MONTGOMERY COLLEGE

Health Sciences Student Handbook 2022-2023

Radiologic Technology Program

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FORWARD

This Student Handbook is designed to provide Health Sciences students with a reference manual that deals with policies and procedures for individual programs within the Health Sciences Department. This Handbook serves to assist Health Sciences students toward successful completion of their course of study by directing them to College resources via webpage links [click on the blue, underlined text link to access the specific webpage]. As such, it is intended to supplement, not replace the policy and procedure publications to which all students of Montgomery College are subject, such as the:

- Current College Catalog
- Current Semester Schedule of Classes
- Student Handbook (Student Code of Conduct)
- College Policy and Procedures
- Academic Regulations
- Public Safety,Health, and Emergency Management

It is the responsibility of each student to review this Handbook regularly and to understand it contents. It is the intention of this Handbook to eliminate the redundancy some might find in course syllabi or course guides. Information, policies and procedures that are relevant to all will be included in the first part of this Handbook. The second part of this Handbook will deal specifically with individual Health Science Programs within the Department. This Handbook should not be construed as constituting a contract, express or implied, between the individual Health Science Programs and any person. The statements and provisions of this Handbook are subject to change at the discretion of the Health Sciences Department and/or individual Program without notice. The most current version of this Handbook will be located on the website for individual Programs.

COLLEGE

ACCREDITATION

Middle States Commission on Higher Education

MISSION, VISION, AND VALUES

An organization's mission statement is a declaration of why it exists. A community college's fundamental reason for existence is postsecondary education. In different times and spaces, a revised statement of that mission should resonate to instill a sense of purpose for the members of the organization. The vision statement of an organization expresses what the organization aspires to become. And values are the principles on which members of an organization base their behavior, decisions, and actions.

OUR MISSION: Montgomery College is where students discover their passions and unlock their potential to transform lives, enrich the community, and change the world.

OUR VISION: Montgomery College will serve as the community's institution of choice to transform the lives of students and Montgomery County.

OUR VALUES: At our core, we believe in welcoming all students and all employees into a community that emphasizes belonging. We believe in giving every individual what they

need to succeed **(Equity and Inclusion)**. We believe in conducting our teaching and service duties with distinction **(Excellence)** in an ethical and trustworthy manner **(Integrity)**. We are dedicated to being a transformational institution seeking social justice and are continuously updating and improving all our learning environments, the curriculum, and student services **(Innovation)** to meet the changing needs of our community **(Adaptability)**. We make decisions about our operations in a way that respects and sustains the environment **(Sustainability)**. We conduct ourselves with civility, courtesy, and professionalism in all our interactions **(Respect).**

LEADERSHIP TEAM

Jermaine F. Williams, PhD, President
Sharon Fechter, Interim Senior Vice President for Academic Affairs
Monica Brown, EdD, Senior Vice President for Student Affairs
Janee' McFadden, Dean of Student Engagement and TPSS Student Affairs
Alice Boatman, Associate Dean of Student Engagement & TPSS Student Affairs
Brad J. Stewart, PhD, Vice President/Provost, Communications, Health Sciences, Health and Physical Education, and Humanities **[Takoma Park/Silver Spring]**
Monique Davis, PhD, MSN, RN, Collegewide Instructional Dean of Health Sciences and Director of Nursing
Brenda Knopp, MSN, CNE, RN, Nursing Department Chair
Timothy Fuss, PhD, RN Health Sciences Department Chair

APPLYING FOR GRADUATION:
December Graduation: Apply between June 2 – October 1
May Graduation: Apply between October 2 – February 15
August Graduation: Apply between February 16 – June 1

ATTENDANCE POLICY: Academic Regulations Article 9.645; Students are expected to attend all class sessions. In cases involving excessive absences from class, the instructor may drop the student from the class, resulting in a grade determined in accordance with Academic Regulation 9.645. "Excessive absence" is defined as one more absence than the number of classes per week during a fall or spring semester (with the number of absences to be prorated for accelerated sessions).

COMMUNICATION:
EMAIL: Students and Faculty must use College email when corresponding via email. The College prohibits use of personal email accounts for College communication. Students are expected to check their email regularly. Students are held responsible for information, assignments, and announcements that are distributed via email. Please include your full name, MC ID number, and the course number for which you are currently enrolled. Students can anticipate 48-72 hour email response time from faculty / staff during business hours.

MC ALERT: All students are encouraged to sign up for MC Alerts.

COUNSELING & ADVISING:
Disability Support Services: Students requesting reasonable

accommodations related to a disability must self-identify and encouraged to contact DSS as soon as possible after admission to the College. If eligible, must be completed each semester.
Accommodations: Determined on a case by-case basis and may include extended time, note-taking assistance, sign language interpreting services, and alternative formats for printed materials.

GRADES: Academic Regulations
Article 6 Disputed Final Grades
Incomplete Grades

HARDWARE SPECIFICATIONS: Technology will be a major component of your education at MC. The College identifies general technical requirements and minimal hardware specifications so that online learning is successful.

INCLEMENT WEATHER

RESOURCES:

Financial Aid
Learning Skills Support Services
Medical Learning Center
Student Health and Wellness
Title IX & Sexual Discrimination Information
TPSS Raptor Central
Tuition and Fees
Veterans and Military
Virtual Tutoring

STUDENT COMPLAINT RESOLUTION: In general, students are encouraged to approach their faculty member first to resolve their complaint. If the complaint cannot be resolved by the faculty member, then the student should address their complaint to the Department Chair. If the complaint still cannot be resolved, the complaint will be escalated to the Dean. Attempting to resolve a complaint at these levels will help assure timely resolution of student complaints.

STUDENT CODE OF CONDUCT: All students are expected to achieve their goals with academic honor. Cheating, plagiarism, and/or other forms of academic dishonesty or misconduct, examples of which can be found in the Student Code of Conduct, are not to be tolerated. A student who engages in any act that his or her classroom instructor considers academic dishonesty or misconduct is subject to any and all sanctions deemed appropriate by the classroom instructor. The classroom instructor determines student acts of academic dishonesty and misconduct, such as cheating, plagiarism, and any other form of academic dishonesty, common examples of which are cited in the Student Code of Conduct Section VIII. Grade

sanctions may range from an “F” on the assignment in which the dishonesty occurred, to an “F” on a portion of the coursework, to a maximum sanction of an “F” in the course. The instructor may choose to impose a consequence other than grade sanctions and also has the prerogative of referring a case to the campus dean of student development, with a specific request that the dean consider imposing additional sanctions. The rights and responsibilities of both the course instructor and the student, as well as the procedures to be followed, are detailed in the Student Code of Conduct.

WITHDRAWAL FROM CLASSES: Academic Regulations Article 4.10

Health Sciences Department

Advising: Faculty provide program advising to current and prospective students. All students will meet with a program advisor by week 8 of the semester and are encouraged to seek advising as needed. Program advising should occur at least twice per semester.

Blackboard: The College uses Blackboard as the designated Learning Management System. Students and faculty must self-enroll in the appropriate Hub to receive communications about learning resources, volunteer opportunities, and to complete mandatory training like HIPAA & OSHA

Health Sciences Hub
Nursing Hub

Health Record Requirements

CastleBranch: Health Record Management System utilized by all Health Science programs and many clinical facilities

CPR Certification: Proof of current CPR certification must be by the *American Heart Association* for the **Basic Life Support/BLS- provider;** no on-line classes accepted, blended (online AHA Heartcode with Face-to-Face skills testing) classes are acceptable.

Criminal Background Check: A criminal background check is required by the clinical agencies and is handled by an external vendor. Currently, the vendor is Castle Branch, Inc. Clinical facilities have the right to deny clinical placement based on background findings. All students must complete this background check even if a background check has already been done by another vendor. This is an **annual** requirement. You must address all “adverse” issues in a timely manner.

Drug & Alcohol Screening: Drug and Alcohol screening is required and is handled by an external vendor, currently the vendor is Castle Branch, Inc. All students must complete this screening check even if a screening has already been done by another vendor. This is an **annual** requirement.

HIPAA / OSHA for Healthcare Workers: All students will complete this module which includes Infection Control, Bloodborne Pathogens, Safety and test via Blackboard on the Health Science / Nursing Hub. This is an **annual** requirement.

Physical Exam: A health history and physical exam with lab work for complete blood count (CBC) & routine urine analysis (UA are required to be admitted into health science programs. The physical exam is an **annual** requirement.

Proof of Health Insurance: All clinical facilities require that students have health insurance. Students are required to upload a copy of their insurance card (front & back).

Tuberculosis Screening: A two-step PPD test is required for **all incoming students**. The two PPD tests must be completed **within 30 days** from the first PPD. A single PPD test is then required **annually.** If the PPD is positive, documentation that the student is free of symptoms of TB is required and must be repeated **yearly** while the student is in the health Science program. A **Positive PPD** form is available on the Health Science Hub. Your healthcare provider must complete the Positive PPD form. Students may also submit lab results for the QuantiFeron TB Gold instead of the PPD.

Vaccinations / Proof of Immunity: Students must provide proof of immunity to Measles, Mumps, Rubella, Varicella, and Hepatitis B. Proof of immunity is determined by a titer; a laboratory test that measures the presence of antibodies in the blood. If the titer is positive, the individual has immunity to the disease. A negative titer means there are inadequate antibodies present. Therefore, the individual is not immune and must receive the vaccination(s). In addition to the above vaccinations, students must receive Tetanus, diptheria, acellular pertussis (Tdap) vaccine every ten years and Seasonal Flu vaccine annually, usually from August – October.

N95 Fit test: All Health science students are required to be fit tested for an N95 mask. Students are required to completed a questionnaire and a qualified medical professional must complete and Respirator Medical Recommendation Form. Students should bring both forms when tested. Testing is performed by MC at no expense to the student.

Clinical Dismissal: Clinical facilities have the right to deny or revoke clinical placement for health record non-compliance, adverse findings on background check, alcohol and drug screening, or student behaviors that pose a safety threat or disrupt the workplace. Any dismissal may result in unsuccessful completion of the course and possible dismissal from the program.

Learning Skills Support Services: Academic support for students enrolled in any health science program is available at the TPSS campus. Services can be

customized based on student needs; individual academic study consultation and referrals to college resources. Workshops for time management, note-taking skills, effective study skills, test-taking skills, and organizational tactics are offered throughout the semester.an **annual** requirement. You must address all "adverse" issues in a timely manner.

MC ID: All students and faculty are required to wear their MC photo ID and present the ID upon entering the Health Sciences building.

Parking & Transportation: Students must provide their own transportation to and from campus and their clinical assignment. Students are responsible for any parking fees incurred. Students are expected to display MC parking permit when parking on campus.

Pregnancy*: A student who is, or becomes, pregnant is strongly encouraged to notify her course instructors and/or the Title IX Coordinator as soon as possible. By doing so, the student and instructors and the Title IX Coordinator can collaborate and develop an appropriate plan for the continuation of the student's education in light of the unique nature of the College's nursing and health sciences programs and their clinical requirements, as well as particular challenges the student may face while pregnant or when recovering from childbirth (e.g., missed classes, make-up work, etc.). However, the choice to declare a pregnancy is voluntary, and a student is not required to disclose this information to the College. The College cannot ask the student to provide medical documentation or clearance for participation in clinical, however, the student is reminded that the program has Technical Standards that each student must meet to ensure the safety of students and patients. Students should consult with their healthcare provider to determine if they meet those Technical Standards. TitleIX@montgomerycollege.edu

***Radiologic Technology students have more specific criteria for the pregnancy policy which is located in the Radiologic Technology Program content under Radiation Safety**

RADIOLOGIC TECHNOLOGY PROGRAM

Mission and Goals and Program Philosophy

Mission/Goals
JRCERT Standard 1.1 Standard 6 Programmatic Effectiveness and Assessment

Mission Statement

The mission of the Radiologic Technology Program parallels the mission of Montgomery College's Mission statement in that the students who enter and complete the Radiologic Technology have met their potential and found their passion. Students are empowered to transform their own lives as well as enrich the life of the local and global community as skilled, critically thinking, competent radiographers who possess integrity, accountability, empathy, a strong commitment to excellent customer service and patient care skills while serving a diverse community.

- Goal 1: Students will graduate as competent entry level radiographers
- Goal 2: Student will demonstrate clinical competence
- Goal 3: Students will demonstrate critical thinking skills through their performance in their competency in radiographic and patient care skills.
- Goal 4: Students will demonstrate professionalism
- Goal 5: Students will demonstrate effective communication skills
- Goal 6: Students will demonstrate a strong commitment to excellent customer service

Program's effectiveness data is available on the program web site

Program Philosophy

The philosophy and goals of the Program interface with those of Montgomery College itself. They are exhibited by the College in its support of professionalism and academic excellence, by the provision of qualified faculty, a carefully designed academic environment, and in the Program by a wealth of clinical experience.

Learning facilitative strategies are incorporated in both the didactic and clinical areas. The faculty believes that this strategy is of key importance in this health-related career. In addition, cultural, socioeconomic, gender, age and disability diversities, inherent in the patient care aspect of the field of diagnostic imaging is introduced in the first course of the program and emphasized continuously throughout the program via didactic and the clinical practicum.

The faculty constructs behavioral and performance outcomes and objectives throughout the program to produce graduates who are highly proficient and competent in the art and science of radiography. They will become knowledgeable in the theoretical foundation of their profession and capable of functioning in a variety of clinical settings which utilize the latest industry standard imaging equipment and modalities.

As in any learning experience, the faculty will play the role of facilitator to the student. A competency-based program in which didactic and clinical learning are closely correlated will help students develop into professionals who are practiced in the art of problem solving, and capable enough to be confident of advancement in their chosen field. The instructors will guide and direct the students in discovering the role that they must play in actively participating and being responsible for the learning processes in order to become proficient as practicing radiographers. Faculty maintain an open-door policy for any student who needs additional support or council. Students are advised of this throughout the two years they are in the program.

Finally, the faculty feels that being certified by the American Registry of Radiologic Technologists is the ultimate goal of the graduate. This certification plays a key role in providing opportunities to work in the profession and to contribute to the radiological sciences in the local community as well as nationwide.
Graduates who are knowledgeable in the theoretical foundation of radiography should be able to share their knowledge with fellow radiographers, future students and allied health workers in the local community as well as nationwide. Continuing education will enable these radiographers to assume higher levels of responsibility in their occupation. These factors will enable the radiographer to become a fully qualified member of the health care team.

PROGRAM ORGANIZATIONAL STRUCTURE

Rose Aehle, RT (R,M) M.S **Program Coordinator** 240-567-5564 HC 442 Rose.aehle@montgomerycollege.edu	Kathy Lewandowski, RT (R,M) B.S **Clinical Coordinator** 240-567-5565 HC 441 Kathy.lewandowski@montgomerycollege.edu
Sharare Jones **Administrative Aide** 240-567-5563 HC 435 sharare.jones@montgomerycollege.edu	

ACCREDITATION

The Radiologic Technology Program is accredited by the Joint Review Committee on Education in Radiologic Technology, a national peer review group. This organization establishes and assures maintenance of high standards of quality for all accredited radiography programs.

PROGRAM LEARNING OUTCOMES

Goal 1: Students will graduate as competent entry level radiographers

Learning Outcomes
1) Students will be retained in the program.
2) Graduates will pass their ARRT exam on the first attempt
3) Graduates seeking employment will find employment within 12 months of graduation
4) Employers will be satisfied of graduates' performance as entry level radiographers

Goal 2: Student will demonstrate clinical competence

Learning Outcomes:
1) Students will properly position patients
2) Student will select appropriate technical factors for producing diagnostic images
3) Students will demonstrate didactically and through practical application, ALARA and other radiation safety principles to ensure proper radiation protection

Goal 3: Students will demonstrate critical thinking skills through their performance in

their competency in radiographic and patient care skills.

Learning Outcome:
1)Students will make necessary adjustments in positioning to accommodate for trauma or incapacitated patients
2) Students will demonstrate the ability to adjust technical factors based on patient condition

Goal 4: Students will demonstrate professionalism

Learning Outcomes
1) Students demonstrates professionalism by maintaining patient confidentiality and adhering to the ARRT code of ethics
2) Students assumes ownership by demonstrating accountability for own actions
3)Students demonstrates initiative by exhibiting a willingness to learn, self-motivation and appropriate use of clinical hours
4) Student demonstrates appropriate verbal interaction with supervisors/clinical instructor

Goal 5: Students will demonstrate effective communication skills

Learning Outcomes
1)Student acquires pertinent history from the patient
2)Student responds to patient verbal and non-verbal clues and questions

Goal 6: Students will demonstrate a strong commitment to excellent customer service

Learning Outcomes
1) Students will exhibit appropriate customer service behavior as part of their clinical competency

2) Students will successfully complete two mandatory customer service workshops as part of the clinical practicum

PROGRAM OF STUDY

Advising Guide

Advising Worksheet

Curriculum

General Education Requirements	Credit Hours
BIOL 150-Principles of Biology I	4
BIOL 212-Human Anatomy and Physiology I	4
BIOL 213-Human Anatomy and Physiology II	4
Math Foundation	3
HINM 101 Medical Terminology I	2
English Foundation	3
English 101 Technique of Reading & Writing	3
PSYC 100 General Psychology	3
ENGL Foundation	3
Total Gen Ed Credits	**29**
Program Requirements	
Summer 1 -First year	
RADT 119 Clinical Radiology I	3
Fall 1- First year	
RADT 101- Radiologic Technology I	4
RADT 111-Radiographic Positioning I	3
RADT 120-Clinical Radiology II	2
Spring I- First year	
RADT 102- Radiologic Technology II	4
RADT 112- Radiographic Positioning II	2
RADT 124-Clinical Radiology III	2
Summer 2- Second year	
RADT 125- Clinical Radiology IV	3
Fall II- Second year	
RADT 206- Radiologic Technology III	2
RADT 211- Radiographic Positioning III	2
RADT 224-Clinical Radiology V	3
Spring 2- Second year	
RADT 207- Radiologic Technology IV	2
RADT 240- Radiologic Technology V	2
RADT 225- Clinical Radiology VI	3
Total Radiology Credit Hours	**37**
TOTAL PROGRAM CREDIT HOURS	**66**

GRADING SCALE

Since radiography is a profession in which less than adequate performance may well cause patients to suffer real harm, standards must be maintained which are high enough to insure the effectiveness and competency of our graduates. Accordingly, the Program grading system is somewhat different than that for other Montgomery College courses.

DIDACTIC Courses of the Radiologic Technology Program (RADT 101,102,111,112,206,207, 211 and 240) is as follows:

Number Grade	Letter Grade
93 to 100	A
86 to 92	B
78 to 85	C
Below 78	F

Students must maintain a grade of "C" in all didactic Radiologic Technology courses in order to advance to the next semester.

CLINICAL Practicum Courses of the Radiologic Technology program (RADT 119, 120,124, 125, 224, 225) follow a different grading scale due to the importance of students performing in a safe and competent manner as required for training in becoming practitioners in the profession and as is follows:

Number Grade	Letter Grade
93 to 100	A
86 to 92	B
Below 86	F

Students must maintain a grade of "B" in all clinical Radiologic Technology courses in order to advance to the next semester. (Some patient care competencies are graded on a pass/fail scale. See section entitled Patient Care Competencies under Clinical Skills Accountability in this handbook.

Students not meeting the above minimum requirements will not be allowed to continue taking any Radiologic Technology courses and no longer have a seat in the program. Since the courses usually are offered only once a year, students can continue with the general education courses in the curriculum and can apply for readmission and/or re-enrollment into the program the following year, completing satisfactorily the course in which their deficiency occurred.

PROGRESSION POLICY

Catalog Course Descriptions for RADT courses

The curriculum is dependent upon proper sequencing of courses. If a student does not satisfactorily meet the course objectives and pass the RADT courses, he/she will be unable to progress in the curriculum. A radiologic technology course with a clinical component may not be repeated unless with the written approval of the Program Coordinator according to Academic Regulation 4.9 C.

"***Medical Health Course Exception: No medical health clinical course with a practicum component may be repeated without the written approval of the specific medical health***

program coordinator. The approval or denial of such requests by this individual is final"
If a student does not successfully complete the course, he/she will not be able to continue in the Program. A student may only re-enroll in the Radiologic Technology program one additional time after the first unsuccessful completion of one or more RADT courses. This re-enrollment option is offered beginning with the Fall RADT courses and does not include RADT 119 (see next section regarding Readmission/re-enrollment,)

READMISSION/RE-ENROLLMENT of Montgomery College Radiologic Technology Student after a one year break** due to unsuccessful completion of a RADT didactic course

*(**A student whose entire academic work has been interrupted for two or more years must apply for readmission to the program as a first year student. If a student is accepted as a new student into the program, student will still meet with faculty and a counselor to set up a learning contract (see item 4 below) to promote successful completion of the program.)*

Re-acceptance back into the program in an advanced status after a one-year break due to an unsuccessful completion or withdrawal of a didactic course (RADT 101, 102, 111, 112, 211, 206, 207, 240) is based on clinical seat availability. The opportunity to return to the program in an advanced placement is only offered ONE TIME to any student who unsuccessfully completes or withdraws from a didactic course. Therefore, any student who has been advanced placed once due to unsuccessful completion of a didactic class or withdrawal of a didactic course will not be offered a second chance of advanced placement. If a student, after advanced placement withdraws or is unsuccessful in a didactic course they will need to reapply for acceptance into the Radiology Technology student as an entry level student and must follow current application process for consideration of acceptance into the program.

If a student was unsuccessful in one of the RADT didactic classes and wishes to return the following year to repeat the class, the following steps are to be taken to ensure a successful re-entry into the program.

1) Contact Program Coordinator indicating their desire to return to the program.

2) Student return is based on clinical seat availability and if there is seat available will need to audit the clinical course of the semester they are returning to retake the didactic course they were unsuccessful in
    i. Clinical course audit: The remedial clinical course serves as a refresher tool and is a prerequisite for students returning to the program after a one-year break. Since they have successfully taken this clinical course, the student must audit the course and no grade is given.
    ii. Students must, however still fulfill the following objectives during the remedial clinical rotation:
        - Complete the required number of competencies as indicated on the syllabus for that clinical course
        - Be evaluated by clinical staff and college faculty
        - Complete performance objectives
        - Complete the number of hours designated for this clinical course.
        - Students are NOT required to re-submit written assignments unless the

assignment is necessary to assess current skill and critical thinking levels.

3) Student must have a 2.5 GPA based on the last most recent 24 credits including the unsuccessful RADT classes credits

4) The student will be asked to meet with the program faculty and will be expected to present a written academic and clinical action plan that will promote a successful completion of the program. Guidelines for this plan will be given to the student prior to this meeting and objectives to be addressed will include strategies the student expects to employ to promote success in the program, reflection of behavior or choices that should be avoided, and a brief review of the student code of conduct. The student will be asked to sign this plan and this will serve as a contract of success between the program and the student.

5) Student may be given a test which included hands -on practicum to assess their knowledge of curriculum objectives to assure proper replacement into the program. Student must pass both tests with a 78% or higher to be eligible to return.

6) Radiologic Technology faculty will meet to assess the required documentations as well review previous documentation of the student when student was enrolled in the program.

7) Faculty will make the decision as to the results of a return by the student

8) If a student is offered a seat to return it is highly recommended that the student audit the co-requisite didactic courses of the semester they return.

Unsuccessful Completion of a Clinical Course

Students who are not successful in a clinical practicum course as described below will not be eligible to be advanced placed in the program.

This includes students who are unsuccessful in completing a clinical practicum course (RADT 119, 120, 124, 125, 224, 225) due to not passing the course with an 86% or due to removal of student from the clinical course due to affective behavior, unsafe clinical practices or other reasons that would impact the student being allowed to continue in a clinical course.

PROGRAM LENGTH AND COURSE POLICIES

The Radiologic Technology Program is a two-year program. Students begin in the summer for 10 weeks (summer session) Students complete a Fall (15 weeks) and Spring (15 weeks) semesters for their first year. Students attend a 2nd ten (10) week summer session as they transition to their second year. They complete the program with a Fall (15 week) and a Spring (15 week) semester and graduate in May.
Please note that there are general education credits required for the AAS degree awarded for completion of this program. This may require additional time prior to entering this program and many students complete the majority of the general education required for this program. Please see the next section regarding application procedures and the description of priority placement.

The program is a learning facilitated one which is designed to encourage interactive investment in lecture, lab and clinical practicum. Grading is a quantitative method of assessing content knowledge and it equally important to assess content based on feedback from grades. The program does not promote memorization as a main method of demonstrating comprehensive of material but challenges students to use higher level learning skills such as analysis, contrast and comparison, self-reflection and other critical thinking skills.

Students are responsible for the timely completion of all assignments, keeping current with the reading from texts and preparing for classes. Students are encouraged to form study groups and make use all of the classroom references, spaces and other facilities as needed. Faculty have an open-door policy for individual tutoring and are accessible to students before and after classes as well as during faculty office hours. Students may also call or e-mail faculty with questions about content. Course information is posted on Blackboard. E-mail communication to students is made through Blackboard and students are encouraged to check Blackboard frequently. Faculty record lectures using Collaborate which are accessible to all enrolled RADT students. Grades are also posted on Blackboard. Faculty use only the student MC email to communicate Students should bookmark these sites and check them regularly. For those students who do not have internet accessibility, there are computer labs throughout all three campuses that are available for students. For printing students may print using the cloud-based program WEPA.

It is the student's responsibility to seek timely assistance in content area that may be challenging them. It is not recommended that students wait until the end of the semester to address challenges that they have struggled with over the semester. The program has many resources to assist the student, including graduates who are willing to tutor or mentor students.

ON CAMPUS LAB POLICIES

The Radiologic Technology program has two dedicated radiology labs. In room 424, students practice and simulate radiographic examinations. This lab is equipped with three non-energized x-ray tubes and functional x-ray tables. This equipment allows students to practice positioning each other in the safety of a non-energized unit. This lab has computers with specific imaging related programs as well as access to the internet. Upon request from faculty, students can access this room whenever they are on campus

Room 430 has fully energized equipment and as such, students can only use this room under the supervision of a qualified radiographer. The energized equipment are registered with the Maryland Department of Environment and is assessed in the timeframe as required for units by the state of Maryland by a qualified physicist.

The lab contains a Fuji and Rayence wireless direct capture imaging systems, a Konica computed radiology system and a radiofluoroscopy room that is fully functional. The program has a fully functioning FUJI CR Portable, GE portable and a Ziehm C-arm. Students can practice, under the guidance of qualified ARRT registered faculty positioning several imaging manikins (Damaged Debbie, Wounded Willy, a light weight manikin as well as pediatric manikin) all are full sized phantoms with a complete skeletal system, movable joints and thorax and abdominal organs and (in the case of Wounded Willy) has fractures. In addition, the lab has specific anatomical phantoms that can be used for imaging. Students are able to make exposures on these manikins and process the image digitally to be viewed on a computer. This lab also has computers with the same software programs noted in the 424 lab.

Students must adhere to ALARA and cardinal principles of radiation in these labs and must wear their dosimeters for labs that will be using this room. Refer to the Radiation Safety practices manual located in this handbook as well as on the web page.

Specified hours each week are available for students to use the lab in addition to their regularly scheduled class hours. Students may sign up with the faculty during these "open" lab hours to practice skills. Students may also be referred by faculty for additional practice time if they are found deficient in a particular skill. Students are encouraged to use the open lab time to practice. Rooms 423 (lecture room) and 424 are equipped with computers as well as the Medical Learning Center which is located on the second floor of the Health Science Building.

RADIATION AND OTHER SAFETY POLICIES

Radiation Safety

Students will follow the ALARA and the cardinal rules of radiation safety as discussed in their first day of the RADT 119 class, which is a clinical class conducted on campus beginning the third week of May each year. Radiation safety practice objectives are reinforced throughout the program in each RADT class, both clinical and didactic with advanced radiobiology concepts and regulations addressed in classes as noted in the syllabi. In addition, this Safety Practices document is provided to all students and can be found on the Rad. Tech web page under link entitled Safety Practices. The document is also found outside of the energized lab in HC 430.

Radiologic Technology Program Radiation Safety Practice Curriculum Sequence

Radiation Safety Curriculum Sequence

Summer Session (1st year)

Outcomes RADT 119

Introduce and apply ALARA, time, distance, shielding principals for occupational and patient/personnel radiation protection

Fall Semester (1st year)

Outcomes RADT 111

Demonstrate appropriate radiation safety and protection methods including ALARA.
utilize the energized laboratory and positioning lab equipment, as well as the exposure factors to produce optimum radiographs

Outcomes RADT 101

Discuss human injury caused by radiation.
List basic radiation protection equipment.
Describe a brief history of modern radiography (to include DR and CR) and discuss what behaviors are required of a radiographer.
Discuss time, distance and shielding in reference to radiation protection.
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Outcomes for RADT 120 (Clinical)

Demonstrate safe operation of radiographic equipment.
Demonstrate effective use of technique manipulation to produce an optimum quality radiograph.
Apply radiation protection methods, and ALARA as indicated by specific radiographic

procedures.

Spring Semester (1st year)

Outcomes RADT 112

Demonstrate appropriate radiation safety methods and ALARA
Demonstrate knowledge of the energized laboratory and practice lab equipment, as well as the exposure factors necessary to produce optimum radiographs.

Outcomes RADT 102

Define health physics.
List the cardinal principles of radiation protection and discuss the ALARA concept.
Explain the meaning of NCRP and the concept of dose limits.
Name the dose limits for occupational and non-occupational worker for whole-body, skin, and extremities.
Discuss the radiosensitivity of the stages of pregnancy.
Describe the recommended management procedures for the pregnant radiographer and for the pregnant patient.
Evaluate the radiosensitivity of tissues and organs.
identify the leakage radiation limit for x-ray tubes.
List the beam-on indicators on the control panel.
Indicate the nine radiation protection aspects of radiographic equipment.
List the nine radiation protection features of fluoroscopic equipment.
Discuss the design of primary and secondary radiation barriers.
Describe the design of the three types of radiation detection dosimeters used in diagnostic imaging.

Outcomes RADT 124 (Clinical)

Demonstrate safe operation of radiographic equipment.
Demonstrate effective use of technique manipulation to produce an optimum quality radiograph.
Apply radiation protection methods, as indicated by specific radiographic procedures

Summer Session (1st year)

Outcomes RADT 125 (Clinical)

Demonstrate mastery of more complex principles in safe operation of radiographic equipment.
Demonstrate more effective use of technique manipulation, at an intermediate level, to produce an optimum quality radiograph.
Apply appropriate radiation protection methods, as indicated by specific radiographic procedures, during procedures and exhibit these methods of the radiograph.
Demonstrate knowledge of surgical suite and C-arm and portable machine manipulation in the surgical environment.

Fall Semester (2nd year)

Outcomes RADT 211.

Utilize exposure factors to produce optimum radiographs
Employ optimum radiation protection methods including ALARA.
Utilize the energized laboratory and positioning lab equipment, as well as the exposure factors to produce optimum radiographs

Outcomes RADT 206
Exhibits knowledge of the theory of cellular biology and the principles of radiobiology
Demonstrates an understanding of the causes and effects of short- and long-term exposure to radiation.
Recognizes the importance of radiation protection in terms of radiation biology.

Outcomes for RADT 224 (Clinical)
Demonstrate mastery of higher skill levels in the safe operation of more complex radiographic equipment.
Demonstrate effective use of technical skills to produce an optimum quality radiographic image.
Employ more complex radiation protection methods and ALARA as indicated during procedures and exhibits these methods on the radiographs.

Spring Semester (2nd year)

Outcomes for RADT 207
Discuss appropriate radiation protection protocols for CT

Outcomes for RADT 225 (Clinical)
Demonstrate complete mastery of higher level skills in safely operating more complex radiographic equipment.
Demonstrate the most effective use of technique manipulation to produce an optimum quality radiograph of more complex nature.
Employ the most complex radiation protection methods, as indicated by specific radiographic procedures, during procedures and exhibits these methods on the radiographs.

Exposure monitoring (dosimeters) and identification

US NCR OCCUPATIONAL DOSE
5000 millirem per year (50 mSv per year) for students over 18. For students under 18 100 millirem per year (1 mSv per year)

Montgomery College provides dosimetry badges (Optically Stimulated Luminescent Dosimeters or OSL) for the Radiologic Technology students. The students will always wear the OSL while working with any form of ionizing radiation. It is to be worn around the upper chest area (on the collar) at all times. When wearing protective lead apparel, the dosimeter is to be worn above this apparel. No student will be allowed to work in the clinical areas without the dosimeter. or classroom energized laboratory area without their dosimeter. Students are reminded to bring their dosimeters to the labs while exposures are made using the energized lab or portables. If a student forgets their dosimeter, they are not to remain in the room when exposures are made on the phantoms. Appropriate protective wear will be used according to the procedure protocol.

Exposure labs on campus: All students are expected to follow radiation safety practices in the lab as well as at the clinical sites. Students are to wear their radiation dosimeters for all labs.

Dosimeter and the clinical site: Students must always wear dosimeters at the clinical site.

Students who fail to wear their dosimeter in the clinical site must leave the site. They may return the same day once they retrieve their dosimeter. Loss of time at the site must be made up. Continued non-compliance of appropriate wearing of the dosimeter at the clinical resulting in absences from the site may result in a grade reduction and/or unsuccessful completion of the clinical course.
Students must always wear lead aprons and thyroid shields while assisting in fluoroscopic procedures and mobile radiography studies

Under no circumstance is a student to hold a patient or image receptor for an exposure.

Badge inserts are changed monthly, and it is the responsibility of each individual student to see that the badge insert is changed before the 20th of each month. **Should a student not turn in their dosimeter prior to the deadline, points may be taken off the final grade of the clinical course in which they are enrolled.** Failure to adhere to this policy may result in an inaccurate radiation exposure reading since the rest of the dosimeters will be mailed to the dosimetry service with the "control" badge. However, students should wear their dosimeter even if it is past the expiration date until a new dosimeter is obtained.

A printout from the vendor who provides the OSL's is provided for student's review each month . Each student is asked to review his/her radiation exposure reading *using dosimeter number only each month (every 30 days)*. All other identifying information are removed from this report. The radiation safety officer maintains the original of each monthly report in a secure place. Students will be consulted for any reading reported for 10 or more millirems on a monthly report to determine how the exposure has occurred. A reading over 40 millirems for the month will necessitate a possible change in rotation from high exposure areas or procedures. A conference will be necessary with the RSO and the program director in the event of an unusually higher radiation dose on any report summary. This will be necessary to determine if the dose was physically obtained by the student or if the dosimeter was inadvertently left on an apron or shield. All students are reminded that the summary reports track a lifetime dose and will remain on a radiographer's report for the remainder of their career. Each student is encouraged to keep track of their dosimeters accordingly and turn them in a timely fashion.
A monthly checklist with the student's initials is provided along with the monthly dosimeter printout. Each student is asked to check their monthly reading and place their initials in the column provided next to their name. The checklist is kept in a secured binder in RSO office and the report is placed in the energized lab. The dosimeters usually arrive by the 10th day of the month and will be placed in the student mailboxes. The students are expected to switch out their old dosimeters and the RSO (Full Time Rad. Tech Faculty) will mail them back to Landauer within the next week.

DIRECT AND INDIRECT SUPERVISION

STUDENT NON-COMPLIANCE WITH SUPERVISION POLICY WILL RESULT IN THE STUDENT BEING COUNSELED WITH SIGNIFICANT GRADE DEDUCTIONS AND RISK OF UNSUCCESSFUL COMPLETION OF THE COURSE AND PROGRAM.

CLINICAL SITE NON- COMPLIANCE MAY RESULT IN TEMPORARY PROBATIONARY STATUS FOR A CLINICAL SITE

a. Direct and Indirect Supervision

Direct Supervision is required for all students who have not yet demonstrated competency must be under direct supervision of a registered radiographer. **Direct supervision** means

that the radiographer is in the radiographic room observing and supporting the student. Once the student has demonstrated competency on an examination, they may perform the same examination under indirect supervision.
Direct supervision is required on all portables, operating room, and repeats, NO EXCEPTIONS.
Indirect Supervision implies that a radiographer is within speaking distance of the student. The radiographer does not need to be inside the room but close enough to respond a student's call. Use of a telephone or paging system does **not** comply with indirect supervision.

- Students may perform exams under indirect supervision if the imaging room is located where visual and audio contact can consistently be made between the technologist to the student.
- Students are never permitted to perform portable exams in the ER/ED department/bay or any other department without a registered technologist directly supervising them.
- Students are not permitted to perform examinations in rooms that are not open to the quality control area where registered techs can immediately assist them upon calling for assistance. If an imaging room is isolated and closed off by a door students must have a radiographer with them even if they have demonstrated competency on the exam
- Students are never permitted to be in the operating room without a registered radiographer

Repeat Radiographs

Students are not permitted to perform repeat radiographs without a registered technologist.
When a student needs to repeat a radiograph taken on a patient, a registered technologist is required to directly supervise them and be in the room with them. This policy is in effect whether the student has comped the exam or not. It is imperative to prevent any unnecessary radiation exposure to a minimum for all patients.
Students are required to document all repeats. The student should enter the Repeat in "Case Logs" which will request a verification from the supervising technologist to verify that they may have assisted and did observe the student performing the Repeat radiograph. Instructions for this entry can be on Blackboard and the E-value web site. Students who do not record their repeats will be penalized with a 10 point deduction in affective behavior for each infraction and ultimately conferenced.

Holding Patients and IRs

Students are never permitted to hold a patient or IR during an exposure.

PREGNANCY POLICY

At monthly information sessions and during orientation of newly accepted students the pregnancy policy is reviewed. In addition, an additional review of the policy is incorporated into the RADT 119 (Clinical radiology I) class

In addition to the College Pregnancy Policy and found on page 12 of the handbook the

Radiologic Technology program has the following additional policy requirements

The National Council on Radiation Protection and Measurement (NCRP) recommends that the dose equivalent to the embryo-fetus from occupational exposure to the expectant mother should be limited to 0.5 REM for the entire gestational period. It is also stated that females involved in the occupation may voluntarily disclose their possible pregnancy to their supervisor if suspected. Through proper instruction to these precautions, it is possible to limit all occupational exposure to under 0.5 REM per year and prevent fetal dose equivalents from being surpassed.

All students enrolled in the Radiologic Technology Program are instructed in proper safety precautions and personnel monitoring prior to being admitted to any ionizing radiation area. Students are required to abide by **ALL** safety precautions and importance of keeping exposure as low as practical through a combination of time, distance and shielding is stressed.

Should any student suspect pregnancy, she is recommended to voluntarily disclose it to the Program Coordinator. This must be in writing and indicate the expected date of delivery. In the absence of this information, a student cannot be considered pregnant.

Upon voluntary disclosure of the pregnancy, the student will:

1) Follow the College pregnancy policy as noted on page

2) Meet with the Program Coordinator regarding the nature and potential radiation injury associated with in-utero exposure, the regulatory limits established by the NCR Regulatory Guide 8.13 and the required preventative measures to be taken throughout the gestational period. A statement of receipt of this information will need to be signed at this time.

3) The pregnant student has the option to complete the program without any modifications. If requested by the student, modifications will be made for clinical rotation during the pregnancy. If the student requests modifications, upon consultation with the student the faculty and clinical instructor from the clinical site will finalize the rotation schedule

4) The student will abide by the following:
   a. Strict adherence to ALL safety precautions for protection purposes.
   b. A second dosimeter will be provided and is to be worn at the student's waist, to monitor fetal dose.
   c. At any time that the pregnant students feels she is working in an unsafe area or under conditions she feels detrimental to herself or fetus, stop immediately and report to the clinical instructor.
   d. At no time and for no reason will the pregnant student place herself in the primary beam of radiation.

5). If a student chooses to temporarily leave the program, every effort will be made to assure a successful return to the program. As always, return into the program after a break is dependent on clinical space availability and student may be asked to remediate clinically or didactically as part of her return.

6). The student must realize that she must complete, upon her return or when she is no longer pregnant all the clinical competencies she may have missed due to voluntary modifications as well as related coursework.

7). Students have the option of withdrawing declaration of pregnancy at any time. This must also be presented in writing and submitted to the program coordinator.

COMMUNICABLE DISEASE POLICY

Students with known communicable diseases will need to follow the clinical facilities protocol for personnel with communicable diseases. The college has no jurisdiction over a clinical facilities communicable disease protocol. Please be aware that radiography students take part in invasive procedures. As part of the RADT 119 class and prior to clinical rotations, students are instructed in Standard Precautions as well as OSHA regulations.
At monthly information sessions and during orientation of new accepted students, students are advised that all immunizations must be up to date and HEB B vaccine is required.

During student experiences in the clinical setting, the student may possibly come in contact with diseases, equipment, and treatments that may be hazardous to the individual and/or to an unborn fetus. It is expected that the student utilize standard and OSHA precautions with patient care procedures to minimize risks to the student and/or unborn fetus. If a student has an incident occur involving contact with a communicable disease and/or bloodborne pathogens, it is expected that the student **follow** their **affiliate's exposure control policies**. It is then the student's responsibility to see their own physician immediately to establish baseline testing and seek any required follow-up. TB exposure should be followed immediately with a PPD or if applicable a chest x-ray and a three (3) month follow-up after that. A copy of the incident should be brought back to the College for the student's file. *If the student comes into contact with diseases outside of the Program or contracts diseases which may be hazardous to other students, patients, or hospital personnel, it must be reported to the Montgomery College Security with 24 hours of incident as well as notifying the Program Coordinator*. Security will forward to Montgomery College's Risk Manager.

A student, who may be exposed to a communicable disease, may be asked to leave the clinical area until incubation periods Some diseases may be fatal to patients with compromised immune system. Any time missed in this case must be completed.

LATEX SENSITIVITY

Students with known latex sensitivity or allergies should be aware that the college cannot guarantee non-exposure to latex in the clinical arena.

MRI SAFETY

The magnetic field is constant in an MRI room and highly magnetic items such as certain jewelry, implanted devices, medical equipment and credit cards can be adversely affected by this field, causing potential injury to the student as well as to the patient. Gradient magnetic fields cause many things including peripheral nerve stimulation. In addition, radiofrequency fields used during an MRI can cause heating/burning. Therefore, students should be aware of what is on their person as well as what is on or in their patient before entering the MRI suite. Students should familiarize themselves with the facilities Magnetic ZONE policies (safe and unsafe areas). An MRI screening document will be completed in the first fall semester of the program and repeated yearly by each enrolled student (see appendix E of the Student Handbook) and also part of this safety manual. Students will receive further education on MRI safety in RADT 119, the first class of the program and offered in the summer and in RADT 207, offered in the final semester of the program. If there is a concern based on the screening tool, the student will be appropriate advised by faculty

MRI SCREENING FORM

Students may be in situations where they enter zones 3 and 4 in the MRI area to transport patients, lifting help, or for advanced modality observation. The magnetic field is always on that is why student's need to be aware of the safety issues and what zones are safe for students (see zones included in this document. Students are introduced to the MRI zones and MRI safety during Orientation to the program, Fall clinical orientation, RADT 101 and RADT 207. Before entering the MR environment or MR system room, students should be screened and given authorization to enter zones 3 and 4 by the MR department. They will also be advised to remove the following metallic objects including hearing aids, dentures, partial plates, keys, beeper, cell phone, eyeglasses, hair pins, barrettes, jewelry, body piercing jewelry, watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, nail clipper, tools, clothing with metal fasteners, & clothing with metallic threads.

The MC Radiologic Technology Program MRI screening form is filled at least twice while the student is in the Program. In the interim, it is the student's responsibility to report any changes on this form to the faculty.

Student Name_____

Please address the following:

Have you had an injury to the eye involving a metallic object or fragment (e.g., metallic slivers, shavings, foreign body, etc.)? No Yes

If yes, please describe: _____

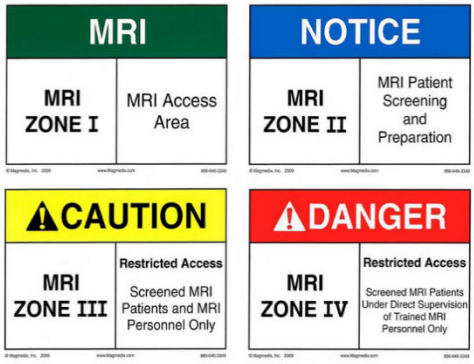
Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)? No Yes If yes, please describe: _____

Please indicate if you have any of the following:

- Aneurysm clip(s) Yes No
- Spinal fixation or fusion devices Yes No
- Cardiac pacemaker Yes No
- Implanted cardioverter defibrillator (ICD) Yes No
- Electronic implant or device Yes No
- Magnetically-activated implant or device Yes No
- Neurostimulation system Yes No
- Spinal cord stimulator Yes No
- Internal electrodes or wires Yes No
- Bone growth/bone fusion stimulator Yes No
- Cochlear, otologic, or other ear implant Yes No
- Insulin or other infusion pump Yes No
- Implanted drug infusion device Yes No
- Any type of prosthesis (eye, penile, etc.) Yes No
- Heart valve prosthesis Yes No
- Eyelid spring or wire Yes No
- Artificial or prosthetic limb Yes No
- Metallic stent, filter, or coil Yes No
- Shunt (spinal or intraventricular) Yes No
- Vascular access port and/or catheter Yes No
- Radiation seeds or implants Yes No
- Swan-Ganz or thermodilution catheter Yes No
- Medication patch (Nicotine, Nitroglycerine) Yes No
- Any metallic fragment or foreign body Yes No
- Wire mesh implant Yes No
- Tissue expander (e.g., breast) Yes No
- Surgical staples, clips, or metallic sutures Yes No
- Joint replacement (hip, knee, etc.) Yes No
- Bone/joint pin, screw, nail, wire, plate, etc. Yes No
- IUD, diaphragm, or pessary Yes No
- Dentures or partial plates Yes No

- Tattoo or permanent makeup Yes No
- Body piercing jewelry Yes No
- Hearing aid (Remove before entering MR system room) Yes No
- Other implant _____ Yes No

I attest the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form, and I have had the opportunity to ask questions regarding the information on this form. Faculty will review this form and those students who do indicate **Yes** to any of the above will be coached by Faculty to assure the student's safety.



Student Signature_____ Date _____

FEDERAL LAW CONCERNING CHEMICAL HAZARDS

Federal law requires that all individuals must be notified about hazardous chemicals present in the work place. This law applies to all occupations, with the basic purpose of raising the level of conscientiousness on chemical

ASSOCIATED PROGRAM EXPENSES

Physical Exam	$125.00 - $200.00
Immunizations	$420.00 - $820.00
Blood Titers	$300.00 - $350.00
Criminal Background Test and Drug Testing	$100.00 - $110.00
PPD	$10.00 - $40.00
Uniforms	$100.00 - $150.00
CPR	$35.00 - $60.00
Books	$500.00+
Parking at Clinical Sites	$0.00 - $25.00 per/day
Lead Markers	$16.00
ESTIMATED TOTAL	$1616 - $2,271

All Costs are estimates

POLICY ADDRESSING ALLEGATIONS OF NON-COMPLIANCE TO JRCERT STANDARDS (STANDARD 1.5)

The Radiologic Technology Program at Montgomery College is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Maintaining accreditation by the JRCERT stipulates that the program specifically follows the established JRCERT Standards.

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The purpose of compliance to these Standards is to maintain the high level of competence of a program so as to fully benefit the student, including being able to apply for the ARRT Examination upon graduation. If a student has a question or concern about compliance of these Standards the following steps should be taken:

Student should reach out to the Program Coordinator with their concerns regarding noncompliance to JRCERT standards.
If the student feels the response to the concern is not appropriately addressed within a two-week time frame student should speak to the Health Science Department Chair and or the Department Dean.
If the student is still unsatisfied with the response to the complaint student may wish to contact the JRCERT directly

JRCERT
312-704-5300
Program #0071
www.jrcert.org

APPLYING TO THE RADIOLOGIC TECHNOLOGY PROGRAM/EARLY COLLEGE

ADMISSION POLICY

Please note that the Radiologic Technology faculty and staff do not process or view any applications. All applications and admission procedures are processed by the Takoma Park/ Silver Spring Admission Department. The Radiologic Technology faculty and staff can advise students but do not recommend any candidate. There is no interview process and recommendations (personal or professional) are not used as part of the acceptance process. There is no wait list. If a student does not get accepted into the program, they must reapply for the next year's class.
The program begins classes during the first full week in June. Deadline for consideration into the program is March 1 and accepted students are notified in late March or early April. The program only accepts students once a year.

Students who are interested in entering the Radiologic Technology program are recommended to

- Contact the program advisor for the Radiology Technology program as directed by the RADT web site
- attend one of the remote monthly information sessions as noted on the program web page .
- Enroll as a Montgomery College student. **Enter Major code 520-pre Rad Tech. Current MC students should change their program code to 520**
- Take the TEAS test and review the priority consideration process of application to this program
- Complete a health science application (use the most current application-updated applications are available after October of each year) and submit it before March 1 of the year the student is applying for the summer session (for example a student must submit a Health Science application by March 1 2024 if they would like to be considered for the cohort begin accepted in 2024)

Prerequisites and Priority Consideration for the acceptance into the program. TEAS information

Minimum requirements: All interested students must have taken college level English (ENGL 101 at this institution), college level Math (Math 117 or higher), BIOL 150 and BIOL 212. Students must have a 2.5 GPA. Completion of TEAS test meeting require benchmarks

Priority Consideration:
For applicants to receive top priority consideration (first tier) they must have completed **BIOL 213**, and HINM 115** by the March 1deadline. Second tier consideration is given to those students who have completed one out of the two courses noted above in bold. Third. tier consideration is given to those students who have met the **minimum requirements. All applicants must have the appropriate TEAS scores to be considered eligible no matter the number of priority classes completed.**
Historically due to the high number of applications it should be noted that students who

have completed courses that satisfy the tier one and tier two levels are usually the only ones accepted into the program.

***Students should be aware that it they have taken Biology 212 or 213 more than five years from time of application, will have to take BIOL 228, Pathophysiology for 3 credits. Please contact a counselor to ascertain if they need to retake these classes*

High school students –please contact the transcript evaluator at any of the three campuses to address SAT scores and AP scores regarding where that places a student in terms of satisfying college level math and English and specific Biology courses. First time students will be required to take English and Math assessment tests if not transferring College credit in from another College. (See the Criteria for Health Science Programs Curricula in the College Catalog.)

EARLY COLLEGE STUDENTS. The Radiologic Technology program does participate in the Early College program. Those MCPS students enrolled in the Early College program prior to acceptance into the Rad Tech program would work closely with their MCPS/MC advisor. More information on Early College can be found here.

General Education courses taken outside of Montgomery College (in the United States)
If a student has taken general education courses at other institutions within the United States, they will need to attach an official transcript to the Health Science Application for assessment of credit transfer. Counselors and Program faculty cannot advise if courses from other universities will transfer.

If prospective students wish to see if the courses transfer BEFORE applying the program they must first enroll as a Montgomery College Student (enter program code 540, pre Rad Tech) and mail their official transcript to the Takoma Park Silver Spring Campus Admission Office, 7900 Takoma Ave, Takoma Park Md. 20912

General Education courses taken at universities outside of the United States

Please contact the counseling department on any of the three campuses to be advised on the process of having these transcripts evaluated or refer to the MC International Students link.

RADIOLOGIC TECHNOLOGY ANNUAL PINNING AND AWARD CEREMONY

The Radiologic Technology Program hosts a pinning ceremony every year for graduating students. Graduating students and their family are celebrated in this well received and personal ceremony. Graduating students are presented with pins and are honored for their achievements. First year students are required to attend this ceremony as they are the hosts of the ceremony designed and organized by Radiologic Technology faculty.
As part of the Annual Pinning Ceremony, The Radiologic Technology Program presents two awards, for academic and clinical achievement. In addition, recipients of these awards are recognized at a Campus wide award ceremony.

Students may be eligible to receive the following awards at the Annual Montgomery College Awards Ceremony using the following criteria:

1. The Outstanding Academic Achievement Award will be given to the Radiologic Technology student who maintained a 3.85 cumulative grade point average or higher, and

2. The Outstanding Clinical Achievement Award, is given to the Radiologic Technology student who has demonstrated exceptional clinical performance based on clinical assessments, who has demonstrated compliance to all program policies, who has been recommended for this award by both faculty and clinical site and who has maintained a GPA of 3.5 or higher in all the clinical courses.

GRADUATION

To qualify as a candidate for the degree of Associate in Applied Science in Radiologic Technology, a student must have earned the following:

1. The minimum number of semester hours of academic credit which must include all courses required in the curriculum elected by the student or such alternative courses as are specifically required by the College or university to which the student will transfer.
2. A minimum grade of "C" (2.0) in all Radiologic Technology courses.
3. Settle all financial obligations to Montgomery College. The general obligations of the candidate are published in the academic regulations. Since the course work of the Radiologic Technology Department is not completed until August of the graduating year, students will not graduate or receive their diplomas until that time. Students who have not completed their non-Radiologic Technology courses at that time must do so before they can graduate.

IN RADT 206 a graduation audit form will be provided to students to assure all general education courses are completed or will be completed by end of May of the year of graduation. This audit consists of a review of the student's record by the Records Office to ensure that all requirements for graduation have been completed. The Program Coordinator can also print a graduation check-sheet for advising purposes.
Prior to graduation, each student will be asked to complete a terminal evaluation of the program which seeks information concerning students' feelings about their achievement of the program objectives and the major strengths and weaknesses of the program as well as recommendations for improvement.

ARRT Professional Certification and Licensure

At the conclusion of the Program, graduates are eligible to apply to take the registry exam. Students who complete the curriculum successfully and will be graduating in May must have their ARRT applications approved by the program coordinator before they can begin the process of registering to take this exam. The Online ARRT Handbooks will be available to the students in RT 240 and students may apply for their window of testing before completion of their final class. The student should follow all instructions in the ARRT Application and Examinee Handbook.
An application for the Maryland license can be obtained through the Board of Physicians Quality Assurance in Baltimore. Contact information will be provided in RT 240. Students who wish to obtain a State of Virginia license should contact the appropriate agency (information is located in the ARRT text booklet). At the present time no licensure exists in D.C. ARRT credentials are necessary in all cases, in any state.

EDUCATION ADVANCEMENT

The Associates of Applied Science degree awarded upon graduation is considered a terminal degree. However, this degree and the courses taken for this degree are transferrable to many four year colleges and universities. For further information about transfer opportunities to institutions that Montgomery College has articulation agreements with please refer to the transfer link found on the Radiologic Technology Web

PROFESSIONAL ORGANIZATIONS

American Registry of Radiologic Technology- ARRT

American Society of Radiologic Technology- ASRT-

The Maryland Society of Radiologic Technologists MSRT

Joint Review Committee on the Education in Radiologic Technology JRCERT

Maryland Board of Physicians (Maryland licensing information for Radiographers)

Completion and Success Rates

View MC's **Accredited Program Details** (JRCERT.)

First Time Pass, Job Placement, and Program Completion Rates

American Registry of Radiologic Technology (ARRT) First Time Pass Rates within six months of graduation.

American Registry of Radiologic Technology (ARRT) First Time Pass Rates within six months of graduation.		
Year	**# first time candidates/total**	**% of passing first-time candidates**
2022	15/16	93%
2021	18/20	90%
2020	13/13	100%
2019	15/15	100%
2018	19/19	100%

5 year first time ARRT pass rate: 96%

Job Placement Rate within 12 months of graduation

Job Placement Rate within 12 months of graduation		
Year	**Number of graduates employed/graduates actively seeking employment**	**%**
2022	16/16	100%
2021	21/21	100%
2020	13/13	100%
2019	15/15	100%
2018	19/19	100%

5 year (average) 100%

Program Completion Rate

Program Completion Rate		
Year	**#grads/#accepted**	**#**
2020/2022	16/23	69%
2019/2021	21/25	84%
2018/2020	13/17	76%
2017/2019	15/23	65%
2016/2018	19/26	73%

5 year average completion rate: 73%

Coaching, Counseling, Conference Procedure

*Please note that there are some infractions that may result in a student's immediate dismissal from the Program or eliminating steps to this procedure. In addition, if a site asks that a student be removed from their clinical site for any reason, the student will be unsuccessful in completing the clinical course and will not utilize this process.

- This three-step course of action process* will be utilized for all students who have demonstrated noncompliance/ infractions to Program policy or affective behavior standards and maybe preceded by some loss of points in affective behavior.

- For every affective behavior non-compliance issue 10 points will be deducted from a maximum of a possible 50 points

- Infractions are cumulative; meaning that each additional infraction that occurs while the student is in the Radiologic Technology program will result in the implementation of the next course of action and its corresponding consequence.

The coaching/counseling/conference course of action is as follows:

Course of action #1: Student Coaching Form
This form is utilized as a tool for documentation and action plans Based on a pattern of re-occurring infractions resulting in loss of points in affective behavior (10 points for every infraction/ five infractions in a semester will equal a zero in affective behavior) or if the infraction/incident is of immediate concern, the student will be coached in person by the instructor involved utilizing the Student Coaching Form. The coaching session should provide an opportunity to discuss with the student the nature of the problem, to remind the student of the Program's policy and procedures, to inform the student of the consequences of continued infractions, and to work with student via assignments and changes to correct the problem. The Coaching Form may be utilized more than once at the discretion of the Program Coordinators.

Course of action #2: Student Counseling Form
This form is utilized as a formal documentation that communicates to the student that the student has not displayed appropriate corrective actions to the prior infraction or Program compliance in general. On the second infraction of any type or in the event a cumulative loss of 50 points in affective behavior has resulted in a zero for the affective behavior grade, the student will meet with the Program and/or Clinical Coordinator, and/or the involved instructor utilizing the Student Counseling Form. In addition, there may be other consequences as deemed appropriate. This Counseling form will discuss with the student the nature of their continued noncompliance/ infractions, and to inform the student that this is their last opportunity to demonstrate compliance to the Program's policies and standards.

Course of action #3: Final Administrative Conference Form
This form is utilized as formal documentation advising the student as to consequences of their status in the program based on continued non-compliance to program policy as documented by one or more student counseling forms (see above), non-compliance to ARRT code of conduct, unsafe clinical behavior or other behavior that would compromise success in the program. At this point the student will meet with the Program and/or Clinical Coordinator and/or another designated individual utilizing this Final Administrative Conference Form.
For clinical courses if the student's assigned clinical site has asked that the student not return to the clinical site, or upon assessment from the faculty that the student is unsafe clinically or there is continued non-compliance to program policy or noncompliance to the ARRT code of conduct, the course of action on this final Administrative Conference form will be the process for formal removal from the program and the student, at the time of the conference with be administratively withdrawn from the program.

(Per College policy 9.62 B: No medical health clinical course with a practicum may be repeated without the written approval of the specific medical health program coordinator. The approval or denial of such requests by this individual is final)

CLINICAL COMPONENT

CLINICAL SITES
2023
Home Sites

Childrens Hospital
CRA/Radnet Bethesda
CRA/Radnet Boland Farms
CRA/Radnet Frederick
CRA/Radnet Leisure World
CRA/Radnet Mt.Airy
CRA/Radnet Olney
CRA/Radnet White Oak
CRA/Radnet Womens Imaging (WIG)
George Washington University Hospital
GWU Ambulatory Care Center (ACC)
GWU K Street
GWU Surgery Center
Holy Cross Hospital Silver Spring
Holy Cross Hospital Germantown
Johns Hopkins Suburban
Laurel Radiology
Medstar Georgetown University Hospital
Medstar Montgomery Medical Center
MMMC Orthopedic
Potomac Valley
Virginia Hospital Center
Washington Radiology Associates

Clinical Communication

The Radiology Program encourages and provides and open line of communication with all clinical sites, preceptors and administrators. Clinical faculty visit each clinical site weekly and interact with staff, clinical preceptors and administrators as needed. Clinical preceptors have contact information for clinical faculty, clinical coordinator and program coordinator. Emails with updates and questions are sent to all clinical preceptors as needed.

Opening semester letters are sent out and hand delivered to all clinical preceptors and designees regarding specific information about the student clinical requirements for the semester, important dates, updates and policy reminders. The clinical coordinator holds a clinical coordinator meeting with clinical preceptors twice a year currently on zoom to discuss updates and receive clinical site updates and input. Meeting minutes are distributed via email and discussed with any preceptors not able to attend the meeting. The program coordinator holds an advisory meeting once a year and invites all clinical preceptors to participate.

Technical Standards

1. Vision: *Corrected or uncorrected*
a. Able to demonstrate sufficient peripheral vision to function while interacting with patients.
b. Able to distinguish multiple color variations in hues, tone, or brightness.
c. Sufficient acuity to read instruments with small print (sphygmomanometers, goniometers, gauges)
Additionally, Radiologic Technology and DMS students must be able to evaluate images distinguishing between black, white, and shades of gray.
2. Hearing: *with or without hearing aid(s)*
a. Able to hear and respond to patients, staff, and others.
b. Able to hear audible signals on equipment in the clinical environment and understand muffled communication without visualization of the communicator's mouth / lips within 20 feet.
3. Olfactory:
Able to detect odors sufficient to assess and maintain patient comfort and safety.
4. Tactile:
a. Able to utilize the sense of touch to provide patient care, palpate anatomical landmarks, position patients, conduct assessments, and administer treatments.
b. Able to manipulate files, switches, dials, touch screens and keyboards.
5. Strength and Motor Skills:
a. Able to perform patient care activities with moderate physical effort.
b. Able to lift, push, or pull up to 35 lbs.
c. Able to handle patients including lifts, rolls, transfers, etc. with the use of mandatory Safe Patient Lifting Equipment.
d. Able to perform CPR and respond to emergency situations.
e. Able to assist with and or lift, move, position, and manipulate the patient who is unconscious with or without assistive devices.
6. Fine Motor Skills:
a. Able to manipulate instruments, supplies, and equipment with precision dexterity, with good hand-eye coordination.
b. Able to perform patient care, utilize equipment and documentation systems in the clinical environment.
Additionally, Surgical Technology students must be able to load a fine (10-0) suture in to needles and needle holders.
7. Physical Endurance:
Able to walk, stand, or sit for prolonged periods; to walk, stand, bend, lift, reach without assistive devices.
8. Communication:
a. Able to speak, read, comprehend, convey information, type and write effectively using English language.
b. Able to demonstrate appropriate interpersonal skills during patient, staff, and faculty interactions.
This page is to be completed by the Licensed Medical Provider.
9. Emotional Stability:
a. Able to manage patients with physical and/or emotional trauma.
b. Able to function effectively under stressful or emergent situations, adapt to changing conditions, and remain productive and capable throughout.
10. Cognitive Ability:
a. Utilize critical thinking skills to implement, modify or evaluate patient care.
b. Ability to collect, analyze and integrate information and knowledge to make clinical judgements.
c. Ability to compile and evaluate data on patients' responses to treatment and progress.

PROGRAM CLINICAL PROCEDURES

Clinical Courses

The Program consists of six clinical courses (See Table below) and will include a total of **1560 hours** of educationally valid and diverse clinical experience in several different clinical environments. Clinical assignments will include mandatory rotations at two different hospitals, Children's National Medical Center (Hospital), and an outpatient facility. Experience will include a variety of diagnostic, mobile, surgical, pediatric, orthopedic, outpatient and some level of trauma. Clinical rotations are to be performed during the College published hours of 7:30 am to 4:00 pm. Students are granted 30 minutes from this shift to complete their E-value Case-Logs. Students may request for a 30-minute variation of this time. This change must be documented on a Schedule Change Form and approved by faculty and clinical site preceptor.

Course	**Semester**	**Clinical experience available** ***Total hours 1560***
RADT 119 Clinical Radiology I	Summer I	On campus simulations and classroom competencies.
RADT 120 Clinical Radiology II	Fall I	First-year hospital clinical placement may include outpatient facility rotations. ***Tuesdays and Thursdays for 240 hours***
RADT 124 Clinical Radiology III	Spring I	First-year hospital clinical placement may include outpatient facility rotations. ***Tuesdays and Thursdays for 240 hours***
RADT 125 Clinical Radiology IV	Summer II	First-year hospital clinical placement may include outpatient facility rotations. During approximately week 5 of this semester students start their rotation at their second-year hospital clinical placement which may include outpatient facility rotations. Mandatory Children's Hospital rotations begin for assigned students this semester. ***Mondays through Fridays for 360 hours***
RADT 224 Clinical Radiology V	Fall II	Second-year hospital clinical placement may include outpatient facility rotations. Mandatory Children's Hospital rotations continue for assigned students. ***Mondays, Wednesdays and Fridays for 360 hours***
RADT 225 Clinical Radiology VI	Spring II	Second-year hospital clinical placement may include outpatient facility rotations. Mandatory Outpatient facility rotations for all students who have not been to an outpatient facility and optional rotations for those who have. Ancillary modality rotations for all students unless required Competency Checklist is at risk for not being completed. Optional Children's Hospital rotations for students. Optional rotations through specialized areas such as OR, Trauma , Mammography for student students who desire the experience. ***Mondays, Wednesdays and Fridays for 360 hours***

Clinical Education

Clinical Radiology I is the first clinical course. Students complete introductory clinical education and skills on campus for this course. Clinical education at the clinical affiliates begins in the Fall semester of the student's first year of the program. Clinical coursework is much different than the traditional classroom instruction. Students will be expected to care for and radiograph real patients. Students are required to consistently

practice awareness of patient and radiation safety. Unsafe clinical practices are dangerous and could cause injury. To effectively support a safe and effective learning environment for students, patients and clinical staff, a much more structured set of policies and protocols are required for clinical coursework. Clinical education utilizes the philosophy of "hands on" training. Student success is dependent on effectively adopting this learning style and following all College and
Affiliate policies and procedures. Policies and procedures for successful clinical are included in this handbook.
Montgomery College has a written contractual agreement in effect with all the affiliated clinical sites. Close cooperation between the College and all affiliate's is vital to the success of the program.

Liability Insurance

A student is responsible for his/her actions when in contact with patients, equipment and others while at the clinical site. The student is covered by the College provided liability insurance during the clinical hours published in the Class Schedule. There is no cost to the student for this insurance.
All accidents that occur while on clinical assignments resulting in patient, hospital personnel or personal injury and/or damage to equipment must be reported immediately to the Clinical Instructor and Program Coordinator. A Facility and program incident report should be initiated to document the detail of what took place and if possible. The Program will attempt to obtain a copy of the Facility's documentation for the student's file

Malpractice Insurance

Malpractice/liability insurance is not required. Students may choose to purchase their own individual malpractice insurance to cover any litigations not covered by the College liability insurance. Information regarding personal insurance can be found at HPSO.

Clinical Performance Evaluation

Evaluation of student's clinical performance is explained in each clinical course syllabi utilizing College criteria. Clinical performance is competency based, and is assessed in each clinical course. The majority of the student's clinical grade is calculated using competency- based assessments which include required clinical competencies, performance objectives, image evaluations, critical thinking evaluations and general competency evaluations. Clinical site technologists and College clinical faculty are responsible for evaluating all students in each clinical course.
Successful student performance is founded on technical and professional competency. Faculty assess student clinical performance by reviewing their competency and evaluation grades through-out the clinical course. Students have access to all assessment forms in E-value and grades in their Black Board course and are responsible for regularly reviewing the grades and documents. Affective behavior infractions can also negatively impact the student's clinical grade and are considered part of their overall clinical performance. Immediate intervention, guidance and support is offered to all students when there are concerns with clinical performance or deemed necessary.

Clinical Placement

Student are randomly assigned to a minimum of two acute care settings for their clinical rotations. This lottery style selection is performed by faculty, and is non-negotiable, changes are not made and students can't change or switch sites. While the faculty recognizes that students may be assigned to sites that are a distance from their job or home, students must be prepared to complete their clinical hours at their assigned site. Students may request reasonable adjustments to their shift but all changes must be approved by clinical coordinator, faculty and clinical site. Students must complete all required hours to successfully complete the course.
Once the random site selection is made, students must be accepted for admittance to the site.
Clinical sites may deny access students due to results of their criminal background, drug test, non-compliance with medical requirements, onboarding or reasons they deem pertinent.
If a student is denied access to the assigned clinical site they will **not be assigned** to another clinical site.

Successful completion of the program requires all students to also complete mandatory rotations through Children's Hospital, and an outpatient setting of the student's choice. A week rotation through an ancillary modality is offered to all eligible students during the final clinical course. Students complete a survey to choose the advanced modalities they are interested in. Students may visit more than one advanced modality if they complete their master competency check off list and are at the appropriate competency level. Coordination of these rotations is coordinated by the clinical preceptor and clinical faculty. Students may also request to return to Childrens hospital, a one-week minimum rotation in mammography or at a trauma site.
If a student is asked by a clinical affiliate to not return to their facility for violations or safety issues the student will not be assigned to another clinical site to complete that semester. The student will be unsuccessful in the clinical course and will be unable to complete the Program. Students who would like to return to the Program must follow the policy for re-entry into the program.

Clinical Skills Accountability

Students are accountable for all skills previously learned during both didactic and clinical coursework. In addition to the hands-on labs offered during the course lab sessions, the Program also offers open labs to support student learning. The on-campus laboratories located in the Health Science Building (room 424 and 430) are open on scheduled hours or by appointment with faculty throughout each semester. A faculty member supervises students during open-labs and is available for support as needed.

Patient Care Competencies

Students are required to successfully complete required ARRT patient care competencies. These **mandatory patient care competencies** are performed in Clinical Radiology I (RADT 119) and are graded using a rubric. This course meets on campus for lecture and lab. Students are taught the content for the competency and then practice the skills in the lab prior to being tested on the competency. Students must achieve a 90% or above to successfully complete the competency. If a student is unsuccessful on the first attempt, the student receives remediation and additional practice time and is retested. If the student is unsuccessful on the second attempt it is considered a failure. The patient care competencies are mandatory so if a student fails any of the competencies, the student will not successfully complete RADT 119 and will be unable to continue in the Program. If the student chooses to return to the Program they will need to reapply as a new student.

Clinical Competencies

Students are required to complete the required mandatory and elective competencies on the Program's master competency check-off list. The required competency list is developed utilizing current ARRT requirements. Competencies require a grade of 90% or above to be considered a passing competency. Once a student successfully comps an exam they may be directly supervised. Each clinical course requires a minimum of number of competencies. The clinical syllabus discusses the specifications for each course. Current clinical syllabi are available to all students in their Blackboard site and to all clinical sites in the clinical site notebook. Students may comp more than the minimum number.
Preparing to comp" Prior to attempting a competency at the clinical site, a student must a have been taught the radiographic exam on campus, participated in the practice lab and then checked off on the exam lab. At the clinical site the student must accumulate a clinical experience and comp prep signature/initials on the clinical form. The comp prep must also be verified by the supervising technologist in E-value. Criteria for signatures and comps can be found in the Clinical Competency Form Criteria found in each clinical syllabus.
Comping: When the student is ready to comp an exam, they must ask the supervising radiographer, who must be a registered radiographer, if they can comp them on the exam prior to the start of the exam. If the supervising radiographer agrees to comp the student, the competency form should be given to them prior to the start of the exam. The supervising radiographer has the right to deny the student's request to comp an exam if they do not have the proper signatures or if they do not feel the student is ready to comp. The supervising radiographer also has the right to stop a competency

examination if it becomes clear that the student is not competency and the radiographer needs to take over the exam.
Grading: The supervising radiographer will complete the competency form and sign it. An E-value email link to the competency will be generated to the supervising radiographer once the student enters the competency into their E-value case logs. The faculty collect the hard copy of the competency form from the clinical site during their weekly visits and assure the competency completed in E-value is accurate. The passing grade for a competency is 90% or above.
Failed comp: Any competency that scores lower than a 90% is factored into the clinical course grade. The student is required to re-comp any failed competency Faculty will work with the student on any weak areas and then the student may re-attempt the competency. If a student struggles to demonstrate competency on an exam the have comped, the faculty may re-comp them on that exam. If the student does not pass this re-comp the original competency will be rejected and the student will be required to remediate and re-comp the exam.
Re-comping: Students are not allowed to re-comp exams/procedures to fulfill the required competency numbers for the semester without prior approval from the clinical faculty. First year students may not re-comp in RADT 120 and RADT 124.
There are very few circumstances in which a student may be allowed to comp an exam without the minimum two signatures/initials (clinical experience and verified comp prep). This consideration is offered in RADT 225 (final clinical course) to encourage students to complete their master competency checklist on rare exams. Students are required to practice the exam and be ready to comp the exam. Faculty approval may be required.
Simulations: The ARRT allows for simulations of some mandatory and elective procedures. The clinical faculty will determine the need for a simulation.
Miscellaneous: Students should participate in all exams whether they have been covered in class or no. Students will be assigned rotations that give them the opportunity to work with a variety of registered radiographers and exams. Students should not have more than half of their competencies graded by the same radiographer.

Clinical Site Issues/Concerns

Any student having an issue or concern with their clinical site, preceptor, a technologist or staff at their assigned clinical site should immediately inform their clinical faculty and/or the Clinical or Program Coordinator. The faculty will provide the student with necessary College support and schedule a conference with all appropriate personnel to discuss and resolve the situation as deemed necessary.

Web-Based Clinical Assessment System (E-value)

The program utilizes E-value, a web based clinical management tool. This tool is used to document clinical attendance, clinical competencies, case logs, general evaluations and other evaluation and assessment tools utilized for demonstration of competency and feedback. Students may need to incur the annual cost to access the site. The College is currently paying this annual fee. Students are trained on E-value use prior to their first day of clinical. Tutorials for use are posted on student Blackboard accounts.
Continuous training is offered as needed through-out the program.
Faculty, clinical preceptors and staff are trained on E-value and tutorials and can be found in TEAMS for faculty Clinical Manual and the Clinical Site Notebook. Emails with changes, updates and tutorials are sent as needed.

E-value Student Use

Time Tracking
Students are required to utilize E-value Time Tracking to clock in and out on a designated computer at their clinical site to record accurate clinical attendance. Students must also punch in and out using a time card.

Case Logs Entries
Students are required to enter all patient study interactions and repeats in E-value. Entries will include clinical experience, comp preps, competencies and repeats. Once entered in E-value the system will generate competencies for supervising technologists to complete, and signature sign offs for comp preps, and repeats.
Students are not allowed to access computers or hand-held devices so they must write down all interactions during the day and enter them in E-value Case Logs after their shift is completed. Compensatory time is given to all students for this ongoing requirement. Handheld devices should be utilized only during student lunch or break hours away from the radiology department.
Performance Objectives
Students are required to complete Performance Objectives at times and enter them in E-value under "Initiate Adhoc".
Evaluations
1. Students receive 4-5 **General Competency Evaluations** for each clinical course. The faculty usually completes 2 and the remaining evaluations are completed by a variety of technologists chosen by the Faculty after they consult with the student and technologist. General competency evaluations are not available for student access until the faculty reviews them with the student and then releases them to students.
Students are required to open all evaluations and view the documents in E-value throughout the course
2. Students are required to complete evaluations for their sites, clinical preceptors, and clinical faculty on E-value at the end of the semester.

E-value Clinical Staff Use

All clinical staff who directly work with and supervise Radiology students will utilize E-value to complete general evaluations, objectives and complete competencies. Supervising technologists will also be asked to verify the competency prep and repeats they worked with the student on. Clinical staff do not pay for E-value access.
Access:
A profile for each technologist is added to the E-value system by the College faculty using the site or personal email address Please note that clinical affiliate administrators usually require that the technologists utilize their affiliate emails for this process.
Clinical staff will receive emails with links to the forms that require completion and confirmations they are responsible for completing. Reminder emails are sent to the supervising technologist until the task is completed. Technologists do not need to log into E-value to access these links. Clinical coordinator offers tutorials and training to all clinical preceptors and sites as needed. Clinical faculty introduce and help train new supervising technologist to E-value
Evaluations
The clinical coordinator will forward aggregate results from clinical site, and preceptor evaluations performed by the students to clinical preceptors during the fall and spring semesters. Clinical sites may request aggregate results at any time. The clinical coordinator will discuss any concerns mentioned on evaluations with clinical preceptors promptly and document conversation.

E-value Faculty Use

The student's E-value account displays all of their clinical hours and clinical documentation for each clinical course. Clinical faculty can access and monitor student's time, case logs, competencies, performance objectives, general evaluations and other clinical documentation on E-value at any time. Faculty are required to generate general evaluations to technologist/staff for students, complete image evaluations and manage all clinical documentation in E-value in a timely manner.

Faculty Evaluations

Clinical Faculty are evaluated by students in E-value at the end of each course. The College department chair has access to all faculty evaluations and sends a link to the evaluation after students have time to complete the evaluations.

PROGRAM CLINICAL POLICIES

Any student who is in non- compliance with any component of Program, College, or clinical site policy may be penalized with 10-point deductions in Affective behavior. All further infractions may result in use of the Coaching, Counseling, Conference (CCC) process and possible unsuccessful completion of the course.

Clinical Supervision Policies

Clinical sites are informed about all Program supervision policies and the consequences for non-compliance. Immediate support is offered as needed. Review the Radiation Safety section of this handbook to review the following policies

Direct and Indirect Supervision
Repeats
Holding of Patients and Detector

Clinical Attendance Policy

Attendance is a crucial component of the clinical rotation and because of this it is monitored carefully. Good attendance reflects a positive commitment to the program as well as to the work environment. Due to the importance of clinical experience, absenteeism is not tolerated. The RT Program attendance policy reflects the Attendance Policy in the Montgomery College Website.

A. **Absences**

Due to the importance of clinical experience, absenteeism is not tolerated. If a student is not present at his/her assigned area or room rotation for the assigned day, then the student will be considered absent for the day.

1. **Scheduled Leave hours**:
   Scheduled leave hours are given each semester to help alleviate potential hardships for students, a designated number of *scheduled leave hours* are given for each clinical course. **In addition, hours may be offered by faculty for participating in enrichment/learning opportunities which will also be considered leave hours.** These hours are a use or lose each semester, the hours can't be carried over to the next semester. **Scheduled leave hours must be utilized for lateness or absences until exhausted.** Students must follow the policies found later in the attendance policy for contacting faculty and clinical site. When the leave hours are exhausted, the student will then need to make-up all missed time.

2. Absence Notification:

If a student is reporting late, or not reporting to their clinical site on their assigned day, the student is required to call and notify both the college clinical instructor **and** the clinical instructor or a designee at their clinical site before the start of their shift. Failing to call both the clinical site and clinical faculty will be in policy non-compliance.

3. Make up Hours & Absence Report Form:

While it is understood that unexpected circumstances may cause a student to miss clinical days, all course required clinical hours must be made up. An ***Absence Report Form*** must be completed by the student with coordination and prior approval via signatures from both the College clinical instructor and the Clinical Site clinical instructor. This signed and completed form will cover the student with liability insurance during the documented hours. Students may voluntarily choose to make up clinical hours during a week that would exceed a 40-hour involvement for clinical and didactic as the discretion of the clinical faculty.

The hours on this form are a contracted agreed assignment and therefore if a student is not able to attend their clinical site on the date and/or time agreed upon they must call and notify both the clinical faculty **and** clinical site. Make-up hours may be performed on non-assigned clinic days or hours although there may be certain restrictions based on the clinical site and student situations. Students may not make up hours on days the College is officially closed due to weather, holidays or other closings. If a student attempts to work clinical hours when the College is officially closed or the faculty have cancelled clinical for the day,the student will be asked to leave the site and none of the clinical time accrued on that day will be counted. Any student not following all of these procedures will be in policy non-compliance.

4. Excessive absences:

Excessive absenteeism is defined as: *total course absences that exceed the number of class sessions per week.* Each clinical course syllabi will state the mandatory clinical course hours and excessive absenteeism for that course. A student who is demonstrating absenteeism may be penalized on the general competency evaluation form absence grade and/or deductions in Affective Behavior. Student will be in policy non-compliance with additional infractions with absenteeism.

5. Lateness/Tardiness:

Lateness is defined by a student who is not clocked in (either in E-value or the time clock) and not in the QC area of the Radiology department ready to work at their scheduled time. Being prompt in attendance at the clinical site is an important attribute that all Radiologic Technology students are expected to maintain. In the event a student may be late to their clinical site for any reason they are expected to contact both the Faculty Clinical instructor assigned to that site and the appropriate personnel at the site by phone. The faculty reserves the right to excuse the missed time from being a “late”. A 10-point deduction will be the result for each infraction of non-compliance to this procedure. The 4th late will be considered excessive lateness. Excessive lateness is defined *as those students that have ongoing issues of being late for whatever reason* and student will be in non-compliance.

All missed time must be made up. If time missed is less than one-hour students

will coordinate with their faculty clinical instructor and the clinical site to make up the missed time. Students may get approval from the clinical faculty to stay late to make up for a lateness. Prior approval is required and student must get their time card initialed by the supervising technologist. Any hours made up without prior approval will not be counted. If the time missed is more than one hour the missed time will be deducted from the ***scheduled leave*** hours. If the scheduled leave hours have been exhausted the student will need to coordinate options to make-up time with the faculty and clinical preceptor. An ***Absence form*** must be completed prior to the student making up the time. Students not following all of the late/tardy policies will be in policy non-compliance.

6. Emergencies/Medical Leave:

Emergencies or serious situations will be recognized as excused absences. These may include: personal illness, court appearances, or death in the immediate family (parents, grandparents or siblings). Proof of the excused absence may be required upon the discretion of the Faculty Clinical Instructor. If a student is missing time due to a medical issue, a doctor's note may be required to address the student's ability to resume their clinical rotation as well as any limitations. This letter must be reviewed by College Faculty prior to the students return to the clinical site. **ALL hours missed must be made up.**

7. Clinical Course Hour Completion:

All Course hours must be completed by the end of the semester. Exceptions to this policy will be allowed only with compelling reasons and proper documentation. If a serious emergency arises and is documented, the missing hours can be made by the fourth week of the next semester with a grade of Incomplete (I) being given until the hours are completed. If the hours are not completed by that time, the student will receive a grade of "F" an unsuccessful completion of the clinical course. Completion of the total course hours will include clinical hours and faculty designated MC closure hours, MC hours, and scheduled leave hours.

B. Clinical Hour documentation

1. Liability Coverage/Change of Schedule Form

Students are covered by the college's liability insurance from **7:30 am to 3:30 pm** on scheduled clinical days only. Student's may adjust their clinical hours from the scheduled 7:30 am to 3:30 pm shift by completing a ***Change of Schedule Form*** and obtaining the appropriate signatures from the College Faculty and Clinical site clinical instructor. The only options for schedule adjustment are starting at 7:00 am 7:15 am, 7:45 am or 8:00 am and leaving at 3:00 pm, 3:15 pm, 3:45 pm,4:00 pm.

The hours on this form are a contract agreement between the student, college and clinical site to cover the student with liability insurance and therefore the student **may not be at their clinical site at any time other than these contractual hours**. Students who do not have prior written approval are NOT covered by the college's liability insurance and thus PERSONALLY assume total responsibility for liability in the event of a legal situation. In addition, the student is expected to be at their assigned clinical rotation at their clinical site during those hours.

**please note that some site rotations may not be flexible with hours.*

2. Early start/Staying late

The Program does not discourage a student from staying late occasionally to participate with an exam that runs past their scheduled time or starting earlier than their scheduled time. If a student does start earlier than their scheduled time or stays later the student must have their time card initialed by the supervising technologist who worked with them and write a comment in E-value as to why their time is different than their scheduled time. This extra time will not be counted without this documentation.

A student who has this happen on a regular occurrence is considered to be *Banking hours*. Banking hours is not permissible unless previously arranged with College faculty. Any student not following this policy will be in policy non-compliance.

3. E-value Time Tracking/Time card:

The student is responsible to punch in and out on their timecards when they arrive and leave their clinical site. Student is also required to clock in and out utilizing the E-value time tracking as well as their timecards. Students should log into their E-value account on a designated computer at their site only. **Hours will not be counted if the student clocks in and/or out for E-value on a handheld device.** If there is no computer access for E-value, utilize the timecard only and get the time card initialed by a technologist. If there is no time clock at a clinical site, the student should utilize the E-value system and have a technologist sign in and out on a timecard for the student upon arrival and departure from the site. If a student forgets to clock in or out with time clock and/or in E-value the student should inform their faculty as soon as they recognize it and if possible, add a comment in E-value. The technologist on duty at the arrival or leaving time should be asked to document the time and initial the student's time card. Students are cautioned to use their timecards/E-value time tracking correctly Under no circumstances should a student use or punch another student's timecard. Misuse of timecards/time tracking hours is considered academic dishonesty and could result in unsuccessful completion of the course. Credit may not be given if the student is not clocked both in and out on a clinical day or the hours are not legible on the card. All clinical hours are monitored and documented by the college clinical instructor. Students not following the time tracking and time card policy will be in policy non-compliance.

4. Lunch & Break Policy:

Lunch: Students must be allowed a minimum of thirty (30) minutes for lunch. Students are encouraged to take lunch breaks and to take them at a normal lunch time. If the student leaves the Clinical Site premises at any time, they must clock out and back in upon their return. The student is still expected to return back to the department ready to work by the appropriate time. There are rare occasions when a student may not take a full lunch. The student will be compensated a maximum of 30 minutes for the missed lunch.

Breaks: Students may take a 5-10-minute break if needed while performing their clinical hours. Students are required to inform their supervising technologist or clinical preceptor whenever they are leaving their rotation and if appropriate where they are going. Breaks should be kept to a

minimum. Students are not permitted to take breakfast breaks or leave for smoke breaks during clinical hours. Any student not following or abusing the lunch or break policy will be in policy non-compliance.

C. Abandonment of clinical assignment

1. Students are required to stay in the assigned clinical rotation. Students shall not leave their assigned radiographic room or the clinical area without the permission of the Clinical Preceptor or supervisor in charge. Doing so without the permission is considered abandonment of a clinical assignment. All lost hours must be made up.

2.Students should never leave their clinical assignments to visit patients. All visitations should occur outside of scheduled clinical hours (except for lunch breaks) and during designated hospital visitation hours. Any student not following this policy will be in policy non-compliance.

Dress Code Policies

The personal appearance and demeanor of radiologic technology students at Montgomery College reflect the standards of the Profession, the College, and the Program and are indicative of the students' interest and pride in their chosen profession.

Uniform

Students are required to purchase their own uniform scrubs. The required uniform is navy blue uniform scrub pants, and either a white and navy uniform V neck scrub top with a program provided patch on the sleeve. See scrub criteria below. It is recommended that students have a minimum of two sets of scrubs.

White short or long sleeve shirts with no writing may be worn under the white scrub tops for warmth or to cover cleavage, chest hair or tattoos. If a student wears a navy scrub top, then a navy blue short or long sleeve shirt that is the EXACT same shade of navy as the scrub top may be worn. Students should assure that scrub tops are long enough and scrub tops and pants fit appropriately to assure modesty. A 29-30 inch white lab coat is optional for students.

Students are also required to wear clean white or black uniform, leather shoes, or sneakers with black or white socks or compression stockings. Fingernails need to be clean and short. Acrylic nails must be removed and long nails will have to be shortened.

Scrub criteria for each clinical site

All students are required to wear a MC Radiology Program patch on uniform top sleeve, patches are provided by MC

Children's	May wear colored top with navy pants
	Students should not wear lab coats to Children's
Medstar Georgetown	White or Navy scrub top with Navy scrub pants
GWU	White or Navy scrub top with Navy scrub pants
Holy Cross Hospital	Navy scrub top and Navy scrub pants.
Medstar Montgomery	White scrub top with Navy scrub pants
Johns Hopkins Suburban	White scrub top with Navy scrub pants
Virginia Hospital Center	White scrub top with Navy scrub pants
Ancillary Sites	White or Navy scrub top with Navy scrub pants

Surgery scrubs will be worn <u>only</u> during the performance of the surgery assignment, or during assigned OR rotations and these are provided by the sites.

Personal Appearance

Hair:

Hair must be clean and neatly combed. It is inappropriate and dangerous for long hair to fall in the face and/or come in contact with a patient or equipment and therefore should be tied back. If head bands or coverings are worn, they must be white and should not hang down in the front of uniform to avoid entanglement with machines and to prevent patients from pulling on them. Mustaches and beards must be neatly trimmed, clean, manageable, and not unruly. Hair coloring and /or highlights must a natural shade without colors such as pink or blue.

Accessories:

Use of the cosmetics should be discrete (including perfume, cologne, body spray) and kept to a minimum. Jewelry that is permitted to wear to clinical include: watches, wedding bands, engagement rings, school rings, school pins, and small earrings that are in good taste. Large earrings or heavy bangles/bracelets should not be worn as they can become entangled in equipment and to prevent patients from pulling on or being scratched by them.

Piercings and tattoos:

Some clinical facilities require removal of piercings (other than ear piercings) Some clinical sites may ask students to wear clothing that will cover tattoos on exposed areas on the arms or body.

Finger nails:

Student's fingernails should be short and clean. Acrylics nails are not permitted at the clinical site.

Personal Hygiene Guidelines

As medical professionals, it is essential to well-groomed and clean. Those people who work closely with patients as well as with other medical professionals need to be cognizant of their personal hygiene as applied fragrances, body odors and poor dental hygiene can cause the patient more discomfort and will most likely generate complaints from the clinical staff.
To promote personal hygiene that will not offend patients or staff, the program has developed the following guidelines. It is recommended that each student of the Radiologic Technology Program review these guidelines and follow them to maintain clean personal hygiene.

Body Hygiene

- Bath or shower daily. If possible, bath or shower in the morning
- Use deodorant every evening and morning
- Hair should be cleaned regularly
- For men, facial hair should be shaved or mustaches and/or beards kept clean and neatly trimmed
- Fingernails must be short and must be clean. Per TJC regulations no nail polish may be used nor may students have acrylic nails. Nails must be kept short.
- Uniforms should be cleaned after each day they are used.
- Shoes should be kept clean and checked for odor as the inside of shoes can begin to emit an odor. Always wear socks or stockings with shoes. Using inserts that absorb perspiration ("Odor-eaters") is suggested if student finds that their feet sweat profusely.

Dental Hygiene

- Students must brush their teeth every morning after they consume breakfast
- Floss teeth as this removes particles of food between teeth
- Use a mouthwash
- Carry breath mints in the pockets of the uniform and use them as necessary (after a cup of coffee, mid-morning, after lunch, it mouth feels dry)
- Drink water throughout the day

Nervous and/or anxiety

Students are frequently nervous at the clinical sites. This is a normal reaction to unfamiliar and stressful situations. Be mindful that feeling anxious or nervous can promote body and/or dental odor and following the guidelines above should help eliminate hygiene issues.

Food

Foods that are seasoned with spices (garlic, curry etc) that a student may eat (even the night before) can emit an unpleasant smell through the pores of the skin. Following the bathing pattern suggested and making sure uniforms are clean should help eliminate these odors. Be careful eating heavily seasoned foods at lunch as they may cause an unpleasant odor.

Smoking

If a student is a smoker, it is recommended that the student avoid wearing their uniform if they are smoking in their vehicle or closed space on the way to the clinical site. Students should bring scrubs with them and change into the uniform at the clinical. Students are still expected to clock in with their scrubs on and be ready to work at their scheduled start time. Always wash hands after smoking.

Perspiration

Nerves and traveling can cause additional perspiration. Traveling to the clinical site can be stressful, and in the summer, very warm if student's vehicle is not air conditioned or if student travels by public transportation. Perspiration may increase due to heat, walking and long travel times. Students may wish to travel in street clothes and bring deodorant with them to the clinical site. Students can clean up, reapply deodorant and change into their uniforms at the clinical sites. Students are still expected to clock in with their scrubs on and be ready to work at their scheduled start time.

Required Accessories

Students are required to have all of the following items on them during assigned clinical hours. Faculty will verify compliance during weekly visits.

Lead Markers

Students pay for and are issued two sets of lead, initialed right and left markers before starting clinical. Student should use their own markers on all exams the they position and perform. Markers can be used in labs but are required to be used at their clinical sites. Under no circumstances should a student lend their marker to anyone or use anyone else's marker. If a marker is lost, the student must order the College approved marker from PB markers Specific ordering instructions can be found in clinical syllabi.

Student Identification

Students must wear and display facility ID badge at all times while at the clinical site.. Students are issued identification badges by their clinical sites. If the clinical site does not supply an ID badge, the College can provide the student with an approved identification.

Dosimeters

Dosimeters must be worn at all times on the collar and outside the lead apron. See the section entitled **Radiation and other Safety Policies** of this handbook

Memo/Note Book

The program requires that students purchase a small memo book to document techniques, protocols, and notes and carry it with them at all times at the clinical site. Memo books are checked intermittently for compliance. Students who are not compliant in having or using the memo book will receive deductions in affective behavior. **STUDENTS MUST NOT INCLUDE ANY IDENTIFYING PATIENT INFORMATION IN THESE MEMO BOOKS**.

Case Log Documentation

Students are required to keep track of all exams they observe, assist with and perform during their clinical rotations. Students should track all of the patient exams and the required documentation on paper throughout the clinical day. Students are then required to enter all exams in E-value utilizing "Case logs on their own time, not during clinical hours. The student's clinical day is shortened by 30 minutes to compensate for the personal time the student will spend entering their daily case logs.

- All entries should be entered accurately in E-value within 24 hours to avoid point deductions.
- Students must enter the name of the supervising technologist and indicate if they were directly or indirectly supervised.
- **Students are required to document all repeats that they are responsible for.** The student must enter the Repeat with the exam entry in the E-value" Case Log". E-value will generate an email to the supervising technologist to verify that they directly supervised the student performing the repeat.
- Students participate in E-value training during the clinical orientation. Tutorials are also available in each clinical blackboard site.
- Students may never include patient identifiers on logs, comp forms or E-value "Case Logs".
- Students not entering case logs or repeats in E-value accurately within time limits will be in non-compliance.

Clinical Conduct Policies

Professional Clinical Conduct

Professional clinical conduct in the Program is expected and imperative for student success. Students should act in a manner that is honorable to themselves, the school and the profession for which they are being educated. Students should utilize the ARRT Code of Ethics.as a guideline for professional clinical behavior.

Students are guests at the clinical site and should always demonstrate professional conduct and adherence to all department and affiliate policies and procedures. The program will not tolerate policy non-compliance, unprofessional behavior or any burden on a clinical affiliate, infractions may result in point deductions, use of CCC policy and student's permanent removal from their clinical site**.**

Safe Clinical Practice/ Patient Safety Policy

Physical and emotional welfare of patients and their families is our highest priority. Students are expected to maintain patient's physical, psychological and emotional safety at all times. Students are expected to demonstrate growth in clinical practice through the application of knowledge and skills from the beginning to the end of each concurrent course.

Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk. This behavior places the patient, staff, clinical instructor, fellow students or other bystanders in either physical or emotional jeopardy. Evidence of unsafe clinical practice will result in a coaching, counseling, remediation or immediate dismissal from the clinical course. **Faculty reserve the right to remove students from the course and possibly the program if they are made aware of or personally observe unsafe clinical practice.**

Physical Jeopardy is identified as the student putting others at risk by:

**This includes but is not restricted to the list below*

- Actually causing harm
- Not properly identifying patient
- Poor or inconsistent patient care and imaging skills
- Radiographing the wrong patient or wrong body part
- Unsafe ambulation/interaction with patient
- Not practicing effective OSHA standards
- Not practicing effective Standard Precautions
- Not practicing effective Radiation Safety

Emotional jeopardy is identified as the student creating an environment that is unsafe due to:

**This includes but is not restricted to the list below*

- Insubordination, lack of respect through verbal or non- verbal communication
- Practices that evoke anxiety, distress or some type of threat
- Non-compliance with HIPAA and patient confidentiality

Affective Behavior

In the Radiologic Technology Program affective behavior is defined as behavior that is expected to be fully compliant to program policies. It also encompasses demonstration of positive teamwork, and a professional demeanor. All clinical and didactic courses include affective behavior as part of the student's grade in the course. Students receive a 10-point deduction for each non-compliant policy. If a student receives deductions for 5 infractions
(50 point deduction), the affective behavior grade will automatically be dropped to a 0. The CCC policy may be utilized for students who have habitual or reoccurring infractions.

Clinical Site Policy Compliance

Students should be aware of and follow all clinical site and facility policies and procedures. The Program will penalize student according the non-compliance point deductions and CCC policy. The clinical sites have the right to ask a student not to return to their site at any time.

Affective Use of Clinical Time

Clinical experience is invaluable; therefore, students should utilize all clinical time and opportunities effectively. Students should demonstrate initiative and participate in all possible procedures, no exceptions. In between patients and the start and end of each day, students are expected to clean and restock rooms. During down time, when there are no patients, students should practice with equipment and practice positioning. Studying at clinical site is discouraged unless the student gets approval from the supervising

technologist and/or clinical preceptor. Students should stay alert to patient flow and if there are exams to be performed, students are required to put down there studying and return back to performing exams. Students should not utilize a cell phone or electronic devices to study. Any student who misuses clinical time will be in non-compliance and in addition to penalties student may owe clinical hours for the time they spent studying instead of performing exam.

HIPAA/Confidentiality
Students are educated on HIPAA and confidential behavior and regulations in RADT 119. One of the mandatory requirements to successfully completed RADT 119 is the student to completed a mandatory HIPPA and Confidentiality training module and take a post-test achieving a grade of 100%). Students are required to sign an oath to abide by this policy at the beginning of the Program. Onboarding processes for some clinical sites may require additional training and verifications of this policy.

Students are expected to maintain the confidentially of all patients. All requests for copies of images or patient records should referred to supervising radiographer. Students may never copy images or take pictures of images without removing all patient and identification information from the image.

Eating, Drinking, Smoking
Students shall be respectful of the working area at their clinical site and should store their food or drinks in the designated place. Students should eat, drink, or smoke only in designated areas. Each clinical site will have designated areas as required by OSHA and Maryland Occupational Safety and Health regulations.

Social Media Policy
Students are not permitted to ever share pictures or any information about the clinical site, staff, patients, classmates or faculty on personal and other social media accounts even if you were given permission by the person. Students are not permitted to be using cell phones or electrical devices during clinical hours so they should never be “checking in”. during clinical hours as a student. Any students found in non-compliance to these policies are considered to be in violation of HIPAA as well as program policy and may be dismissed from the program.
Students are cautioned about “liking” a public clinical site social media page and posting any comments that are in non-compliance to the policy noted above. Students are cautioned to never friend or follow a technologist, staff member from their clinical site, or a patient on social media.
RT Facebook Page: Montgomery College’s Radiologic Technology program has a public Facebook page, the program coordinator is the administrator of this page and is the only person authorized to post on this page. If a student feels they have an appropriate post for this page they should discuss with the Program Coordinator. Academic support, images and job opportunities as well as shared posts from other approved sites are regularly posted on this page.

Cybersecurity
Most medical facilities maintain patient records electronically, students may have access to passwords for temporary access to EMR’s. Students are required to protect password security Students who misuse security information or are found to gather information on a patient outside of the immediate need, per imaging department policy, will be considered to be in violation of federal regulations on cybersecurity, non-compliant to HIPAA regulations and non-compliant to program policies. Students misuse will be immediately excused from the clinical site and from the program.

Electronic Devices

1. Cell phones: Students should never be using their cell phones, tablets, headsets or other devices during clinical hours. Answering texts, or messages even from faculty should be done during lunch or after the clinical shift is complete. Students are encouraged to give the clinical site phone number to family for Emergency contact.
2. Computers: Students are NOT to use the site computers for personal use.
3. Copiers: Students may not utilize clinical site copiers for personal use.

Gift giving
The Montgomery College's Radiologic Technology Program does not permit students to present gifts such as money, gift certificates, food or merchandise to the clinical site or staff for any reason. Thank-you cards or holiday cards are permitted. Once a student graduates from the program, this policy does not apply.

Employment as a Student Radiographer
Students are not encouraged to work as student technologists prior to graduation since they are not considered registry eligible until they finish all clinical and didactic classes. However, if a student makes a decision to do so, it is recommended that the student asks the employer to supply a dosimeter and liability insurance since the College cannot assume responsibility for either of these items.
A student employed in any capacity at a health care facility used for clinical rotations must inform the appropriate faculty member and request clinical placement at a different facility, if possible. This provides a broader learning experience for the student and prevents role conflict. Students will rotate through a minimum of two acute care and one outpatient setting during the course of the curriculum. Students who obtain employment as technologists prior to completion of the program, MAY NOT complete clinical competencies or other clinical requirements at the employment site during their hours of employment.

Financial Remuneration
Under no circumstances will students be paid for their services while completing their clinical education at the hospital. If a student is employed by the clinical facility, their work schedule hours must be outside of the student's assigned clinical hours. Clarity of these hours will be verified by clinical faculty and facility. Students should keep in mind that when working as an employee at their assigned clinical site the roles of employee and student are sometimes difficult to separate. The student some will be required to keep the delicate balance between the two roles in order to avoid problems. If working as a student radiographer a separate dosimeter must be provided by the employer. The "College dosimeter" should not be utilized outside of assigned clinical hours. The student should also inquire about liability insurance coverage provided by the employer.

Handbook Acknowledgement Page

It is the responsibility of each student to review this Handbook regularly and to understand it contents. This Handbook should not be construed as constituting a contract, express or implied, between the individual Health Science Programs and any person. The statements and provisions of this Handbook are subject to change at the discretion of the Health Sciences Department and/or individual Program without notice. The most current version of this Handbook will be located on the website for individual Programs.

My signature below indicates that I acknowledge receipt of this Handbook and understanding of the contents.

Student (Print Name)		**MC ID # M**
Student (Signature)		**Date:**