

College of Health Professions  
Department of Medical Imaging and Radiation Sciences

## **Radiography Program**

Academic Policies and Clinical Education

Student Handbook

2023-2024

## **Equal Opportunity**

Thomas Jefferson University is committed to providing equal educational and employment opportunities for all persons without regard to race, color, national or ethnic origin, marital status, religion, sex, sexual orientation, gender identity, age, disability, veteran's status or any other protected characteristic. The consideration of factors unrelated to a person's ability, qualifications and performance is inconsistent with this policy. Any person having inquiries or complaints concerning Thomas Jefferson University's compliance with Title VI, Title IX, the Age Discrimination Act of 1975, the Americans with Disabilities Act, or Section 504 of the Rehabilitation Act is directed to contact their Student Affairs Dean, the Title IX Coordinator, or Human Resources – Employee Relations, who have been designated by Thomas Jefferson University to coordinate the institution's efforts to comply with these laws. Any person may also contact the Assistant Secretary for Civil Rights, U.S. Department of Education, Washington, D.C. 20202, or the Director, U.S. Department of Education, Office for Civil Rights, Region Three, Philadelphia, Pennsylvania, regarding the University's compliance with the equal opportunity laws.

## **Required Background Check**

Students who are offered admission to Jefferson in a health related program are generally required to pass a criminal background check and child abuse clearance. Please consult with the Program Director of Office of Admissions for clarification on required paperwork for admission. Additionally, some departments and/or programs within the College, as well as some clinical sites may require students to be fingerprinted and/or drug tested. The Office of Admissions, along with your academic program, will provide you with the appropriate information to complete these requirements.

Clinical rotation, fieldwork, and residency sites that require a criminal background check, child abuse clearance and/or fingerprinting may deny a student's participation in the clinical experience, rotation, fieldwork, or residency because of a felony or misdemeanor conviction or a record of child abuse. Clinical sites may also deny participation in clinical experiences for other reasons, including but not limited to failure of a required drug test, or inability to produce an appropriate health clearance. As participation in clinical experiences, rotations, fieldwork, or residencies is a required part of the curriculum and a requirement for graduation, denial of participation by a clinical site may result in delay of graduation or the inability to graduate from the program.

Regardless of whether or not a student graduates from Jefferson, individuals who have been convicted of a felony or misdemeanor may be denied certification or licensure as a health professional. Information regarding individual eligibility may be obtained from the appropriate credentialing bodies.

## **Disclaimer Statement**

The Department of Medical Imaging and Radiation Sciences reserves the right to amend, modify, rescind, or implement any policies, procedures, regulations, fees, conditions and courses described herein as circumstances may require without prior notice to persons who might thereby be affected. The provisions of this handbook are not and may not be regarded as contractual between or among the College, its students or its employees or agents.

## **Diversity Statement**

Jefferson holds itself accountable, at every level of the organization, to nurture an environment of inclusion and respect, by valuing the uniqueness of every individual, celebrating and reflecting the rich diversity of its communities, and taking meaningful action to cultivate an environment of fairness, belonging, and opportunity.

*Revised 2023*

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### **UNIVERSITY MISSION**

We are a university with preeminence in transdisciplinary, experiential professional education, research and discovery, delivering exceptional value for 21st century students with excellence in architecture, business, design, fashion, engineering, health science, and textiles infused with the liberal arts.

### **ENTERPRISE MISSION**

We Improve Lives.

### **ENTERPRISE VISION**

Reimagining health, education and discovery to create unparalleled value.

### **COMMITMENT TO DIVERSITY & INCLUSION**

Jefferson holds itself accountable, at every level of the organization, to nurture an environment of inclusion and respect, by valuing the uniqueness of every individual, celebrating and reflecting the rich diversity of its communities, and taking meaningful action to cultivate an environment of fairness, belonging, and opportunity.

### **MISSION OF THE DEPARTMENT & RADIOGRAPHY PROGRAM**

The Mission of the Department of Medical Imaging & Radiation Sciences and the Radiography Program is to provide a comprehensive education preparing students for entry-level practice in medical imaging and radiation sciences as competent, caring members of the health care team, cultivating professionalism and life-long learning.

## **PROGRAM GOALS AND STUDENT LEARNING OUTCOMES**

### **Goal # 1: Clinical Competence:**

Students/Graduates will gain the knowledge, insight, and professional skills necessary to perform competently as an entry-level practitioner.

#### **Student Learning Outcomes:**

- 1-A. Students will demonstrate proficiency in positioning.
- 1-B. Students will provide safe and quality patient care including safe radiation practices for patient, self, and the healthcare team.

### **Goal # 2: Critical Thinking:**

Students/Graduates will demonstrate critical thinking and problem-solving skills in making decisions about radiographic exams

#### **Student Learning Outcomes:**

- 2-A. Students will demonstrate the ability to formulate and implement adjustments in imaging protocols, including positioning and technical factor selection.
- 2-B. Students will critique images for diagnostic quality and determine the corrective measures for image improvements.

### **Goal # 3: Professionalism:**

Students/Graduates will recognize the importance of professional growth and continued development.

#### **Student Learning Outcomes:**

- 3-A. Students will integrate professional ethics and behavior into clinical practice.
- 3-B. Students will demonstrate behaviors that contribute to a positive work environment.

### **Goal # 4: Communication Skills:**

Students/Graduates will communicate effectively and demonstrate caring and respectful behaviors when interacting with patients, family, and members of the healthcare team.

#### **Student Learning Outcomes:**

- 4-A. Students will demonstrate effective written communication skills by gathering and documenting essential, accurate, and concise information about the patient.
- 4-B. Students will explain radiographic examinations to the patient and caregiver in simple terms.

## **THE HANDBOOK**

This Academic Policies and Clinical Education Student Handbook serves to share with you certain resources, policies, and procedures that may be useful to you during your undergraduate studies in the Department of Medical Imaging and Radiation Sciences in the Jefferson College of Health Professions. While we have attempted to provide you with a comprehensive handbook, it does not stand alone. Students are responsible for understanding academic policies and procedures of Thomas Jefferson University and the Jefferson College of Health Professions (JCHP). Important University wide policies, including the Community Standards and Student Sexual Misconduct Policy, and information on University Services are found on the Thomas Jefferson University Center Student Handbook website at [www.jefferson.edu/handbook](http://www.jefferson.edu/handbook). Students are also directed to the policies and procedures contained in the JCHP Student Handbook, which can be found at <https://www.jefferson.edu/academics/colleges-schools-institutes/health-professions/departments-programs/medical-imaging-radiation-sciences/student-resources.html>

If you should have any questions throughout your academic career here, we encourage you to reach out to your program director, advisor, or department chair.

## **DISCLAIMER STATEMENT**

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### **NATIONAL CERTIFICATION EXAMINATION**

Graduates of the one-year and two-year Bachelor of Science degree programs are eligible to take the associated certification examinations upon completion of the Bachelor of Science degree program and award of the Bachelor of Science degree. Students are eligible to take the associated certification examinations of the American Registry of Radiologic Technologists (ARRT), American Registry of Diagnostic Medical Sonographers (ARDMS), Cardiovascular Credentialing International (CCI), Medical Dosimetrist Certification Board (MDCB), and Nuclear Medicine Technology Certification Board (NMTCB), as applicable. Students who pass these examinations receive national certification.

### **PROGRAM ACCREDITATION**

The educational programs of the Department are approved by the University administration. Programs are programmatically accredited by their respective accreditation bodies (e.g. JRCERT, JRCNMT, and JRCEDMS). All programs, including the Computed Tomography, Invasive Cardiovascular Technology and PET/CT programs, are covered under the University's accreditation by Middle States Commission on Accreditation.

### **PROGRAM COMPLIANCE**

A student who believes a program is not in compliance with the accreditation standards should submit a written complaint to the Program Director, including documentation for the complaint. The Department Chair, Program Director, and Clinical Coordinator will review the complaint and documentation and respond to the student within three (3) business days of receiving the complaint. If the student is not satisfied with the response, the student has the right to contact the accreditation body<sup>1</sup>. Please refer to appendix G for the Standards for an Accredited Educational Program in Radiography

#### **JRCERT**

20 N. Wacker Drive  
Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
Fax: (312) 704-5304  
<http://www.jrcert.org/>

*1. Students in the CT, ICVT, or PET/CT Program should contact the Dean of JCHP.*



## **UNIVERSITY AND JCHP POLICIES AND PROCEDURES**

While we have attempted to provide you with a comprehensive handbook, it does not stand alone. Students are responsible for understanding academic policies and procedures of Thomas Jefferson University and the Jefferson College of Health Professions (JCHP). Important University wide policies, including the Community Standards and Student Sexual Misconduct Policy, and information on University Services are found on the Thomas Jefferson University Center Student Handbook website at [www.jefferson.edu/handbook](http://www.jefferson.edu/handbook). Students are also directed to the policies and procedures contained in the JCHP Student Handbook, which can be found at <https://www.jefferson.edu/academics/colleges-schools-institutes/health-professions/departments-programs/medical-imaging-radiation-sciences/student-resources.html>

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**ACADEMIC POLICIES**

## **POLICIES ON STUDENT PROGRESSION**

### **COURSE REQUIREMENTS**

1. Program curriculum is sequential in nature and each course must be taken in the prescribed semester according to the plan of study.
2. Students are responsible for accessing courses through Canvas, <https://canvas.jefferson.edu/> and downloading all course syllabi, handouts, and assignments for each course every semester.
3. Students must complete course evaluations for each of their courses at the end of the semester. A link will be provided to the students at the end of each semester.
4. Students must complete the University Orientation, Health Insurance Portability and Accountability Act (HIPAA) module, and Safety module prior to matriculation.
5. Students are responsible for checking their **Jefferson** e-mail accounts daily. All Program related correspondence will occur through this account only.

### **POLICIES ON UNDERGRADUATE STUDENT PROGRESSION IN THE MEDICAL IMAGING & RADIATION SCIENCES MAJOR**

1. Students who earn one course grade of C- or below in the Medical Imaging & Radiation Sciences curriculum in any academic year will be placed on departmental academic probation and will be required to meet with their assigned faculty advisor to monitor academic progress.
2. Students who do not maintain a minimum of a 2.0 cumulative GPA will be placed on University academic probation.
3. Students who earn two or more course grades of C- or below in the Medical Imaging & Radiation Sciences curriculum in any academic year will be dismissed from the Department of Medical Imaging & Radiation Sciences.
4. Students who earn a course grade of F in any Medical Imaging & Radiation Sciences curriculum will be dismissed from the Department of Medical Imaging & Radiation Sciences.
5. Incomplete grades for a Medical Imaging & Radiation Sciences course can be assigned only in the case of extenuating circumstances. These circumstances must be reviewed by the faculty prior to the issuance of an "Incomplete" grade. In all cases, an "Incomplete" grade is assigned only when the work already done has been of a quality acceptable to the instructor.

### **PROBATION/RETURNING TO GOOD ACADEMIC STANDING**

Students who achieve the minimum standards to return to good academic standing (2.0 cumulative GPA, no additional course grades of C-, D, or F in the academic year) will be removed from probation at the end of the academic year. Two-year students who have been placed on departmental academic probation during their junior academic year, but have successfully completed their junior academic year, will be taken off departmental academic probation at the beginning of their senior academic year.

At the end of the probationary period:

1. The student achieves the minimum 2.0 cumulative GPA, no additional course grades of C-, D, or F in the academic year is reinstated in good standing, or
2. The student fails to achieve the minimum 2.0 cumulative GPA, receives additional course grades of C-, D, or F in the academic year at the end of the probationary period and is dismissed from the College for academic underachievement.

### **ACADEMIC INTEGRITY POLICY**

Academic Integrity is the foundation of all Jefferson teaching, learning, and professional endeavors and is vital to advancing a culture of fairness, trust and respect. All members of the University community must maintain respect for the intellectual efforts of others and be honest in their own work, words, and ideas. The University Academic Integrity Policy can be found <https://www.jefferson.edu/life-at-jefferson/handbooks/policies/graduate-policies/academic-integrity.html>.

### **GRADUATION REQUIREMENTS**

Requirements for graduation include:

- Completion of a graduation application
- Completion of all clinical and didactic courses in the program's curricular plan of study
- Receiving a passing grade for all clinical and didactic courses in the program's curricular plan of study
- Being in good academic standing at the end of the final semester of the program

### **TIME TO DEGREE RESTRICTIONS**

- Students are required to complete their course of study in no more than 150% of the standard time frame required by the academic program.
  - The one-year Bachelor of Science program has a standard time frame of 12 months.
  - The two-year Bachelor of Science program has a standard time frame of 24 months.
  - The undergraduate certificate program has a standard time from of 12 months.

An extension may be granted in the event of extenuating circumstances. The death of a family member or documented medical illness is examples of unusual and extenuating circumstances.

## **TRANSFER OF CREDITS/CHALLENGE EXAM, CREDIT BY EXAM, COURSE BY APPOINTMENT**

Prerequisites must be completed by the time the student enters Thomas Jefferson University. Credits may be earned through standardized tests, including CLEP for non- science based courses. Thomas Jefferson University does not accept challenge exams.

## **COURSE REPEAT POLICY**

Programs in the Department follow a sequential prescribed curricular plan of study. Courses are only offered one time in a particular semester. If a course is failed with a grade of "F", the student is dismissed from the Department. The Department readmission policy should be followed if a student wishes to seek readmission. An individual plan of study would be created, that includes, but not limited to repeat of the full program's curricular sequence.

## **READMISSION AFTER DISMISSAL**

Matriculated students who have been dismissed from the Department of Medical Imaging & Radiation Sciences may petition, in writing, for readmission within 1 year of dismissal directly to the Department Chair. Students interested in applying for readmission should contact the Department Chair for program-specific readmissions procedures.

Students who have not been enrolled within JCHP for greater than a 1 year period of time must re-apply for admission through the Office of Admissions.

Please note: All readmitted students are subject to the academic and curricular requirements in place at the time of readmission. Additionally, start terms for the readmitted students will be determined by the program and based on the student's plan of study; readmitted students cannot assume that they will start in the next immediate term after readmission has been granted.

The student's Department Chair will indicate any requirements that the student must meet upon readmission. The student will be held responsible for fulfilling these special criteria of academic performance established with the program upon readmission, in addition to the overall program and College requirements for achieving good academic standing.

## **RETENTION OF STUDENT WORK**

Student records are maintained by the Department for a minimum period of three years after graduation.

## **CONTINUOUS ENROLLMENT**

The Department of Medical Imaging and Radiation Sciences curriculum was designed to be delivered sequentially, where concepts and skills are introduced, expanded upon, and mastered across the program and where competencies are enhanced at different points across the curriculum. To be most effective at delivering the requisite competencies in accordance with accreditation standards, students must be continuously enrolled from the point of matriculation until graduation unless a leave of absence is approved. If a personal or medical leave of absence is required, the leave must be approved and must not exceed one calendar year.

## ACCOMMODATIONS-GENERAL

Thomas Jefferson University is committed to providing equal education opportunities to all students, including students with disabilities, in accordance with section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. Thomas Jefferson University will provide reasonable accommodations to all qualified individuals with disabilities to allow equal access and full participation to all University sponsored activities and programs. More information on disability accommodations can be found at <https://www.jefferson.edu/university/academic-affairs/schools/student-affairs/disability-accommodations/Overview.html>

To request an accommodation, please contact the [Office of Student Affairs](#).

## TECHNICAL STANDARDS-ACCOMMODATIONS

If a student cannot demonstrate the skills and abilities listed in the technical standards for the program, it is the responsibility of the student to request an appropriate accommodation. The University will provide reasonable accommodations provided that such accommodations do not fundamentally alter the nature of the program and/or do not impose an undue hardship such as those that cause significant expense, difficulty or are unduly disruptive to the educational process.

## TECHNICAL STANDARDS

### Physical Demands

Clinical and laboratory assignments for the Radiography program require certain physical demands that are the minimum technical standards for admission. Listed below are the technical standards that all students must meet in order to enter and complete the Radiography program.

#### **The student must be able to routinely:**

- Bend, stoop, reach, and stretch the arms and body, often utilizing awkward and non- ergonomically correct positions.
- Possess the manual dexterity and ability to bend/stretch.
- Lift, move, reach, or push equipment.
- Lift, transfer, assist, and/or move patients to/from wheelchair/stretchers to/from x-ray tables.
- Work standing or walking 80% of the time.
- Manipulate heavy radiography equipment, such as for portable examinations, move patient beds, and must be able to assist patients that are unable to assist themselves.
- Possess physical and mental abilities to handle moderate and frequent exposure to infectious agents (blood, urine) and moderate and limited exposure to ionizing radiation.
- Carry 12-30 pounds (lead apron) while working.
- Have sufficient visual acuity to distinguish colors and shades of gray, view grayscale on a computer monitor, and read written reports, chart orders, etc.
- Read and extract information from the medical chart or patient prescriptions.
- Have sufficient auditory perception to receive verbal communication from

patients and members of the healthcare team.

- Explain the clinical study, including patient instruction, verbally and /or in writing.
- Perform proper steps in a procedure in an organized manner and in a specific sequence.
- Communicate effectively with patients and other health care providers. This includes verbal, reading and writing skills.
- Demonstrate effective interpersonal skills.
- Interact compassionately with the sick or injured.

### **IMPLICATIONS OF PROBATION-CREDENTIALING**

Many accrediting and credentialing bodies require notification that a student was placed on probation. By requesting that the Program complete the appropriate paperwork, a student affirmatively consents to release of such information. This means that if accrediting or credentialing bodies require verification from the University, instances of professionalism probations and academic probations will be reported. This may or may not affect a student's job placement or ability to gain credentialing for a particular institution.

### **STUDENT GRIEVANCE**

All members of the Thomas Jefferson University Community have the right to express concerns when they perceive that they have been treated in a manner not consistent with the standards of conduct at the University. The student grievance procedure is intended to allow students this mode of expression. For academic grievances within the program, students should refer to the Student Grievance Procedure outlined in the JCHP Student Handbook. For grievances external to the academic program, students should consult the Grievance Procedure outlined in the Rights and Responsibilities section of the TJU Student Handbook.

### **STUDENT ADVISEMENT**

All students are required to meet with their faculty advisor at least once during each semester.

**COMPETENCY-BASED CLINICAL EDUCATION**



## COMPETENCY BASED CLINICAL EDUCATION

Competency-based clinical education has been established for the students enrolled in the Department of Medical Imaging & Radiation Sciences programs. It is designed to permit accurate assessment of the knowledge, skills, and attitudes of students in the clinical education component of the program.

Evaluation of students' clinical competencies must be completed by registered technologists under the direction of the Clinical Affiliate Supervisor.

All students must attend the scheduled clinical education rotations (see clinical syllabus). All students must complete the minimum number of clinical competencies in accordance with the requirement of their certification and/or accreditation body. Individual clinical course syllabi will detail the clinical competency requirements to successfully pass the clinical course.

### CLINICAL EDUCATION ELIGIBILITY

To be assigned to a Clinical Affiliate, the student must meet the following requirements or obligations:

- Provide and maintain proof of certification in adult, child, and infant cardiopulmonary resuscitation (BLS/CPR/AED for Healthcare Provider).
- Meet program specific technical standards.
- Complete all immunization requirements prior to commencing or resuming clinical courses.
- Be in compliance with the University requirements for influenza vaccination.
- Complete any additional requirements mandated by the clinical site, department, or university as indicated at the time of the clinical course.

Failure to meet the clinical education eligibility requirements will result in the delay of clinical practical or the failure of clinical courses. Students not in compliance with the eligibility requirements are not permitted to attend clinical and possibly in-person classes.

### CLINICAL PRACTICES AND POLICIES

1. Attendance at clinical practical is mandatory.
2. A student who does not demonstrate safe clinical practice will be in violation of clinical practices and policies.
3. A student who does not demonstrate professional behavior and professional practice may be removed from their clinical rotation and clinical site.
4. Safe clinical or professional practice is defined as:
  - a. Adhering to the *Patients' Bill of Rights* - **Appendix A**.
  - b. Performing clinical duties consistent with the professional standards of ethics - **Appendix B**
  - c. Adhering to the code of behavior/conduct outlined in the University, College and Department of Medical Imaging & Radiation Sciences handbooks.
  - d. Adhering to all clinical practices and policies of the clinical site, and as outlined in the University, College, and Department policies and procedures
  - e. Adhering to departmental radiation protection and monitoring practices where appropriate. See Appendix C, D, E, F (\*only applicable to modalities that use ionizing radiation)
  - f. Adhering to the Radiographer's scope and practice standards, **appendix H**.

## **VIOLATIONS OF CLINICAL PRACTICES AND POLICIES**

Violations of Clinical Practices and Policies will typically be addressed through progressive discipline, as follows:

- First violation – written warning and counseling by the Program Director and/or Clinical Coordinator.
- Second violation – possible suspension, at the discretion of the Program Director, or dismissal.
- Third violation – dismissal from the Department.

Depending on the particular circumstances, one or more progressive disciplinary steps may be skipped in instances of particularly serious violations of policies and/or practices, and some egregious violations may result in immediate dismissal from the Department.

## **POLICY GOVERNING CLINICAL EDUCATION SCHEDULING**

The purpose of the clinical assignment is to correlate didactic knowledge with practical skills and attitudes. The total number of students assigned to any clinical site shall be determined by the Department of Medical Imaging & Radiation Sciences and approved by program accreditation bodies.

The student is subject to all rules and regulations of the clinical affiliate. The clinical affiliate reserves the right to suspend or terminate from the site a student who does not adhere to established policies of the program or the clinical affiliate. A student who does not maintain appropriate behavior may be suspended or dismissed immediately. (Refer to the section entitled "Responsibilities of the Student" on page 15.)

Due to the limited number of clinical sites, should a student be asked to leave the assigned clinical site for any disciplinary reason, the Department cannot guarantee the student a new clinical placement. This would result in a failure for the clinical course and dismissal from the Department.

If a student is suspended or dismissed from a clinical affiliate, the Department Chair, Program Director and Clinical Coordinator will review the circumstances for this action. All parties are encouraged to address the issue promptly in writing (within five (5) business days whenever possible) so that resolution of grievance should require no more than three (3) weeks. If the decision to dismiss is upheld, the clinical dismissal will result in a final grade of "F". Students who have reason to believe that the grade has been inappropriately assigned may request a review of the grade in accordance with the provisions of the Grade Appeal Protocol, which is published in the TJU Student Handbook.

## **CLINICAL AFFILIATE ASSIGNMENT**

The Program Director and/or Clinical Coordinator determines student schedules and assignments at clinical affiliates. Assignments at the clinical affiliates are intended to provide the student with a comprehensive clinical education as deemed appropriate by the faculty, and serves to correlate didactic knowledge with practical skills. Students are not guaranteed specific clinical affiliates, however, student input is considered.

Please see appendix J and K for the policy regarding students in clinical mammography rotations or other imaging procedures performed by professionals who are of the opposite gender of the patient.

Students have the opportunity to select multiple imaging modalities to observe beginning in the first semester of the program. Students may visit or revisit any modality of their choice during the radiography program.

The program provides equitable learning opportunities for all students regarding learning activities and clinical assignments. Any student requesting changes in the clinical schedule must submit written justification for the change to the Program Director and/or Clinical Coordinator. A decision will be made based on the student's educational needs and site availability.

### **RESPONSIBILITIES OF THE CLINICAL AFFILIATE SUPERVISORS/INSTRUCTORS**

The clinical affiliate supervisors/instructors are available to students whenever they are assigned to a clinical setting. Responsibilities include:

- Providing appropriate clinical supervision. Refer to the section entitled "Supervision policy" on page 35
- Providing student clinical evaluation and feedback.
- Providing orientation to the clinical department.
- Providing feedback to the program director and clinical coordinator.
- Being knowledgeable of program goals.
- Understanding the clinical objectives and clinical evaluation system.
- Understanding the sequencing of didactic instruction and clinical education.
- Providing students with clinical instruction and supervision.
- Evaluating students' clinical competence.
- Maintaining competency in the professional discipline and instructional and evaluative techniques through continuing professional development.
- Maintaining current knowledge of program policies, procedures, and student progress.
- Maintaining safety and confidentiality of student records, instructional materials, and other program materials.

### **RESPONSIBILITIES OF CLINICAL STAFF**

Responsibilities of the clinical staff include:

- Understanding the clinical competency system
- Understanding requirements for student supervision
- Supporting the educational process
- Maintaining current knowledge of program policies, procedures, and student progress
- Maintaining safety and confidentiality of student records, instructional materials, and other program materials

### **RESPONSIBILITIES OF THE DEPARTMENT/CLINICAL COORDINATOR**

The Department of Medical Imaging & Radiation Sciences/Clinical Coordinator coordinates the daily operations of clinical education. Duties include, but are not limited to:

- Providing clinical education placements.
- Mentoring students.
- Supervising students.
- Advising students.
- Providing guidance to clinical instructors.

- Reviewing program policies and procedures with clinical affiliate supervisor/instructors.
- Visiting clinical sites each semester to observe and evaluate student performance.
- Maintaining safety and confidentiality of student records, instructional materials, and other program materials.

### **RESPONSIBILITIES OF THE STUDENT**

The student is responsible for:

- Displaying professional appearance in compliance with the dress code policy.
- Establishing harmonious working relationships and earning the respect of the Medical Imaging & Radiation Sciences personnel and other members of the health care team through a professional and dignified posture and attitude.
- Using all equipment and materials responsibly and safely.
- Embodying the highest standards of civility, honesty, and integrity.
- Respecting and protecting the privacy, dignity, and individuality of others.
- Observing and assisting the clinical staff.
- Attending and participating in all scheduled clinical activities.
- Consulting with clinical affiliate supervisors and/or departmental faculty for help with problems.
- Participating in the development of an individualized clinical education plan.
- Maintaining an accurate record of clinical examinations/competencies.
- Recording the number and types of evaluations required during each academic semester.
- Striving to broaden his/her knowledge and background on clinical subject matter by reading professional literature and attending conferences and seminars.
- Incurring all travel costs and expenses. Use personal or public transportation to clinical affiliates. Commuting time and costs are not determining factors for clinical assignments. These time and cost factors are borne solely by the student.
- Meeting with advisor at least once per semester.
- Maintaining safety and confidentiality of student records, instructional materials, and other program materials
- Providing safe and quality patient care including safe radiation practices for patient, self, and the healthcare team.
- Demonstrating clinical progression
- Corresponding in a timely fashion with all program faculty and administration.
- Adhering to all policies and procedures of the clinical affiliate, the Department, the College, and the University

## **CLINICAL POLICIES**

## **DEPARTMENT POLICY ON CONDUCT**

Students must comply with the rules and regulations of the Department of Medical Imaging & Radiation Sciences. Deviation constitutes misconduct. This includes, but is not limited to:

- Sleeping during a clinical assignment.
- Failure to actively participate in clinical education.
- Leaving a clinical assignment or room/area assignment without qualified staff's permission.
- Failure to notify Clinical Affiliate and the Program Director/Clinical Coordinator of absence or lateness.
- Failure to accurately document completion of scheduled clinical rotations (time of start of day's rotation, lunch break, time of end of day's rotation).
- Failure to accurately document competencies in accordance with department regulations.
- Using any personal electronic devices in the patient-care/ clinical education setting.
- Using the hospital computer for any reason EXCEPT hospital business.
- Violation of the supervision policy.
- Violation of any duly established rules or regulations.

## **FAMILY MEMBERS/FRIENDS WORKING AT CLINICAL AFFILIATE POLICY**

It may be deemed a conflict of interest for a student to be supervised or evaluated by family members or friends employed at his/her clinical affiliate. If this situation arises, the student should inform his/her Program Director/Clinical Coordinator so that alternative arrangements can be considered.

## **FAMILY MEMBERS/FRIENDS CLASSROOM, LAB, & CLINICAL POLICY**

### **At the Clinical Affiliate**

- Family and friends are not permitted to visit the student at the clinical affiliate during clinical hours. In particular, unsupervised children are not permitted.
- Family and friends must wait in a public area, and are **not** permitted in scanning or treatment rooms.
- It is not acceptable for students to entertain their family and friends and neglect their professional duties.
- Students may not ask clinical affiliate staff to baby-sit for them.
- TJU's liability insurance does not extend to students' family and friends.

### **In the Medical Imaging & Radiation Sciences (MIRS) Department**

- The University teaching and learning environment is not an appropriate setting for children.
- Faculty and students shall refrain from bringing children to classrooms, studios, laboratories and other instructional settings except in the event of unanticipated emergencies and in those instances, only with appropriate approval.
- When unanticipated emergencies do arise and an exception is being sought, the procedure for seeking approval can be found at <https://www.jefferson.edu/university/academic-affairs/schools/student-affairs/student-handbooks/university-policies/children-in-instructional-settings.html>

### **In the Medical Imaging & Radiation Sciences (MIRS) laboratories**

- Only Medical Imaging & Radiation Sciences students with proper Jefferson ID are permitted in the laboratories.
- The students are not permitted to bring family members or friends in the laboratory at any time.
- Scanning or performing any procedures on family members or friends is not permitted.
- Other Jefferson students or employees who are not part of the Medical Imaging & Radiation Sciences department are not permitted in the MIRS laboratory unless they have signed a waiver to be used as a student volunteer.
- TJU's liability insurance does not extend to students' family and friends.

Failure to comply with the above policy may result in disciplinary action up to and including dismissal from the department.

### **PERSONAL ELECTRONIC DEVICES POLICY**

Students may not carry or use any type of personal electronic device during clinical hours. These devices must be placed with your personal belongings. The use of any type of recording device (camera, video, etc.) is strictly prohibited. Students in violation of this policy may be asked to leave the clinical affiliate and will be marked absent for that day. It is the student's responsibility to notify the Program Director and/or Clinical Coordinator of any absence.

For exceptional circumstances necessitating immediate personal communication by phone or text, students should ask the Clinical Affiliate Supervisor to be excused, attend to the personal business, and return to duty as quickly as possible.

### **COMPUTER POLICY**

Students may not use computers for personal business during clinical hours. Personal business includes (but is not limited to) internet surfing, shopping, emailing, instant-messaging, texting, and printing.

Personal storage devices (USB, flash drives, CDs) are not permitted in the clinical setting.

Students in violation of this policy may be asked to leave the clinical affiliate and will be marked absent. It is the student's responsibility to notify the Program Director and/or Clinical Coordinator of any absence.

### **STUDENT WORK POLICY**

If a student is employed at any clinical affiliate, they must abide by the following policies:

- Students must notify Program officials that they are working at the clinical affiliate.
- Students are not permitted to work during scheduled clinical hours.
- Students may **not** wear student uniforms or Jefferson ID.
- Students may not accrue competencies during non-clinical hours.
- Students may not apply work time to make-up time.
- Students are not covered by Jefferson liability insurance during non-clinical hours.

**Non-compliance:** Students who do not maintain compliance with the aforementioned clinical policies are subject to disciplinary action, including removal from the clinical affiliate and potential dismissal from the department.

Any clinical time missed due to a violation of these policies will be made up by the student at a later date. The Program Director and/or Clinical Coordinator in cooperation with the Clinical Affiliate Supervisor will determine make-up time. Further disciplinary action may be taken for habitual violations of policies. Refer to the section entitled "Violations of Clinical Practices and Policies" on page 17.

### **VENIPUNCTURE POLICY**

The ARRT clinical competency requirements include performance of venipuncture for injection of contrast agents and radiopharmaceuticals. In order to participate in the performance of venipuncture on patients, students must:

- Have completed all immunizations as required by JCHP.
- Have current BLS certification, as required by the Department of Medical Imaging & Radiation Sciences.
- Have health insurance, as required by JCHP.
- Have completed a venipuncture certification course, as required by the Department of Medical Imaging & Radiation Sciences.
- Attend and complete institutional venipuncture training, as required by clinical affiliates.

### **HEALTH INFORMATION CONFIDENTIALITY POLICY: HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)**

Students must maintain strict confidentiality of all health information of patients at clinical affiliate sites during and after the course of their clinical rotations. Students may neither use nor disclose health information of patients to which they have access, other than as expressly authorized by the clinical affiliate. Students may not record any patient-identifiable information on their personal documents (e.g. clinical logs). Students must be familiar with and adhere to their clinical affiliate's HIPAA policy.

Jefferson's HIPAA/Patient Privacy Policy can be found at, <https://tjuh.jeffersonhospital.org/policy/index.cfm/universitypnp/view/id/10329>. Please note that this link will only function from within the University's Intranet.

### **PREGNANCY POLICY**

A student who becomes pregnant during a component of the program may voluntarily inform the Program Director, in writing, of their pregnancy.

- Option 1: The student may continue in the program if they choose, without modifications to any component of the program.
- Option 2: The student may take a leave of absence from clinical education, but continue their didactic studies. Clinical assignments will be completed when the student returns.
- Option 3: The student may withdraw from the program and reapply in accordance with College policies.
- Option 4: The student, in writing, may withdraw their declaration of pregnancy at any time and/or for any reason.

Due to the need for special radiation protection education, counseling by the Radiation Safety Officer (RSO) is available.

Please refer to appendix G that includes appropriate information regarding radiation safety for the student and fetus



## **MAGNETIC RESONANCE IMAGING (MRI) SAFETY POLICY**

An MR room has a very strong magnetic field that may be hazardous to individuals entering the MR environment if they have certain metallic, electronic, magnetic, mechanical implants, devices, or objects. Therefore, all Medical Imaging and Radiation Sciences students are required to undergo an MRI Safety lecture and MRI Safety Screening prior to MRI rotations or observations.

1. Students will attend an MRI Safety lecture and be screened for MRI Safety clearance in the fall semester by the MRI Program Director/Clinical Coordinator.
2. Students will abide by clinical affiliate MRI Safety Protocols during their clinical rotations and/or observations.
3. Students will notify the MRI Program Director/Clinical Coordinator and be re-screened for MRI Safety clearance, should their status change during the academic year, with regard to any potentially hazardous implants, devices, or objects, prior to MRI rotations or observations.

## **N95 RESPIRATOR POLICY**

Medical Imaging & Radiation Sciences students will be fit tested for a N95 respirator mask. Although students will be fit tested for a N95 respirator mask, the following patient care restrictions must be followed:

- Jefferson students participating in clinical education may engage in the direct care of patients suspected of and confirmed to be infected with COVID-19.
  - Jefferson is NOT REQUIRING students to participate in the direct care of patients suspected of and confirmed to be infected with COVID-19.
  - If a clinical site says that students cannot engage in the direct care of patients suspected of and confirmed to be infected with COVID-19, students must continue to follow the clinical site instruction.
  - If a clinical site says that students must engage in the direct care of patients suspected of and confirmed to be infected with COVID-19, and students do not want to engage in the direct care of patients suspected of and confirmed to be infected with COVID-19 immediately contact the MIRS Department Chair, the program director and clinical coordinator.
  - The MIRS Department is stocked and can and will provide all students with PPE that includes, ear loop masks, face shields, and N95 respirators, in addition to any other needed and required PPE.
- Such care shall be provided in accordance with federal, state, and local health and safety requirements. This includes, but is not limited to, ensuring that students have appropriate personal protective equipment and are advised of necessary precautions.
- Students who have concerns about engaging in the treatment of COVID-19 positive patients should inform their college or program and the Office of Student Affairs.
- If a student requires an accommodation pursuant to the Americans with Disabilities Act, the Office of Student Affairs can facilitate the accommodation process.
- Students shall be advised that if they are unable to engage in the care of COVID-19 positive patients, their academic progress may be impacted.
- Students will not participate in high-risk aerosol-generating procedures (such as endotracheal intubations), even if proper PPE is available.

## **INCIDENT REPORTS AT THE CLINICAL AFFILIATE**

Students who become ill, injured, or involved in an incident during a clinical rotation must:

1. Report immediately to their Clinical Affiliate Supervisor and follow departmental protocol.
2. Immediately contact the Program Director and/or Clinical Coordinator.
3. Student must contact Jefferson Occupational Health Network (JOHN) for Employees & Students as soon as possible (215-955-6835) and follow all instructions given to them by JOHN.
4. Present a note to the Program Director and/or Clinical Coordinator from the Emergency Room Physician, Jefferson Occupational Health Physician, or family physician stating the date the student may resume normal duties.

If a patient is injured while in the student's care, the student must:

1. Make sure that the patient is safe.
2. Report the incident immediately to the Clinical Affiliate Supervisor and follow departmental protocol.
3. Immediately contact the Program Director and/or Clinical Coordinator.

## **COMMUNICABLE DISEASES**

Should students be diagnosed as having an infectious disease, they must report such diagnosis to the Program Director and/or Clinical Coordinator and the Clinical Affiliate Supervisor. The student may be asked to leave clinical until cleared by his/her physician and Jefferson Occupational Health Network for Employees & Students. The student must present a physician's note to the Program Director and/or Clinical Coordinator stating that the student may resume normal duties.

## **OCCUPATIONAL EXPOSURES TO INFECTIOUS DISEASE AND/OR BLOOD BORNE PATHOGENS**

### **Needlesticks**

Get more information on occupational exposures from needlesticks, sharps injuries, splashes, etc. ([accessible by Jefferson staff and students only](#))

### **What to Do for an Occupational Exposure to Body Fluids (Needlestick or Splash)**

If you have sustained an exposure to a body fluid from one of your patients, please follow the instructions below.

1. Wash the exposed area with soap and water. DO NOT USE BLEACH.
2. If a fluid splashed in your eye, rinse with tap water or with sterile saline.
3. If a fluid splashed in your eye, remove your contacts immediately.
4. Advise your supervisor that you have been exposed.
5. Complete the accident report online through PeopleSoft Employee Self-serve System if you are an employee. Students will complete an accident report in JOHN.
6. Report to JOHN at 833 Chestnut Street, Suite 204 (when JOHN is closed report to the Emergency Department) as soon as possible.
7. Know your patient's name, DOB and MR# as well as the name of the attending physician of the source patient.
8. Source patient testing (hospitalized) can be ordered through Epic by selecting: "Needlestick Inpatient Evaluation" on the drop down menu.  
(Includes STAT HIV antigen/antibody, hepatitis C antibody, hepatitis B surface antigen)

9. Source patient testing (outpatient population) should include:  
STAT HIV antigen/antibody, hepatitis C antibody, hepatitis B surface antigen.

JOHN will discuss the risks of your exposure and advise whether or not further treatment or evaluation is necessary. A student's insurance may be billed for services resulting from occupational exposure. Please call 215-955-6835 with any questions.

If you are a Jefferson student at an affiliate, please call our office as soon as possible. You may opt to be seen at an emergency department, and the visit will be billed to your insurance. Follow up in JOHN is recommended on the next business day. Questions may be directed to JOHN's medical director.

Detailed information on Occupational Health Network for Employees & Students may be viewed on the JOHN website: <https://hospitals.jefferson.edu/departments-and-services/occupational-health-network.html>

Contact Occupational Health Network for Employees & Students

- Phone: 215-955-6835
- Fax: 215-923-5778
- E-mail: [jeffuhs@jefferson.edu](mailto:jeffuhs@jefferson.edu)

Hours of Operation:

- Monday through Friday, 7:30 a.m. to 4 p.m.
  - Closed every Thursday from noon to 1 p.m.

Office Location:

- 33 South 9<sup>th</sup> Street, Suite 205, Philadelphia, PA 19107

## **ATTENDANCE REGULATIONS**

## **DIDACTIC/LABORATORY INSTRUCTION**

Each course syllabus details the individual course's attendance policy.

### **CLINICAL ATTENDANCE RECORDS**

EXXAT software and/or time sheets will be used for the documentation of clinical attendance. Each student must personally document the required attendance "in" and "out" time. Students must document the time and have the designated program official (clinical coordinator, clinical preceptor, or clinical staff) approve the documented time. Time not documented must be made up. Under no circumstances is it permissible to document clinical attendance for another student. Any student found guilty of such an offense is subject to disciplinary action including dismissal from the department.

### **CLINICAL EDUCATION HOURS**

Total clinical assignments will not exceed 40 hours per week. Assignments on any one day will not exceed 8 hours, unless otherwise requested by the student and approved by the Program Director and/or Clinical Coordinator in conjunction with the Clinical Affiliate Supervisor, or if patient care responsibilities dictate otherwise. No student will be permitted to leave a patient during the course of an examination, even if such completion requires remaining on duty beyond the end of the shift.

The 2021 Radiography standards will be effective January 1, 2021, as set forth by the JRCERT. The 2021 radiography standards can be found at <https://www.jrcert.org/accreditation-information/accreditation-standards-2021/>

Students will be assigned a lunch period each day, which they are required to take. The lunch break will be commensurate with the practice of the department and area/rotation assignment. The lunch break may not be used to make-up or accrue time.

Clinical Affiliate Supervisors may re-schedule students (within an assigned eight hours) to provide complete exposure to the unique learning opportunities in Medical Imaging & Radiation Sciences. The Clinical Affiliate Supervisor must notify the Program Director and/or Clinical Coordinator of these changes.

Students will participate in designated procedures during their clinical assignments under the guidance of a supervising technologist in the areas to which they are assigned.

### **PERSONAL DAYS**

Students are allocated one personal day each semester. This time cannot be taken in half-days. Time off must be taken in full days (8.5 hours [8 clinical hours plus 30 minute break]). It is not accruable nor is it transferable. A personal time request form must be submitted to the Program Director or Clinical Coordinator via the EXXAT software or other designated method. The Clinical Affiliate Supervisor and Program Director and/or Clinical Coordinator must be notified when a student is out of clinical. This notification must occur via email or phone call per the Clinical Affiliate, Program Director, and Clinical Coordinator instructions,

### **ABSENCE POLICY**

Attendance is required for all scheduled clinical education sessions. The standard clinical day rotation for students is eight (8) hours of clinical activity and a half hour meal break. The start time and end time of the clinical shift will be determined by the Clinical Affiliate, Program Director, and Clinical Coordinator so as to be beneficial to the student's clinical education. Any

change in an individual student's start time and end time must be discussed and approved by the Clinical Affiliate and the Program Director and Clinical Coordinator prior to any change.

Students absent from a clinical assignment, for any reason, must call or email the Clinical Affiliate Supervisor and call or email the Program Director and/or Clinical Coordinator prior to the start of the shift. An individual clinical education plan will be coordinated between the Program Director, Clinical Coordinator, Clinical Affiliate Supervisor and student to support the completion of missed time and clinical requirements.

If an emergency arises requiring an early departure from the clinical affiliate, the student must notify both the Clinical Affiliate Supervisor and the Program Director and/or Clinical Coordinator. It is the responsibility of the student to make these calls. An individual clinical education plan will be coordinated between the Program Director, Clinical Coordinator, Clinical Affiliate Supervisor and student to support the completion of missed time and clinical requirements. The attendance record must accurately reflect the early departure time from the clinical setting

Students receive one personal day per semester. Requests must be submitted via the mechanism set by the Clinical Coordinator. Requests for a personal day should be pre-approved by the Clinical Coordinator. Students are responsible for informing the Clinical Affiliate Supervisor of personal days. Personal days are per semester and do not accrue.

For time out of clinical, other than the one personal day, an individual clinical education plan will be coordinated between the Program Director, Clinical Coordinator, Clinical Affiliate Supervisor and student to support the completion of clinical requirements.

Students who are feeling generally unwell, who are symptomatic of COVID 19 (e.g., fever, cough, shortness of breath, loss of taste or smell), who believe they have had recent possible exposure to COVID-19, or who have a confirmed diagnosis of COVID-19 should not attend clinical.

Students must maintain contact with the Program Director and Clinical Coordinator and all parties must be kept up-to-date with any absences and requirements and recommendations for the return to clinical.

Students who have any symptoms that are associated with infectious diseases (e.g., cold, flu or viral infection) should not attend in-person classes, clinical experiences or other activities that put them in close contact with other students, faculty, staff or patients. These symptoms can include but are not limited to sneezing, coughing, fever, gastrointestinal pain, and diarrhea. Students with these types of symptoms should contact Student Health Services (East Falls campus) or Jefferson Occupational Health Network (JOHN) (Center City campus) if these symptoms are present, before participating in any classroom, clinical, lab, or studio sessions, or any activities in which other students, faculty, staff or patients are present.

Students who have these symptoms are responsible for notifying their instructors, program or college using the usual mechanisms before missing any scheduled course/clinical education activity, for staying current with course/clinical requirements, and for complying with any other course/clinical attendance policies. Students may be asked to provide documentation that they are under the care of a medical provider (without disclosure of any medical condition).

Students may be asked to utilize other methods of learning while not in clinical such as, but not limited to, completing assignments that support the clinical course objectives.

Students may also consult the Medical Leave of Absence policy as a certain level of absenteeism will disrupt the continuity of learning and achievement of clinical requirements, including, but not limited to the completion of clinical competencies. Students may be assigned a grade of “I” incomplete in extenuating circumstances.

### **PUNCTUALITY**

Students not in the assigned clinical area at the assigned time will be considered late. Three late arrivals in one semester count as one day’s absence. Habitual lateness could lead to dismissal from the Department.

It is the policy of the Department of Medical Imaging & Radiation Sciences that any student who is going to be late must notify both the Clinical Affiliate Supervisor and the Program director/Clinical Coordinator prior to the start of the assigned time. All lost time due to lateness from the clinical area must be made up by the student. Failure to abide by these policies could lead to dismissal from the department.

Students will be advised in writing concerning their habitual lateness or violation of the Department of Medical Imaging & Radiation Sciences lateness policies by the Clinical Coordinator and/or Program Director.

Disciplinary actions including suspensions from the clinical affiliate or dismissal from the Department may be taken against students who persist in habitual lateness or violations of the Departmental of Medical Imaging & Radiation Sciences lateness policies, after previously having been counseled in writing by the Clinical Coordinator and/or Program Director and/or Department Chair at an Advisement Conference.

### **MAKE-UP TIME**

Arrangements must be made with the Clinical Affiliate Supervisor and approved by the Program Director and/or Clinical Coordinator. Make up time may not be assigned to clinical settings on holidays that are observed by the sponsoring institution. Make up time may not be assigned during non-traditional hours of clinical assignments such as weekends. Jefferson’s liability insurance covers students during make up time assignments. All clinical absences must be made up at the clinical affiliate where the time was missed, consistent with the room assignments in effect when the absence occurred.

The make-up time form is signed upon fulfillment of the time missed. The form will be submitted via EXXAT or other means determined by the Clinical Coordinator as required.

**The lunch break may not be used to make-up or accrue time.**

### **POLICY CONCERNING DEATH IN THE FAMILY**

Upon notification to the Program Director, students will be allowed up to three (3) days of leave of absence for death in the immediate family. Immediate family members include parents, grandparents, spouse, brother, sister or child. Leaves of absence requested because of the death of someone other than an immediate family member may be granted by special permission.

### **HOSPITAL JOB ACTIONS OR STRIKES**

Whenever a strike or job action occurs at an assigned clinical site, students must leave the assignment immediately and report to the Program Director or Clinical Coordinator for further directions. Missed clinical time must be made up.

At no time should a student attempt to cross a picket line to enter a Clinical Affiliate.

### **JURY DUTY**

Being selected for jury duty is a civic responsibility in which the Department encourages students to participate.

Please be advised that the College cannot intervene on the student's behalf should a student be summoned for jury duty.



## **STUDENT ACTIVITIES**

## **STUDENT ACTIVITIES**

Students are encouraged to participate in campus activities, e.g., orientation programs, recruitment functions, social and cultural events, interprofessional activities and the Class Day Pinning Ceremony. Students have the opportunity to represent the students' viewpoints on Department, College, and University committees. The University and Thomas Jefferson University Hospital sponsor many volunteer and mentoring programs. Professional organizations, Jefferson Alumni Association, and the College sponsor many programs that focus on career and professional development.

## **CLASS DAY PINNING CEREMONY**

Graduating students are invited to participate in the Department's Class Day Pinning Ceremony. During the ceremony graduating student names are announced and a pin is given to each graduate by their program faculty. The pin symbolizes the welcoming into the profession. Honors and awards of the graduates, along with clinical educators, are also announced. Friends and family of the graduates are invited to participate in the celebration. The Class Day Pinning Ceremony is a special time to celebrate and acknowledge the hard work and achievements of the Department graduates, faculty, and administrative personnel.

## **HONORS AND AWARDS**

Students are eligible for:

- Department awards for outstanding overall performance
- Awards for clinical excellence

Awards are presented during the Class Day Pinning Ceremony.

## **PROFESSIONAL SOCIETIES**

Students are strongly encouraged to participate in professional activities and to seek memberships in national, state, and local societies. These organizations sponsor competitions for students and several offer scholarships and educational grants.

## **PROFESSIONAL ORGANIZATIONS**

- American Society of Radiologic Technologists (ASRT) <https://www.asrt.org/>
- Philadelphia Society of Radiologic Technologists (PhilaSRT) <https://philasrt.org/>
- Association of Collegiate Educators in Radiologic Technology (ACERT) <https://acert.org/>

## **HONOR SOCIETIES**

- Lambda Nu Society (Honor society for radiologic and imaging science professionals) <http://www.lambdanu.org>
  - Information to join Jefferson's PA Gamma Chapter of Lambda Nu is posted in the Canvas page, STUDENTS- Department of Medical Imaging and Radiation Sciences

**ADDITIONAL POLICIES**

## **SUPERVISION POLICY**

Until the student achieves and documents competency in any given procedure, that procedure must be carried out under the direct supervision of a registered technologist.

The JRCERT defines direct supervision as student supervision by a qualified radiographer 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 physically present during the conduct of the procedure, and
- reviews and approves the procedure and/or image.

Students must be directly supervised until competency is achieved. Once students have achieved competency, they may work under indirect supervision. The JRCERT defines indirect supervision as student supervision provided by a qualified radiographer who is immediately available to assist students regardless of the level of student achievement.

Repeat images must be completed under direct supervision. The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A repeat form **MUST** be submitted for a repeat of an unsatisfactory image

Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.

## **CONFIDENTIALITY OF STUDENT RECORDS**

Appropriately maintaining the security and confidentiality of student records and other program materials protects the student's right to privacy. Student records are maintained in accordance with the Family Education Rights and Privacy Act (Buckley Amendment). Student records at the clinical sites are maintained by the student/ and or clinical supervisor and are not to be placed in open, public areas of the department.

## DRESS CODE AND APPEARANCE POLICY

Dress and appearance standards promote a consistent professional image and help patients and employees feel safe, confident, and comfortable. One must present a professional appearance at all times. The following charts list the acceptable and unacceptable dress and appearance standards.

### Dress standards

	Acceptable	Unacceptable
<b>Tops</b>	<p>Navy scrub top. Jefferson branded embroidery</p> <p>Tops in good condition, wrinkle-free and fit appropriately.</p> <p>A solid color white or black crew tee shirt may be worn under the scrub top. Sleeves should not extend beyond the scrub top sleeves.</p>	<p>Tight, clingy, over-sized, or excessively baggy-fitting tops.</p> <p>Wrinkled, shrunk, faded, stained (including under arms), or worn-out tops.</p> <p>Tops that reveal the abdomen when standing, lifting or bending over. Tops that expose the cleavage, bra, back, shoulder, chest, lower back or under garments is not allowed.</p> <p>Shirts under the scrub top that extend beyond the scrub top sleeve. Shirts under the scrub top that are not solid white or black or have graphics or other patterns.</p>
<b>Jackets</b>	<p>Navy scrub jacket. Jefferson branded embroidery</p> <p>Jacket in good condition, wrinkle-free and fits appropriately.</p> <p>This jacket is optional but it is the only approved jacket.</p>	<p>Tight, clingy, over-sized, or excessively baggy-fitting jacket.</p> <p>Wrinkled, shrunk, faded, stained (including under arms), or worn-out jacket.</p> <p>Sweatshirts, hoodies, fleece jackets, or any other type of covering.</p>
<b>Pants</b>	<p>Navy scrub pant. .</p> <p>Pants in good condition, wrinkle-free and fit appropriately.</p>	<p>Tight, clingy, over-sized, or excessively baggy-fitting pants. Baggy pants worn below the hips or that expose underwear.</p> <p>Wrinkled, shrunk, faded, stained, or worn-out pants.</p> <p>Pants that reveal the lower back or undergarments when standing, lifting or bending over.</p> <p>Pant hemlines that touch or drag on the ground.</p>
<b>Undergarments</b>	<p>Must be worn at all time.</p>	<p>These items are not to be visible or show through clothing.</p>

<b>Footwear</b>	<p>Solid white, leather, low-top sneaker footwear with laces that tie. Closed toe and closed heel with a solid upper covering (no holes on the top or side of the shoe)</p> <p>Shoestrings should be properly tied.</p> <p>Shoes and laces must be clean and in good condition with no holes or tears</p>	<p>Clogs, sandals, flip-flops, slippers or open-toed shoes are not permitted.</p> <p>Colors other than solid white.</p> <p>Dirty or odor-ridden footwear.</p>
<b>Socks</b>	<p>Worn at all times.</p> <p>Socks should be solid color in black or white.</p>	<p>Colors other than solid black or solid white. Print styles other than solid color.</p> <p>Ornamentation such as beads, bells, etc.</p> <p>Dirty or odor-ridden socks.</p>
<b>Jewelry</b>	<p>Earrings should be of the small post type (no hoops).</p> <p>Only one (1) post earring per ear.</p> <p>Rings, necklaces, bracelets are not recommended.</p> <p>Wedding band is acceptable.</p> <p>Wristwatch with a second hand and that is water resistant is recommended.</p>	<p>More than one post earring per ear.</p> <p>Excessive rings, bracelets, necklaces.</p>
<b>Body piercings</b>	<p>Any body piercing besides the ears should not be evident.</p> <p>Tongue rings are unacceptable and are not allowed to be worn.</p>	<p>Visible or evident body piercings.</p>
<b>Tattoos</b>	<p>Any visible tattoos must be appropriately covered.</p>	<p>Visible tattoos on the body.</p>
<b>Identification badges</b>	<p>ID badges and name tags must be worn at collar/eye-level at all times.</p> <p>ID badges must be free from distracting stickers, pins, etc.</p> <p>Photo ID must be legible and visible at all times.</p>	<p>Badges worn at or below the bottom of the sternum or that are not visible to staff and patients.</p> <p>Pins, stickers and other distracting adhesives.</p> <p>Lanyards used to hold ID badges are not permitted.</p>
<b>Radiation dosimeter</b>	<p>Radiation dosimeters are to be worn during all clinical and lab assignments.</p> <p>The radiation dosimeter is to be worn outside of protective apparel with the label facing the radiation source at the level of the thyroid.</p>	<p>Not wearing a properly dated and properly placed radiation dosimeter</p>

<b>Operating room (OR) attire</b>	Specific operating room scrubs, hair, face, and shoe attire will be provided by the operating room/radiology department. The OR attire are to be worn ONLY when physically present in the OR. The full Jefferson clinical uniform is required at all other times.	Wearing hospital approved OR attire outside of the OR.
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**Grooming standards**

<b>Body odor</b>	Must practice personal hygiene and be free of offensive odor.	Perfume, lotion, or cologne that might interfere with those who are ill or allergic to such odors or fragrances. Clothing and body with smoke odor.
<b>Hair-head</b>	Must practice personal hygiene and hair must be neat, clean, and well groomed.  Long hair must be neatly tied back away from face, neck, and shoulders to avoid patient and equipment contact.  Hair colors must be of natural, traditional tones.	Extreme trends are not acceptable.  Non-natural colors such as pink, blue, green, orange etc. are not acceptable.
<b>Hair- face</b>	Nose and ear hair must be trimmed and maintained.  Facial hair including mustache and beard must be neatly maintained.  Facial hair is not permitted when fit testing for or wearing a N95 respirator mask. Consult JOHN for further advisement.	Excessive beard or mustaches styles.
<b>Makeup</b>	Makeup should be worn conservatively.  If worn, makeup must appear professional and natural and should be conservative in styles and colors.	Frosted, bright colored eye shadow (i.e., bright green, purple, pink, etc.).  Bright or excessively dark, thick eye liner worn under the eye or on top of the eyelid.
<b>Hair accessories</b>	Solid white, black or navy blue hair bands or ties.	Ornamentation such as beads, bells, excessive bows, etc.
<b>Fingernails</b>	Nail length must be less than ¼ inches. No artificial nails. No nail polish.	
<b>Gum</b>	Chewing gum is not permitted.	

**Non-compliance**

Students not complying with the dress code and appearance policy will be removed from the clinical affiliate. Any clinical time missed due to a dress and appearance standards violation will be made up by the student at a later date. The Program Director and/or Clinical Coordinator in cooperation with the Clinical Affiliate Supervisor will determine make-up time if the site is willing to resume the clinical experience.



## Appendix A

### PATIENTS' BILL OF RIGHTS

<https://www.americanpatient.org/aha-patients-bill-of-rights/>

*We consider you a partner in your hospital care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible. This hospital encourages respect for the personal preferences and values of each individual.*

*While you are a patient in the hospital, your rights include the following:*

- You have the right to considerate and respectful care.
- You have the right to be well informed about your illness, possible treatments, and likely outcome and to discuss this information with you doctor. You have the right to know the names and roles of people treating you.
- You have the right to consent to or refuse a treatment, as permitted by law, throughout your hospital. If you refuse a recommended treatment, you will receive other needed and available care.
- You have the right to have an advance directive, such as a living will or health care proxy. These documents express your choices about you future care or name someone to decide if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to your family, and your doctor.
- You have the right to privacy. The hospital, you doctor, and others caring for you will protect your privacy as much as possible.
- You have the right to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.
- You have the right to review you medical records and to have the information explained except when restricted by law.
- You have the right to expect that the hospital will give you necessary health hospital services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.
- You have the right to know if this hospital has relationships with outside parties that may influence you treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.
- You have the right to consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.
- You have the right to be told of realistic care alternatives when hospital care is

no longer appropriate.

- You have the right to know about hospital rules that affect you and your treatment and about charges and payment methods. You have the right to know about hospital resources, such as patient representatives or ethic committees that can help you resolve problems and questions about your hospital stay and care.
- You have responsibilities as a patient. You are responsible for providing information about your health, including past illnesses, hospital stays, and use of medicine. You are responsible for asking questions when you do not understand information or instructions. If you believe you can't follow through with your treatment, you are responsible for telling your doctor.
- This hospital works to provide care efficiently and fairly to all patients and the community. You and your visitors are responsible for being considerate of the needs of other patients, staff, and the hospital. You are responsible for providing information for insurance and for working with the hospital to arrange payment, when needed.
- Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of life-style on your personal health.

A hospital serves many purposes. Hospitals work to improve people's health; treat people with injury and disease; educate doctors, health professionals, patients, and community members; and improve understanding of health and disease. In carrying out these activities, this institution works to respect your values and dignity.

## Appendix B

### **ASRT/ARRT 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 patientcare.
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 mankind.
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.

## Appendix C

### **RADIATION PROTECTION PRACTICES**

1. A student is required to exercise sound radiation protection practices at all times. At no time may a student participate in a procedure utilizing unsafe protection practices.
2. A student must be aware of and enforce the policies and procedures of radiation safety in keeping with institutional, state, and national standards.
3. A student will always wear radiation dosimeters in the Clinical Site.
4. A student will wear the radiation film badge outside the clothing, on the torso. A ring badge will be worn when handling radioactive materials.
5. A student will always remove personal radiation dosimeters while having diagnostic medical or dental radiographs taken.
6. A student who deliberately exposes his/her radiation dosimeter will be suspended and/or dismissed from the program.
7. A student will use appropriate shielding.
8. Students must not hold image receptors during any radiographic procedure.
9. Students must not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.
10. As students progress in the program, they must become increasingly proficient in the application of radiation safety practices.
11. Radiation protection of the patient and others within the examination room is the student's responsibility when the student is performing the study.
12. A student may not procedures utilizing ionizing radiation on other students or staff at their request without a prescription for the exam by a physician.  
**The student will be dismissed from the program for this violation.\***
13. A technologist or physician may not procedures utilizing ionizing radiation on a student without a prescription for the exam from the student's physician.  
**The student will be dismissed from the program for this violation.\***

**\*(PA Code, Title 25. Environmental Protection. Department of Environmental Protection, Chapter 211.11.)**

## Appendix D

### **PERSONAL RADIATION MONITORING**

1. Each student is responsible for wearing properly dated radiation dosimeter(s) (body and ring badges) at Clinical Affiliate Sites and in laboratory classes. No student will be allowed in clinical or the laboratory class without properly dated radiation dosimeter(s) appropriately worn.
2. Any student who does not have the properly dated radiation dosimeter(s) will be suspended from his or her clinical area until the student has the properly dated radiation monitor. Time lost from the clinical area must be made up.
3. Dosimeters will be given to students quarterly.
4. Each student is responsible for exchanging the radiation dosimeter(s) on the designated day of each quarter. Radiation dosimeters are exchanged with the Program Director or Clinical Coordinator.
5. Dosimeter loss or accident must be reported immediately to the Program Director or Clinical Coordinator. The cost of lost radiation dosimeters is the responsibility of the student.
6. Each student is responsible for submitting their dosimeter(s), on time.
  - **A \$20.00 cash fee will be collected for all unreturned or late radiation dosimeters.**
7. The Program Director or Clinical Coordinator receives quarterly radiation dose reports from the Radiation Safety Officer, and informs each student of his/her exposures.
8. Quarterly radiation exposures for students **must not** exceed the maximum permissible dosage to occupationally exposed persons as established by state and federal agencies for radiologic health.
9. The Office of Radiation Safety maintains a history of each individual's exposure and anyone may examine his/her own radiation exposure record, or obtain a copy by sending a signed, written request to the Radiation Safety Office.
10. **“High” Radiation Dosimeter Readings**  
High or unusual radiation dosimeter readings are investigated by Thomas Jefferson University's Radiation Safety Officer. Readings above designated “Investigation Levels” are evaluated with regard to workload and type of duties performed by the dosimeter wearer; adherence to proper work practices; proper care and use of the dosimeter; and possible exposure of the dosimeter to “non-occupational” radiation sources. In cases where it appears that the high readings may be due to inadequate safe work practices or improper use or storage of the dosimeter(s), the wearer is counseled by Radiation Safety Officer and/or the wearer's supervisor(s).

**On completion of the clinical rotation students must return their radiation dosimeter(s) to the Program Director or Clinical Coordinator. Students will be billed for unreturned badges.**

## Appendix E

### **RADIATION DOSIMETER USE**

Policy Owner: John C. Keklak Contributors/Contributing Departments:

**To assess employee occupational radiation dose from ionizing radiation sources external to the body.**

#### **POLICY**

Radiation dosimeters (“individual monitoring devices” as defined in 10 CFR 20.1203) are to be issued for the purpose of assessing occupational radiation dose as follows:

1. Radiation dosimeters are to be issued to anyone (employee/student/volunteer) whose assigned duties involve potential exposure to ionizing radiation and whom the Radiation Safety Officer has determined meets the requirements for individual monitoring devices as described in applicable federal or state regulations.
2. Radiation dosimeters may also be required for individuals in specific work areas or performing designated tasks, even if not required by state or federal regulations.
3. Radiation dosimeters may be offered as an option to individuals in areas where use of individual monitoring devices is not required by regulations, but where employees may have concerns about their level of radiation exposure. Optional use must be approved by the appropriate Department and/or Division Head and the RSO.
4. Radiation dosimeter readings are routinely reviewed by Radiation Safety Staff and appropriate follow-up action taken as may be indicated by the results.

#### **Definitions:**

For the purposes of this Policy and related procedures, the following terms are defined:

“ALARA Investigation Levels” are pre-set dosimeter reading values that trigger formal reviews by Radiation Safety Staff. [ALARA stands for “as low as reasonably achievable” and is a radiation protection philosophy whereby the objective is to keep radiation doses to individuals and populations as far below (maximum) regulatory limits “as is reasonably achievable”.]

“ALARA Investigation Level 1” means total radiation doses in any single calendar quarter (e.g., January 1 to March 31) above the following:

Effective Dose Equivalent (EDE) [“whole body”] above 125 mrem  
Lens Dose Equivalent (LDE) above 375 mrem

Shallow (“Skin”) Dose Equivalent (SDE) above 1250 mrem  
Extremity Dose reading above 1250 mrem

“ALARA Investigation Level 2” means total radiation doses in any single calendar quarter (e.g., January 1 to March

31) above the following:  
Effective Dose Equivalent (EDE) [“whole body”] above 375 mrem  
Lens Dose Equivalent (LDE) above 1125 mrem

Shallow (“Skin”) Dose Equivalent (SDE) above 3750 mrem  
Extremity Dose reading above 3750 mrem

“Dose Equivalent” means the absorbed radiation dose to a human being, modified by appropriate radiation weighting factors, depending on the type of ionizing radiation source, or tissue/organ weighting factors (as may be necessary).

“Deep Dose Equivalent” (“DDE”) means the dose equivalent (tissue dose from external radiation sources) determined for a tissue depth of 1.0 cm, as measured by a radiation dosimeter.

“Effective Dose Equivalent” (“EDE”) [for the purposes of this policy] means the deep dose equivalent (tissue dose from external radiation sources at 1 cm below the surface of the skin) as measured by a radiation dosimeter, adjusted where appropriate by mathematical formulas to take into account the wearing of protective lead garments in the presence of diagnostic energy x-ray radiation.

“Extremity Dose” means the dose equivalent (tissue dose from external radiation sources) to the hands or forearms (below the elbows), or to the feet or lower legs (below the knees) determined for a tissue depth of 0.007 cm, as measured by a radiation dosimeter (e.g., ring dosimeter).

“Lens Dose Equivalent” (“LDE”) means the dose equivalent (tissue dose from external radiation sources) determined for a tissue depth of 0.3 cm, as measured by a radiation dosimeter.

“Millirem (mrem)” is a unit of measure for any “dose equivalent” term.

“Radiation dosimeters” (aka “individual monitoring devices”) means devices designed to be worn by a single individual for the assessment of dose equivalent such as film badges, thermoluminescence dosimeters (TLDs), pocket ionization chambers, etc.



“Shallow (“Skin”) Dose Equivalent” (“SDE”) means the dose equivalent (tissue dose from external radiation sources) determined for a tissue depth of 0.007 cm, as measured by a radiation dosimeter

### **Procedures:**

[The following procedures and/or requirements have been approved by the Jefferson Radiation Safety Committee and instituted by the Radiation Safety Officer under his authority as established by federal and state regulations and institutional policy.]

### **Dosimeter Wearer Responsibilities**

1. Regardless of whether the dosimeters are issued as required or optional, any employee who is issued any dosimeter is responsible for:
  - a. Wearing the dosimeter while on duty in those areas where there is a potential for radiation exposure.
  - b. Exchanging worn dosimeters for new ones on the first workday of each wear period (e.g., first day of month or calendar quarter, depending on assigned wear period), unless the new replacement dosimeters' arrival has been delayed, in which case the exchange may be made as soon as possible after the arrival of the new dosimeters).
  - c. Taking proper care of dosimeters, as described by Office of Radiation Safety instructions, to avoid damaging or contaminating the dosimeters.
  - d. Not storing dosimeters near radiation sources when not being worn.
  - e. Not wearing dosimeters when being exposed to radiation sources for personal medical purposes (The wearer should notify Radiation Safety if this inadvertently occurs or if administered a radiopharmaceutical).
  - f. Notifying Radiation Safety immediately whenever dosimeters are lost, accidentally damaged, name change is required, place of work has changed, or any reason why accidental exposure may have occurred (i.e., dosimeter accidentally left near source when not worn).
  - g. Returning all dosimeters and holders upon termination of duties with/near radiation sources.

- h. Notifying Radiation Safety/dosimeter distributor of pending employment termination.
  - i. Otherwise wearing assigned dosimeters in accordance with any other Office of Radiation Safety instructions.
2. Failure to comply with guidelines and responsibilities listed above may result in forfeiture of (optional) dosimeters and/or disciplinary action.
  3. Any inquiries related to dosimeter use should be directed to the individual's supervisor, dosimeter distributor, or Radiation Safety.

**Dosimeter Issuance:**

Dosimeters are issued and distributed in accordance with internal Radiation Safety Department Procedure RSO-041: "Badging and Distribution"

**Review of Dosimetry Readings**

- 1) Dosimetry reports from Jefferson's dosimetry provider (currently Mirion Technologies) should be reviewed by designated Radiation Safety staff within 5 business days of receipt.
- 2) Review of dosimetry results by the Radiation Safety Officer or Senior Health Physicist are to be performed at least quarterly.
- 3) The purposes of such reviews are to:
  - a) Determine if the reading is valid (accurately represents occupational radiation dose)
  - b) Identify possible opportunities for intervention to reduce future dose
- 4) The reviewer is to examine readings for the following:
  - a) Individual readings substantially above others doing similar work
  - b) Individual readings substantially above the wearer's past recorded readings
  - c) Evidence of misuse or damage to the dosimeter
  - d) Evidence of radioactive contamination to the dosimeter
  - e) Calendar quarter total dose readings above "ALARA Investigation Levels" (see definitions)
  - f) Evidence that the wrong analysis algorithms were applied by the vendor in generating the reported reading
  - g) Evidence that the dosimeter had not been properly designated (e.g., "whole body" instead of "collar w/ EDE")
  - h) Any other contributing factor as may be identified in the vendor's report notes.

- 5) The reviewer is to specifically review the DDE, EDE, SDE, LDE, and extremity readings for the dosimeter wear period and the calendar quarter-to-date and year-to-date totals for compliance with occupational dose limits and for any trending that may indicate that annual dose limits could potentially be exceeded.
  
- 6) The reviewer is to look for possible causes for high or unusual readings including:
  - a) Badges not being properly worn (wrong location, wrong orientation, worn outside of holder, etc.)
  - b) Sub-optimal work practices by the wearer
  - c) Dose to the dosimeter while not being worn (dosimeter left in room during procedures, dose stored near a radiation source or otherwise in a high background area, etc.)
  - d) Dose due to the wearer undergoing a medical procedure involving radiation (e.g., wearer administered a Nuclear Medicine radiopharmaceutical as a patient)
  - e) Dosimeter exposed to unusual environmental conditions (e.g., excessive heat)
  - f) Any other potential cause
  
- 7) Regarding the review/investigation process:
  - a) Reviews/investigations may require personal contact with the wearer and /or wearer's supervisor in order to perform an evaluation as per the preceding item 4.
  - b) All total readings above "ALARA Investigation Levels" are to be performed and documented. "Level 2" investigations should include direct contact with the wearer and evaluation of work practices where feasible, unless the readings are consistent with an historical pattern previously determined to be reasonable for the workload and practices employed.
  - c) All ALARA Level Investigations are to be documented.
  - d) Summary reports of readings above ALARA Investigation Levels are reported to the Radiation Safety Committee at its regular quarterly meetings.
  
- 8) Readings for dosimeters issued to specifically assess radiation dose to embryo/fetus of a pregnant individual are to be closely scrutinized with regard to cumulative dose being acquired through the gestation period, in case intervention (e.g., job reassignment) is necessary to assure that applicable dose limits are not exceeded.

#### **Dose History Adjustments:**

- 1) Readings determined to be due to non-occupational radiation sources, or to be inaccurate due to some identifiable cause, may be adjusted.
- 2) Adjustments to the wearer's occupational dose history are made after review by the Radiation Safety Officer by notifying the dosimetry vendor in writing, in accordance with the vendor's procedures.

### **Reports to Wearers:**

1. Dosimeter wearers will be notified of radiation doses as obtained as per the criteria specified in regulations contained in 10 CFR 19 or any other applicable state or federal regulation.
2. Individuals may be notified if their cumulative readings in any calendar quarter exceed pre- established 'investigation levels', or if any unusual or apparently 'high' dosimeter reading(s) are identified by Radiation Safety personnel.
3. Regular dose reports [excised of personal information other than dosimeter wearer id number] are provided to the dosimeter distribution group distributor for availability to wearers.
  
4. Individuals may also obtain their dosimeter results by making proper request to the Office of Radiation Safety. Such requests generally are required to be made in writing to protect the individual's personal information from release to unauthorized personnel.

### **Confidentiality:**

1. Individual radiation dose readings are considered as protected information and access to this information is limited to Radiation Safety personnel, supervisors, program directors, management personnel, members of the Radiation Safety Committee, regulatory inspectors, or others (with RSO approval) with a legitimate need-to-know,
2. Release of individual dose information in any circumstances is limited to the minimum necessary.
3. Any other personal information obtained by the Office of Radiation Safety in the administration of the dosimeter program is treated as confidential.

### **Attachment(s): na References and Citations:**

Internal Office of Radiation Safety Procedure RSO-041 "Badging and Distribution"

[Copies of the above reference may be obtained by contacting the Office of Radiation Safety, 215-955-7813.]

Title 10, Code of Federal Regulations (10 CFR) as incorporated by reference in Title 25 Pa. Code Chapter 219; specific sections as follows:

10 CFR 20.1003 (definitions)

10 CFR 20.1201; 20.1207; 20.1208 (re occupational dose limits)

10 CFR 20.1502 (requirements for use of individual monitoring devices)

**Original Issue Date:** 11/01/2000

**Revision Date(s) :** 07/31/2012; 08/07/2014

**Review Date(s):** 11/08/06, 05/16/2011, 07/31/2012, 7/01/14; 08/07/2014; 06/08/15

**Responsibility for maintenance of policy:** John C. Keklak

## Appendix F

### **RADIATION WORKERS WHO BECOME PREGNANT**

#### PURPOSE

1. To minimize radiation dose to the embryo/fetus from occupational exposure to a radiation worker.
2. To comply with applicable Federal and State regulations that govern radiation exposure to the embryo/fetus and management of pregnant radiation workers. The State of PA DEP incorporates Nuclear Regulatory Commission (NRC) regulations by reference.
3. To conform with NRC Regulatory Guide 8.13, Rev.3 (June 1999) entitled "Instruction Concerning Prenatal Radiation Exposure".

#### POLICY

Radiation workers (as defined below) who become pregnant have the right to voluntarily "declare" their pregnancy in accordance with this policy, which is based on 10 CFR 20.1003. It is the policy of Thomas Jefferson University/Thomas Jefferson University Hospital (TJU/TJUH) Enterprise to:

- a) Advise pregnant radiation workers about the health effects of ionizing radiation on the embryo/fetus, as required by 10 CFR 19.12.
- b) Establish procedures to ensure that the dose limits to the embryo/fetus of the declared pregnant worker (DPW) are within the limits specified in 10 CFR 20.1208.
- c) Provide instructions to the pregnant radiation worker on methods to maintain radiation dose ALARA (As Low As Reasonably Achievable) as required by 10 CFR 20.1101(b).

#### **Definitions:**

1. Declared Pregnant Worker (DPW): A radiation worker of the TJU/TJUH enterprise who has voluntarily informed the Radiation Safety Officer (RSO), in writing, of her pregnancy and the estimated date of conception (month and year). The declaration remains in effect until either the DPW voluntarily withdraws the declaration in writing or is no longer pregnant.
2. Declaration of Pregnancy: A voluntary written notice prepared by a pregnant radiation worker informing the RSO of a confirmed pregnancy, with the estimated date of conception, on a form designed for that purpose.
3. Radiation Worker: An employee, contractor, or student of the TJU/TJUH enterprise whose job duties may expose them to ionizing radiation from radiation-producing machines or radioactive materials, and may be monitored for occupational radiation exposure.

## Procedures:

1. Instructions on the health effects of ionizing radiation during pregnancy as well as methods to reduce radiation exposure during pregnancy shall be incorporated into function-specific radiation safety training programs provided to radiation workers.
2. The TJU/TJUH “Declaration of Pregnancy Form for Radiation Workers” will be issued to any radiation worker requesting one for the purpose of voluntarily declaring pregnancy. The form shall include the individual’s name, attestation of a confirmed pregnancy, the estimated month and year of conception, and the declaration date. Once returned to the RSO, the following will be effected:
  - a. The worker is entered into the DPW database.
  - b. The worker becomes subject to the dose limits in 10 CFR 20.1208.
  - c. Dosimeters are to be returned monthly for evaluation.
  - d. The terms of the TJU/TJUH “Pregnancy Policy for Radiation Workers” shall be followed.
  - e. NRC Reg Guide 8.13 will be issued to the DPW.
3. A DPW may withdraw her declaration of pregnancy at any time and for any reason by providing a written statement to the RSO. Worker status will revert to that in effect prior to the initial declaration without discrimination or repercussion with respect to job status or work environment. The worker may choose to re-declare at any time and for any reason.
4. TJU/TJUH will take the steps necessary to ensure that the embryo/fetus dose limits specified in 10 CFR 20.1208 are not exceeded (500 millirem for the duration of the pregnancy and 50 millirem per month optimally to allow exposure uniformity over the gestation).
  - a. In most cases, no change in job assignments will be necessary, however workers may be reassigned to other areas or duties involving lower exposure potential or have some tasks involving radiation exposure reduced in frequency, at the judgement of the RSO and Manager of the area.
  - b. The limits specified apply only to occupational exposure. Radiation exposure from medical procedures and natural background radiation are not included.
5. The RSO or designee will offer counseling to radiation workers who are considering declaration to answer questions and provide guidance on making the decision to declare. Additional counseling on dose reduction techniques based on the specific work environment of the worker will be offered, including a review of dosimetry results, whether the worker has decided to declare or not.
6. The Office of Radiation Safety (ORS) may issue a second dosimeter (fetal monitor) when warranted. In some cases existing whole body radiation dosimeters may be

sufficient for tracking fetal dose, however, the DPW will be instructed to wear the dosimeter at the anterior abdominal level and exchange monthly.

7. ORS will consider all information related to a worker pregnancy as confidential, with information shared only on a “need to know” basis (e.g., with the individual’s supervisor) as may be necessary to ensure compliance with the radiation dose limits and other regulatory requirements.

### References:

1. Title 10, Code of Federal Regulations; Parts 19 and 20.
2. NRC Reg Guide 8.13, Rev.3 (June 1999), “Instruction Concerning Prenatal Radiation Exposure”.
3. NRC Reg Guide 8.29, Rev.1 (February 1996), “Instruction Concerning Risk from Occupational Exposure”.
4. NCRP Report #174 “Preconception and Prenatal Radiation Exposure – Health Effects and Protective Guidance” 2013.
5. TJU Procedure Manual for Research Radioisotope Laboratories, January 5, 2018.
6. TJUH “Clinical Radioactive Materials Procedure Manual”, July 7, 2021.
7. TJUH “Guide for Nursing Personnel on the Care of Patients who Receive Radioactive Material”, November 4, 2015.

Copies of the above references may be obtained by contacting ORS at (215) 955-7813.

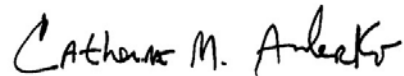
**Attachment(s):** Declaration of Pregnancy Form for Radiation Workers

**Original Issue Date:** 07/08/04

**Revision Date(s) :** 03/08/05; 05/03/10, 10/26/17,  
5/6/22 **Review Date(s):** 04/22/11, 07/30/12,  
01/15/14, 03/30/15, 5/6/20

**Responsibility for Maintenance of Policy:** Radiation Safety Officer

**Approved by:**



**Thomas Jefferson University  
Hospitals, Inc.**





**DECLARATION OF PREGNANCY FORM FOR RADIATION WORKERS**

TJU/TJUH

I am a radiation worker at TJU/TJUH and am declaring my confirmed pregnancy.

I understand that this declaration is voluntary, and that I may un-declare at any time (in writing) for any reason. I also understand that this declaration may require me to wear a separate badge in the anterior abdominal area and underneath the lead apron (if applicable) to monitor radiation exposure to the embryo/fetus. I accept that my dose limit will change to 500 mrem for the gestational period and expected to stay below 50 mrem per month.

I accept responsibility to follow the radiation safety guidelines to keep my radiation exposure as low as possible, and that if my exposure consistently exceeds the monthly limit, or approaches 450 mrem total, that changes may be made to my job duties to ensure compliance with the dose limit. I commit to wearing my issued radiation badge(s) as directed and returning them on time to the Radiation Safety Office each month.

I understand that I may contact the RSO at any time for counseling on maintaining my exposure as low as possible, and that I am encouraged to do so, and that I will be informed by the RSO if my radiation exposure readings approach or exceed any limit.

**PLEASE COMPLETE THE FOLLOWING:**

\_\_\_\_\_  
Print Your Name (Last Name, First Name)

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Contact Phone No.

\_\_\_\_\_  
Email

\_\_\_\_\_  
Department

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date Declaration Form Completed

\_\_\_\_\_  
Pregnancy Due Date

My estimated date of conception was (enter month and year)

Are you currently wearing a radiation badge?

Yes       No

I have been offered radiation safety counseling?

Yes       No

I have received a copy of NRC Reg. Guide 8.13?

Yes       No

\_\_\_\_\_  
Worker Signature and Date

## Appendix G

### **Standards for an Accredited Educational Program in Radiography**

Standards for an Accredited Educational Program in Radiography

Effective January 1, 2021

Adopted April 2020

#### Introductory Statement

The Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiography** are designed to promote academic excellence, patient safety, and quality healthcare. The **Standards** require a program to articulate its purposes; to demonstrate that it has adequate human, physical, and financial resources effectively organized for the accomplishment of its purposes; to document its effectiveness in accomplishing these purposes; and to provide assurance that it can continue to meet accreditation standards.

The JRCERT is recognized by both the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The JRCERT **Standards** incorporate many of the regulations required by the USDE for accrediting organizations to assure the quality of education offered by higher education programs. Accountability for performance and transparency are also reflected in the **Standards** as they are key factors for CHEA recognition.

The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process not only helps to maintain program quality but stimulates program improvement through outcomes assessment.

There are six (6) standards. Each standard is titled and includes a narrative statement supported by specific objectives. Each objective, in turn, includes the following clarifying elements:

- **Explanation** - provides clarification on the intent and key details of the objective.
- **Required Program Response** - requires the program to provide a brief narrative and/or documentation that demonstrates compliance with the objective.
- **Possible Site Visitor Evaluation Methods** - identifies additional materials that may be examined and personnel who may be interviewed by the site visitors at the time of the on-site evaluation in determining compliance with the particular objective. Review of supplemental materials and/or interviews is at the discretion of the site visit team.

Regarding each standard, the program must:

- Identify strengths related to each standard
- Identify opportunities for improvement related to each standard
- Describe the program's plan for addressing each opportunity for improvement
- Describe any progress already achieved in addressing each opportunity for improvement
- Provide any additional comments in relation to each standard

The self-study report, as well as the results of the on-site evaluation conducted by the site visit team, will determine the program’s compliance with the Standards by the JRCERT Board of Directors.

### Standards for an Accredited Educational Program in Radiography

[https://www.jrcert.org/sites/jrcert2/uploads/documents/2021\\_Standards/2021\\_Standards\\_Radiography\\_02\\_18\\_21.pdf](https://www.jrcert.org/sites/jrcert2/uploads/documents/2021_Standards/2021_Standards_Radiography_02_18_21.pdf)

#### Table of Contents

<b>Standard One: Accountability, Fair Practices, and Public Information.....</b>	<b>4</b>
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.	
<b>Standard Two: Institutional Commitment and Resources.....</b>	<b>13</b>
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.	
<b>Standard Three: Faculty and Staff.....</b>	<b>18</b>
The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.	
<b>Standard Four: Curriculum and Academic Practices.....</b>	<b>26</b>
The program’s curriculum and academic practices prepare students for professional practice.	
<b>Standard Five: Health and Safety.....</b>	<b>38</b>
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.	
<b>Standard Six: Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement.....</b>	<b>44</b>
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.	
<b>Glossary .....</b>	<b>50</b>
<b>Awarding, Maintaining, and Administering Accreditation.....</b>	<b>53</b>

Appendix H  
**RADIOGRAPHY SCOPE OF PRACTICE & PRACTICE  
STANDARDS**

The ASRT Practice Standards for Medical Imaging and Radiation Therapy define the practice and establish general and specific criteria to determine compliance. The document includes a number of professional practice resources and can be found at <https://www.asrt.org/main/standards-and-regulations/professional-practice/practice-standards>

Practice standards are authoritative statements established by the profession for judging the quality of practice, service and education. Professional practice constantly changes as a result of a number of factors including technological advances, market and economic forces, and statutory and regulatory mandates.

Scopes of practice delineate the parameters of practice, identify the boundaries for practice and typically are formatted as lists of tasks that are appropriate to include as part of the work of an individual who is educationally prepared and clinically competent for that profession.

Each scope of practice is limited to that which the law allows for specific education, experience and demonstrated competency. Many states have laws, licensing bodies and regulations that describe requirements for education and training and define scopes of practice for professions.

Advisory opinion statements are interpretations of the practice standards. They are intended for clarification and guidance for specific practice issues.

## Appendix I

### **Position Statement on Breast Imaging Clinical Rotations**

#### **Adopted by the JRCERT Board of Directors (October 2021)**

The JRCERT Board of Directors has received numerous inquiries to update and generalize the language in the Position Statement on Breast Imaging Clinical Rotations.

With regard to breast imaging, the JRCERT has determined programs must make every effort to place students in a breast imaging clinical rotation/procedure if requested and available. However, programs will not be expected to attempt to supersede clinical site policies that restrict breast imaging rotations/ procedures to students. Students should be advised that placement in a breast imaging rotation is not guaranteed.

The JRCERT reiterates that it is the responsibility of each clinical site to address any legal challenges related to a program's inability to place students in a breast imaging rotation. All students should be informed and educated about the various employment opportunities and potential barriers that may affect their ability to work in a particular clinical staff position.

## Appendix J

### **JRCERT POSITION STATEMENT ON GONADAL SHIELDING IN THE CLINICAL SETTING**

The Joint Review Committee on Education in Radiologic Technology (JRCERT) Standards for an Accredited Educational Program in Radiography are designed to promote academic excellence, patient safety, and quality healthcare. Standard Five - Objective 5.3 of the Standards requires programs to assure students employ proper safety practices. Programs achieve this by instructing students in the utilization of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure to patients, selves, and others. These practices assure radiation exposures are kept as low as reasonably achievable (ALARA). Gonadal shielding has been a longstanding practice during radiography examinations in instances where the clinical objectives of the examination are not compromised<sup>1</sup>. Recent research<sup>2</sup> in the effectiveness of gonadal shielding during abdominal and pelvic radiography has found, in most instances, that:

- gonadal shielding does not contribute significantly to reducing patient risk from radiation exposure;
- gonadal shielding positioned improperly may have the unintentional consequence of increasing patient exposure;
- gonadal shielding positioned improperly may result in the loss of valuable diagnostic examination results.

Based on the recent research pertaining to the use of gonadal shielding during abdominal and pelvic radiography and the longstanding practice in radiography to only shield in instances in which diagnostic quality will not be compromised, the JRCERT has concluded that routine use of gonadal shielding for abdominopelvic radiography exams should not be standard practice for clinical radiography students when the use of such could interfere with the diagnostic quality of the exam and may result in the risk of a repeat exposure. Educational programs should review and consider amending, if necessary, policies to assure that the use of gonadal shielding should only be utilized when it will not interfere with the purpose of the examination and when it aligns with clinical facility policy. Consistent with Standard Five, programs must have policies/processes in place to assure students are educated on the importance of the proper use of shielding and optimal use of radiation to promote the health and safety of students, patients, and the public.

<sup>1</sup> [NCRP] National Council on Radiation Protection and Measurements. 2021. NCRP Recommendations for Ending Routine Gonadal Shielding During Abdominal and Pelvic Radiography. Bethesda (MD): National Council on Radiation Protection and Measurements. Statement No. 13.

<sup>2</sup> [FDA] U.S. Food and Drug Administration. 2020. Food and Drugs; radiation protection recommendations; radiological health; recommendations for the use of specific area gonadal shielding on patients during medical diagnostic x-ray procedures. Washington (DC): US Government Publishing Office. 21 CFR Part 1000.50.

## Appendix K

### ARRT Standards of Ethics

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

Last Revised: September 1, 2020 Published: September 1, 2020

**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.

Appendix L



**Magnetic Resonance (MR)  
Environment Screening Form**

The MR system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. Therefore, all individuals are required to fill out this form BEFORE entering the MR environment or MR system room.

**Please indicate if you have any of the following:**

- |     |    |  |
|-----|----|--|
| Yes | No | Brain aneurysm clips/ Brain surgery  |
| Yes | No | Cardiac pacemaker  |
| Yes | No | Implanted cardioverter defibrillator (ICD)                                 |
| Yes | No | Electronic/Magnetically-activated implant or device                        |
| Yes | No | Heart surgery/Heart valve prosthesis                                       |
| Yes | No | Shunts ( <i>Spinal or intraventricular</i> )                               |
| Yes | No | Shunts/Stents/Filters/Intravascular Coil                                   |
| Yes | No | Spinal cord stimulator   |
| Yes | No | Neurostimulator/Biostimulator  |
| Yes | No | Insulin or other infusion pump   |
| Yes | No | Implanted drug infusion device   |
| Yes | No | Internal electrodes or wires   |
| Yes | No | Ear Surgery/Cochlear Implants/Stapes Prosthesis                            |
| Yes | No | Hearing aid ( <i>Remove before entering MR scan room</i> )                 |
| Yes | No | Eye Surgery/Implants/Eyelid Spring/Wires/Retinal Tack                      |
| Yes | No | Have you ever worked in a metal or machine shop                            |
| Yes | No | Injury to the eye involving metal or metal shavings                        |
| Yes | No | Artificial or prosthetic limb  |
| Yes | No | Orthopedic Pins/Screws/Rods  |
| Yes | No | Joint replacement  |
| Yes | No | Endoscopic video capsule   |
| Yes | No | Endoscopy or Colonoscopy clips   |
| Yes | No | Metal Mesh Implants/Wire Sutures/Wire Staples or Clips/Internal Electrodes |
| Yes | No | IUD, diaphragm or pessary  |
| Yes | No | Tattoo's/Permanent Make-up/Body Piercing/Patches                           |
| Yes | No | Metallic Foreign Bodies - Bullets/Shrapnel/BB                              |
| Yes | No | Any other internal/external implant or device                              |

***If you answered yes to any of the above, please explain:***

I attest that the above information is correct to the best of my knowledge. I read and understand the entire contents of this form.

Updated 7/15



Appendix M

**PROGRAM CALENDAR 2023 – 2024**

Highlighted areas denote the program’s clarification from the JCHP academic calendar

<b>Fall Semester</b>	
August 28, Monday	Welcome Date/Department Boot Camp/Orientation/ Classes begin
September 3, Sunday	Last day to add online
September 4, Monday	Labor Day (University holiday- no classes)
September 6, Wednesday	Last date to drop without a grade of “W”/ Online Registration Closes
September 29, Friday	Last date to remove an “I” grade from Summer term
October 12, Thursday	Radiography fall clinical rotations begin
October 11, Wednesday	Last day for course withdrawal
November 6, Monday	On-line Registration for Spring semester begins (anticipated)
November 18, Friday	Preliminary second year concentration forms submitted to education coordinator
November 22, Wednesday (after classes end)- November 26, Sunday	Thanksgiving break
November 27, Monday	Classes resume
December 8, Friday	Classes end. Clinical continues through finals week.
December 11, Monday	Final Examinations Begin
December 15, Friday	Final Examinations End. Clinical rotations end.
December 18, Monday	Clinical rotations resume for needed make-up time/competency requirements
December 22, Friday	Grades due and made available to students
December 31, Saturday	Last date to file Application for Graduation
<b>Spring Semester</b>	
January 2, Tuesday	Classes begin
January 5, Friday	Second year concentration form submitted to education coordinator
January 7, Sunday	Last day to add online
January 10, Wednesday	Last Day to Drop Without "W" Grade - Online Registration Closes
January 15, Monday	Martin Luther King, Jr. Day (University Holiday - No Class; Day of Service)
January 26, Thursday	Last date to remove an “I” grade from previous term
February 21, Sunday	Last day for course withdrawal
March 9, Friday – March 17, Sunday	Spring Break begins after classes/clinical on March 9.
March 18, Monday	Classes resume
April 1, Monday	On-line Registration for Summer/Fall Semester begins (anticipated)
April 19, Friday	Classes end. Clinical continues through finals week.
April 22, Monday	Final Examinations Begin
April 26, Friday	Final Examinations End. Clinical rotations end.
TBD	Commencement
<b>Summer Semester</b>	
April 29, Monday	Classes begin

May 5, Sunday	Last day to add online
May 8, Wednesday	Last Day to Drop Without "W" Grade - Online Registration Closes
May 27, Monday	Memorial Day (University Holiday - No Class)
June 9, Friday	Last date to remove an "I" grade from previous term
June 19, Wednesday	Last Day for Course Withdrawal
July 4, Thursday	Independence Day (University Holiday - No Class)
August 5, Monday	Department Class Day (Graduating students excused from clinical to participate)
August 11, Friday	Classes end. <b>Clinical continues through finals week.</b>
August 14, Monday	Final Examinations Begin
August 16, Friday	Final Examinations End. <b>Clinical rotations end.</b>
<b>August 23, Monday</b>	<b>Radiography clinical rotations resume for any required make-up time/competency requirements</b>
August 31, Thursday	Radiography program officially ends