments will be specified. In addition, the system of grading will be clearly defined on a percentage basis. In the clinical area students will have periodic evaluations of their performance and will be given an individual evaluation of their clinical performance. The exam to be evaluated on will be at the discretion of the instructor.
- 2. Evaluations are a very important tool to assess student progress in the program. The student signature on the evaluation does not imply agreement, but rather indicates that the student has reviewed the evaluation. Students are not required to sign the evaluation but if they do not the faculty will duly note such on the form where the signature would have occurred.
- 3. Students who are removed from a clinical site and noted on their evaluation cannot receive a final grade higher than a "C" regardless of other course assignment grades in that class.

Student Evaluation of Clinical Experience

At the end of each clinical course, the student is required to complete an evaluation of their respective clinical experience. This is an opportunity for the student to provide an evaluation of their clinical experiences. Through candid evaluations the faculty can identify the strengths and weaknesses of a particular clinical affiliate and utilize this information for continuing Program evaluation. Another area where this information is useful is in matching student's clinical experience weaknesses with affiliates that rate high in providing clinical experiences that address a student's weakness.

Education Setting Instructors Evaluation

Policy

Educational instructors will be evaluated to document their proficiency in supervision, instruction and evaluation of students/interns.

Procedure

A faculty member of the Fresno City College Radiologic Technology Program will evaluate the Education Setting Clinical Instructor once a year.

Course, Instructor, and Program Evaluation

1. Informal Course Evaluation – The evaluation process is valuable for use by the instructor in developing curriculum, course outlines, and improving instruction. These are informal and only the instructor will read the responses. The informal evaluations will be available on the campus Canvas for completion at the end of each course.
2. Program Evaluation – An exit Program evaluation will be sent to alumni of the Radiologic Technology Program, where graduates will be asked to evaluate the program. It is important that this evaluation be completed and returned. This information is used for the improvement of the Radiologic Technology Program.

Graduation Requirements

It is the student's responsibility to begin the graduation check process upon entry into the program. Graduation evaluations must be filled out appropriately and completely. Students are requested to see a health science counselor each year for completion of an

Educational Plan to ensure that any problems with graduation are alleviated before the semester anticipated for graduation.

To be considered a graduate of Fresno City College and take the National ARRT Examination, the student must complete ALL courses required for graduation, NOT just the radiology courses. Furthermore, if you do not complete all the courses necessary for graduation you cannot put in an employment application that you are a Fresno City College graduate.

Student Rights

Students have the right to:

1. According to the Family Educational Rights and Privacy Act (FERPA), have access to their educational records. The college will not release their records to anyone who is not designated by the student to receive them, except as provided by law itself and as outlined in the release of information the students must sign to obtain clinical placement.
2. Explanation of entries in their educational records.
3. Challenge contents in their educational records.
4. Use the college appeal procedure as indicated in the college catalog.
5. During the first-class session of the course, be given written information detailing course assignments, expectations, grading system and pertinent schedules.
6. General advisement as well as assistance with course work from their instructors.
7. Offer constructive input regarding the instructional process and overall curriculum of the program.
8. Prompt verbal and written notice of unacceptable and/or unsafe behaviors as a student technologist that includes suggestions for resolution of related problems.

Student Records

A master file will be started when the student is randomly selected through the lottery process for admission and will contain the application, transcripts and other data required.

At the completion of the Program, all official information (copy of transcripts, record of clinical performance, radiation exposure record and record of Program completion, etc.) will remain on file. Permanent transcripts will be maintained by the Office of Admissions and Records. All other information will be retained for five (5) years in accordance with State law.

If a student withdraws prior to graduation, a summary statement of the student's progress and reason for withdrawal will be placed in the folder which will be placed in the withdrawn student's file.

Students may inspect their master file at any time under the direct supervision of a faculty member.

All student records are confidential and information from them will only be given to authorized persons. Data such as grades, Registry and State Board Examination scores, health records, and performance evaluations may not be revealed without a student's written consent.

Only personnel authorized by the Program Director will have access to student records and this will be used only for the purpose of student evaluation and progress within the Program.

Educational Program Standards (JRCERT) (Updated 11/14/23)

Efforts shall be made to maintain high standards for educational programs to ensure that students will meet requirements for the occupations for which they are preparing. This includes a commitment to provide adequate facilities and materials and qualified instructional personnel, as well as administrative support and supervision.

Likewise, students are expected to maintain established performance standards. Failure to do so jeopardizes their right to continuing attendance.

Students are to be kept informed relative to their educational performance and progress, as well as program accreditation and its ability to meet JRCERT Standards. According to the JRCERT, the following are standards that an accredited educational program in Radiologic Technology must meet, and fulfill to complete the accreditation process:

Standard 1: Accountability, Fair Practices, and Public Information - The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Standard 2: Institutional Commitment and Resources - The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Standard 3: Faculty and Staff - The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Standard 4: Curriculum and Academic Practices - The program's curriculum and academic practices prepare students for professional practice.

Standard 5: Health and Safety - The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

***Standard 6: Programmatic Effectiveness and Assessment:
Using Data for Sustained Improvement - The extent of a program's effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.***

Allegations of noncompliance to the above JRCERT standards can be submitted to:

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 900
Chicago, Illinois 60606-2901
(312) 704-5300
www.jrcert.org

Sexual Harassment Policy and Procedure

The Program upholds the policy set forth by the State Center Community College District on sexual harassment as outlined in the [college catalog](#). The Program will follow the guidelines set forth in Board Policy 5109 and Administrative Regulation 5109(a), (b); 5109.1(a), (b), (c), (d).

Legal Reference: Ed. Code, Title 5, 59300-59362; AR 5109

Each Fall during orientation, first year students will be given a session on sexual harassment. At this time, they will review the State Center Community College District's policy concerning Sexual Harassment. To ensure compliance each student will sign Program form titled, Student Acceptance of Radiologic Technology Program Sexual Harassment Policy and Procedure.

(Updated 11/14/23)

Prohibition of Sexual Harassment

It is the policy of the governing board that the State Center Community College District shall maintain a working and learning environment free from sexual harassment of its students, employees, and those who apply for student or employee status. All students and employees should be aware that Fresno City College, Reedley Community College, Clovis Community College, Madera Community College, and the State Center Community College District are concerned and will take action to eliminate sexual harassment. Sexual harassment is conduct subject to disciplinary action.

Harassment on the basis of sex is a violation of Section 703 of Title VII of the 1964 Civil Rights Act, which is enforced by the Equal Employment Opportunity Commission. Sexual harassment is included among legal prohibitions against discrimination. Title IX of the Educational Amendments of 1972 also establishes sexual harassment as discriminatory and unlawful.

Sexual harassment includes such behavior as implied or expressed requests for sexual favors, and other verbal or physical conduct of a sexual nature directed towards an employee, student, or applicant when one or more of the following circumstances are present:

1. Submission to or toleration of the conduct is an explicit or implicit term or condition of appointment, employment, admission, or academic evaluation;
2. Submission to or rejection of such conduct is used as a basis for a personnel decision or an academic evaluation affecting an individual;
3. The conduct has the purpose or effect of interfering with an employee's work performance, or creating an intimidating, hostile, offensive, or otherwise adverse working environment;
4. The conduct has the purpose or effect of interfering with a student's academic performance, creating an intimidating, hostile, offensive, or otherwise adverse learning environment, or adversely affecting any student.

In determining whether conduct constitutes sexual harassment the circumstances surrounding the conduct should be considered.

In order to ensure adherence with the board policy, the colleges shall designate persons responsible for receiving complaints of sexual harassment and publicize the names and titles of the persons so designated on each campus. When a complaint has not been resolved on the campus, the district's Affirmative Action Officer shall be the officer responsible for ensuring district compliance with the rules and regulations adopted by the Board of Governors of the California Community Colleges for district investigation and resolution of complaints of discrimination including sexual harassment.

41/3B18

AR 5109 (a)

District Procedures for Investigation and Resolution of Student Complaints of Unlawful Discrimination, Including Sexual Harassment

The district officer responsible for insuring district compliance with the rules and regulations adopted by the Board of Governors of the California Community Colleges will be the Director of Certificated Personnel/Affirmative Action Officer.

The colleges will post and/or publish annually in appropriate publications available to all students the board policy and complaint procedures herein described.

The colleges of the district may develop procedures for attempting to resolve charges on discrimination before the district complaint procedure takes effect, but such campus procedures must be limited to 30 days from the date of the alleged discrimination.

Complaint procedure

1. After all other attempts to resolve a complaint have failed, a complaint may be filed either by:
 - a. A student who alleges that he or she has suffered unlawful discrimination in a college or district program or activity, or
 - b. An employee of the district who has learned of such unlawful discrimination against a student in his or her official capacity.
1. The complaint must be filed on the form titled "Unlawful Discrimination Complaint." Forms will be available in the Dean of Student's office on each campus, as well as in the office of the Director of Certificated Personnel/Affirmative Action Officer.
 - a. The complaint must be filed within 120 calendar days of the alleged unlawful discrimination.
 - b. Within 14 calendar days of receipt of the complaint form, the Affirmative Action Officer will:
 - 1). Commence an investigation of that complaint,
 - 2). Notify the State Chancellor's office that a complaint has been received, and
 - 3). Notify the complainant that an investigation is being conducted.
2. If the Affirmative Action Officer receives a complaint which is defective in its compliance, they shall immediately notify the complainant that the complaint is defective and specify in what requirement the complaint is defective.
3. The investigation must be completed within 90 calendar days from its initiation. Upon completing the investigation, the Affirmative Action Officer will attempt to resolve any valid complaint and will take such action as is deemed necessary to correct the effects of the discrimination and to ensure that no unlawful discrimination will occur in the district.

4. The investigation officer will notify the complainant of their proposed resolution and will also notify the complainant that they may object to the proposed resolution by submitting objections to the state chancellor within 30 days. Such notice to the complainant shall be given on the form provided by the state chancellor.
5. Within 90 days from the initiation of the investigation, the district will forward to the state chancellor:
 - a. The original complaint,
 - b. A report of the nature and extent of the investigation,
 - c. A report of any action taken to resolve any valid complaint, and
 - d. Evidence that the district has notified the complainant of the proposed resolution and of their right to object by appealing to the state chancellor.

50/3B17

AR 5109.1 (a)

College Procedure for Complaints of Sexual Harassment (Students)

(Complaints of other forms of discrimination will follow established channels and procedures outlined in AR's 4136, 4236, and 4336.)

This procedural statement is a special application of the district's established complaint procedures and prohibition against discrimination. It is presented in direct reference to the sexual harassment of students of the colleges of the State Center Community College District and to the related policy of the district adopted by the district's governing board. The board policy is based on federal and state statutes on this subject.

While sexual harassment of students by other students or by district employees represents a wrong as described by board policy and in the district's complaint procedures, the nature of this particular offense renders it exceptional. Thus, a separate procedure has been established to recognize this distinction.

Sexual harassment is a matter requiring unusually prompt attention by authority since failure to act may represent various kinds of academic and personal damages to the alleged victim. Further, the issues involved are typically very personal and sensitive, and many victims will not risk the delays, publicity and complications attendant upon regular complaint procedures. Since this district recognizes the delicate nature of such situations, each step in the complaint procedure will be conducted with discretion to maintain a high degree of confidentiality. It is the intent of these procedures to establish prompt recourse and to ensure fairness and equity both to the persons alleging the wrong and to the person accused of the wrong.

The colleges and the district recognize their responsibility to make every effort to maintain a neutral work and educational environment free of sexual harassment or any other kind of intimidation.

For purposes of this regulation, sexual harassment includes such behavior as sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature directed towards a student, when one or more of the following circumstances are present:

1. Submission to or toleration of the conduct is an explicit or implicit term or condition of appointment, employment, admission or academic evaluation;
2. Submission to or rejection of such conduct is used as a basis for a personnel decision or an academic evaluation affecting an individual;
3. The conduct has the purpose or effect of interfering with a student's academic performance, creating an intimidating, hostile, offensive or otherwise adverse learning environment, or adversely affecting any student.

50/3B9

AR 5109.1 (b)

In determining whether conduct constitutes sexual harassment the circumstances surrounding the conduct should be considered.

Procedure

All steps in this campus procedure must be completed within 30 calendar days. Since the dean of students has five (5) working days in Step 3, and the president has ten (10) working days in Step 4 in which to act, the first two steps must be completed within nine (9) calendar days.

Step 1 Students who believe that they have been subjected to any form of sexual harassment should carefully review both the district's policies on this subject and this procedure. They are encouraged to seek counsel from any number of the college community in whom they have confidence; however, it is recommended that the student contact one of the faculty or staff members identified expressly at each college to discuss any complaint of sexual harassment. The names of the women and men who have been given special responsibilities for advising in complaints of sexual harassment are available by telephone or in person at the office of the dean of students on each campus.

The complaint advisor and/or the student may attempt to verify the validity of the complaint and/or resolve the complaint directly with the person against whom the complaint is lodged. If resolution is possible at this informal level, then no record needs to be made of the complaint. However, should such a direct approach be uncomfortable, threatening, or be otherwise deemed by the student or the advisor to be undesirable, this step may be omitted. The student must sign a statement describing the incident and the nature of the complaint, using a form provided for that purpose (see attachment). The identity of the student shall be protected at all times and the signed complaint shall at this step remain confidential and held only by the advisor.

The complaint advisor shall then confer with the person against whom the complaint has been brought, advising them of the nature of the complaint but keeping confidential the identity of the complainant. If the problem cannot be resolved at this level, the complainant may proceed to **Step 2**.

Step 2 If the complaint of sexual harassment is against a faculty member or another employee of the district, and if no resolution of the problem has been achieved, the student and/or the complaint advisor shall review the signed complaint and the failure to resolve it with the immediate supervisor of the faculty member of employee against whom the complaint has been brought. The signed complaint shall not leave the possession of the advisor; a copy shall not be given to the supervisor unless the problem is resolved at this level. The supervisor must subsequently confer with the person against whom the student has complained and must continue to respect the student's request for anonymity. If the supervisor questions the validity of the complaint or is unwilling or unable to take action to resolve the problem, the student may proceed to Step 3.

Step 3 A students' unresolved complaint of sexual harassment shall be brought to the attention of the dean of students either by the complainant, the complaint advisor, or both.

The complaint signed by the student shall be forwarded to the dean of students by the complaint advisor. The dean of students shall hear the student's complaint and confer with the faculty member or employee against whom the complaint has been brought in the presence of their immediate supervisor and, if advisable, in the judgment of the dean, the complaint advisor.

If the Dean of Students cannot resolve the complaint within five (5) working days, Step 4 will be implemented.

Step 4 The dean will transmit the complaint, in writing and signed by the complainant, to the college president with a copy to the district affirmative action officer for information purposes.

The president will act as described in the circumstances that follow:

- a. The president will consult the person mentioned in the complaint and all persons as may be necessary to resolve the complaint. The supervising manager of the person accused must be again consulted in this process, and the accused will at this time be given a copy of the written accusation.
- b. If the problem cannot be resolved to the satisfaction of all parties at Step a. Within ten (10) working days, the president may either dismiss the matter because he deems it invalid, stating his reasons in writing to all parties, with a copy to the district affirmative action officer; or he may forward the case to the district affirmative action officer and notify the student of their right to appeal. The president must act within ten (10) working days.

Should the president's resolution be to insert a written reprimand in an employee's personnel record, or to take disciplinary action, such action will be taken in compliance with federal, state, and district rules, regulations, and contracts. The district affirmative action officer shall be copied on all such actions and a full summary of the nature of the complaint and its resolution shall be provided.

District procedures for investigation and resolution of student complaints of discrimination, including sexual harassment

Should resolution not be achieved at the campus level, the procedures outlined in AR 5109 must be followed and a report submitted to the California Community Colleges' counsel as required by law.

Student Grievance Process

The FCC Radiologic Technology Program follows the Student Grievance Procedure as outlined in the college catalog. The student grievance procedure is established to allow student redress of grievance in cases of rejected grade appeal or alleged unprofessional conduct. A student who has a grievance may take action in the following sequence:

1. Discuss the problem with the individual involved. Use the chain of command within the Radiologic Technology Program, i.e. the Clinical Instructor, Didactic Instructor, Director of Radiology, Dean of Health Sciences, Dean of Instruction or Dean of Students.
2. If a mutually satisfactory understanding has not been reached, the student may submit a Student Grievance Petition to the appropriate supervisor for the area of concern.
3. The supervisor will send the Grievance Petition form to the appropriate staff member involved who, in turn, will respond in writing to the supervisor within five (5) working days. The supervisor will send a copy to the student.
4. If the student is dissatisfied with the response, the student may submit the grievance, in writing, to the supervisor. The supervisor will respond within five (5) working days.
5. If the student is still dissatisfied after taking these steps, the student may submit the grievance, in writing, to the District Dean of Admissions and Records, District Associate Dean of Financial Aid, Dean of Instruction, the Dean of Students, or the Business Manager, whichever is appropriate, who will respond in writing.
6. As a final step, the student may submit the grievance, in writing, to the Academic Standards Committee for academic matters or for nonacademic matters to the College President, who will also respond in writing.
7. The College President has final authority.
8. Note: Grievance Petition forms for this procedure are available in the office of the District Dean of Admissions and Records, in the office of the Dean of Students or any Associate Dean of Students, in any division office, and/or in any director's office.
9. A Grievance Petition form may not be filed later than 30 days after the beginning of the fall or spring semester following the date of the grievance.

10. If the Student has a grievance concerning the program, the student may contact the Joint Review Committee on Education in Radiologic Technology, by writing to:

Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 900
Chicago, Illinois 60606-2901
(312) 704-5300
www.jrcert.org

Drug Abuse Policy

For the protection of other students in the State Center Community College District, the Governing Board of this District may suspend or expel, and the Chancellor of this District is authorized to suspend a student whenever it is established to the satisfaction of the Board or the Chancellor, as the case may be, that the student has on college premises used, sold, or been in possession of narcotic or other hallucinogenic drugs or substances, or has on college premises inhaled, or breathed, the fumes of, or ingested any poison, classified as such by Schedule D in Section 4160 of the Business and Professions Code (State Center Community College District Policy Manual). Students entering into a health program should be aware that past behaviors might impact your Radiologic Technology Program and career.

Guidelines for Student Assistance

Policy Statement

The Fresno City College Associate Degree Radiologic Technology Program recognizes that students affected by mental illness, alcoholism, and drug abuse are faced with personal problems that can readily result in serious, disruptive, and dysfunctional consequences to the individuals and their families. Mental illnesses and addictive processes of any nature are regarded as diseases and require therapeutic interventions and appropriate regimens to achieve a state of recovery.

In such cases, it is the responsibility of the student voluntarily to seek assessment, diagnosis, and treatment for suspected illness. Confidentiality must be insured in every aspect of intervention, assessment, diagnosis, and treatment.

Instructors have the responsibility and authority to take immediate corrective action with regard to a student's conduct and performance in the classroom and clinical setting.

The student, for patient safety's sake, will, when deemed appropriate by the program director, not only make contact with a community or college resource person, but sign a form that allows director to have contact with the agency to assure that student is indeed being seen by a counselor. The safety of our patients is important, and it is imperative that we do nothing to compromise patient safety.

Definitions

Personal problems or mental illness includes psychological, physical, or chemical dependency illnesses, and legal, financial, marital, or other types of problems that definitely and repeatedly interfere with the student's academic performance.

Academic Performance

The Department of Radiologic Technology Education is concerned with academic and clinical performance, which includes the student's class attendance, continued progress towards program completion, conduct and reliability during scheduled class and clinical assignments. It is the responsibility of the instructor evidencing substandard academic and clinical performance to seek to remedy the situation and make recommendations for the student to bring their performance up to standard. If it appears that the student's academic and clinical performance is being negatively influenced by a personal or emotional problem, and if after every alternative measure to deal with the substandard performance fails to improve the performance, the student will be sent to the Director of the Radiologic Technology Program.

Procedure

The Director of the Radiologic Technology Program will meet with the student and seek to determine the cause of the substandard performance. The director will then refer the student to the appropriate community or professional resource for help and/or treatment.

Options

1. At all times it is the prerogative of the student to accept or reject referrals and/or treatment. If the student elects to reject referral and/or treatment, it becomes the responsibility of the student to bring his/her performance up to standard or face such academic action as may be appropriate. If the student elects to accept referral and/or treatment, this fact will be regarded in the same manner as treatment for any illness. Upon completion of the treatment, it will be the responsibility of the student to achieve and maintain standard performance.
2. The Department of Radiologic Technology recognizes that a student's academic and clinical performance can be adversely affected by the stresses resulting from personal or emotional problems of family members and loved ones. Accordingly, assistance

under FCC Psychological Services is available to any student experiencing such a problem. Furthermore, a family member may contact Psychological Services directly by requesting assistance for their student. All contact between family and Psychological Service members will be confidential.

Role of Instructors and Administration Staff

Motivation to accept treatment or counseling is the first phase of restoring a student to an acceptable level of academic and clinical performance. The instructors and administrative staff are an integral link in the helping process of the troubled student. Instructors and administrative staff have more opportunity than most other individuals to influence the student's life. They have the opportunity to consistently and objectively observe the student's behavior and performance academically and clinically and therefore can identify a negative change in behavior. Consistent with assigned duties, instructors and department personnel are responsible for focusing on academic and clinical performance and not for diagnosing personal problems. Instructors and administrative staff are not asked to diagnose personal problems such as mental illness and substance abuse. They are responsible for evaluating academic and clinical performance and accurately and completely documenting performance behaviors. When the quality of performance declines, the responsibility of the instructor is to plan and conduct all appropriate interventions.

When all the usual methods do not correct the problems, and when it seems likely that the poor performance is caused by a personal problem, psychological service offers a positive alternative.

Instructional personnel do not need therapeutic or diagnostic skills concerning personal problems. They do; however, need skills of objective observation, documentation, problem solving, discipline, and referral to psychological services. **BP 5109**

APPENDIX A

Dishonesty Infraction Form

FRESNO CITY COLLEGE DISHONESTY INFRACTION FORM

Course Title: _____ Date: _____

Instructor: _____ Course No: _____

Students Name: _____ Room No: _____

Students ID# _____ Date of Infraction: _____

Time: _____

INSTRUCTOR DESCRIPTION OF ACADEMIC DISHONESTY INCIDENT:

INSTRUCTOR HAS DISCUSSED THESE ALLEGATIONS WITH THE STUDENT:

____ YES DATE _____

____ NO CONFERENCE WILL TAKE PLACE ON: _____

SIGNATURE OF INSTRUCTOR

SIGNATURE OF DIVISION DEAN

This report will become a part of the student's permanent record. A copy will be mailed or given to the student. Instructor may give the student an F for the assignment and/or for the course depending upon the seriousness of the infraction.

If the student's permanent record indicates more than one occurrence of cheating or plagiarism, the student may be placed on probation, suspended, or expelled.

"A student may appeal to the Academic Standards Committee any sanctions employed based on an allegation of dishonesty. Such an appeal must be made within fifteen (15) days after notification is mailed or given to the student." FCC POLICY

APPENDIX B

ARRT Pre-Application



INSTRUCTIONS

Do you think you might have to disclose an ethics violation? If so, the Ethics Review Preapplication lets you do so in advance—instead of on your Application for Certification and Registration.

WHEN NOT TO USE THIS FORM

Don't use this form if either of the following apply to you:

- You're within eight months of graduation from an ARRT-recognized educational program and meeting the ARRT degree requirement. (If this describes you, submit the information identified in this packet with your Application for Certification and Registration instead. The application is available from your program director.)
- You answer no to all three questions in the section below.

WHEN TO USE THIS FORM

Use this form if both of the following apply to you:

- You aren't enrolled in an ARRT-recognized educational program, or you're at least eight months away from graduation in such a program or meeting the ARRT degree requirement.
- You answer yes to one or more of the following questions:

(1) Have you ever been charged with or convicted of a misdemeanor or felony? (This includes court convictions and military courts-martial.)

Answer "Yes" if you have:

- Charges or convictions—including those that were stayed, withheld or deferred, set aside, or suspended
- Any plea of guilty, Alford plea, or plea of no contest (nolo contendere)
- Court conditions applied to your charge—including court supervision, probation, or pretrial diversion
- Traffic violations charged as misdemeanors or felonies
- Traffic violations that involved drugs or alcohol

Answer "No" if you have no offenses. Also answer "No" if you have:

- Offenses and convictions that occurred before you turned 18 and that were processed in juvenile court
- Speeding and parking tickets that weren't charged as misdemeanors or felonies and that didn't involve drugs or alcohol (if you have any traffic violation that involved drugs and/or alcohol, you must answer "Yes")
- Charges that were dismissed with no court conditions required (if conditions were required, you must answer "Yes")
- Court records that were sealed or expunged (if you don't have court documents that prove your case was sealed or expunged, you must answer "Yes")
- Offenses you've already reported to ARRT and about which ARRT has sent you communication



ETHICS REVIEW PREAPPLICATION

(1) Has a regulatory authority or certification board (other than ARRT) ever done one or more of the following?

- Denied, revoked, or suspended your professional license, permit, registration, or certification?
- Placed you on probation (excluding ARRT Continuing Education probation), under consent agreement, or under consent order?
- Allowed voluntary surrender of your professional license, permit, registration, or certification?
- Subjected you to any conditions or disciplinary actions?

Answer “Yes” if one or more of these apply to you and the organization imposing the action wasn’t ARRT.

Answer “No”:

- If you have no offenses
- If your only offense is ARRT Continuing Education (CE) probation
- For offenses previously reported to ARRT and for which ARRT has sent you communication

(2) Have you ever been suspended, dismissed, or expelled from an educational program you attended to meet ARRT certification and registration requirements?

Answer “No” for offenses previously reported to ARRT and for which ARRT has sent you communication.

Whether you answer “Yes” or “No” to this question, you must read and sign the “Written Consent Under FERPA” in this preapplication.

For additional guidance, visit arrt.org and search for the Ethics Review Checklist for Honor Code Violations, or call us at 651.687.0048, and select the option for Ethics Requirements.

SUBMIT THE FOLLOWING DOCUMENTATION WITH THIS FORM

If any of the documents you’re submitting don’t match the name on your Ethics Review Preapplication, submit evidence of the name change (e.g., copy of marriage certificate or court order showing name change).

For Criminal Violations (Question 1):

- Explanation of the events that led to each charge or conviction.
- Copies (not originals) of official court documents* to confirm each of the following:
 - Nature of charges filed (misdemeanor, felony, or military court-martial)
 - Date on and jurisdiction in which the charges were filed
 - Final judgment, if applicable (guilty, Alford plea, nolo contendere [no contest], withheld or deferred adjudication, suspended or stayed sentence, set aside, or pretrial diversion)
 - Sentencing requirements (parole, probation, fines)
 - Status of the conditions of the court (e.g., completed, case closed, dismissed)

**You usually can obtain such documents by request at the courthouse in the jurisdiction in which the charge or conviction occurred.*

- If you’re on probation or parole, send a current update from your probation or parole officer, including the estimated date that your probation or parole will end. Your probation or parole officer must print or type the update on official stationery; include the telephone number of the probation or parole office; and mail it directly from the probation or parole office to ARRT at 1255 Northland Drive, St. Paul, MN 55120-1155.
- If you’ve completed the requirements of the court, including probation or parole, we need proof that you’ve done so. Send us a copy of the official court release documents or the release letter on official court stationery.
- Documentation of your completion of any court-ordered remedial programs and community service (if applicable).



ETHICS REVIEW PREAPPLICATION

- Written status of any counseling or treatment (if applicable), and/or documentation of completion, required as a result of your charge or conviction.
- Letters of recommendation (e.g., from employers, instructors, court officials, and the like) are optional.

For Regulatory Authority or Certification Board Violations (Question 2):

- Provide your explanation of the events that led to the violation.
- Submit a copy of official documentation of any agreement or disciplinary action another state or federal regulatory authority or certification board has taken.
- Provide a copy of your state license (if applicable).
- Letters of recommendation (e.g., from employers, instructors, court officials, and the like) are optional.

For Honor Code Violations (Question 3):

- Provide your explanation of the events that led to the suspension, dismissal, or expulsion.
- Send a copy of all correspondence between you and your educational program regarding the incident and any disciplinary action taken.
- Letters of recommendation (e.g., from employers, instructors, court officials, and the like) are optional.

IMPORTANT NOTES AND ACKNOWLEDGEMENTS

- (1) The Ethics Review applies only to violations specified in the Ethics Review Preapplication. It doesn't apply to any violations you don't report or to violations that occur after you submit the Ethics Review Preapplication.
- (2) Submitting the Ethics Review Preapplication doesn't take the place of completing any other ARRT eligibility and application requirements. You still must submit an Application for Certification and Registration and the associated fee.

CHECKLIST

Before submitting this preapplication, please complete the following steps:

- Fill out the Ethics Review Preapplication form on the next page.
- Sign the agreement—found at the end of this document—in the presence of a notary.
- Enclose all required documentation (see previous pages).
- Enclose the nonrefundable \$100 Ethics Review fee, payable to ARRT by personal check or money order.
- Send items noted above, the signed/notarized agreement, and completed preapplication form to:
ARRT, 1255 Northland Dr., St. Paul, MN 55120.

If you submit an incomplete Ethics Review Preapplication, or you don't include all required documentation, we will return it.

Click on this [ARRT Ethics Review Preapplication Form](#) link to access and complete the necessary documents for ethics review.

An ethics review can take a significant amount of time—sometimes three months or more. If you're concerned about meeting the ethics requirement, we recommend you request an ethics review preapplication before or shortly after you enter an education program.

Once we receive your submission, the Ethics Committee will review it and make a decision.

CONTACT THE ARRT WITH QUESTIONS

If you aren't sure whether your actions constitute an ethics violation, report the actions now—and find out sooner rather than later. If you have questions, contact our Ethics Requirements Department at 651.687.0048. Choose the option for ethics information.

Although our staff members can explain the steps of the ethics review process to you, they can't advise you on possible outcomes, and they won't have any effect on the outcome. All official communication regarding your ethics review will come in writing from the Ethics Committee.

APPENDIX C

Pregnancy Policy

Declaration of Pregnancy

In accordance with the NRC's regulations at 10 CFR 20.1208, "Dose to an Embryo/Fetus,"

I, _____, do hereby make this voluntary declaration of pregnancy.
Printed Name

My estimated delivery date is _____.
Month/Day/Year

It has been explained to me that this declaration is voluntary and may be withdrawn at any time. The withdrawal of the "Declaration of Pregnancy" must be in writing and submitted to program officials. By declaring my pregnancy, I understand that the Fresno City College Radiologic Technology Program must take precautions to ensure that the total dose to the fetus/embryo during my entire pregnancy will not be allowed to exceed 0.5 rem(5mSv) for the entire gestational period or 50 mrem(0.5mSv) in any month (unless that dose has already been exceeded between the time of conception and submitting this letter). I also understand that meeting the lower dose limit may require a reassignment of rotations to aide in lower overall occupational exposure.

Student Signature

Date

Program Director Signature

Date

Rescinding Declaration of Pregnancy

The pregnant worker may undeclared the above declaration in writing at any time without explanation and the dose monitoring will be discontinued and the applicable radiation worker occupational dose limits will apply.

I, _____, declare that I no longer wish to be considered a declared pregnant woman.

Student Signature

Date

**Fresno City College
Radiologic Technology Program
Attachment to Pregnancy Policy**

**RADIATION SAFETY FOR FEMALE STUDENT TECHNOLOGIST OF
CHILDBEARING AGE**

- 1. The following is a brief list of facts regarding risks and limits for laboratory/ Clinical Education Setting. They are intended to serve as a basis for further discussion and reading.**
 - a) The first three months of pregnancy are the most important as the embryo/fetus is most sensitive to radiation at this time.**
 - b) In most cases of occupational exposure, the actual dose received by the embryo/fetus is less than the dose received by the mother, because some of the dose is absorbed by the mother's body.**
 - c) At the present occupational dose equivalent limits, the risk to the unborn baby is considered to be small, but experts disagree on the exact amount of risk.**
 - d) The Nuclear Regulatory Commission (NRC) recommends a Dose Equivalent Limit of 500 mrem (5mSv) to the fetus during the full duration of the pregnancy, and a limit 50 mrem (.5 mSv) per month once a pregnancy is known.**

- 2. Although strictly voluntary, it is in keeping with the Federal recommendations the following steps should be taken if a student suspects pregnancy:**
 - a) Declare your pregnancy with the Program Director who will review the Pregnancy Policy with you.**
 - b) Sign the Declaration of Pregnancy form. (You may withdraw your written Declaration of Pregnancy at any time.)**
 - c) Have the Program Director counsel you on proper radiation protection and principals in keeping with the program Pregnancy Policy.**
 - d) Obtain from the Program Director a second radiation monitor for the fetus to be worn at the waist level and under any radiation protection devices like a protective apron (full-size, half-size or any other protective clothing appropriate to the situation).**
 - e) Strictly adhere to all safety precautions for protection purposes.**
 - f) Never hold patients or encounter the primary beam at any time or for any reason.**
 - g) Whenever possible, stay out of radiation areas and behind protective barriers.**
 - h) If at any time you feel you are working in an unsafe area or under conditions you feel are detrimental to yourself or fetus, stop immediately and report to the clinical instructor or program faculty.**

3. Acknowledgment:

- i) I have read the information presented on this form and discussed the items listed. I understand that if I have further questions or if I would like to read further references that they will be supplied by the Program Director.

Student Technologist Signature

_____ Date _____

Program Director Signature

_____ Date _____

APPENDIX D
Clinical Education
Instructor Duties
And Responsibilities

Clinical Instructor Duties and Responsibilities

The Radiologic Technology Program at Fresno City College follows the guidelines set forth by its accrediting body, the Joint Review Committee on Education in Radiologic Technology (JRCERT). The following information for Clinical Instructors is taken directly from JRCERT's requirements.

In support of **Standard Five: Health and Safety**, the program:

5.4 *Assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.*

Assures that students are directly supervised until competency is achieved. Once students have achieved competency, they may work under indirect supervision.

Assures that all repeat images are completed under direct supervision to ensure patient safety and proper educational practices.

Direct Supervision, Indirect Supervision and Repeat Radiographs:

1. Assures that medical imaging procedures are performed under the direct supervision of a qualified practitioner until a radiography student achieves competency.
2. Assures that medical imaging procedures are performed under the indirect supervision of a qualified practitioner after a radiography student achieves competency.
3. Assures that radiography students repeating unsatisfactory radiographs are under the direct supervision of a qualified practitioner.

In support of **Standard Three: Faculty and Staff**, the program:

3.2 *The sponsoring institution and program assures that all faculty and staff possess the academic and professional qualifications appropriate for their assignments.*

Radiography Clinical Instructor(s) or Radiation Therapy Clinical Supervisor(s):

1. Is proficient in supervision, instruction, and evaluation;
2. Documents two years clinical experience in the professional discipline;
3. Holds American Registry of Radiologic Technologists certification or equivalent and registration in the pertinent discipline.

3.3 *The sponsoring institution and program assures the responsibility of faculty and clinical Staff are delineated and performed.*

Radiography Clinical Instructor(s) or Radiation Therapy Clinical Supervisor(s):

1. Maintain knowledge of program mission and goals;
2. Understands the clinical objectives and clinical evaluation system, and evaluating students' clinical competence'
3. Provides students with clinical instruction & supervision;
4. Participate in the assessment process, as appropriate;

5. Maintains current knowledge of program policies, procedures, and student progress and monitoring and enforcing program policies and procedures.

In addition, Radiograph Clinical Instructor(s) or Radiation Therapy Clinical Supervisor(s) must:

- Maintain competency in the professional discipline and in instructional and evaluative techniques through continuing professional development;
- Ensure a 1:1 student to tech ratio is maintained at all times;
- Ensure only clinical instructors are allowed to “sign-off” student clinical competencies. Additional Information:
 1. Radiologic Health Branch regulations state, “It shall be unlawful to employ students in lieu of certified radiologic technologists.”
 2. Clinical instructors should be given release time each week to meet with the students for discussion and clinical education.
 3. The student logbook is an actual program document and is retained in the student's file. Comments in the logbook are not required but if entries are made, they are to be made by **the clinical instructor only**. Entries by anyone other than the designated clinical instructor for each site are unacceptable.
 4. In general, the clinical hours for the program are from 8:00 a.m. to 4:30 or 5:30 p.m. Monday through Friday, depending on the semester. JRCERT prohibits clinical education outside the hours of 5:00 a.m. to 7:00 p.m. Monday through Friday. Students may make- up clinical hours on weekends, however, those hours must not exceed 25% of the total clinical clock hours.
 5. Students should be placed only with radiologic technologists that will serve as positive role models and practice radiography in compliance with what is taught in the classroom. It only confuses and frustrates a student when they are taught what is in a textbook and required by law, only to witness the exact opposite by some technologists in the field.
 6. Student tardiness and most absences are unacceptable. Students are required to be in the clinic during their assigned hours. Any variation from the schedule requires documentation and notification of the incident to the Program Director / Clinical Coordinator. Students are responsible for making up any clinical hours missed. Students may make up hours during spring break or finals week since those days are within the school semester, and students are covered with the school’s liability insurance. However, students are NEVER allowed in the facilities on school observed holidays, or between semesters. There is NEVER a time when “Double Hours” are allowed.
 7. First year student evaluations are to be given once at the end of the Fall and Spring semesters. Second year student evaluations are to be given three times a semester, each at approximately 1/3, 2/3, and at the end of the semester. Students are also required to receive an evaluation at any “secondary rotations”.
 8. In the first week of arrival, students must receive an orientation to the clinics imaging department. The program Student Handbook contains the minimum requirements of an orientation. The clinics are welcome and encouraged to expand on these minimum requirements.
 9. Most of the pertinent program information is in the Fresno City College Student Binder located in all of the program’s clinical affiliates. Many questions can be answered by accessing the binder. However, when in doubt do not hesitate to contact the Clinical Coordinator at (559) 244-2602 or the Program Director at (559) 244-2652 with any concern that may arise.

The program acknowledges the additional responsibility and effort required to participate in the clinical education of radiography students. As always, thank you for your continued support of the Radiologic Technology Program at Fresno City College.

(Updated 11/14/23)

APPENDIX E

Program Withdrawal Agreement

**FRESNO CITY COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
PROGRAM WITHDRAWAL AGREEMENT**

I will not be able to continue my study in the Radiologic Technology Program because of one of the following reasons:

Pregnancy___ Financial ___ Family ___ Illness ___ Excessive Absences ___ Course Failure ___ Other___

COMMENTS

PLEASE READ CAREFULLY

I am aware that withdrawing from the program for any one of the above reasons will subject me to loss of my continuing student status. I will be reclassified as an out-of-sequence student whose placement is contingent on space availability. If there are more students applying for readmission than spaces, placement of the students applying for readmission will be determined by lottery. I understand that if I am seeking entry level readmission and there are more applicants for admission to the Program than there are spaces available, readmission will be based on the same criteria as that used for initial entry into the Program. If I am seeking advanced placement readmission, readmission is based on a space availability factor.

I understand that as a consequence of my withdrawing from the program, I will not be continuing on with my fellow classmates; and if readmitted I will be in classes with continuing students.

I understand that while continuing students are guaranteed positions throughout the program, the out-of-sequence student is given no guarantee.

I am required to keep my address up to date and notify the Health Science Office of any changes of address and telephone number. If the Health Science Office cannot contact me for placement, I can expect to have my name removed from the list for reinstatement.

Student's Signature

Date

Program Director's Signature

Date

APPENDIX F
Program Pre-requisites
And
General Education Requirements

Fresno City College
Radiologic Technology Program
Prerequisites and General Education Requirements

For a copy of current program pre-requisites and general education requirements, please see a Health Sciences Counselor.

APPENDIX G

Magnetic Resonance Imaging Students Screening Form

Magnetic Resonance Screening Form for Students

Magnetic resonance (MR) is a medical imaging system in the radiology department that uses a magnetic field and radio waves.

This magnetic field could potentially be hazardous to students entering the environment if they have specific metallic, electronic, magnetic, and/or mechanical devices. Because of this, students must be screened to identify any potential hazards of entering the magnetic resonance environment before beginning clinical rotations.

Pregnancy Notice: The declared pregnant student who continues to work in and around the MR environment should not remain within the MR scanner room or Zone IV during actual data acquisition or scanning.

Name: **Date:**

		Circle Yes or No	
1. Have you had prior surgery or an operation of any kind?	Yes	No	
If yes to question 1, please indicate the date and type of surgery: Date: _____ Surgery Type: _____			
2. Have you had an injury to the eye involving a metallic object (e.g. metallic slivers, foreign body)?	Yes	No	
If yes to question 2, please describe: _____			
3. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)?	Yes	No	
If yes to question 3, please describe: _____			
Please indicate if you have any of the following:			
Aneurysm clip(s)	Yes	No	
Cardiac pacemaker	Yes	No	
Implanted cardioverter defibrillator (ICD)	Yes	No	
Electronic implant or device	Yes	No	
Magnetically-activated implant or device	Yes	No	
Neurostimulator system	Yes	No	
Spinal cord stimulator	Yes	No	
Cochlear implant or implanted hearing aid	Yes	No	
Insulin or infusion pump	Yes	No	
Implanted drug infusion device	Yes	No	
Any type of prosthesis or implant	Yes	No	
Artificial or prosthetic limb	Yes	No	
Any metallic fragment or foreign body	Yes	No	
Any external or internal metallic object	Yes	No	
Hearing aid	Yes	No	
Other device:	Yes	No	

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form. Should any of this information change, I will inform my program director.

Signature of Person Completing Form: _____ Date: ____/____/____

☐ The student has not identified any contraindications to entering MR Zone III or IV.

☐ The student has identified contraindications to entering MR Zones III and IV. The student has been advised not to progress past MR Zone II unless screened by an MR Level II Technologist onsite at each clinical setting.

Form Information Reviewed By: _____
Print name
Signature
Title

This form is provided by the JRCERT as a resource for program 13. Programs are encouraged to personalize the form prior to use.

Remember: The magnet is always on!

APPENDIX H

Student Clinical Probation Form



Fresno City College

Radiologic Technology

Student Clinical Probation

Policy:

Clinical Probation is designed to address ongoing concerns or problems with a student's performance and/or professional behavior while at a clinical facility site, or the student has not benefited from instruction. Determination of unsatisfactory performance in the clinical area will be based on clinical objectives, clinical observations, film critique sessions, a student's professionalism and the ability to follow college and hospital policy based on safe and competent practice. **Students dropped due to unsafe clinical practice or unsafe patient care, or have the misfortune of being dismissed from two separate clinical facilities due to any reason will be removed from the program and not allowed to re-enter.**

Procedure:

Insufficiencies noted by the clinical instructor will be discussed with the student. At which time, the student will be reminded of the program/hospital standards and expectations, be provided with extra supervision, and the program director or director of clinical instruction will be sent an email documenting the students deficiencies.

Students requiring a second notification will be placed on a **one-week** probationary period. The lack of progression or the desire to learn and improve his /her performance upon the end of the one-week probationary period will result in immediate dismissal from that clinical facility. The clinical instructor will inform the program director or director of clinical instruction of the dismissal, and a student evaluation will be completed by the clinical instructor documenting reasons for dismissal.

Student Acknowledgment:

I understand that I have been placed on Clinical Probation for **one week** from _____ to _____. If I do not progress, or continue to demonstrate unsatisfactory performance in the clinic, I will be dismissed from this clinical facility and not allowed to return.

Student Name (Print)

Student Signature

Date

Clinical Instructor Name (Print)

Clinical Instructor Signature

Date

APPENDIX I

Student Radiation Dose Violation Form

**Fresno City College
Radiologic Technology Program
CDPH RHB School ID #1012**

Student Radiation Dose Violation Form

The following students have violated the policy for acceptable dose limits as outlined in the Fresno City College Radiologic Technology Program Policy which states, *“Any radiation dose received by students during their education in the program must not exceed 1 mSv (100 mRem) per year or 0.25 mSv (25 mRem) per quarter.”*

Name (Last, First, Middle)	Initials	Address (Number, Street, City, State, Zip)	Dosimeter Reading

This form is to be sent to the CDPH RHB within 30 days of a radiation safety accident/incident/violation.

I certify that the information provided is true and accurate.

Radiation Safety Officer:	Telephone Number:
Signature:	Date: