



**PimaCommunityCollege**

**WEST CAMPUS**

# **Radiologic Technology Student Handbook**

**2025/2026**

**Pima Community College is an equal opportunity affirmative action employer and educational institution committed to excellence through diversity.**

## **INTRODUCTION**

Pima Community College (PCC) is accredited by the Commission on Institutions of Higher Education, North Central Association of Colleges and is approved by the Arizona State Board of Directors for Community Colleges.

The program is accredited by:

The Joint Review Committee on Education in Radiologic Technology  
20 North Wacker Drive, Suite 2850  
Chicago, Illinois 60606-3182  
312-704-5300

The Radiologic Technology Program embraces the mission and vision statements of Pima Community College. The Radiologic Technology Program is an integral part of the college, and the general policies formulated for all students who apply to the Radiologic Student Rights and Responsibilities Program. Policies for all Pima College students are found in the PCC Student Handbook, which contains the Code of Conduct. The radiologic technology student is required to follow the Arizona Department of Health Services policies and the Division Standard Practice Guide for Students. There are additional policies specific to the Radiologic Technology Program. The purpose of this handbook is to communicate the specific policies of the Pima Community College Radiologic Technology Program.

The Pima Community College Radiologic Technology Program reserves the right to make changes as the program's needs require, and to change without notice any information, requirements, and regulations published in this handbook.

Admission to Pima Community College does not automatically guarantee admission to the Radiologic Technology Program.

### **Student Advising Center**

Advising 206-6699

In order to register for any radiography course, a student must be admitted into the program. Graduation from the college is not the sole criterion for obtaining qualifications to practice Radiologic Technology in the state of Arizona. Licensing requirements are the exclusive responsibility of the American Registry of Radiologic Technologists (ARRT) and the Arizona Department of Health Services (ADHS).

Radiologic Technology students should expect to spend approximately 40 hours per week in class and clinical activities. Clinical assignment requires considerable preparation. Thus, any additional activities or employment should be kept at a minimum.

### **ADA Statement**

Pima Community College is committed to providing accommodation for qualified individuals with disabilities in a timely and effective manner. To request a reasonable accommodation, students must be registered with the campus Disabled Student Resources (DSR) office. Accommodations will be made based on eligibility determined by Disabled Student Resources. Services can be requested at any time during the semester. Requesting services well in advance will help to ensure that resources are available when needed. Please contact a DSR office at 206-6688 (West Campus), 206-5151 (Desert Vista) or [ADRhhelp@pima.edu](mailto:ADRhhelp@pima.edu).

## TABLE OF CONTENTS

RAD [Student Handbook](#) can be located at:

<https://www.pima.edu/academics-programs/degrees-certificates/health-sciences/radiologic-technology/radiologic-tech-aas/rad-student-handbook.pdf>

<b>INTRODUCTION.....</b>	<b>ii</b>
 <b>I. PROGRAM GOALS, LEARNING OUTCOMES, ASSESSMENT PLAN, and CURRICULUM</b>	
A. Radiologic Technology Program Mission Statement .....	1
B. Program Goals .....	1
C. Program Outcomes, Assessment, Curriculum .....	2
D. RAD Program Technical Standards.....	3
E. Program Costs and Core Course Information .....	6
 <b>II. COMMUNICATION CHANNELS</b>	
A. Radiologic Technology Program Offices and Phone Numbers .....	8
B. Voice Mail .....	8
 <b>III. RULES &amp; CODE OF ETHICS FOR RADIOLOGIC TECHNOLOGIST LICENSURE</b>	
A. ARRT Standards of Ethics.....	8
B. ASRT Code of Ethics .....	11
C. Standards of Professional Code of Ethics .....	12
 <b>IV. ATTENDANCE&amp;TARDINESS/JRCERT&amp;PCC CEC SCHEDULE/EXAM RESTRICTION POLICIES</b>	
A. Attendance / Tardiness.....	13
B. JRCERT CEC Schedule Policy Documentation of Utilization of Evening and/or Weekend Assignments.....	14
C. Advanced Modality Assignments.....	14
D. Clinical Notebook.....	14
E. Religious Holidays.....	15
F. Bereavement Policy .....	15
G. Chemical Impairment Policy .....	15
G.5. If the Student Refuses Screening .....	16
H. Confidentiality .....	16
I. Positive Drug/Alcohol Screens .....	17
J. Re-Entry to the Radiologic Technology Program After a Positive Drug/Alcohol Screen .....	17
K. Negative Drug/Alcohol Screen Being Suspected of Chemical Impairment .....	18
L. Appeal Statement.....	18
 <b>V. POLICIES/INSURANCE</b>	
A. General Policies .....	18
B. Personal Health and Clinical Assignment Requirements Immunization/CPR .....	18
C. Pregnancy Policy .....	20

D. NRCP Guidelines for Pregnancy .....	20
E. Infection Control Policy.....	20
F. Student Health Insurance .....	20

## **TABLE OF CONTENTS (continued)**

### **VI. CLASSROOM/COLLEGE ASSIGNMENT/CLINICAL ASSIGNMENT**

A. Methods of Instruction.....	20
B. Repeat Examinations .....	21
C. Administration of Pharmacologic Agents: Intravenous and Oral Contrast Media .....	21
D. Illness/Accidents and/or Injuries in the Clinical Assignment.....	22
E. Incident Reports.....	22
F. Supervision & Responsibilities of Students.....	23
G. Clinical Instructor Position Description.....	23
H. Duties and Responsibilities.....	24
I. Qualifications.....	25
J. Student CEC Notebook Policy.....	25
K. Student Radiographer Holding Patient / I.R. Policy .....	25
L. Student Transportation Policy.....	25
M. Electronic Devices .....	25

### **VII. DOSIMETRY BADGE POLICY .....**

26

### **VIII. UNIFORM POLICY**

A. Uniforms .....	26
B. General Appearance.....	27

### **IX. TESTING AND GRADING POLICIES**

A. Testing Policies.....	28
B. Grading Policy/Re-Entry Policy .....	29
C. Clinical Assignment Evaluation/Grading .....	29
D. Official Withdrawal from PCC Statement(s).....	30
E. Actions Related to Academic or Laboratory Deficiencies.....	30
F. Actions Related to Clinical Deficiencies/Conduct.....	30

### **X. PIMA COMMUNITY COLLEGE STUDENT SERVICE POLICIES**

A. Grade Appeals/Complaint Procedure: Academic and Grade Regulations .....	32
B. Appeal of Academic Disqualification.....	33
C. Reinstatement .....	33
D. Grades/Appeals.....	33
D. Withdrawal from RAD Program.....	33

### **XI. RAD PROGRAM MISCELLANEOUS INFORMATION**

A. Advanced Standing (Transfer Policy).....	34
B. JRCERT Allegations of Non-Compliance Policy.....	35
C. Student Evaluation of Course, Instructors and Clinical Assignment Sites .....	35
D. RAD Laboratory Policy .....	35
E. Protective Devices Maintenance.....	36
F. Graduation Requirements .....	36

G. ARRT Examination .....	36
---------------------------	----

## TABLE OF CONTENTS (continued)

### APPENDIX A (Course, Instructors, and Facilities Evaluation Sheets)

A. Clinical Site Orientation .....	38
B. Notice of Unsafe or Unacceptable Practice Act.....	40
C. Radiography Clinical Competency Requirements / PCC Clinical Competency Requirements & Process.....	42
D. Objectives Check off Forms	
1. Vital Signs .....	47
2. Sterile and Aseptic Technique.....	48
3. Venipuncture .....	49
4. Transfer of Patients .....	50
5. Care of Patient: Oxygen Therapy .....	51
6. Care of Patient: Catheters & Tubing .....	52
E. Student Radiographer Clinical Progress Evaluation.....	53
F. Competency Evaluation Form .....	57
G. C-Arm Competency Evaluation Form .....	59
H. Radiographer Image Evaluation RAD 173, 176, 177, 183, 186 .....	60
I. Radiation Safety Review Form .....	62
J. Clinical Education Absences Record.....	63

### APPENDIX B

A. Scheduling Policy .....	65
B. Release of All Claims (HRP Form) .....	66
C. Standard Precautions.....	67
D. Health Risk Statement of Understanding.....	68
E. Verification of Personal Health Insurance .....	69
F. Health Declaration and Physical Exam Form .....	70
G. Clinical Eligibility Immunization Requirements .....	74
H. Immunization Declaration Form.....	76
I. Tuberculosis Document Record & Symptoms Form .....	78
J. Pregnancy Policy .....	80
K. JRCERT Allegations of Non-Compliance Policy.....	82
Direct/Indirect Repeat Examination Policy Verification .....	82
HIPAA Patient Confidentiality, MRI Safety .....	82
L. Academic Clinical Warning Form/ Student Deficiency Notice Clinical .....	83
M. Recommendations for Study.....	86
N. Student Contract Educational Goals .....	87
O. Clinical Incident Report.....	89
P. PCC Incident /Accident policy and report form .....	90
Q. Code of Conduct .....	93
R. Drug Alcohol Abuse Policy .....	94
S. J 2 Lab Release of Consent Form.....	95
T. RAD Program Re-Entry Request Form.....	96
U. Repeat image log form.....	97
V. Signature Form for Radiologic Technology Student Handbook.....	98
W. Student's Personal Data.....	99

## **I. PROGRAM GOALS, LEARNING OUTCOMES, ASSESSMENT PLAN, and CURRICULUM**

The program curriculum is reviewed every two years by the faculty with input from the Advisory Clinical Instructors Committee members and aligned with the American Registry of Radiologic Technology (ARRT) content specifications. The Program director submits course revisions to the west campus curriculum specialist, for approval by the College Curriculum Council. The Program director reviews all course syllabus content prior to student distribution on My Pima.

The Advisory Clinical Instructors Committee members participate in the Student Learning Outcomes (SLO) and assessment plan during the annual fall meeting and documented in the meeting minutes. Additionally, the Program mission, goals and (SLO) are discussed with staff and managers during the regularly scheduled faculty Clinical Education Center (CEC) assignments. The assessment plan is reviewed and discussed at the regularly scheduled faculty meetings.

Students are advised of the SLO results and recommendations on a regular basis by the assigned faculty and during the Advisory Clinical Instructors Committee meetings. Program Effectiveness data is located on the RAD program website.

### **A. RADIOLOGIC TECHNOLOGY PROGRAM MISSION STATEMENT**

The Radiologic Technology Program upholds the mission statement of Pima Community College by providing for the preparation of highly qualified, entry-level radiographers. The program will meet the radiologic health needs and expectations of the community through partnerships in clinical education with regional healthcare facilities. The program faculty intends to guide the student in achieving the following skills, knowledge and values:

### **B. PROGRAM GOALS**

Students demonstrate effective communication skills with the patient and health care team.

Students demonstrate clinical competency required of an entry-level radiographer.

Students demonstrate critical thinking and problem-solving skills that not only involve technical imaging considerations but also those related to patient needs and clinical restrictions.

Students demonstrate professional behavior and values consistent with the rules and code of the American Registry of Radiologic Technologists, and the code of ethics of the American Society of Radiologic Technologists.

### **C. PROGRAM LEARNING OUTCOMES**

**Goal: Students will be clinically competent.**

Student Learning Outcomes Apply positioning skills, select technical factors, utilize radiation protection, and be competent in the clinical setting.

**Goal: Students will demonstrate communication skills.**

Student Learning Outcomes: Demonstrate written and oral communication skills.

**Goal: Students will develop critical thinking skills.**

Student Learning Outcomes: Critique images to determine diagnostic quality. Adapt standard procedures for non-routine patients.

**Goal: Students will model professionalism.**

Student Learning Outcomes Student Learning Outcomes: Demonstrate work ethics and the value of life-long learning.

**D. Programmatic Assessment Student Learning Outcomes**

**Goal: Students will be clinically competent.**

Student Learning Outcomes Apply positioning skills, select technical factors, utilize radiation protection, and be competent in the clinical setting.

- Critique radiographic images for positioning accuracy. RAD 170,171,174,173, 176, 183, 186.
- Select appropriate technical factors. RAD 170,173, 171,174,175,176, 177, 183, 186, 186, 186

**Goal: Students will demonstrate communication skills.**

Student Learning Outcomes: Demonstrate written and oral communication skills.

- **Demonstrate written communication competence. RAD 171,174,182.**
- Demonstrate effective oral communication skills. RAD 181, RAD 184, 173, 176, 177, 183, 186.

**Goal: Students will develop critical thinking skills.**

Student Learning Outcomes: Critique images to determine diagnostic quality. Adapt standard procedures for non-routine patients.

- **Differentiate factors affecting image quality and image production. RAD 172, 175, 182, 173, 176, 177, 183, 186.**
- Demonstrate critical thinking and problem-solving skills in the clinical setting. RAD 173,176, 177,183,186.

**Goal: Students will model professionalism.**

Student Learning Outcomes Student Learning Outcomes: Demonstrate work ethics and the value of life-long learning.

- **Demonstrate professionalism, interpersonal skills and initiative in the clinical setting.**  
RAD 173, 176, 177, 183, 186.
- Summarize professional obligations as a radiographer. RAD 170, RAD 182



## **E. RAD PROGRAM TECHNICAL STANDARDS**

### **Pima Community College Associate Degree Radiologic Technology Program**

#### **Technical Standards (Functional Abilities Essential for Radiologic Technology Practice)**

The purpose of the Radiologic Technology Program is to educate students to meet the program outcomes and to ensure that no graduate will pose a danger to the patient. Radiologic Technology students will receive both classroom and clinical instruction in entry-level radiography and will be required to demonstrate competency in multiple examinations and procedures.

In order to provide safe and effective patient care in the Radiologic Technology Program, the student must be able to demonstrate, with or without reasonable accommodation, physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the program curriculum and clinical agency requirements. Any applicant who has met the necessary academic prerequisites and can, with or without reasonable accommodation, meet and/or perform the Radiologic Technology Program Technical Standards will be accepted for admission.

Students admitted to the Radiologic Technology Program gain experience in many settings that can be physically demanding, e.g., hospitals, outpatient and urgent care centers, and college labs. During each clinical experience, the Radiologic Technology student is assigned to a clinical education center that will require direct patient care. Students will be expected to adhere to the Health Insurance Portability and Accountability Act (HIPAA) of 1996 which safeguards patient confidentiality.

Transportation to and from health care facilities is the responsibility of the student.

**Please carefully read the Radiologic Technology Program Technical Standards**

<b>Functional Ability</b>	<b>Standard</b>	<b>Examples of Required Activities</b>
Gross Motor Skills	Gross motor skills sufficient to provide the full range of safe and effective patient care examinations	<ul style="list-style-type: none"><li>• Move within confined spaces such as examination room or operating suite</li><li>• Assist with turning and lifting patients</li><li>• Administer CPR</li></ul>
Fine Motor Skills	Fine motor skills sufficient to perform manual psychomotor skills	<ul style="list-style-type: none"><li>• Pick up and grasp small objects with fingers such as x-ray identification markers.</li></ul>
Physical Endurance	Physical stamina sufficient to remain continuously on task for up to a 12- hour clinical shift while standing, sitting, moving, lifting, and bending to perform patient care examinations	<ul style="list-style-type: none"><li>• Walk/stand for extended periods of time; turn, position, and transfer patients.</li><li>• Wear lead aprons, and thyroid collars for extended periods of time</li><li>• Manually resuscitate patients in emergency situations</li></ul>

Physical Strength	Physical strength sufficient to perform full range of required patient care activities	<ul style="list-style-type: none"> <li>• Push and pull 250 pounds on a wheeled bed or gurney</li> <li>• Push and pull radiographic mobile equipment for extended periods of time</li> <li>• Lift and move heavy objects up to 50 pounds</li> </ul>
Mobility	Physical ability sufficient to move from room to room and maneuver in small spaces; full range of motion to twist/bend, stoop/squat, reach above shoulders and below waist and move quickly; manual and finger dexterity; and hand-eye coordination to perform Radiologic Technology activities	<ul style="list-style-type: none"> <li>• Move around in work area and treatment areas. Position oneself in the environment to perform duties without obstructing the position of other team members or equipment</li> </ul>
<b>Functional Ability</b>	<b>Standard</b>	<b>Examples of Required Activities</b>
Hearing	Auditory ability sufficient for physical monitoring and assessment of patient health care needs	<ul style="list-style-type: none"> <li>• Hear normal speaking level sounds</li> <li>• Hear auditory alarms (monitors, x-ray exposure indicator, fire alarms, call bells)</li> <li>• Hearing cry for help</li> </ul>
Visual	Normal or corrected visual ability sufficient for accurate observation and performance of Radiologic Technology duties	<ul style="list-style-type: none"> <li>• See objects up to 20 feet away</li> <li>• Visual acuity to set exposure factors and operate a computer keyboard</li> <li>• Assess skin color (cyanosis, pallor)</li> </ul>
Tactile	Tactile ability sufficient for physical monitoring and assessment of health care needs	<ul style="list-style-type: none"> <li>• Feel vibrations (pulses)</li> <li>• Detect temperature changes</li> <li>• Palpate anatomical landmarks during radiographic positioning</li> </ul>
Smell	Olfactory ability sufficient to detect significant environmental and patient odors	<ul style="list-style-type: none"> <li>• Detect odors from the patient (foul smelling drainage, alcohol breath)</li> <li>• Detect smoke</li> </ul>
Emotional/ Behavioral	Emotional stability and appropriate behavior sufficient to assume responsibility/accountability for actions	<ul style="list-style-type: none"> <li>• Establish rapport with patients, instructors and colleagues.</li> <li>• Respect and care for people whose appearance, condition, beliefs and values may be in conflict with their own</li> <li>• Deliver Radiologic Technology exams regardless of patient's race, ethnicity, age, gender, religion, sexual orientation or diagnosis</li> <li>• Conduct themselves in a composed, respectful manner in all situations and with all people</li> <li>• Work with teams and workgroups</li> <li>• Establish and maintain professional boundaries</li> <li>• Demonstrate emotional skills to remain calm and maintain professional decorum in an</li> </ul>
Professional Attitudes and Interpersonal Skills	Present professional appearance and demeanor; demonstrate ability to communicate with patients, supervisors, and co-workers to achieve a positive and safe work environment. Follow instructions and safety protocols.	

	Honesty and integrity beyond reproach	<p>emergency/stressful situation</p> <ul style="list-style-type: none"> <li>• Demonstrate prompt and safe completion of all patient care responsibilities</li> <li>• Adapt rapidly to changing environment/stress</li> <li>• Exhibit ethical behaviors and exercise good judgment</li> </ul>
Communication	Oral communication skills sufficient to communicate in English with accuracy, clarity and efficiency with patients, their families and other members of the health care team, including non-verbal communication, such as interpretation of facial expressions, affect and body language	<ul style="list-style-type: none"> <li>• Give verbal directions to or follows verbal directions from other members of the healthcare team and participate in health care team discussions of patient care</li> <li>• Elicit and record information about health history, current health state, and responses to treatment from patients or family members</li> <li>• Convey information to patients and others as necessary to teach, direct individuals, in an accurate, effective, and timely manner</li> <li>• Recognize and report critical patient information to other caregivers</li> </ul>
Cognitive/ Quantitative Abilities	Reading comprehension skills and mathematical ability sufficient to understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis	<ul style="list-style-type: none"> <li>• Calculate appropriate technical factors given specific patient parameters.</li> <li>• Analyzes and synthesizes data and develops alternative means to obtain the necessary radiographic images.</li> <li>• Collect data, prioritize needs, and anticipate reactions.</li> <li>• Transfer knowledge from one situation to another</li> <li>• Accurately process information on medication containers, physicians' orders, monitors, equipment calibrations, printed documents, medication records, medical records and policy and procedure manuals</li> </ul>
Conceptual/Spatial Abilities	Conceptual/spatial ability sufficient to comprehend three-dimensional and spatial relationships	<ul style="list-style-type: none"> <li>• Comprehend spatial relationships in order to properly perform radiographic exams, assist with intravenous lines, catheters, etc.</li> </ul>
Clinical Reasoning	Ability to reason across time about a patient's changing condition and/or changes in the clinician's understanding	<ul style="list-style-type: none"> <li>• Evaluate patient or instrument responses, synthesize data, and draw sound conclusions</li> </ul>
Flexibility	Adapt to the Radiologic Technology Department course scheduling policy	<ul style="list-style-type: none"> <li>• Available to work the hours of an assigned schedule.</li> </ul>

After admission to the Radiologic Technology Program, the student is responsible for notifying the Program Director and the Clinical Education Center Instructor of conditions that impact the student's ability to meet the Radiologic Technology Program Technical Standards. Any change in the student's

ability to meet and/or perform the Radiologic Technology Program Technical Standards would require the student to provide appropriate documentation (as identified by the Radiologic Technology Program) that they once again meet the Technical Standards.

If an accommodation is necessary to participate in the Radiologic Technology Program, participation is dependent on the identification of a reasonable accommodation. Reasonableness is determined by the Disabled Student Services (DSR) Office and the Radiologic Technology Program on a case-by-case basis, utilizing the Radiologic Technology Program Technical Standards. The accommodation needs to be in place prior to the start of the program, or it may delay your ability to start the program. Pima Community College provides reasonable accommodations to those students who qualify under the Americans with Disability Act, as amended (ADA). Appropriate documentation will be required to determine eligibility to receive accommodation. It is the student's responsibility to contact the DSR Office and request accommodation in a timely manner. Note that accommodations may not be transferred clinically.

#### **E. PROGRAM COST AND CORE COURSE INFORMATION**

Pima Community College Radiologic Technology Program determines its enrollment data based on the number of students registered the day after the drop/refund date of the first summer RAD 170 course.

Differential tuition link

<https://www.pima.edu/paying-for-college/tuition-fees/differential-tuition.html>

Costs: Additional fees

<https://www.pima.edu/paying-for-college/tuition-fees/fees.html>

Fingerprint Clearance.....	\$70.00
Annual Random Drug Screen.....	\$80.00
RAD Program Name Badge.....	\$16.00
Uniforms .....	\$100.00
Books approximate cost: RAD 170 \$530.24, fall \$367, RAD 177- \$65. ....	\$962.00
Course Fees .....	\$175.00
Clinical Course Fees (ICN Badge Fee) .....	\$300.00
Semester Processing Fee \$15.00 per semester X 5.....	\$75.00
Castle Branch fee.....	\$40.00
RAD 185 fee .....	\$90.00
Application to ARRT Registry Exam.....	\$225.00
Application for State License .....	\$100.00
Approximate Tuition as of Fall 2025 @ 58 Credits \$152 per credit = \$8,816.00 or (74 credits=\$10,424)	

**\* Total Approximate Cost \$11,049 or (cost with support courses \$12,657)**

**\*Above cost does not include CPR, immunizations, physical, flu shot, health insurance, and possible CEC placement fee.**

### Curriculum Sequence

<u>Course #</u>	<u>Course Title</u>	<u>Credits</u>	<u>Days/hrs.</u>	<u>fee</u>
<i>Required Core Courses</i>				
RAD 170/170LB ( <b>Summer</b> ) 5 weeks	Medical Imaging Fundamentals	3	M –Th 23days	
RAD 171/171LB ( <b>Fall</b> )	Radiographic Positioning I	3.75	M/W	
RAD 172/172LB ( <b>Fall</b> )	Medical Imaging Technology I	3.5	M/W	
RAD 173LC ( <b>Fall</b> )	Clinical Education I	6	T/Th/F 24 hrs.	Semester ID Markers and ICN \$55
RAD 174/174LB ( <b>Spring</b> )	Radiographic Positioning II	3.75	M/W	
RAD 175/175LB ( <b>Spring</b> )	Medical Imaging Technology II	3.5	M/W	
RAD 176LC ( <b>Spring</b> )	Clinical Education II	6	T/Th/F 24 hrs	Semester ICN \$25
RAD 177LC ( <b>Summer</b> )	Clinical Education III	4.5	M-F 40 hrs. Approx. 6 wks.	Semester ICN \$25
RAD 180 ( <b>Fall</b> )	Introduction to Radiation Biology	1	Th	
RAD 181 ( <b>Fall</b> )	Radiographic Positioning III	3	T/Th	
RAD 182 ( <b>Fall</b> )	Medical Imaging Technology III	3	T/Th	
RAD 183LC ( <b>Fall</b> )	Clinical Education IV	5	M/W 16 hrs.	Semester ICN \$25
RAD 184/184LB ( <b>Spring</b> )	Radiographic Positioning IV	3.5	T/Th	
RAD 185 ( <b>Spring</b> )	Senior Seminar	2.5	T x13 wks.	\$ 80.00
RAD 186LC ( <b>Spring</b> )	Clinical Education V	6	M/W/F 24 hrs	Semester ICN \$50
<b>Subtotal</b>		<b>58</b>		

Tuition costs can be located on the PCC website under [Tuition and Fees](#).

Students must be 18 years of age when applying to the program.

Each student admitted into the Radiologic Technology Program has access to program faculty during scheduled office hours to serve as an academic advisor in addition to the student counseling and advising center.

All RAD courses must be taken in the sequence found under [Required Core Courses](#).

The student is responsible for all recorded documentation, verifying all program requirements are met, and maintaining and updating current phone and address via My Pima Profile.

The student assumes the ultimate responsibility for meeting graduation requirements.

## **II. COMMUNICATION CHANNELS**

### **A. RADIOLOGIC TECHNOLOGY PROGRAM OFFICES AND PHONE NUMBERS**

Allied Health Program Secretary: 206-6916  
Program Director: 206-3104

### **B. VOICE MAIL**

In order to decrease the number of calls to the Allied Health office and to expedite communication, students are encouraged to directly dial the faculty and staff's voicemail. All radiologic technology faculty have voicemail. The following is a list of the faculty and staff with their voicemail numbers.

<b><u>Instructor</u></b>	<b><u>Voice Mail</u></b>	<b><u>E-Mail</u></b>
Lynn Cushing	206-3104	lcushing@pima.edu
Amparo Bayless	206-3105	abayless@pima.edu
Robert Dickens	206-3108	rdickens@pima.edu

RAD class schedule can be viewed at:

<https://www.pima.edu/academics-programs/degrees-certificates/health-sciences/radiologic-technology/index.html>

## **III. RULES & CODE OF ETHICS FOR RADIOLOGIC TECHNOLOGIST LICENSURE**

The Program faculty assumes the responsibility for making available to applicants of the Radiologic Technology Program the following information regarding legal limitations for licensure:

The ARRT and ADHS may deny licensure if the applicant commits an act of unprofessional conduct. Two forms of documentation to verify proof of citizenship must be provided upon application to the ADHS.

### **A. ARRT STANDARDS of ETHICS**

<https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/eac1b19c-a45a-4e65-917b-922115ff2c15/arrt-standards-of-ethics.pdf>

The Rules of Ethics form the second part of the Standards of Ethics. They are mandatory standards of minimally acceptable professional conduct for all present Registered Technologists, Registered Radiologic Assistants, and Candidates. Certification is a method of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates and registrations issued by ARRT, it is essential that Registered Technologists and Candidates act consistently with these Rules of Ethics. These Rules of Ethics are intended to promote the protection, safety, and comfort of patients. The Rules of Ethics are enforceable. Registered Technologists, Registered Radiologic Assistants, and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain: reinstatement of certification or registration as issued by ARRT; employment in radiologic technology; or a state permit, license, or registration certificate to practice radiologic technology. This includes

altering in any respect any document issued by the ARRT or any state or federal agency, or by indicating in writing certification or registration with the ARRT when that is not the case.

2. Subverting or attempting to subvert ARRT's examination process. Conduct that subverts or attempts to subvert ARRT's examination process includes, but is not limited to:
  - a. Conduct that violates the security of ARRT examination materials, such as removing or attempting to remove examination materials from an examination room, or having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination of ARRT; or disclosing information concerning any portion of a future, current, or previously administered examination of ARRT; or disclosing what purports to be, or under all circumstances is likely to be understood by the recipient as, any portion of or "inside" information concerning any portion of a future, current, or previously administered examination of ARRT.
  - b. Conduct that in any way compromises ordinary standards of test administration, such as communicating with another Candidate during administration of the examination, copying another Candidate's answers, permitting another Candidate to copy one's answers, or possessing unauthorized materials; OR Impersonating a Candidate or permitting an impersonator to take the examination on one's own behalf.
3. Convictions, criminal proceedings, or military court-martials as described below:
  - a. Conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations must be reported. Offenses that occurred while a juvenile and that are processed through the juvenile court system are not required to be reported to ARRT.
  - b. Criminal proceeding where a finding or verdict of guilt is made or returned, but the adjudication of guilt is withheld, deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters a plea of guilty or nolo contendere (no contest); [Interim] or where the individual enters into a pre-trial diversion activity.
  - c. Military court-martials that involve substance abuse, any sex-related infractions, or patient-related infractions.
4. Failure to report to the ARRT that:
  - a. Charges regarding the person's permit, license, or registration certificate to practice radiologic technology or any other medical or allied health profession are pending or have been resolved adversely to the individual in any state, territory, or country (including, but not limited to, imposed conditions, probation, suspension, or revocation); **OR** That the individual has been refused a permit, license, or registration certificate to practice radiologic technology or any other medical or allied health profession by another state, territory, or country.
5. Failure or inability to perform radiologic technology with reasonable skill and safety.
6. Engaging in unprofessional conduct, including, but not limited to:
  - a. A departure from or failure to conform to applicable federal, state, or local governmental rules regarding radiologic technology practice; or, if no such rule exists, to the minimal standards of acceptable and prevailing radiologic technology practice.
  - b. Any radiologic technology practice that may create unnecessary danger to a patient's life, health, or safety; **OR** Any practice that is contrary to the ethical conduct appropriate to the profession

that results in the termination from employment. Actual injury to a patient or the public need not be established under this clause.

7. Delegating or accepting the delegation of a radiologic technology function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not be established under this clause.
8. Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material; or as a result of any mental or physical condition.
9. Adjudication as mentally incompetent, mentally ill, a chemically dependent person, or a person dangerous to the public, by a court of competent jurisdiction.
10. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm the public; or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established under this clause.
11. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to any unwanted sexual behavior, verbal or otherwise, that results in the termination of employment. This rule does not apply to pre-existing consensual relationships.
12. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law.
13. Knowingly engaging or assisting any person to engage in, or otherwise participating in, abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws.
14. Improper management of patient records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing, or permitting anyone to make false, deceptive, or misleading entry in any patient record.
15. Knowingly aiding, assisting, advising, or allowing a person without a current and appropriate state permit, license, or registration certificate or a current certificate of registration with ARRT to engage in the practice of radiologic technology, in a jurisdiction which requires a person to have such a current and appropriate state permit, license, or registration certificate or a current and appropriate registration of certification with ARRT in order to practice radiologic technology in such jurisdiction.
16. Violating a rule adopted by any state board with competent jurisdiction, an order of such board, or state or federal law relating to the practice of radiologic technology, or any other medical or allied health professions, or a state or federal narcotic or controlled- substance law.
17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.
18. Practicing outside the scope of practice authorized by the individual's current state permit, license, or registration certificate, or the individual's current certificate of registration with ARRT.



19. Making a false statement or knowingly providing false information to ARRT or failing to cooperate with any investigation by ARRT or the Ethics Committee.
20. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding the individual's education, training, credentials, experience, or qualifications, or the status of the individual's state permit, license, or registration certificate in radiologic technology or certificate of registration with ARRT.
21. Knowing of a violation or a probable violation of any Rule of Ethics by any Registered Technologist, Registered Radiologist Assistant, or Candidate and failing to promptly report in writing the same to the ARRT.
22. Failing to immediately report to his or her supervisor information concerning an error made in connection with imaging, treating, or caring for a patient. For purposes of this rule, errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper (commission). Errors also include behavior that is negligent or should have occurred in connection with a patient's care but did not (omission). The duty to report under this rule exists whether or not the patient suffered any injury.
23. Subverting, attempting to subvert, or aiding others to subvert or attempting to subvert ARRT's Continuing Education (CE) Requirements for Renewal of Registration. Conduct that subverts or attempts to subvert ARRT's Continuing Education Requirements includes, but is not limited to:
  - a. Providing false, inaccurate, altered, or deceptive information related to CE activities to ARRT or an ARRT-recognized CE record keeper.
  - b. Assisting others to provide false, inaccurate, altered, or deceptive information related to CE activities to ARRT or an ARRT-recognized CE record keeper.
  - c. Conduct that results or could result in a false or deceptive report of CE completion; or (iv) conduct that in any way compromises the integrity of the CE Requirements such as sharing answers to the post-tests of CE self-learning activities, providing or using false certificates of participation, or verifying CE credits that were not earned.

American Registry of Radiologic Technologists®  
1255 Northland Drive  
St. Paul, MN 55120  
(651) 687-0048, ext. 8580  
[www.arrt.org](http://www.arrt.org)

## **B. ASRT CODE OF ETHICS**

### **Preamble**

Ethical professional conduct is expected of every member of the American Society of Radiologic Technologists and every individual registered by the American Registry of Radiologic Technologists. As a guide, the ASRT and the ARRT have issued a code of ethics for their members and registrants. By following the principles embodied in this code, radiologic technologists will protect the integrity of the profession and enhance the delivery of patient care. Adherence to the code of ethics is only one component of each radiologic technologist's obligation to advance the values and standards of their profession. Technologists also should take advantage of activities that provide opportunities for personal growth while enhancing their competence as caregivers. These activities may include participating in research projects, volunteering in the community, sharing knowledge with colleagues through professional meetings and conferences, serving as an advocate for the profession on legislative issues, and participating in other professional development activities.

By exhibiting high standards of ethics and pursuing professional development opportunities, radiologic technologists will demonstrate their commitment to quality patient care.

### **CODE OF ETHICS**

1. The radiologic technologist professionally conducts himself or herself, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The radiologic technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination based on sex, race, creed, religion, or socio-economic status.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts uses equipment and accessories consistent with the purpose 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 health care 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.

### **C. STANDARDS OF PROFESSIONAL CODE OF ETHICS**

The code of ethics for each Health-Related Professional identifies the fundamental moral and ethical values necessary in clinical practice. This code serves as the basis for evaluations of the personal qualities the student is expected to develop throughout the course of study.

Radiologic Technology students are expected to adhere to the following standards of professional conduct as an integral aspect of professional socialization.

**Accountability** - Answering for one's action to self, the patient, the profession and the college.

**Ethical** - Adhering to the Radiologic Technologist's Code of Ethics

**Legal** - Operating with the standards of care related to the radiology student role.

**Honesty** - Practicing fairness and truth in conduct and truthfulness.

**Dependability** - Being trustworthy and reliable.

**Respect** - Treating others and self with consideration and courtesy.

**Responsibility** - Performing duties associated with the radiologic technologist's role, and scope of responsibility.

**Confidentiality** - Respecting the privacy of patients by respecting privileged information.

**Punctuality** - Arriving on time for all classroom and clinical assignments.

**Professional Appearance** - Adhering to established dress code at all Pima College activities.

#### **IV. JRCERT AND PCC CEC SCHEULE / ATTENDANCE / EXAM RESTRICTIONS**

##### **A. ATTENDANCE/TARDINESS**

Attendance at each clinical assignment is required.

The clinical assignment is the responsibility of the faculty. Assignment modification will be allowed only when needed for the student's achievement of competencies. Students cannot modify their assigned times or schedules without the permission of the faculty and the CEC clinical instructor.

Clinical assignments are Monday through Sunday, with evening and weekend assignments as some Clinical Education Centers require.

Absences can be made up on day or evening shifts, Monday through Sunday, as long as they stay in compliance with the JRCERT assignment requirements. If there are more than 16 hours of absence, the student is required to notify the program clinical coordinator and complete the CEC make-up hours form with the CEC instructor's approval. Students may not change their day and/or time schedules without the permission of a CEC instructor. (See Section B: JRCERT CEC SCHEDULE POLCIY.)

Students are not permitted to work more than 10 hours per shift. The total required days/hours for each semester is stated in the clinical education course objectives. (See section B for JRCERT's definition of traditional assignment)

The clinical instructor or a designee is required to maintain the attendance sheet at each CEC. Clinical instructors should designate absenteeism with the initial A on the attendance sheet under the date in place of the number of hours. The attendance sheet must be kept up-to-date and posted for review and verification by the program faculty and appropriate technical staff at the Clinical Education Center.

Students must contact the clinical instructor and assigned faculty if they are going to be late or absent from the clinical or classroom assignment. Failure to contact the Clinical Instructor when late or absent will result in the student being dismissed from the program. Three unexcused absences from lecture or lab will result in the student being dismissed from the program.

Any absence that reduces the total required days must be made up with the approval of the clinical instructor. Absences of 16 hrs. or more require the student to notify the assigned faculty and meet to discuss a plan of action. Students must keep track of all nontraditional hours using the semester attendance sheet and the calculation form below. Each semester the faculty performing the written evaluation will verify student records. Orientation to class, college labs, and clinical assignments are critical to your ability to perform. Orientation

to the CEC will vary depending on the CEC policy. Orientation information and documents will be provided to students prior to the student's start date. Absence from any of these orientations may necessitate an instructor-initiated withdrawal from the course. Punctual attendance at all RAD classes, college assignments, clinical assignments, and community observational experiences—is required.

A request for a leave of absence during clinical semesters must be submitted in writing to the program director for consideration.

## **B. JRCERT CEC SCHEDULE POLICY**

JRCERT policy requires:

1. Clinical time cannot exceed 10 hours a day
2. A student-to-qualified staff ratio of 1:1 must always be maintained.
3. Students must be allowed to complete clinical competencies during these assignments.
4. Utilization of clinical assignments must be equitably applied to enrolled students.
5. Repeating radiographs must be performed under the direct supervision of a certified technologist.
6. The timing of assignments must be correlated with the didactic curriculum.
7. Program total capacity cannot be increased using evening and/or weekend assignments.

## **ADVANCED MODALITY ASSIGNMENTS**

The Program will facilitate advanced modalities assignments in the last semester if clinical hours and required exam competencies have been completed. The rotations will be determined by clinical center availability and additional fees may be incurred by the student to the CEC.

All students, male and female, will be offered the opportunity to participate in mammography clinical rotations if the above criteria is completed. The program will make every effort to place a male student in a mammography clinical rotation if requested; however, the program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to female students. Male students are advised that placement in a mammography rotation is not guaranteed and is subject to the availability of a clinical setting that allows males to participate in mammographic imaging procedures. The program will not deny female students the opportunity to participate in mammography rotations if clinical settings are not available to provide the same opportunity to male students. Advanced Modality assignments/observations can be performed at the CEC when the diagnostic area is slow, and if approved by the CI and department supervisor.

Advanced modality observation assignment is afforded to those students who have completed the required number of clinical competencies and have up to date attendance and are in good standing academically and clinically.

### **C. CLINICAL NOTEBOOK**

The clinical notebook must be kept in a secure place at the clinical site and must be maintained by the student. The College Faculty will review the workbook for completeness and organization regularly. The clinical workbook will be transferred to the second clinical site and collected at the end of the program for storage.

JRCERT, the CEC must assure the security and confidentiality of students' records, instructional materials, and other appropriate program materials. The clinical notebook should be kept at the CEC in a secure area. This is the responsibility of the CEC instructors and students. The student is responsible for returning the notebook and ICN badge to the college within a week of withdrawing or prior to graduation.

### **C. RELIGIOUS HOLIDAYS**

The student must notify the instructor of a conflict between a scheduled class and an observable holiday of their religious preference. At least one week prior to the holiday, the student shall submit to their instructor(s) a written statement that contains both the date of the holiday and the reason why a class absence is requested. An alternate learning activity may be assigned based on the individual learning needs of the student.

### **D. BEREAVEMENT POLICY**

Students will be allowed 5 days for immediate family bereavement. Immediate family includes spouse, child, father, mother, sister, brother, and grandparents. The makeup of all didactic instruction and tests is the student's responsibility.

### **E. PIMA COMMUNITY COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM CHEMICAL IMPAIRMENT POLICY**

Pima Community College and the Radiologic Technology Program require that students provide safe, effective, and supportive client care. To fulfill this purpose, it is the policy of Pima Community College that students are not chemically impaired during participation in **any** part of their college program, including classroom, laboratory, and clinical settings. The student is tested upon entry into the program in the summer and then at the beginning of their second year. The results must be negative for the student to continue in the program. The clinical education centers may have institutional random drug testing policies that would include students assigned to the facility.

Abuse Prevention and Control Act of 1970, 21 U.S. C. § 812), prescribed medications, inhalants, or synthetic designer drugs. A student is under the influence if they are affected by the use of alcohol, drugs, or medication, and the use may adversely affect the student's performance in the classroom, laboratory, or clinical setting. Abuse of substances includes episodic misuse or chronic use that has produced psychological and/or physical symptomology. Marijuana use for medical reasons is not allowed.

A chemically impaired student is identified by things such as, but not limited to, the perceived odor of alcohol, drugs or medication, slurred or rapid speech, unsteady or staggering gait, dilated or pinpoint pupils, blood-shot eyes, fine motor tremors, difficulty in calculation, inability to follow directions, confusion, nausea, vomiting or sweating. If faculty suspect that a student is chemically impaired while participating in any part of the student's college program, the faculty will take the following steps:

1. Remove the student from the classroom, laboratory, or clinical setting.
2. Immediately consult with another faculty or agency supervisor/designee for verification of reasonable suspicions. The verification will be conducted in a confidential and respectful manner.

3. If the second person confirms a reasonable suspicion of chemical impairment, immediately inform the student as to why the student is being removed from the classroom, laboratory or clinical setting.
4. Ask the student to consent to a drug/alcohol screen.
  - a. If the student consents, have the student sign a Student Disclosure Form, Consent to Transport Form, and a Release and Consent Form, consenting to the screen and transportation. Make photocopies of all forms.
  - b. Call the PCC Police (206-2700) to perform the required testing or transport the student to the laboratory for testing.
  - c. Notify facility security.
  - d. DO NOT allow students to leave a faculty member's presence or ingest any substances until the screening procedure is complete.

**G.5 If the student refuses screening:**

- a. Remove the student from patient care or from the academic setting.
  - b. The faculty will inform the Dean of and of the circumstances. The Campus Police will be notified for transportation needs.
  - c. The student will be required to make an appointment with the Dean within 24 hours.
  - d. Dismissal from the program will be the consequence for refusal to participate in testing. If a student refuses transportation home by Campus Police, document with a witness.
6. Inform the Dean of and let the Dean know of the situation and that a student is being tested for chemical impairment for cause or that the student refused screening. Documentation of the incident will be forwarded to the Dean, and an appointment made for the student to meet with the Dean on the next working day (Monday-Friday).
  7. Have the student call family, friends, Uber/Lyft, or a cab company to arrange transportation home after the screening.
  8. If a student is unwilling or unable to arrange transportation home, Campus Police may be used for their safe transportation.
  9. The student will **not** return to the classroom, laboratory, or clinical setting until the test results are available and the student's status in the program is determined. The Dean of and will consider the screening results, or the student's refusal to consent to screening (if applicable) in determining the student's status in the program.

**H. Confidentiality**

All communications received by Pima Community College relevant to drug/alcohol screening conducted pursuant to this Chemical Impairment Policy will be treated as confidential. Such communications will not be disclosed, except:

1. To the tested student or any other person designated in writing by the student.
2. To individuals designated by the College to receive and evaluate test results or hear the student's explanation.
3. If the student is a Certified Assistant or Licensed Practical Nurse, notification of positive screening results will be sent to the Arizona State Board of or other jurisdiction where the student is registered, certified, or licensed (ARS 32-1601, 1602 et seq., Arizona Administrative Code R4-19-403).
4. In a proceeding related to an action taken by the College or a student arising out of this Chemical Impairment Policy.
5. To an arbitrator or mediator, or a court or governmental agency as authorized by state or federal law.

The tested student has a right to access the written screening results that pertain to that individual, subject to the maintenance of confidentiality for other individuals.

#### **I. Positive Drug/Alcohol Screens**

1. All positive results will be reviewed by the college and the Allied Health Division Dean.
2. If the results indicate the presence of illegal drug(s), a positive blood alcohol concentration or the presence of prescription medication(s) of a quality or quantity not disclosed in the Student Disclosure Form (a positive screen) or if the student refused screening, the student will be given an opportunity to explain the screening results or refusal to submit to screening.
3. The student will be withdrawn from the program for one year in the event of a positive screen.
4. Permanent dismissal from the program will be warranted for refusal to submit to screening without adequate explanation.

#### **J. Re-Entry of a Radiologic Technology Program Student after a Positive Drug/Alcohol Screen**

A student withdrawn from the Radiologic Technology Program may re-enter after the withdrawal period has expired (which is one year), according to the following guidelines:

1. Follow the Re-Entry Policy for the Radiologic Technology Program. Re-entry is based upon space availability.
2. Provide satisfactory evidence of rehabilitation related to the student's prior chemical impairment. The Allied Health Division Dean will determine successful rehabilitation for re-entry. Evidence of rehabilitation may include any of the following:
  - a. Documentation of a completed rehabilitation or substance abuse treatment program.
  - b. Proof of regular attendance in a 12-step Anonymous Program or similar therapeutic program.
  - c. Evidence of after-care attendance upon completion of a rehabilitation or substance abuse treatment program.

3. A letter from the treatment facility and/or therapist stating the student would be able to function effectively and provide safe and therapeutic care for clients in a clinical setting.
4. Students requesting readmission must have a repeat screening for drugs and/or alcohol immediately before readmission.
5. Students requesting readmission must agree to submit to random alcohol/drug screening, at student expense, for one year following readmission to the Radiologic Technology Program. If a student applying for re-entry to the Radiologic Technology Program under this Policy: 1) has a positive result on the screening immediately before readmission, 2) has a positive result on a random screen, or 3) refuses to submit to random drug screening or screening immediately before readmission, the student will be permanently dismissed from the radiology program.

#### **K. Negative Drug/Alcohol Screen After Being Suspected of Chemical Impairment**

If the drug/alcohol screen is negative for the presence of illegal drug(s), blood alcohol, or the presence of prescription medication(s) of quality or quantity not disclosed in the Student Disclosure Form, the student will meet with the Dean of Critical Care within 24 hours to discuss the circumstances surrounding the suspicion of chemical impairment.

1. If the indicator was the odor of alcohol, the student may be required to discontinue the use of whatever may have caused the alcohol-like odor before being allowed to return to the classroom, laboratory, or clinical setting.
2. If the indicator was behavioral, consideration must be given to the symptoms. A medical referral for evaluation may be indicated.
3. The Dean of Critical Care will decide regarding the student returning to the classroom, laboratory, or clinical setting based on all information available to them at this meeting.

#### **L. Appeal Statement**

The student has the right to participate in an Appeal Process as outlined in the Student Code of Conduct Complaint Procedure.

### **V. HEALTH POLICIES/INSURANCE**

#### **A. GENERAL POLICIES**

1. All students must meet health requirements prior to clinical experiences.
2. In circumstances of student illness, injury, or other health limitations, the student must obtain an appropriate release to return to work and the education center.
3. If illness occurs during clinical assignment, the student should inform the instructor and be excused from clinical.

#### **B. PERSONAL HEALTH AND CLINICAL ASSIGNMENT REQUIREMENTS Immunizations and CPR**

The student needs to understand that there are health risks involved in the pursuit of a career in Radiologic Technology. (See *Health Risk-Statement of Understanding* in Appendix B.)



Prior to: 1) entry into the radiologic program, and 2) entry into all health facilities for clinical laboratories, the student must update, keep up current, and provide the Radiology Program with the following documentation:

- Signed Immunization and Health Declaration Form. (Copy for master file and one in the clinical notebook.)
- Current American Heart Association (AHA) CPR for health care providers (adult, child, infant and AED) certification. (Copy for master file and one in the clinical notebook.) Only a valid card from the AHA will be accepted. **Online CPR courses are not accepted.**

The Radiologic Technology Program follows the Pima County Health Program, as well as the individual health facility guidelines regarding Tuberculin screening.

Since some health facilities may have guidelines or policies different than the Health-Related Profession Program policies, the student will be notified of any additional requirements before entering the health facilities for assigned clinical assignment experiences.

- Students may request a medical or religious exemption for vaccinations through the college. The request must be made in writing to the Program Director, who will direct the student on how to complete the process. Declination requests are reviewed by a college Vaccination Declination Committee composed of representatives from the health professions programs at PCC. All forms must be fully completed and submitted in a timely manner and approved prior to the clinical placement process at the start of the first semester in the Program.
- The Program does not have control over the reasonable safety measures or requirements that clinical sites may adopt for unvaccinated individuals and cannot guarantee that any clinical site will permit unvaccinated student rotations, even if the student has a medical or religious exemption. This may impact the ability of the student to meet the clinical component required to complete the Program.
- ✓ **Negative PPD Tuberculosis:** Negative initial two-step skin test (a five 5 minimum and 21-day maximum between the first and second skin test) OR either a QuantiFERON Gold or a T-SPOT.TB blood test
- If positive results provide the following:
  - ✓ Documentation of a clear Chest X-ray (done after the date of positive PPD and within the last 5 years) AND
  - ✓ Completed 2-page TB form (form must indicate clear Chest X-ray results, date of positive PPD, and MUST be completed, signed, and dated by a healthcare provider.) The form is available in the RAD handbook.
- Renewal must be done yearly before the expiration date
- Upon renewal, one of the following is required:
  - ✓ 1-Step skin test OR
  - ✓ QuantiFERON Gold blood test OR
  - ✓ T-SPOT.TB blood test
  - ✓ If past positive results, the TB Questionnaire MUST be completed, signed, and dated by a healthcare provider. The form is available in the RAD handbook.
- Documentation of TDaP (tetanus/diphtheria/pertussis) in the front of the clinical notebook.

- Documentation of Varicella /chicken pox immunization/vaccine x 2 (or positive serology results to this disease; See Health Declaration Form) in the front of the clinical notebook.
- Documentation of measles, mumps, and rubella immunization (MMR) x 2 (or positive serology results to these diseases) in the front of the clinical notebook.
- Documentation of hepatitis B immunization (series of three injections) with serological results.
- Influenza vaccination, one injection within the last year that does not expire until after the last day of the current semester.
- It is the student's responsibility to provide private health insurance and current **American Heart Association** CPR for healthcare provider's documentation and health declaration forms in the front of their clinical notebook on the first day of class each semester.
- A current copy of student fingerprint card from the Arizona Department of Public Safety is submitted to the lead faculty prior to entering the program.
- Verification of health insurance by an insurance card. Students must provide a **current** personal health insurance card. Students will be asked to sign a form verifying and agreeing to maintain personal health insurance while in the program. Discount or sliding scale fee cards are not accepted.
- Signed copy of Student Code of Conduct

#### **C. PREGNANCY POLICY**

(See *Pregnancy Policy* form in Appendix B.)

#### **D. NRCP GUIDELINES FOR PREGNANCY**

The National Council for Radiation Protection report #39 recommends that the fetus be limited to not more than 0.5 rem during the period of pregnancy. Aprons worn during pregnancy must contain 1mm Pb at fetal level.

#### **E. INFECTION CONTROL POLICY**

(See *Standard Precautions* in Appendix B.)

#### **F. STUDENT HEALTH INSURANCE**

Students must have **current** health insurance coverage and will be required to sign and verify coverage. Documentation of current health care coverage must be placed in the front of the clinical notebook. NO discount insurance card is accepted. (See *Verification of Personal Health Insurance* form in Appendix B.)

### **VI. CLASSROOM/COLLEGE ASSIGNMENT/CLINICAL ASSIGNMENT**

#### **A. METHODS OF INSTRUCTION**

### **Classroom**

- Simulations
- PowerPoint presentations
- Lectures
- Printed handouts
- Guest speakers
- Group discussion
- Critical thinking exercises/Computer related assignments
- Self-paced learning, online activities and research
- Internet assignments
- Individual written and oral presentations
- My Pima Assignments
- Portfolios

### **LAB Assignment**

- Simulations
- Role playing
- Small group discussion
- Critical thinking exercises
- Image critique
- Practicum experiences

### **Clinical Assignment/Assignments**

- Small group discussion
- Shadowing/Observation
- Skills competencies
- Image Evaluation
- Verbal evaluations with faculty and clinical instructor
- Direct and indirect supervision during radiographic examinations.
- Selected clinical experiences
- Student, CI faculty evaluation conferences

## **B. REPEAT EXAMINATIONS**

In support of professional responsibility for the provision of quality patient care and radiation safety:

JRCERT STANDARD FOUR Objective 4.6, "Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images. The technologist assures safety; proper educational practices must be physically present and approve procedure."

**To monitor the repeat image policy the student must complete the form for all images repeated. The technologist's signature is required. This form will stay in the CEC notebook and will be reviewed by the faculty regularly. (See form in Appendix)**

## **C. ADMINISTRATION OF PHARMACOLOGIC AGENTS: INTRAVENOUS AND ORAL CONTRAST MEDIA**

The goal is to ensure the highest quality of patient care and safety while providing maximum learning experience. Students are not allowed to start intravenous lines or inject contrast media.

The level of required supervision of contrast media preparation and assisting in the administration in the clinical sites varies according to the course level of the student, and the Clinical Education Center policies.

1. Students will be supervised during the preparation of injectable contrast media.
2. The student will not start I.V.s or administer I.V. contrast media.

#### **D. ILLNESS/ACCIDENTS AND/OR INJURIES IN THE CLINICAL ASSIGNMENT**

Students must use good judgment when illness occurs. In order to protect patients, staff, and peers, students with fever and/or symptoms of infectious disease must NOT report to the clinical assignment setting. If in doubt, the student should consult with the clinical instructor prior to the start of the clinical day. The clinical instructor may dismiss a student from the clinical assignment setting if in his/her judgment the student poses a risk of infecting others. Clinical assignments, absence hours will be recorded for students dismissed from clinical assignment because of illness. When a student experiences a serious illness, injury, or pregnancy that may hinder his/her ability to perform in the clinical setting, the Radiologic Program reserves the right to require a physician's statement authorizing that the student can safely continue to give patient care at required competency levels. Each case will be considered on an individual basis. Specific release guidelines may be required in the physician's statement for situations involving back injury, surgery, communicable diseases, etc. The following guidelines will outline the process to be followed should an injury occur in the clinical assignment setting:

1. A student who is injured (this includes exposures to body fluids) in the clinical assignment should immediately notify his/her clinical instructor and program director.
2. A written summary of the occurrence and care rendered will be completed on the appropriate CEC form if the incident occurred at the CEC. If an incident occurs at Pima Community College a Student Accident Report Form obtained from the Dean's office or campus police will be completed and submitted to Campus Police.
3. If the injury is life threatening the student will be seen in the Emergency Room of the facility or by calling 911.
4. If the injury is NOT life-threatening, the student shall contact their personal physician for immediate care and follow-up.
5. The college and the clinical facility are not responsible for any claims for expenses that result from an action of a student in the clinical site setting.
6. A copy of the summary/incident must be forwarded to the Lead Faculty of Radiologic Technology Program.
7. Any further questions can be answered by the program faculty.

#### **E. CLINICAL INCIDENT REPORTS**

Incident reports are utilized in the clinical site when an error or accident has occurred (e.g., an incident involving a student, patient, staff, visitor, etc). In the event that an accident or error occurs, the student will:

1. Immediately notify the clinical instructor and site supervisor. The physician will then be notified according to hospital protocol.
2. Be responsible for completing both the incident report per facility and the program report found in the RAD Handbook appendix.
3. Forward a copy of the incident report to the Radiologic Technology Associate Degree Program Director.
4. Further discuss the incident with the clinical supervisor and Program director who may assign subsequent documentation that explains:
  - A. The precipitating events that led to the incident.
  - B. How and why the incident occurred.
  - C. How the student intends to avoid this situation in the future.
  - D. The commitment from the student to prevent this or similar incidents from happening.

#### **F. SUPERVISION & RESPONSIBILITIES OF STUDENTS**

Standards for an accredited educational program require documentation and compliance for the following objectives by the **Joint Review Committee on Education in Radiologic Technology (JRCERT)**. (See position description below.)

It is the student's responsibility to follow the clinical education center and PCC Radiologic Technology Program policies and procedures.

1. Students shall not take the responsibility or the place of qualified staff. Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direct supervision of qualified radiographers. All radiographic Images must be reviewed by a qualified radiographer before the patient is dismissed or images sent to PACS. Unlike other exams, Portable exams require direct supervision regardless of competency status.

The parameters of direct supervision are:

- a. A qualified radiographer reviews the request for examination in relation to the student's achievement
- b. A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge
- c. A qualified radiographer is present during the conduct of the examination, and a qualified radiographer reviews and approves the radiographs.
- d. After demonstrating competency, students may perform procedures with indirect supervision.
- e. Indirect supervision is defined as the supervision provided by a qualified radiographer IMMEDIATELY AVAILABLE to assist students regardless of the level of student achievement.
- f. "IMMEDIATELY AVAILABLE" is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use including mobile radiography, emergency room procedures, and procedures performed in surgery.
- g. Students are directly supervised by a qualified radiographer when repeating unsatisfactory radiographs.

#### **G. CLINICAL INSTRUCTOR POSITION DESCRIPTION**

JRCERT Objective 3.8- Documents that the responsibilities of faculty and clinical staff are delineated and performed.

JRCERT Objective 3.9- Evaluates program faculty and clinical instructor performance regularly to assure instructional responsibilities are performed.

JRCERT Objective 4.3- Assures that students employ proper radiation safety practices.

JRCERT Objective 4.4- Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.

JRCERT Objective 4.5- Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.

JRCERT Objective 4.6- Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory radiographs.

JRCERT Objective 4.7- Assures the sponsoring institution's policies safeguard the health and safety of students.

JRCERT Objective 4.8- Assures that students are oriented to clinical education setting policies and procedures in regard to health and safety.

POSITION SUMMARY: In the clinical setting, provides education and supervision for the radiologic technology student, consistent with the established standards of medical care in radiological services. The clinical instructor ensures that the clinical staff understands the clinical competency system, requirements of the student, and supports the educational process, and policies.

## **H. DUTIES AND RESPONSIBILITIES:**

1. Demonstrates knowledge of PCC RAD program goals, clinical objectives, and clinical evaluation systems.
2. Provides students with appropriate and adequate clinical supervision, both direct and indirect supervision in accordance with documented student competencies.
3. Provide students with appropriate and adequate clinical instruction.
4. Performs clinical progress and competency evaluation for each student assigned to their supervision.
5. Exhibits a positive professional attitude toward students and the learning process.
6. Participates in continuing education to improve and maintain competence in evaluation and professional skills.
7. Meets regularly with program faculty to communicate student progress, strengths, and weaknesses.
8. Provides a positive role model for students of the radiologic science profession.

9. Maintains confidentiality in accordance with program policy.
10. Participates in clinical instructors and advisory meetings.
11. Facilitates proper student rotations in the clinical setting to achieve course objectives.
12. Utilizes positive interpersonal communication skills.
13. Maintains competency within the relative discipline.
14. Instrumental in providing students access to written departmental policies/ procedures.
15. Implements or promotes diligent compliance with radiation monitoring procedures.
16. On a regular basis, update the staff technologists on PCC program policies and procedures.
17. Maintains proper release time from staff duties for student-related activities.

#### **I. QUALIFICATIONS**

1. Shall be credentialed in good standing by the respective credentialing agencies ARRT and ADHS.
2. Shall meet the criteria for the position as established by the sponsoring institution and JRCERT.

#### **J. STUDENT CEC NOTEBOOK POLICY**

JRCERT requires that the CEC must assure the security and confidentiality of students' records, instructional materials, and other appropriate program materials. The clinical notebook should be kept at the CEC in a secure area. This is the responsibility of the CEC instructors and students. ICN badge and lead markers should be placed in the clinical notebook at the end of the shift.

#### **K. STUDENT RADIOGRAPHER HOLDING PATIENT/ IMAGE RECEPTOR POLICY**

To ensure the health and safety of the student and to demonstrate compliance with JRCERT Standard Four, Objective 4.3, ensure that students employ proper radiation safety practices. Students enrolled in the Pima Community College Radiologic Technology program may not, at any time, hold or immobilize a patient during a radiographic examination when ionizing radiation is being utilized. Failure to comply with this policy may result in dismissal from the Program.

#### **L. STUDENT TRANSPORTATION POLICY**

Students are responsible for their own transportation to and from clinical sites. Students must be able to attend a clinical assignment at any of the clinical facilities used by the Radiologic Technology Program during any semester. The student's personal convenience cannot be accommodated. Students will be required to sign the Radiologic Technology Program Scheduling Policy. (See form in Appendix A)

Occasionally, it will be necessary to make changes after registration to accommodate the learning needs of all students admitted to the Radiologic Technology Program. The radiologic technology faculty guarantees a clinical assignment to all students admitted, but there is NO guarantee to get assigned to a specific clinical site. It is mandatory that all radiologic technology students have malpractice insurance. The liability malpractice insurance fee is automatically added to your tuition costs for the radiography courses. Therefore, all students MUST have paid fee receipts for the radiography courses to attend any part of the Radiologic Technology Program. If your tuition is not paid, you will not be allowed to attend any radiologic technology class.

#### **M. ELECTRONIC DEVICES (CELL PHONES, PDAS, SMARTPHONES, SMART WATCH, LAPTOP COMPUTERS, ETC.)**

1. Cell phones are not to be used during CEC shifts and must be stored away for use only during breaks in a non-patient/visitor area. Students will not access their wireless devices in the classroom, college laboratory, or any clinical facility unless given permission by the CEC CI or faculty.
2. Text messaging may only be done during breaks, not while students are in the classroom, college laboratory, or clinical laboratory.
3. During class times, laptop computers are to be used to access course materials only. Instructors may require students to turn off all electronic devices, including computers, during class, clinical, or laboratory.
4. Electronic devices will be turned off (NOT put in vibrate mode) during examinations. SMART watches must be removed and put away during an exam.
5. Students identified as accessing their wireless devices in the classroom, college laboratory or any clinical facility will be required to meet with the Program within five business days and may result in dismissal from the program, depending on the circumstances.

#### **VII. DOSIMETRY BADGE POLICY**

1. Dosimetry badge – Must be worn whenever the student is training at the clinical education center. Failure to comply may result in the student being sent home returning with a badge and making up for the lost time. If a badge is lost or misplaced, the student is responsible for notifying the Clinical instructor and the faculty immediately, and a new badge is ordered at the student's expense. Under no circumstances is the student to work around ionizing radiation in the event that the badge is not appropriately worn.
2. The dosimetry badge is to be worn on the neck collar or chest outside of the lead apron at all times. The image badge is to be handed to the faculty in the first week of the new month. Failure to do so will result in delayed or no dosimetry reading.
3. Monthly reports will be posted in the lab for student review. Faculty review monthly reports and investigate readings over 125 (MREM) with the applicable clinical education center and students, with findings documented. (See appendix for form)

#### **VIII. UNIFORM POLICY**

##### **A. UNIFORMS**



The delivery of competent Radiologic care depends in part on personal adjustment and self-discipline to meet ethical and personal appearance standards of the profession. The complete Radiologic Technology student uniform is to be worn at all times when you are representing Pima Community College in the clinical sites. Only the assigned uniform color (burgundy) can be worn. No brightly decorated or other scrub colors will be acceptable. Purchase **three** uniforms for the first fall semester. In the third summer semester, you will need to purchase an **additional two** uniforms.

1. Uniforms are to be clean, well-fitting, non-stained, pressed, and in good repair.  
No cleavage or chest body hair is exposed.  
Any student who is not properly attired may be sent home from a clinical education center.
2. Name Pin - nametag must be properly displayed and worn at all times while attending the CEC. The nametag must have the following information. The nametag must be worn when at the Clinical Centers.  
  
Badge must have:      1<sup>st</sup> Line: CC logo  
                                 2<sup>nd</sup> Line: Radiologic Technology Program Student  
                                 3<sup>rd</sup> Line: Student First Name
3. Shoes - clean, white or black, unadorned shoes with closed toe and heel. White leather athletic shoes may be worn.
4. Undergarments - men and women are to wear appropriate undergarments (bra, panties, jockey or boxer shorts) with uniforms. No visible bikini lines, print, or colored underwear are permitted. Undergarments **MUST** be worn and not be visible.
5. Lab Coats/Scrub Jacket- when approved by the clinical site is acceptable.

## **B. GENERAL APPEARANCE**

1. Appropriate hygiene measures should be followed. These measures include daily bathing/showering and the use of an effective deodorant or antiperspirant. Absence of body odor is required. Odors that may be offensive to patients are not allowed. This includes but is not limited to cologne, perfume, fragrant hairspray, and smoke. Breath mints or breath fresheners should be used after smoking and as needed.
2. Makeup should be minimal and a natural look suitable for daytime use.
3. Hair should be clean, restrained, and controlled so it is out of the face and does not hang forward. Hair accessories should match the color of the hair and be appropriate for a professional look.
4. Men should be clean-shaven neatly trimmed mustaches (even with the upper lip), beards (no whiskers on the neck) and/or sideburns (no longer than the ear lobes and non-flared).
5. Nails must be clean and well-manicured. No acrylic nails. If polish is worn, it must be clear. To ensure patient safety and practice infection control nails should not exceed the tip of the finger no longer than ¼ inch.

6. Jewelry should be minimal. Metal wedding rings without stones may be worn. No bracelets or necklaces may be worn. One pair of small stud earrings may be worn. A professional watch may be required.
7. No gum chewing is allowed during clinical education assignments.
8. No cellular telephones are to be used in the CEC.
9. Students who are not in compliance with the dress code: For the first offense, the student will be dismissed from clinical for the day and the absence will need to be made up. The student is required to sign a noncompliance probation contract. For the second offense, the student will be dismissed from clinical for the day and the absence will need to be made up. For the third offense, the student will be dismissed from the program.

## **IX. TESTING and GRADING POLICIES**

### **A. TESTING POLICIES**

1. No credit is given for incorrect or incomplete marks, more than one mark for a single question, or blanks, or accidental incorrect answers on electronic tests.
2. Tests will not be reviewed until all students have taken the test.
3. If a hardship (e.g., surgery, serious illness, accident, or death in the family) prevents a student from taking a test, the student may petition the lecture instructor(s) for approval to take a makeup examination. The lecture instructor(s) will determine whether or not the student is eligible for a make-up test and when the test is to be scheduled. The instructor may request documentation of the student's circumstances prior to approving such a request.

In the event of an emergency, the student may petition the lecture instructor(s) for approval to take an examination before the scheduled date. The student is to submit the request in writing, explaining the reason for the request. The lecture instructor(s) will determine whether or not to grant the request.

4. Testing Center use is allowed under the following guidelines:

A makeup test for sickness, bereavement, or emergency situations only. Testing time is the same as the time allowed in class unless directed by DSR guidelines. Students will sit in assigned seats and may not leave the testing center during the testing period.

### **B. GRADING POLICY**

1. The Program is designed so that each semester RAD courses are done in sequence, building on the previous content. A minimum grade of "C" must be achieved in all RAD courses in order to advance to the next semester.
2. If a student fails (less than 75%) the first two didactic tests in any RAD course, they will be considered unsafe or unprepared to continue in the clinical course as well and therefore will be removed from the clinical component.

3. If a student fails any of the RAD courses in the first summer or first fall semester of the Program, including co-requisite courses, they must reapply to the program and get accepted, and repeat all of the RAD courses from the beginning. Students can only repeat a course once.
4. If a student needs to withdraw from any RAD course for any reason (academic failure or personal) prior to the end of the semester, the student will be withdrawn from all RAD courses in that semester.

Each student needs to be familiar with the grading policy.

Successful completion of each RAD course requires a passing grade in classroom theory, college assignment, and clinical Labs.

Please refer to the course syllabus for the specific grading scale for **RAD 185**.

**Grading Scale:** A 92-100

B 84-91

C 75-83

D 66-74 Failure

I Incomplete

1. Incomplete Grade (I)

Components for an incomplete grade will consist of all of the following:

- a. Student must be achieving satisfactory work in the course in which he/she is currently enrolled.
- b. An Incomplete grade (I) may be considered for the lecture or clinical course following the PCC I grade procedure.

### **RAD Program Re-Entry Policy**

A student's withdrawal from the Program for non-cognitive reasons will be considered on an individual basis. Request for re-entry must be completed and submitted to the program director within ten (10) business days of the student's withdrawal. Requests for re-entry to the RAD Program are carefully considered. Students may be allowed to re-enter only if there is evidence that the conditions that caused the student's withdrawal have been resolved and there is clinical space available. Only 1 RAD semester can be repeated. Re-entry into the Program must be the following year. If students choose to sit out for more than one year, they must reapply online, be re-admitted, and repeat all the RAD courses from the beginning.

### **C. CLINICAL ASSIGNMENT EVALUATION/GRADING**

Individual course clinical assignments evaluation forms are found in each course syllabus and on D2L. Evaluation forms will be found in the RAD Handbook

1. If a student fails (less than 75%) the first two didactic tests in any RAD course, they will be considered unsafe or unprepared to continue in the clinical course as well and therefore will be removed from the clinical component.

2. Mid and Final semester student progress evaluation will involve student self-assessment with review and feedback from faculty, clinical instructor, and staff. The student will complete a Clinical Progress self-evaluation and submit it to the Clinical Instructor one week before the scheduled due date. The CI will gather input from staff and management to assist faculty in the completion of the evaluation. A clinical instructor can review the evaluation before the assigned date if approved by the assigned faculty. The college faculty is ultimately responsible for the student's final grade.
3. Attendance at all classes and clinical sessions is required to meet the objectives of the courses. The student must complete all clinical education objectives and competencies and satisfactorily fulfill the requirements in order to receive a grade of C or higher.
4. 100% of the competency must be completed. If a student does not complete the required number of competencies and re-checks each semester, the student must inform the clinical instructor and college faculty member as to the specifics of the deficiencies. An action plan must then be implemented until the required number of competencies has been completed. Failure to complete the required competencies and hours per semester will be reflected in your written evaluation, which may result in a failing grade.
5. An Incomplete grade (I) may be considered for completion of required semester clinical hours in cases of severe illness or pregnancy. (Unavoidable life event)
6. Missed clinical hours must be made up by the end of the semester.

#### **D. STUDENT OFFICIAL WITHDRAWAL FROM CLASS**

A student may withdraw him/herself from the class by the Student Withdrawal Deadline listed above, and a grade of 'W' will be recorded on the transcript. It is strongly recommended that you speak with faculty and a financial aid staff member before deciding to withdraw. Visit [Drop or Withdrawal](#) to determine how dropping or withdrawing from a class may have a negative impact on your Standards of Academic Progress, financial aid, and/or scholarships. Review the Standards of Academic Progress at [Dropping or Withdrawing and Financial Aid](#) to understand the criteria required for and the consequences of official withdrawals.

#### **E. ACTIONS RELATED TO ACADEMIC OR LABORATORY DEFICIENCIES**

1. Any student who earns less than a C grade on any test, in any course, will be considered to be at academic risk. The student will be referred by the course instructor(s) to the Program Director. A conference may be held for the purpose of clarifying the student's standing in the class and identifying areas where the student needs assistance.
2. Academic dishonesty, such as cheating on exams, knowingly assisting another to cheat, or failure to report observed cheating by other students, plagiarism, or other dishonest activity, will jeopardize continuation in the program. Refer to the Pima Community College Student Handbook Termination Policy.

#### **F. ACTIONS RELATED TO CLINICAL DEFICIENCIES/CONDUCT**

The clinical coordinator/ Program Director reserves the right to remove from the Clinical Education Centers any student who presents a danger to self or others. Failure to abide by PCC Code of Conduct and or RAD policies may result in a student being removed from the RAD program.

The following is a list of reasons that constitute clinical performance deficiencies and may become the basis for dismissal. Refer to the Student Code of Conduct and Unsafe Practice Act Policy for examples of inappropriate conduct. This list is **not intended to be exhaustive**.

1. Failure to achieve a grade of "C" or higher on the written clinical evaluation component of a given radiology course.
2. Failure to immediately report a patient-care error to the clinical instructor and/or responsible radiology personnel. (wrong exam/ wrong patient, markers, exposure to a pregnant patient)
3. Any verbal communication or any written material that is fraudulent, untruthful, and/or dishonest.
4. Lack of adequate theoretical knowledge for application to patient care.
5. Violations of principles of confidentiality.
6. Lack of preparation for clinical assignments.
7. Lack of ability to set priorities, inability to handle stress, lack of judgment, lack of confidence,
8. Any performance that could jeopardize life, impede recovery, or interfere with the maintenance of the patient's current health status. Not preventing or reporting patient injury.
9. Not maintaining current CPR and health immunizations, and private health insurance.
10. Non-compliance with Repeat Exposure Policy
11. Not following the policies and procedures of the Clinical Education Center.
12. No call, no show in the clinical center may result in removal from the course.
13. Unprofessional use of electronic media (phone, computer, social media, texting, etc.)
  - a. Unprofessional comments or sharing of information pertaining to clinical assignments, institutions, co-workers, patients, or colleagues.
14. The student is required to disclose any changes in status related to Department of Safety (DPS) clearance to the Radiologic Technology Program. Failure to self-disclose will result in termination from the program.
15. Entering students with a positive urine drug/alcohol screen are terminated from the program. Students with a positive urine drug/alcohol screen must reapply to the program through the West Campus Admissions office.
  - a. Entering students, including students on the alternate list, failing to test during the date and time documented on the Drug Testing Form, do not meet the requirement for drug testing and will be withdrawn from the Radiologic Technology Program.
  - b. Returning students failing to test during the date and time documented on the Drug Testing Form do not meet the requirement for drug testing and will be immediately withdrawn from all courses for a

period of one year and are subject to the same policy as positive drug/alcohol screens. Please see Section X – Re-entry of a Radiologic Technologist Student after a Positive Drug/Alcohol Screen.

- c. Permanent termination from the Radiology Program will be warranted for refusal to submit to drug/alcohol screening without adequate explanation.
- d. If a student reapplying for re-entry to the Radiologic Technology Program has a positive result on the screening immediately prior to readmission, has a positive result on a random screen, or refuses to submit to random drug/alcohol screening, the student will be permanently terminated from the Radiology Program.

16. Clinical Performance:

- a. All matters relating to clinical performance will be handled initially through the Radiologic Technology Program.
- b. A conference will be held with the student, clinical instructor, coordinator, and Lead faculty. If the student is identified through the Disabled Student Resource (DSR), the DSR specialist can be included in this process.
- c. Based upon the outcome of the conference, written recommendations(s) may include, but are NOT limited to warning, increased supervision, temporary exclusion, probation, or dismissal.
- d. Clinical complaints should be made to the Clinical Instructor and the Clinical Coordinator. If the student feels the complaint is unresolved, then refer to the Program Director.
- e. Due process to students is described in the Student Rights and Responsibilities.

## **X. PIMA COMMUNITY COLLEGE STUDENT SERVICE POLICIES**

### **A. GRADE APPEALS/COMPLAINT PROCEDURE: ACADEMIC AND GRADE REGULATIONS/ STUDENT CODE OF CONDUCT VIOLATIONS**

#### **Academic Ethics Offenses**

Pima Community College provides a safe and stimulating environment for the exchange of knowledge. We encourage reasoned discussion, intellectual honesty, and respect for the rights of all people. The [Student Code of Conduct](#) provides you with information about your responsibilities as a student in regard to appropriate behavior and respect for others in the College community.

[Student Code of Conduct Information](#)

#### **Academic Ethics Violations:**

A student shall not:

- 1. Copy from another student's test/quiz paper or knowingly allow one's own test/quiz paper to be copied.
- 2. Use materials during a test/quiz that were not clearly authorized by the person giving the test/quiz.
- 3. Collaborate with another student during a test/quiz without permission.
- 4. Knowingly use, buy, sell, offer, transport, or solicit any of the contents of a test/quiz.

5. Take a test/quiz for another student or permit another student to take a test/quiz in one's place.
6. Bribe or attempt to bribe another person to obtain a passing grade or a better grade on a test/quiz or for a course.
7. Intentionally misstate facts or events on a graded exercise or assignment in a manner that affects the grade.
8. Engage in plagiarism, which includes representing the work of another person as one's own, including information downloaded from the Internet. The use of another person's words, ideas, or information without proper acknowledgement also constitutes plagiarism.
9. Obtain from or give another student unauthorized assistance on any coursework.
10. Compromise instructional and test/quiz materials by acquiring, using, or providing to others unauthorized instructional and/or testing/quizzing materials.

### **Violations Other Than Academic Ethics Violations**

In Addition to Academic Ethics, students are expected to adhere to other ethics and behavioral codes also found in the Student Code of Conduct. They include, but are not limited to:

- A. Disruption, Assault, and Related Offenses
- B. Tobacco, Alcohol, and Drug Offenses
- C. Offenses Involving College IT Systems (Computers, Networks, and Telephones)
- D. Discrimination, Harassment, and Sexual Offenses
- E. Offenses Involving Weapons
- F. Property and Related Offenses
- G. Offenses Involving the Violation of a Local, State or Federal Law
- H. Offenses Related to Disciplinary Sanctions and Proceedings
- I. Attempted Misconduct and Conspiracy Offenses

### **COMPLAINT PROCESS**

### **SEXUAL HARASSMENT**

### **PCC Emergency Safety and Security Policies**

[Help in Emergencies](#)

### **APPEAL OF ACADEMIC DISQUALIFICATION**

A student who has been academically disqualified must follow established College appeal procedures for reinstatement.

#### **1. REINSTATEMENT**

Students appeal the academic disqualification in accordance with established College appeals procedures. (See the Student Rights and Responsibilities Policy)

## **2. GRADE/APPEALS**

"Students who wish to [Appeal a Grade](#) must do so, in writing to the Department Head/Director of the program, within thirty (30) business days from the end of the course. Grade appeals will be automatically denied if an appeal is received greater than thirty (30) business days from the end of the course. This will result in the conferred grade remaining on the student's transcript and may impact their grade point average (GPA)."

## **B. WITHDRAWAL FROM THE RAD PROGRAM**

### **Student Initiated Withdrawal (W)**

1. Students who withdraws from a radiologic technology course must notify their instructor(s) of their intent before missing the next scheduled class or clinical day.
2. The student is responsible for contacting Admissions/Registration to withdraw. This can be done online or with a student services specialist in the Santa Catalina Building.
3. Students must return their ICN badge to the RAD office within 5 days of withdrawing.
4. Students must return the CEC ID badge to CEC within 24 hours of withdrawing from the program.

## **STUDENT COMPLAINT PROCESS**

1. Student complaints should first be discussed with the instructor
2. If a student cannot speak with the instructor, the complaint should be discussed with the Program Director
3. If the student cannot speak with the Program Director, the complaint should be discussed with the Dean
4. All complaints need to be discussed, with a resolution, promptly
5. The complaint process can be viewed in the [Appeals and Complaint Policy](#) and the [Student Code of Conduct](#)
6. If the student feels the issue has not been resolved by the college, they can follow the steps of the [Complaint Policy](#)

## **XI. RAD PROGRAM MISCELLANEOUS INFORMATION**

### **A. ADVANCED STANDING (Transfer Policy)**

Advanced placement is contingent upon appropriate clinical site availability. It is recommended that the applicant contacts the Program Director to determine if space is available before starting the process detailed below. Applicants must complete the following for consideration into the PCC Radiologic Technology Program.

1. PCC admissions and transfer credit must meet the PCC requirements for the Associate of Applied Science in Radiologic Technology. (Refer to PCC admissions and transcripts policy)
2. Graduates of radiography programs outside the United States must complete a credentials application form and submit it to the Academic Credentials Evaluation Institute Inc. (ACEI). Forms are available from the PCC International Student Services Office. The request for evaluation must include course listings, United States Semester Units of Credit, and United States Grades. ACEI should be directed to send the evaluation to the PCC District Office of Admissions and Records. The applicant must complete a PCC "Request for Transcript Evaluation" form and send it to the PCC District Office of Admissions and Records.



3. The applicant must meet with the PCC Radiologic Technology Program Director and satisfactorily demonstrate in the radiography laboratory, radiographic positioning skills and knowledge of radiographic principles.
4. The applicant must demonstrate satisfactory communication skills in the English language.
5. An opening must exist in one of the clinical education centers that are appropriate for the advanced students' training.
6. The applicant must provide the PCC Radiologic Technology Program Director with course descriptions and, if possible, course syllabi from the previous Program(s) attended.
7. The Program Director has the responsibility to review Radiologic Technology-specific courses being transferred and will make the final decision as to the transfer status of the potential student into the RAD program.
8. Upon approval, the applicant is responsible for purchasing the RAD handbook and completing the required forms. Fingerprinting, drug screening, immunizations, CPR, Health Declaration, and HIPAA must be completed before being admitted to the Program.

The Radiologic Technology Program Director reserves the right to refuse advanced placement admission to any applicant who proves to be incompatible with the goals and objectives of the program.

#### **B. JRCERT ALLEGATIONS OF NON-COMPLIANCE POLICY**

1. Complaints and allegations of non-compliance by the program with JRCERT standards may be communicated directly by students to the JRCERT by calling their office at (312) 704-5300.
2. It is the policy of the Radiologic Technology Program to work with the JRCERT if and when the program is in non-compliance with the JRCERT standards. The program will investigate and, where appropriate, make the revisions necessary to come into compliance. The program is committed to informing the students, clinical centers, and advisory board members of the JRCERT standards.
3. Complaints that point to non-compliance are brought to the Lead faculty's attention. With the Department Chair and the faculty member's involvement, a plan of action is developed and implemented. If the issue is not resolved, the Dean is consulted. Complaints or allegations are documented and addressed by the Lead Faculty.

#### **C. STUDENT EVALUATION OF COURSE, INSTRUCTORS, AND CLINICAL ASSIGNMENT SITES**

Annually, students anonymously complete written course/faculty evaluations. Results are shared with faculty during the annual collegial conference by the Dean of Health-Related Professions. Conferences are performed post-semester grade posting. Student evaluations of CEC sites and CI are performed once a year. Results are

summarized by institutional research and forwarded to the lead faculty. Survey results are discussed with the faculty, dean of HRP, and Advisory members, and distributed during the yearly Advisory meeting. Input from the advisory and clinical instructors is obtained on an ongoing basis, and modifications to the program are implemented as warranted. The Campus president receives the Advisory Committee meeting minutes.

#### **D. RAD LABORATORY POLICY**

1. Visitors are not permitted in RAD labs or the clinical assignment.
2. All labs will be supervised by the assigned faculty. Students will not make exposures without faculty approval and supervision.
3. C-arm and Portable labs will be supervised by faculty with the use of appropriate shielding and radiation monitoring (ICN badges worn).
4. ICN monthly reports will be posted in the labs for review.
5. No open-toe shoes in the lab.

#### **E. PROTECTIVE DEVICES MAINTENANCE**

Lead Aprons are checked annually for defects, with all disposals being handled by the Plants Operations Hazard Material officer. Lead aprons must contain at least .25mm Pb. Aprons worn during pregnancy must contain 1mm Pb at the fetal level.

#### **F. GRADUATION REQUIREMENTS**

Students must pass all coursework and provide documentation of the required clinical competencies and required hours. Verification of completion of the program is required before the student can sit for the national boards and be certified in the state of Arizona; therefore, the student must be responsible for their records and seek advice on an ongoing basis.

The student will be responsible for:

1. Ensuring that all records are correct.
2. Submitting the signed application to the Admissions Office by the deadline date, and (See the college catalog for specific graduation requirement information and dates.)
3. Perform Graduate Degree Check and give a copy to the Program Director and complete the CEC survey.

Graduates are encouraged to participate in the Pima College graduation ceremony.

#### **G. ARRT EXAMINATION**

Electronic applications for the ARRT Examination will be distributed to the second-year students in the spring semester. ARRT and ADHS application processes will be reviewed in RAD 185.

# APPENDIX A



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Put in CEC Notebook**  
**Make 2 copies**

## CLINICAL SITE ORIENTATION

Student Name \_\_\_\_\_ CEC \_\_\_\_\_

The following topics need to be discussed with students assigned to your Clinical Education Center within the first **2 weeks**.

		Students Signature (SIGN CLEAR)	Technologist Signature
1.	<b>General Orientation to the Hospital</b>		
	a. Parking		
	b. Hospital Entrances		
	c. Hospital Layout/ Hospital Map		
	d. Policy for students answering the phone		
2.	<b>Department Orientation</b>		
	a. Radiographic Rooms		
	b. PACS System		
	c. Front Desk System /Radiologist's Offices		
	d. Exam Protocol book		
	e. Storage/Linen cart/cleaning supplies		
	f. Transportation Procedures		
	g. Line of command/chain of authority for dept./		
	h. Technique charts/ Identification needed on each radiograph, Marker Rt /Lt policy		
3.	<b>Department Policy and Procedure manuals</b>		
	a. Department Safety, Fire, OSHA, Quality Assurance, Department Specific Policies		
	b. Set up for Special Radiographic Examinations to include oxygen/BP equipment/suction policies and procedures.		
	c. Incident reports/ Standard Precautions for Disease Prevention (eg. gloves, eyeglasses, hand washing)		
	d. Procedure for responding to a code, (cardiac, Respiratory, Fire, etc.) crash cart location		
4.	<b>Time Accountability—break and lunch assignments</b>		
	a. Make-up-time		
	b. Punctuality		
	c. Attendance		
	d. Absenteeism (who to contact) Plus faculty!		

		Students Signature (SIGN CLEAR)	Technologist Signature
	e. Room Assignments/Breaks/Lunch Assignments. CEC Workbook/Storage Area		
	f. Where the schedule and time sheets will be posted.		
10.	CR and DR System Orientation		
11.	S, DI, DE, REX ranges and target number		
12.	Emergency Room exam protocol/procedures		
13.	RIS System operation and access functions		
15.	Patient ID verification policy and procedure		
	a. Restraints secure/ wheelchairs locked, stretcher side rails up		
	b. Ask women of childbearing age if there's any chance of pregnancy. (What is the radiology department's procedure?)		
	c. Exam history documentation policy		
	d. A radiographer must be present with the student on a repeat examination.		
	e. When in question <b>ASK</b> .		

**This form will be maintained in the student clinical notebook at CEC.  
For review by college faculty.**



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

Put in CEC Notebook

## NOTICE OF UNSAFE OR UNACCEPTABLE PRACTICE ACT

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Clinical Instructor: \_\_\_\_\_ Course: \_\_\_\_\_

Location of  
Occurrence \_\_\_\_\_

This is UPA (#1 DATE \_\_\_\_\_)(#2 DATE \_\_\_\_\_) (#3 DATE \_\_\_\_\_)

(#4 DATE \_\_\_\_\_) (#5 DATE \_\_\_\_\_)

A "UPA" is an action, which potentially or jeopardizes patient safety, or an action that demonstrates poor judgment in areas in which the student has had previous opportunities for learning and may result in exclusion from the clinical area. Unsafe or improper actions will result in a "clinical contract" and may result in withdrawal from the clinical area.

You may have COMMITTED A "UPA" IN THE CATEGORY CHECKED BELOW.

### YOU HAVE FAILED TO PROPERLY:

- \_\_\_\_\_ 1. Warn personnel in proximity when doing a portable X-ray exposure.
- \_\_\_\_\_ 2. Shield gonads of pediatric/childbearing age patients.
- \_\_\_\_\_ 3. Practice radiation protection.
- \_\_\_\_\_ 4. Ascertain if the patient is pregnant
- \_\_\_\_\_ 5. Inquire if the patient has allergies before radiopaque contrast media (ROCM) administration
- \_\_\_\_\_ 6. Identify a patient before beginning a procedure
- \_\_\_\_\_ 7. Practice standard precautions
- \_\_\_\_\_ 8. Elevate the side bed rails of patients who are confused, medicated, or have a loss of consciousness (ALC).
- \_\_\_\_\_ 9. Restrain confused or irrational patients
- \_\_\_\_\_ 10. Check the physician's orders before beginning the procedure and obtain pertinent history.
- \_\_\_\_\_ 11. Recognize and report important patient changes: Respiration, color, bleeding, and emotional state.
- \_\_\_\_\_ 12. Perform a repeat exposure without proper supervision
- \_\_\_\_\_ 13. Inability to demonstrate an appropriate level of judgment, confidence, and professionalism.
- \_\_\_\_\_ 14. Inability to prioritize and or handle stress.
- \_\_\_\_\_ 15. OTHER \_\_\_\_\_

## USAFE PRACTICE ACTS

### E. Maintain patients' legal rights:

1. Maintain patient confidentiality
2. Provide for client privacy
3. Initiate and correctly perform life support measures (CPR)
4. OTHER \_\_\_\_\_

### B. Meet Student Role Requirements:

1. Recognize your own limitations: perform procedures not competent to perform without an instructor.
2. Demonstrate inappropriate professional behavior that could jeopardize patient safety: tardiness, excessive absences, inappropriate grooming/dress/interpersonal behavior, reporting to clinical under the influence of alcohol or drugs, stealing or lying regarding medications, possessions (staff or patient) or treatments in the clinical experience, not following policy of Pima Community College and the Radiologic Technology Program.
3. OTHER \_\_\_\_\_

### C. Description of Deficiency (include names of persons involved):

---

---

---

### D. This UPA results in (please check those that apply):

- \_\_\_\_\_ 1. 1%-point reduction in final clinical grade
- \_\_\_\_\_ 2. "Clinical Contract": Student may be placed on a clinical contract based on the nature of the problem.
- \_\_\_\_\_ 3. Exclusion from the clinical area. Justification:

---

---

---

The UPA committee will consist of the clinical instructor, technologist, clinical coordinator, Lead faculty, and when applicable student DSR specialist. If the student disagrees with the committee's decision, he/she may appeal the decision by following the process outlined in the Student Rights and Responsibilities document. The student will not be allowed to return to the CEC until all appeals have been completed.

### Statement of Contractual Agreement

I, \_\_\_\_\_, understand and agree to the following:

Target Behavior:

---

---

---

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Clinical Instructor \_\_\_\_\_

Date \_\_\_\_\_

Revised 11/25  
LC

Clinical Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Lead Faculty \_\_\_\_\_ Date \_\_\_\_\_





## **Radiographic Procedures Clinical Competency Requirements and Process**

The clinical competency requirements include 10 general patient care activities and 51 radiographic procedures for a total of 61 competencies.

Demonstration of competence should include variations in patient characteristics (e.g., age, gender, medical condition). Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements.

### **1. General Patient Care**

**Requirement:** Students must be CPR certified and demonstrate competence in the remaining nine (9) patient care activities listed below. The activities should be performed on patients; however, simulation is acceptable.

### **2. General Performance Considerations:**

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

### **3. Simulated Performance**

**Simulations must meet the following criteria:**

- The student must simulate the procedure on another person with the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient. Examples of acceptable simulation include positioning another person for a projection without activating the x-ray beam.
- The program director or designee must be confident that the skills required to competently perform the simulated procedure will be transferred to the clinical setting, and if applicable, the candidate must evaluate related images.

### **4. Imaging Procedures**

As part of the PCC Radiologic Technology program, students must demonstrate competence in the clinical activities identified below:

- Ten mandatory general patient care activities.
- 36 mandatory imaging procedures.
- 15 elective imaging procedures selected from the list of 34 procedures.
- One of the 15 elective imaging procedures must be selected from the head section; and
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section.

Students must demonstrate competence **in all 36 procedures listed as mandatory (M).**

Students must demonstrate competence in **15 of the 34 elective (E) procedures.**

\*A maximum of 10 procedures may be simulated if a demonstration of a patient is not feasible. Procedures eligible are noted as an (S) on the master competency sheet.

**Total number of competencies required is 61.**

Simulated Performance must meet the following criteria:

- Simulation of imaging procedures requires the use of proper radiographic equipment without activating the X-ray beam.
- A total of ten imaging procedures may be simulated. Imaging procedures eligible for simulation are noted on the master competency sheet.
- If applicable, the student must evaluate related images.
- Demonstration of competence includes requisition evaluation, patient assessment, room preparation, patient management, equipment operation, technique selection, positioning skills, radiation safety, image processing, and image evaluation.
- Some situations are acceptable for General Patient Care (i.e. Vital signs, Venipuncture, Patient Transfer, Sterile and Aseptic technique, and Oxygen). These do not count toward the ten imaging procedures that can be simulated.

## 5. Competency Requirements

When performing Imaging Procedures, the candidate must independently demonstrate appropriate:

- Patient identity verification
- Examination order verification
- Patient assessment
- Room preparation
- Patient management
- Equipment operation
- Technique selection
- Patient positioning
- Radiation safety
- Image processing
- Image evaluation

\*Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc. Exp. (Orthogonal views using the IR and tube instead of the patient part)

Once a competency has been achieved, the student will require indirect supervision by a certified R.T., for that examination (**except for examinations that are repeated and portable exams**).

\*One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency (e.g., a portable femur can only be used for a portable extremity or a femur but not both)

Re-Check competencies are performed and documented just like the original competency exam.

**Note:** To ensure the highest level of quality and consistency throughout the Clinical Education Centers, the following process must be adhered to:

- Only the PCC faculty and the designated clinical instructor at the CEC can sign on the master competency form.
- A competency is not completed until the CEC instructor or the faculty reviews the competency form and the images with the student. (Image evaluation and oral critique sessions)

### PCC RAD Program Master Competency Requirements Check Sheet.

Imaging Procedures	Patient or Simulated	Date Completed	Competence Verified by	Re-Check
<b>Upper Extremity</b>				
Trauma Upper Extremity (Non-Shoulder) 2 views (M)				
Finger or Thumb (M)(S) 3 views				
Hand (M) 3 views				
Wrist (M) 3 views				
Forearm (M) 2 views				
Elbow (M) 3 views				
Humerus (M)(S) 2 views				
Shoulder (M) 2 views				
Trauma Shoulder OR Humerus (Scapular Y, Transthoracic, or Axial) (M) 1 view				
Clavicle (M)(S) 2 views				
Scapula (E)(S) 2 views				
Acromioclavicular Joints (E)(S) 2views				
<b>Lower Extremity</b>				
Foot (M) 3 views				
Calcaneus (E)(S) 2 views				
Toe(s) (E)(S) 3 views				
Ankle (M) 3 views				
Tibia and Fibula (M)(S) 2 views				
Knee (M) 3 views				
Patella (E)(S) 1 view				
Trauma Lower Extremity (M) 2views				
Hip (M) 2 views				
Hip Cross-Table Lateral Hip (Horizontal beam) (M)(S)				
Femur (M)(S) 2 views				
Pelvis (M) 1 view				
<b>Chest</b>				
Chest PA & LAT routine (M)				
Chest Lateral Decubitus (E)(S)				
Chest AP Wheelchair or Stretcher(M)				
<b>Abdomen</b>				
Abdomen Supine (M)				
Abdomen Upright (M)(S)				
Abdomen Decubitus (E)(S)				
Intravenous Urography (E)				
<b>Bony Thorax</b>				
Ribs (M)(S) 3 views				
Sternum (E)(S) 2 views				
Sternoclavicular Joints (E)(S) 3 views				
Larynx (soft tissue neck) (E)(S) (1 view)				
<b>Spines</b>				
Cervical Spine (M) 5 views				
Thoracic Spine (M)(S) 2 views				
Lumbar Spine (M) 5 views				
Cross Table Lateral Spine (Horizontal Beam) (M)(S)				
Scoliosis Series (E)(S)				
Sacrum and /or Coccyx 3 views (E)(S)				
Sacroiliac Joints (E)(S) 2 views				

Imaging Procedures	Patient or Simulated	Date Completed	Competence Verified by	Re-Check
<b>Head- (Must demonstrate one from this section)</b>				
Skull (E)(S) 2 views				
Facial Bones (E)(S) 3 views				
Paranasal Sinuses (E)(S) 3 views				
Nasal Bones (E)(S) 3 views				
Mandible (E)(S) 4 views				
Orbits (E)(S)				
Temporomandibular Joints (E)(S)				
<b>Pediatric Age 6 years or younger</b>				
Chest Routine(M)(S)				
Abdomen 1 view (E)(S)				
Upper or Lower Extremity 2 view (E)(S)				
Mobile Study (E)(S)				
<b>Geriatric Patient (65 years or older and physically or cognitively impaired as a result of aging)</b>				
Chest Routine (M)				
Upper Extremity or Lower Extremity (M)				
Hip or Spine (E)				
<b>Fluoroscopy Studies- (Must select 2 procedures and perform site protocol)</b>				
Upper Gastrointestinal Series Single or Double (E)				
Contrast Enema, Single or Double (E)				
Small Bowel Series (E)				
ERCP (E)				
Myelography (E)				
Arthrography (E)				
Esophagus (E) (Not Swallowing Dysfunction Study)				
Cystography/Cystourethrography (E)				
Hysterosalpingography (E)				
<b>Mobile C-Arm Studies</b>				
Surgical C-Arm Procedure requiring manipulation around a sterile field. (M)(S)				
C-Arm Procedure requiring manipulation to obtain more than one projection (M)(S)				
<b>Mobile Radiographic Studies</b>				
Chest 1 view (M)				
Abdomen 1 view (M)				
Upper or Lower Extremity (M)				
<b>GENERAL PATIENT CARE: Clinical Competency Requirements</b>				
The student must demonstrate competence in <b>10 of the following general care activities</b> . Demonstration of competence should include variations in patient characteristics (e.g., age, gender, medical condition). Clinical Instructors will oversee the instruction and verify the following General Patient Care areas: care of patient medical equipment, transfer of patient, and sterile and aseptic technique. PCC faculty will be responsible for instruction and verification of vital signs, venipuncture, and CPR.				

General Patient Care	Date Completed	Competence Verified By
CPR/BLS certified(M)		
Vital Signs- Blood Pressure		
Vital Signs- Temperature		
Vital Signs - Pulse		
Vital Signs - Respiration		
Vital Signs- Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV tubing, catheters)		



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

Put in CEC Notebook

## **VITAL SIGNS**

### **Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

### **THE STUDENT IS ABLE TO:**

- \_\_\_\_\_ a. Define vital signs
- \_\_\_\_\_ b. List the normal rates/limits of temperature, pulse, respiration, and blood pressure
- \_\_\_\_\_ c. Demonstrate proper oxygen mask or cannula placement and oxygen gauge
- \_\_\_\_\_ d. Identify various pulse sites
- \_\_\_\_\_ e. Accurately read a clinical thermometer
- \_\_\_\_\_ f. Accurately monitor pulse rate to be done clinically
- \_\_\_\_\_ g. Accurately monitor respirations
- \_\_\_\_\_ h. Accurately monitor blood pressure



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

Put in CEC Notebook

## **STERILE AND ASEPTIC TECHNIQUE**

### **Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

### **THE STUDENT IS ABLE TO:**

- \_\_\_\_\_ A. Demonstrate the proper hand-washing technique that is accepted as medically aseptic when working with patients
- \_\_\_\_\_ B. Demonstrate the proper method of putting on a mask
- \_\_\_\_\_ C. Demonstrate the correct method of putting on a sterile gown and sterile gloves
- \_\_\_\_\_ D. Demonstrate the ability to locate infectious control measures on patient Requisitions
- \_\_\_\_\_ E. Demonstrate proper infectious control measures when working with patients
- \_\_\_\_\_ F. Demonstrate the correct method of opening a sterile pack and placing a sterile object on a sterile field
- \_\_\_\_\_ G. Demonstrate the skin preparation for a sterile procedure
- \_\_\_\_\_ H. Demonstrate the correct method of removing and reapplying a dressing
- \_\_\_\_\_ I. Identify areas in the operating room that are considered sterile and those that are not
- \_\_\_\_\_ J. Demonstrate the correct method of passing by a sterile person



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

Put in CEC Notebook

## **VENIPUNCTURE**

### **Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed      \_\_\_\_\_ Yes      \_\_\_\_\_ No

### **THE STUDENT IS ABLE TO:**

- \_\_\_\_\_ A. Identify contraindications to contrast administration
- \_\_\_\_\_ B. Identify potential adverse effects of administering contrast
- \_\_\_\_\_ C. Correctly identify signs of extravasation and its treatment
- \_\_\_\_\_ D. Identify potential sites for venipuncture
- \_\_\_\_\_ E. Gather equipment needed for venipuncture
- \_\_\_\_\_ F. Demonstrate proper handwashing and glove placement
- \_\_\_\_\_ G. Properly apply a tourniquet, select, and cleanse the injection site
- \_\_\_\_\_ H. Correctly initiate puncture of the injection site
- \_\_\_\_\_ I. Confirm vein entry and secure the catheter
- \_\_\_\_\_ J. Properly prepare and proceed with the injection
- \_\_\_\_\_ K. Properly remove the catheter
- \_\_\_\_\_ I. Demonstrate proper disposal of sharps and waste





**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Put in CEC Notebook**

## **TRANSFER OF PATIENTS**

### **Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

### **THE STUDENT IS ABLE TO:**

- A. Correctly assess the patient's need for assistance
  - Assess the patient's physical condition
  - Assess patient's cognitive status for impairment
  - Assess patient for geriatric status
  - Assess the patient's range of motion and weight-bearing ability
  - Assess patient's strength and endurance
  - Assess patient's ability to maintain balance
  - Assess the patient's ability to understand what is expected during transfer
  - Assess the patient's acceptance of the move
  - Assess patient's medication history
- B. Demonstrate the correct method of moving and positioning a patient to prevent injury to the patient and to the student
- C. Demonstrate the safety measures that must be taken when transferring a patient from a stretcher to the radiographic table
  - Secure all locks
  - Provide appropriate assistance to the patient
  - Enlist technologist assistance when necessary
  - Enlist assistance and demonstrate a sliding board transfer
  - Enlist assistance and demonstrate a sheet transfer
- D. Demonstrate the safety measures that must be taken when transferring a patient from a wheelchair to the radiographic table
  - Secure all locks
  - Provide appropriate assistance to the patient
  - Enlist technologist assistance when necessary



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Put in CEC Notebook**

## **CARE OF PATIENT: OXYGEN THERAPY**

### **Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

### **THE STUDENT IS ABLE TO COMPLETE THE FOLLOWING:**

#### **Oxygen Therapy**

- A. Explain the potential hazards of oxygen administration
  - Oxygen toxicity
  - Combustible/flammable
- B. Identify the common types of oxygen administration equipment
  - Nasal Cannula
  - Nasal Catheter
  - Face Mask
  - Oxygen Tent
- C. Identify the common oxygen delivery systems
  - Oxygen tank
  - Oxygen wall outlet
- D. Demonstrate the procedure for turning an oxygen tank and wall outlet mechanism on and off
- E. Properly regulate the prescribed flow of oxygen
- F. Determine the amount of oxygen indicated on the gauge of the oxygen tank



**CARE OF PATIENT: CATHETERS / TUBING/ Devices**  
**Objectives Check Off Form**

Student \_\_\_\_\_ Date Completed \_\_\_\_\_

Evaluator \_\_\_\_\_

Objectives Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

**THE STUDENT IS ABLE TO COMPLETE THE FOLLOWING:**

**NASOGASTRIC AND NASOENTERIC TUBES**

**Date Completed:**

\_\_\_\_\_ A. Demonstrate the proper care and handling of nasogastric and nasoenteric tubes

**TRACHEOSTOMIES**

**Date completed:**

\_\_\_\_\_ A. Demonstrate care in not dislodging tracheostomy

\_\_\_\_\_ B. Recognize breathing difficulties and alert appropriate personnel

**MECHANICAL VENTILATORS**

**Date Completed:**

\_\_\_\_\_ A. Demonstrate care in not dislodging endotracheal tube or tracheostomy

\_\_\_\_\_ B. Understand the need for assistance to move patient safely

\_\_\_\_\_ C. Demonstrate care in not placing tension on any intravenous tubing or tubing to the ventilator

\_\_\_\_\_ D. Recognize patient distress and act appropriately

**CHEST TUBES/ Porta- Catheters/ Insulin pumps**

**Date Completed:**

\_\_\_\_\_ A. Determine when the device can be exposed to an x-ray.

\_\_\_\_\_ B. Keep tubing from pleural cavity to drainage chamber as straight as possible keeping the water-sealed chamber below the patient's chest

\_\_\_\_\_ C. Recognize patient distress and act appropriately

**TISSUE DRAINS**

**Date Completed:**

\_\_\_\_\_ A. Demonstrate care to prevent tension on tissue drains

\_\_\_\_\_ B. Demonstrate proper infection control techniques to prevent infection

**IV TUBING**

**Date Completed:**

\_\_\_\_\_ A. Recognize signs of infiltration of fluid into surrounding tissues



## STUDENT RADIOGRAPHER CLINICAL PROGRESS EVALUATION

Student \_\_\_\_\_ Clinical Site \_\_\_\_\_ Date \_\_\_\_\_

Mid-Term Grade \_\_\_\_\_ Final Grade \_\_\_\_\_ Total deficient hours \_\_\_\_\_

**A = 113-123 pts.**

**B = 105-112 pts.**

**C = 93-104 pts.**

**D = 92 or less pts.**

It is possible for a student to earn an (A) regardless of the stage or level of training/education. Students will perform a self-evaluation (in pencil) and give it to the CI or assigned designee one week before the due date. The assigned faculty will, in conjunction with CEC staff and CI input, determine the final grade.

Grading Scale: 3-0. Please put the appropriate number in each box. Total each section for the final score. More than 2 infractions for criterion 15 will necessitate a score of zero. Any infractions for criteria 40 and 41 will result in a score of 0.

A = 3 Student requires minimal direction and demonstrates consistent performance.  
Above average performance. (Based on the level of training)

B = 2 Student requires some direction and occasionally has inconsistent performance.  
Average performance. (Based on the level of training)

C = 1 Student demonstrates competency only when direct guidance/instruction is provided. Not consistent in performing skills. Needs improvement. (Based on the level of training)

D = 0 Unacceptable performance: Not able to demonstrate tasks even when a direction is given. (Based on the level of training, needs major improvement)

S(v)	CI(v)	Positioning and Organizational Skills	Comments	S(w)	CI(w)
		1. Exhibits understanding of classroom knowledge as it relates to positioning skills			
		2. Follows through on assigned tasks and follows instructions			
		3. Effectively using clinical time, actively seeking radiographic assignments			
		4. Proper use of tube, table, and bucky locks			
		5. Completed required competencies and re-check			
		6. Completes work tasks in a timely manner			
		7. Completes exams with an acceptable level of accuracy			
		8. Demonstrates ability to QC radiograph and determine image acceptableness.			

		9.	Maintains, cleans, and stocks workstations before and after each exam. Demonstrates an organized and current CEC notebook.			
		10.	Demonstrates correct selection of cells and technical factors for AEC			
		11.	Demonstrates correct selection of technical factors for manual exposures			
		12.	Proper use of marker, and image annotation			
		13.	Follows department exam protocol			
		14.	Performs competencies and repeats with the required supervision			
=						
<b>S(v)</b>	<b>Cl(v)</b>	<b>Professionalism, Interpersonal Skills, and Initiative</b>		<b>Comments</b>	<b>S(w)</b>	<b>Cl(w)</b>
		15.	Regular attendance/Punctuality/ and making up of absences. <b>More than 2 unexcused absences, tardy, or non-timely make-up hours will earn a score of zero</b>			
		16.	Ability to set priorities and make good professional judgment.			
		17.	Demonstrates an appropriate level of confidence and decision-making when			
		18.	Offers assistance to staff: Teamwork, Promotes understanding/cooperation with staff, technologists, and physicians			
		19.	Accepting constructive criticism and suggestions by taking responsibility for errors			
=						
<b>S(v)</b>	<b>Cl(v)</b>	<b>Radiation Protection</b>		<b>Comments</b>	<b>S(w)</b>	<b>Cl(w)</b>
		20.	Practicing radiation protection for patient/staff, and self (ALARA)			
		21.	Has all images checked by the technologist and does not delete or crop/shutter images without approval			
		22.	Safely uses and properly cares for equipment			
		23.	Proper use of collimation to the area of interest			
		24.	Verification of pregnancy status and acts according to department policy.			
=						
<b>S(v)</b>	<b>Cl(v)</b>	<b>Patient Care Skills</b>		<b>Comments</b>	<b>S(w)</b>	<b>Cl(w)</b>
		25.	Addresses patient by name, and verification of ID by at least two forms.			
		26.	Introduces self to the patient and effectively evaluates the patient to determine if he or she is physically or cognitively impaired due to age and effectively determine geriatric status.			
		27.	Verifies exam type, obtains relevant medical history for the exam, and explains the procedure to the patient.			
		28.	Maintains patient's modesty, comfort, and confidentiality (HIPAA)			

		29.	Adapt positions and sequence to cause no further injury to patient. (assesses patient capability, patient transfer techniques)		
		30.	Knowledgeable of department policies: codes red, blue, yellow, restraint, etc.		
		31.	Knowledge of department emergency equipment and usage: O2, Suction policies		
		32.	Practices Universal Standards: gloves, gowns, handwashing		
		33.	Demonstrates proper sterile technique and aseptic technique.		
		34.	Communicates with patient with an appropriate vocal tone and volume.		
		35.	Assists patients as needed (clothing, bedpans, directions, etc.)		
		=			

S(v)	Cl(v)	Critical Thinking/Problem Solving		S(w)	Cl(w)
		36.	Applies didactic coursework to properly select and modify <u>technical factors</u> for patient body habitus, age, and patient condition.		
		37.	Demonstrates the ability to modify <u>positioning techniques</u> to accommodate the patient's conditions, age, and pathology.		
		38.	Demonstrate the ability to recognize and evaluate problems and use proper channels to communicate concerns.		
		39.	Effectively assesses one's actions and modifies future behavior.		
S(v)	Cl(v)	Dress Code and Personal Appearance By:		S(w)	Cl(w)
		40.	Wears appropriate uniform, name tag, and TLD badge <b>Any infractions for criteria 40 will result in a score of 0.</b>		
		41.	Maintains good body hygiene- no excessive scents, and OSHA guidelines regarding artificial fingernails, etc. <b>Any infractions for criteria 41 will result in a score of 0.</b>		
		=			

Scores = Section1 \_\_\_\_\_ Section 2 \_\_\_\_\_ Section 3 \_\_\_\_\_ Section 4 \_\_\_\_\_ Section 5 \_\_\_\_\_  
Total= \_

The Following space is for the Clinical Instructor and assigned faculty to make notes. If not already noted by the clinical instructor the assigned faculty is responsible for writing an explanation in the space below on criteria with a score of 2 or less.

**(Verbal)Student's Strengths:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Verbal)Areas for Improvement:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Final)Student's Strengths:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Final)Areas for Improvement** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I certify that this evaluation represents the view of a staff technologist who has worked with the student and my best judgment as a Clinical Instructor.**

\_\_\_\_\_  
Clinical Instructor Signature

\_\_\_\_\_  
Date

**Per policy, the final grade is the responsibility of the program faculty in consultation with the CI staff and the student.**

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

**I have read and received feedback on my performance. I understand my strengths and will address the areas noted that need immediate improvement.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Students Comments:**

\_\_\_\_\_  
\_\_\_\_\_

**I request a discussion with Program Clinical Coordinators' and Director (check  
if necessary)**



## COMPETENCY EVALUATION FORM

Student: \_\_\_\_\_ Date: \_\_\_\_\_  
Evaluator: \_\_\_\_\_ File # \_\_\_\_\_

### Competency Form for CR and DR Radiography

The student must notify the clinical instructor (CI) or designated technologists before the examination is to be attempted for a competency or re-check. The clinical instructor or the college faculty will review exam competency/ images and sign off on the Master Competency Form.

A competency is not completed until the CEC instructor or the faculty reviews the competency form and the images with the student during the image evaluation and image critique meetings. Once a competency has been achieved, the student will require indirect supervision by a certified R.T. for that examination (except for examinations that are repeated and portable exams). Re-Check competencies are performed and documented just like original competency. All radiographs must be approved by a certified R.T. before the patient leaves the department or is sent to PACS.

	0=Not Acceptable			1=Requires Minor Improvement			2=Acceptable		
Performance Evaluation	A			B			C		
<i>Perform the Radiological Procedures listed demonstrating appropriate: (1-17)</i>	0	1	2	0	1	2	0	1	2
<b>Type of EXAM:</b>	Projection			Projection			Projection		
1. Evaluation of requisition and verified patient ID, and LMP status									
2. Room readiness, and Portable, C-arm cleanliness									
3. Patient care and management. Effectively evaluates the patient to determine if he or she is physically or cognitively impaired due to age and effectively determines geriatric status.									
4. Obtained and documented exam-related history.									
5. Correct positioning skills. CP/ alignment.									
6. Correct CR and part position/rotation.									
7. Correct use of collimation, shields, aprons, and monitoring badge. ALARA									



0=Not Acceptable

1=Requires Minor Improvement

2=Acceptable

Performance Evaluation	A			B			C			D		
<i>Perform the Radiological Procedures listed demonstrating appropriate: (1-17)</i>	0	1	2	0	1	2	0	1	2	0	1	2
<b>Type of EXAM:</b>	Projection			Projection			Projection			Projection		
8. Evaluate whether the resulting images demonstrate proper image identification (patient ID and correct marker, artifacts).												
9. Demonstrated professional behavior and attitudes when dealing with the patient and family. Demonstrates ability to prioritize and handle stress.												
10. Released the patient and properly completed paperwork.												
11. Evaluate whether the resulting images demonstrate proper anatomical part(s), key anatomy, and significant pathology.												
12. Evaluate whether the resulting images demonstrate proper radiographic technique (use below)												
13. Performed exam in a timely manner. Demonstrates ability to prioritize and make sound decisions in a timely manner												
14. Demonstrate Digital/CR equipment setup, Including KVP, MAS, SFS, LFS, Fluoro timer, etc.												
15. Demonstrate understanding of EI, S, and DI numbers and optimization of the image prior to sending to PACs.												
16. Demonstrated competence in the functions and use of all control buttons and settings window, brightness, contrast, and orientation. (level and window controls)												

### COMPETENCY EVALUATION GRADE SHEET

1. The Competency Evaluation Grade Sheet has been designed for evaluating a maximum of four projections per radiographic examination.
2. The evaluator will mark each area with an X to indicate the point value.
3. Passing score for a 1-projection exam a minimum of 29 out of 32 possible points.  
Passing score for a 2-projection exam a minimum of 58 out of 64 possible points.  
Passing score for a 3-projection exam a minimum of 86 out of 96 possible points.  
Passing score for a 4-projection exam a minimum of 115 out of 128 possible points.

kVp/mAs/EI

kVp/mAs/EI

kVp/mAs/EI

kVp/mAs/EI



## C-ARM COMPETENCY EVALUATION FORM

Student: \_\_\_\_\_  
Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_  
File # \_\_\_\_\_

### Competency Form for C-Arm Procedure

The student must notify the clinical instructor (CI) or designated technologists before the examination is to be attempted for a competency or re-check. The clinical instructor or the college faculty will review exam competency/ images and sign off on the Master Competency Form. A competency is not completed until the CEC instructor or the faculty reviews the competency form and the images with the student during the image evaluation and oral critique meetings. Once a competency has been achieved, the student will require indirect supervision by a certified R.T. for that examination (except for examinations that are repeated and portable exams). Re-Check competencies are performed and documented just like the original competency. All radiographs must be approved by a certified R.T. before the patient leaves the department or is sent to PACS.

0=Not Acceptable	1=Requires Minor Improvement	2=Acceptable			
Performance Evaluation:			A		
Type of Exam:			0	1	2
Evaluate the requisition for the required examination and properly verify patient identification					
Demonstrate the appropriate steps for turning on and off the C-Arm. <u>Demonstrates the ability to handle stress and prioritize the physician's needs.</u>					
Understand and demonstrate proficiency in setting exposure factors (i.e., regular, low-dose, pulse) on the control panel.					
Demonstrate proper maneuverability of the C-Arm during the examination, including applicable locks and pedals.					
Apply pertinent patient identification for final image processing					
Manipulate post-processing parameters to improve the diagnostic quality of the resultant images					
Demonstrate proficiency in retrieving previous images and sending resultant images to and from PACs, or printing if applicable.					
Maintain appropriate radioprotective guidelines, such as employing the use of dosimetry, documenting fluoro time, and providing radioprotective apparel for all personnel in the exam room.					
Properly disinfect the C-Arm before and after the procedure					
Demonstrate the standard principles of surgical asepsis throughout the procedure					

### COMPETENCY EVALUATION GRADE SHEET

The Competency Evaluation Grade Sheet has been designed for evaluating competency in use of the C-Arm. The evaluator will mark each area with an X to indicate the point value.

A minimum of 15 points out of 20 possible must be scored to demonstrate competency.

Student's Total Points ÷ Total Points Possible = \_\_\_\_\_%



## **RADIOGRAPHIC IMAGE EVALUATION RAD 173, 176, 177, 183,186**

This form is used when performing Image Critique and Competency verification by the clinical coordinator at the CEC.

### **I. Patient's Clinical and Physical, Cognitive Conditions**

- A. Medical history
- B. Clinical indications for procedure
- C. Patient's mental state during the procedure
- D. Body habitus

### **II. Technique Used**

- A. Factors
- B. Source image-receptor distance (SID)
- C. Adjustments
- D. Grids
- E. Cassettes / Image receptors
- F. Ranges for EI, the S #, or DI value for the body part examined

### **III. Collimation and Shielding**

- A. IR size and alignment
- B. Field size
- C. Radiation protection devices
- D. Markers
- E. Annotation

### **IV. Positioning**

- A. Basic positioning
- B. Devices
- C. Adjustments

### **V. Radiographic Anatomy**

- A. Radiographic anatomy
- B. Anatomical anomalies
- C. Pathology

### **VI. Radiographic Quality**

- A. Density/ Brightness
- B. Contrast
- C. Resolution

- D. Distortion and magnification
  - E. Mottle
  - F. Artifacts
  - G. S value/ Dose index/ Exposure Index
  - H. Magnification
- 
- 1. Evaluate orally the images based on the image evaluation form layout.
  - 2. Present information related to the patient's clinical and physical condition.
  - 3. Describe technical errors present in radiographs due to improper technique, poor positioning, or extrinsic factors.
  - 4. Describe the adjustment of technique or position to enhance or improve the image.
  - 5. Identify radiation protection devices utilized during the procedure.
  - 6. Describe radiographic anatomy and pathology pertinent to the exam.



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Put in CEC Notebook**

## **RADIATION SAFETY REVIEW FORM**

\_\_\_\_\_ has exceeded the maximum dose equivalent of 125mrem during the following month \_\_\_\_\_. The dosimeter report has been reviewed and signed by the student. He/she has been given a radiation safety review and can describe means in which to adhere to the concept of ALARA and understands the importance of practicing good radiation safety measures.

CEC where the radiation incident occurred \_\_\_\_\_

CEC notified on \_\_\_\_\_ (date)

Possible Activity that led to the reported incident:

---

---

Suspected Date(s) during the reporting period that the incident may have happened:

---

Actions Taken:

---

---

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Program Director Signature



## CLINICAL EDUCATION ABSENCES RECORD

Student \_\_\_\_\_ Course \_\_\_\_\_

Clinical Education Center (CEC) \_\_\_\_\_ Semester \_\_\_\_\_

Complete the following form to record only you're ABSENCES. Absences can only be made up with the approval of the clinical instructor. All absences must be reported to the CEC clinical instructor and assigned faculty before the start of the shift. The absences can be made up on a day or evening shift, Monday through Sunday. (See JRCERT Policy) Please complete the bottom of this form after you have met with the clinical instructor and have the approval to make updates. Students absent for 16 hours must inform the faculty and meet to discuss the action plan.

Date of Absence	Number of Hours Missed	Absence Was Made Up On	Signature of CE Instructor To Verify Absence Was Made Up

I understand that not completing the required days will impact my final grade, and will require an Incomplete (I) grade be submitted at end of semester. If I receive an "I" in this course I will not be able to register for the next semester until my hours have been completed and approved by the CEC Instructor and faculty.

Students Signature \_\_\_\_\_

Date \_\_\_\_\_

I had more than two (2) absences and I met with (Instructor's name) \_\_\_\_\_ on (date) \_\_\_\_\_  
\_\_\_\_\_ to discuss absences.

Instructor Comment : \_\_\_\_\_

Instructor Signature \_\_\_\_\_

Date \_\_\_\_\_

# **APPENDIX B**



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Give Copy to Director**

## **SCHEDULING POLICY**

Schedules for radiology courses (lectures, college assignments, and clinical assignments) are established at the discretion of the Radiologic Program. Individual student requests for schedules will not be guaranteed. Radiologic schedules are dependent on clinical site and instructor availability and are always subject to change. Clinical site rotation sites and shifts may be changed from the original designated clinical site/ shift at the discretion of the CEC and Program. Students are responsible for Clinical Education Center placement fees and additional immunizations.

I have read and understand the above statement. I will sign this statement at the beginning of each and every semester I am enrolled in a radiologic course.

\_\_\_\_\_  
Student Name (Print)      Student ID#

\_\_\_\_\_  
Student Signature      Date





**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Give Copy to Director**

## **RELEASE OF ALL CLAIMS**

RELEASE, made by the undersigned,

\_\_\_\_\_

of \_\_\_\_\_

(Street Address / City / State / Zip)

In consideration of the privilege and permission granted to me by Pima County Community College District to enroll and participate in the \_\_\_\_\_ RAD program.

I, the undersigned, hereby freely agree to the following contractual representations and agreements:

I have received counseling with regard to the above-mentioned program, and I am aware of and fully understand the hazards related to clinical training and practices in hospitals and clinical settings. I agree to accept and abide by all safety practices and procedures that will be part of the training program.

My participation in the program is voluntary and motivated by personal interest, and I fully assume the risks associated with clinical training, including those related to the treatment of patients who have contagious illnesses or diseases.

I hereby release and discharge Pima County Community College District, its agents, employees and officers from all claims, demands, actions, judgments, and executions that the undersigned may have or the undersigned's heirs, executors, administrators or assigns may have against Pima Community College District for all personal injuries, arising out of my participation in the clinical training related to the program mentioned above.

I have read the Radiologic Technology Program Student Handbook, and I understand and accept unamended the responsibilities and obligations imposed upon me.

I, the undersigned, have read this Release and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

IN WITNESS WHEREOF, I have executed this release on the day and year appearing after my signature.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

## **STANDARD PRECAUTIONS**

Since medical history and examination cannot reliably identify all patients infected with HIV or other blood-borne pathogens, blood and body fluid precautions should be consistently used for all patients. This approach, previously recommended by the CDC and referred to as —universal blood and body fluid precautions or —universal precautions, should be used in the care of **all** patients, especially in emergency care settings where the risk of blood exposure is increased, and the infection status of the patient is usually unknown.

1. Health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when in contact with blood or other body fluids of any patient. Gloves should be worn when exposed to blood and body fluids, mucous membranes, or non-intact skin of all patients when handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Gloves should be changed, and hands washed after contact with each patient. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of the mucous membranes of the mouth, nose, and eyes. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or other body fluids.
2. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately after gloves are removed.
3. Healthcare workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle stick injuries, needles should not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area. Large-bore reusable needles should be placed in a puncture-resistant container for transport to the reprocessing area.
4. Although saliva has not been implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.
5. Healthcare workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient care equipment until the condition resolves.
6. Pregnant healthcare workers are not known to be at greater risk of contracting HIV infection than healthcare workers who are not pregnant; however, if a healthcare worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission.

In the event of accidental exposure to potentially infectious material, the student should immediately contact their Clinical Instructor.



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Give Copy to Director**

## **HEALTH RISK STATEMENT OF UNDERSTANDING**

I understand there are health risks involved **as a participant in the Radiologic Technology Program** at Pima Community College.

I understand I may come in contact with clients who have contagious or communicable diseases such as AIDS, hepatitis, or measles. I will be taught Standard Precautions, but it is possible I will still come in contact with pathogenic organisms.

I understand that contact with pathogenic organisms can cause physical complications during pregnancy and/or can cause defects in an embryo or fetus.

I understand that to fulfill the requirements of the skills laboratory and clinical laboratory components of the Radiologic Technology Program, students must be able to demonstrate correct lifting and transferring of adult clients.

I understand, to meet the requirements of the program, I will have no restrictions on my ability to lift any amount of weight. I must be physically able to meet the requirements of the program.

I am advised to consult a physician concerning any of these health risks as they apply to me.

Understanding the health risks involved, I choose to pursue the training and education necessary to fulfill the requirements of the Radiologic Technology Program at Pima Community College.

\_\_\_\_\_  
Student Name (PRINT)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Put Copy in CEC Notebook**

**Give a copy to Certified  
Background**

## **VERIFICATION OF PERSONAL HEALTH INSURANCE**

Verification of health insurance. Students must provide a **current** personal health insurance card. Students will be asked to sign a form verifying and agreeing to maintain personal health insurance while in the program. Discount or sliding scale fee cards are not accepted.

I understand that:

1. In order to participate in any radiologic course with a clinical component, I must carry personal health insurance; **it is my responsibility to have current documentation of insurance in the front of my CEC notebook, and one copy in my master file in the Lead faculty office.**
2. By signing this verification, I am stating to the radiologic program and the clinical agencies that I have personal health insurance.
3. Falsification of this document will result in my being processed through the Student Code of Conduct.

\_\_\_\_\_  
Student Name (PRINT)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Radiologic Course & Semester

Give Completed document to  
Castle Branch



**PimaCountyCommunityCollegeDistrict**

**Division of**

**Health Declaration/ Physical Examination Form –Radiologic Technology  
Program**

**This form must be completed by a licensed healthcare provider (MD, DO, NP, or PA).**  
**Please read and complete all the information.**

**Student Applicant Contact Information**

Student Applicant Name: \_\_\_\_\_ Student Applicant I.D. #: A \_\_\_\_\_

Street Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City, State ZIP: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Health Declaration**

Radiologic Technology students are required to be able to meet and/or perform the *Technical Standards Essential for Radiologic Technology Practice*. These technical standards include a number of physical activities that students must perform in the skills lab and clinical portion of the program, with or without reasonable accommodation. These activities may include lifting patients, performing physical activities for several hours at a time without rest, obtaining readings from medical instruments, placing and obtaining objects from areas above the shoulders and below the waist, receiving verbal instructions, and communicating effectively with members of the health care team, patients, and families. The clinical experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients' lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions.

**Physical Examination**

In conducting your physical examination to determine whether the above-named applicant is capable of meeting the *Technical Standards Essential for Radiologic Technology Practice* listed on the back of this page, please include an evaluation of the following systems:

- Basic vital statistics to include height, weight, blood pressure, pulse, respiration, and temperature
- Vision (Snellen Chart)
- Hearing (gross–whisper heard at 3 ft.)
- EENT
- Cardiovascular System
- Respiratory System
- G.I. System
- G.U. System
- Neuromuscular System
- Musculoskeletal System

- Endocrine
- Integumentary System
- Neurological System

Please read the Radiologic Technology Program *Technical Standards Essential for Radiologic Technology Practice* listed on the back of this page (page 2) and then complete the two questions on page 3.

**Technical Standards Essential for Radiologic Technology Practice**

<b>Functional Ability</b>	<b>Standard</b>	<b>Examples of Required Activities</b>
Gross Motor Skills	Gross motor skills are sufficient to provide the full range for safe and effective patient care activities	<ul style="list-style-type: none"> <li>• Move within confined spaces such as a treatment room or an operating suite</li> <li>• Assist with turning and lifting patients</li> <li>• Administer CPR</li> </ul>
Fine Motor Skills	Fine motor skills are sufficient to perform manual psychomotor skills	<ul style="list-style-type: none"> <li>• Pick up and grasp small objects with fingers, such as x-ray identification markers</li> </ul>
Physical Endurance	Physical stamina sufficient to remain continuously on task for up to a 12-hour clinical shift while standing, sitting, moving, lifting, and bending to perform radiographic examinations and procedures	<ul style="list-style-type: none"> <li>• Lift and move heavy objects up to 50 pounds</li> <li>• Walk/stand for extended periods of time; turn, position, and transfer patients</li> <li>• Wear lead aprons and thyroid collars for extended periods of time</li> <li>• Manually resuscitate patients in emergency situations</li> </ul>
Physical Strength	Physical strength sufficient to perform full range of required patient care activities	<ul style="list-style-type: none"> <li>• Push and pull 250 pounds on a wheeled bed or gurney</li> <li>• Lift and move heavy objects up to 50 pounds</li> <li>• Push and pull radiographic mobile equipment for extended periods of time</li> </ul>
Mobility	Physical ability sufficient to move from room to room and maneuver in small spaces; full range of motion to twist/bend, stoop/squat, reach above shoulders and below waist, and move quickly; manual and finger dexterity; and hand-eye coordination to perform Radiologic Technology activities	<ul style="list-style-type: none"> <li>• Move around in the work area and treatment areas. Position oneself in the environment to perform duties without obstructing the position of other team members or equipment</li> </ul>
Hearing	Auditory ability sufficient for physical monitoring and assessment of the patient's health care needs	<ul style="list-style-type: none"> <li>• Hear normal speaking level sounds</li> <li>• Hear auditory alarms (monitors, x-ray exposure indicator, fire alarms, call bells)</li> <li>• Hear cries for help</li> </ul>
Visual	Normal or corrected visual ability sufficient for accurate observation	<ul style="list-style-type: none"> <li>• See objects up to 20 feet away</li> <li>• Visual acuity to set exposure factors and</li> </ul>

	and performance of Radiologic Technology duties	<ul style="list-style-type: none"> <li>operate a computer keyboard</li> <li>Assess skin color (cyanosis, pallor)</li> </ul>
Tactile	Tactile ability sufficient for physical monitoring and assessment of health care needs	<ul style="list-style-type: none"> <li>Feel vibrations (pulses)</li> <li>Detect temperature changes</li> <li>Palpate anatomical landmarks during radiographic positioning</li> </ul>
Smell	Olfactory ability sufficient to detect significant environmental and patient odors	<ul style="list-style-type: none"> <li>Detect odors from the patient's foul-smelling drainage and alcohol breath)</li> <li>Detect smoke</li> </ul>
Emotional/ Behavioral	Emotional stability and appropriate behavior sufficient to assume responsibility/accountability for actions	<ul style="list-style-type: none"> <li>Establish rapport with patients, instructors, and members of the health care team.</li> <li>Respect and care for persons whose appearance, condition, beliefs, and values may conflict with their own</li> <li>Deliver Radiologic Technology care regardless of the patient's race, ethnicity, age, gender, religion, sexual orientation, or diagnosis</li> </ul>
Professional Attitudes and Interpersonal Skills	<p>Present professional appearance and demeanor; demonstrate the ability to communicate with patients, supervisors, and members of the health care team to achieve a positive and safe work environment. Follow instructions and safety protocols</p> <p>Honesty and integrity beyond reproach</p>	<ul style="list-style-type: none"> <li>Conduct themselves in a composed, respectful manner in all situations and with all persons</li> <li>Work with teams and workgroups</li> <li>Establish and maintain professional boundaries</li> <li>Demonstrate emotional skills to remain calm and maintain professional decorum in an emergency/stressful situation</li> <li>Demonstrate prompt and safe completion of all patient care responsibilities</li> <li>Adapt rapidly to a changing environment/stress</li> <li>Exhibit ethical behaviors and exercise good judgment</li> </ul>
Communication	Oral communication skills sufficient to communicate in English with accuracy, clarity, and efficiency with patients, their families, and other members of the health care team, including non-verbal communication, such as interpretation of facial expressions, affect, and body language	<ul style="list-style-type: none"> <li>Give verbal directions to or follow verbal directions from other members of the healthcare team and participate in healthcare team discussions of patient care</li> <li>Elicit and record information about health history, current health status, and responses to treatment from patients or family members</li> <li>Convey information to patients and others as necessary to teach and direct individuals in an accurate, effective, and timely manner</li> <li>Recognize and report critical patient information to other caregivers</li> </ul>

**Licensed health care provider's conclusions. Questions #1 and 2 MUST be answered.**

1. To the best of your knowledge, do the results of your physical examination indicate that the student applicant will be able to deliver safe and efficient patient care while in the Radiologic Technology program?  
       **Yes**            **No**  
If no, please explain. If additional space is required, please attach your explanation on letterhead stationery.
  
2. To the best of your knowledge, can the student applicant perform all of the Technical Standards Essential for Radiologic Technology Practice?  
       **Yes**            **No**  
If no, please explain which standards the applicant is unable to perform and why. If additional space is required, please attach your explanation on letterhead stationery.

**ATTENTION STUDENT APPLICANT: If the health care provider's response to Question #1 or Question #2 is "No", the student must contact the PCC West Campus Disabled Student Resources (DSR) Office to determine if reasonable accommodations can be made. Enrollment into the Radiologic Technology program will be pending evaluation by the PCC West Campus DSR Office and the Radiologic Technology Department.**

If you require or believe you may require a reasonable accommodation for a disability, or if you have a question about the Americans with Disabilities Act (ADA) or the Rehabilitation Act (Section 504), please contact the College's Office of Access and Disability Resources (ADR) click the link for [ADR information or help](#) or call ADR Director at (520) 206-3228. Even if a Licensed Health Care Examiner has indicated a belief that you will not be able to function as a student in the program or activity listed above, even with a reasonable accommodation, you are encouraged to contact ADR to discuss further options that may be available to you.

**Licensed Health Care Provider (MD, DO, NP or PA)**

Signature of Licensed Health Care Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Please **PRINT** clearly or type:

Name of licensed health care examiner: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_





**Pima Community College  
Radiologic Technology Program**

**Clinical Eligibility Immunization Requirements:**

All students entering the Radiologic Technology Program must meet eligibility requirements to attend the clinical laboratory. This is essential for the safety of the patients at the clinical facilities used by the Radiologic Technology Department. The student must provide proof of meeting these requirements.

**Documentation of** immunization records and laboratory results of titers **must be provided by the student along with the Health Declaration/Physical Examination Form to Castle Branch.**

1. MMR (measles/ mumps/rubella): Two doses (4 weeks between doses) **or** students may provide a copy of laboratory results demonstrating immunity.
  2. Varicella (chicken pox): Two doses (4 weeks between doses) **or** students may provide a copy of laboratory results demonstrating immunity.
  3. Hepatitis B series: Three doses **or** students may provide a copy of laboratory results demonstrating immunity. The Hepatitis B series must be completed before starting the program. Please be aware that the hepatitis vaccination is a series of three shots with 1-2 months between the first and second shots and four months between the second and third shots.
  4. Tdap (tetanus, diphtheria, and pertussis) received within the last 10 years, effective through the last day of the currently enrolled semester. If the immunization expires within the academic semester the student must be immunized again.
  - ✓ 5. **Negative PPD Tuberculosis:** Negative initial two-step skin test OR a QuantiFERON Gold or a T-SPOT blood test
- If positive results provide the following:
    - ✓ Documentation of a clear Chest X-ray (done after the date of positive PPD and within the last 5 years) AND
    - ✓ Completed 2-page TB form (form must indicate clear Chest X-ray results, date of positive PPD, and MUST be completed, signed, and dated by a healthcare provider.) The form is available in the RAD handbook.
    - If the requirement expires between January 1<sup>st</sup> and June 30<sup>th</sup>, the renewal date will be set at January 1<sup>st</sup>.
    - If the requirement expires between July 1<sup>st</sup> and December 31<sup>st</sup>, the renewal date will be set at July 1<sup>st</sup>.
  - Upon renewal, **one** of the following is required:
    - ✓ 1-Step skin test OR
    - ✓ Quantiferon Gold blood test OR
    - ✓ T-SPOT blood test

- ✓ If past positive results, the TB Questionnaire MUST be completed, signed, and dated by a healthcare provider.) The form is available in the RAD handbook.

6. Annual flu shot verification. Due at the beginning of each Fall Semester.

**Additional Eligibility Requirements:**

As with the immunizations, **the student is to retain the originals and provide copies of all documentation provided regarding clinical eligibility.**

1. Arizona Department of Public Safety (DPS) Fingerprint Clearance Card and a copy of the card.
2. CPR card Health Care Provider level – infant/child/adult) effective through the last day of the currently enrolled semester, and a copy of both sides of the card.
3. Verification of health insurance with an insurance card and a copy of the card, effective through the currently enrolled semester.
4. PCC student ID card (with picture) and a copy of the ID card.
5. Signed copy of Signature Form from the *Radiologic Technology Program Student Handbook*.



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Student Immunizations and Health Declaration Form**

Student Name: \_\_\_\_\_ Student # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Immunizations**

**Varicella** (chickenpox): x2 (with 4 weeks minimum between doses) or titer with proof of immunity  
1<sup>st</sup> Vaccine date \_\_\_\_\_ 2<sup>nd</sup> Vaccine date \_\_\_\_\_ Titer date \_\_\_\_\_

**MMR** (Measles, Mumps, Rubella): X 2 (with 4 weeks minimum between doses) or titer with proof of immunity.

Titer: Date: \_\_\_\_\_ MMRs: Date: \_\_\_\_\_ Date \_\_\_\_\_  
Results: \_\_\_\_\_

**Negative PPD Tuberculosis:** Negative initial two-step skin test (PPD) (a 5-day minimum and 21-day maximum between the first and second skin test)

**OR**

QuantiFERON Gold or T-Spot blood test results Date \_\_\_\_\_ Neg. \_\_\_\_\_ Positive \_\_\_\_\_

**IF** positive PPD, provide a clear Chest x-ray (done after the date of positive PPD and within the last 5 years **AND** Complete the 2-page TB questionnaire, signed and dated by the healthcare provider.)

Upon renewal, one of the following is required:

- A 1-step skin test OR either a QuantiFERON Gold or T-Spot blood test, **OR** if positive results, a TB questionnaire.

Date \_\_\_\_\_ Neg. \_\_\_\_\_ Positive \_\_\_\_\_ Date \_\_\_\_\_ Neg. \_\_\_\_\_ Positive \_\_\_\_\_

TB check sheet \_\_\_\_\_ Chest X-Ray Date \_\_\_\_\_ Results \_\_\_\_\_

**Hepatitis B x 3 or titer with proof of immunity must be completed before starting the program in June.**

Please be aware that the hepatitis vaccination is a series of three shots with 1-2 months between the first and second shots and four months between the second and third shots.

First Injection date: \_\_\_\_\_ Second injection date: \_\_\_\_\_  
Third injection date: \_\_\_\_\_ Date of titer and results: \_\_\_\_\_

**Tdap** (tetanus/diphtheria/pertussis) within the last 10 years. (Current through the last day of the semester) \_\_\_\_\_

**Annual Influenza** shot\_\_\_\_\_ The RAD Program will inform you via your PCC e-mail of the deadline date. Due each fall semester.

**Health Declaration (to be completed by Licensed Health Care Examiner)**

It is essential that radiologic technology program students be able to perform a number of physical activities in the clinical portion of the program, with or without reasonable accommodation. These activities may include lifting patients, performing physical activities for several hours at a time without rest, obtaining readings from medical instruments, placing and obtaining objects from areas above the shoulders and below the waist, receiving verbal instructions, and communicating effectively with co-workers and clients. The clinical experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients' lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions. For further information regarding technical standards for students in the Radiologic Technology Program, please refer to the following page, entitled "Technical Standards for Students in the Radiologic Technology Program."

I believe the applicant\_\_\_\_\_ will\_\_\_\_\_ will not be able to function as a Radiologic Technology student, with or without reasonable accommodation. If you indicated that this applicant will not be able to function as a respiratory therapy student, please explain on letterhead stationery and attach it to this form.

<sup>1</sup>If you require or believe you may require a reasonable for a disability, or if you have a question about the Americans with Disabilities Act (ADA) or the Rehabilitation Act (Section 504), please contact the College's Office of Access and Disability Resources (ADR) at <https://www.pima.edu/student-resources/adr/index.html> or call ADR Director at (520) 206-3228. Even if a Licensed Health Care Examiner has indicated a belief that you will not be able to function as a student in the program or activity listed above, even with a reasonable accommodation, you are encouraged to contact ADR to discuss further options that may be available to you.

**Licensed Health Care Examiner**

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Pima Community College  
Division of  
Radiologic Technology Program

Put Copy in CEC Notebook  
Provide completed form if  
applicable to Castle Branch

## Tuberculosis Documentation Record

### To be completed by the patient:

Patient Name: \_\_\_\_\_

Pima ID Number A \_\_\_\_\_

### To be completed by a licensed healthcare provider (MD/DO/NP/PA):

The above patient cannot receive a PPD due to a previous positive PPD.

Date of positive PPD: \_\_\_\_\_

Date of negative chest x-ray following the positive PPD: \_\_\_\_\_

Healthcare Provider Name (Please Print): \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Pima Community College**  
Division of  
Radiologic Technology Program

## **Tuberculosis Symptom Screen for Persons with Positive PPDs**

Dear Healthcare Provider (MD, DO, NP, PA),

Please complete the symptom checklist below:

- |    |  |          |         |
|----|--|----------|---------|
| 1. | Cough longer than three weeks                | _____Yes | _____No |
| 2. | Hemoptysis                                   | _____Yes | _____No |
| 3. | Shortness of breath                          | _____Yes | _____No |
| 4. | Night sweats                                 | _____Yes | _____No |
| 5. | Poor appetite                                | _____Yes | _____No |
| 6. | Unexplained weight loss                      | _____Yes | _____No |
| 7. | Fever/chills                                 | _____Yes | _____No |
| 8. | Very low energy/very tired<br>without reason | _____Yes | _____No |

\_\_\_\_\_, is free of symptoms of tuberculosis and  
(Name of Patient)

I do not recommend a repeat chest radiograph.

Healthcare Provider Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_



# PimaCommunityCollege

## West Campus Radiologic Technology Program

### PREGNANCY POLICY

The National Council of Radiation Protection (NCRP) advises that control measures should be taken to avoid or reduce the risk of ionizing radiation exposure to the human embryo or fetus. It should be noted that the risks of detectable effects induced by medical diagnostic exposure are very small.

The program has established the following policy directed toward the protection of the declared pregnant student and the unborn fetus from the harmful effects of ionizing radiation. The student may elect to voluntarily declare the pregnancy to the program director. The declaration must be in writing. The declared pregnant student has the option to withdraw the declaration of pregnancy at any time. Withdrawal of the declaration must be in writing. In the absence of this voluntary written disclosure, a student cannot be considered pregnant and will continue her educational program without modification.

Declared pregnant students are expected to follow additional protective steps detailed below.

These measures restrict the fetal radiation dose to not exceed 0.5rem (5mSv), the maximum permissible occupational exposure dose equivalent to the embryo-fetus during the gestational period.

The following procedure shall be followed:

1. The Department Director will review the student's previous radiation exposure history. The Director will review with the student the NCR Guide 8.13, protective actions and the risks associated with radiation exposure to the fetus. Guide available at:  
<https://www.nrc.gov/docs/ML0037/ML003739505.pdf>
2. After student consultation with her physician and medical certification that a pregnancy exists, the Program Director will offer two options to the student. Medical forms provided by the Program will need to be completed by the physician.

#### **Option #1 - Leave of Absence During Pregnancy**

If the student so decides, she may elect to leave the program during the pregnancy period.

- A. If the student decides to accept this option and leaves the program, she must immediately notify the Program Director in writing.
- B. May postpone entry until the following year if the pregnancy is declared before beginning the program.
- C. An incomplete grade will be awarded for the course(s) in progress. The remaining coursework may be completed upon the student's return; however, it may not be feasible for the student to re-enter the program immediately since all courses are offered chronologically and only once a year.

- D. All didactic and clinical coursework must be completed before completion and graduation from the program.

**Option #2 - Remain in the Program During the Pregnancy Without Modification.**

If the student so decides, she may continue in the program under the following requirements:

- A. The student is required to review and implement radiation safety practices as outlined by NCR Guide 8.13.3.
- B. If a student has health concerns that require documentation from a physician, a report from her physician documenting that she may continue to participate in all aspects of the clinical portion of the Radiologic Technology Program will need to be provided, unless the student has health concerns that require modifications.
- C. Follow all policies and procedures of the clinical education affiliate.
- D. The student will wear two body dosimetry badges. One badge should always be worn at collar level and the other badge at waist level. The waist-level badge should be identified as a fetal badge. When a lead apron is worn, the badge at collar level should be worn outside the apron and the badge at waist level should be worn under the apron.
- E. The student should wear a wrap-around lead apron during radiation exposure. A lead apron of 1.0 mm Pb, worn at the fetal level is recommended.
- F. The student is required to participate in all scheduled clinical rotation areas, as assigned, in order to complete required clinical competency exams, with the exception of elective Nuclear Medicine and Radiation Therapy optional rotations.

\*The student is required to complete and sign documentation acknowledging receipt of all information associated with the pregnancy. This documentation is kept in the student's secure file.

**I have read and understand this pregnancy policy. I accept all risks and all of the responsibilities for my pregnancy,**

\_\_\_\_\_  
Student Name (PRINT)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Program Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date





**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Give Copy to Director  
&  
Put Copy in CEC Notebook**

## **JRCERT ALLEGATIONS OF NON-COMPLIANCE POLICY**

1. Complaints and allegations of non-compliance by the program of JRCERT standards may be communicated directly by students to the JRCERT by calling their office at (312) 704-5300.
2. It is the policy of the Radiologic Technology Program to work with the JRCERT if and when the program is in non-compliance with the JRCERT standards. The program will investigate and where appropriate make the revisions necessary to come into compliance. The program is committed to informing the students, clinical centers, and advisory board members of the JRCERT standards.

### **DIRECT/INDIRECT and REPEAT EXAMINATION Policy Verification**

In support of professional responsibility for the provision of quality patient care and radiation safety, unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency. Failure to comply with this policy may be grounds for suspension or termination.

JRCERT Objective 4.4 Assures that medical imaging procedures are performed under the Direct Supervision of a qualified radiographer until a student achieves competency.

JRCERT Objective 4.5 Assures that medical imaging procedures are performed under the Indirect Supervision of a qualified radiographer after a student achieves competency.

JRCERT Objective 4.6 Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.

### **HIPAA/Patient Confidentiality**

The undersigned hereby recognizes that medical records, patient care information, personnel information, reports to regulatory agencies, conversations between or among any health care professionals are considered privileged and should be treated with utmost confidentiality.

If it is determined that a breach of confidentiality has occurred as a result of my action. I can be liable for damages that result from such a breach.

Your signature indicates that you have read the above policy and understand your rights and responsibilities as a student radiographer in the PCC RAD program.

### **MRI Safety**

I have viewed the MRI safety video and successfully completed the post test and reviewed the MRI safety checklist. I will comply with all MRI safety guidelines outlined in the instructional video and those protocols designated at the clinical centers. I understand that I am not allowed in the MRI suites at any clinical center without authorization and must have direct supervision when allowed into MRI suites as part of my training.

---

Student Name (PRINT)



Date

Put in CEC Notebook

**ACADEMIC /CLINICAL WARNING**

Student's Name: \_\_\_\_\_

Course Name: \_\_\_\_\_

Date: \_\_\_\_\_

Instructor: \_\_\_\_\_ CI: \_\_\_\_\_

In keeping with the published standards regarding minimum grade requirements in the Radiologic Technology Program curriculum, please be advised that you are below acceptable limits in the above course.

In accordance with program policy, you must maintain a 75% average in all radiography courses. Please make an appointment with me to discuss ways in which you can improve your course average in order that you may be successful in this course and in the program. My office hours are posted in the course syllabus.

A copy of this form will be given to you, and one will be placed in your file.

**Please make an appointment with your instructor within 24 hours.**

Student Signature: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_

Program Director Signature: \_\_\_\_\_

Clinical Instructor Signature: \_\_\_\_\_

Dear Student:

You are in jeopardy of failing RAD \_\_\_\_\_, because of your performance on the exam(s)\_\_\_\_\_.

**Comments:**

---

---

---

---

---



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**



**STUDENT DEFICIENCY NOTICE / LEARNING CONTRACT CLINICAL**

Student Name: \_\_\_\_\_ Date(s) of Deficiency: \_\_\_\_\_

You are in jeopardy of failing the RAD Program, because of your performance in the CEC.

This Student Learning Contract is in effect until you graduate from the program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

**Areas of Deficiency**

**Required Goal(s)**  
**Deadline for Meeting Goal(s)**

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## RECOMMENDATIONS FOR STUDY

1. 

---

---
2. 

---

---
3. 

---

---
4. 

---

---
5. 

---

---
6. 

---

---
7. 

---

---
8. 

---

---
9. 

---

---
10. 

---

---

Student \_\_\_\_\_ Date \_\_\_\_\_

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

### Put in CEC Notebook



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Put in CEC Notebook**

## **Clinical Incident Report**

Name of person preparing this Incident Report: \_\_\_\_\_

Date that this Incident Report is being prepared: \_\_\_\_\_

Name of student involved in the incident being reported: \_\_\_\_\_

Time, date, and place of incident being reported: Time: \_\_\_\_\_ Date: \_\_\_\_\_

Location where incident occurred: \_\_\_\_\_

Description of the incident (please provide as much detail as possible—use additional sheets if necessary):

---

---

---

Names of other witnesses to, or persons with information concerning, the incident: \_\_\_\_\_

Clinical Instructor Notified \_\_\_\_\_

CEC Supervisor notified \_\_\_\_\_

Program Director Notified \_\_\_\_\_

Clinical Coordinator notified \_\_\_\_\_

### **Signature and Contact Information of the Person Preparing This Incident Report**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone number or other contact information

Completed forms and related documents specific to the CEC are to be copied and provided to the Program Director and the CEC RAD department Director.





## PimaCountyCommunityCollegeDistrict

### Environmental Health and Safety (EH&S) Procedure & Guidelines

<b>SUBJECT:</b> Accident/Injury Reporting	
<b>APPLIES TO:</b> All College Personnel, Students, and Visitors to Pima Community College	
<b>VERSION:</b> 1	
<b>PAGES:</b> 1	
<b>DATE:</b> June 21, 2010	
<b>SUPERCEDES:</b> N/A	
<b>OWNER:</b>	Environmental Health and Safety Department E-Mail: EHS-info@pima.edu Phone:206-2765

#### 1. PURPOSE AND OBJECTIVE

The PCC accident reporting procedure ensures that accidents are properly documented and investigated in a timely manner; that all causes (direct and contributory) are thoroughly identified; and that the appropriate corrective actions are taken.

An accident is an undesired event resulting in injury to a person or damage (including fire) to college property. Any accident, near-miss or damage to college property must be reported as soon as possible and no later than 48 hours after the event.

#### 2. REPORTING PROCEDURE

The accident/injury reporting procedure applies to:

- A work-related injury or accident to a PCC employee.
- Injury or accident to a PCC student while participating in a college class or activity.
- Injury or accident to visitors or contractors while on PCC premises.
- Damage that occurs to PCC property including fire.
- A non-injury event that has the potential to cause harm or damage (near-miss).

What to do in the event of an accident?

- In the event of serious injury or immediate danger call 911.
- Attend to any injuries.
- Reporting of injuries/accidents.
  - Employees must notify their supervisor of all work-related accidents/ injuries.
  - If you are a student and are injured during a PCC class or activity, notify the supervising faculty member.
  - Visitors or contractors should contact any college employee for a copy of the Accident/Injury Reporting Form.
- Complete an Accident/Injury Reporting Form and submit to EH&S as soon as possible and no later than 48 hours. A copy of this form is available on the PCC Employee Intranet (log in to MyPima) click on Health and Safety. It can also be accessed from the PCC Internet, Facilities Web page.

Environmental Health and Safety Department  
Campus Mail: MS-1805  
E-mail: EHS-info@pima.edu  
Fax: 206-2665



EH&S – File No: \_\_\_\_\_

### Section A: General Information – (To be filled out by injured/person involved)

Name of person involved or injured: \_\_\_\_\_

Incident Date: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ A#: \_\_\_\_\_

☐ Employee ☐ Student ☐ Visitor ☐ Contractor

Department: \_\_\_\_\_ Position: \_\_\_\_\_ Phone : \_\_\_\_\_

### Section B: Description of the Event – (To be filled out by injured/person involved)

Where did the accident happen? (e.g. loading dock, office) \_\_\_\_\_

☐ CC ☐ DC ☐ DO ☐ DV ☐ EC ☐ MS ☐ NW ☐ WC

Other: \_\_\_\_\_ Bldg. and Room #: \_\_\_\_\_

What happened? (Description of the event and how it occurred, e.g. tripped on stairs while carrying boxes, burned finger while soldering)

Actions taken to control effects of incident (e.g. used fire extinguishers, administered first aid)

Describe Injuries: (Include parts of the body, e.g. left elbow, neck )

What factors contributed to the event? (e.g. faulty equipment, wet conditions)

### Section C: Preventative Measures – (To be filled out by injured/person involved)

What can be done to avoid this situation in the future?

Other individuals involved and/or observed incident:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Did you see a doctor or other healthcare professional for this injury?

☐ Yes ☐ No If yes, where? \_\_\_\_\_

Form completed by: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*This form should also be used to report "near misses" that address conditions where hazards may exist, but an injury did not occur.

**Section D: This section to be filled out by supervisor or supervising faculty member**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Describe what happened: \_\_\_\_\_

\_\_\_\_\_

What actions were taken: \_\_\_\_\_

What corrective measures will be taken to prevent this incident in the future?

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section E: Reviewed by Director of Environmental Health and Safety**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If this accident involved a college vehicle or college rental vehicle, you must also complete *Appendix A - Automobile Liability Loss Report*.**

**Send Accident/Injury Reporting Form to Environmental Health and Safety (EH&S) as soon as possible and no later than 48 hours of injury/accident.**

Fax: 206-2665  
Campus Mail: MS-1805  
E-mail: [ehs-info@pima.edu](mailto:ehs-info@pima.edu)  
Phone: 206-2765

**Clinic Information for Employees**

The employee can choose a medical provider for their first doctor's appointment. Clinics that are familiar with the College and the worker's compensation process are listed below.

U. S. Health Works (formerly Tucson Occupational Medicine) 2945 W. Ina Rd – (520) 877-8600 1661 W. Grant Rd – (520) 628-4340 888 S. Craycroft Rd – (520) 747-0417	MBI Occupational Healthcare 1001 E. Palmdale (520) 807-1060
--	---



# PimaCommunityCollege

Sign and Send to  
Certified Background

## Student Code of Conduct

As a student at Pima Community College, you have rights and responsibilities that are listed in the Student Code of Conduct. It is the duty of each student to be aware of the policies that govern behavior and due process at Pima Community College. The [Student Code of Conduct](https://www.pima.edu/student-resources/student-policies-complaints/docs/Student-Code-of-Conduct.pdf) document can be found on the PCC website or by typing the following link into your browser.

<https://www.pima.edu/student-resources/student-policies-complaints/docs/Student-Code-of-Conduct.pdf>

As a student in the Pima Community College & Division, you must sign and date the verification below:

**I realize that it is my responsibility to read and understand the information contained in the Student Code of Conduct. I confirm that I have read and understand the Student Code of Conduct.**

Name (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_  
Date:



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Sign and Send to  
Certified Background**

## **SUBSTANCE ABUSE (alcohol and drug)**

I have read and was given the Substance Abuse Policy on the first day of entering this program. I am aware that the program will require annual random drug screens, and the clinical institutions may have policies requiring random drug testing.

\_\_\_\_\_  
Student Name (PRINT)

\_\_\_\_\_  
Student I.D. Number

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



**Division of and  
Radiologic Technology Program**

**RELEASE AND CONSENT FORM**

I, \_\_\_\_\_, authorize J2 Laboratory, Pima Community College police, or any law enforcement agency deemed appropriate by the Pima Community College police to obtain urine, blood, breath, saliva, and/or hair specimens from my body for laboratory analysis for the purpose of alcohol and/or drug screening. I authorize the release of the results of the screen(s) to Pima Community College. This release and consent form is subject to the terms and conditions of the Pima Community College Policy on Chemical Impairment.

A photocopy of this authorization shall be the equivalent of the original.

I understand that my refusal to cooperate in such screening will subject me to discipline according to the Policy, up to and including permanent dismissal from the Radiologic Technology Program.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_



**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Put in CEC Notebook**

## **RE-ENTRY POLICY**

A student's withdrawal from the Program for non-cognitive reasons will be considered on an individual basis. Request for re-entry must be completed and submitted to the program director within ten (10) business days of the student's withdrawal. Requests for re-entry to the RAD Program are carefully considered. Students may be allowed to re-enter only if there is evidence that the conditions that caused the student's withdrawal have been resolved and there is clinical space available. Only 1 RAD semester can be repeated. Re-entry into the Program must be the following year. If students choose to sit out for more than one year, they must re-apply online, be re-admitted, and repeat all of the RAD courses from the beginning.

I am requesting consideration for re-entry into the Pima Community College Associate Degree Radiologic Technology Program.

I understand re-entry is contingent upon space availability, and there is no guarantee a seat will be available upon my return. I understand that failure to update my contact information may cause me to lose my re-entry seat because I cannot be contacted. Attached is my PCC unofficial transcript and a detailed explanation of how I have corrected the conditions that necessitated my withdrawal from the Program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director Signature

\_\_\_\_\_  
Date

**PIMA COMMUNITY COLLEGE**  
**RADIOLOGIC TECHNOLOGY PROGRAM**  
**REPEAT IMAGE POLICY**

**JRCERT STANDARD FOUR Objective 4.6, "Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images. The technologist assures safety; proper educational practices must be physically present and approve procedure."**

To monitor the repeat image policy the student must complete the form for all images repeated. The technologist's signature is required. This form will stay in the CEC notebook and will be reviewed by the faculty regularly.

Reason for repeat:

P = Positioning M = Motion TOE = Technique overexposed TUE = Technique under exposed OC= Off Center D = Detent Ant= Anatomy Misc. = Miscellaneous

STUDENTNAME \_\_\_\_\_ SEMESTER \_\_\_\_\_

Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____
Projection repeated _____	Date _____	Technologist signature _____	Reason for repeat _____





**PimaCommunityCollegeDistrict**  
**West Campus**  
**Radiologic Technology Program**

**Give Copy to Director**

## **SIGNATURE FORM FOR RADIOLOGIC TECHNOLOGY STUDENT HANDBOOK**

Printed Name \_\_\_\_\_ Student Number: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

I have received, read, understand, and will abide by the Pima Community College Radiologic Program Student Handbook policies. I have attended the orientation, where the entire Handbook was reviewed and discussed.



**PimaCommunityCollegeDistrict**  
West Campus  
Radiologic Technology Program

**Put Copy in CEC Notebook**

**Give Copy to Director**

## **STUDENT'S PERSONAL DATA**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address (Street & Number): \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of Nearest Relative: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address (Street & Number): \_\_\_\_\_

\_\_\_\_\_  
City, State, Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_