

School of Diagnostic Imaging

Radiologic Technology Program

Policy & Procedure Manual 2023-2024

Group NN: August 22, 2022 – April 27, 2024 Group OO: August 21, 2023 – April 26, 2025

Catalog Publication Date: August 21, 2023

State of Ohio Board of Career Colleges and Schools Certificate of Registration Number 2165

> School of Diagnostic Imaging 25900 Science Park Drive Beachwood, OH 44122 Mail Code AC239



School of Diagnostic Imaging

This policy and procedure manual has been prepared to provide students, clinical site staff and school staff with information regarding the school policies. The School of Diagnostic Imaging believes in the guidelines described in this manual and final interpretation of these guidelines rest solely with the School of Diagnostic Imaging. The manual does not create a contract, expressed or implied, and should not be relied upon to alter the enrollment relationship with the School of Diagnostic Imaging.

The School of Diagnostic Imaging reserves the right to modify, suspend or eliminate any part of the policies or procedures set forth in the manual at any time, with or without notice. The school reserves the right to supply the final interpretation of all policies. Moreover, the language used in the policy manual is not intended to create, nor is it to be construed to constitute an offer to contract, or a contract, by the School of Diagnostic Imaging and any of Cleveland Clinic employees.

Cleveland Clinic is committed to providing a working and learning environment in which all individuals are treated with respect and dignity. It is the policy of Cleveland Clinic to ensure that the working and learning environment is free from discrimination or harassment on the basis of race, color, religion, gender, sexual orientation, gender identity, pregnancy, marital status, age, national origin, disability, military status, citizenship, genetic information, or any other characteristic protected by federal, state, or local law. Cleveland Clinic prohibits any such discrimination, harassment, and/or retaliation.

Any participant in a Cleveland Clinic educational program, including any student, trainee or employee, who may have been subject to discrimination on the basis of a protected characteristic is encouraged to make a report.

Reports of discrimination on the basis of sex, gender, sexual orientation, gender identity or gender expression may be made to the Title IX Coordinator: <u>TitleIX@ccf.org</u>. Reports of discrimination on the basis of a disability, may be made to the Section 504 Coordinator, Main Campus NA31. Reports of discrimination on the basis of any other protected characteristic may be made to the program director.

In addition, Cleveland Clinic shall provide reasonable accommodations to any qualified student with a disability in order for the student to have equal access to their program. Students needing a reasonable accommodation in order to apply to or participate in the program should contact the program director as early as possible. Please refer to the Accommodations for Students with Disabilities Policy.

This is to certify that the information contained in this publication is true and correct in content and policy.

Signature: Gloria a. Albrecht Title: Program Director

FACULTY CONTACTS:

Gloria Albrecht	216-618-5250
Barb Fertig	216-559-8342
Halley Majersky	216-212-0484
Kimberly Saghy	216-554-3375
Kevin McDermott	216-678-1753
Gabriel Kroupa	330-904-0341

SCHOOL RESOURCES

Facilities:

The radiography program has sufficient classroom and office space available to meet our needs. The energized labs are available for the program at the Cleveland Clinic Main Campus and Cleveland Clinic Euclid Hospital. A classroom is scheduled for the students for additional study purposes. The program also has access to multifunctional devices.

Equipment:

The program has access to computers in the classroom for each student with internet and intranet access. The classrooms and office space have sufficient presentation capabilities. The program has 4 cross sectional models; 2 head models and 2 head/torso models. There is also a full body skeleton and multiple disarticulated bones. The programs have the following periodicals available for student use: *ASRT Radiologic Technology*, and the ASRT Scanner.

TABLE OF CONTENTS	PAGE
Program Faculty & Clinical Staff	5-6
Radiology/Hospital Policies, Professional Organizations	7
Academic Honesty	8-9
Accommodations for Students with Disabilities	10
Admission & Technical Standards	11-12
Attendance	13-17
Behavioral Objectives	18-19
Caring for Caregivers	20
Competency Examination	21-24
Computer, Internet, Social Media & Cell Phone Use	25
Confidential Information	26-27
Contingency Plan	28
Copyright Infringement	29
Corrective Action	30-33
Course Descriptions	34-37
Course Sequence & Clock Hours	38-39
Degree Completion Requirements	40-41
Educational Records	42-43
Employment Guidelines for Students	44
Evaluations & Counseling	45
Full Time, Transfer & Advanced Placement	46
Grading Procedures	47-48
Graduation	49-50
Grievance Procedure	51-53
Harassment	54-55
Hazing	56-57
Health Requirements	59-60
Healthcare Coverage, Workplace Injury & Illness	58
Infection Control	61
JRCERT Standards and Non-Compliance	62
Leave of Absence (LOA)	63
Magnetic Resonance Imaging Safety	64
Mission Statement, Vision & Philosophy	65-66
Ohio Department of Education & Health Licensure	67
Organizational Chart	68
Patient Identification	69-70
Post Exposure Cropping, Masking and Shuttering	71
Post Graduate Job Placement	72
Pregnancy	73-75
Pregnant Patient	76
Professional Appearance	77-78
Program Effectiveness	79
Program Goals & Outcomes	80
Program Review & Assessment Committee	81
Radiation Safety	82-83
Radiation Safety-Individual Monitoring Devices & Exposure Reports	84-86
Satisfactory Academic Progress	87-89
Scheduling of Clinical Experiences	90
Security & Campus Safety	91-96
Smoking	97
Substance Abuse	98-99
Supervision of Students	100
Textbook Information / Education Supplies	101
Tuition, Fees, Refunds & Withdrawals	102-103
Tuition Financial Assistance	104
Veterans	105

ADMINISTRATOR, IMAGING INSTITUTE

Joseph Parker, BA

MEDICAL DIRECTOR

, MD

PROGRAM DIRECTOR

Gloria A. Albrecht, MS, RT(R) 216-618-5250 galbrech@ccf.org

CLINICAL COORDINATOR

Barbara Fertig, BS, RT(R) 216-559-8342 bfertig@ccf.org

INSTRUCTOR

Kevin McDermott, MEd, RT(R) 216-678-1753 mcdermk@ccf.org

CLINICAL PRECEPTORS

Carly Gintert, RT(R) - Akron General Hospital, Cleveland Clinic, Cleveland Clinic

Ann Westenbarger, RT(R) – Akron Health and Wellness North, Stow, Cleveland Clinic

Sheila Schrembeck, RT(R) - Akron Health and Wellness West, Montrose, Bath, Cleveland Clinic

Brett Cohen, RT(R) - Beachwood Family Health Center, Cleveland Clinic

Lynnette Jablonski, RT(R) and Anna Callahan RT(R) - Brunswick Family Health Center, Cleveland Clinic

Mark Moore, RT(R) - Cleveland Clinic Foundation

Mike Klamut, RT(R) - Cleveland Clinic Foundation

Joshua Tokich, RT(R) - Cleveland Clinic Foundation

Susan Fortin, RT(R) - Euclid Hospital, Cleveland Clinic

Carol Gaba, RT(R) and Karen Hogan, RT(R) - Fairview Hospital, Cleveland Clinic

Sarah Brockway, RT(R) - Hillcrest Hospital, Cleveland Clinic

Danielle Marcini, RT(R) – Independence Family Health Center, Cleveland Clinic

Gabriella Vandra, RT(R) – Lakewood Family Health Center, Cleveland Clinic

Kellie Bruegger, RT(R) - Lutheran Hospital, Cleveland Clinic

Sandi Ramsey, RT(R) – Medina Hospital, Cleveland Clinic

David Mihalek, RT(R) - Middleburg Heights Family Health Center, Cleveland Clinic

Donna Deppish, RT(R) - Strongsville Family Health Center, Cleveland Clinic

Becky Huggins, RT(R) - South Pointe Hospital, Cleveland Clinic

Dani Fordham, RT(R) - Twinsburg Family Health Center, Cleveland Clinic

Nicole Kohler, RT(R) Willoughby Hills Family Health Center, Cleveland Clinic

CLINICAL SUPERVISORS

Melissa Carkido, RT(R) – Akron General Hospital, Cleveland Clinic

Cathy Massey, RT(R) - Cleveland Clinic Foundation

Tom Frank, RT(R) - Euclid Hospital, Cleveland Clinic

Angela Gorczyca, RT(R) - Fairview Hospital, Cleveland Clinic

Angela Maltry, RT(R) - Hillcrest Hospital, Cleveland Clinic

Sandi Ramsey, RT(R) - Medina Hospital, Cleveland Clinic

Yvonne Schafer, RT(R) - Lutheran Hospital, Cleveland Clinic

Kellie Loporto, RT(R) - South Pointe Hospital, Cleveland Clinic

ADVISORY COMMITTEE

Gloria Albrecht, MS, RT(R) - Program Director, School of Diagnostic Imaging

Barb Fertig, BS, RT(R) - RT Coordinator, School of Diagnostic Imaging

Halley Majersky, BS, RT(R)(CT)(M)(MR) – CT/MRI Coordinator, School of Diagnostic Imaging

Mark Moore, RT(R) - Education Coordinator, Cleveland Clinic Foundation

Rick White, RT(R) –Director of Radiology, Akron General Hospital

Christine Clark, RT(R) - Director of Imaging, Euclid Hospital

Christine DeCorte, RT(R) - Director of Imaging, Fairview Medical Center

Tera Munaretto, RDMS, RVT - Director of Imaging, Hillcrest Hospital, Mentor Hospital

Chris White, RT(R) – Director of Imaging, Lutheran Hospital

Cynthia Lewis, RT(R) – Director of Imaging, South Pointe Hospital

Scott Klammer, RT(R) - Director of Imaging Services, Regional Radiology

ADMISSION COMMITTEE

Gloria Albrecht, MS, RT(R) - Director, School of Diagnostic Imaging Barbara Fertig, BS, RT(R) - Education Coordinator, School of Diagnostic Imaging Kevin McDermott, MEd, RT(R) – Radiology Instructor Angela Maltry, RT(R), Hillcrest Supervisor

SUBCOMMITTEE ON STUDENT READMISSION

Gloria Albrecht, MS, RT(R) - Director, School of Diagnostic Imaging

Barbara Fertig, BS, RT(R) - Education Coordinator, School of Diagnostic Imaging

Kevin McDermott, MEd, RT(R) – Radiology Instructor

Radiology Department Manager/Director at Clinical Site

Clinical Preceptor at Clinical Site

Clinical Supervisor/Director at Clinical Site

IMAGING DEPARTMENT / HEALTH SYSTEM POLICIES:

The following policies are published on the Cleveland Clinic Intranet and reflect the policies and procedures of the entire Cleveland Clinic Health System. These policies are also located in MyLearning.

HOSPITAL POLICIES:

Disaster Emergency Group Page Evacuation Plan

Emergency Response Team Emergency Operations Plan

CLEVELAND CLINIC POLICIES:

Cellular Phones Diversity and Inclusion

Confidential Information Non-Discrimination, Harassment or Retaliation Employee Identification Badges Non-Smoking Policy (Smoke-Free Campus)

Employee Parking Personal Appearance Equal Employment Opportunity/Workforce Social Media Use

IMAGING DEPARTMENT POLICIES:

Administration & Medication Reconciliation Proper Patient Dress for Radiology

Infection Control Policy Radiation Safety - State & Federal Regulations

Medical Physicists Responsibilities in QA Program Radiation Safety Committee

Meeting Radiation Safety StandardsRadiation Safety – State and Federal RegulationsPatient EducationReporting of Training Related Illness or InjuryPatient IdentificationSafety for Patient and Personnel in RadiologyPatient Radiation ProtectionVenipuncture for Administration of Contrast

Patient Safety – Diagnostic Contrast Media

Administration & Medication Reconciliation

PROFESSIONAL ORGANIZATION INFORMATION:

The American Registry of Radiologic Technologists (ARRT) Standards of Ethics - www.arrt.org

ARRT Continuing Education Requirements - www.arrt.org

ARRT Content Specifications for the Examination in Magnetic Resonance Imaging - www.arrt.org

ARRT Magnetic Resonance Imaging Clinical Experience Requirements - www.arrt.org

ARRT Rules and Regulations - www.arrt.org

The American Society of Radiologic Technologist (ASRT) - www.asrt.org

The International Society for Magnetic Resonance in Medicine (ISMRM) – www.ismrm.org

PROFESSIONAL ORGANIZATION INFORMATION:

Links to the websites for the following organizations can also be found on the program website at www.clevelandclinic.org/sodi and on our learning management system.

JRCERT Standards for an Accredited Educational Program in Radiologic Sciences - www.jrcert.org

The American Registry of Radiologic Technologists (ARRT) Standards of Ethics - www.arrt.org

ARRT Pre-Application Review of Eligibility for Certification - www.arrt.org

ARRT Honor Code Violations - www.arrt.org

Ethics FAQ's - www.arrt.org

The American Society of Radiologic Technologists (ASRT) - www.asrt.org

The Ohio Society of Radiologic Technologists (OSRT) - www.osrt.org

PROGRAM FORMS: (available on the student learning management system)

Attendance Verification Student Evaluation
Course Evaluation Leave of Absence

Student Survey of Clinical Experience

POLICY TITLE: Academic Honesty **PAGE:** 1 of 2

ORIGINAL DATE: May 14, 2012 LAST REVIEWED: August 14, 2023

REVISED: May 14, 2019

PURPOSE:

Students enrolled in the School of Diagnostic Imaging are to perform their academic work according to standards set by faculty members and allied health education departments. Academic dishonesty at SODI is defined as any conduct that violates the fundamental principles of truth, honesty, and integrity. These actions will result in no credit given and appropriate sanctions are warranted and will be applied according to the corrective action policy.

The following behaviors are identified as academic dishonesty:

- Cheating
- Plagiarism
- Misuse of academic resources
- Falsification
- Facilitating academic dishonesty

CHEATING:

Means to intentionally misrepresent the source, nature, or other conditions of academic work so as to accrue undeserved credit, or to cooperate with someone else in such misrepresentation. Such misrepresentations may, but need not necessarily, involve the work of others. As defined, cheating includes, but is not limited to:

- Obtaining or retaining partial or whole copies of examination, tests or quizzes.
- Obtaining previous years' developmental exams to prepare for the current developmental exams.
- Using notes, textbooks or other information in examinations, tests and quizzes, except as expressly permitted.
- Obtaining confidential information about examinations tests or quizzes other than that released by the preceptor.
- Securing, giving or exchanging information during examinations.
- Presenting data or other material gathered by another person or group as one's own.
- Falsifying experimental data or information.
- Having another person take one's place for any academic performance without the specific knowledge and permission of the instructor.
- Using a substantial portion of a piece of work previously submitted for another course or program to meet the requirements of the present course or program without notifying the instructor to whom the work is presented.
- Presenting falsified information in order to postpone or avoid examinations, tests, quizzes, or other academic work.
- Copying answers directly from the answer key for workbook and classroom assignments.
- Copying tests or other assignments by hand or electronic device.
- Cooperating with another to do one or more of the above.

PLAGIARISM:

Means to take and present as one's own, a material portion of the ideas or words of another or to present as one's own, an idea or work derived from an existing source without full and proper credit to the source of the ideas, words, or works. As defined, plagiarize includes, but is not limited to:

- The copying of words, sentences and paragraphs directly from the work of another without proper credit.
- The copying of illustrations, figures, photographs, drawings, models, or other visual and nonverbal materials, including recordings, of another without proper credit.
- The presentation of work prepared by another in final or draft form as one's own without citing the source, such as the use of purchased research papers.
- Excessive revising or editing by someone else that significantly changes the final product of the student's work.

MISUSE OF ACADEMIC RESOURCES:

Means to intentionally use resources in a way that they are not meant to be used. For example, if borrowing a textbook or workbook from a former student, the pages with questions should be unanswered and workbook pages should be blank. This also includes unauthorized use of computer accounts such as the sharing of passwords with others, stealing or destroying reference materials or computer programs, and stealing or destroying a classmate's notes or materials.

FALSIFICATION:

Means to lie or present a false impression by submitting a fabricated excuse for an absence, incorrectly documenting attendance or participation in class and/or clinical, fabricating an excuse to get out of a test or an assignment, and reporting data, research, or reports that is different from what actually occurred.

FACILITATING ACADEMIC DISHONESTY:

Means to help another commit intentionally or knowingly one of the above acts of academic dishonesty.

POLICY TITLE: Accommodations for Students **PAGE:** 1 of 1

with Disabilities

ORIGINAL DATE: June 11, 2012 LAST REVIEWED: August 14, 2023

REVISED: May 14, 2019

It is the policy of the School of Diagnostic Imaging Radiography Program to grant accommodations, whenever possible, to students with a disability. The Americans with Disabilities Act (ADA) does not require an educational institution to make accommodations if the student/applicant is not otherwise qualified or if the necessary accommodations would substantially alter the course of study or outcome. A disability is defined as a physical or mental impairment, which substantially limits a major life activity (such as learning, seeing, hearing, etc.) Otherwise, qualified is defined as meeting all other requirements of the program.

It is the student/applicant's responsibility to declare his/her disability and seek accommodation(s).

- 1. Procedure for requesting special accommodations:
 - A. The student/applicant will be required to submit to the program director written documentation to request special accommodations. The student's request must be accompanied by a letter written by an independent authority (a professional authorized to conclude the need for special accommodations) to include the following information:
 - 1. The nature of the disability and/or specific diagnosis.
 - 2. What diagnostic tests have been completed to determine the disability, and the outcome of these tests.
 - 3. Any treatment undertaken for the disability (medications, therapy, etc.).
 - 4. Specific accommodations requested.
 - B. The Advisory Committee will review the above documentation and determine if the student meets disability criteria.
 - C. If the student/applicant meets the criteria, the Advisory Committee will jointly establish reasonable accommodations. It is the responsibility of the student applicant to request specific accommodations.
 - D. The program director will determine if the requested accommodation is reasonable, seeking input from the Director, Allied Health Education Partnerships, Education Institute and others as needed.
 - E. The program director will inform the Advisory Committee of the outcome.
 - F. The Advisory Committee will inform the faculty as applicable and the student applicant of the decision.
- 2. Information regarding a disability is confidential. However, it may be necessary for individual faculty members to be informed about a disability if the accommodations may impact the structure of the course. Once a student is classified as disabled and receives reasonable accommodations, the student must continue to meet the ADA criteria in order to continue to receive the accommodations.

POLICY TITLE: Admission & Technical Standards **PAGE:** 1 of 2

ORIGINAL DATE: June 23, 1983 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

OBJECTIVES:

1. To establish awareness in the communities we serve, that we provide opportunities for qualified students to become a registered radiologic technologist, regardless of age, sex, race, creed or national origin.

- 2. To establish guidelines and criteria for candidates applying for admission to the School of Diagnostic Imaging.
- 3. To define the minimum qualifications that must be met by an applicant.
- 4. To ensure that qualified students will be selected for admission to this educational program on the basis of ability and without discrimination with regard to age, gender, race, national origin, religion, creed, color, marital status, physical or mental disability, pregnancy, sexual orientation, gender identity or expression, genetic information, ethnicity, ancestry, veteran status, or any other characteristic protected by federal, state or local law.
- 5. To assure that Cleveland Clinic administers all programs and services without regard to disability and provides reasonable accommodations for otherwise qualified disabled individuals.

POLICY:

- 1. Candidates must be high school graduates or earned a certificate of equivalent education recognized by the U.S. Department of Education. If a student has completed high school in another country the student must submit an official translated transcript.
- 2. All candidates must satisfy the following minimum requirements. All courses must be college credit courses with a "C" grade or better from a regionally accredited college and have a traditional letter grade. The School of Diagnostic Imaging does not accept the pass/no pass grading option.
 - Anatomy & Physiology I & II or Anatomy and Physiology for Diagnostic Medical Imaging BIO 1221 for Cuyahoga Community College students. Must be completed within the last 5 years.
 - Medical Terminology
- 3. A GPA of 2.75 is required for math, anatomy and physiology, and medical terminology courses.
- 4. Eight (8) hours of clinical observation must be completed within the first 8 weeks of the program.
- 5. All candidates must complete an application to the School of Diagnostic Imaging, Radiologic Technology Program by meeting the following criteria:
 - Complete and submit to the program director an application form with payment of a non-refundable \$20.00 application fee. Application forms may be obtained from the School of Diagnostic Imaging or can be downloaded at www.clevelandclinic.org/sodi.
 - Send official high school transcripts or GED and college transcripts to the School of Diagnostic Imaging.
 - Candidates are encouraged to submit the previous documents by February 1st or until the program has sufficient applications that meet the requirements.
 - Candidates may be considered who meet most of the requirements if there is evidence that they will meet the requirements prior to the beginning of the program.
 - 6. Candidates are required to provide proof of health insurance and current certification in Basic Life Support for Health Care Providers from the American Heart Association.
 - 7. Candidates are required to undergo a complete physical examination and provide documentation to the program officials.

- 8. Candidates must pass a criminal background check. If a candidate does not pass the criminal background check, they will not be permitted to continue in the program.
- 9. Candidates accepted into the School of Diagnostic Imaging must submit a \$300 non-refundable tuition deposit which is applied to the first semester tuition.
- 10. All qualified candidates must participate in a behavior-based interview by the members of the selection committee after completing the application process.
- 11. The Radiologic Technology Program does not accept advanced placement, transfer students, or transfer credits from any college or radiography program.

TECHNICAL STANDARDS:

- 1. Candidates must have good eyesight either naturally or through correction. They must be able to see the printed words in a radiographic textbook and be able to read and accurately interpret the numbers on a radiographic technique chart.
- 2. Candidates must have the ability to hear instructions and be able to respond to verbal requests by patients/customers.
- 3. Candidates must be able to lift a minimum of thirty (30) pounds and possess the ability to support up to 175 pounds. Radiographers must assist, support and move patients from wheelchairs and carts onto radiographic examination tables which requires the use of their backs and muscles.
- 4. Radiographers work while standing, sometimes for hours. Candidates must be able to move around and stand for long periods of time.
- 5. Radiographers must verbally instruct patients and be able to express concern and empathy for them. Candidates must possess good verbal and nonverbal communications skills as evidenced from the application and interview process. Radiographers must perform data entry with dexterity and accuracy.
- 6. Candidates must be physically and mentally capable of fulfilling the objectives of the radiography program. The school will make reasonable accommodations to assist a student with a disability to advance through the program. However, candidates must be aware that the school is located on the third floor of a building with no elevator. Candidates must have sensory function adequate for patient assessment and care. They must possess the physical status needed to provide all aspects of care in a safe manner. (Please see Special Accommodations for Students with Disabilities Policy)

POLICY TITLE: Attendance **PAGE:** 1 of 5

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: March 25, 2024

This policy establishes standards of appropriate attendance, provides a procedure for notification of absence and tardiness, and establishes guidelines for the discipline and improvement of substandard attendance and tardiness. The ethics and attitudes developed through adherence to this policy will help ensure student success in the future, regardless of their place of employment. Excessive tardiness or absenteeism negatively affects patient care and hospital morale, and is therefore unacceptable. Failure to comply with these policies will result in corrective action based on a point system, up to and including expulsion from the program as outlined in this policy and the Corrective Action Policy. Please note: records of attendance and corrective action are retained for a period of seven (7) years after graduation and are reviewable for matters pertaining to employment references, dismissal and reinstatement after dismissal.

1. GENERAL ATTENDANCE AND TIMELINESS: All time off <u>must</u> be approved by program officials. It is the responsibility of each student to be accountable to the faculty of the school and the clinical preceptors at each clinical site. Please use the following guide for informing the school faculty of any changes to your schedule. Depending on the circumstances, corrective action may result. Please see POINTS #15 of this policy and refer to the Corrective Action Policy for more detail.

Attendance Notification:

- a. If a student is unable to attend class or clinical, he/she must text both Barb and Kevin on their CC cellphones by 7:00am. The student must also call the clinical site.
- b. If a student is running late to class or clinical include an estimated time of arrival.
- c. If a student is told to leave clinical for lack of work, also need documentation from clinical preceptor.
- d. Any PTO to be used in the morning must be requested **before midnight the night before**, or the student will be considered tardy.

Attendance Book: (after approval by a faculty member)

- a. If a student knows ahead of time he/she will be using PTO for all or part of the day.
- b. If a student knows ahead of time he/she will be absent from class or clinical.
- c. If there is any change to his/her schedule.

Call Faculty for Permission:

- a. If a student unexpectedly needs to leave clinical early, he/she shall call a faculty member for permission.
- A. CLASS/LAB SPECIFIC: Class days are 8:00 am 3:30 pm. Regular and prompt attendance for Radiologic Technology courses and labs is essential for students to meet the educational challenges and to accomplish learning outcomes of the Radiologic Technology Program. Due to the progressive nature of the individual courses and the program as a whole, attendance and punctuality are seen as essential qualities. All classes and labs will begin as scheduled. Please allow for weather, traffic and other circumstances that may cause a delay. In the event of absence or tardy, please see POINTS #16 of this policy.
 - 1. Students must clock in and out in Trajecsys upon arrival and departure from the classroom/lab.
 - 2. Students are expected to be in the classroom or lab, before the official start time.
 - 3. A student will be considered tardy if they are 1 minute late.
 - 4. If a student has more than two unexcused absences from class, the student's grade will be affected. Please see course syllabi for specifics. (Continued on next page).
 - 5. If a student is absent for 50% or more of a class or lab they are considered absent for that class.

- 6. An extended lunch period is considered an incident of tardiness.
- 7. Severe weather or driving conditions, as deemed by the program director, may be considered an excused tardy.
- **B.** CLINICAL EDUCATION SPECIFIC: Clinical days are 8:00 am 3:30 pm. Attendance and punctuality are seen as essential qualities for your chosen profession. Timeliness is essential at the clinical site as it can be a direct indicator of what type of employee you may become. It is the student's responsibility to inform the school <u>and</u> the clinical preceptor if they are running late, will be absent, or have scheduled time off. Clinical days are seven (7) hours in length, not including the lunch break. Please make time allowances for weather, traffic and other circumstances that may cause a delay. In the event of absence or tardy, please see POINTS #16 of this policy.
 - 1. Students must clock in and out in Trajecsys upon arrival and departure from clinical.
 - 2. Students are expected to be in their assigned area and ready to work at their official start time.
 - 3. If a student leaves the facility for lunch or any other reason, he/she is required to clock out and in.
 - 4. Students are not to clock in more than 15 minutes before their scheduled start time at clinical.
 - 5. Students may not use any device to clock in or out other than the institution's computers. Failure to follow this rule will result in a Category III corrective action.
 - 6. A student receives .5 point if:
 - They are one minute late.
 - Takes an extended lunch period.
 - Leaves before the end of their scheduled time.
 - 7. A one-half hour lunch break is required when a student is at the clinical site for more than five (5) hours (some sites allow 45 minutes, must check with clinical site).
 - 8. If a student wishes to stay longer than seven (7) hours, they need to inform the school of their intentions.
 - 9. Students cannot attend clinical in excess of 10 hours per day.
 - 10. Students may not exceed 40 hours in a week of clinical and class time (Monday-Friday).
 - 11. Severe weather or driving conditions, as deemed by the program director, may be considered an excused tardy.
- 2. SCHEDULED BREAK WEEKS: Students have twelve (12) scheduled break weeks over the length of the program as indicated by the academic calendar. Students who wish to take a vacation should utilize break weeks for this purpose.
- **3. HOLIDAYS:** Students are scheduled off of clinical and class on the following six (6) holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving (including the day after Thanksgiving), and Christmas. Students are not permitted to be at a clinical during scheduled holidays.
- 4. EXCUSED ABSENCES: Bereavement and jury duty are considered excused absences from class or clinical and therefore do not count toward the absences that can cause a course letter grade to drop. Students are responsible for any missed assignments and must make arrangements with their instructor to make up exams and assignments within one week of returning to class. PTO is not needed for excused absences from clinical.
 - a. **Bereavement:** Students are permitted up to 3 days off for bereavement due to the death of an immediate family member. Documented evidence must be submitted and includes an obituary notice, proof of relationship and/or proof of funeral dates. For purposes of this policy, immediate family members are defined as current spouse; child; stepchild; mother; step-mother; father; step-father; mother-in-law; father-in-law; daughter-in-law; son-in-law; sister; step-sister; brother; step-brother; grandmother; grandfather; and grandchild. Clinical time is not required to be made up for bereavement.
 - b. **Jury Duty:** A student who is summoned for jury duty at a time which conflicts with class or clinical should carefully read the jury summons and any information on requests for excused absence from jury

- duty or deferment. If appropriate, the school will request that the court defer jury duty until after the expected graduation from the program; the student shall contact the court regarding the necessary documentation. Clinical time is not required to be made up for jury duty.
- c. If extended time off is needed from class or clinical, the student may request a leave of absence (LOA). Please refer to the Leave of Absence Policy for more detail.
- **5. PERSONAL TIME OFF (PTO):** In addition to scheduled breaks and holidays, students are permitted 21 hours of PTO per semester. PTO accumulates and unused PTO will carry over into the next semester. PTO can only be taken in **30-minute increments**. Students should reserve PTO for unforeseen personal or family illnesses or emergencies. All PTO requests must be approved by program faculty.
 - **A.** Exceeding PTO will require make-up time at the end of the 5th semester.
 - **B.** Any PTO to be used in the morning must be requested before midnight the night before, or the student will be considered tardy.
 - **C.** For planned absence, PTO must be requested and documented in the attendance book <u>and</u> the student must also notify the clinical preceptor or designee in advance.
 - **D.** Students who wish to leave early, or leave and return to the clinical site, must get verbal permission from program officials by phone.
 - **E.** Interview Day: One (1) additional day of PTO is permitted in the 5th semester for Cleveland Clinic radiography interviews. Documentation is required. Time may be taken as one 7-hour day or two 3.5 hour days.
- **6. EARNED PERSONAL TIME OFF (EPTO):** Students may earn PTO by participating in extracurricular activities related to radiologic technology and/or community service. All activities must be approved by program officials.
 - **A. EPTO** can be earned by participating in the following activities. All activities must be completed outside of school hours.
 - 1. OSRT Annual Meeting (1 hour / each additional educational session attended after meeting requirements).
 - 2. Blood donation (2 hours / donation)
 - 3. Cleveland Heart Walk
 - 4. Greater Cleveland Food Bank

B. EPTO MAXIMUMS

- 1. A maximum of twenty-one (21) hours per academic year is permitted to be earned.
- 2. Class officers are required to attend specific events and therefore may earn more than 21 hours per academic year.
- 7. EXCEEDING PTO: Exceeding available PTO will result in a corrective action. Please refer to the Corrective Action Policy for more detail. Exceeded PTO will require make-up time at the end of the 5th semester. Make-up time begins the Monday after the end of the 5th semester from 8:00 am 3:30 pm each day, until completed. If a student has less than two hours of total make up time, they may add that time to their final week of clinical with program permission.
- **8. SCHOOL CLOSURE:** Class and/or clinical may be canceled by the program director of the School of Diagnostic Imaging, or designee. Closure of the school because of inclement weather or other emergency will be communicated to the students via email. It is the student's responsibility to inform the school of email address changes.
- **9. DEGREE COMPLETION COLLEGE COURSES:** Students are never permitted to schedule degree completion courses during class days. Courses should be scheduled at times that do not conflict with class or clinical. If a student must schedule a degree completion course that conflicts with clinical, the course and schedule must be approved by the program director. Any missed time for this purpose will need to be made up at the end of the program.

- **10. MAKE-UP TIME:** Make-up time for approved LOA, tardiness or exceeding PTO must be completed after the end of the fifth semester. Make-up time will start the Monday after the end of the 5th semester from 8:00 am 3:30 pm. All program policies will remain in effect until all make-up time is completed and all graduation requirements are met. Make up time can only be performed at primary clinical site.
- 11. Students are not eligible to take the ARRT exam until all graduation requirements are met.
- **12.** According to JRCERT regulations, students may not exceed 10 hours per day. However, SODI students must adhere to the 8:00 am 3:30 pm or the 3:30 pm 11:00 pm evening rotation schedules and are only permitted to stay to complete a procedure.
- **13. DEMAGNETIZED / DAMAGED ID BADGES:** If a student demagnetizes an ID badge in MRI or the ID is damaged, the student must notify a school official immediately. Verification forms should be filled out as needed. The student will be directed to take the non-working ID badge to either of the following locations where a new badge will be issued.

Main Campus:

Services: ID Badge, Fingerprinting and Background Screening Location: JJ North Office Building- Basement Room 400 Hours of Operation: 7:00am - 4:15pm (Monday - Friday)

Phone: 216-444-1208

Administrative Campus (CCAC)

Services: ID Badge, Fingerprinting and Background Screening

Location: Building #2, Level 1, room AC2-1-135

Address: 25875 Science Park Drive, Beachwood, OH 44122

Hours of Operation: 8:00am - 3:45pm Phone: 216-448-5688 Fax: 216-448-0092

- 14. LOST ID BADGES: In the event of a lost or stolen badge, the student must immediately request a new badge and notify program officials. The lost or stolen badge must be replaced within three (3) business days. Please note there is a fee to replace an ID badge determined by the Cleveland Clinic. Verification forms should be filled out as needed.
- **15. LACK OF WORK:** If a student is requested to leave **by the clinical site** because of lack of work, PTO will not be used. Documentation is needed from the clinical preceptor or designee for each occurrence. A student may be reassigned to another area of the department.
- **16. VA BENEFITS:** Students receiving full time VA educational benefits must maintain a minimum of 22 hours of participation each week.
- 17. POINTS: Points for attendance violations are accumulated accordingly and remain for one (1) rolling year. A rolling year is defined as the 12 month period of active student participation immediately preceding the date of the chargeable occurrence. In the event of a leave of absence (LOA) of more than 30 days, the rolling year will be extended beyond 12 months by the amount of time approved on the LOA. The first two incidents of tardy or failure to swipe in/out are forgiven and will not result in points.
- **18. FAILURE TO CLOCK IN OR OUT:** For each instance that a student forgets to clock in or out, he/she must provide time verification in Trajecsys. See chart below for points for failure to swipe in and out.

Tardy / Leaving Early	.50
Failure to Clock In or Out	.25

19. TWO OCCURENCES OF NO CLOCK IN/OUT WITHIN A DAY: The student is required to provide documentation within one week of the occurrence or will be charged with seven (7) hours of make-up time and the incident will be considered a **NO CALL / NO SHOW** requiring a corrective action. Please refer to the Corrective Actions Policy for more detail. Time verification is still required.

20. CORRECTIVE ACTION FOR POINTS: Corrective action for accumulation of points will be initiated according to the chart below. Please see the Corrective Action Policy for more detail. A corrective action will be initiated **each time** a student reaches a point level. Any corrective action (including points for attendance) may affect your clinical grade. See the Grading Procedures Policy for more detail.

CORRECTIVE ACTION	FULL TIME:
Documented Counseling	4 points
Written Corrective Action	8 points
Final Written Warning / Suspension	10 points
Dismissal	12 points

21. NO CALL/SHOW: This applies when a student does not attend class and fails to report off to the school <u>or</u> when a student does not attend clinical and fails to report off to <u>both</u> the school and clinical. Notification received more than <u>two hours</u> after scheduled start time is a "NO CALL/NO SHOW."

POLICY TITLE: Behavioral Objectives **PAGE:** 1 of 2

ORIGINAL DATE: March 1, 1996 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

Personal and professional development starts as a student and continues throughout a radiographer's career. The work ethic and attitudes developed or influenced during the training period greatly impacts the degree of professional success a radiographer enjoys.

The student will:

- Show initiative by displaying motivation and energy in starting and completing tasks.
- Demonstrate a professional attitude by displaying and/or creating a positive emotional and psychological environment for patients and co-workers.
- Develop professional interpersonal relationships as evidenced by positive interactions with patients, families and co-workers.
- Possess appropriate patient perception skills by demonstrating the ability to perceive patient's needs and respond to them as needed.
- Be productive, as demonstrated by the volume of work accomplished.
- Perform high quality work, as evidenced by the accuracy and thoroughness of procedure performance.
- Possess organizational skills by demonstrating the ability to perform in a systematic and logical fashion.
- Demonstrate the ability to follow direction by possessing the ability and willingness to listen, reason and interpret tasks.
- Demonstrate flexibility by being willing to be guided and instructed.
- Demonstrate adaptability by being able to adapt procedure to patient.
- Demonstrate self-confidence.
- Demonstrate a professional demeanor.
- Present a professional appearance in accordance with school policy.
- Demonstrate dependability by being reliable and conscientious.
- Demonstrate accountability by taking responsibility for his/her actions and through attendance and punctuality.

CLEVELAND CLINIC DIAGNOSTIC SERVICES INSTITUTE'S COMMITMENT TO RESPECT: In addition to the above specifics, we expect students to work toward mastering the principles set forth in the Commitment to Respect. In view of the critical role that communication plays in the successful provision of care to patients and to colleagues, all caregivers of the Imaging Institute will subscribe to the following principles:

- Patients, their families and significant others are the most important people to the healthcare team.
 - We communicate information that sets appropriate expectations and reduces anxiety.
 - We take the time to understand their needs and preferences.
- We all lead by setting a good example.
- We make ourselves accessible to others.
 - We give each other the gift of listening.
 - We respond to requests in a timely way.
 - We are open to the opinions of others, options, and ways of doing things.
 - We are on time for patient related commitments.

• We exhibit a personable, pleasant and professional demeanor.

- o We know the people with whom we work and address them by name.
- We acknowledge and make eye contact with others.
- We appreciate similarities and value differences.
- We use "please", "thank you", and "I'm sorry" as a significant part of our vocabulary.

• We create a positive environment of support, respect and appreciation.

- We give and receive open and honest feedback to allow personal and professional growth.
- We praise each other publicly and provide constructive criticism privately.
- We refrain from gossip, rumors and malicious talk about others.
- We avoid indirect communications and speak directly with the person involved.
- We communicate in a clear and consistent manner using appropriate words, body language and facial expressions.

We are all Caregivers and help each other achieve our potential.

- We educate each other.
- We recognize value in every member of the care team.
- We select the best people for a role based on their skills, strengths and interests.

• We manage stress appropriately both in the workplace and on a personal level.

- We manage stress to minimize impact on others.
- We exhibit appropriate non-verbal communications particularly when under stress.
- We take care of ourselves so we can take better care of others.

• We value every member of the care delivery team equally and recognize the "main ingredient for success is the rest of the team." (- J Wooden)

- We set and communicate expectations in a collaborative manner.
- We ensure clarity of roles and responsibilities.
- Our actions reflect our commitment to quality, safety and efficiency.
- We recognize and reward people in ways they appreciate.

POLICY TITLE: Caring for Caregivers **PAGE:** 1 of 1

ORIGINAL DATE: May 31, 2001 LAST REVIEWED: August 14, 2023

REVISED: June 23, 2016

The School of Diagnostic Imaging is aware that students face a variety of challenges in their daily lives and understands how personal, school, and work stresses can impact the quality of life and the ability to provide skillful and compassionate care. The School of Diagnostic Imaging offers the services of Caring for Caregivers (Employee Assistance Program) to any student who may require assistance.

Caring for Caregivers program offers expert, confidential and free support. The Caring for Caregivers program assists in a crisis, and in helping manage a wide range of issues that include, but not limited to, stress, emotional problems, work problems, alcohol and other substance use, family and marital problems, parenting, loss and bereavement, and financial pressures.

Services include:

- Confidential assessment
- Short-term counseling
- Information and referral services
- Crisis response services / Critical incident stress debriefing
- Supervisor and management consultation
- Education and outreach

Guidelines for using Caring for Caregivers:

- 1. Students may confidentially contact Caring for Caregivers directly by calling 216-445-6970 or 800-989-8820.
- 2. The student will be provided with confidential assessment, limited counseling and referral services which are free of charge.
- 3. The faculty at the School of Diagnostic Imaging may make voluntary referrals to the assistance program by requesting the student to contact Caring for Caregivers Staff and Employee Assistance Programs.
- 4. Students are advised to schedule appointments outside of scheduled class and/or clinical hours.
- 5. If the student is unable to attend the appointment as scheduled, the student should inform Caring for Caregivers assistance program.

POLICY TITLE: Competency Examination PAGE: 1 of 4

ORIGINAL DATE: January 28, 1994 LAST REVIEWED August 14, 2023

REVISED: August 14, 2023

Competency examinations will be conducted as a means for students to demonstrate competence in performing procedures according to the following guidelines:

- 1. Students may not complete a competency examination on any procedure prior to educational instruction on that procedure. The curriculum is designed to teach radiographic procedures from simpler exams to the more complex as the student progresses in the program.
- 2. Competency examinations require an 84% for the student to be considered competent. In addition, there is a mandatory section that is graded on a pass or no pass (P or NP) basis. A competency examination is not considered complete until a passing grade is obtained. The student is not considered competent on that exam and must repeat the competency examination (see failed competency section for more detail).
- 3. Students must complete repetitions for each procedure prior to the competency examination for the first fifteen (15) competencies. The purpose of the repetitions is to demonstrate areas of needed improvement prior to competency exam completion. Students must be fully prepared when performing a repetition but may ask for assistance with technique. Students should do as many repetitions as possible, however extra repetitions do not convert into competency examinations. Once the required number of repetitions and competencies for the 2nd semester are completed, the student no longer needs to complete repetitions before performing a competency examination.
- 4. Competency examinations must be filled out using Trajecsys and be electronically signed by the supervising technologist. The clinical preceptor or designee must then electronically sign each competency.
- 5. Once a student has successfully passed a competency examination on any given procedure, that student is then allowed to perform the procedure under indirect supervision, following the supervision policy. If the student subsequently demonstrates an inability to repeatedly correctly perform the procedure, the program director can take away the competency and require the student to repeat the competency exam.
- 6. While performing a competency examination, the student cannot refer to notes or books. This should be done prior to the beginning of the exam and before the patient is brought in the room. Students must inform the technologist prior to the beginning of the procedure that they intend to perform a competency.
- 7. When performing a competency examination on a GI procedure such as esophagus/barium swallow, UGI, or barium enema, the technologist should indicate on the competency examination form which, if any, images were performed.
- 8. If a student does not complete the required number of competencies in any given semester, they will receive an incomplete for the clinical semester and their clinical grade will drop one letter grade. For each subsequent week that the requirement is not met, the grade will continue to drop one letter grade. The only exception is when a student is on an approved leave of absence (LOA). The student on an approved leave of absence is given the additional time, equal to their absence, to complete the clinical requirements.
- 9. Students may not have an elective rotation until they have completed required examination competencies.

FAILED COMPETENCY EXAMS:

- 1. A failed exam is one that was failed by points (less than 21 points or 84%) or if a no pass (NP) was received in the Mandatory Skills section. The student is not considered competent on that exam and must repeat the competency examination until an 84% or better is obtained and all Mandatory Skills have a pass (P). Students must have direct supervision until successfully passing the examination competency exam.
- 2. All failed competency examinations must have a competency form filled out and returned to the clinical preceptor by the technologist. The clinical preceptor will then send the failed competency examination to program faculty.
- 3. Students who fail a competency examination must perform remediation on the specific procedure with a program representative/clinical preceptor. Remediation will consist of a review of the procedure and a successful simulation of the procedure with the clinical preceptor or their designee. A Competency Examination Remediation Form must be completed and signed by the clinical preceptor and returned to program faculty.
- 4. Any student who fails more than five (5) competency examinations per semester will receive a documented counseling action which may affect their clinical grade. Further failure of an additional three (3) competency examinations within the same semester will require the next corrective action, a written corrective action. Another three (3) failed competency examinations in the same semester will require the student to be a suspension or final written corrective action, and three (3) more failed competency examinations will require dismissal from the program. See the corrective action policy for more detail.

SIMULATED COMPETENCY EXAMS:

Thirty-nine (39) mandatory exams and fifteen (15) elective procedures must be performed satisfactorily to fulfill graduation requirements. Every effort must be made to complete all 39 mandatory radiologic procedure competencies must be done on patients (not on phantoms or simulated). In the event a student does not complete all mandatory or elective competency examinations, the following circumstances allow for simulation of the exams:

- Simulations may only be performed during the last week prior to program completion and requires program official approval.
- Only mandatory or elective procedures can be simulated.
- Permission must be obtained by a program official prior to the simulation.
- Simulations must be completed with clinical preceptor or designee, or program faculty.
- Images of the procedure must be available to complete the anatomy recognition and image analysis portion of the examination competency.

COMPETENCY EXAMINATION SCHEDULE:

1. Students are required to complete the competency examinations according to the following schedule:

```
\begin{array}{ll} 1^{\text{st}} \, \text{Semester} - 0 & 4^{\text{th}} \, \text{Semester} - 20 \\ 2^{\text{nd}} \, \text{Semester} - 15 \, \text{with repetitions} & 5^{\text{th}} \, \text{Semester} - 20 \, \text{plus 3 terminals} \\ 3^{\text{rd}} \, \text{Semester} - 15 \, \text{plus 3 mid-programs} & 5^{\text{th}} \, \text{Semester} - 20 \, \text{plus 3 terminals} \end{array}
```

- 2. Students are not permitted to complete competency examinations during the first semester.
- 3. The following list of competency exams serve as a guide for the student to follow in obtaining the required 70 regular competencies plus three (3) mid-program and three (3) terminal competency exams required for graduation from the Radiologic Technology Program. Esophagus, UGI, and BE exams must include after films (or be simulated) to earn competency. See the competency exam form for more detail.

4. The clinical preceptor or their designee can assign a mid-program or terminal competency to the student. Refusal to perform a mid-program or terminal competency could result in corrective action.

Mandatory Exams (39 required)

Abdomen Supine (KUB)	Abdomen Upright
Ankle	Contrast Enema – Single or Double Contrast
C-Arm Procedure (requires manipulation to	C-Arm Procedure (requires manipulation around a
obtain more than one projection)	sterile field)
Cervical Spine	Chest – AP (Wheelchair or Stretcher)
Chest Routine	Clavicle
Cross-Table (horizontal beam) Lateral Spine	Elbow
Femur	Finger or Thumb
Foot	Forearm
Hand	Hip
Humerus	Hip – Cross Table Lateral (horizontal beam)
Lumbar Spine	Knee
Pelvis	Pediatric Routine Chest
Portable Chest	Portable Abdomen
Ribs	Portable Upper or Lower Extremity
Skull/Headwork	Shoulder
Tibia-Fibula	Thoracic Spine
Trauma Upper Extremity – non-shoulder*	Trauma Shoulder (Y-view, transthoracic or axial)*
UGI Series – Single or Double Contrast	Trauma: Lower Extremity*
Wrist	Geriatric Chest Routine**
Geriatric Upper or Lower Extremity**	

^{*}Trauma is considered a serious injury or shock to the body and requires modification in positioning and monitoring of the patient's condition.

Elective Exams (15 required)

Abdomen Decubitus	AC Joints
Arthrography	Calcaneus (Os Calcis)
Chest Lateral Decubitus	ERCP
Cystography / Cystourethrography	Facial Bones
Esophagus (NOT Swallowing Function Study)	Intravenous Urography
Hysterosalpingography	Myelography
Mandible	Orbits
Nasal Bones	Patella
Paranasal Sinuses	Pediatric Upper Extremity
Pediatric Lower Extremity	Pediatric Portable (any)
Pediatric Abdomen	Sacrum and/or Coccyx
Sacroiliac Joints	Scoliosis Series
Scapula	Soft-Tissue Neck (Upper Airway)
Small Bowel Series	Sternoclavicular Joints
Sternum	Temporomandibular Joints
Toes	Zygomatic Arches
Geriatric Hip or Spine**	

5. Three (3) mid-program competency examinations will be completed with the clinical preceptor or designee, during the 3rd semester. Any three of the following can be completed for mid-program competency:

^{**}Geriatric Patient (At least 65 years old and physically or cognitively impaired as a result of aging)

- Abdomen Series
- Extremity: Elbow, Knee, or Wrist (choose one)
- Spine Series (may be chosen by clinical preceptor)
- Portable Chest or Cart Chest
- 6. Three (3) terminal competency examinations will be completed with the clinical preceptor or designee in the 5th semester. The following is a list of possible terminal competencies:
 - Barium Enema (single or double)
 - Multiple Spine Series (2 or more on the same patient)
 - Cranial/Facial Exam (skull 2 or more views)
 - Ribs
 - Multiple Extremities (3 or more on the same patient)
 - Translateral Hip
 - Shoulder with Y-view or Axillary view
 - Decubitus Chest
 - Any Pediatric Case (excluding bone age)
 - Portable Abdomen

POLICY TITLE: Computer, Internet, Social Media, PAGE: 1 of 1

& Cell Phone Use

ORIGINAL DATE: August 6, 2008 LAST REVIEWED: August 14, 2023

REVISED: May 24, 2021

COMPUTER AND INTERNET:

1. The use of School of Diagnostic Imaging computers is limited to activities related to the curriculum. You may check e-mail and conduct program related internet searches either before or after class.

- 2. The School of Diagnostic Imaging utilizes the learning management system and if allowed by the clinical site, the student can access their account to check on their classes. This must not be done if there are patients to be taken care of, and only if approved by the clinical site.
- 3. Hospital computers are **only** to be used for radiology related patient care functions. Students are not allowed to access his/her personal e-mail, or the internet during a clinical rotation.
- 4. The use of personal computers and/or electronic notebooks or tablets is allowed in the classroom if the student is utilizing an e-book version of the textbook. Students are not allowed to utilize their electronic devices during class for anything other than accessing course information.

CELL PHONE / ELECTRONIC DEVICE:

- 1. Class Days: Except for lunchtime, all phones, smart watches, and any other electronic device must be silenced and stored away in the classroom and computer room during class time. If, during a break, a student wants to use their electronic device, they must leave the classroom.
- 2. Clinical Days: The use of personal computers, electronic notebooks or tablets, smart watches, or any electronic device is **not** permitted in the clinical unless the student is on a break or lunch and only in nonpatient areas such as the lounge, lunch room, or locker room. Students are **NOT** permitted to carry cell phones or any electronic device during clinical time. Students who violate this policy will be given a corrective action.

SOCIAL MEDIA:

No student shall email, post, blog or otherwise mention or discuss any Cleveland Clinic business, patient or employee business, information or circumstance on any social media site. Examples include Facebook, Twitter, personal email or any other social outlet. Furthermore, no student shall take photographs within any Cleveland Clinic area or of any patient /patient information and post on any of the above mentioned social media outlets. This is considered a serious breach of ethics and/or confidentiality and will not be tolerated. A student may be removed from the clinical site and not allowed future access to any Cleveland Clinic site or location.

RECORDING DEVICE:

Audio recording of lectures may be permitted upon permission from the instructor. Video recording of lectures is strictly prohibited.

POLICY TITLE: Confidential Information PAGE: 1 of 2

ORIGINAL DATE: May 1, 1988 LAST REVIEWED: August 14, 2023

REVISED: August 03, 2015

POLICY:

The School of Diagnostic Imaging is committed to keeping its patients' health information confidential. Recent federal regulations (HIPAA) define privacy and security standards for healthcare organizations and mandate compliance. Hospital, entity and business ethics, as well as statutes and regulations create an obligation to keep in strict confidence all information about patient, including the patient's name, condition, and treatment records. Such information may only be released as necessary and in accordance with relevant statutes and regulations.

During the course of education, students may have access to confidential information concerning business, finances, patients and employees. This information may be in the form of verbal, written, or computerized data. The safeguarding of such confidential information is a critical responsibility and expectation of every student. Students are required to adhere to privacy and information security policies or face strict corrective action up to and including dismissal.

Management will ensure that students understand and adhere to this policy of confidentiality. Casual conversations regarding patients and co-workers are inappropriate. Conversations regarding patient care should take place in a private area with appropriate personnel.

REGULATIONS GOVERNING PATIENT CONFIDENTIALITY:

- 1. A student is not to discuss a patient's illness with him/her unless specifically ordered by the physician or during the course of professional care. Only the doctor is qualified to tell the patient how sick he/she is or how soon he/she may be expected to recover from his/her illness.
- 2. A student is not to discuss patients he/she hears about in entity with friends or in public areas inside or outside the entity. This particularly includes discussion of patients in areas such as coffee shops, snack bars, dining rooms, and while traveling to and from work via public transportation. The patient is entitled to complete privacy when he or she is confined to the hospital, and any intrusion upon this privacy may be subject to corrective actions.
- 3. A student is not to discuss his/her personal illnesses or problems with either hospital interns or residents or visiting physicians. He/she should make arrangements to visit his/her doctor's office for personal medical care.
- 4. If a student is involved in an incident, argument or accident with a patient, he/she should report the incident immediately to his/her clinical supervisor or department head for his/her review and deposition. School officials must also be notified of any incidents.
- 5. A student may read a patient's electronic medical record/information only if they are directly involved in providing patient care, in checking the quality of patient care or for a legitimate business need. This information may only be discussed with those directly involved in providing or supervising that patient's care.
- 6. Accessing the records of family, friends, co-workers, acquaintances, neighbors or anyone else if the

student is not involved in providing their care or for a legitimate business need, is grounds for dismissal.

- 7. A student may not access their own medical record. Students must follow the usual process as designated through the Health Information Services (Medical Records) department.
- 8. Students may not discuss or view confidential and personal matters related to fellow students.

CORRECTIVE ACTIONS:

Deliberate, accidental or careless release of patient information could result in legal liabilities for the student and/or hospital. The acquisition, release, discussion or other use of confidential information for purposes other than to conduct normal authorized business activities is strictly prohibited. Violation of confidentiality is a very serious matter and will be considered grounds for corrective action, up to and including dismissal. Federal law also includes criminal penalties for the misuse of protected health information.

POLICY TITLE: Contingency Plan PAGE: 1 of 1

ORIGINAL DATE: July 18, 2022 LAST REVIEWED: August 14, 2023

REVISED: December 1, 2023

Developed to address any type of catastrophic event that could affect student learning and program operations. For any catastrophic event that would not allow for in person classes, faculty will email the students with instructions to review the Power Point presentations on MyLearning and any other relevant assignments. Upon resolution of the event, faculty will present the didactic course information in person at the school. Any clinical closure will be communicated to the students by the program director and every effort will be made to assist the student in completing required competency exams.

Severe Weather:

- In the event of severe weather, such as excessive snow or ice, the program director will make a determination regarding closure of the school, to include both classes and clinical.
- The program director will contact the program faculty and students via text message. The clinical preceptors will be contacted via email.

Fire Plan Rally Point:

The rally point at the Cleveland Clinic Administrative Campus is the southwest corner of Building Two's surface lot. When at the clinical site, the clinical preceptor will review the fire plan with students.

Emergency Codes:

• During the Patient Care class during the first semester, the students are educated on the Emergency Codes and the procedures associated with each code as indicated below.



POLICY TITLE: Copyright Infringement **PAGE:** 1 of 1

ORIGINAL DATE: July 2, 2010 LAST REVIEWED: August 14, 2023

REVISED: August 03, 2015

The staff of School of Diagnostic Imaging maintains a copyright infringement policy to address sanctions and liabilities that students will face for downloading and distributing copyrighted materials.

Summary of Civil and Criminal Penalties for Violation of Federal Copyright Laws

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504, 505.

Violating this policy will result in a corrective actions according to the Corrective Actions Policy.

POLICY TITLE: Corrective Action **PAGE:** 1 of 4

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

OBJECTIVE:

Students enrolled in the Radiologic Technology Program must conduct themselves in an appropriate and professional manner and must adhere to the rules and regulations of the school and clinical sites. The purpose of this policy is to provide guidelines to assist with managing student performance or conduct issues that interfere with the safe, orderly, effective and efficient operation of the program and the organization. It provides standards and rules governing performance and a procedure for consistent, non-discriminatory application of the rules in the interest of maintaining the highest quality patient care and educational environment.

RECORD OF CORRECTIVE ACTIONS:

- Records of attendance are retained for a period of seven (7) years and are reviewable for matters pertaining to employment references, dismissal and reinstatement after dismissal.
- Records of corrective actions remain active in the student record for the length of time the student is enrolled. If any further infractions occur while in the program, they will be used as a basis for progressive corrective actions. Records of corrective actions within the program may be reviewed in a matter relating to employment.
- Any student receiving a second corrective action suspension within the length of the program, whether the two suspensions are for related or unrelated conduct, shall be dismissed.
- The receipt of any and all corrective action, whether in the capacity as a student or in the capacity as an employee of the Cleveland Clinic (if applicable), may result in denial of access to clinical sites and/or dismissal from the program.
- The School of Diagnostic Imaging administration reserves the right to fully disclose any and all issues of corrective action received prior to clinical site reassignment.
- If the student is denied access to the clinical site for any reason, and cannot be reassigned to another site, the student will not be able to complete the program requirements, and is therefore dismissed from the program.

PROCEDURE:

All students are expected to conduct themselves in a professional and caring manner at all times. In the event that this professional behavior is not exhibited, corrective actions may be implemented up to and including dismissal from the program. When it becomes necessary to implement corrective actions for performance deficiencies, acts contrary to established policies or procedures, or to assure that the school and clinical site best interests are served, reference will be made to the categories below which relate the severity of the offenses to the corrective action. However, categories are not all-inclusive and students may be disciplined for actions not specifically designated. Students who disagree with the action taken may proceed through steps outlined in the Grievance Procedure Policy. If a student is dismissed from the program, utilizes the Grievance Procedure Policy, and is denied re-acceptance, that student will not be permitted to reapply to the program.

POLICY IMPLEMENTATION:

Students who fail to abide by established standards and rules may be subject to corrective action. The step of corrective action may vary depending upon the nature of the infraction, the circumstances surrounding the offense and the student's past records. In the event that a student does not conduct him/herself in a professional manner the following corrective actions may take place. How rapidly a student goes through the following progressive steps, or at what stage the corrective actions will be initiated, will depend upon the seriousness of the offense. The program director will use their judgment to determine the appropriate step which applies in each particular circumstance. Regardless of the category in which an offense is listed, a particularly flagrant violation may result in more severe discipline than that which is indicated for that category. Conversely, in the event that mitigating circumstances are judged to exist, less severe discipline may be imposed than would otherwise be indicated for the category of offense

involved. Some infractions are not progressive in nature.

The four steps of corrective action are as follows:

• Step 1: Documented Counseling

For infractions considered less serious, a documented counseling action may be the first step in the discipline procedure. It consists of a verbal conference with the student and the program director or education coordinator and will be documented in writing and placed in the students' personal file.

• Step 2: Written Corrective Action

The written corrective action is a document summarizing the performance problem or incident. The document and situation will be reviewed with the student outlining the specific problem(s)/incident and warning the student that further behavior will result in further corrective action.

• Step 3: Suspension or Final Written Corrective Action

A suspension or final written corrective action may occur when undesirable performance or behavior continues. Depending on the seriousness of the incident or behavior the student may receive a suspension as the first step of the corrective action process. A suspension is generally for a three day period however, a greater or lesser number may be determined after review of the particular situation. Suspensions may be scheduled so that consistency and continuity of the learning process is not interrupted more than necessary and as close to the infraction as possible. The program director has the final decision on whether a suspension or final written corrective action is in the best interest of the student based on the specific infraction.

• Step 4: Dismissal

Dismissal will occur as the final step in the corrective action process. Dismissal may occur for serious offenses or for continued performance or behavioral problems.

- **A.** <u>CATEGORY I</u> (1st Offense: Documented Counseling; 2nd Offense: Written Corrective Action; 3rd Offense: Suspension or Final Written Corrective Action; 4th Offense: Dismissal)
 - 1. Attendance related offenses (see Attendance Policy).
 - 2. Failure to inform the clinical site <u>and</u> the school regarding absence within 2 hours of scheduled start time, whether scheduled or unscheduled (no call/no show) for clinical rotation.
 - 3. Failure to call the school for a class or clinical absence.
 - 4. Loitering during scheduled working and off-duty hours.
 - 5. Eating or drinking in unauthorized areas.
 - 6. Violation of hospital parking regulations.
 - 7. Sleeping during class or clinical.
 - 8. Unauthorized extended meal period or breaks.
 - 9. Failure to get approval from program officials for clinical schedule changes.
 - 10. Failing score on more than five (5) competency examinations in one clinical semester. (See Competency Policy for details.
 - 11. Failure to perform in a courteous, conscientious, and caring manner in responding to the needs of patients, visitors, fellow students, or employees.
 - 12. Unauthorized use of internet, electronic device or cell phone during class, lab or clinical.
 - 13. Failure to adhere to reasonable standards of personal hygiene, grooming and dress. This includes failure to adhere to established uniform requirements and failure to wear the appropriate CC identification badge.
 - 14. Copying answers directly from the answer key for workbook and classroom assignments.
- **B.** <u>CATEGORY II</u> (1st Offense: Written Corrective Action; 2nd Offense: Suspension or Final Written Corrective Action; 3rd Offense: Dismissal)
 - 1. Arriving to your assigned area late or leaving your assigned area early.
 - 2. Conduct prejudicial to the best interest of the hospital and/or school.
 - 3. Unacceptable or unsatisfactory job performance including causing or contributing to unsanitary or unsafe conditions and performing unsafe procedures.
 - 4. Profane or unprofessional language.
 - 5. Careless neglect or improper or unauthorized use of hospital and/or school property or equipment.
 - 6. Collecting funds or accepting gratuities.
 - 7. Repeated or chronic infractions of hospital and/or school rules with no evident improvement in performance or conduct.

- 8. Failure to observe school policies regarding required supervision and on repeat radiographs.
- 9. Inefficiency, incompetence or negligence in performance of duties.
- 10. Reporting to duty in an unfit or unsafe condition to work.
- 11. Failure to perform duties at minimally acceptable standards after counseling and guidance.
- 12. Repeated failure to pass an additional three (3) competency examinations in one clinical semester.
- 13. Violation of Copyright Infringement Policy.
- 14. Unauthorized use of Cleveland Clinic or VA identification badge.
- 15. Improper or negligent acts that cause damage to/waste of supplies, equipment or other property.
- 16. Any other failure of good behavior or neglect of duty.

C. CATEGORY III (1st Offense: Suspension or Final Written Corrective Action; 2nd Offense: Dismissal)

- 1. Reporting to school or clinical experience under the influence of alcohol or narcotic as evidenced by: a) inability to perform assigned duties or participate in class, b) demonstration of undesirable characteristics (such as odor of alcohol or other substances, attitude, uncooperativeness toward patients, staff, students, visitors, others).
- 2. Refusing to submit to a medical evaluation including testing when reasonably suspected of being under the influence of alcohol or drugs.
- 3. Inappropriate treatment of a patient for any reason.
- 4. Failure to fulfill responsibilities at clinical to an extent that might reasonably or does cause injury.
- 5. Insubordination or refusal to perform a reasonable assignment after having been instructed to.
- 6. Immoral or illegal conduct and any acts of dishonesty, including cheating or copying another person's work.
- 7. Sale, loan or gift of parking pass.
- 8. Any serious failure of good behavior or serious neglect of duty.
- 9. Failure to conform to professional ethics.
- 10. Fighting or gambling on Cleveland Clinic premises.
- 11. Repeated failure to pass an additional three (3) competency examinations in one clinical semester after failing five competencies.
- 12. Solicitation and/or distribution of literature in violation of hospital policy.
- 13. Posting on social media any information or event regarding patients, visitors, students, or employees that occur at the clinical site or school.
- 14. Use of any electronic device other than the institution computers while using Trajecsys for clocking in.
- 15. Clocking in and not reporting to your assigned area without permission or leaving your assigned area without permission.

D. CATEGORY IV (Dismissal upon 1st Offense)

- 1. Possession, use, or sale of alcohol, narcotics or controlled substances on hospital premises.
- 2. Threat of or actual physical or verbal abuse of patients, visitors, staff, employees or students.
- 3. Falsification of any official hospital or school record.
- 4. Any act of academic dishonesty as described in the Academic Honesty policy.
- 5. Willful damage to or theft of property of the school, hospitals, patients, visitors, employees or students.
- 6. Absence from classes or clinical experience without justifiable reason or without reporting off for three (3) consecutive clinical and/or class days, or three (3) incidents of no-call/no-show in a twelve (12) month period.
- 7. Possession of firearms or other weapons on school/hospital premises.
- 8. Unauthorized possession, use, copying or revealing of confidential information regarding patients, employees, students, or school/hospital activity including on social media sites.
- 9. Sexual, racial or other harassment or verbal or physical threats against a fellow student, employee, visitor or patient.
- 10. Conviction of a felony.
- 11. Theft, removal of, unauthorized possession, tampering with or use of property belonging to others.
- 12. Failing three (3) additional examination competencies during a clinical semester, after failing five, and then 3 more competencies.
- 13. Any conduct seriously detrimental to patient care, fellow students, employees, and the school or Cleveland Clinic operations.
- 14. Any other serious failure of good behavior or gross neglect of duty.

The list of offenses contained herein is meant to be illustrative and not all inclusive. Engaging in activity which is inconsistent with ordinary and reasonable standards of behavior necessary to the mutual welfare of the Cleveland Clinic, its employees, patients, and visitors will also subject a student to corrective action.

GENERAL

Providing the best possible patient care and understanding customer service is a priority at the Cleveland Clinic Health System. In support of this philosophy, The Cleveland Clinic Health System does not allow inappropriate treatment or behavior towards the customer. "Customer" is defined as any individual that comes in contact with the department or student during the normal course of doing business. This could include patients, visitors, family members, co-workers, etc. All employees and students are expected to conduct themselves in a professional and caring manner at all times when dealing with the customer.

POLICY TITLE: Course Descriptions **PAGE:** 1 of 4

ORIGINAL DATE: August 17, 2015

LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

RT 101 - Patient Care in Imaging

This course provides an overview of radiography in addition to the basic concepts of patient care, infection control, and the role of the radiographer as a member of the health care team. Content includes pharmacology and administration of diagnostic contrast agents and/or intravenous medications, patient assessment, and vital signs. Topics include: critical thinking, history of radiography, professional roles and behavior, professional attitudes and communications. Also included will be hospital and departmental organization, and hospital and program affiliation.

Prerequisite: Admission to Radiography Program

TECH 101 - Radiographic Technique I

This course is designed to give the student a working knowledge of the exposure factors required to produce quality radiographs. The material presented will enable the student to vary factors to control exposure, contrast, visibility of detail, spatial resolution, distortion, radiographic equipment, computed/digital radiography and the use of automatic exposure devices. Exposure compensation and technique calculations are emphasized. *Prerequisite: Admission to Radiography Program*

POS 101 - Radiographic Positioning and Procedures I POSL 101- Radiographic Lab

This course serves as an introduction to the basics of diagnostic radiography. The material presented will enable a student to interpret radiology requisitions, recognize the structure and organs visualized in a radiograph, and correctly position a patient for various radiologic examinations including pediatric and geriatric patients. A section on radiation protection will introduce the student to proper methods of protecting both the patient and themselves from ionizing radiation. Radiographic Positioning and Procedures I also includes the preliminary steps to taking a radiograph, general radiographic anatomy and positioning terminology, and anatomy and radiography of the thoracic viscera, upper extremities, lower extremities, shoulder girdle, bony thorax, urinary system, abdomen, pelvis, femur and hip, and mobile variations of exams. The student will participate in corresponding radiographic positioning labs.

Prerequisite: Admission to Radiography Program

CL 101 - Introductory Clinical Experience I

Supervised sessions emphasizing development of medical imaging skills. Practical application of radiographic positioning with emphasis on the thoracic viscera, upper extremities, lower extremities and shoulder girdle. Designed to give the student an introduction to the basics of diagnostic radiography in the clinical setting. Clinical experience in hospital environment for 8 weeks, 2.5 days a week.

Prerequisite: Admission to Radiography Program

TECH 102 - Radiographic Technique II

The course is designed to give an understanding of the components, principles, and operation of digital imaging systems found in diagnostic imaging. Factors that impact image acquisition, display, archiving and retrieval are discussed. Guidelines for selecting exposure factors and evaluating images within a digital system assist students to bridge between film-based and digital systems. Principles of digital quality assurance and maintenance are presented.

Prerequisite: TECH 102 - Radiographic Technique I

POS 102 - Radiographic Positioning and Procedures II POS 102L - Radiographic Lab

This course advances and increases the student's knowledge of diagnostic radiographic positioning. This course will cover the anatomy, positioning, and radiography of the vertebral column, sacroiliac joints, digestive system, biliary system, skull, facial bones, paranasal sinuses, radiography of the mouth, salivary glands and anterior neck and mobile variations of exams. The students will also participate in corresponding radiographic positioning labs. *Prerequisites: POS 101 - Radiographic Positioning and Procedures I; POSL 101 - Radiographic Lab I*

PHY 102 - Principles of Radiation Physics

This course is designed to present the student with the fundamentals of electrical and radiation physics and the basic principles underlying the operation of x-ray equipment and the circuit and tube components. Topics will include the radiation concepts of matter, energy, electricity, electromagnetism and the properties of x-rays. This course will also present the nature and characteristics of radiation, x-ray production, units of measure and the fundamentals of photon interactions with matter. Mammographic, fluoroscopic, and mobile equipment will be covered and tube rating charts and radiographic quality assurance and quality control will also be discussed. *Prerequisites: TECH 102 - Radiographic Technique I*

CL 102 - Introductory Clinical Experience II

Supervised sessions emphasizing development of medical imaging skills. Practical application of radiographic positioning with emphasis on the vertebral column, scoliosis, spinal fusion, sacroiliac joints, bony thorax (sternum, sternoclavicular joints, ribs), digestive system, urinary system, biliary tract and gallbladder, abdomen, pelvis, femur, and hip radiography. Students are required to successfully complete 15 clinical competency examinations supervised by a registered radiographer or clinical preceptor. Clinical experience in hospital environment for 16 weeks, 4 days a week.

Prerequisite: CL 101 - Introductory Clinical Experience I

ETH 101 - Healthcare Ethics and Law

This course is designed to provide the student with a fundamental background in healthcare ethics and law. The historical and philosophical bases of ethics as well as the elements of ethical behavior are discussed. The student will examine a variety of ethical issues and dilemmas that occur in clinical practice. An introduction to legal terminology, concepts and principles will also be presented. Topics include misconduct, malpractice, unintentional and intentional torts, HIPAA standards and compliance, legal and professional standards and the ASRT scope of practice. The importance of proper documentation and informed consent will be emphasized. *Prerequisites: RT 101 - Patient Care in Radiography*

POS 201 - Advanced Radiographic Procedures

Advanced Radiographic Procedures will include radiographic anatomy and positioning terminology that are relevant to the following: contrast arthrography, long bone measurement, reproductive systems, and mammography. Additional topics include radiation oncology, ultrasound, nuclear medicine, and bone densitometry. Trauma and surgical radiography will also be covered.

Prerequisite: POS 102 - Radiographic Positioning and Procedures II

BIO 101 - Radiation Biology and Protection

This course provides the student with information on the fundamental principles of radiation protection and radiation biology. Knowledge provided in this course is essential to understanding the biological effects of ionizing radiation and radiation protection at a basic scientific level and will serve as a standard for radiographers to promote the safe use of medical ionizing radiation. The course includes the study of legal and ethical radiation protection responsibilities of radiation workers, personnel monitoring devices, public and occupational dose limits, theory and operation of radiation detection devices, and state regulations governing radiation protection practices. Additional topics include the study of radiation sources, units of measure, effective dose limits, and biologic effects of radiation.

Prerequisite: PHY 102 - Principles of Radiation Physics

CL 103 – Intermediate Clinical Experience I

Supervised sessions emphasizing development of medical imaging skills. Practical application of radiographic positioning with emphasis on the skull, facial bones, and paranasal sinuses. Students are required to successfully complete 15 clinical competency examinations supervised by a registered radiographer or clinical preceptor. Clinical experience in hospital environment for 12 weeks, 4 days a week.

Prerequisite: CL 102 - Introductory Clinical Experience II

SP 201 - Special Procedures

This course is designed to advance the student's knowledge of specialized procedures in the imaging department. The material presented will enable a student to recognize the structure and organs visualized in a radiograph, and to correctly position a patient for various advanced and special radiologic examinations. Special Procedures will include vascular, cardiac and interventional radiography, the central nervous system, magnetic resonance imaging, and computed tomography.

Prerequisite: POS 202 - Advanced Radiographic Procedures II

RT 202- Radiographic Analysis

This course is designed to provide a basis for analyzing the radiographic quality of the following procedures: chest, abdomen, upper extremities, shoulder girdle, lower extremities, hip and pelvis, spine, skull, facial bones, gastrointestinal tract, and pediatric radiography. The students will demonstrate patient assessment, proper positioning, exposure factors, and radiation protection. Included are the importance of minimum imaging standards, discussion of a problem-solving technique for image evaluation and the factors that can affect image quality.

Prerequisite: Radiographic Positioning & Procedures sequence, Radiographic Technique sequence

CL 201 – Intermediate Clinical Experience II

Supervised sessions emphasizing development of medical imaging skills. Practical application of radiographic positioning. Students are required to successfully complete 20 clinical competency examinations supervised by a registered radiographer or clinical preceptor. Students are required to successfully complete 20 clinical competency examinations supervised by a registered radiographer or clinical preceptor. Clinical experience in hospital environment for 16 weeks, 4 days a week.

Prerequisite: CL 103 - Intermediate Clinical Experience I

PATH 201 - Radiographic Pathology

This course is designed to introduce concepts related to disease and etiological considerations with emphasis on radiographic appearance of disease and impact on exposure factor selection. The material covered should enhance the students' knowledge regarding interpretation of clinical information provided on the requisition and/or patient's chart. There will also be case studies and critical thinking exercises designed to allow the student the opportunity to consider the relevance of radiographic procedures with regards to technical and patient considerations. The course also includes a written research paper on a chosen pathology with oral presentation. *Prerequisite: Anatomy and Physiology (Program Prerequisite)*

CS 203 – Introduction to Cross-Sectional Anatomy

This course is designed to present students with fundamental anatomy and pathology associated with computed tomography and magnetic resonance imaging. The various structures will be demonstrated in the axial, sagittal and coronal imaging planes.

Prerequisite: Anatomy & Physiology I & II

REG 201 - Registry Review I

This course provides a review of basic knowledge from previous courses and helps the student prepare for national certification examinations for radiographers. Topics include: image production and evaluation; radiographic procedures; anatomy, physiology, pathology, and terminology; equipment operation and quality control; radiation protection; and patient care and education.

Prerequisite: Departmental Approval

CL 202 – Advanced Clinical Experience

Supervised sessions emphasizing practical application of radiographic positioning with clinical experience. Emphasis on enhanced student knowledge of pathology and the relation to radiographic imaging quality. Students are required to successfully complete 20 clinical competency examinations supervised by a registered radiographer or clinical preceptor. Students are also required to successfully complete three (3) terminal competency examinations supervised by their clinical preceptor /supervisor. Clinical experience in hospital environment for 16 weeks, 4 days a week.

Prerequisite: CL 201 - Intermediate Clinical Experience II

REG 202 - Registry Review II

This course is a continuum of Registry Review I in preparation for the ARRT Registry Examination. This course provides a review of basic knowledge from previous courses and helps the student prepare for national certification examinations for radiographers. Topics include: image production and evaluation; radiographic procedures; anatomy, physiology, pathology, and terminology; equipment operation and quality control; radiation protection; and patient care and education.

Prerequisite: REG 201 -Registry Review I

PAGE: 1 of 2

LAST REVIEWED: February 5, 2024

POLICY TITLE: Course Sequence and Clock Hours

Intermediate Clinical Experience I

ORIGINAL DATE: January 28, 1994

REVISED: February 5, 2024

CL103

1 st Semester		Hours per Week	Number of Weeks	Total Hours
RT101	Patient Care in Radiography	4	16	64
TECH101	Radiographic Technique I	4	16	64
POS101	Radiographic Positioning & Procedures I	4	16	64
POSL101	Radiographic Positioning Lab	4	16	<u>64</u>
			TOTAL	256
CL101	Introductory Clinical Experience I	14	8	112
		FALL S	EMESTER TOTA	AL 368
2 nd Semester	- SPRING			
PHY102	Principles of Radiation Physics	2	16	32
ΓECH102	Radiographic Technique II	2 2 2 4	16	32
OS102	Radiographic Positioning & Procedures II	2	16	32
POSL102	Radiographic Positioning II Lab	4	16	<u>64</u>
			TOTAL	160
CL102 Intro	ductory Clinical Experience II	21	16	336
		SPRIN	G SEMESTER TO	OTAL 49
3 rd Semester	- SUMMER			
ETH101	Healthcare Ethics and Law	2	12	24
POS201	Advanced Radiographic Procedures	2	12	24
SP201	Special Procedures in Radiologic Technology		12	<u>24</u>
			TOTAL	72

SUMMER SEMESTER TOTAL 408

336

12

28

4 th Semester –	FALL	Hours per Week	Number of Weeks	Total Hours
PATH201 BIO101 REG201	Radiographic Pathology Radiation Biology & Protection Registry Review I	2 2 2	16 16 16 TOTAL	32 32 <u>32</u> 96
CL201	Intermediate Clinical Experience II	28	16	448
		FALL	SEMESTER TOT	'AL 544
5 th Semester –	SPRING	FALL	SEMESTER TOT	'AL 544
5 th Semester – RT202 CS203 REG202	SPRING Radiographic Analysis Introduction to Cross-Sectional Anatomy Registry Review II	FALL 2 2 2 2	16 16 16 16 TOTAL	32 32 32 32 96

SPRING SEMESTER TOTAL 544

	Didactic Hours	Clinical Hours
1 st Year		
First Semester	256	112
Second Semester	160	336
Third Semester	72	336
2 nd Year		
Fourth Semester	96	448
Fifth Semester	96	448
TOTAL	680 Hours	1680 Hours
Total Didactic Hours	680.0 1680.0	
Total Clinical Hours Total Program Hours	2360.0	

POLICY TITLE: Degree Completion Requirements **PAGE:** 1 of 2

ORIGINAL DATE: August 17, 2015 LAST REVIEWED: August 14, 2023

REVISED: May 1, 2018

Students graduating from the program must have an associate degree or higher to take the ARRT registry examination. The following information details all course work required for degree completion at Cuyahoga Community College, Kent State University - Ashtabula branch, Lorain County Community College, and Lakeland Community College.

Cleveland Clinic Radiology Program courses transfer as a block credit toward the degree, not as individual classes/credit.

Cuyahoga Community College (must have accumulative 2.5 GPA for degree completion)

	Course Number	Course Name
1	BIO 1221	Anatomy and Physiology for Medical Imaging or substitution of BIO 2331 and 2341, Anatomy and Physiology I and II
2	ENG 1010	College Composition I or ENG 101H, Honors English
3	ENG 1020	College Composition II
4	MA 1020	Medical Terminology I
5	MATH 1240	Contemporary Math (or higher level – must be approved by CCC)
6	PSY 1010	General Psychology or PSY 101H, Honors Psychology

Kent State University - Ashtabula

	Course Number	Course Name
1	BSCI 11010	Anatomy & Physiology for Allied Health I
2	BSCI 11020	Anatomy & Physiology for Allied Health II
3	ENG 11011	College Writing I
4	HED 14020	Medical Terminology (3 credits)
5	MATH 11009 or	Modeling Algebra or
	MATH 11010	Algebra for Calculus
6	PSYC 11762	General Psychology
7	CHEM 10055	Molecules of Life or
	CHEM10050	Fundamentals of Chemistry

Lorain County Community College

	Course Number	Course Name
1	AHLN 110	Medical Terminology
2	ENGL 161	College Composition I
3	ENGL 162	College Composition II
4	MTHM 158 <u>or</u>	Quantitative Reasoning or
	MTHM 168	Statistics
5	BIOG 121	Anatomy and Physiology I
6	BIOG 122	Anatomy and Physiology II
7	BIOG 123	Cross-Sectional Anatomy
8	SOCY 151	Introduction to Sociology

Lakeland Community College

Lan	cianu Community Conc	ege en
	Course Number	Course Name
1	BIOL 2210	Anatomy and Physiology I
2	BIOL 2220	Anatomy and Physiology II
3	HLTH 1215	Medical Terminology
4	MATH 1330	Statistics for Health Science Mathematics or 3 credit hour college level math
5	ENGL 1110	ENGL1110 English Composition I(A) or ENGL 1111 English Composition I(B)
3 C	redits from two of the fo	llowing categories: Arts & Humanities, Social & Behavioral Sciences, and Natural
Sci	ences	
A 1	11.11 1.0 11.11	

Additional 3 credits math or one of the categories above or English 120 or Effective Interpersonal Communication 1100

Additional 14 credits from categories above and/or other general studies courses or basic/related foundational courses.

^{**}LCC Students <u>must</u> meet with a counselor to confirm degree requirements**

POLICY TITLE: Educational Records **PAGE:** 1 of 2

ORIGINAL DATE: May 17, 2007 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

This policy is in accordance with Family Educational Rights and Privacy Act of 1974.

A. You may inspect and/or review any of your official records and files.

Exceptions:

- 1. Your parents' confidential/financial statement may not be inspected.
- 2. Confidential letters and recommendations placed in your file prior to January 1, 1975, are not available to you. Right of access to future confidential recommendations in the areas of admission, job placement and awards may be waived by you.
- 3. Medical, psychiatric or similar records are not accessible to you. A doctor or other qualified professional may inspect your record if you so desire.
- B. No one may inspect your record.

Exceptions:

- 1. Faculty at the School of Diagnostic Imaging who have legitimate academic interests and School secretaries who must work with the students' files.
- 2. School officials who have legitimate academic interests.
- 3. Individuals concerned in connection with a student's application for or receipt of financial aid.
- 4. Representative of State educational authorities.
- 5. Representative of the administrative head of Cleveland Clinic.
- 6. Representative of the Comptroller General of the United States.
- 7. Representative of the Secretary of Education.
- 8. Representative of the Joint Review Committee on Education in Radiologic Technology.
- 9. Representative of the Ohio State Board of Career Colleges and Schools.

The School of Diagnostic Imaging is not required to notify you that your records have been inspected as listed in exceptions under "B".

- C. You will receive prior notice when your records are being inspected, without your consent, in the following situation: Pursuant to a court order or lawfully issued subpoena.
- D. You may sign a release of information form to give consent to release your records to other persons or agencies. Such forms are available in the School of Diagnostic Imaging office.

On this form, you must indicate:

- 1. The records to be released.
- 2. The reason the records are to be released.
- 3. To whom the records are to be given.
- E. All students have a file which is maintained in the School of Diagnostic Imaging office. If you have any questions or concerns about your record, you should discuss such issues with the program director.

Appropriate changes, deletions or corrections will be considered at this time. If this conference does not resolve the differences, you may request that a hearing be held. You have the right to legal counsel at the hearing at your expense. The program director will provide a written decision and state the reasons for the conclusion. You may add written explanatory materials to your file by submitting such to the program director.

- F. Student's financial aid records are maintained by the School of Diagnostic Imaging.
- G. All files and required documents, for students receiving veteran's educational benefits, will be maintained in the school office. Such files will be retained for three (3) years. Contents of permanent educational record:
 - Official School of Diagnostic Imaging transcript.
 - Official transcripts from all schools attended including high school. GED may be accepted in lieu
 of a high school transcript.
 - Results of standardized tests, as applicable.
 - Final Summary
- H. Request for Transcripts: Requests for transcripts must be submitted using the Request for Official Transcript form which can be found by accessing the School of Diagnostic Imaging website, or requesting a copy from the program. The request must be signed by the student. The average time for transcript requests to be processed is 5-7 working days during the academic term, but may take longer at the end of the term. There is a \$5.00 fee for each official copy of a student transcript.
- I. Request for Course Materials: Students are provided with course descriptions, syllabi and other materials for radiography courses throughout the program. Students are expected to retain such materials for any further use and/or reference. The school is not responsible for providing additional copies for student use.

POLICY TITLE: Employment Guidelines for Students **PAGE:** 1 of 1

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: June 29, 2016

The School of Diagnostic Imaging does not attempt to control whether or not a student works part-time or the number of hours worked. Should a student be hired as a technologist assistant (or any other position) at a clinical site, time as an employee cannot be used as clinical experience.

Clinical competencies cannot be performed during hours worked as a technical assistant, technologist aide or any other employment position within the hospital. All clinical competencies must be completed during scheduled program clinical hours.

The school will not change rotation schedules, objectives, test dates or other requirements to accommodate a student's employment schedule.

POLICY TITLE: Evaluations & Counseling PAGE: 1 of 1

ORIGINAL DATE: January 24, 1994 LAST REVIEWED: August 14, 2023

REVISED: November 11, 2015

1. Students are required to have their technologists complete the required number of student evaluation forms per semester. (See policy titled *Grading Procedures*) These student evaluation forms must be given to the clinical preceptor at each facility by the technologist, who will review them with the student, sign and date them, and send them to the School of Diagnostic Imaging office. All evaluations must be turned in promptly and not all at the end of the semester.

- 2. Counseling sessions will be conducted throughout the semester as needed to review:
 - a. Summary of student evaluation forms
 - b. Student competency examination summary form
 - c. ARRT mandatory and elective summary form
 - d. Semester grades
 - e. Attendance
 - f. Additional counseling sessions will be conducted if the program director, education coordinator or clinical preceptor finds them necessary.
- 3. Students are responsible for compliance and corrective actions may be imposed for non-compliance.

POLICY TITLE: Full Time, Transfer **PAGE:** 1 of 1

& Advanced Placement

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: April 8, 2024

REVISED: April 8, 2024

A student may request placement from the 21 month program into a part time status temporarily due to extenuating circumstances. It should be noted, however, that courses are taught only once a year. All course work and clinical time must be completed prior to graduation. See the Course Sequence and Clock Hours Policy for class and clinical hours.

FULL TIME STUDENT:

Full time students are those students who attend the Radiologic Technology Program 35 hours per week.

TRANSFER STUDENT:

The program does not accept transfer students.

TRANSFER CREDIT:

Classes may not transfer as credit courses to an institute of high learning. Other courses may be added at the school's discretion. The Cleveland Clinic School of Diagnostic Imaging reserves the right to change course offerings or course content.

ADVANCED PLACEMENT STUDENT:

The program does not accept advanced placement students.

POLICY TITLE: Grading Procedures **PAGE:** 1 of 2

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

1. The following grading scale is used:

93 -100	Α	4.0
84 - 92	В	3.0
75 - 83	C	2.0
67 - 74	D	1.0
0 - 66	F	0.0

- 2. Students must maintain a "C" grade or better in each academic and clinical course in the Radiologic Technology Program. Students not satisfying this minimal academic requirement will be dismissed from the program.
- 3. If a student does not complete all required course assignments by the end of the semester, they will receive an incomplete grade. Incompletes must be resolved within 5 weeks into the next semester or the grades converts to an "F", or failing grade.
- 4. Students are counseled as needed throughout the semester regarding academic grades, clinical grades, attendance, tardiness, evaluations, semester GPA, cumulative GPA, and other pertinent information regarding student progress.
- 5. Course grades are reviewed by the instructor and students are counseled as needed throughout the semester. At mid-semester the program director identifies students who are at risk of not passing a class and sends an email for them to meet and discuss what approach to take to improve the grade.
- 6. Students who are dismissed for academic reasons may utilize the Grievance Procedure Policy.

CLINICAL GRADE PURPOSE:

To encourage students to fully participate in the clinical experience, and to provide students and the school, a means of evaluating the quantity and quality of participation.

POLICY:

Students will be given an established number of points for each clinical experience. Each semester clinical grade will be determined by:

- a. The number of evaluations turned in by the end of the semester. Four points will be deducted from the established number of clinical points for each missing evaluation.
- b. The number of competency evaluations completed by the end of the semester. Eight points will be deducted each week that the competencies are not turned in.
- c. The number of failed competency examinations each semester as outlined in the Competency Examination Policy.
- d. Observance of program and department policies and practices. Each corrective action will deduct eight points.
- e. Only one student clinical evaluation per two-week rotation will be accepted.

Clinical evaluations are reviewed when received by the coordinator. The coordinator meets privately with each student who has a score of 2 or less or there are comments on the evaluation that need to be discussed.

The following worksheet will be used to determine clinical grades:

1st Semester Clinical Experience:

Number of Evaluations (4)			4 points off for each one not turned in by end of semester
Radiology Department Orientation Check List			8 points off if not completed
Program/Department Policies & Practices			8 points off for each corrective action

Fall & Spring Semester Clinical Experiences:

Number of Evaluations (8)			4 points off for each one not turned in by end of semester
# of Comps Completed (see Competency Evaluation Policy)			8 points off, each week comps are not completed after semester ends
Program/Department Policies & Practices			4% off - documented counseling 10% off - written corrective action 16% off - final written or suspension

Summer Semester Clinical Experience:

Number of Evaluations (6)			4 points off for each one not turned in by end of semester
# of Comps Completed (see Competency Evaluation Policy)			8 points off, each week comps are not completed after semester ends
Program/Department Policies & Practices			4% off - documented counseling 10% off - written corrective action 16% off - final written or suspension action

POLICY TITLE: Graduation **PAGE:** 1 of 2

ORIGINAL DATE: March 4, 1994 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

PURPOSE:

This policy provides the student with guidelines regarding graduation requirements. All students must meet the following criteria for graduation. Students graduate from the School of Diagnostic Imaging with a certificate in Radiologic Technology after completing 5 semesters of education. Students must graduate within 32 months (150% of program length) after starting the program.

CRITERIA:

- 1. Satisfactory completion of all program courses.
- 2. All competencies must be completed as outlined in the Competency Examination Policy.
- 3. All required ARRT mandatory & elective competencies must be completed.
- 4. All required ARRT general patient care procedures must be completed.
- 5. All required Developmental Examinations and corrections must be completed.
- 6. All regular and make-up hours must be completed.
- 7. Tuition payment and fees must be paid in full.
- 8. All reference books or other material must be returned, including any resources from the CC Library.
- 9. ID badge, dosimeter, and markers must be returned. A fee will be charged for missing ID badge, dosimeter, and markers. All fees must be paid prior to graduation.
- 10. Graduation survey must be completed.
- 11. Employer release form must be signed.
- 12. All required college-level courses for degree completion must be completed and official transcript received by program director.
- 13. Formal venipuncture class must be satisfactorily completed.
- 14. Satisfactorily write a short paper on professionalism. (Instructions on OSRT meeting form)
- 15. Students who utilize Federal Financial Aid, must complete the Department of Education Exit Interview.

REQUEST FOR LETTER OF RECOMMENDATION:

To request a letter of recommendation from a faculty member of the Cleveland Clinic School of Diagnostic Imaging, a student must fill out and submit the Student Request for a Letter of Recommendation or Verbal Reference form found at http://ccf.org/sodi. It is recommended that this form be submitted four weeks in advance of the due date. If it is submitted within two weeks of the due date, completion of the letter is not guaranteed. The program faculty reserves the right to deny any request for any reason.

REQUEST FOR OFFICIAL TRANSCRIPT:

A student may request an official transcript from the Cleveland Clinic School of Diagnostic Imaging by filling out and submitting the Official Transcript Request form found at http://ccf.org/sodi. Please be aware that there is a \$5.00 processing fee that must be paid before the request is processed. Also, in accordance with the Federal Family Educational Rights & Privacy Act (FERPA) of 1974 and subsequent amendments, academic records cannot be released without the student's consent. All outstanding obligations to the School of Diagnostic Imaging (financial, academic, or administrative) must be cleared before a transcript request can be processed.

Graduating students who are attending the ceremony are not required to attend clinical on that day. If a student is not attending the graduation ceremony, they are expected to be at clinical that day or they can use PTO.

POST GRADUATION CERTIFICATION AND LICENSURE:

- 1. American Registry of Radiologic Technologists (ARRT) Examination
- 2. Ohio Department of Health Radiologic Technology License
- 3. Other states may or may not have licensure laws or specific requirements. Check with the ARRT at www.arrt.org for more information.

ACADEMIC DEGREE REQUIREMENT:

Eligibility requirements for ARRT certification in Radiography require candidates to have an associate or more advanced degree from an accrediting agency recognized by the ARRT. The degree does not need to be in the radiologic sciences, and it can be earned before entering or during the radiography program. Students will not be able to take ARRT certification exam until they complete all degree and radiography program requirements.

PROGRAM AWARDS AT GRADUATION:

- **A. ACADEMIC AWARDS:** Academic awards are based on the final cumulative grade point averages achieved by graduates.
 - A graduate with a GPA 3.5 3.99 will be commended as graduating with Academic Honors.
 - A graduate with a GPA of 4.0 will be commended as graduating with Academic Distinction.
- **B. JRCERT AWARD OF EXCELLENCE:** The School of Diagnostic Imaging presents this award to one graduate of the radiology program who has been selected by the program faculty. The faculty selection is based on the following criteria.
 - Academic excellence.
 - Excellence in clinical practice.
 - Participation in activities related to student and community welfare.
 - Demonstration of Cleveland Clinic values including the Imaging Institute's Commitment to Respect.
- **C. EXCEPTIONAL GRADUATE AWARD:** The Radiologic Technology Program presents this award to one graduate that has been selected by the program faculty based on the following criteria:
 - Academic achievement.
 - Clinical achievement.
 - Involvement in extracurricular activities.
 - Service to others through volunteerism.
 - Leadership.
 - Demonstration of Cleveland Clinic values including the Imaging Institute's Commitment to Respect.

POLICY TITLE: Grievance Procedure **PAGE:** 1 of 3

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: August 17, 2015

GRIEVANCE PROCEDURE POLICY STATEMENT:

The School of Diagnostic Imaging recognizes that students have the right to due process in academic and non-academic matters.

PURPOSE:

The appeal mechanism provides a thorough, timely and objective assessment and resolution of student concerns and assures that students are treated in a fair, reasonable and nondiscriminatory manner. An appeal can be any concern or complaint asserted by a student regarding interpretation, application or breach of any policy, practice or procedure.

ELIGIBILITY:

This procedure is available to any student enrolled in a Cleveland Clinic enterprise in-house allied health education program, who does not have any affiliation with a college / university. Students may file an appeal to reestablish their eligibility to receive Title IV financial assistance by submitting, in writing to the program director, the basis for the appeal, which may include any of the following; death of a relative, injury or illness of the student, or any other special circumstances. If a student files an appeal and is denied, they are no longer in satisfactory academic progress and are not eligible for Title IV Financial Aid.

PROCEDURE:

The student must submit in writing, a description of why they were dismissed from the program, what steps they will take to change their behavior, and what changes will occur to allow them to continue in the program. The Cleveland Clinic desires to resolve student grievances, complaints and concerns in an expeditious, fair, cordial and professional manner. A student may resolve a grievance by initiating the following steps:

INFORMAL PROCESS:

The student is advised to discuss the grievance informally with the person who is the source of the grievance. If the parties resolve the grievance, it is deemed closed. If the grievance is not resolved at this level, the student may request an informal review by the program director. It is expected that most problems or complaints of concern to students will be discussed and resolved in a timely fashion informally between the student and the program director. If the program director is the basis of the complaint, the student may initiate the formal grievance procedure. The Director, Center for Health Sciences Education, will be notified immediately by the program director of an impending formal grievance.

FORMAL GRIEVANCE PROCEDURE:

The formal grievance procedure begins when a dated written complaint is submitted to the program director. The written complaint may be submitted via email. An appeal must be initiated within 5 business days of the date on which cause of the appeal is known. A copy of the appeal must be sent to the Center for Health Education.

SATISFACTORY ACADEMIC PROGRESS:

Any student who is appealing a corrective action or grade using the program Grievance Policy may be allowed to continue with the program with the approval of the program director until the grievance procedure has concluded. Students may file an appeal as described below.

Steps:

- 1. The first step of appeal should involve discussion with the program director. Every effort should be made to resolve the issue at this step of the process. The program director has 5 business days to respond to the student in writing following the initial appeal request by the student as to the decision rendered.
- 2. If the decision rendered at the first step is deemed unacceptable by the student, the second step is an appeal to the administrator of the Imaging Institute. The Imaging Institute administrator has 5 business days to respond to the student following notification of appeal as to the decision rendered.
- 3. If the decision rendered at the second step is deemed unacceptable by the student, the third step of the appeal involves the Health Professions' Education Council's Student Appeals Committee. The committee chairperson and two committee members will review each appeal. The decision and recommendations at this step are final. The Health Professions' Education Council has 10 business days to respond to the student in writing following notification of appeal as to the decision rendered.
- 4. An appeal should be filed with the Center for Health Sciences Education office. The education office will assign someone to assist the student throughout the appeal process.
- 5. The student shall have the opportunity to appear in person before the reviewing party at each step of the appeal process.
- 6. Appeals at each step must be made in writing by the student within 10 business days after receipt of the reviewing party's response. Email is acceptable. The Center for Health Sciences Education must be copied on all communications at each step of the appeals procedure.
- 7. The Human Resources and Legal Departments are available, in a consultative capacity, to the program director, program's medical director, system-wide education coordinator, director, Allied Health Educational Partnerships or to the Chairman, Education Institute as it relates to the student's appeal.
- 8. At the discretion of the program director, the student may continue in the program until the appeal process is completed. The school faculty reserves the right to suspend clinical experience and class attendance during the appeal process. In such an event that the appeal is granted, any time missed must be completed.
- 9. If a student is not satisfied with the result of the appeal process, the student may wish to contact the following accreditation organizations:

Joint Review Committee on Education in Radiologic Technology 20 Wacker Drive, Suite 2850 Chicago, Illinois 60606-3182 Web Site: www.jrcert.org Phone: 312-704-5300

Ohio Department of Health Radiologic Licensure Program:

The Radiologic Licensure program ensures standards of knowledge and skill for operators who apply radiation to humans for diagnostic or therapeutic purposes. Through continuous enforcement, initiative and action, the program assures medical patients receive quality diagnostic imaging and services.

The program is funded by initial license application fees, renewal fees and educational provider fees. The

program has licensed more than 17,000 operators, 110 educational facilities, and 180 continuing educational courses.

Mailing Address: Ohio Department of Health Radiologic Licensure 246 North High Street Columbus, OH 43215

Telephone: (614) 752-2370 Fax: (614) 564-2460

E-mail: Xray.Licensure@odh.ohio.gov

Cleveland Clinic Radiologic Technology Program

POLICY TITLE: Harassment **PAGE:** 1 of 2

ORIGINAL DATE: May 17, 2007 LAST REVIEWED: August 14, 2023

REVISED: August 15, 2014

PURPOSE:

To provide an academic environment throughout the School of Diagnostic Imaging that is free of harassment of any kind so that students are afforded the opportunity to perform to the best of their abilities. Sexual harassment is a form of sex discrimination covered under Title VII of the Civil Rights Act of 1964, which prohibits sex discrimination in employment, and Title IX of the Educational Amendments of 1972, which prohibits sex discrimination against students and employees in educational institutions receiving Federal funds.

POLICY:

The School of Diagnostic Imaging prohibits harassment in any form, including harassment based on race, sex, religion, sexual orientation, gender identity or expression, national/ethnic origin and/or disability. The School of Diagnostic Imaging is committed to providing an environment free of any conduct or communication constituting harassment in any form defined by the state and/or federal law. Any violation(s) of this policy may result in corrective action based upon a review of the circumstances, the nature of the event and the context in which the alleged incidents occurred. Such corrective action may include dismissal from the radiography program, prosecution and/or civil action.

HARASSMENT:

Harassment is an assault on an individual's dignity and worth. It can include, but is not limited to:

- Offensive jokes
- Ridicule
- Racial, religious, sexual or ethnic slurs
- Unwelcome advances, requests or demand for favors, verbal abuse or kidding that is distasteful
- Discussion, gossip, rumors or comments regarding an individual's personal life, relationships and/or preferences

SEXUAL HARASSMENT:

The Equal Employment Opportunity Commission (EEOC) defines sexual harassment as any unwelcome sexual advances and/or other verbal or physical conduct of a sexual nature when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or student status
- Submission to or rejection of such conduct is used as a basis for decisions affecting that individual with regard to employment or to student status (e.g. grades, references, assignments, etc.)

Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or educational experience, or creates an intimidating, hostile or offensive work and/or educational environment.

If you are a student who believes you have been subjected to (1) sexual harassment by Cleveland Clinic program faculty, staff or employee; or (2) any other form of gender discrimination under Title IX, you may report such misconduct or file a formal complaint with the Title IX Coordinator in the Education Institute, Administration Office, Main Campus, NA22. Complaints must be submitted in writing.

If you are a student who believes you have been or are the victim of sexual harassment, including sexual assault, sexual violence or other misconduct by another student, you may report such conduct or file a complaint under Title IX with the Title IX Coordinator in the Education Institute, Administration Office, Main Campus, NA22. Complaints must be submitted in writing.

Title IX Office

TitleIX@ccf.org 216-317-6494 Main Campus, JJS4-618 Mail Code JJ40

Office of Educational Equity

EduEquity@ccf.org 216-317-6494 Main Campus, JJS4-618 Mail Code JJ40

POLICY TITLE: Hazing PAGE: 1 of 2

ORIGINAL DATE: July 18, 2022 LAST REVIEWED: August 14, 2023

PURPOSE:

To prohibit student hazing and to provide for penalties in compliance with applicable state law.

STATEMENT: Cleveland Clinic is committed to maintaining a safe, healthy, and efficient working and learning environment for its students, trainees, employees, patients, and visitors. Consistent with the spirit and intent of this commitment, Cleveland Clinic prohibits hazing as defined in this policy.

DEFINITIONS:

Cleveland Clinic United States Locations: Main Campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital Weston, Coral Springs Ambulatory Surgery Center, and all Family Health Centers, Physician practice sites, Nevada practice sites, emergency departments, express care centers, urgent care centers, and ambulatory surgical centers reporting to these facilities.

Cleveland Clinic Premises: All Cleveland Clinic buildings, other buildings where Cleveland Clinic employees work, parking garages, parking lots, or other open areas owned or under control of Cleveland Clinic, in any Cleveland Clinic vehicle, or at any other location while on Cleveland Clinic business.

Affiliate School: An education institution with which Cleveland Clinic has an affiliation agreement through which enrolled students of the institution participate in Cleveland Clinic's educational program or activities.

Affiliate Student: An affiliate student is a participant in a Cleveland Clinic education program or activity who is enrolled in an affiliate school.

Educational Program or Activity: Any program or activity offered at Cleveland Clinic or by Cleveland Clinic employees in the scope of their duties that is educational in nature beyond on-the-job training, general interest, or routine continuing education programs. Factors in determining whether a program or activity is educational include whether it is structured through a particular course of study; whether participants earn academic credit toward a degree or certificate, or qualify to sit for professional exams; or whether a program provides preceptors, exams, or other evaluation process. Educational program and activities include, without limitation, degree- or certificate-granting programs offered by Cleveland Clinic and affiliated colleges and universities; clinical rotations for degree- or certificate-granting programs; medical and other residence programs; research and medical fellowships; internships; and educational programs offered to middle school, high school, college, and university students.

Hazing: Doing any act of coercing another, including the victim, to do any act of initiation into any student or other organization or any act to continue or reinstate membership in or affiliation with any student or other organization that causes or creates a substantial risk of causing mental or physical harm to any person, including coercing another to consume alcohol or a drug of abuse.

Program Leadership: For the purposes of this policy, refers to the administrators of a student's educational experience or program. Program leadership includes program directors, education coordinators, preceptors, and other Cleveland Clinic employees with the authority to address misconduct in a program/education experience.

Student: For the purposes of this policy, a student is a person enrolled in a Cleveland Clinic education program or activity who is not employed by Cleveland Clinic. The term "student" includes affiliate students and trainees who are not employed by Cleveland Clinic.

POLICY IMPLEMENTATION

Scope: This policy applies to students as that term is defined in this policy. This policy applies to conduct that takes place on or off Cleveland Clinic premises and that involves two or more people who are affiliated with the Educational Program or Activity. Hazing directed toward or by individuals other than students falls under the Professional Conduct Policy.

Procedure: Individuals who become aware of any student engaged in hazing shall report the conduct to the student's program leadership. The student's program leadership shall investigate the report, as appropriate, in accordance with the disciplinary process for the program. Where the hazing conduct may constitute a crime, program leadership shall report it to the appropriate law enforcement agency.

Violation of Policy: Any student who is found to be in violation of this policy is subject to disciplinary action up to and including dismissal from their program/educational experience. A student may be suspended from participation in the program/educational experience pending the outcome of an investigation. An affiliate student's program leadership will inform an affiliate school of any actions taken under this policy.

Program of Education, Prevention, Treatment, and Support: Cleveland Clinic shall make anti-hazing education available to students, administrators, faculty members, and other caregivers.

Regulatory Requirement/References:

Ohio Revised Code Section 3345.19 Anti-Hazing Policy

Oversight and Responsibility: Education Institute is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements. It is the responsibility of each hospital institute, department, education program and activity, and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

POLICY TITLE: Healthcare Coverage, **PAGE:** 1 of 1

Workplace Injury & Illness

ORIGINAL DATE: February 3, 2005 LAST REVIEWED: August 14, 2023

REVISED: August 3, 2015

POLICY:

The School of Diagnostic Imaging/Cleveland Clinic recognizes that personal health maintenance is the responsibility of the individual students. Students are responsible for the cost of their own health care insurance while enrolled in the School of Diagnostic Imaging. The school has information available regarding student health insurance plans. Students are required to submit proof of health insurance coverage upon acceptance into the program. All students must complete annual TB testing and seasonal flu vaccine. Students who do not comply will not be allowed to attend clinical.

PROCEDURE:

Students experiencing a work related needle stick or blood/body fluid splash should report to the Center for Corporate Health at their clinical facility as soon as possible (refer to Infection Control Policy). Any work related injury is not covered by the Cleveland Clinic and the student should follow the procedure outlined below. An incident report is required to initiate a visit to the Center for Corporate Health. The student will supply the School of Diagnostic Imaging a copy of their incident report detailing their injury.

WORK RELATED INJURY:

If a student incurs an accidental injury while at the clinical site other than a needle stick or blood/body fluid splash, they may visit the emergency department, be sent home, or report to their own private physician for care. The student is responsible for any cost incurred for treatment.

NON WORK-RELATED ILLNESS:

A student who becomes ill while on duty at the hospital with a nonwork-related illness must report to their clinical preceptor or supervisor, and the School of Diagnostic Imaging. The clinical preceptor, supervisor, or program official may elect to send the student home and the student may elect to see their own physician.

POLICY TITLE: Health Requirements **PAGE:** 1 of 2

ORIGINAL DATE: May 3, 2012 LAST REVIEWED: August 14, 2023

REVISED: May 1, 2018

POLICY & PROCEDURE:

The School of Diagnostic Imaging/Cleveland Clinic recognizes that personal health maintenance is important, and it is the responsibility of the individual students to follow the required process to ensure that they are medically cleared to participate in the clinical experience. Students are responsible for submitting the documentation to the program officials by the specified date or they will not be able to continue in the program. Students are responsible for all cost incurred for health requirements. The School of Diagnostic Imaging follows the CDC Guidelines for Adult Immunization.

N95 PARTICULATE RESPIRATOR: Students are not fit-tested for N95 particulate respirators and therefore cannot assist on exams where respirators are required.

MRI SCREENING FORM: A completed MRI screening form must be completed and reviewed prior to attending clinical experience.

ADMISSION HEALTH REQUIREMENTS: (Halley updated this per Keri 7/28/23)

Listed below are the requirements that are used for medical clearance:

- Signed physical exam by a Physician (MD)/Certified Nurse Practitioner (CNP) or Physician's Assistant (PA) required for ALL entering students and performed within the last six (6) months.
- Negative tuberculosis screening:
 - Two-step Mantoux test (TB test), QuantiFERON-TB Gold tet, or T-Spot test within one year before the clinical rotation start date, with annual updates while in the clinical portion of training.
- Appropriate immunizations for:
 - Measles (Rubeola)
 - o Mumps
 - o German measles (Rubella)
 - Chickenpox (Varicella)
 - o Tdap (Tetanus, Diptheria, Pertussis) booster within the last ten (10) years
- A positive Hepatitis b IgG Antibody Titer or signed declination form assuming the risk of exposure
- Annual Influenza vaccination (November 1 March 31)
- Compliance with any future tests required by Cleveland Clinic

ANNUAL HEALTH REQUIREMENTS:

A. TB Screening:

- The School of Diagnostic Imaging, Cleveland Clinic students are required to be screened annually for tuberculosis (TB). The testing schedule will follow CDC/OSHA guidelines.
- The School of Diagnostic Imaging shall maintain a roster of students requiring annual TB screens.
- Students who fail to complete TB screens may be subject to a corrective action up to and including dismissal. In addition, students who have not completed the necessary TB screens will not be scheduled at the clinical site until the screen is completed. The time missed must be made up after graduation.

 The School of Diagnostic Imaging will notify the student when they are required to have their TB screening completed.

B. Influenza vaccination:

- Annual seasonal flu vaccine is mandatory.
- Influenza season typically occurs between October and March. The exact dates are determined annually when influenza is identified in the community.
- The Cleveland Clinic will consider religious and/or medical conflicts with the vaccine. Exemption requests should be submitted to the program director. Students who do not receive the seasonal flu vaccine will not be permitted to participate in clinical experience during influenza season.

POLICY TITLE: Infection Control PAGE: 1 of 1

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: December 28, 2020

Students are provided educational courses designed to inform them that there is the potential for hospital acquired infections as a result of exposure in the department. Many patients are of an undiagnosed nature when diagnostic workups are performed. All patients should be considered potentially infectious and therefore require that Standard Precautions be followed. Hand washing between patient contacts is essential in preventing the transmission of infection. Personnel and students must have a basic knowledge of how diseases are spread and the precautions that must be taken in order to contain them. In this way, imaging services can be provided around the clock without compromise to the patient and with a minimum of risk for all.

Students should observe all policies as outlined in the Infection Control Manual of each of the clinical sites as made available during orientation to each site. These policies demonstrate concern for patients and coworkers and affords the student prompt medical attention should the need arise.

- Hand washing between patient contacts is essential. The hospital's hand washing policy must be followed.
- Students are to observe the prescribed dress code for the clinical and the operating room.
- Eating and drinking are prohibited in the Radiology Department except in the designated areas.

When isolation procedures are necessary, portable equipment will be used in the patient's room when possible. Students are to be thoroughly familiar with the hospital's isolation policies. When certain procedures are essential to the patient's care, we have an obligation to perform those services. These patients are entitled to the same high-quality care that we administer to other patients.

If a student is exposed to blood/body fluids or needle stick during their clinical rotation, they are to follow the individual hospital guidelines for exposure. At the Main Campus the student or their clinical preceptor /supervising technologist should contact the Exposure Hotline at 216-445-0742 and visit the Infection Control Website at http://intranet.ccf.org/qpsi/infection/post.asp. If the student is at a regional hospital, the student would report to the Center for Corporate Health during their hours of operation. If the incident occurs after hours and the patient is a high-risk patient (i.e. infectious blood condition) the student should go to the emergency department. If the patient is **not** high risk, the student would report to the CFCH the next business day. In either case, all students must complete a SERS report at http://intranet.ccf.org/sers/ to report all work-related injuries/illnesses, exposures to blood/body fluids or needle sticks.

To provide caregivers with enhanced infection prevention during a respiratory viral pandemic to minimize the risk of transmission of pathogens (e.g., COVID-19, Influenza) spread by direct, or indirect contact, with respiratory droplets from symptomatic, pre-symptomatic and asymptomatic caregivers and patients. Symptomatic, asymptomatic and pre-symptomatic individuals may pose an infection risk to caregivers and patients during recognized outbreaks of respiratory viral infections. The CDC recommends universal source control measures such as universal use of personal protective equipment. On the Cleveland Clinic Today page, visit the Center for Health Profession Education link at Health Professions Education Home (ccf.org) and click on the COVID-19 Resources for the latest information regarding student COVID Exposure.

POLICY TITLE: JRCERT Standards Non-Compliance **PAGE:** 1 of 1

ORIGINAL DATE: February 5, 1997 LAST REVIEWED: August 14, 2023

REVISED: June 11, 2012

The Radiologic Technology Program of the School of Diagnostic Imaging, Cleveland Clinic is accredited and operates in accordance with the accreditation standards set forth in the "Standards for an Accredited Educational Program in the Radiologic Science" established by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The JRCERT is located at 20 N. Wacker Dr., Suite 2850, Chicago, IL 60606-3182 (312-704-5300).

Staff: Each staff member of the Radiologic Technology Program has access to the JRCERT Standards. It is the responsibility of each staff member to insure that the Standards are being closely observed. Any non-compliance issues should be handled directly by the staff member, whenever possible, and written notification provided to the program director outlining the non-compliance issue and the action taken or a recommendation which would enable the program to become compliant. This written notification should be made within three working days of the staff member becoming aware of the issue. Receipt of this written notification should be acknowledged by the program director within five working days.

Student's Rights: Each student has access to a copy of the JRCERT Standards. A hard copy of the Standards is available in the reception area, and students can also access the Standards online at www.jrcert.org. Students have the right to submit allegations against a JRCERT accredited program if there is reason to believe the program has acted contrary to the JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students. This should only be done after the student has first attempted to resolve the issue directly with program officials by following the grievance procedures outlined in the Grievance Procedure Policy.

Non-Compliance versus Grievance, JRCERT Statement:

"The JRCERT is required to be responsive to allegations of non-compliance with any of its Standards. An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student. The JRCERT takes seriously and follows up appropriately any allegation that an accredited program is not maintaining compliance with its accreditation standards. Please be advised the JRCERT cannot advocate on behalf of any one student."

POLICY TITLE: Leave of Absence (LOA) **PAGE:** 1 of 1

ORIGINAL DATE: May 23, 1994 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

- 1. The School of Diagnostic Imaging, Cleveland Clinic Health System, reserves the right to deny or grant leaves of absence. Leaves of absence must be approved by the program director.
- 2. Students must complete a Leave of Absence form and submit it to the program director. This should be submitted at least two weeks in advance, if possible.
- 3. Leaves of absence, up to one year, will be considered for students with medical, emergency conditions or pregnancy. Verification is required. There are no additional charges incurred for extending the length of the program due to an approved leave of absence. If a student that is receiving VA benefits has absences exceeding 20% of the scheduled hours in a program and/or takes an approved leave of absence, the school will notify the VA to terminate the payment of educational benefits.
- 4. If a student is using Title IV funds for tuition and fees, the leave of absence may not exceed 180 days in any 12-month period and is the only leave of absence granted in that 12-month period (see exceptions listed below). One additional leave of absence may be approved if it does not exceed 30 days and the school determines that it is necessary due to unforeseen circumstances. This type of leave of absence would have to be subsequent to the granting of the single leave of absence, which is granted at the schools discretion. Subsequent leaves of absence may be approved if the school documents that they are granted for jury duty, military reasons, or circumstances covered under the Family and Medical Leave Act of 1992 (FMLA) (Public Law 103-3), enacted February 5, 1993.
- 5. Students on a leave of absence (LOA) must complete all course work, didactic and clinical, before graduation. See attendance policy for make-up time specifics. Course work covered during most semesters is provided only once a year, therefore each request must be considered individually.
- 6. Students on a leave of absence (LOA) are required to speak with the program director two weeks prior to the petitioned return date. Students returning from a medical leave of absence must submit to the program director the Return to Clinical form completed and signed by their doctor which states that they are physically able to return to full clinical duties with no restrictions. Students are not allowed to return to their clinical site until this form is submitted and approved by the program director.
- 7. Students returning from a leave of absence (LOA) are not guaranteed clinical placement in the program if their return causes a violation of the Supervision of Students Policy. Every effort will be made, however, to permit the return of the student on the return date requested.

POLICY TITLE: Magnetic Resonance Imaging Safety **PAGE:** 1 of 1

ORIGINAL DATE: August 26, 2015 LAST REVIEWED: August 14, 2023

REVISED: August 26, 2015

All patients, students and any other individual entering the MR environment must have up-to-date safety documentation. It is the student's responsibility to update their safety information immediately upon any change, especially upon implantation of a mechanical, metal or ferrous device. The electromagnetic fields associated with the MR environment pose a serious risk of injury to anyone with certain implants, devices, or materials. Hazards associated with the electromagnetic field include, but are not limited to; missile effect accidents, dislodgement or excessive heating of a ferromagnetic object, induction of electrical currents, and the misinterpretation of an imaging artifact as an abnormality.

The missile effect refers to the fringe field's ability to attract a ferromagnetic object into the scanner with considerable force. Common objects associated with these incidents include oxygen cylinders, floor buffers, IV poles, mop buckets, carts, chairs, ladders, monitors, tools, scissors, traction weights, and sand bags containing metal fillings. Allowing such devices into the MR environment can result in injury to the patient and/or the technologist.

Any ferromagnetic object or device placed in the magnetic field must have research documentation stating that the object's associated attractive force is insufficient to move or dislodge the object in situ or affect its intended function. Students must also adhere to the pulse sequences and techniques recommended by the manufacturer of these devices. This will eliminate temperature elevations in the object and avoid the induction of a current in the device. Examples of objects capable of generating an electrical current include electrocardiographic leads, indwelling catheters with metallic components, guide wires, disconnected or broken surface coils, certain cervical fixation devices, or improperly used physiologic monitors.

Implants, devices, and materials within the magnetic field, although proven safe, may still cause artifacts. Artifacts cause signal loss and distortion of the image resulting from a disruption of the magnetic field. The artifact's severity is associated with the object's magnetic susceptibility, quantity, shape, orientation or position in the body.

All students in the MR environment must adhere to the safety standards outlined above, as well as abide by the rules set forth by the clinical site. If there is any question of the safety of a patient or student, the student must consult a qualified technologist or physician and documentation must be filed with the school. Any student that does not adhere to the rules, or jeopardizes the safety of any individual, including themselves, will minimally receive a written corrective action. Any blatant violation of the safety policy may result in dismissal from the program, upon review by the advisory committee.

It is the policy of the Cleveland Clinic School of Diagnostic Imaging that all students, must have an MRI safety screening form on file at the school. Additionally, the Cleveland Clinic requires students who are doing a rotation in MRI to bring a copy of their safety screening form to the MRI department.

POLICY TITLE: Mission Statement, Vision & Philosophy **PAGE:** 1 of 2

ORIGINAL DATE: June 23, 1983 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

CLEVELAND CLINIC MISSION STATEMENT:

To provide better care of the sick, investigation into their problems, and further education of those who serve.

CLEVELAND CLINIC "PATIENTS FIRST" PHILOSOPHY:

We put patients first by placing the good of our patients above every other consideration and dedicate every working minute to their health and wellbeing.

SCHOOL OF DIAGNOSTIC IMAGING MISSION STATEMENT:

To develop exceptional imaging professionals whose expertise will meet the needs of the community they serve, and whose academic education and clinical experience will provide a foundation for lifelong learning.

VISION STATEMENT:

Our vision is to provide best in class student experiences, superior program outcomes and excellence in education.

PROGRAM PHILOSOPHY:

- 1. The curriculum of the Radiologic Technology program reflects the Patient's First Philosophy of the health system. The School of Diagnostic Imaging's teachings revolve around a humanistic and compassionate approach to obtaining radiologic examinations.
- 2. The basic purpose of the school is to provide learning opportunities and to prepare students to become competent health care workers in the radiologic community.
- 3. We believe that education is a continuous, dynamic process in acquiring abilities including knowledge, understanding and skills which have a direct influence on the growth and development of an individual.
- 4. We believe that learning is an integrative process taking place in the student which results in a change of behavior. Students learn by utilizing all their senses. We believe that motivation and a conductive environment are essential for learning. Learning is best achieved when it proceeds from the normal to the abnormal, from the simple to the complex, and when the students are actively participating in the learning process.
- 5. We believe that radiography is an essential occupation in the health field, concerned with providing technical assistance to the radiologist in the room and carrying out the procedures requested by a physician. On the basis of our beliefs, the students are taught the knowledge, skills and abilities necessary to provide those services appropriate to the hospital/clinical environment.
- 6. We believe it is our responsibility to be aware of current trends in imaging techniques. Therefore, we include these trends in the learning experience of the student, so that the student can be an effective member of the allied health team.
- 7. We believe that the evaluation of the student is a vital component of any educational program and is an

on-going process. Although conventional methods of evaluation of theoretical and clinical learning are used, we recognize the importance of continual change and refinement, and the development of increasing efficient instruments for evaluation.

- 8. An annual budget for the School of Diagnostic Imaging will be prepared by the program director and the Cleveland Clinic finance department and the Program Director.
- 9. The Cleveland Clinic will provide the program with a qualified full-time program director, coordinator, and instructor who will assume direct supervision of program content, coordination of didactic and clinical education, student evaluation and counseling, budget preparation and file maintenance. A clinical instructor or designee will be provided by each clinical sites to supervise, instruct, advise and evaluate s preceptor tudents.
- 10. Cleveland Clinic will provide the program with a classroom facility, computer lab, and adequate office space and equipment.
- 11. The School of Diagnostic Imaging Advisory Committee will be established for the purpose of planning and evaluating the school's quality of education.
- 12. A comprehensive Master Plan for the Radiologic Technology Program will be maintained by the program director and will be available at all times on the shared network drive. These documents will be reviewed and updated annually.

PAGE: 1 of 1

POLICY TITLE: Ohio Department of Education

Ohio Department of Health

ORIGINAL DATE: April 30, 2019 LAST REVIEWED: August 14, 2023

REVISED: March 8, 2021

Ohio Department of Education

Any person adversely affected by the actions of a registered school may file a complaint with the Ohio Department of Education and the Ohio State Board of Career Colleges and Schools. The complaint must be in writing and signed by the complainant and shall be filed with the board within six months after the violations allegedly were committed.

Ohio Department of Education Telephone: 614-466-2752
Ohio Board of Career Colleges and Schools Fax: 614-466-2219

30 East Broad Street E-mail: bpsr@scr.state.oh.us

Columbus, OH 43215

The following is the link to file a complaint:

https://scr.ohio.gov/ConsumerInformation/FilingaComplaint.aspx

Radiologic Licensure

The Ohio Department of Health Radiologic Licensure program ensures standards of knowledge and skill for operators who apply radiation to humans for diagnostic or therapeutic purposes. Through continuous enforcement, initiative and action, the program assures medical patients receive quality diagnostic imaging and services.

The program is funded by initial license application fees, renewal fees and educational provider fees. The program has licensed more than 17,000 operators, 110 educational facilities, and 180 continuing educational courses.

Mailing Address:

Ohio Department of Health Telephone: 614-752-2370 Radiologic Licensure Fax: 614-564-2460

246 North High Street E-mail: Xray.Licensure@odh.ohio.gov

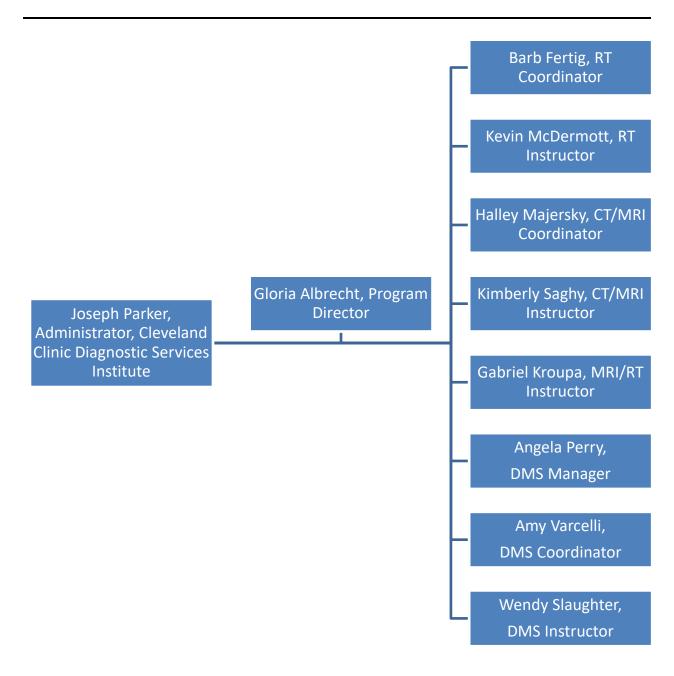
Columbus, OH 43215

Cleveland Clinic School of Diagnostic Imaging Radiologic Technology Program

POLICY TITLE: Organizational Chart **PAGE:** 1 of 1

ORIGINAL DATE: June 23, 1983 LAST REVIEWED: August 14, 2023

REVISED: August 16, 2023



POLICY TITLE: Patient Identification **PAGE:** 1 of 2

ORIGINAL DATE: May 1997 LAST REVIEWED: August 14, 2023

REVISED: August 15, 2014

PURPOSE:

Health care processes such as medication administration, specimen collections, surgical procedures and diagnostic procedures always begin with knowledge that the correct patient is receiving the correct care in all patient care settings.

POLICY:

Proper identification of a patient is to be performed by all personnel who are providing care, treatment, or services such as administering medication, blood, or blood components; when collecting blood samples and other specimens for clinical testing to that patient. Cleveland Clinic requires the use of two standard identifiers.

These include:

- 1. Patient's Name, first and last
- 2. Patient's Date of Birth

A third identifier, the Cleveland Clinic Identification number (Cleveland Clinic ID) or medical record number may be used as an option to either the patient name or date of birth when it is not possible to obtain an accurate name or date of birth for the patient.

EXCEPTION:

Blood/blood component administration requires the use of three identifiers:

- 1. Patient's Name, first and last
- 2. Patient's Date of Birth
- 3. Cleveland Clinic ID or medical record number

PROCEDURE:

- 1. An identification band is placed on the following patients: all inpatients, procedural, surgical, observational status, emergency department and patients receiving care or services with more than minimal risk. The ID band contains at least the following information: patient name, date of birth and the Cleveland Clinic ID number or medical record number. In the event a patient cannot respond due to medical condition or is a minor, verification of the patient's identification will be obtained from a relative, guardian or prior caregiver who can make a positive identification. Supporting documentation, such as a picture ID, should be obtained if at all possible. A patient presenting unable to communicate his/her identity and no means to identify himself/herself is assigned a temporary name (i.e., John Doe) and temporary medical record number.
- 2. The following groups of patients with minimal risk do not require identification bands:
 - a) Outpatient Rehab Services
 - b) Outpatient diagnostic testing and non-invasive procedures performed in Laboratory,

- Cardiology, Radiology, Respiratory Therapy, EMG, and Biometrics
- c) Routine office visits with no invasive procedures scheduled
- 3. Patient Identification involves: reliably identifying the individual and matching the service or treatment to that individual. The following steps must be followed:
 - a) Before providing care, treatment, or services, the clinical caregiver will ask the patient to state his/her name and date of birth. The Cleveland Clinic ID or medical record number may be used as a secondary option for either the patient name or date of birth when it is not possible to obtain accurate name or date of birth information.
 - b) The clinical caregiver will visually match the stated patient name and date of birth (or Cleveland Clinic ID number or medical record number) with a 'source of truth'. 'Sources of truth' include the Cleveland Clinic ID band and the patient's medical record. For patients not requiring an ID band, match the stated patient name and date of birth to the requisition as defined below.
 - c) Once the patient is identified, the caregiver will match the service or treatment to the patient. For example, match or verify the patient's name and date of birth (or Cleveland Clinic ID number or medical record number) with the requisition, eMAR, physician order, blood product, consent, surgery schedule, etc.
- 4. When active patient involvement is not possible or the patient's reliability is in question the clinical caregiver (physician, nurse, radiology tech, lab tech, etc.) who is currently providing care to that patient will confirm the patient's identity using the two approved identifiers. Patient with ID Band: The clinical caregiver is to use the two approved identifiers from the ID band and compare to the medical record.
- 5. Patient previously identified No ID Band: The clinical caregiver (physician, nurse, radiology tech, lab tech, etc.) currently providing care to the patient will participate in the identification process by identifying two approved identifiers from the medical record. If the care giver is unable to verify two patient identifiers prior to providing care in an emergent situation, formal identification of the patient will occur as soon as possible.
- 6. Identification discrepancies or uncertainties are resolved prior to providing any further care, treatment or services.
- 7. Patients not requiring a Cleveland Clinic ID band will be asked to state their full name and birth date.

PAGE: 1 of 1

POLICY TITLE: Post Exposure Shuttering, Cropping,

Electronic Masking and Annotation

ORIGINAL DATE: June 15, 2017 LAST REVIEWED: August 14, 2023

REVISED: June 15, 2017

DEFINITIONS:

• **Cropping:** the process of selecting and removing a portion of the image.

- **Electronic masking:** electronic collimation or cropping of the digital radiographic image that occurs during post-processing of the acquired image and does not alter the size of the irradiated field.
- **Processing:** manipulation of the raw data just after acquisition.
- **Shuttering:** a post processing technique that may be used to eliminate ambient light around an image for the sole purpose of improving the quality of the displayed image. It should not be used as a substitute for insufficient collimation of the irradiated field.
- Annotation: information added to digital images after processing.

DIGITAL IMAGING CROPPING OR MASKING IN RADIOGRAPHY:

A digital image should not be cropped or masked such that it eliminates areas of exposure from the image that are presented for interpretation. To determine that exposed anatomy on an image is not significant or of diagnostic value is a medical decision and is therefore outside of the scope of practice for a radiologic technologist.

Pre-exposure collimation of the x-ray beam is necessary to comply with the principle of as low as reasonably achievable (ALARA).

It is outside of the scope of practice of a Radiologic Technologist to use post-exposure shuttering, cropping, electronic collimation or electronic masking to eliminate any anatomical information. This information is a part of the patient's permanent medical record, and should therefore be presented to the radiologist to determine whether the exposed anatomy obtained on any image is significant or of diagnostic value.

IMAGE ANNOTATION AND MARKERS:

Correct identification of all radiographs is vital. All radiographic images must be marked correctly with a right or left identification side marker which is placed directly on the IR or tabletop prior to exposure. Electronically annotating the right or left marker post-exposure is prohibited because of the potential for error and legal implications.

POLICY TITLE: Post Graduate Job Placement **PAGE:** 1 of 1

ORIGINAL DATE: June 17, 2005 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

Students may be recruited by the Cleveland Clinic for post graduate employment based on recommendation from the radiology supervisors and managers if the student demonstrates good clinical skills and attendance. The radiography program does not guarantee job placement within the Cleveland Clinic or elsewhere.

The radiography program makes every effort post all notices of employment opportunities available to the student and periodically receives telephone calls, flyers and/or letters regarding job opportunities in all areas of radiography. In addition, the student has available to them information on continuing education in radiation therapy, nuclear medicine, diagnostic medical sonography, mammography, MRI and CT.

The radiography program holds a mandatory resume and interviewing techniques presentation for senior students prior to graduation. This workshop is given by the Cleveland Clinic Imaging Department Human Resources recruiter. The student can also request personal assistance from program faculty to assist in writing a cover letter and resume.

Please see the Graduation Policy for information regarding the process of obtaining recommendation letters and official transcripts.

POLICY TITLE: Pregnancy **PAGE:** 1 of 3

ORIGINAL DATE: February 15, 2002 LAST REVIEWED: August 14, 2023

REVISED: June 14, 2017

PURPOSE:

To limit occupational exposure of the pregnant radiography students.

POLICY:

As specified in 10 CFR 20.1208 of the U.S. Nuclear Regulatory Commission, it is the school/hospital's responsibility to ensure that the dose to the embryo/fetus from the occupational exposure of a declared pregnant student/worker not exceed 5 mSv over the entire pregnancy. The school must also make an effort to avoid substantial variations in a uniform monthly exposure.

PROCEDURE:

A. Declaration of Pregnancy

The declaration of pregnancy must be in writing and is voluntary. That is, the pregnant student need not declare her pregnancy if she so chooses. Further, the school is not required to restrict the dose to the embryo/fetus to 5 mSv until a written declaration of pregnancy is made. It should also be noted that the declaration can be revoked by the pregnant student at any time. The revoking of the declaration of pregnancy must also be in writing.

The written declaration of pregnancy must include an estimated date of conception. The estimated date of conception will be necessary in the determination of the accumulated dose the embryo/fetus may have received prior to the declaration of pregnancy.

The accumulated dose the embryo/fetus may have received prior to the declaration of pregnancy will have to be subtracted from 5 mSv to determine the dose the embryo/fetus will be allowed to receive during the remainder of the pregnancy. If the dose is determined to be 4.5 mSv or greater by the time the declaration is made, it is the school/hospital's responsibility to ensure that the embryo/fetus receives only 0.5 mSv during the remainder of the pregnancy.

B. Calculations of Exposure

The 5 mSv dose limit shall be the sum of the deep-dose equivalent to the declared pregnant worker from external sources of radiation and the dose from radionuclides in the embryo/fetus and/or pregnant student. Radionuclides that may have been administered to the worker for diagnostic or therapeutic procedures should not be considered.

It is the responsibility of the Radiation Safety Officer to implement this policy and to assure compliance with the policy.

PREGNANT STUDENT ALTERNATIVES:

A pregnant student can request a leave of absence (LOA) up to one year. The first 3 months of pregnancy are the most important, so the student is urged to make her decision quickly. Although it is both procedure and practice of the program to offer the utmost in radiation protection to all students, the School of

Diagnostic Imaging, Cleveland Clinic or any of its clinical affiliates will not be responsible for injury to either the mother or child during pregnancy.

When the student returns to the program after the pregnancy has been completed, the student will present a return to clinical approval form from their physician.

PREGNANCY POLICY INFORMATION:

When at the clinical site, all students must adhere to radiation safety practices. Since exposure to radiation may affect a developing fetus, it is in the best interest of the pregnant student to report the pregnancy so as to have the radiation exposure monitored accurately. However, the student is under no obligation to do so. If the student chooses to do so, she should notify the program director in writing.

It is the policy of the radiography program that no program objective should be sacrificed however, consideration will be given to a change in the clinical rotation assignments due to pregnancy. It is advised that, based upon the knowledge that a fetus is particularly sensitive, the student should decide whether or not the added risk of working with radiation is sufficiently low. The student is advised that the American College of Radiology recommends that no consideration be given for termination of pregnancy if the fetus exposure is less than 100 mSv. This amount of radiation to a technologist/student is unheard of in routine diagnostic radiology. The recommendation applies to a patient who has received repeat x-ray examinations directly to the abdomen during pregnancy.

As part of the initial information provided to new students, the National Council on Radiation Protection and Measurements Report No.116 recommends that the whole pregnancy exposure be limited to less than 5 mSv. If, during the course, the student wishes further information or a review of the known effects of radiation on the unborn, then this information may be obtained by contacting the program's radiation safety officer.

The student should notify her physician that she is enrolled in a radiography program and obtain a statement of recommendation for continuance in the program.

INFORMATION FOR THE STUDENT RADIATION WORKER:

By definition a toxic substance is one which is able to cause some harm to humans. The factors which influence the harm depend upon the type of toxic substance, the dose given to the human and the susceptibility of the human. In general, the human is at reduced risk from toxic substances when the cells are either not dividing or dividing quite slowly as in the case of the oldest members of society. On the other hand it is generally agreed that the fetus has a greater sensitivity to any toxic substance since its cells are dividing at an incredibly rapid rate. Even an individual that is four or five years old has a markedly reduced rate of growth when compared to the fetus. For this reason radiation protection has always been directed towards the fetus and only recently have the other toxic substances in our environment been identified by the general population as being hazardous to the fetus. The NRC has reviewed the available scientific literature and has concluded that the 5 mSv limit specified in 10 CFR 20.1208 provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to total lifetime risk of leukemia and other cancers associated with radiation exposure during pregnancy.

PERSONNEL MONITORING:

The declared pregnant student that is likely to receive, from external sources, a deep dose equivalent in excess of 1 mSv must wear a second personnel monitoring device at waist level behind the lead apron, if applicable, to record the most representative exposure to the embryo/fetus. Since it is the policy of the School of Diagnostic Imaging for students to wear a dosimeter at the collar level, a second personnel monitoring device must be issued to be worn at waist level for the declared pregnant student. In this way the most representative exposure to the embryo/fetus can be recorded while maintaining a consistency with previous exposure records

STUDENT RESPONSIBILITIES:

Once the declaration of pregnancy has been made in writing, a review of the individual's exposure history must be made. If it is determined to be unlikely that the embryo\fetus will receive in excess of 5 mSv during the entire gestation period, reassignment or restrictions may not be necessary. However, if it is determined that the dose to the embryo/fetuses is likely to exceed 5 mSv consideration may be given to reassignment of the declared pregnant student to an area of little or no radiation exposure or to placing certain duty restrictions on the individual to limit the exposure to the embryo/fetus. Clinical time missed during the clinical leave of absence must be completed prior to graduation.

The pregnant radiography student has the following options available:

- Continue in the Radiography Program as scheduled with no change in clinical rotation.
- Request a full leave of absence from both academic and clinical course work. (see Leave of Absence policy)
- Request a clinical leave of absence, but continue with academic course work.
- The student can rescind the declaration of pregnancy at any time in writing.

Duties that may be considered for restriction because they represent a higher probability for the embryo/fetus to exceed 5 mSv are as follows:

- Radiology: General, Fluoroscopy, Portables, Specials, and CT: No restrictions necessary.
- Surgery: No restrictions necessary.
- Cath Lab: Wrap-around aprons with 0.5mm of lead or equivalent should be worn.
- Nuclear Medicine: The declared pregnant student should be restricted from involvement in I-31 therapies for the treatment of hyperthyroidism or thyroid carcinoma.
- Radiation Therapy: The declared pregnant student should be restricted from handling brachytherapy source.

EDUCATION:

Educational material is made available for the pregnant student to review. Examples of suggested publications are:

- 1. NRC Regulatory Guide 8.13
- 2. NCRP Report No.116

The pregnant student should already have reviewed the most recent NRC Regulatory Guide. "Instruction Concerning Prenatal Radiation Exposure" and the facility's policy for a pregnant radiation student during her initial training. Upon declaration, both the most recent Regulatory Guide and the school's pregnancy policy should be presented to the pregnant student for review. All records of exposure to the embryo/fetus and the written declaration of pregnancy will be maintained on file. During radiography program orientation and also upon declaration of pregnancy, there will be documentation of the student's review of NRC Regulatory Guide 8.1 3, NCRP Report No.116, and the school's policy for the declared pregnant radiography student.

POLICY TITLE: Pregnant Patient **PAGE:** 1 of 1

ORIGINAL DATE: January 28, 1998 LAST REVIEWED: August 14, 2023

REVISED: April 4, 2012

PURPOSE:

To ensure all patients of childbearing age who are pregnant or suspect they are pregnant are not unnecessarily exposed to radiation.

POLICY:

Technologists and students performing radiographic exams on women of childbearing are responsible for asking patient if there is a possibility of pregnancy. This information must appear in the appropriate radiology information system or other computer system, if available.

When the radiology department is notified of possible pregnancy, the patient's exam will be delayed until the referring physician can be notified. A decision will be made by the radiologist and referring physician as to whether to proceed with the exam.

Proper radiation protection for patient and fetus/embryo must be employed and documented in the radiology or hospital computer system, if available.

POLICY TITLE: Professional Appearance **PAGE:** 1 of 2

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

POLICY:

The purpose of this policy is to provide standards for dress and grooming to ensure the professional appearance, appropriate image, and the necessary safety and infection control requirements of the student's environment.

GENERAL STANDARDS:

The professional atmosphere and brand of Cleveland Clinic is exemplified in many ways including the image employees present to our patients, the public, and each other. The following standards are meant to ensure all necessary safety and infection control requirements are met, and to avoid an appearance that calls attention to the individual employee and distracts employees from their patient care, support service or other responsibilities, or causes patients or visitors to question the competence, confidence, professionalism, caring or quality of our employees or our services.

UNIFORMS:

Uniforms consist of either navy blue uniform tops (scrub) and white pants (scrub) or white uniform tops (scrub) and navy-blue pants (scrub). Warm-up jackets may be included but must be the same color as the uniform tops. Sweaters, fleece jackets, and sweatshirts are not permitted at the clinical site.

- 1. Shirts (tanks, t-shirts, turtlenecks) both long or short sleeved may be worn under the uniform but must be solid white. If wearing a long sleeve white shirt, the shirt may not extend beyond the wrist and may not have thumbholes. No decals, designs or words are permitted on the undershirts. Crew-neck shirts are highly recommended under V-neck uniform tops. If a short-sleeve t-shirt is worn underneath a short-sleeve uniform top, the sleeves of the t-shirt must not hang below the uniform top sleeves. Three quarter (3/4) sleeve length tops are not permitted.
- 2. **IN CLASS DRESS CODE ONLY:** Same as above but students are permitted to wear SODI, Radiology, and Cleveland Clinic logo fleece or sweatshirts **only over the uniform**.
- 3. All shirts and jackets <u>must</u> have the school patch sewn on the left sleeve, two fingers down from the top of the left shoulder seam.
- 4. Socks must be solid white, black, grey or navy blue.
- 5. Undergarments should not be visible beneath the uniform.
- 6. Uniforms must be freshly laundered and wrinkle-free each time they are worn.
- 7. Shoes must be either white, black, navy or grey athletic shoes, or any combination of these colors. They must not have any different colored stitching, stripes, insignias, etc. and must always be kept clean.
- 8. The Cleveland Clinic ID badge must be worn at all times, with the name and photo visible, at the chest or collar level.
- 9. The program-provided dosimeter must be worn at all times when at clinical.
- 10. Hospital provided scrubs may only be worn in surgery and must be returned before leaving the clinical site.

GROOMING:

1. Perfume, cologne, and scented lotions are prohibited. Students who smoke must be mindful of the fact that they may carry cigarette odor on their person. Ill patients are particularly sensitive to

- scents/odors and some scents can elicit allergic reactions. If an obvious scent/odor is noticed, it will be brought to the student's attention.
- 2. Excessive make-up is prohibited.
- 3. Tattoos that convey messages that are inconsistent with Cleveland Clinic values must be covered at all times. At the program director's discretion, students may be required to cover other tattoos.
- 4. Fingernails must be kept short (1/4 inch or shorter). Nail polish must be clear or pastel and must not be chipped. No artificial nails (including, but not limited to acrylics, extenders and embellishments) of any sort are permitted as they harbor bacteria and violate the hospital infection control policy.
- 5. Hair must be clean and neatly groomed and hair longer than shoulder length must be tied back.
- 6. Hair colors unnatural to human hair are not permitted (e.g. purple, green, red, pink, and blue).
- 7. Beards and mustaches are permitted but must be closely and neatly trimmed. If a student does not have a beard, then they must shave prior to class and clinical experience and always have a clean-shaven appearance.

JEWELRY AND ACCESSORIES:

- 1. Hair style, jewelry, and makeup should be appropriately chosen to achieve a look of professional credibility.
- 2. No more than two simple earrings per ear are permitted. Earrings must be of the "post" style. A single small nose stud piercing is permitted with the exception of septum or rings.
- 3. Visible body piercings, including tongue, mouth, and eyebrow are not permitted.
- 4. Wearing of rings is permitted, but rings must be removed when scrubbing or performing special procedures. No other rings are permitted, including nose and lip rings and clips.
- 5. Ear gauges that are visible must have solid, skin-colored plugs in place.
- 6. The wearing of hats/caps is prohibited. An exception to this rule is headgear that is part of a religious protocol or is required by the clinical facility (i.e. surgical caps, hoods, etc.).

SURGICAL SCRUB POLICY:

This policy has been implemented throughout the Cleveland Clinic Health System in accordance with Nursing Institute Policy 213 to encourage hygiene, ensure OSHA compliance, promote compliance with infection control and preserve our public image. This policy applies to all operating and procedure rooms.

- Surgical scrubs cannot be worn outside of the hospital/facility or to and from work.
- Students must change into surgical scrubs once they enter their surgical locations and change again before leaving the hospital.
- When leaving the surgical or procedure rooms, surgical scrubs must be covered with a buttoned lab coat or warm-up jacket while inside the hospital for example, during a lunch break in the cafeteria or running an errand outside the surgical department.
- Disposable hats, masks, gowns, gloves and shoe coverings must be removed when leaving surgical departments. Discard these items prior to leaving the surgical department or procedure room.

CLASSROOM DRESS CODE FOR APPROVED DRESS DOWN DAYS:

Please remember that even though we are in class, we are on Cleveland Clinic property and professional behavior is important. Students are responsible for their own appearance and are required to wear attire that is neat, clean, pressed and in good repair and condition. Garments that are tight fitting, revealing, faded, low cut, too short, inappropriate in adornment, torn, or in disrepair are not acceptable. Shoes must be clean. Sandals or flip-flops are not permitted. Overly casual clothing is considered inappropriate. Examples of overly casual attire include: tank tops, halter tops, leggings, spaghetti strap shirts or dresses, clothing with holes in it, midriff shirts, and shorts that are too short. If the appropriateness of any student's apparel is in question, faculty will have the final decision and students may be asked to go home and change.

POLICY TITLE: Program Effectiveness **PAGE:** 1 of 1

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: January 3, 2024

The following is the most current program effectiveness data. Our programmatic accreditation agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT), defines and publishes this information. Click here to go directly to the JRCERT webpage.

Credentialing Examination: The number of students who pass, on the first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination, or an unrestricted state licensing examination, compared with the number of graduates who take the examination within six months of graduation. The five-year average benchmark established by the JRCERT is 75%.

Credentialing Examination Rate	number passed on 1 st attempt divided by number attempted within 6 months of graduation				
Year	Results				
Year I - 2019	13 of 15 - 87%				
Year 2 - 2020	18 of 21 - 86%				
Year 3 - 2021	15 of 16 - 94%				
Year 4 - 2022	12 of 14 - 86%				
Year 5 - 2023	12 of 18 - 67%				
Program 5-Year Average	70 of 84 -83.3%				

Job Placement: The number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences within twelve months of graduating. The five-year average benchmark established by the JRCERT is 75%.

Job Placement Rate	number employed divided by number actively seeking employment within 12 months of graduation				
Year	Results				
Year I - 2019	10 of 10 - 100%				
Year 2 - 2020	20 of 20 - 100%				
Year 3 - 2021	16 of 16 - 100%				
Year 4 - 2022	14 of 14 - 100%				
Year 5 - 2023	16 of 16 - 100%				
Program 5-Year Average	76 of 76 -100.0%				

Program Completion: The number of students who complete the program within the stated program length. The annual benchmark established by the program is 80%.

Program Completion Rate	number graduated divided by number started the program					
Year	Results					
Year - 2023	18 of 18					
Annual Completion Rate	100.0%					

POLICY TITLE: Program Goals & Outcomes PAGE: 1 of 1

ORIGINAL DATE: January 23, 1994 LAST REVIEWED: August 14, 2023

REVISED: September 12, 2016

PROGRAM GOALS & OUTCOMES:

Goal 1: The student/graduate will be clinically competent.

Outcomes:

- Students will provide appropriate patient care.
- Students will demonstrate clinical competency appropriate to their level of experience.
- Students will perform exams safely.
- Students will produce quality diagnostic images.

Goal 2: The student/graduate will demonstrate professionalism.

Outcomes:

- Students will demonstrate an understanding of the importance of professionalism.
- Students will demonstrate professional behaviors.
- Students will participate in career/health fairs or community service activities.
- Students will demonstrate an understanding of patient confidentiality (HIPAA).

Goal 3: The student/graduate will demonstrate effective critical thinking.

Outcomes:

- Students will be able to modify routine procedures for non-routine patients.
- Students will effectively critique images to determine if corrective action is required.
- Students/graduates will acquire critical thinking skills and problem solving abilities that enhance their clinical experience.
- Goal 4: The student/graduate will demonstrate effective communication.

Outcomes:

- Student will demonstrate effective written communication.
- Student/graduate will demonstrate professional verbal communication in the health care environment.

POLICY TITLE: Program Review & Assessment Committee **PAGE:** 1 of 1

ORIGINAL DATE: June 4, 1996 LAST REVIEWED: August 14, 2023

REVISED: August 17, 2015

The program review and assessment committee reviews the program's assessment plan periodically to assure compliance with the Standards for an Accredited Educational Program in Radiologic Sciences. The program director, coordinator, and instructor meet regularly to review the following:

- A. Master plan
- B. Course evaluations
- C. Program evaluations by graduates
- D. Employer evaluations of graduates
- E. Student registry results, honors and membership in professional societies
- F. Student attrition/retention/academic delinquency rates and reasons
- G. Number of graduates in specified employment setting/program and the relevance to the school

The committee submits the compiled information/report to the Advisory Committee for further consideration. If deficiencies are found, recommendations for improvement are made by the committee, along with a date for completion.

POLICY TITLE: Radiation Safety **PAGE:** 1 of 2

ORIGINAL DATE: June 25, 2007 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

POLICY: All radiography students must be under direct supervision while performing any procedures in fluoroscopy, portables, or mammography. Students must not hold image receptors or patients during any radiographic procedure.

PURPOSE: The purpose of this policy is to outline the necessary precautions for radiation safety when operating radiation equipment.

PROCEDURE:

- Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.
- All involved personnel shall have knowledge of principle of radiation protection.
- The central principle is that maintaining distance is the greatest single safety factor.
- Technologist/student using mobile equipment must inform anyone in the room/area of use of ionizing radiation before initiating exposure.
- Lead aprons and lead thyroid shields shall at all times be required when unable to remain
 positioned behind the protective screen during fluoroscopic procedures or when in close proximity
 of any ionizing radiation.
- Protective lead eye glasses are available for personnel who cannot remain behind protective screens during fluoroscopic procedures.
- Protective lead gloves shall be worn when hands are in direct beam.
- Involved personnel shall be supplied with radiation monitor device according to department policy.
- It is the responsibility of department manager to ensure that protective equipment is readily available.
- If requested, the patient can be shielded during exposure.
- All malfunction of equipment will be reported to the manager or supervisor.

A. Mobile Radiographic Units:

- The x-ray technologist/student shall stand at least 6 feet from the x-ray tube when making an exposure **and** must wear a lead apron.
- The technologist/student shall inform the surrounding patients and general public that they are about to make a radiographic exposure and allow them ample time to step back or leave the area prior to the exposure.
- Anyone (including patients and personnel) within six feet from the patient at the time of the exposure must wear a lead apron.
- All radiographic mobile units will be stored in an access controlled location or the keys will be removed and kept in a secure location where only licensed radiology personnel have access.
- Ancillary protective devices such as ceiling drop shields, rolling floor shields, etc., should be used when available and feasible to the exam.

B. Stationary Fluoroscopy Units:

All personnel not required to be in the room during fluoroscopy exposures and/or spot film, cine

- and DSA exposures should leave. If they must remain in the room, a lead apron, thyroid shield, of at least 0.25mm lead equivalent must be worn and they shall be positioned so that no part of their body is in the useful beam.
- All personnel in the room during radiation exposures must stand as far away from the patient/x-ray tube as possible.
- The image intensifier carriage lead drape must remain on (where applicable) except when the clinical exam indicates otherwise, i.e., myelogram.

C. Mobile Fluoroscopy C-Arms:

- The technologist/student shall stand as far away from the patient/x-ray tube as possible while making C-arm exposures.
- All personnel required to be in the room during C-arm exposures shall wear a lead apron of at least 0.25mm lead equivalent and shall be positioned so that no part of their body is in the useful beam.
- Where applicable, the technologist/student shall inform all persons within the vicinity that they are about to make a fluoroscopic exposure and allow them ample time to step back or leave the area prior to the exposure.
- Ancillary protective devices such as rolling floor shields should be used when available and feasible to the exam.
- All mobile C-arms will be stored in an access controlled location or the keys will be removed and kept in a secure location where only licensed radiology personnel have access.
- A safe distance of at least six feet should be maintained by anyone not needed at the patient's side during fluoroscopy exposures.

D. Mammography Units:

- The appropriate image receptor size and collimator shall be used for the breast size.
- All individuals other than those required to be in the room during exposure shall wear a lead apron of at least 0.25mm lead equivalent.
- The technologist/student shall stand behind the protective barrier when initiating an exposure.
- All pregnant patients will be shielded. Approval from physician and radiologist should be in writing and attached to Mammography worksheet. Document shielding.

POLICY TITLE: Radiation Safety-Individual **PAGE:** 1 of 3

Monitoring Devices & Exposure Reports

ORIGINAL DATE: March 4, 1994 LAST REVIEWED: August 14, 2023

REVISED: May 1, 2018

PURPOSE:

To establish guidelines for the recording of exposures and use of Individual Monitoring Devices by the student according to Ohio Administrative Codes.

POLICY:

Quarterly dosimeters will be provided by the school to each student and must be worn whenever the student is at the clinical site. Failure to do so will result in a corrective action. If a student comes to clinical without their dosimeter, they will not be permitted to continue their clinical experience until the dosimeter has been obtained. PTO time must be used during this time or missed clinical time can be made up after graduation.

I. LOCATION OF MONITORING DEVICES:

- If only one IMD is worn, it shall be worn at the collar level outside the lead apron.
- If two monitors are worn, one shall be at the collar level outside the lead apron and one shall be worn at the waist level under the apron. In case of pregnancy, a fetal badge should be worn at waist level, under a lead apron when one is worn (see Pregnancy Policy for more information).
- When two monitors are worn, they must never be interchanged. In accordance with Ohio Administrative Code 3701:1-38-12(A)(4)(6)(i)(ii), the reported deep dose equivalent for the single IMD may be multiplied by 0.3 for determination of effective dose equivalent (EDE). For double IMD personnel, the EDE may be determined by multiplying the waist IMD reported value by 1.5 and adding the calculative value to the collar IMD dose value, multiplied by 0.04.

II. EXCHANGE OF INDIVIDUAL MONITORING DEVICES:

- A new dosimeter will be provided quarterly.
- No one shall purposely expose a personnel monitor.
- Since personnel monitors are designed to measure only radiation received occupationally, it should never be worn when receiving diagnostic and/or therapeutic radiation exposures as a patient.
- IMD must be worn only by the person to whom it is assigned.
- In the event of pregnancy, see the Pregnancy Policy for more information.
- The student is responsible for returning the old dosimeter to the department designee for processing.
- If the dosimeter is lost, damaged, or not returned within 90 days after the wear date, a \$25.00 replacement fee is charged by the school since the school will be charged by the company.

III. REVIEW OF PERSONNEL MONITORING RECORDS:

Each student must review and initial the monthly radiation exposure reports indicating they are aware of their radiation exposure.

• Students receiving doses in excess of over ALARA Level II limits, Level 1= 125 mrem (1.25 Sv) and Level II = 375 mrem (3.75 Sv), will be notified as soon as possible. For those individuals with doses in excess of Level II, an investigation will be performed and documented immediately as to the cause with possible suggestions for prevention of such doses in the future.

• The dosimetry reports are retained indefinitely by the program. Annual written reports of occupational exposure are available for review at the end of the first month of the next calendar year.

IV. OVEREXPOSURE AND REPORTING OVEREXPOSURES TO THE STATE:

All exposures in excess of the legal limits as stated in Ohio Code 3701:1-38-21 will be investigated immediately. A written report will be filed to include the circumstances surrounding the overexposure and the measures taken to prevent it from happening again. Any individual receiving in excess of 5 rem (50 mSv) will report to the RSO any condition that may have led to the excess. All overexposures will be reported to the State in accordance with Ohio Code 3701:1-38-21 which states the following:

- Immediate notification by telephone if there is an exposure or threat of an exposure to the whole body \geq 25 rems (0.25 Sv), to the lens of eyes of 75 rems (0.75 Sv), or a shallow dose to the skin or extremities or total organ dose of \geq 250 (2.5 Sv) rems.
- Twenty-four hour notification by telephone if there is an exposure or the threat of an exposure to the whole body ≥ 5 rem (0.05 Sv), to the lens ≥ 15 rem (0.15 Sv), or a shallow dose to the skin or total organ dose to the extremities of ≥ 50 rem (0.50 Sv).

In addition to the notification, a written report will be filed with the State within thirty (30) days. The report will include a description of the licensed or registered source of radiation involved. If it is a radioactive material, the report will state kind, quantity, chemical and physical form. For radiation generating equipment, the report will state manufacturer, model and serial number, type and maximum energy of radiation emitted. The report will include for each occupationally overexposed person, the name, social security number, and date of birth. The individual who received the overexposure will also be notified no later than notifying the state in writing.

V. STATE REQUIRED EXPOSURE LIMITS FOR EDUCATION AND TRAINING:

Whole Body; Head & Trunk 1 mSv / year
Active Blood Forming Organs 500 mSv / year
Lens of the Eyes; or Gonads 15 mSv / year
Hands, Forearms, Feet & Ankles 50 mSv / year
Skin of Whole Body 50 mSv / year
Embryo/Fetus— entire pregnancy 5 mSv / term



School of Diagnostic Imaging

Lost, Damaged, or Not Returned Dosimeter Report

	fee is imposed if dosimeter not returned v		-		
Name:		Program		Radiologic Technology	
				CT	
Descrip	tion:				
	Lost Dosimeter				
E	Damaged Dosimeter				
E	Not returned in 90 days from wear date				
	Wear date				
	Return date				
	Date paid				
	Cash				
	Check				
	Credit Card				
Studen	t Signature				
School	Official Signature				

POLICY TITLE: Satisfactory Academic Progress PAGE: 1 of 3

ORIGINAL DATE: February 5, 1997 LAST REVIEWED: August 14, 2023

REVISED: December 30, 2014

SATISFACTORY ACADEMIC PROGRESS (SAP):

SAP will be measured at the end of each financial aid payment period for all training programs. A cumulative academic grade average must be "C" or above at the end of each payment period based upon the scheduled hours and weeks in the payment period for financial aid purposes and veteran's benefits purposes. This cumulative average is based upon all academic activity from the first day of class through the end of each payment period.

MAXIMUM TIME FOR COMPLETION:

Students will have a maximum of one and one half (1.5) of the normally allotted time to complete their program of study. Maximum Time Frame is measured by program length (as measured in months). Grades of D or F (Failure), W (Withdrawal), or I (Incomplete) are considered attempted units and are included when calculating Maximum Time Frame. Periods when a student does not receive Title IV aid do not affect the maximum timeframe.

The student must also be successfully progressing in his/her program of training at a rate not to exceed a maximum time-frame of 150% of the normal time required to complete their program. Students are required to attend a minimum of 67% of the hours possible based on the applicable attendance schedule in order to be considered maintaining satisfactory attendance progress. If a student exceeds the normal timeframe for completion, they can continue the program and must complete 35 hours per week per term within the 150% maximum timeframe.

A periodic review of the student academics (based on each course syllabus) will be conducted. An alert letter may be issued based on the student's current status. If at any point during the course of the program, it is determined that a student cannot meet the SAP standards, financial aid including veteran benefits will be terminated and they may be subject to dismissal from the program. All periods of enrollment count when assessing the maximum time frame, even periods when a student does not receive Title IV.

A monthly review of attendance will be conducted. An alert letter may be issued based on current status. If at any point during the course of the program, it is determined that a student cannot meet the SAP standards, the student's financial aid will be terminated, and the student may be subject to dismissal from the program. The program director or designee may implement academic/attendance probation, or dismissal from the campus. The student may be required to furnish an alternate method of payment.

Make up time may be granted, if available, to meet attendance and financial aid requirements for absences caused by reasons an employer would consider acceptable. Make-up time is arranged with program officials and must be approved by an authorized administrator. Make-up time is not intended to allow a student to earn leave time or to improve overall attendance record.

Grades and attendance are checked each time a financial aid payment arrives for a student.

ATTENDANCE:

Attendance in training programs has been shown to be a reasonable predictor of work attendance during employment. Therefore, attendance during a training program is carefully monitored. In order for a student

to remain eligible for Title IV funds, they must maintain a minimum attendance of 90% of the clock hours scheduled. Each student is responsible for properly signing in and out of each class and clinical session.

A monthly review of attendance will be conducted. An alert letter may be issued based on current status. If at any point during the course of the program, it is determined that a student cannot meet the SAP standards, the student's financial aid will be terminated and the student may be subject to dismissal from the program. The program director or designee may implement academic/attendance probation, or dismissal from the campus. The student may be required to furnish an alternate method of payment.

Make up time may be granted, if available, to meet attendance and financial aid requirements for absences caused by reasons an employer would consider acceptable. Make-up time is arranged with program officials and must be approved by an authorized administrator. Make-up time is not intended to allow a student to earn leave time or to improve overall attendance record. Make-up time must be completed within the current payment period and may not exceed 10% of the total monthly required hours.

Grades and attendance are checked each time a financial aid payment arrives for a student.

ACADEMIC/ATTENDANCE PROBATION:

If a student fails to meet the requirements for satisfactory academic/attendance progress at the end of the financial aid payment period, a consultation with the program director or designee will be scheduled to inform the student of their status. The student must file a successful appeal to be placed on academic/attendance probation. The program director or designee will review the student's appeal for probation. If the appeal is successful, the student will be placed on probation and given an academic plan to come into compliance with the campus satisfactory academic progress standards. During probation, the student may be required to sign a payment plan or furnish an alternate method of payment.

NOTIFICATION:

The program director or designee will inform the student by letter of her/his probation status. The program director will notify the student of her/his dismissal from the school.

APPEAL PROCEDURE:

A student must appeal probation by completing the appeal form. The appeal will describe in detail, with documentation, any undue hardship or circumstance, which may have caused the failure to meet the satisfactory academic progress, and/or attendance standard, or the educational plan provided to the student. The student must also indicate what has changed that will allow the student to meet the standards of progress at the end of the next evaluation period. A review board will be convened by the program director to consider the appeal. Appeals will be reviewed on an individual basis. Students will be notified in writing of appeal decisions within two weeks.

REINSTATEMENT/TERMINATION:

Students who are reinstated through the appeal process will be reinstated on probation and financial aid eligibility will be reinstated for the payment period in which the appeal is successful. At the end of the probationary period, the student must be meeting the academic/attendance progress standards and the academic plan developed for the student. If the student is not in compliance with the academic/attendance standards or the academic plan, the student's financial aid eligibility will be terminated and the student may be subject to termination from school.

INTERRUPTIONS AND WITHDRAWALS:

If enrollment is temporarily interrupted for a Leave of Absence, the student will return to school in the same progress status as prior to the leave of absence. Hours elapsed during a leave of absence will extend the student's contract period and maximum time frame by the same number of days taken in the leave of absence and will not be included in the student's cumulative attendance percentage calculation. Students who withdraw prior to completion of the course and wish to re-enroll will return in the same satisfactory academic progress status as at the time of withdrawal. Students can not withdraw from individual courses, they can

only withdraw from the program itself.

RETURNING STUDENTS:

Students who withdraw and return to school must have their financial aid reviewed if they received financial aid funds during their previous enrollment. Students who return within 180 days will be considered in the same payment period they were in when they left school. Students will have to complete the hours remaining in the payment period for which they were previously paid before an additional payment of Title IV funds. Students returning after 180 days will be considered in a new payment period and will be eligible to receive additional funds as a new student up to the award year limit.

CREDIT FOR PREVIOUS TRAINING:

The School of Diagnostic Imaging does not give credit for previous training or accept transfer and advanced placement students.

POLICY TITLE: Scheduling of Clinical Experiences PAGE: 1 of 1

ORIGINAL DATE: May 23, 1994 LAST REVIEWED: August 14, 2023

REVISED: May 14, 2019

- 1. Students attend clinical Monday through Friday from 8:00 am to 3:30 pm. Student rotation schedules will be posted prior to the beginning of each clinical experience. In order to maximize the types of radiographic learning experiences and educational opportunities for the students, all students are required to participate in a two (2) week evening rotation which is scheduled in the evenings, from 3:30 11:00 p.m. Additional evening clinical rotations may be requested by a student. Students are expected to adhere to their rotation schedule. Students will not be scheduled for class and clinical time in excess of thirty five (35) hours per week or seven (7) hours per day.
- 2. Students must complete all required competency examinations prior to participation in any elective rotation.
- 3. Students will complete a minimum of two rotations at a hospital, and rotations to family health centers/outpatient centers. All required clinical assignments will be posted in advance.
- 4. Student rotations will be determined by the school and may not be altered by the clinical site without approval by the school.
- 5. It is the responsibility of the clinical site to insure that student experiences have educational merit. Students must not be used in place of employees.
- 6. Should a student's supervising technologist leave the department for any reason (illness, flex time, doctor's appointment, etc.) and there is no one to assume supervision of that student, the student will be sent home. This will not affect the student's PTO in any way.
- 7. The program must provide equitable learning opportunities for all students. For example, if an objective is for students to perform breast imaging and/or therapeutic procedures, then both genders must be provided the same opportunities to attain the requirement.
- 8. Students must request a change in their clinical schedule no less than one (1) week in advance. All changes to the clinical schedule must be approved by programs officials and the clinical preceptor.
- 9. The program director reserves the right to move or reassign a student's clinical site due to extenuating circumstances.

POLICY TITLE: Security & Campus Safety **PAGE:** 1 of 7

ORIGINAL DATE: May 17, 2007 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

SECURITY/SAFETY MEASURES:

All School of Diagnostic Imaging students must wear a Cleveland Clinic ID badge in a visible manner while in a Cleveland Clinic building. The badge must be readily available while on the grounds and entering and leaving the building, as hospital security personnel may request to see it.

The school facility maintains a 24 hour per day security force. Each building has a security desk in the lobby with a 24-hour security presence. In case of an emergency, dial the following number for each building.

Building 2: 216-448-5151 Building 3: 216-448-0090 Building 4: 216-448-5753

Students are encouraged to take steps to protect their personal property. Valuable items, i.e. purses, cell phones, book bags, etc. should never be left unattended or inside vehicles parked on hospital grounds.

A. OHIO'S CONCEALED CARRY LAW:

It is the policy of the Cleveland Clinic to prohibit any person from carrying a concealed handgun or other deadly weapon onto the property of any Cleveland Clinic facility. Only law enforcement officers on official business are exempt from this policy.

CRIMINAL ACTIONS & OTHER EMERGENCIES:

Any emergency, criminal activity, incident, or potential security problem should be immediately reported to the campus security at the numbers above. The security desk at each building is staffed 24 hours per day. Any person witnessing, discovering, or suspecting a crime or other incident should report it to security immediately. For additional safety information, refer to the back of the identification badge. When an emergency problem is reported, security personnel will be dispatched to investigate. Security personnel will summon the appropriate official police agency to the premises as needed. The Cleveland Clinic maintains cooperative relationships with local, state and federal law enforcement agencies, and reports according to legal guidelines any criminal occurrences on the premises. Statistics are available concerning the occurrence on the hospital campus of specific criminal occurrences and arrests. The above policy refers only to security practices and procedures within the building, parking lots and grounds of the Cleveland Clinic.

B. PROVISION OF INFORMATION:

In accordance with the Student Right-to-Know and Campus Security Act of 1990 (Public Law 101-542), the following information is provided to current and potential students and employees in accordance with the above-named law:

- Information concerning graduation rates and ARRT (licensure exam) passing rates of students entering the School of Diagnostic Imaging is published annually in the Policy Manual and is available on the school's learning management system and on request to prospective students and employees of the Cleveland Clinic.
- The campus security information on the next page is provided to current and potential students and

employees in accordance with the above-named law. The Policy Manual, which is reviewed or revised yearly, contains policies regarding the reporting of criminal actions or other emergencies, campus security, campus law enforcement and substance abuse. The policy Manual also contains information about crime prevention, security, and substance abuse education programs.

- Campus security statistics are also available on the website of the Office of Postsecondary Education of the U.S. Department of Education at www.ope.ed.gov/security. Statistics are available after the end of October for the past three years.
- In accordance with the Campus Sex Crimes Prevention Act (Section 160 of Public Law 106-386), Euclid hospital is providing the following website as a resource for the campus community to obtain law enforcement information regarding registered sex offenders:

 www.cuyahoga.oh.us/sheriff/sou/default.asp. The information is available through this website is maintained in accordance with the State of Ohio Sexual Sex Offender Registration Bill (House Bill 180) signed into law in 1997 and is provided by the Cuyahoga County Sheriff's Office as a community service.

C. MOTOR VEHICLE:

Students are responsible for their own transportation to classes and clinical experiences at Cleveland Clinic or at other facilities utilized during the program. While at the Cleveland Clinic Campus, students may park in the parking lot or parking garage while observing the parking policy. At facilities other than Cleveland Clinic, students are responsible for following that facility's parking policy.

School of Diagnostic Imaging

Cleveland Clinic

Radiologic Technology Program Campus Security Statistics

Statistics concerning the occurrence of criminal offenses **on campus** reported to Cleveland Clinic security authorities.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Murder/Non-negligent	0	0	0
manslaughter			
Manslaughter by negligence	0	0	0
Rape	0	0	0
Fondling	0	0	0
Incest	0	0	0
Statutory rape	0	0	0
Robbery	0	0	0
Aggravated assault	1	1	1
Burglary	0	0	0
Motor vehicle theft	0	0	4
Arson	0	0	0

Statistics concerning the occurrence of criminal offenses **on public property** reported Cleveland Clinic security authorities.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Murder/Non-negligent manslaughter	0	0	0
Manslaughter by negligence	0	0	0
Rape	0	0	0
Fondling	0	0	0
Incest	0	0	0
Statutory rape	0	0	0
Robbery	0	0	0
Aggravated assault	0	0	0
Burglary	0	0	0
Motor vehicle theft	0	0	4
Arson	0	0	0

Statistics concerning the number of VAWA (Violence Against Women Act) offenses on the Cleveland Clinic campus.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Domestic violence.	0	0	0
Dating violations	0	0	0
Stalking	0	0	0

Statistics concerning the number of VAWA (Violence Against Women Act) offenses on the **Public Property.**

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022	
Domestic violence.	0	0	0	
Dating violations	0	0	0	
Stalking	0	0	0	

Campus Crime Statistics

Statistics concerning "Hate Crimes" that occurred on **Campus** broken down by category of bias (e.g., race, religion).

Occurrences of Hate Crimes - Category of Bias for Crimes Reported in 2022.

	2022			C1		<u> </u>		NI - 42 1
Criminal Offense	2022	Race	Religion	Sexual	Gender	Disability	Ethnicity	National
	Total			Orientation	Identity			Origin
Murder/Non-	0	0	0	0	0	0	0	0
negligent								
manslaughter								
Rape	0	0	0	0	0	0	0	0
Fondling	0	0	0	0	0	0	0	0
Incest	0	0	0	0	0	0	0	0
Statutory Rape	0	0	0	0	0	0	0	0
Aggravated assault	0	0	0	0	0	0	0	0
Burglary	0	0	0	0	0	0	0	0
Motor vehicle theft	0	0	0	0	0	0	0	0
Arson	0	0	0	0	0	0	0	0
Simple Assault	0	0	0	0	0	0	0	0
Larceny-Theft	0	0	0	0	0	0	0	0
Intimidation	0	0	0	0	0	0	0	0
Destruction/damage	0	0	0	0	0	0	0	0
/vandalism of								
property								

Statistics concerning "Hate Crimes" (i.e. incidents directed at individuals because of race, gender, religion, ethnicity, sexual orientation or disability) that occurred on **Campus.**

Occurrences of Hate Crimes - Category of Bias for Crimes Reported in 2021.

Criminal Offense	2021 Total	Race	Religion	Sexual Orientation	Gender Identity	Disability	Ethnicity	National Origin
Murder/Non- negligent manslaughter	0	0	0	0	0	0	0	0
Rape	0	0	0	0	0	0	0	0
Fondling	0	0	0	0	0	0	0	0
Incest	0	0	0	0	0	0	0	0
Statutory Rape	0	0	0	0	0	0	0	0
Aggravated assault	0	0	0	0	0	0	0	0
Burglary	0	0	0	0	0	0	0	0
Motor vehicle theft	0	0	0	0	0	0	0	0
Arson	0	0	0	0	0	0	0	0
Simple Assault	0	0	0	0	0	0	0	0
Larceny-Theft	0	0	0	0	0	0	0	0
Intimidation	0	0	0	0	0	0	0	0
Destruction/damage /vandalism of property	0	0	0	0	0	0	0	0

Campus Crime Statistics

Statistics concerning "Hate Crimes" that occurred on **Campus** broken down by category of bias (e.g., race, religion).

Occurrences of Hate Crimes - Category of Bias for Crimes Reported in 2020.

	Occurrences of frate Crimes – Category of Bias for Crimes Reported in 2020.								
Criminal Offense	2020	Race	Religion	Sexual	Gender	Disability	Ethnicity	National	
	Total			Orientation	Identity			Origin	
								0	
Murder/Non- negligent manslaughter	0	0	0	0	0	0	0	0	
Rape	0	0	0	0	0	0	0	0	
Fondling	0	0	0	0	0	0	0	0	
Incest	0	0	0	0	0	0	0	0	
Statutory Rape	0	0	0	0	0	0	0	0	
Aggravated assault	0	0	0	0	0	0	0	0	
Burglary	0	0	0	0	0	0	0	0	
Motor vehicle theft	0	0	0	0	0	0	0	0	
Arson	0	0	0	0	0	0	0	0	
Simple Assault	0	0	0	0	0	0	0	0	
Larceny-Theft	0	0	0	0	0	0	0	0	
Intimidation	0	0	0	0	0	0	0	0	
Destruction/damage	0	0	0	0	0	0	0	0	
/vandalism of									
property									

Statistics concerning "Hate Crimes" (i.e. incidents directed at individuals because of race, gender, religion, ethnicity, sexual orientation or disability) that occurred on **Public Property.**

Occurrences of Hate Crimes – Category of Bias for Crimes Reported in 2022

Criminal Offense	2022 Total	Race	Religion	Sexual Orientation	Gender Identity	Disability	Ethnicity	National Origin
Murder/Non- negligent manslaughter	0	0	0	0	0	0	0	0
Rape	0	0	0	0	0	0	0	0
Fondling	0	0	0	0	0	0	0	0
Incest	0	0	0	0	0	0	0	0
Statutory Rape	0	0	0	0	0	0	0	0
Aggravated assault	0	0	0	0	0	0	0	0
Burglary	0	0	0	0	0	0	0	0
Motor vehicle theft	0	0	0	0	0	0	0	0
Arson	0	0	0	0	0	0	0	0
Simple Assault	0	0	0	0	0	0	0	0
Larceny-Theft	0	0	0	0	0	0	0	0
Intimidation	0	0	0	0	0	0	0	0
Destruction/damage /vandalism of property	0	0	0	0	0	0	0	0

Statistics concerning the number of arrests for the following crimes on Campus.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Weapons: carrying, possession, etc.	0	0	0
Drug abuse violations	0	0	0
Liquor law violations	0	0	0

Statistics concerning the number of arrests for the following crimes on the Public Property.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Weapons: carrying, possession, etc.	0	0	2
Drug abuse violations	6	6	0
Liquor law violations	0	0	0

Statistics concerning the number of persons referred for disciplinary action for the following law violations occurring on the **Cleveland Clinic Campus**.

Criminal Offense	Number of Number of Offenses in 2020 Offenses in 2020		Number of Offenses in 2022
	Offenses in 2020	Offenses in 2021	III 2022
Weapons: carrying, possession, etc.	0	0	0
Drug abuse violations	1	0	0
Liquor law violations	0	0	0

Statistics concerning the number of persons referred for disciplinary action for the following law violations occurring on the **Public Property**.

Criminal Offense	Number of Offenses in 2020	Number of Offenses in 2021	Number of Offenses in 2022
Weapons: carrying, possession, etc.	0	0	0
Drug abuse violations	0	0	0
Liquor law violations	0	0	0

Statistics concerning the number of unfounded crimes **On Campus** or on **Non campus Property** or on **Public Property**.

Criminal Offense	Number of	Number of	Number of Offenses
	Offenses in 2020	Offenses in 2021	in 2022
Total unfounded crimes	0	0	0

POLICY NAME: Smoking PAGE: 1 of 1

DATE: August 6, 2008 LAST REVIEWED: August 14, 2023

REVISED: July 18, 2022

POLICY:

The School of Diagnostic Imaging is committed to creating a safe and healthy environment for students, faculty, patients and visitors, and as such, follows the Cleveland Clinic policy on smoking. Violation of the smoking policy will result in initiation of a corrective action starting with a documented counseling and increasing in severity with repeated smoking policy infractions.

In order to be consistent with this commitment, smoking and the usage of any tobacco products (such as cigarettes, cigars, chewing tobacco, pipe, and this is to include the product E-Cigarettes) is strictly prohibited on all Cleveland Clinic owned property, which includes sidewalks and streets adjacent to the hospital campus. Smoking is also prohibited in automobiles, while on CCHS properties and in CCHS parking facilities. Students must leave the hospital grounds to smoke and must not loiter or litter the property adjacent to the hospital.

Students who smoke must be mindful of the fact that they may carry cigarette odor on their person. Ill patients are particularly sensitive to scents/odors and some scents can elicit allergic reactions. If an obvious scent/odor is noticed, it will be brought to a student's attention.

Smoking cessation resources will be available to students. E-Cigarettes are viewed as a fire risk due to the heating element and the lithium battery.

POLICY TITLE: Substance Abuse PAGE: 1 of 2

ORIGINAL DATE: May 17, 2007 LAST REVIEWED: August 14, 2023

REVISED: June 23, 2016

PHILOSOPHY:

The School of Diagnostic Imaging must ensure that students provide safe, high quality radiology services while engaged in official school/educational activities. The school also strives to promote student health and well-being. Student use of abuse of dangerous drugs or alcohol is potentially harmful to self and others. The School of Diagnostic Imaging believes chemical dependency to be a treatable disease and will be supportive of impaired students while ensuring a safe environment.

POLICY:

Prohibited conduct: The School of Diagnostic Imaging students are prohibited while on Cleveland Clinic property to engage in official school educational activities while being under the influence of, or possessing, using, or distributing alcohol or illicit drugs. This prohibition includes time in class and clinical areas, field trips and clinical preparation time on any site. Illicit drugs include controlled substances, habit-forming drugs, chemical substances which impair ability to function, and any potentially dangerous drug used not in accordance with a legal, valid prescription. Corrective actions up to or including dismissal from school, and referral for prosecution will be imposed for individuals engaging in this prohibited conduct.

PROCEDURES:

A student will be removed from class or clinical area by the instructor when the student's behavior indicates there is impairment.

A. SUSPECTED CHEMICAL USE REQUIRING IMMEDIATE ACTION:

- Detection of alcohol on the breath or the odor of a mood-altering substance (sufficient reason to believe a person is under the influence of a chemical).
- The instructor will notify the School of Diagnostic Imaging or designee.
- The student will be accompanied by the instructor, program director or designee to the Emergency Department for screening and evaluation. This evaluation may include collection of urine and/or blood samples, and a physical exam. The results of the evaluation will be documented and made available to the program director or designee.
- If the results of the evaluation indicate chemical use, the director or designee will notify Caring for Caregivers (EAP at 216-445-6970 or 800-989-8820. The student will be informed of this action, and that readmission to class and clinical will determined by program officials.
- If a student refuses the evaluation in the Emergency Department or is at a clinical site outside of the Cleveland Clinic or where drug testing is not possible, he/she will be dismissed for the remainder of the school activity that day. The school will attempt reasonable means to ensure safe transport home. The incident will be documented by the involved school representative. The student must see the director or designee prior to attending class or clinical. At that time, the student will be informed that Caring for Caregivers has been contacted and that readmission to class or clinical will determined by program officials.
- Suspicion of chemical dependency or abuse, (excluding being under the influence during

- school activities).
- The instructor will document observed behaviors that might indicate a chemical abuse problem.
- Any concerned individual (e.g., fellow student) may discuss suspicions of drug abuse with the instructor or director of the school. Confidentiality will be maintained.
- The instructor will review documentation and evidence with the director.
- If warranted by evidence, the director will notify Caring for Caregivers.
- Further action will depend upon the recommendations of Caring for Caregivers and faculty input. If a treatment plan is recommended, the student will be granted a medical LOA. Student failure to comply with the agreed upon treatment plan will result in a corrective action up to or including dismissal from the school. Such failure may also lead to notification of the ARRT which may refuse to allow the student to take the licensure exam.

B. SELF-REFERRAL FOR CHEMICAL ABUSE:

Students with chemical dependency problems are encouraged to seek appropriate help. Students may call Caring for Caregivers to arrange for treatment and after-care support. (Call 216-445-6970 or 800-989-8820 to contact Caring for Caregivers.

Other sources for additional information or assistance include:

Alateen & Alanon	216-621-1381	Drug & Alcohol Hotline	800-821-4357
(Hotline)	216-523-8739	Free Clinic	216-721-4010
Alcoholic Anonymous	216-241-7387	Narcotic Anonymous	888-438-4673

Focus on Recovery Helplines 800-234-0420

800-888-9383

CONTESTABILITY: A student who receives a positive confirmed drug test result may contest or explain the result to CC-ER within five (5) working days after written notification of the positive test results. If the student's explanation or challenge is unsatisfactory to CC-ER, the test subject may contest the drug test result as provided in the "Remedies" section of the CC-ER drug test policy.

- **A. Right to Consult Laboratory:** Every student has a right to consult the testing laboratory for technical information regarding prescription and non-prescription medication. If you wish to discuss any aspect of this policy or should you wish to view the complete Cleveland Clinic drug test policy, please contact the School of Diagnostic Imaging.
- **B.** Federal Regulations: In compliance with federal regulations relating to the issuance and dissemination of the Drug and Alcohol Abuse Prevention Policy, the following information is distributed annually to all students via the Policy Manual:

DANGERS OF DRUG AND ALCOHOL ABUSE IN THE WORKPLACE AND ON CAMPUS:

There are millions of employed individuals whose job performance and productivity are adversely affected by their progressive dependence on drugs and alcohol. As many as 20% of all college students use chemical substances and drugs at a level of concern to themselves and others. Some estimate that 70% of the working population and 90% of college students consume mood-altering chemicals of some type and the cost to the United States economy is estimated to be more than 26 billion dollars per year.

POLICY TITLE: Supervision of Students **PAGE:** 1 of 1

ORIGINAL DATE: May 23, 1994 LAST REVIEWED: August 14, 2023

REVISED: May 27, 2021

1. Students will not take the responsibility or the place of qualified staff. Until students successfully complete a competency evaluation in a given procedure, all clinical assignments must be carried out under the direct supervision of qualified radiographers.

- A qualified radiographer reviews the request and orders for examination in relation to the student's achievement.
- qualified radiographer evaluates the condition of the patient in relation to the student's achievement.
- A qualified radiographer is present during the performance of the examination; and
- A qualified radiographer reviews and approves the radiographs.
- 2. After demonstrating competency, students may be permitted to perform procedures with indirect supervision. Indirect supervision is defined as that of supervision provided by a qualified radiographer immediately available to assist regardless of the level of student achievement. The following are the parameters of indirect supervision:
 - A qualified radiographer reviews the request and orders for examination in relation to the student's achievement; the student is also required to review the patient orders for accuracy.
 - A qualified radiographer evaluated the condition of the patient in relation to the student's achievement.
 - A qualified radiographer is present in an area adjacent to the student.
 - A qualified radiographer reviews and approves the radiographs.
- 3. The number of students assigned to the clinical site must not exceed the number of clinical staff assigned to the radiography department. The student to radiography clinical staff ratio must be 1:1, in addition students are never allowed to work together. However, it is acceptable that more than one student may be temporarily assigned to one technologist during uncommonly performed procedures. In the event there are not enough technologists to maintain the 1:1 ratio, students may be reassigned to a different area to maintain proper supervision requirements.
- 4. Unsatisfactory radiographs must be repeated only in the presence of a qualified radiographer.
- 5. Students must not perform any radiographic examination without direct supervision until they have completed a competency evaluation with an 84% or better on that specific examination.
- 6. Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.
- 7. Program clinical preceptor s are assigned in each of the clinical facilities. If the program clinical preceptors are unavailable because of illness, time off, schedule, etc., the positions will be covered by department clinical preceptor s. These individuals will be the supervisors, or their designee. This assures that students always have a clinical preceptor to provide instruction and assistance.

POLICY TITLE: Textbook & Educational Supplies PAGE: 1 of 1

ORIGINAL DATE: February 16, 2009 LAST REVIEWED: August 14, 2023

REVISED: August 14, 2023

The program textbook list is distributed to the students prior to the beginning of the program each year. Any revisions to the textbook list will be communicated to the students as necessary. All assigned textbooks are mandatory, d students must purchase the current edition as technology changes rapidly in the healthcare field. Students must purchase the assigned textbook for a course no later than the first week of the class. If the student does not have their textbook by the first week of class, they will not be allowed to participate in class until they are compliant. Textbooks can be purchased at college bookstores, online, or directly from the publisher.

Corectec is an online registry review course used in the 4th & 5th semesters of the program. Students must pay a fee for online registry review resources from Corectec.

Phone Number: (706) 310-1845 Fax Number: (706) 243-6395

Address: PO Box 7275, Athens, GA 30604

Email Address: corectec@aol.com
Web site: www.corectecreview.com

The School of Diagnostic Imaging maintains a learning management system for the students. This system provides on-line learning resources and access to course information throughout the entire program. The students are required to have an email address and to check their email routinely for pertinent school information.

POLICY TITLE: Tuition, Fees, Refunds & Withdrawal **PAGE:** 1 of 2

ORIGINAL DATE: January 28, 1994 LAST REVIEWED: August 14, 2023

REVISED: April 17, 2020

TUITION AND FEES:

Individuals who have been accepted as students in the Radiologic Technology Program are subject to the following tuition and fees:

Application Fee \$20.00

Acceptance Fee: \$300.00 (Non-refundable)

(Applicable toward first semester tuition) \$60.00 per semester x 5 semesters (\$300)

Supplemental Fee: \$60.00 per semester x 5 semes

Semester Tuition: \$3,150.00 per semester

Total Program Tuition & Fees: \$16,070.00

GENERAL INFORMATION:

Estimated Additional Expenses:

OSRT Membership Fee \$30.00
Textbooks ~\$1,400.00
Registry Review Fee \$80.00
Uniforms \$200.00
National Registry Exam Fee \$225.00
State Licensure Fee \$60.00

Tuition and fees for courses taken at School of Diagnostic Imaging are payable by check or credit card. Payments must be made on or before the due date. A fee will be assessed if checks are returned for insufficient funds. If a check is returned due to insufficient funds, the student must pay by money order or credit card from that point on.

The tuition and fees are subject to change upon due notice to the student.

The School of Diagnostic Imaging has the right to deny access to grades, transcripts, letters of recommendation, actions on appeals or grievances, class, clinical experience, exams and ARRT notification of completion, if a student fails to meet financial obligations for tuition and fees.

Students who are delinquent on any payments while using the IPP agreement described below, will be denied future use of the plans.

^{*} There is no charge for parking, liability/malpractice insurance, or background screening.

PAYMENT OPTIONS:

- 1. Payment in full.
- 2. Semester payments, due by the first day of the semester.
- 3. If payment is received after due date, a \$25 late fee will be assessed for each overdue payment.
- 4. Installment Payment Plan.

INSTALLMENT PAYMENT PLAN (IPP)

The School of Diagnostic Imaging offers an Installment Payment Plan (IPP) for students who desire this option. The plan allows the student to pay the semester tuition and fees in monthly payments beginning on the tuition due date. The cost of this service is \$25. There will be no other fee or interest charges for the service, unless the student fails to meet payment deadlines. If a student fails to meet a pre-arranged payment due date, a \$25 monthly charge will be assessed to each overdue payment.

The Installment Payment Plan (IPP) can be arranged by submitting the IPP form to the School of Diagnostic Imaging. The form must include the student's signature and authorizing signature of the program director, and the form will be kept in the student's file. A copy of the agreement will be given to the student. If payment is not received by the date specified in the deferred payment plan agreement form a \$25 late fee will be assessed. If a student withdraws from the program, and is using the installment payment plan, the student is responsible for paying the balance of the tuition.

PROGRAM WITHDRAWAL PROCEDURE:

Students must submit written documentation in the form of a letter or e-mail of the intent to withdraw from the program.

A "W" will be recorded on all withdrawals processed after the first week of class. Any withdrawals from a class must take place prior to the final exam in that class. Students who stop attending a course without submitting written documentation on their intent to withdraw will receive a "WF" (failing) grade on their transcript. The tuition refund procedure for student withdrawal is as follows.

During the first week of the semester	90% refund of full semester tuition
During the second week of the semester	70% refund of full semester tuition
During the third week of the semester	50% refund of full semester tuition
During the fourth week of the semester	25% refund of full semester tuition
During the fifth week of the semester and afterwar	d No refund

^{**}No refunds will be issued if a student is dismissed or has financial obligations to the School of Diagnostic Imaging.

^{***}Students will not be admitted into the CT/MRI Programs until all financial obligations are satisfied within the Radiologic Technology Program.

POLICY TITLE: Tuition Financial Assistance **PAGE:** 1 of 1

ORIGINAL DATE: May 24, 2001 LAST REVIEWED: August 14, 2023

REVISED: March 29, 2019

The School of Diagnostic Imaging participates in federal government funded financial aid program including Pell Grants, and Stafford Loans. Enrolled students may determine eligibility for aid from the U.S. Department of Education by submitting a Free Application for Federal Student Aid (FAFSA). On the FAFSA, the department of Education collects financial and other information used to calculate the Expected Family Contribution (EFC) and perform eligibility matches. There are several different types of FAFSA, both paper and electronic. The FAFSA form can be completed online at www.fafsa.ed.gov.

THE FAFSA SCHOOL CODE IS 015252

The School of Diagnostic Imaging also participates in the Post 911 GI BILL®. Please contact the United States Department of Veteran Affairs for current information. Information can also be found online at www.us-gibillschools.com. Students receiving VA benefits: The program director will evaluate official transcripts and documentation of previous education and training to determine if appropriate credit may be given.

The School of Diagnostic Imaging will assess no penalty, including the assessment of late fees, the denial of access to classes, libraries or other institutional facilities, or the requirement that a **Chapter 31** or **Chapter 33** recipient borrow additional funds to cover the individual's inability to meet his or her financial obligations to the institution due to the delayed disbursement of a payment by the U.S. Department of Veterans Affairs.

Students can obtain information regarding the federal governments' Lifetime Learning Credit and Hope Scholarship at www.irs.gov. In addition, students can search the Cleveland Foundation website to see if they meet the eligibility requirements of the various scholarships at www.clevelandfoundation.org. And Cleveland Scholarship Program information is available at www.cspohio.org.

The students are encouraged to apply for the annual Ohio Society of Radiologic Technologists (OSRT) grants. Applications and guidelines are available on the OSRT website at www.osrt.org and students are notified when the deadline is each year. The OSRT grants are distributed at the annual meeting. The student need not be present to be awarded a grant. Students may also be eligible for an annual American Society of Radiologic Technologists (ASRT) scholarship. Information on the ASRT scholarship is available online at www.asrt.org and will also be distributed to the students as it becomes available to the program.

Payment plans are also available for tuition payments. Please see the Tuition, Fees, and Refunds Policy for information.

POLICY TITLE: Veterans Benefits and Transition **PAGE:** 1 of 1

Act of 2018 – Veterans Active Duty

Guidelines

ORIGINAL DATE: March 29, 2019 LAST REVIEWED: August 14, 2023

REVISED: May 4, 2021

POLICY:

To ensure that the School of Diagnostic Imaging – CCHS will not impose any penalty, including the assessment of late fees, the denial of access to classes, libraries, or other institutional facilities, or the requirement that a covered individual borrow additional funds, on any covered individual because of the individual's inability to meet his or her financial obligations to the institution due to the delayed disbursement funding from the Department of Veterans Affairs under Chapter 31 or 33.

A covered individual is any individual who is entitled to educational assistance under chapter 31, Vocational Rehabilitation, or chapter 33, Post 9/11 GI Bill benefits.

A covered individual is permitted to attend or participate in the course of education during the period beginning on the date on which the individual provides to the educational institution a certificate of eligibility for entitlement to educational assistance under chapter 31 or 33 and ending on the earlier of the following dates:

- The date on payment from the VA is made to the institution.
- 90 days after the date the institution certified tuition and fees following the receipt of the COE.

ACTIVE DUTY GUIDELINES:

- VA students will not be penalized in the program if they are called up to active duty.
- Any school work that a VA student misses within a semester can be made up upon their return to school.
- The student will be given the amount of time that they were away to complete the required school work.
- If the student is absent for an entire semester, the student can request placement into the next cohort.

Position Descriptions

The following position descriptions define the group of duties and responsibilities of the members of the School of Diagnostic Imaging. Each position description describes the permanent duties and responsibilities that are assigned and performed. These are not intended to cover every kind of work assignment a position may have. Rather, they cover those work assignments which are predominant, permanent and recurring.

PROGRAM DIRECTOR:

- Administers and manages the Radiology, Magnetic Resonance Imaging, Computed Tomography, and Diagnostic Medical Sonography Programs for the School of Diagnostic Imaging.
- Responsible for developing curriculum, school objectives, course sequencing, student recruitment and tactical planning.
- Assures that graduates are competent to manage the delivery of radiation, and possess the knowledge, skills and attributes to provide safe, high quality patient care.
- Coordinates administration of student financial aid, including federal Title IV programs.
- Manages all student tuition payments and maintains all student tuition files.
- Responsible for developing, adhering to and controlling the departmental budget to meet the programmatic objectives.
- Ensures educational effectiveness by conducting evaluative studies of students, graduates, employers and ARRT Registry Exam data to improve school outcomes.
- Ensures accreditation status by Joint Review Committee on Education in Radiologic Technology and applicable regulations.
- Evaluates and assures clinical education effectiveness through regularly scheduled visits of clinical facilities.
- Completes IPEDS Reports quarterly to ensure ongoing student financial aid.
- Facilitates Advisory Committee meetings and clinical preceptor meetings each semester.
- Facilitates monthly department meetings.
- Teaches didactic courses as needed.

CT/MRI PROGRAM COORDINATOR:

- Contributes to ongoing development of curriculum including course objectives, course sequence, and course content.
- Plans, implements and evaluates didactic teaching strategies to promote student achievement of course objectives.
- Contributes to the development of CT/MRI Program guidelines that promote the Cleveland Clinic philosophy of mission, vision & values, and the Cleveland Clinic School of Diagnostic Imaging mission and vision statements as well as the CT/MRI program philosophy.
- Performs classroom instruction for RT/CT/MRI students.
- Develops clinical schedules to ensure clinical implementation according to established curriculum.
- Collaborates with clinical preceptor s from each clinical site to ensure that the curriculum meets the needs of the students, school faculty, and staff of clinical sites.
- Evaluates and assures clinical education effectiveness through regularly scheduled visits of clinical facilities.
- Reviews student clinical evaluations and counsel's students as needed.
- Performs clinical site visits to ensure that student's clinical education needs are being met.

- Responsible for ensuring student and clinical site observance of clinical rotation schedules.
- Reviews and manages the student attendance.
- Assists director in the overall management and leadership of the school.
- Assumes responsibility for the School of Diagnostic Imaging in the program director's absence.
- Collectively responsible with all faculty for educational effectiveness and participates in evaluation studies to improve school outcomes.
- Assists with completion of JRCERT Self-Study and site visit to obtain/maintain school accreditation.
- Assists in the preparation and updating of the program policies and enforcement of program, hospital, and health system policies.
- Participates in community activities and encourages student and peer participation.
- Participates in clinical preceptor meetings to share student progress and discuss issues and concerns.
- Teaches didactic courses as needed and assigned.

RADIOGRAPHY PROGRAM COORDINATOR:

- Plans, implements and evaluates didactic teaching strategies to promote student achievement of course objectives.
- Develops clinical schedules to ensure clinical implementation according to established curriculum.
- Contributes to ongoing development of curriculum including course objectives, course sequence, content, etc.
- Collaborates with clinical preceptors from each clinical site to ensure that the curriculum meets the needs of the students, school faculty, and staff of clinical sites.
- Reviews and manages the student attendance.
- Reviews student clinical evaluations and counsels students as needed.
- Performs classroom and lab instruction for radiology students.
- Performs clinical site visits to ensure that student's clinical education needs are being met.
- Assists director in the overall management and leadership of the school.
- Assumes responsibility for the School of Diagnostic Imaging in the program director's absence.
- Contributes to ongoing development of curriculum including philosophy, courses, school, and course objectives, course sequence, content, etc.
- Collectively responsible with all faculty for educational effectiveness and participates in evaluation studies to improve school outcomes.
- Assists with completion of JRCERT Self-Study and site visit to obtain/maintain school accreditation.
- Assists in the preparation and updating of the program policies and enforcement of program, hospital, and health system policies.
- Participates in community activities and encourages student and peer participation.
- Evaluates and assures clinical education effectiveness through regularly scheduled visits of clinical facilities.
- Participates in clinical instructor meetings to share student progress and discuss issues and concerns.
- Teaches didactic and lab courses as needed and assigned.

RADIOGRAPHY INSTRUCTOR:

- Plans, implements and evaluates didactic teaching strategies to promote student achievement of course objectives.
- Provides tutorial sessions.
- Performs classroom and lab instruction for radiography students.
- Evaluates and assures clinical education effectiveness through regularly scheduled visits of clinical facilities.

- Assists with student competency and performance evaluation programs.
- Responsible for ensuring student and clinical site observance of clinical rotation schedules.
- Participates in clinical instructor meetings to share student progress and discuss issues and concerns.
- Contributes to ongoing development of curriculum including course objectives, course sequence, content, etc.
- Maintains statistical record of student achievement and assists with completion of JRCERT selfstudy and site visits to obtain/maintain school accreditation.
- Assists in the preparation and updating of program policies.
- Assists in the management of the student attendance.
- Teaches didactic and lab courses as needed and assigned.
- Performs clinical site visits to ensure that student's clinical education needs are being met.