LANIER Technical College

Great Careers Begin Here

Radiologic Technology Program

Associate in Applied Science Degree

Student Handbook 2025-2026

Prepared by:

Erika Bongart, M.Ed., R.T.(R)

Program Director

Laura Hirshberg, B.S.E.S. R.T.(R)

Clinical Coordinator

EOI: https://www.laniertech.edu/equal-opportunity-institution/

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Radiologic Technology Program Policy and Procedures Manual

ACKNOWLEDGMENT OF THE RADIOLOGIC TECHNOLOGY STUDENT HANDBOOK

This handbook contains extremely important information. It is your responsibility to become familiar with its contents.

I have received and read the Radiologic Technology Program Student Handbook, and I understand what is expected of me as a student in the Radiologic Technology Program. The Program Director and the Clinical Coordinator explained the Policies and Procedures to me at the mandatory and interactive face-to-face 2-Day Policies and Procedures Orientation in July prior to the first day of classes in the program. I have had the opportunity to ask questions at the mandatory and interactive face-to-face 2-Day Policies and Procedures Orientation regarding the contents of the Radiologic Technology Program Student Handbook. I have also read and understand the potential sanctions for violations of the Policies and Procedures of the College. I understand when Policies and Procedures change; I will receive a copy of the new Policies and Procedures, which will be explained to me before implementation.

_____

Student Name (Please Print)

_____

Student Signature

_____

Date

Please Note:

Periodically, it will be necessary to revise existing program policies, or to publish new policies, in order to meet the needs of the sponsoring institution (Lanier Technical College), clinical affiliates, and to meet JRCERT Accreditation Standards. Students will be notified of any and all changes (in writing) prior to implementation. Revised (or new) policies will be discussed, and students will have an opportunity to ask questions for clarification. Each student will be responsible for adding these changes to the current student handbook.

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Policy or Program Change Procedure

Students receive a student handbook during the mandatory and interactive face-to-face 2-Day Policies and Procedures Orientation for the Radiologic Technology Program at a date to be determined in mid to late July. The policies and procedures are reviewed with students by program faculty to ensure they understand the expectations of the program and while at clinicals.

After reviewing the handbook, an acknowledgement of receipt* is signed by the student to indicate the handbook has been presented during the mandatory and interactive face-to-face 2-Day Policies and Procedures Orientation.

When policies and/or program changes occur and need to be implemented "effective immediately," the following procedure will occur to advise the student. The student will be notified verbally in order to clarify the change, and a written copy of the change will be given to the student. The student will receive an acknowledgement of receipt form to sign stating the change(s) have been clearly defined and the student will adhere to the change(s) in policy/program.

The Radiologic Technology Clinical Coordinator will notify the clinical sites of changes to program policies and/or procedures that will affect the student while at the clinic site. These changes will also be posted to Trajecsys.

***Acknowledge of receipt verbiage when there is a policy or program change:**

I have been verbally informed and given a hard copy of the new or revised policy/procedure listed above for my records. I was given the opportunity to ask clarifying questions of changes. I understand a copy of this will remain in my administrative file as well as I will be given a copy to place in my student handbook.

Student (print name): _____ Date: _____

Student Signature: _____

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Policy or Program Change Procedure Acknowledgement

I, _____ have received and read the "Policy or Program Change Procedure". The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

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Radiologic Technology

Program Directory

President of Lanier Technical College	Mr. Tim McDonald, MBA
Vice President of Academic Affairs	Ms. Donna Brinson, M.S.
Dean of Allied Health	Dr. Deanne Collins, Ed.D.
Radiologic Technology Program Director	Mrs. Erika Bongart, M.Ed., R.T.(R)
Radiologic Technology Clinical Coordinator	Ms. Laura Hirshberg, BSES, R.T.(R)
Radiologic Technology Lab Assistant	Mrs. Keri McCoy, B.A., R.T.(R)
Radiologic Technology Lab Assistant	Mrs. Kay Davis, A.A.S., R.T.(R)
Radiologic Technology Lab Assistant	Ms. Ashlyn Markarian., A.A.S., R.T.(R)
Radiologic Technology Lab Assistant	Mrs. Alexis Salazar, A.A.S., R.T.(R)
Radiologic Technology Lab Assistant	Mrs. Kimberly Maddox, A.A.S., R.T.(R)

The Lanier Technical College Radiologic Technology Program is located at the Hall County Campus of Lanier Technical College, 2535 Lanier Tech Drive, Gainesville, Georgia 30507. Program director, Erika Bongart, contact information: office 770.533.7070, email ebongart@laniertech.edu. Clinical coordinator, Laura Hirshberg, contact information: office 770.533.7071, email lhirshberg@laniertech.edu

Mailing Address for the program:

Lanier Technical College
Radiologic Technology Program
2535 Lanier Tech Drive
Gainesville, Georgia 30507

College Website: **www.laniertech.edu**

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Radiologic Technology
Program Description and Mission

Program Description

The Radiologic Technology Associate of Applied Science degree program is a sequence of courses that prepares students for positions in radiologic technology departments, related businesses, and industries. Learning opportunities develop academic, technical, and professional knowledge and skills required for job acquisition, retention, and advancement. The program emphasizes a combination of didactic and clinical instruction necessary for successful employment. Program graduates receive an Associate of Applied Science Degree in Radiologic Technology and are eligible to apply for the National certification exam to become a registered radiologic technologist. The exam is administered by the American Registry of Radiologic Technologists (ARRT). The Radiologic Technology Program of Lanier Technical College is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 N. Wacker Dr., Suite 2850, Chicago, Illinois 60606-3182, and Phone: 312.704.5300 www.jrcert.org; mail@jrcert.org

Mission

Within the mission of Lanier Technical College (LTC), the program's mission is to educate radiologic technology students in the knowledge, skills, and attitudes to become qualified professional practitioners who provide quality service and care to the community. The radiologic technology program also promotes long-term professional growth by fostering graduates to become multi-skilled practitioners in the radiologic sciences. LTC's radiologic technology program is designed to broaden intellectual perspectives, stress ethical and humane values, and prepare students to be productive and responsible citizens who adequately respond to social, cultural, and economic challenges.

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Radiologic Technology Program
Program Goals

The Radiologic Technology program will provide educational and technical preparation in the radiologic science of radiography in accordance with the guidelines established for an accredited program. The program goals and student learning outcomes are as follows:

1. Goal: Students will be clinically competent.

Student Learning Outcomes:

Students will position patients correctly.

Students will utilize radiation safety.

2. Goal: Students will demonstrate communication skills.

Student Learning Outcomes:

Students will demonstrate written communication skills.

Students will demonstrate oral communication skills.

3. Goal: Students will develop critical thinking skills.

Student Learning Outcomes:

Students will recognize setup discrepancies e.g. trauma exams

Students will produce diagnostically acceptable images.

4. Goal: Students will model professionalism.

Student Learning Outcomes:

Students will demonstrate work ethics e.g. perform professionally in the clinical environment

Students will ensure patient safety e. g. patient care techniques

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Radiologic Technology Program – Core Values

At the heart of the Radiologic Technology Program are core values that guide our mission, foster excellence, and shape the future of our profession. These values form the foundation of our educational and clinical practices, and it is the responsibility of each radiologic technology student and faculty member to embody these values:

R – Respect: Treating fellow classmates, technologists, instructors, patients, and oneself with kindness, valuing differing perspectives, and upholding consistency in words and actions by adhering to the Golden Rule: "Do unto others as you would have them do unto you."

A – **Accountability:** Taking responsibility for your actions, decisions, and commitments in the classroom, lab, and clinic, ensuring you follow through on promises and duties. Being honest about mistakes, learning from them, and contributing to a culture of trust and reliability within your interactions with classmates, technologists and instructors.

D – **Dedication:** Demonstrating unwavering diligence, perseverance, and resilience in one's professional pursuits, consistently striving for excellence and taking pride in one's work and accomplishments. Committing to consistently putting forth effort and focus on patient care and professional growth, often taking the initiative to go above and beyond expectations to ensure success.

T – **Temperance:** The ability to practice emotional intelligence by remaining calm, composed, and professional in the face of frustration, delays, and setbacks, valuing the process as much as the outcome. Demonstrating humility, a willingness to learn from others through active listening, and flexibility in response to change by embracing new experiences and challenges with a positive attitude.

E – **Ethical Competence:** Adhering to the principles that guide our decision-making and behavior, acting with integrity and honesty in all aspects of professional environments. Striving for the highest standards of diagnostic imaging and quality in patient care and understanding that "doing the right thing is not always easy, but doing the right thing is always the right thing".

C – **Collaboration:** Working effectively alongside fellow classmates, technologists, and instructors to achieve academic, clinical and professional goals. Understanding that true success comes when we work together through fostering community and mutual support.

H – **Helping Hand:** Demonstrating compassion through empathy and kindness in both actions and words to help alleviate the distress of others. Staying connected to our "why"—the deep purpose behind our work—and consistently going above and beyond to support and uplift those we serve.

We. Are. RAD. TECH.

Approved by Advisory Board June 2025

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Radiologic Technology Program – Core Values Acknowledgement

I, _____ have received and read the "Radiologic Technology Program – Core Values". The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

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Program and College Accreditation

Lanier Technical College's Radiologic Technology Program is accredited and in good standing with the Joint Review Committee on Education in Radiologic Technology (JRCERT). The JRCERT is the only accrediting agency recognized by the United States Department of Education for Radiography Programs.

The Joint Review Committee on Education in Radiologic Technology is dedicated to excellence in education and to quality and safety of patient care through the accreditation of educational programs in radiation and imaging sciences.

The program establishes its curriculum in alignment with the *Professional Curriculum in Radiography* developed and published by the American Society of Radiologic Technologists (ASRT).

Upon successful completion of the radiography credentialing examination offered through the *American Registry of Radiologic Technologists (ARRT)*, graduates of the program will become Registered Radiologic Technologists practicing Radiography R.T.(R).

Purpose of Accreditation:
Accreditation is a process of voluntary, external peer review in which a non-governmental agency grants public recognition to an institution or specialized program that meets certain established qualifications and educational standards, as determined through initial and subsequent periodic evaluations. The goals of the accreditation process are to protect the student and the public, identify outcomes by which a program establishes and evaluates its assessment policies and procedures, stimulate programmatic self-improvement, and provide protective measures for federal funding or financial aid.

Benefits:
Accreditation is assurance of acceptable educational quality since accredited programs are required to meet National standards established by radiologic technology professionals and communities of interest.

JRCERT accreditation is important to students because:

- JRCERT accreditation demonstrates that a program adheres to National educational standards that will give students the knowledge, skills, attributes and clinical experiences needed for entry into the profession and for practice of the profession anywhere in the United States of America.

Program and College Accreditation - Continued

- In some states, only graduates of JRCERT accredited programs are eligible for licensure. Graduation from a JRCERT accredited program assures that the student will be eligible to practice in all 50 states.
- Graduation from a JRCERT accredited program assures that students are competent to manage the delivery of radiation, a potentially dangerous substance, and possess the knowledge, skills and attributes to provide safe, high quality patient care.
- Enrollment in a program accredited by the JRCERT can enhance the student's eligibility for scholarships and other funding from government and private agencies.

Everyone benefits from JRCERT accreditation:

- Patients are assured of safe, high quality health care services as a result of high standards for professionals who administer ionizing radiation.
- Educational administrators are assured of program quality, minimizing instructional liability of increasing their ability to compete for students and sources of funding.
- Faculty is assured their programs keep pace with the profession and meet Nationally recognized standards.
- Employers are assured that prospective employees have the education and skills necessary to deliver quality care.

If a student feels that the program is in noncompliance with the JRCERT standards, the student may follow the standard grievance procedure as outlined within the student handbook (p. 54). If resolution of the issues on noncompliance is not met, the student shall be able to notify JRCERT independently. JRCERT and the program will then address complaints alleging noncompliance and the timeframe for grievance procedures.

Joint Review Committee on Education in Radiologic Technology • 20 North Wacker Drive • Suite 2850 • Chicago, IL 60606-3182 • Telephone: 312-704-5300 • Fax: 312-704-5304 • www.jrcert.org • mail@jrcert.org

Lanier Technical College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award technical certificates of credit, diplomas, and associate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Lanier Technical College.

JRCERT Standards for an Accredited Educational Program in Radiography

The program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Students have the right to submit allegations against a JRCERT-accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

The individual must first attempt to resolve the complaint directly with institution/program officials by following the grievance procedures provided by the institution/program. If the individual is unable to resolve the complaint with institution/program officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance directly to the JRCERT. Note: complaints to the JRCERT concern only the Standards listed below. Program policies and protocols not covered by these standards do not involve the JRCERT and need to be taken care of at the local college level.

Accreditation: The Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology (20 N. Wacker Dr., Suite 2850, Chicago, Illinois 60606-3182, Phone (312) 704-5300). www.jrcert.org mail@jrcert.org
Email**:** mail@jrcert.org

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JRCERT Standards for an Accredited Educational Program in Radiography - Continued

JRCERT Standards for an Accredited Educational Program in Radiography

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To see the entire content of the JRCERT Standards click on the link below:
https://www.jrcert.org/wp-content/uploads/Documents/Resources/Standards-PDFs/2021-Radiography-Standards.pdf

Americans with Disabilities Act

Any student with a disability may contact the Coordinator of Disability Services on the Hall Campus of Lanier Technical College for available services. It is the student's responsibility to self-identify with this coordinator.

It is important to note that in order to successfully progress through the curriculum and function as a practicing Radiologic Technologist upon graduation, an individual must be able to perform certain physical activities that include vocal, visual, auditory and dexterity requirements. Therefore, in order to be considered for admission to or retention in the Radiologic Technology program after admission, all applicants will possess:

1. Sufficient visual acuity, such as is needed in the accurate preparation and administration of medications, and for the observation necessary for client care.

2. Sufficient auditory perception to receive verbal communication from clients and members of the health team and to assess health needs of people through the use of monitoring devices such as stethoscopes, timers, cardiac monitors, fire alarms, etc.

3. Sufficient gross and fine motor coordination to respond promptly and to implement the skills required in meeting client health care needs safely. These include, but are not limited to, manipulation of equipment and performance of CPR.

4. Sufficient communication and language skills (speech, comprehension, reading, writing) to interact with clients and the health care team to communicate effectively, as may be necessary in the client's interest and safety.

5. Sufficient intellectual functions and emotional stability to plan and implement care for clients.

The Americans with Disabilities Act of 1990, as amended, and its implementing regulations provide that no qualified individual with a disability shall, on the basis of the disability, be excluded from participation in or denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity. It is the policy of Lanier Technical College to make reasonable accommodations to facilitate participation of people with disabilities in all programs, activities, and procedures. Reasonable accommodations will be made to the extent that these accommodations do not produce undue financial and/or administrative burdens.

Americans with Disabilities Act - Continued

All requests for modification of or additions to facilities, programs, services, activities, or publications shall be enumerated on the Accommodation Form. The person requiring accommodation will receive notification of the President's decision relative to undue financial and administrative burden within fifteen days of filing his/her request. An individual with a disability who may require assistance or accommodation in order to participate in or receive the benefit of a service, program or activity, or who desires more information, may contact the Coordinator of Disability Services (ADA) at 770.533.7003 (Hearing and TDD).

ADA Grievance Procedure

Lanier Technical College has adopted an internal grievance procedure providing for the prompt and equitable resolution of complaints alleging any action prohibited by the U.S. Department of Justice regulations implementing Title II of the Americans with Disabilities Act (ADA) of 1990. Title II states, in part, "No qualified individual with a disability shall on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity."

Procedures for Program/Service Complaints

1. A complaint should be filed, in writing, with the ADA Coordinator or a designee. A complaint must contain the name and address of the person filing it and a brief description of the alleged violation of the ADA. If the complainant needs an accommodation in order to file the complaint, he/she should inform the person taking the complaint.
2. A complaint should be filed within 30 calendar days after the complainant becomes aware of the alleged violation. (Processing of allegations of discrimination which occurred before this grievance procedure was in place will be considered on a case-by-case basis.)
3. An investigation, as may be appropriate, will follow the filing of a complaint. The ADA Coordinator or a designee will conduct the investigation. These rules contemplate informal, but thorough, investigations, affording all interested persons an opportunity to submit evidence relevant to the complaint.
4. A written determination as to the validity of the complaint and a description of the resolution, if any, will be issued by the ADA Coordinator and a copy will be forwarded to the complainant no later than 45 calendar days after filing.
5. The ADA Coordinator will maintain the files and records of Lanier Technical College relating to the complaints filed.
6. The complainant may request a reconsideration of the case in instances where he/she is dissatisfied with the resolution. The request for reconsideration should be made to the ADA Coordinator within 15 calendar days.

Americans with Disabilities Act - Continued

Complaints should be addressed to:
Veronica Bowermaster
Coordinator of Disability Services
770.533.7003 (Hearing and TDD)
Lanier Technical College
2535 Lanier Tech Drive
Gainesville, GA 30507
Vbowermaster@laniertech.edu

Unresolved complaints should be addressed to:
Procedure for Employment Complaint
Nancy Beaver
Vice President for Student Affairs
770.533.7001
Lanier Technical College
2535 Lanier Tech Drive
Gainesville, GA 30507
nbeaver@laniertech.edu

Persons with complaints against Lanier Technical College may use the agency's existing internal grievance procedure or consult the state's Commission on Equal Opportunity or the U.S. Equal Employment Opportunity Commission.

Other Remedies
The right of a person to a prompt and equitable resolution of the complaint filed hereunder shall not be impaired by the person's pursuit of other remedies, such as the filing of an ADA complaint with the responsible federal department or agency. Use of this grievance procedure is not a prerequisite to the pursuit of other remedies.

Rule Construction
These rules shall be constructed to protect the substantive rights of interested persons, to meet appropriate due process standards, and to assure that Lanier Technical College complies with the ADA and the implementing regulations.

Other Procedures
The procedures provided herein are in addition to, and not in lieu of, any other procedures or remedies available under the law or otherwise.

Complaint Contacts
Employment and Program/Service complaints should be addressed to the Coordinator of Disability Services.

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Unlawful Harassment and Discrimination of Students

The program expects all students and employees to conduct themselves with dignity and respect for students, employees, and others. It is each individual's responsibility to behave in a civil manner and to make responsible choices about the manner in which they conduct themselves. **Harassment of any kind is not acceptable in the program.** The program does not condone or allow harassment of others, whether engaged in by students, employees, supervisors or administrators, or by vendors or others doing business with the program (clinical sites). Harassment is the creation of a hostile or intimidating environment in which verbal or physical conduct, because of its severity or persistence, is likely to significantly interfere with an individual's work or education, or adversely affect a person's living conditions.

To assist with the understanding of what harassment is, two of the more prevalent types of harassment, racial harassment and sexual harassment, are defined.

Definition of Racial Harassment
Racial harassment includes any conduct, physical or verbal, that victimizes or stigmatizes an individual on the basis of race, ethnicity, ancestry, or national origin. Such behavior could involve any of the following: The use of physical force or violence to restrict the freedom of action or movement of another person or to endanger the health or safety of another person; physical or verbal conduct, intentional or otherwise, that has the purpose or effect of (or explicitly or implicitly threatens) interference with an individual's personal safety, academic efforts, employment, or participation in University sponsored activities; or the conduct has the effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working, learning or living environment.

Definition of Sexual Harassment
Based on the definition contained in the Equal Employment Opportunity Commission guidelines, adapted to include educational environments, sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when: submission to such conduct is made, either explicitly or implicitly, a term or condition of an individual's employment or academic advancement; submission to, or rejection of, such conduct by an individual is used as a factor in employment or academic decisions affecting such individuals; or such conduct has the purpose or effect of substantially interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive working, living or academic environment.

Unlawful Harassment and Discrimination of Students - Continued

While sexual harassment most often takes place in situations of power differential between the persons involved, sexual harassment may also occur between persons of the same status (e.g., student-to-student). The person exhibiting sexually harassing conduct need not realize or intend the conduct to be offensive for the conduct to constitute sexual harassment.

Other Types of Harassment

The attributes of racial harassment described above are also the attributes of most other types of harassment. Harassment may be based upon a person's status that is protected by law (e.g., religion, veteran status, handicap, etc.) or may be based on some other reason not specifically covered by law. In any event, **harassment of any type is not acceptable in the program.**

It is the purpose of this procedure to ensure that all students within the Technical College System of Georgia (TCSG) shall be provided an environment free of unlawful harassment (including sexual harassment and sexual violence), discrimination, and retaliation. All students and employees are expressly prohibited from engaging in any form of unlawful harassing, discriminating, intimidating or retaliatory behavior or conduct ("prohibited conduct") in all interactions with each other, whether or not the interaction occurs during class or on or off campus. Visitors to campuses also shall not engage in prohibited conduct and may be barred from campus for such prohibited conduct. Allegations of discrimination, harassment or retaliation, occurring at clinical sites to which students are assigned shall be investigated in accordance with this procedure. Any student or employee who has engaged in prohibited conduct will be subject to disciplinary action up to and including expulsion or dismissal. Nothing in this procedure shall be interpreted to interfere with any person's right to free speech as provided by the First Amendment to the Constitution of the United States of America. All students are encouraged to report any prohibited conduct. Reports will be treated in an expeditious and confidential manner. TCSG will not tolerate retaliation for having filed a good faith harassment and/or discrimination complaint or for having provided any information in an investigation. Any individual who retaliates against a complainant or witness in an investigation will be subject to disciplinary action, up to and including expulsion or dismissal. Employee complaints of unlawful harassment or discrimination shall be conducted pursuant to the process outlined in the procedure governing Unlawful Harassment, Discrimination and Retaliation in Employment.

The link to this policy in its entirety may be found here: https://laniertech.smartcatalogiq.com/2023-2024/catalog/general-code-of-behavior/unlawful-harassment-and-discrimination-of-students/

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Pregnancy Policy

POLICY:
This policy describes and explains the rules by which students must abide if they should become pregnant during the 4-semester program.

PROCEDURE:

1. The Lanier Technical College Radiologic Technology Program will follow the guidelines and regulations established by the Nuclear Regulatory Commission (NRC) regarding the declared pregnant student. A link to the NRC regulations may be viewed here: https://www.nrc.gov/docs/ML0037/ML003739505.pdf . Additionally, students shall be given the pregnancy policy and the guidelines prior to the start of classes in order to familiarize them with the policy.

2. To be consistent with these regulations, the program's pregnancy policy allows a female student the option of whether or not to inform program officials of her pregnancy. The female student is not required to declare her pregnancy. The premise of this policy is to allow the student to make an informed decision based on her individual needs and preferences.

3. If the student chooses to voluntarily inform officials of her pregnancy, it must be in writing and indicate the expected date of confinement (delivery). Without a written disclosure, a student cannot be considered pregnant.

4. If the student chooses to disclose her pregnancy, she has the following options:
    1. *Withdrawal from the program*: A student may voluntarily withdraw from the program and not continue her education.
    2. *Leave of Absence*: A student may withdraw from the program and return at the beginning of the same semester (of the following cohort) in which she withdrew. All grades achieved up to and including the time of her withdrawal will be considered valid. The student may return as soon as she chooses in order to avoid excessive clinical makeup hours.
    3. *Continuation of the program without modification*: Students choosing this option must go to all assigned rotations. Students choosing to continue their education without modifications will not have to extend the length of the program to meet the requirements for graduation.

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Pregnancy Policy - Continued

4. *Continuation of the program with modification*. The following modifications apply to this option:
    1. The student will participate in all classes.
    2. She will not work in fluoroscopy during pregnancy.
    3. She will not hold patients and/or image receptors during an exposure (students are not permitted to hold patients or image receptors whether pregnant or not).
    4. During pregnancy the student will not be permitted to work in:
        1. Special Procedures
        2. Spine/Back Rooms
        3. Fluoro Rooms
    5. The student who opts to continue her education with the above modifications will be required to complete the competencies in these areas following delivery. The student must be aware that the date of graduation may be extended if she has not completed all program requirements. The student will not be certified ARRT registry eligible until all graduation requirements have been met.
    6. A student who is restricted by their physician from working in areas other than those specified must produce a signed note from her physician. The student will be required to complete all clinical competencies and rotations before being designated as registry eligible.
        1. Although it is both procedure and practice of this program to offer the utmost in radiation protection to the students, the Lanier Technical College Radiologic Technology Program will not assume liability of the mother or child in case of pregnancy.
        2. A fetal radiation dosimetry badge will be provided in addition to the student's whole-body badge upon request by the student. The fetal dosimetry badge will be worn for the duration of the pregnancy.
        3. Information regarding a student's leaving the program due to pregnancy will be held in strictest confidence.
        4. This policy is established in the best interest of all female students to provide them the opportunity to continue their education during pregnancy.
        5. The Lanier Technical College Radiologic Technology Program will implement this policy without discrimination because of race, color, religion, national origin, age, or handicap.

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Pregnancy Policy - Continued

5. *A student may withdraw her declaration of pregnancy.*

6. A student has the right to choose whether to declare her pregnancy, including the right to revoke her declaration. If the student chooses to revoke her declaration for pregnancy, it must be in writing. Note: A student's withdrawal of her declaration of pregnancy does not alter the requirement of (NRC) 10 CFR 20.2106 to maintain the records of dose to the embryo / fetus (that were prepared as a result of the woman's declaration of pregnancy).

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Declaration of Pregnancy

To: _____

In accordance with the NRC's regulations at 10 CFR 20.1208, "Dose to an Embryo/Fetus," I am declaring that I am pregnant. I believe I became pregnant in _____ (only the month and year need be provided).

I understand the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem (5 mSv) unless that dose has already been exceeded between the time of conception and submitting this letter. * I also understand that meeting the lower dose limit may require a change in job and Radiography School responsibilities during my pregnancy.

I also understand that it is my right to undeclare my pregnancy at any time if I so choose. Check one below:

☐Withdrawal from the program
☐Leave of Absence
☐Continuation of the program without modification
☐Continuation of the program with modification
☐Written withdrawal of declaration

_____ _____
Student Signature Radiologic Technology Program Director, Lanier Technical College

_____ _____
Student Name Printed Date Received

_____
Date

*If the dose equivalent to the embryo/fetus is found to have exceeded 0.5 rem (5 mSv), or is within 0.05 rem (0.5 mSv) of this dose, by the time the woman declares the pregnancy the program shall be deemed to be in compliance if the additional dose equivalent to the embryo/fetus does not exceed 0.05 rem (0.5 mSv) during the remainder of the pregnancy.

Revised: August, 2017

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American Registry of Radiologic Technologists (ARRT)
Eligibility for Credential

PURPOSE: To define the requirements for taking the Registry Examination through the American Registry of Radiologic Technologists (ARRT).

1. Students will be eligible to apply for the ARRT examination upon graduation from the program. Beginning on January 1, 2000, all ARRT examinations began to be administered on computers.
2. Applications will be distributed to the students by the Program Director upon receipt from the ARRT. Applications for the computer-based examination do not have a postmarking deadline. However, applications must be received in the ARRT office prior to the graduation date. Students may apply up to three months prior to graduation.
3. Students are responsible for completing and mailing their individual applications. Students are also responsible for obtaining appropriate identification pictures for the registry application. The school is not responsible for use of inadequate or improper identification pictures submitted with registry applications.
4. All fees associated with the application are the responsibility of the student. Fees are not included in school tuition costs. Registry fees are paid directly to the ARRT.
5. All students must have completed the eligibility requirements by the date of the examination. The Program Director must verify that the student has successfully completed both clinical and didactic phases of the program.
6. The Program Director will sign as eligible only those students who will successfully complete the program at Lanier Technical College. All course work, clinical competencies, financial obligations and make-up time must be complete to remain eligible for the examination.
7. Applicants for examination in radiography must demonstrate competency in an ARRT specified list of procedures. Details will be included in the examination materials provided to those applying for examination.
8. ARRT rules and regulations will be distributed to the students in the form of the "Examination Handbook."
9. Computer based tests are scheduled at a time convenient to the examination candidate. Candidates schedule individual examination appointments with Pearson VUE, (the computerized test administrator) at times convenient to them.
10. Program graduates become eligible to take the registry test on the day of graduation from the program and are assigned a 90-day examination window that begins on the day of graduation if application is made prior to graduation.

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American Registry of Radiologic Technologists (ARRT)
Eligibility for Credential - Continued

11. Students must comply with the ARRT Rules of Ethics. A copy of the ARRT Standards of Ethics shall be distributed and discussed with the student prior to enrollment in the program, during orientation, and throughout the course of the program. Students who have violated the Rules of Ethics shall be advised of the appeals procedure and shall be provided with the necessary information and forms to file an appeal. All costs incurred in the appeal shall be the responsibility of the student.
12. Students shall be advised of the "Three Attempt, Three Year Limit" which states the applicant shall be allowed three attempts to pass the certification examination. The student must complete the three attempts within a three-year period of time. The three-year period of time begins with the initial examination window start date. After three unsuccessful attempts or three years have expired, the individual is no longer eligible.

ARRT examinations are administered by Pearson VUE, the electronic testing business of Pearson Education. Their network of more than 200 high-security test centers is specifically designed and built for professional licensure and certification markets in the U.S. and its territories.

The American Registry of Radiologic Technologists (ARRT) provides examination services to state licensing agencies. Your state licensing agency is responsible for determining your eligibility for examination in accordance with your state's eligibility requirements. This site is designed for state-approved candidates for examination for state licensing purposes only.

EXAMINATIONS OFFERED FOR STATE LICENSING PURPOSES

- Limited Scope of Practice in Radiography
- Bone Densitometry Equipment Operator
- Radiography
- Nuclear Medicine Technology
- Radiation Therapy
- Certain state-approved post-primary examinations
- Fluoroscopy Examination

LANIER Technical College

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American Registry of Radiologic Technologists (ARRT)
Eligibility for Credential - Continued

PAYMENT OPTIONS FOR EXAM FEES PAID DIRECTLY TO THE ARRT

If you are required to submit your exam fee directly to the ARRT, you may pay by credit card by logging in and following the prompts.

If you are required to submit your exam fee directly to the ARRT and prefer using a paper process, you must send a copy of your state eligibility letter along with a cashier's check or money order, made payable to the ARRT, for the appropriate examination fee (indicated on the eligibility letter) to the ARRT. NOTE: Personal and business checks are not acceptable and will be returned.

If you require testing accommodations you cannot pay by credit card. You must submit a request at this link https://www.arrt.org/pages/earn-arrt-credentials/initial-requirements/exam/preparing-for-your-exam/testing-accommodations and supporting documentation with a copy of your eligibility letter and cashier's check or money order.

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ARRT Standards of Ethics

Published: September 1, 2021

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

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.

4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

ARRT Standards of Ethics - Continued

10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

For more information concerning the ARRT Standard of Ethics see the following link:

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

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ARRT Standards of Ethics Acknowledgement

I, _____ have received and read the "ARRT Standards of Ethics." The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

ARRT Certification Qualifications

PURPOSE: To state the requirements for ARRT Registration.

General:

An applicant for certification by the ARRT must:

1. Be a pending graduate of an approved educational program or demonstrate professional preparation equivalent to that of a graduate of an approved educational program.

2. Be a person of good moral character and must not have engaged in conduct that is inconsistent with the *ARRT Rules of Ethics*.

3. Agrees to comply with the *ARRT Rules and Regulation* and *ARRT Standards of Ethics*.

4. Pass the ARRT examination in the category for which certification is being sought.

5. The applicant must demonstrate evidence of clinical competency.
    - The Board of Trustees shall have the right to reject the application of any person for certification if the Board determines, in its sole and absolute discretion, that the person does not meet the qualifications for certification.

Professional Educational Requirements:

Applicants must have successfully completed a formal educational program accredited by a mechanism acceptable to the ARRT.

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ARRT Ethics Pre-Application Review

PURPOSE: To outline the procedure for the ARRT Registry Test Pre-Application for possible Ethics violations.

PROCEDURE:

The Ethics Pre-Application Review is reserved for those who are:
- not enrolled in an ARRT-recognized education program, or are
- more than six months until graduating from an ARRT-recognized education program.

This is the process for an early ethics review of offenses that would otherwise need to be reported with your Application for Certification when you have completed an ARRT-recognized education program. You will still need to submit an Application for Certification when you have completed all other eligibility requirements.

ARRT Ethics Department staff will **not** be able to advise you of the possible outcome of your review. All documentation must be complete before an ethics review will be conducted. All results will be in writing.

All offenses must be reported regardless of how long ago they were committed.
Exceptions are:

- offenses committed while a juvenile and processed in the juvenile court system;
- traffic violations that did not involve drugs or alcohol;
- charges that were dismissed if there were no court conditions required for the dismissal.

All other misdemeanor or felony offenses must be reported, including convictions or charges resulting in a plea of guilty, plea of nolo contendere (no contest), withheld or deferred adjudication, suspended or stay of sentence, pre-trial diversion activity, or military court-martial.

If the Ethics Pre-application Review result is a cleared letter from the ARRT Ethics Committee, you will not be required to resubmit the same offense-related information with any future applications or renewals.

Go to: https://www.arrt.org/docs/default-source/ethics/ethics-review-preapplication.pdf?sfvrsn=34 for application form and frequently asked question information.

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Drug & Alcohol Usage

POLICY:
It is the policy of the Radiologic Technology Program to observe a zero-tolerance policy relative to the use and/or possession of illicit drugs and alcohol. This guideline will apply to all enrolled radiologic technology students. Furthermore, it is the policy of the program to prohibit the unauthorized possession or use of alcohol, controlled substances, or illegal drugs. Students are prohibited from reporting to class, laboratory, or clinical assignments under the influence of alcohol, illegal drugs, or controlled substances not prescribed to them by a physician or other licensed healthcare practitioner.

PROCEDURE:
To clarify the program's position on the use and possession of alcohol and/or illicit drugs on hospital property or clinical, laboratory, and classroom areas, this guideline was written in order to comply with JRCERT requirements.

Indicators for "reasonable suspicion" that a student may be under the influence of alcohol, unauthorized narcotics, or controlled substances or illegal drugs include (but are not limited to):

1. bizarre or unusual behavior
2. slurred speech, the smell of alcohol on the breath, irrational behavior
3. repeated mistakes or accidents not attributable to other factors
4. violation of safety rules / policies and procedures which potentially jeopardize the well-being of patients, clinical employees, fellow students, and/or others
5. deteriorating clinical performance or attendance problems not attributable to other factors
6. apparent physical state of intoxication or drug induced impairment of motor functions

If it is determined that a drug or alcohol screen is necessary, the program director will:

1. Take the student to a quiet and private area and express concern that the student does not appear to be able to perform his/her duties at this time and that the student is suspected to be under the influence of some substance.
2. Depending on the student's condition, the presence of campus police or hospital security may be requested.
3. The student will be sent home after the program director has arranged transportation with the student's relative, emergency contact individual or other responsible adult.
4. The program director will document the observed behavior, which will be maintained in the student's file.

A drug or alcohol screen will be required **within 24 hours** at the student's expense. **The burden of proof shall rest with the student.** If the student refuses to comply with the test within the 24-hour deadline, they will be placed on suspension from all classroom, laboratory, and clinical activities of the program pending Administrative Review.

If the results are positive, unless the student is able to produce a medically acceptable prescription dated prior to the test, the student will be placed on suspension from all classroom, laboratory, and clinical activities of the program pending Administrative Review.

> **Title 20-1 of the Official Code of Georgia Annotated**: any *student of a public educational institution who is convicted, under the laws of the state, the United States, or any other state, of any felony offense involving the manufacture, distribution, sale, possession, or use of marijuana, controlled substance, or a dangerous drug shall as of the date of conviction be suspended from the public educational institution in which such person is enrolled. Except for cases in which the institution has previously taken disciplinary action against a student for the same offense, such suspension shall be effective as of the date of conviction, even though the educational institution may not complete all administrative actions necessary to implement such suspension until later.*

Definitions:
Illicit drugs: any drug, medication or controlled substance not prescribed for the individual by a licensed healthcare practitioner. This definition is extended to include controlled substances, illegal drugs including, but not limited to, marijuana, methamphetamine, cocaine, and heroine.

REGARDING DRUG TESTING AT CLINICAL SITES: It is the guideline of some hospitals to conduct random or scheduled drug testing. Students may be asked to submit a random drug screen at the request of the clinical facility (This is done for the purpose of maintaining hospital accreditation).

The Drug & Alcohol guideline is also in effect for any school related off-campus activities. We are still affiliated with Lanier Technical College and must abide by all policies and procedures whether students are on or off campus.

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Radiologic Technology Program
Code of Conduct

The progressive disciplinary procedure as outlined below is <u>cumulative</u> and will be applied to a student throughout the entire program.

The progressive disciplinary plan is as follows:

1. Written Warning
2. Written Disciplinary Action with Probation
3. Written Disciplinary Action with a three (3) day Suspension
4. Written Program Dismissal

The Program Director will issue a Written Warning for violations of any minor incident.
The Program Director will issue a Written Disciplinary Action with Probation (See Participation Plan, p. 41) for repeated violations of any minor incident or a single violation of any major incident.
The Program Director will issue a Written Disciplinary Action with a three (3) day Suspension (See Participation Plan, p. 41) for subsequent violations of any minor incident or a repeated violation of any major incident.
The Program Director will issue a Written Program Dismissal for continued violations of any minor incident, a repeated violation of any major incident, or a single violation of any critical incident. The student will be dismissed from the Radiologic Technology Program.

All written disciplinary plan documentation will consist of:

1. A meeting with the Program Director and Clinical Coordinator to discuss the violation
2. A description of the violation
3. The disciplinary result of the violation
4. Any supporting documentation of the violation
5. An opportunity for the student to respond in writing about the violation

All written disciplinary plan documentation will become part of the student's permanent administrative file. Students will be given a copy of all written disciplinary plan documentation for their records.

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Radiologic Technology Program Code of Conduct - Continued

The following are examples of minor incidents but are not limited to:

Instigating a negative climate among classmates and/or others
Engaging in unprofessional interactions/behaviors among classmates and/or others (i.e. gossip)
Negative attitude toward instructors, patients, fellow classmates, and/or clinical staff
Causing intentional disruptions during class time
Wearing improper uniform at clinic, classroom, or laboratory settings
Failure to follow instructions during clinic, classroom, or laboratory activities
Use of cell phones at clinic, during classroom time, or during laboratory activities

The following are examples of major incidents but are not limited to:

Violation of professional ethics (See ASRT Standards of Ethics p. 28, Core Values p. 10)
Sleeping in class, lab, or clinical
Violations of safety and/or radiation protection rules (i.e. failure to return dosimetry badge)
Use of abusive or profane language to fellow classmates, patients, visitors, clinical staff or faculty
Failure to follow established program policies, i.e. repeat policy
Lack of discretion or judgment
Missing a 5th day of course participation (See Participation Plan, p. 41)

Critical offenses will result in immediate dismissal or expulsion from the radiology program. The following are examples of critical incidents but are not limited to:

Intentionally exposing yourself or other persons to unnecessary radiation and/or safety hazards
Intentionally violating patient confidentiality i.e. posting patient identifiers on social media
Extreme and/or inappropriate behavior towards patients, visitors, staff or faculty
Insubordination (disobedient or defiant)
Harassment of any kind or inappropriate touching of another person
Theft or dishonesty (i.e. violation of Work Policy, p. 63)
Intentional negligence in patient care
Intoxication and/or use of unauthorized drugs on school or clinical property
Unauthorized possession of firearms, explosives, lethal weapons, etc. on school or clinical property (see campus carry policy)
Cheating in any form on academic/clinical tests or assignments
Plagiarism; this includes the use of AI software to replace independent thought
Falsifying clinical information through Trajecsys or on required written documentation
Failing to maintain course objectives (academic or clinical) with a minimum of a 70 average
Reaching class participation points deduction limit

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Radiologic Technology Program Code of Conduct Acknowledgement

All students have the right to exercise the Student Disciplinary Procedures described in the college catalog. ***Students in the Radiologic Technology program are responsible for their own behavior.*** *These students deal with human lives on a daily basis therefore strict adherence to the published policies is mandatory and cannot be overlooked. Any student who may have information that a fellow student is in violation of the Code of Conduct or any program policies has a responsibility to the program to report the violations to program faculty.*

I, _____ have received and read the "Radiologic Technology Program Code of Conduct." The Director of the Radiologic Technology Program and/or Faculty has discussed and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding of the seriousness and severity of these violations and the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

Approved by Advisory Board June 2018

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Radiography Program: Course Sequence

this course sequence may be subject to change

Course #	Course Name	Pre-requisites/Co-Requisites	Contact Minutes	Credit Hours
First Semester (Fall I)				
RADT 1010	**Introduction to Radiography**	Program Admission, Co- RADT 1030, RADT 1320	3750	4
RADT 1030	**Radiographic Procedures I**	Program Admission, BIOL 2113 & 2114, Co- RADT 1010, RAD 1320	3750	3
RADT 1065	**Radiologic Science**	Co-RADT Program Admission	1500	2
RADT 1320	**Clinical Radiography I**	Co- RADT 1030	9000	4
TOTAL CREDIT HOURS FOR THE TERM				**13**
Second Semester (Spring)				
RADT 1060	**Radiographic Procedures II**	Pre-Req, RADT 1010, RADT 1030/ Co-Req RADT 1330, RADT 1065	3750	3
RADT 1085	**Radiologic Equipment**	Program Admission	3000	3
RADT 1200	**Principles of Radiation Biology and Protection**	Program Admission	1500	2
RADT 1330	**Clinical Radiography II**	Pre-Req, RADT 1010, RADT 1030, RADT 1320/ Co-req, RADT 1060 RADT 1065	15750	7
TOTAL CREDIT HOURS FOR THE TERM				**15**
Third Semester (Summer)				
RADT 1075	**Radiographic Imaging**	Pre-Req, RADT 1010, RADT 1030/ Co-Req RADT 1330 RADT 1065	3750	4
RADT 2090	**Radiographic Procedures III**	Pre-req, RADT 1060/ Co-Req, RADT 2340	3000	2
RADT 2340	**Clinical Radiography III**	Pre-Req, RADT 1330	13500	6
TOTAL CREDIT HOURS FOR THE TERM				**12**
Fourth Semester (Fall II)				
RADT 2260	**Radiologic Technology Review**	Pre-req: All Required, Co-req. All Required	2250	3
RADT 2360	**Clinical Radiography IV**	Pre-Req, RADT 1010, RADT 2090, RADT 2340	20250	9
TOTAL CREDIT HOURS FOR THE TERM				**12**
TOTAL CREDIT HOURS FOR THE RADIOLOGIC TECHNOLOGY PROGRAM				**52**

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Academic and Clinical Hours

PURPOSE:

This policy identifies the maximum number of hours a student may participate in academic and clinical activities.

PROCEDURE:

The length of the radiography portion of the program is (17) months or four (4) semesters. Note: Eight prerequisite classes are required before an applicant may apply for the radiologic technology program. For the full-time student, the program is six (6) semesters or 24 months total. Learning support classes will result in a longer time frame for the completion of pre-requisite classes. The maximum number of student clock hours is 40 clock hours per week during the radiologic technology portion of the program. Student activities are restricted to educational activities at all times during the 40 clock hours per week. Those students who work in Imaging Services or any other department beyond school hours are employees of the respective medical facility/center and are not considered students in the program during those hours. Students should refer to the Student Radiographer Work Policy, p. 63 of the *Radiologic Technology Program Student Handbook*.

Clinical Rotation Hours

Clinical rotations run in four to ten-week blocks and in 8.5-hour increments per shift. Clinical rotations vary from two to four days per week and encompass a wide variety of settings. Clinic is not scheduled on institutional holidays or breaks.

> ***Note: some of the clinical sites will be very close to where a student lives, and others will require a longer drive. All clinical sites are in Northeast Georgia and are within one hour of Lanier Technical College Hall Campus. Final semester clinical rotations can be modified for student competency needs <u>at the discretion of the Clinical Coordinator</u> and will include a modality rotation.***

Clinical shifts can start as early as 5:30am and can end as late as 11:30pm. Requests or modifications to clinical schedules are **<u>NOT</u>** accepted for clinical site placement; there are zero exceptions. ***Clinical assignments are based on a lottery rotation system that ensures all students have equitable clinical learning opportunities. This is in accordance with the program's JRCERT accreditation (See JRCERT Standards for an Accredited Educational Program in Radiography, Student Handbook p. 14).***

Overtime in Clinical Areas

Students are scheduled for a specific number of hours during class and clinical rotations that are **not to exceed 40 hours per week**. Students may request the opportunity to spend more than the required 40 hours per week in a clinical rotation. Refer to the *Additional Clinical Hours 40+* form located on Trajecsys. If it is necessary for a student to remain in the clinical setting beyond their normal schedule to complete an examination, the student **MUST** email the LTC Clinical Faculty stating the reasoning of staying late the day of the occurrence. Failure to appropriately follow this protocol will result in the respective point deduction being assessed to the student's final course grade for non-participation (see Participation Plan p. 41).

Approved by Advisory Board June 2025

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Academic and Clinical Hours Acknowledgement

I, _____ have received and read the "Academic and Clinical Hours." The Director of the Radiologic Technology Program and/or Faculty has discussed and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand that I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

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Participation Plan Policy

PURPOSE:

Due to the nature and difficulty of radiologic technology classes, **participation*** is mandatory to achieve competency in the program.

To successfully complete the radiologic technology program, students are required to participate in all RADT courses. Failure to participate in RADT classes, labs, and/or clinical rotations will result in a deduction of the student's final course average. Grade deductions for failure to participate during all designated RADT classes, labs, and/or clinical rotations are as follows:

1st day of missed course/lab/clinical participation = A three (3) point deduction from the final grade

2nd day of missed course/lab/clinical participation = A five (5) point deduction from the final grade

3rd day of missed course/lab/clinical participation = A ten (10) point deduction from the final grade

4th day of missed course/lab/clinical participation = A fifteen (15) point deduction from the final grade

5th day of missed course/lab/clinical participation = A twenty (20) point deduction from the final grade

If a student misses a fifth day of course/lab/clinical participation, the student will receive a Written Disciplinary Action outlining the consequences associated with any course grade falling below a 70% while in the radiologic technology program and will be placed on **probation****.

Each additional day of missed course/lab/clinical participation will result in an additional five (5) point grade deduction per occurrence (days are cumulative). ***In the event a student has seven (7) or more instances of missed course/lab/clinical participation, the student will be dismissed from the course due to failure to meet mandatory participations requirements and maintain a course average of 70 percent****. Failure to complete any RADT course with a minimum grade of 70% results in the student's failure of the course and dismissal from the program.*

Late arrivals or early departures will be counted as one (1) day of non-participation in the course. Late arrival or early departure from a class, lab, or clinical assignment is defined as clocking in before designated arrival time or clocking out later than designated departure time (See Clinical Time Keeping Policy, p. 82 Student Handbook)***.

Participation is defined as actively completing the required and assigned class/lab/clinic hours. The state of Georgia mandates the number of hours required for each course.

****A five (5) point grade deduction will be assessed to the student's final grade in the respective RADT course for any/all instance(s) of probationary discipline. In the event a student was issued a Written Disciplinary Action with a 3-day suspension, the student will be unable to attend classroom,***

laboratory, or clinical assignments during this time and will accrue the respective final grade point deductions in each of the courses the suspension applies (See Participation Plan p. 41 Student Handbook).

******Each occurrence of failure to properly clock in or out via Trajecsys for clinical assignments will be considered an incidence of non-participation.***

A grade of Incomplete (I) is permitted only when documented unavoidable circumstances prevent a student from taking the last exam of the semester or if a student does not fulfill the required number of clinical hours within a semester. A grade of Incomplete (I) must be converted to a grade before mid-term of the following semester. The coursework must be completed and turned in by midterm of the following semester, or the grade will be calculated according to the percentage of student's completed work and the required completed work needed for that semester. *This program allows one (1) Incomplete (I) semester during the student's cohort. Failure to meet participation requirements in any subsequent term will result in the student failing the course and being dismissed from the program.* Failing any general education course, whether it is a required course of the program or whether it is an elective, may result in the student being placed on academic probation. Refer to the Student Handbook on Academic Policies.

Sick Days. Each student is allotted two (2) sick days (16 hours) at the beginning of the four semester Radiologic Technology Program that may be used for class or lab assignments only. If a student is sick on a CLASS/LAB Day, students **MUST** email the course instructor(s) **NO LATER THAN 1 HOUR PRIOR** to the time the class/lab assignment is scheduled to begin if he/she is unable to participate**.** If a student is sick on a CLINIC day, students **MUST** email their assigned clinical site (Clinical Preceptor or Supervisor) and include a courtesy copy (cc) to the LTC Rad Tech Clinical Faculty **NO LATER THAN 1 HOUR PRIOR** to the time the clinical assignment is scheduled to begin if he/she is unable to participate in clinic**.** Any instance a student is unable to actively participate in clinical assignments must be made up (except for PLT hours) to fully satisfy mandatory clinical hour requirements. The program allows students to make up two (2) clinical days per semester. Make-up time will be scheduled at the discretion of the Clinical Coordinator. Failure to appropriately report or follow this protocol, including following the correct email protocol, will result in the respective point deduction being assessed to the student's final course grade for non-participation *(see Participation Plan, p. 41 Student Handbook).* Failure to actively participate in clinical assignments for any reason, other than scheduled PLT hours, will result in an additional occurrence of non-participation *(see Participation Plan, p. 41).* **If a student misses more than three (3) consecutive days from class, lab, or clinic due to an illness, the student must have a doctor's excuse to return to clinic unless prior arrangements have been made with the Program Faculty.**

Personal Leave Time (PLT). Students will have the opportunity to earn PLT hours during the course of the four-semester program. Awarded PLT hours will be sent via student email and will be awarded in four-hour increments. PLT hours may be used for clinical assignments only and PLT forms are located on Trajecsys. The student must obtain an approval signature from the site Clinical Preceptor. PLT requests must be submitted via email as a PDF attachment along with the award email(s) to the LTC Rad Tech Clinical Faculty at least 72 hours before the date requested. The Clinical Coordinator will notify the student within 24 hours via email if their PLT request is approved. PLT time may be used in four-hour increments or may be combined into eight-hour sessions. **PLT may not be used the first or last clinic day of the rotation, or before or after a scheduled no class, no clinic day, or holiday.** The PLT hours may not be made up. Failure to follow PLT request/notification protocol will result in forfeiture of the awarded PLT hours. If a student's PLT hours are denied and the student does not attend their clinical

assignment, the absence will be considered an instance of non-participation and the respective point deduction will be assessed to the student's final clinical for non-participation **(see Participation Plan p. 41 Student Handbook).** Any instance a student is unable to actively participate in clinical assignments must be made up (except for PLT hours) to fully satisfy mandatory clinical hour requirements. Make-up time will be scheduled at the discretion of the Clinical Coordinator.

Bereavement Leave. Students who experience a death in their immediate family**** will be given up to two (2) days of bereavement leave without penalty. An obituary must be provided within three (3) days of the student's return to school. It is the responsibility of the student to notify the clinical coordinator and program director. Failure to appropriately follow this protocol will result in the respective point deduction being assessed to the student's final course grade for non-participation **(see Participation Plan p. 41 Student Handbook).**

******Immediate family is defined as: grandparents, parents, stepparents, in-laws, siblings (adopted, biological, or step), spouse, child, or other individuals residing with the student.**

Call out procedure: CLINIC - Students **MUST** email their assigned clinical site (Clinical Preceptor or Supervisor) and include a courtesy copy (cc) to the LTC Rad Tech Clinical Faculty **NO LATER THAN 1 HOUR PRIOR** to the time the clinical assignment is scheduled to begin if he/she is unable to participate in clinic**.** Failure to appropriately follow this protocol will result in the respective point deduction being assessed to the student's final clinical grade for non-participation (**see Participation Plan p. 41 Student Handbook**). Failure to actively participate in clinical assignments for any reason, other than approved PLT hours, will result in an additional occurrence of non-participation (see Participation Plan p. 41). CLASS/LAB - Students **MUST** email the course instructor(s) **NO LATER THAN 1 HOUR PRIOR** to the time the class/lab assignment is scheduled to begin if he/she is unable to participate. Failure to appropriately follow this protocol will result in the respective point deduction being assessed to the student's final course grade for non-participation **(see Participation Plan p. 41 Student Handbook).**

Students will be allowed to make up a maximum of two (2) missed clinical days per semester, not to include scheduled PLT hours or bereavement leave. In the event a student missed clinical days as a result of a Written Disciplinary Action with 3-day Suspension, the student will be required to make-up two (2) of the missed clinical days; however, the student will still receive the assigned course point deduction. Missed class or laboratory days shall not apply. Make up days will be scheduled at the discretion of the Clinical Coordinator. Missed time must be made up prior to the last day of the semester.

At any time during the 17-month program, this policy may be adjusted and/or waived by a joint decision from the Program Director and Clinical Coordinator that circumstances of an absence were unavoidable such as severe illness or hospitalization; a doctor's excuse must be provided within three (3) days of the student's return to school. Exceptions may be made for verifiable, unavoidable emergencies requiring emergency services.

Participation Plan Policy Acknowledgement

I, _____ have received and read the "Participation Plan Policy." The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

Great Careers Begin Here

Dress Code Policy

Purpose:
To inform the students of the requirements to present to clinical assignments in a professional manner.

PROCEDURE:
As Radiologic Technology Students interacting with patients, it is necessary that you treat them with the utmost dignity. Clinical rotations require appropriate personal hygiene, and scented body wash/spray, perfumes, colognes, lotions, and other scented hygiene products can interact negatively with patients. The Radiologic Technology student will follow principles of good grooming to promote the prevention of cross-contamination. PATHOGENIC BACTERIA AND SOME VIRUSES, NOTABLE HBV, CAN SURVIVE SEVERAL WEEKS ON DRY SURFACES OR CLOTHING.

Hands:
1. Fingernails should be clean and neatly trimmed. Nails should not extend beyond the fingertip (Not visible from palm side of hand).
2. **Nail polish of any color is not allowed.**
3. Artificial nails are not allowed due to the possibility of infection. This includes adornments, stripes, designs, tips or airbrushing, etc.

Attire:
The clinical coordinator will provide the most updated information about clinical uniform color, style numbers, vendors, shoes, undershirts, and socks. The uniform must contain the college/program logo as specified by the program. The student must wear a college identification badge, dosimetry badge, and lead markers for all class, lab, and clinical assignments. **Students will not be allowed in clinical settings without following the program's specific uniform guidelines:**

1. Full clinical uniforms will be worn when attending clinical assignments and on SIM days. Students are not permitted in the lab when wearing plain clothes or open-toed shoes.
2. Students may wear scrub pants and a branded Lanier Tech/Radiology Class t-shirt for lecture and lab days as approved by the Program Faculty.
3. If students choose to wear a sweatshirt or jacket, it must be a branded Lanier Tech/Radiology sweatshirt or jacket.
4. Uniforms must be **wrinkle free**, clean (free from visible stains), and in good repair.
5. Business attire is required at professional meetings and during the mock interviews.

LANIER Technical College

Great Careers Begin Here

Dress Code Policy - Continued

6. Students are not permitted to wear pants that are not in good repair. Pants with tears in them are not permitted. Pajama bottoms, shorts, and sweatpants are not permitted.
7. Short tops, Tank tops or low-cut tops are not permitted.
8. Students will not be permitted to enter the clinic in clothes other than scrubs.
9. Students who do not wear the proper clothing to class, lab, or their clinical site, **will fall subject to the respective point deduction (See Participation Plan, p.41).**

Hair:

1. During all clinical and laboratory sessions hair must be kept away from the treatment field.
2. Hair must be of natural color. Hair dyed an unnatural color is not allowed. Dyes, tints, or bleaches must result in natural hair colors. Colors that detract from a professional appearance are prohibited. Applied hair colors that are prohibited include, but are not limited to, purple, blue, pink, green, orange, bright (fire engine) red, and fluorescent or neon colors.
    a. Natural hair colors:
        i. Black hair
        ii. Brown hair
        iii. Blonde hair
        iv. Auburn hair
        v. Chestnut hair
        vi. Red hair (not fire-engine red)
        vii. Gray and white hair
3. Hair must be clean, neatly groomed and not present a ragged, unkempt, or extreme appearance. Students must wash their hair on a regular basis. Students who chose to wear a bun must wear a tight bun. **Messy buns are not permitted.**
4. Trendy styles that result in shaved portions of the scalp (other than the neckline) or designs cut into the hair are prohibited. Mohawks are prohibited.
5. Twists, braids and cornrows must lie snugly on the head, with the ends secured inconspicuously. Students may not have hair fall over their shoulder during lab or clinical procedures.
6. Dreadlocks are prohibited.
7. Hair must be pulled neatly away from the face and off the collar. It will not fall over the eyebrows or extend below the bottom edge of the collar. Long hair that falls naturally below the bottom edge of the collar, to include braids, will be neatly and inconspicuously fastened or pinned, so no free-hanging hair is visible. Students must bring their own hair tie to put hair up in the laboratory or clinical setting. Students who show up to lab or clinic with their hair longer than shoulder length will be asked to leave the clinical setting. Students who leave the clinical setting due to hair falling below the bottom edge of their collar will be treated as an incident of

LANIER Technical College

Great Careers Begin Here

Dress Code Policy - Continued

non-participation will fall subject to the grade deduction as outlined in the Participation Plan (p. 41 of Student Handbook) each time that the student is asked to leave.

8. Ribbons, scarves, bandanas, and fancy barrettes are not acceptable.
9. Facial hair, including beards and mustaches must be kept neat and well-trimmed. ***Students with facial hair will not be able to be appropriately fitted for an N-95 mask in clinic as facial hair prevents the mask from forming a proper seal to one's face.*

Strong Odors:

1. Scented hand lotions, scented hand sanitizers, body sprays, lotions, and perfumes are not permitted. Fragrance free personal hygiene product (hair spray, deodorant, etc.) use is encouraged in the clinical setting. Perfume, perfumed lotions, or perfumed products of any type are not to be used in the lab or clinical setting.
2. Students are not permitted to smell of smoke in the classroom, laboratory, or clinical setting. A strong smoke smell is offensive to others and will not be accepted.
3. Students are required to shower regularly, wear deodorant, and brush their teeth daily.
4. ***Chewing gum is not permitted in the classroom, lab, or clinical assignments.***

Students who come to lab or go to a clinical site with a strong odor will be asked to leave and will be subject to point deductions off final grade as outlined above and in the Participation Plan (p. 41 Student Handbook).

Jewelry:

1. Watches must be worn, preferably waterproof. Apple Watch and FitBit type watches are acceptable. "Smart watches" should be silenced, and put away during exams, lectures, and labs. Multiple incidents or violations of this guideline will result in the student being asked to leave the class or lab area and will result in disciplinary action.
2. Only two rings or ring set on either hand may be worn
3. Bracelets are not permitted.
4. Necklaces, which are visible outside the uniform, may NOT be worn.
5. Pierced earrings may be worn in clinical setting but are limited to only one (1) per earlobe. Earrings are to be no larger than one quarter inch (¼") in diameter. Only stud earrings are permissible.
6. Visible body piercing ornamentation (other than pierced ears) is not permitted. **CLEAR** acrylic spacers/retainers may be worn in piercings to maintain patency of cartilage piercings.
7. No pins or decorations may be worn unless specified by the Clinical Coordinator.

Great Careers Begin Here

Dress Code Policy - Continued

Tattoo Policy:

To maintain a respectful and inclusive learning environment, the display of tattoos by students is subject to the following guidelines:

- Prohibited Content: Tattoos that depict or promote the following are not permitted to be visible:
  - Violence, criminal activity, or gang affiliation
  - Profanity, obscenity, or sexually explicit material
  - Discriminatory or hate speech targeting any group based on race, gender, sexual orientation, religion, or other protected characteristics
  - Substance abuse, including references to drugs, alcohol, or tobacco
- Visibility and Disruption: Tattoos that are deemed disruptive to the educational process or that cause undue attention are to be covered during class and clinical hours.
- Administrative Discretion: School administrators reserve the right to determine the appropriateness of visible tattoos. Students may be asked to cover tattoos that are considered inappropriate or disruptive.

Approved by Advisory Board June 2025

Great Careers Begin Here

Dress Code Policy Acknowledgement

I, _____ have received and read the "Dress Code Policy." The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

LANIER Technical College

Great Careers Begin Here

Lab Management Plan

STRUCTURE

The Radiologic Technology program is a sequence of courses designed to prepare students for a career in radiologic technology. Learning opportunities develop academic, technical, and professional knowledge and skills required for job acquisition, retention, and advancement. Program graduates are to be competent in the general areas of communications, positioning, radiation protection, techniques, image processing, mathematics, computer literacy, problem solving and interpersonal relations. The program emphasizes a combination of imaging technology theory and practical application necessary for successful employment using both lab and clinical environments. Satisfactory completion of all program courses prepares students to apply for jobs in any radiology department.

Lanier Technical College Radiography's program has two (2) energized laboratories. Each energized laboratory (2107 Lab B and 2108 Lab A) undergoes a Radiation Safety Survey and Equipment Performance Evaluation from a Radiation Physicist at minimum of every 4 years in accordance with the State of Georgia requirements; the most current Entrance Exposure Estimates Report is posted alongside Technique Charts in the console area of each lab room. Students are made aware of the Entrance Exposure Estimates Reports and Technique Charts during Lab Orientation in their first semester of the program and again when a new Radiation Safety Survey and Equipment Performance Evaluation is completed.

Students will perform exam simulations on each other as part of their learning experience in the program. Students will also have the opportunity to make radiographic exposures on radiographic phantom body parts and mannequins. Students must be under **direct** supervision by a Radiography Program faculty member when exposing any phantoms. If students practice labs with program instructors at any of the program's clinical settings, students will be expected to follow all radiation policies/guidelines outlined at that facility.

A course syllabus indicating class and lab times will be given to each student at the beginning of each positioning class.

STUDENT OBLIGATION

In addition to completing the assignments successfully, gaining competence and proficiency, each student must act courteously and helpfully to fellow students and the clinical and instructional staff.

LANIER Technical College

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Lab Management Plan - Continued

LAB CLEANLINESS

A clean lab is a safe lab. Each student is responsible for maintaining and cleaning assigned lab areas and equipment. Also, each student will participate in a general cleaning of the lab during the last 5 minutes of each lab time period.

GENERAL RADIOGRAPHY ROOM LAB RULES

1. **Always practice Safety First!**
2. **Students are not to irradiate each other or any non-student in the energized lab. Failure to follow this rule is grounds for immediate termination from the program.**
3. **Students shall not hold image receptors during energized exposures.**
4. Radiation monitors **must** be worn during energized lab exercises.
5. Students are required to stand behind a lead barrier wall when making exposures on phantoms.
6. Students must have **direct** supervision of a Radiography Program faculty member when making exposures on phantoms.
7. Keep the lab door closed during radiographic exposures.
8. **Concentrate on your performance.** Carelessness or inattention while performing simulations may result in personal injury to others, the person involved, and/or damage to the equipment.
9. Students must not use the lab equipment until they have had proper instruction by the instructor. Students will not be allowed in the laboratory setting without a member of the program faculty present to provide supervision.
10. If for some reason any safety device has been removed, do not use the machine until the said safety device has been properly replaced.
11. The student will not move any electrical equipment or connections. If a connection needs to be replaced or connected, it should be reported to the instructor. Any electrical problems (i.e. frayed wires, poor connections, loose plugs) or equipment damage is to be reported to the instructor immediately.
12. If you see danger, report it at once to your instructor immediately.
13. Keep the floor clear and clean at all times.
14. Report any injury to your instructor immediately, no matter how small.
15. Be familiar with the location of fire extinguishers.
16. Smoking, eating, or drinking is not allowed in the lab.
17. **No children are allowed in the lab area at any time**. No non-LTC students or employees are allowed in the lab unless approved by the Radiography Program faculty or administration.

Lab Management Plan - Continued

18. Students will adhere to clinical dress code when working in the lab.
19. Students are allowed in lab sessions only during the designated lab time he/she is assigned. Lab groups will contain no more than 14 students.
20. Students may be given opportunities to practice on days outside of their normal scheduled lab session times. Students will coordinate this with program faculty. At no time will any student(s) be allowed to practice in the lab setting without a member of the program faculty there to supervise.
21. **No electronics of any kind are permitted in the lab area.** This includes cell phones*, laptops, tablets, and recording devices.
22. Return all equipment to its proper storage place
23. Turn off all machines after use.

Please note: An instructor is on duty in the program during all hours in which classes and labs are scheduled. The labs are locked at times when no instructor is on duty. Students are instructed by Health and Safety Instructions to contact an instructor if an unsafe situation occurs. Appropriate conduct is required.

***CELL PHONES**

In order to maintain an environment conducive to learning, cell phones must be turned off while in the lab. Personal phone calls, emails, and/or messaging are prohibited (both incoming and outgoing) while in the lab. Cell phones must be stored in a place away from regular lab activities. Points may be deducted from grades and/or disciplinary action may be taken if cell phone use violates the telephone policy. Taking photos, audio and/or video recordings in the lab is prohibited.

Great Careers Begin Here

Lab Management Plan Acknowledgement

I, _____ have received and read the "Lab Management Plan". The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____

Student Name (Please Print)

_____

Student Signature

_____

Date

Great Careers Begin Here

Student Grievance and Appeal Procedure

PURPOSE:
This policy describes and explains the correct sequence of steps a student must follow when filing an appeal or submitting a grievance.

PROCEDURE:

1. GENERAL STATEMENT:

A. Respect for each individual's rights is always a matter of concern when student dissatisfactions/disagreements occur. Lanier Technical College Radiologic Technology Program policy ensures that each student shall be treated fairly and the school faculty and school administration are responsible for ensuring that each student receives just and equitable consideration in all matters.
B. It is recognized that misunderstandings or errors in judgment can occur in regard to assignments, evaluations, disciplinary measures and grading. As a result, this policy has been established so that a student, without the fear of penalty, may request a formal review of dissatisfactions with the faculty or any other member of the staff when necessary.

2. GRIEVANCE PROCEDURE:

A. Before a grievance can be resolved, it must be expressed. A student who feels he/she has a grievance should present the grievance in writing as soon as possible as excessive delay may make it impossible to solve the problem. The following steps should be taken until the grievance is resolved:
    a. A student who has a grievance should discuss the problem with the Program Director or Clinical Coordinator so that they may deal with any misunderstanding. The Director or Clinical Coordinator will then render a decision on the matter. If a satisfactory resolution is not obtained, the student should proceed to the next step in the process.
    b. If the student is not satisfied with the decision of the Lanier Technical College Radiologic Technology Program faculty, the student should submit a request in writing to the Program Director to have the grievance heard by the Program's Appeals Committee. The committee shall be composed as follows:

Dean of Allied Health	Dr. Deanne Collins
Program Director	Mrs. Erika Bongart
Clinical Coordinator	Ms. Laura Hirshberg

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Student Grievance and Appeal Procedure - Continued

The student has the right to appear before the Committee in person and may have counsel present. A member of the program faculty may not represent the student at the hearing. If the student desires not to appear in person, the student may submit a written request concerning their grievance to the committee.

B. If the student is not satisfied with the decision of the Appeals Committee, the grievance may be taken to a final appeals arbitrator. Donna Brinson, Vice President of Academic Affairs will serve as advisor and arbitrator.

This Grievance and Appeal Policy is in conjunction with the Lanier Technical College Catalog and Student Handbook.

Dismissed Students: Reinstatement Policy

PURPOSE:
To ensure that previously dismissed students have an opportunity to apply for re-enrollment.

The Student Handbook identifies instances whereby students will be disciplined up to and including program dismissal. Students will be dismissed if they fail to meet the academic, class participation, or clinical standards of the program, or for serious violations relative to improper conduct. *Individuals previously dismissed may choose to re-apply for admission.*

PROCEDURE:

1. Students who have been dismissed have the right to request an appeal hearing by the Dean of Allied Health, as outlined in the Lanier Technical College Student Handbook.

   https://laniertech.smartcatalogiq.com/2023-2024/catalog/academic-regulations/student-suspension-and-dismissal-guidelines/

   https://laniertech.smartcatalogiq.com/2023-2024/catalog/academic-regulations/academic-grades/academic-dismissal/

   https://laniertech.smartcatalogiq.com/2023-2024/catalog/general-code-of-behavior/code-of-conduct/

2. In the event their appeal is denied, the separated individual may not request reinstatement into the program during that same school year.
3. Dismissed students wishing to be considered for enrollment must request consideration for reinstatement, in writing, along with a complete program application for **the following academic year.**
4. A letter requesting reinstatement detailing the reasons the individual should be granted consideration must be sent to the Program Director for the following school year.

LANIER Technical College

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Dismissed Students: Reinstatement Policy - Continued

5. Upon receipt of the letter, the Program Director will schedule a hearing to include the Dean of Allied Health and the program Clinical Coordinator to consider the request at the time new candidates are selected.

6. The Program Director will inform the student in writing of the decision of the hearing.

7. The decision of the hearing will be binding if the dismissed student previously appealed their dismissal to a committee extraneous to the Program in Radiologic Sciences.

8. A previously dismissed student will only be admitted relative to their ranking with new program applicants **if space permits**. **No guarantee for re-admission will be made**.

    a. All previously dismissed students that are cleared to apply as a result of the hearing, will receive -5 points off the competitive admissions score

    b. Students that voluntarily withdrew from the Lanier Technical College Radiologic Technology Program at any point are not subject to the policy above and may re-apply at any point with no point deduction off the competitive admissions score.

Approved by Advisory Board June 2025

LANIER Technical College

Great Careers Begin Here

Communicable Disease Policy

PURPOSE:
The purpose of this policy is to prevent transmission of infections from students to other students, staff, employees, patients or visitors.

1. BLOOD AND BODY FLUID INFECTION CONTROL PRECAUTIONS

The following precautions stated below have been adopted by the Radiologic Technology Program faculty to assist the students to practice safely in the clinical area, and to prevent the transmission of infectious diseases.
It is the responsibility of each student to maintain current knowledge and practice of any revisions in these precautions. It is also the responsibility of each student to immediately report to the preceptor any exposure to blood/body fluids via direct contact or needle stick.
Since medical history and examination cannot identify all clients infected with blood-borne pathogens, blood and body fluid precautions should be consistently used for all clients.

2. BLOOD AND BODY FLUID PRECAUTIONS

Barriers
All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when in contact with blood or other body fluids of any client. Gloves should be worn for touching blood or body fluids, mucous membranes, or non-intact skin of all clients, for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture or other vascular access procedure. Gloves should be changed following each client. Masks, protective eyewear or face shields, and gowns or aprons should be worn during procedures that are likely to generate droplets or splashes of blood or other body fluids.

Disinfection
Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed between clients and immediately after gloves are removed.

Communicable Disease Policy - Continued

Sharps
Precautions should be taken to prevent injuries caused by needles, scalpels, and other sharp instruments during disposal of used needles and when handling sharp instruments after procedures. Needles should not be recapped, purposely bent, or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal.

Resuscitation
Mouthpieces, resuscitation bags, or other ventilation devices should be used when mouth-to-mouth resuscitation is likely to be performed in emergency situations.

Exposure Event
Any student who suspects he/she may have been exposed to or contracted a communicable disease must notify the Program Director and/or the clinical coordinator immediately. In the event a student has been exposed, appropriate action will be taken to ensure the health and well-being of hospital patients, staff, and fellow students. In the event a student is barred from the clinical education center due to a communicable disease, the Program Faculty will work with the student to make up the missed clinical education with a minimum of lost time to the student. Students will review a blood and body fluids video &/or an equitable lecture prior to clinical assignments.

3. Students will maintain required immunizations in an effort to ensure a safe environment for patients related to exposure to these communicable diseases.

4. Students will monitor their own health and refrain from public appearances (clinical and classroom) when he/she might have a disease process manifesting that could be communicated to others through direct or indirect contact including droplet transmission and surface transmission. Students suspecting they have a communicable disease will contact the appropriate program official (instructor, preceptor, CC, or PD) and inform them of their condition in confidence. The student will provide the appropriate medical release form to resume a normal education schedule. The participation policy will not be affected if the proper form is provided.

Great Careers Begin Here

Communicable Disease Policy Acknowledgement

I, _____ have received and read the "Communicable Disease Policy." The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

Great Careers Begin Here

Calculator Policy

PURPOSE:
To define the policy for the use of calculators in class and on examinations.

POLICY:
Calculators may be used during tests, quizzes and examinations. Only simple, non-programmable calculators will be permitted. Cellular telephones and other devices will not be permitted. Programmable calculators are defined as those that allow the user to enter and store additional information.

Storing information in a calculator for use on the examination is grounds for dismissal from the program and school.

Sharing of calculators is not permitted. Calculators should be charged since electrical outlets may not be available. Solar powered calculators may not work in the lighting conditions of the classroom.

LANIER Technical College

Great Careers Begin Here

Jury Duty

PURPOSE:
To define the policy for students summoned for jury duty.

PROCEDURE:

1. Students receiving a summons for Jury Duty or a court appearance must provide the Program Director with appropriate notification **prior** to the date of appearance. The student must produce a copy of the summons to be excused for the time required.
2. A student will be allowed to take a leave for jury duty without having to use personal hours.
3. All class work missed during the length of the jury duty **must** be made-up by the student. Tests, quizzes, and labs may be made-up at the discretion of the instructor, however, only if the integrity of the activity is not compromised. Clinic hours will have to be made-up if jury duty length is excessive.
4. In the event a student wishes to be excused from jury duty, he/she should request a letter of student status be sent by the Program Director to the appropriate court. This may not always get a student relieved of jury duty.
5. Students will not be required to use PLT hours if called for Jury Duty.

Great Careers Begin Here

Work Policy

PURPOSE:
To inform the student of policy concerning employment during enrollment in the Radiologic Technology Program. This guideline is in effect in order to clearly differentiate between a student's employment and their clinical education.

POLICY:
Students that choose to work during the course of the program fall into two categories:

1. Students employed by one of the Clinical Sites:
    a. Students may work as an employee of any clinical site only during hours that do not conflict with the student's clinical assignment and/or class schedule. A student may be employed by any department, including Imaging Services, as long as all work activities are kept completely separate from the educational process.
    b. Students may not be allowed to work for pay through the clinical facility while completing clinical assignments or make-up hours. Violation of this policy is grounds for dismissal from the program.
    c. Students are also advised that they are NOT allowed to receive clinical competencies when they are at the clinical site in an employment capacity. This would not allow for equitable learning opportunities for the students that are not employed. If a student is caught attempting to receive a competency while working at the facility, then the student will receive disciplinary action in accordance to the Code of Conduct, p. 35. In this circumstance, the competency and corresponding participations will be void.
    d. Students may not complete clinical program "make up hours" while employed by a clinical site.
    e. If the student's employment conflicts with the educational process at any time during the student's enrollment, the student will have to make a choice of commitments between employment or continuation in the program. Both will not be possible if any interference occurs between the two.
2. Students employed in a non-healthcare environment:
    a. If the student's employment conflicts with the educational process at any time during the student's enrollment, the student will have to make a choice of commitments between employment or continuation in the program. Both will not be possible if any interference occurs between the two.

Approved by Advisory Board June 2025

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Lanier Technical College Library Resources
(For Radiologic Technology)

Library website: http://www.laniertech.edu/library
Library Reference: 770 533-6969 or by email: mmanglitz@laniertech.edu

Periodicals:
Radiologic Technology Journals
RT Image, Radiology Today, Scanner, Radiologic Technology
Allied Health & Medical Journals:
American Journal of Nursing, Journal of Practical Nursing, JAMA, 24/7Technology & Service Solutions for Biomeds, Managed Care, Medical Lab Observer, Nursing 2008, RN, Nutrition Today, Pharmacy Times,

Quick Facts Reference Materials

Ask the Librarian to suggest reference materials, or browse Reference by call number.

Sample items:

Gray's Anatomy	R QM23.2 .G73 1996
Taber's Cyclopedic Dictionary	R R121 .T18 2005
Stedman's Medical Dictionary for Health Professions	R R121 .S8 2005
The Skeletal System	R QM101 .K44 2004
Kaplan Radiography Exam (w/CD)	R RC78.15 .B66 2007
Lange Q&A Radiography Examination	R RC78.15 .S25 2006
Radiographic Pathology for Technologists	R RC78 .M185 2004
Radiographic Positions & Radiologic Procedures (3 vol.)	R RC78.4 .B35 2003

Some Useful LC Call Numbers:

RC78 Radiography/Radiology	**R** Medicine	**RC** Internal Medicine
QM Human Anatomy	**R123** Medical Terminology	**QP** Physiology
RA Public Health	**RB** Pathology	

Online Article Indexes:

These are available from LTC computers or from outside the library by password. Pick up a password every semester in the Library, or email the librarian to ask for it. **mmanglitz@laniertech.edu**

EBSCO Health Source: Nursing/Academic Edition **-** 500 publications in medicine and allied health; many full-text articles

EBSCO Academic Search Elite **-** Covers 3000 journals, nursing journals & consumer health, including 37 journals on radiology alone

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Lanier Technical College Library Resources - Continued
(For Radiologic Technology)

Lexis-Nexis - 5,000 publications, all full-text. Contains newspaper and medical articles
Medline (EbscoHost)- full-text articles from 100 nursing & medical journals
Proquest Nursing& Allied Health Source - 280 full-text nursing and allied health journals
Credo Reference - includes full text of Black's Medical Dictionary, 41st ed.,

For Scholarly journals, choose "Peer Reviewed" on the search screen

Examples: *Diagnostic Radiology: Focus on MRI, Approach to Pediatric Care in Radiology, The Autopsy, Medical Terminology set, Delmar's Anatomy and Physiology Challenge, Bloodborne Pathogens, Audio Pronunciation Guide, Sterilization for Healthcare Facilities, Confidentiality: HIPAA Today, New Living Body – Bones & Joints, The Human Body: Musculoskeletal System.*

A Few Good Websites

American Registry of Radiologic Technologists	https://www.arrt.org/
American Society of Radiologic Technologists	https://www.asrt.org/
MedLine Plus	https://medlineplus.gov/
Merck Manual of Diagnosis & Therapy	www.merck.com/pubs/mmanual

Books are available for check out online or at the Library. Use your Lanier Tech ID to check out books for two weeks at a time.

E-Books
(Available online through GALILEO)

A few examples:

- Imaging of Occupational and Environmental Disorders of the Chest, 2006
- Imaging of the Hip & Bony Pelvis : Techniques and Applications
- Virtual Colonoscopy : A Practical Guide
- Evidence-based Imaging : Optimizing Imaging in Patient Care

The librarians are available in person, by phone, or email for reference questions. If you are having trouble finding anything, please ask us. We are here to help!
Marci Manglitz
Director of Library Services
Mmanglitz@laniertech.edu 770-533-6968

CLINICAL POLICIES AND PROCEDURES

LANIER Technical College

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THE CLINICAL ENVIRONMENT

There are many differences between the academic environment and the clinical environment. Most of the differences will prove exciting and stimulating; some will prove to be frustrating and aggravating. **How successfully you function and learn in the clinical setting depends in part on how you approach and deal with these differences**.

Patient care is the top priority in any radiology department. This means that the patient's welfare is considered first. Usually, this is consistent with the goals and needs of clinical education. Occasionally, however, this reality dictates that the scheduling and conducting of educational activities be flexible.

Compared to the learning activities conducted on campus in the classroom setting, the learning activities in the clinical setting are frequently much less structured. You must take a more active and responsible role for integrating the academic preparation received with the individual examinations you are observing or performing.

Generally, in the classroom setting, you work independently as you pursue your academic goals. Teamwork and cooperation among the students are not always a necessity in achieving academic goals. In the clinical setting you must pursue your educational goals within the overall goals of the department to deliver quality patient services efficiently and effectively. Rather than function independently, you become part of a health care delivery team and must function cooperatively to achieve educational and departmental goals.

Another difference between the academic environment and that of the clinic has to do with how you interact with your patient. Laboratory settings typically provide students interactions with other students who are already knowledgeable about the exam being simulated and who are experiencing none of the signs and symptoms common to patients in a radiology department. In the clinical situation you must develop the ability to expand your attention so that it includes awareness of the patient as a person as well as the mechanics of producing images of optimum quality.

LANIER Technical College

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Clinical Rotation Assignments

POLICY: In order to ensure that all clinical activities are educationally sound, and to ensure equitable* learning opportunities in accordance with JRCERT accreditation standards, it is the non-negotiable policy of the Radiologic Technology Program to assign student rotations through clinical areas and facilities on a rotating basis.

PROCEDURE: ***Clinical assignments are based on a lottery rotation system that ensures all students have equitable clinical learning opportunities.*** All clinical rotation schedules will be distributed to each student and the clinical preceptor for each facility. Clinical assignments will be distributed prior to the commencement of clinical activities. Clinical rotation assignment schedules will define the start and end dates, facility, and specific areas (when applicable) for each rotation period.

Students are required to rotate through assigned areas only, and are not permitted to be "pulled" to cover staffing shortages. Doing so is a violation of JRCERT accreditation standards. **Students are never to be utilized to supplement paid, technical staff. Students are not permitted to transport patients from the department to the floor or unit without direct supervision. Students may transport within the department under indirect supervision at the decision of the supervising technologist unless prohibited by patient condition. If the student feels uncomfortable transporting, the supervising technologist or clinical preceptor should be promptly notified.**

In the event of decreased workload in the assigned area, a site clinical preceptor or the LTC Clinical Coordinator may reassign the student to another similar area in order to maximize clinical learning experiences. Furthermore, students are not permitted to "visit" in areas other than their assigned area.

Students are **required** to rotate through an equitable distribution of clinical rotations through a variety of settings and affiliates to ensure equitable learning for all students. There are zero (0) exceptions or accommodations to this policy.

A member of the LTC Radiologic Technology Faculty is available at all times students are in the clinical environment.

*Equitable is defined as fair and impartial.

Clinical Rotation Assignments - Continued

The breakdown of **REQUIRED** clinical assignments for each student is as follows:

- Large Hospital
- Medium Hospital
- Small Hospital
- Emergency Department
- Urgent Care or Outpatient Facility
- Orthopedics
- Fluoroscopy
- Operating Room
- Minimum of One (1) Weekend Rotation (Saturday **and** Sunday **and** one weekday)
- Minimum of One (1) Mid-Shift Rotation (typically starting between 9:30am and 11:30am and ending between 6:00pm and 8:00pm, in 8.5 hours increments; the Clinical Coordinator reserves the right to alter times at the request of the clinical affiliate)
- Minimum of One (1) Evening Rotation (typically starting between 12:00pm and 2:30pm and ending between 8:30pm and 11:00pm, in 8.5 hours increments; the Clinical Coordinator reserves the right to alter times at the request of the clinical affiliate)
- Observation only modality rotation in the Fall II semester

The following clinical affiliates (which may contain more than one site) are considered mandatory, and all students are **REQUIRED** to have a minimum of one (1) assigned placement with **each** affiliate:

1. Northeast Georgia Health System (NGHS)
2. Children's Healthcare of Atlanta (CHOA)
3. Northside Hospital System (NSH)
4. Northeast Georgia Physician's Group (NGPG)

The following clinical affiliates are classified as Large Hospitals, and all students are **REQUIRED** to have a minimum of one (1) assigned placement with **one** of the following clinical sites:

1. NGHS Gainesville Medical Center

The following clinical affiliates are classified as Medium Hospitals, and all students are **REQUIRED** to have a minimum of one (1) assigned placement with **one** of the following clinical sites:

1. NGHS Braselton Medical Center
2. Northside Hospital Forsyth

The following clinical affiliates are classified as Small Hospitals, and all students are **REQUIRED** to have a minimum of one (1) assigned placement with **one** of the following clinical sites:

1. NGHS Habersham Medical Center
2. NGHS Lumpkin Medical Center
3. Stephens County Hospital
4. Sacred Heart Medical Center

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Clinical Rotation Assignments - Continued

Procedure:

1. The clinical rotation lottery system will take place during the program's mandatory and interactive face-to-face 2-Day Policies and Procedures Orientation in July.
    a. The Clinical Coordinator will prepare a clinical rotation schedule for the Fall I (2 rotations), Spring (3 rotations), and Summer (2 rotations) semesters that ensures equitable learning opportunities for all students. *Fall II clinical rotation schedule will become available in the Summer semester as the Clinical Coordinator ensures all students achieve the required equitably distributed clinical assignments as detailed above.
    b. Students will draw a number that corresponds to the clinical rotation schedule prepared by the Clinical Coordinator as detailed above.
    c. Students are not permitted to switch drawn numbers or assignments.
2. Prior to the beginning of each academic semester, the Clinical Coordinator will distribute the clinical rotation schedule that includes clinical rotation times.
3. Schedules will be distributed to each student prior to the beginning of the academic semester.
4. Program officials and faculty will ensure distribution of schedules to facility supervisors and clinical preceptors.
5. No changes to the rotation schedule can be made without the permission of the Clinical Coordinator.
6. The Clinical Coordinator reserves the right to make adjustments to the clinical schedule at any time during the four-semester program as long as the equitable and required distribution is applicable to all students.

Approved by Advisory Board June 2025

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Clinical Rotation Assignments Acknowledgement

I, _____ have received and read the "Clinical Rotation Assignments". The Director of the Radiologic Technology Program and/or Faculty has discussed, and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

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Radiologic Technology Program Clinical Affiliates

CHOA, Alpharetta - Ortho
3300 Old Milton Pkwy #310
Alpharetta, GA 30005
404-785-2987
Preceptor(s):
Stuart Sullivan – Stuart.Sullivan@choa.org

Children's Healthcare of Atlanta (CHOA), Duluth
2270 Duluth Hwy #100
Duluth, GA 30097
678-741-3950 or 404-255-1933
Preceptor(s):
Amanda Woolery – Amanda.Woolery@choa.org
Rachel Yarborough – Rachel.Yarborough@choa.org
Leng Vang – Leng.Vang@choa.org

CHOA, Forsyth – Urgent Care
410 Peachtree Pkwy #310
Cumming, GA 30041
404-785-2880
Preceptor(s):
Tyler Holloway – Tyler.Holloway@choa.org

CHOA, Forsyth - Ortho
410 Peachtree Pkwy #310
Cumming, GA 30041
404-785-2880
Preceptor(s):
Amy Tennant – Amy.Tennant@choa.org

Longstreet Clinic MAIN
725 Jesse Jewell Pkwy SE
Gainesville, GA 30501
770-539-9391 ext 4435
Preceptor(s):
Millie Roland Burgess – Millie.Roland@longstreetclinic.com

Longstreet Clinic Demorest
871 Austin Drive
Demorest, GA 30535
770-718-1122
Preceptor(s):
Paige Towe – Paige.Towe@longstreetclinic.com

Longstreet Clinic, Orthopedics Braselton
1270 Friendship Road
Braselton, GA
678-207-4477
Preceptor(s):
Paige Towe – Paige.Towe@longstreetclinic.com

Longstreet Clinic, Orthopedics Gainesville
655 Jesse Jewell Pkwy SE, Suite B
Gainesville, GA 30501
770-718-1122
Preceptor(s):
Paige Towe – Paige.Towe@longstreetclinic.com

Longstreet Clinic, Vein and Vascular
725 Jesse Jewell Pkwy SE
Gainesville, GA 30501
678-207-4013
Preceptor(s):
Tabatha Klimek – Tabitha.Klimek@longstreetclinic.com

NGHS Imaging Center - Braselton
5875 Thompson Mill Rd.
Hoschton, GA 30548
770-848-6047
Preceptor(s):
Emily Bottoms – Emily.Bottoms@nghs.com

NGHS Imaging Center - Dawsonville
108 Prominence Court
Dawsonville, GA 30534
706-344-6940
Preceptor(s):
Cody Goss – Cody.Goss@nghs.com

NGHS Imaging Center - Gainesville
1315 Jesse Jewell Pkwy #100
Gainesville, GA 30501
770-219-8037 or 770-219-8035
Preceptor(s):
Mandi Pentecost – Mandi.Pentecost@nghs.com

NGHS Medical Center, Braselton
1400 River Place
Braselton, GA 30517
770-848-6032
770-848-0777
Preceptor(s):
Missy Lymber (AM) - Melissa.Lymber@nghs.com
Shannan Jones (AM) – Shannan.Jones@nghs.com
Kathy Donnelly (PM) – Kathy.Donnelly@nghs.com
Kay Davis (Weekends) - Kay.Davis@nghs.com

NGHS Medical Center, Habersham
541 Historic Hwy 441 North
Demorest, GA 30535
706-754-3113 Ext. 2310
Preceptor(s):
Jennifer Addison – Jennifer.Addison2@nghs.com
Ashley Owensby – Ashley.Owensby@nghs.com

NGHS Medical Center, Lumpkin
495 US-19
Dahlonega, GA 30533
706-867-4154
Preceptor(s):
Amy Smith (AM LEAD) - Amy.Smith-CT@nghs.com
Ashlyn Markarian (PM) - Ashlyn.Markarian@nghs.com
Kelli Brewer (Weekends) - Kelli.Brewer@nghs.com

NGHS Medical Center, Gainesville
743 Spring St NE
Gainesville, GA 30501
CORE: 770-219-5182
770-219-6032
ED: 770-219-8861
OR: 770-219-1589
Preceptor(s):
Cassie Way (AM Core LEAD) – Cassie.Way@nghs.com
Jonathan Spitzner (AM Core)- Jonathan.Spitzner@nghs.com
Ken Brown (MID Core) - Kenneth.Brown@nghs.com
Jacquelyn Dyer (AM ED) - Jacquelyn.Dyer@nghs.com
Caleigh Cianci (OR) - Caleigh.Cianci@nghs.com
Nallely Mercado (PM Core/ED LEAD) - Nallely.MercadoLopez@nghs.com
Gray Preston (PM ED) - Gray.Preston@nghs.com
Cody Truelove (PM Core) - Cody.Truelove@nghs.com
Jesan Gunawardhana (Weekends LEAD) - Jesan.Gunawardhana@nghs.com
David Graves (Weekends) - David.Graves@nghs.com
Rafael Upchurch (Weekends) - Rafeal.Upchurch@nghs.com

NGPG Sports Medicine and Orthopedic Surgery, Braselton
1400 River Place
Braselton, GA 30517
770-848-3314
Preceptor(s):
Kristin Hunter – Kristin.Hunter@nghs.com
Anna Oney – Anna.Oney@nghs.com

NGPG Sports Medicine and Orthopedic Surgery, Buford
4445 S Lee St Ste 305
Buford, GA 30518
770-219-9990, ext 44173
Preceptor(s): Joel Helms – Joel.Helms@nghs.com

NGPG Sports Medicine and Orthopedic Surgery, Dawsonville
108 Prominence Court #200
Dawsonville, GA 30534
706-344-6940
Preceptor(s):
Charlotte Belanger – Charlotte.Belanger@nghs.com

NGPG Sports Medicine and Orthopedic Surgery, Gainesville
1315 Jesse Jewell Pkwy
Gainesville, GA 30501
770-219-5111
Preceptor(s):
Audra Hemphill – Audra.Hemphill@nghs.com
Keri McCoy – Keri.McCoy@nghs.com
Whitney Simmons – Whitney.Simmons@nghs.com

NGPG Trauma and Reconstructive Orthopedic Surgery, Gainesville
1211 Sherwood Park Ste A
Gainesville, GA 30501
770-219-3202
Preceptor(s):
Kelly Crow – Kelly.Crow@nghs.com
Samantha Cox – Samantha.Cox@nghs.com

NGPG Urgent Care, Buford
4445 S Lee St Ste 210
Buford, GA 30518
770-219-9990, ext 44146
Preceptor(s):
Robyn Ledbetter – Robyn.Ledbetter@nghs.com
Sarah Sullivan – Sarah.Sullivan@nghs.com

NGPG Urgent Care, Dawsonville
108 Prominence Court
Dawsonville, GA 30534
706-344-6940
Preceptor(s):
Dawn Duncan – Dawn.Duncan@nghs.com
Lisa Wycoff – Lisa.Wycoff@nghs.com

NGPG Urgent Care, Jefferson
1496 Winder Highway Ste 100
Jefferson, GA 30549
770-219-9990, ext 44288
Preceptor(s):
Sylbia Loredo – Sylbia.Loredo@nghs.com
Delaney Daniel – Delaney.Daniel@nghs.com

NGPG Pulmonology Gainesville
1439 Jesse Jewell Pkwy, Suite 201
Gainesville, GA 30501
770-219-9673
Preceptor(s): TBD

Northside Hospital, Forsyth
1200 Northside Forsyth Drive,
Cumming, GA 30041
770-844-3714
Preceptor(s):
Vi Nguyen (AM LEAD) - Vi.Nguyen@northside.com
Thu Tran (AM) - Thu.Tran@northside.com
Francis Frimprong (PM LEAD) - Francis.Frimprong@northside.com
Greg Fyfe (Outpatient LEAD) – gregory.fyfe@northside.com or gregfyfe@bellsouth.net

Northeast Georgia Diagnostic Clinic, Gainesville
1240 Jesse Jewell Pkwy SE, Ste 500
Gainesville, GA 30501
678-450-7850
Preceptor(s):
Stephanie Ayers – Stephanie.Ayers@ngdc.com
Carolyn Brown – Carolyn.Brown@ngdc.com
Jessica Glasco – Jessica.Glasco@ngdc.com

Sacred Heart Hospital
367 Clear Creek Pkwy
Lavonia, GA 30553
706-356-7800
Preceptor(s):
TBD

Stephens County Hospital
163 Falls Road
Toccoa, GA 30577
706-282-4271
Preceptor(s):
Lacey Kelley –
Lacey.Kelley@stephenscountyhospital.com
Carrie Davis –
Carrie.Davis@stephenscountyhospital.com
Billy Puckett –
William.puckett@stephenscountyhospital.com

LANIER Technical College

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Mandatory Criminal Background Check and Drug Testing

POLICY: In order to provide competent health care workers and be in compliance with clinical agency contracts, each student will be required to submit to drug screening as well as a criminal background check once being admitted into the Radiography Program. Costs associated with these screenings will be paid for by the student. The Radiography Program and the various clinical facilities associated with the program may also conduct random drug screenings.

PROCEDURE: The clinical rotation sites are not owned by the college but are affiliated with the college and the radiologic technology program. Each clinical site has set protocols, drug tests, background checks, grade requirements, immunizations and orientations students must meet to be allowed on their campuses.

Students are **required** to pass a criminal background check and drug test before they can start clinical rotations. The college will only accept this information through InfoMart's Advantage Students, as InfoMart's Advantage Students is the system that our clinical sites require.

These healthcare systems have an ethical and legal responsibility to ensure the students working with their patients are not a liability to the patient and the healthcare institution. Therefore, clinical rotation sites may refuse to have a student rotate through their site if the student does not meet the above-mentioned criteria. The college has no control as to whether a student is accepted or rejected by the clinical rotation sites. If a student is not accepted at the clinical rotation site*, they will not be able to continue with the radiologic technology program. Students must adhere to all drug testing and background check requirements as mandated by the institution and affiliated clinical sites. Random drug testing may be conducted at any time during the program, and a failed test may result in immediate removal from the clinical site. Similarly, if a new incident arises after the initial background check that causes the clinical site to deem the student a potential risk to patient safety, the site may refuse to allow the student to continue their placement. Clinical rotations are an essential component of the curriculum. Inability to participate in these rotations due to failed drug tests or background check issues are grounds for dismissal from the program.

POSITIVE DRUG SCREENS

It is unacceptable for students to have illegal drugs in their system, to be under the influence of alcohol, or to have levels of legal drugs which are not disclosed and/or for which no prescription can be produced. **Positive findings on a drug screen or refusal to submit to a requested drug screen in the parameters set forth by the program, will prevent the student from being placed in the clinical education setting. Therefore, the student will not be able to complete the program.**

POSITIVE CRIMINAL BACKGROUND CHECKS

If a student has been convicted of a misdemeanor or felony (excluding misdemeanor speeding convictions, unless they are related to alcohol or drug use) they are **required** to report this to the American Registry of Radiologic Technologists, which is the Radiography certifying agency. The ARRT may decide to take action in the denial of the student's application for certification. (See www.arrt.org for the Pre-Application Review of Eligibility for Certification, Student Handbook p. 32). Students **MUST** report potential ethic violations to the ARRT within the parameters set by program faculty; if not, students will be dismissed from the program. The student may also be prohibited from attending the required clinical rotations due to a positive background check, which would prevent the student from completing the Radiography program.

*Students are **required** to rotate through an equitable distribution of clinical rotations through a variety of settings and affiliates to ensure equitable learning for all students. There are zero (0) exceptions. See Clinical Rotation Assignments Policy, p. 68 for details.

Students who are found to be not in compliance with the criminal background check or drug testing at any of the mandatory clinical affiliate site(s), will not be permitted to continue in the Radiologic Technology Program and will be dismissed immediately.

LANIER Technical College

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Requirements for Student Clinicals

Immunizations:
The college does not require vaccinations as a criterion for admission and enrollment of students; however, immunizations are required for college health programs by our clinical partners. Students may not complete clinical rotations without meeting clinical site immunization requirements. All required vaccinations must be complete prior to starting clinical practice. Students completing internships or practicums in other majors must adhere to all job site vaccination guidelines. Clinical and job site requirements can and do change without notice or input from the college.

All students must have these immunizations prior to beginning clinical rotations.

1. Hepatitis B – 3 dose series; Waiver accepted at all sites. Waiver form located on Trajecsys.
2. TB (Tuberculosis) - Blood test (QuantiFERON Gold). Renewal every 2 years
3. TDaP (Tetanus, Diptheria, acelluar Pertussis) – Renewal every 10 years
4. Evidence of MMR immunity - 2 doses required or Positive Titer
5. Chicken Pox (Varicella Zoster) - 2 doses required or Positive Titer
6. COVID-19 – 1 or 2 doses required; Religious or Medical Exemption accepted at all sites. Exemption form located on Trajecsys.
7. Influenza – During Flu season (October-March); Religious or Medical Exemption accepted at some sites – Renewal every year. Exemption form located on Trajecsys.

Disclaimer: Please note that there may be additional vaccination requirements for each clinical site which will be made evident through ACEMAPP or SYMPLR.

Additional Requirements:

1. Orientation (NGHS & NSH-ACEMAPP modules)
2. CHOA and LSC Immunizations and Orientations
3. Picture ID from school (must be current)
4. Uniform is to include school logo (Jacket must have school logo)
5. Criminal Background Check (Advantage)
6. Drug Test (Advantage)
7. CPR Card – must be from the American Heart Association and be BLS Provider

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Requirements for Student Clinicals Acknowledgement

I, _____ have received and read the "Requirements for Student Clinicals." The Director of the Radiologic Technology Program and/or Faculty has discussed and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding as to the seriousness and severity of these violations as well as the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand that I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

LANIER Technical College

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Accident Liability Insurance for Students

POLICY: All students must have current Accident Liability Insurance when attending clinical assignments. This is provided by the college from student fees.

PROCEDURE: Students will have access to the current Accident Liability Insurance coverage policy via the link provided here: 2025-2026 Accident Liability Insurance Student
The current year's MOI (below) will also be available on Trajecsys for student access at any point.

Client # 652449

MEMORANDUM OF INSURANCE — Date Issued: June 16, 2025

Producer

AMBA
P.O. Box 14554
Des Moines, IA 50306
www.proliability.com

This memorandum is issued as a matter of information only and confers no rights upon the holder. This memorandum does not amend, extend or alter the coverages afforded by the Certificate listed below.

Company Affording Coverage
Liberty Insurance Underwriters, Inc.

Insured
The Students of Lanier Technical College
Student Affairs
2535 Lanier Tech Drive
Gainesville, GA 30507

This is to certify that the Certificate listed below has been issued to the insured named above for the policy period indicated, not withstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may be issued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions of such Certificate. The limits shown may have been reduced by paid claims.

Type of Insurance	Certificate Number	Effective Date	Expiration Date	Limits	
Professional Liability	AHV-102812014	08/13/2025	08/13/2026	Per Occurrence Aggregate	$2,000,000 $4,000,000
General Liability				Per Occurrence Aggregate	

Evidence of Insurance
Faculty is only covered while instructing the students. The school is named as an additional insured.

Memorandum Holder:

The Students of Lanier Technical College
Student Affairs
2535 Lanier Tech Drive
Gainesville, GA 30507

Should the above described Certificate be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Authorized Representative
Stephen Miller

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Family Educational Rights & Privacy Act (FERPA) of 1974

The Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, affords students certain rights with respect to their education records. Among them are:

"The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent."

Clinical site rotations may request copies of the following documents as a condition of continued clinical rotation assignments:

- Student information form
- Student orientation checklist
- Documentation of current CPR
- Documentation of TDAP vaccination
- Documentation of MMR vaccine
- Documentation of negative TB screen
- Documentation of Hepatitis B vaccination or signed waiver
- Documentation of current liability insurance coverage (will be supplied by LTC)
- Documentation of current drug screen/background check

By signing below, I acknowledge receipt of this notice and consent to the above information being released to any or all the clinical rotation sites in agreement with Lanier Technical College Radiologic Technology Program.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

Clinical Time Keeping Policy

PURPOSE:
To define the policy for clocking in and out at the clinical sites.

POLICY:
Time management is a critical skill you must master in the radiologic technology program. As part of time management, clocking in and out properly is crucial to your success as a professional.
The Clinical Time Keeping Policy is as follows:

1. Students must use the assigned reporting system to clock in and out at www.Trajecsys.com.
2. Students **must** enable the GPS location function on whichever web browser they use to log into Trajecsys.
3. The process for clocking into a clinical site is as follows:
    a. Students will be given a ten (10) minute window **BEFORE** their scheduled shift start time to clock into their assigned location using the Trajecsys reporting system.
        i. Ex. If start time is 8:00 am, you may clock in between 7:50 am and 8:00 am.
    b. Students **MUST ONLY** clock into the radiology department at the clinical site within the Geofence locator provided through Trajecsys.
4. The process for clocking out for lunch is as follows:
    a. Students **MUST** take a 30-minute lunch a minimum of two (2) hours after their scheduled clinical start time and a minimum of two (2) hours before their scheduled clinical end time.
        i. Ex. Student's clinical schedule is 8:00 am until 4:30 pm. This student may take lunch between the hours of 10:00 am and 2:00 pm.
    b. Students **MUST ONLY** clock out in the radiology department at the clinical site within the Geofence locator provided through Trajecsys.
5. The process for clocking in from lunch is as follows:
    a. Students M**UST** take a 30-minute lunch a minimum of two (2) hours after their scheduled clinical start time and a minimum of two (2) hours before their scheduled clinical end time.
        i. Ex. Student's clinical schedule is 8:00 am until 4:30 pm. This student may return from lunch between the hours of 10:30 am and 2:30 pm.
    b. Students **MUST ONLY** clock into the radiology department at the clinical site within the Geofence locator provided through Trajecsys
    c. Students have a five (5) minute window **AFTER** their 30-minute lunch break to clock in.
        i. Ex. Student has clocked out for lunch at 11:53 am. Student should clock back in between 12:23 pm and 12:28 pm.

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Clinical Time Keeping Policy - Continued

6. The process for clocking out from a clinical site is as follows:
    a. Students will be given a ten (10) minute window **AFTER** their scheduled shift end time to clock out in their assigned location using the Trajecsys reporting system.
        i. Ex. If your end time is 4:30 pm, you may clock out between 4:30 pm and 4:40 pm.
    b. Students **MUST ONLY** clock out in the radiology department at the clinical site within the Geofence locator provided through Trajecsys.
    c. In circumstances where a student has remained at a clinical site after their scheduled end time and including the additional 10-minute window, the student **MUST** email the LTC Clinical Faculty on the date of the occurrence explaining the circumstances.
        i. Ex. Student was with a patient and stayed to complete an exam.
7. Any improper clock in, clock out for lunch, clock in from lunch, or clock out will be considered an instance of non-participation and will fall subject to the overall course grade deduction as outlined in the Participation Plan (see Student Handbook, p. 41)
    a. Improper clock in, clock out for lunch, clock in from lunch, or clock out is defined as:
        i. Clocking in/out outside the parameters as listed above.
            1. Clocking in even one (1) minute past an assigned start time will be considered late and as such will result in points deducted as outlined in the Participation Policy (p. 41)
        ii. GPS location is not turned on
        iii. Clocking in/out at the incorrect clinical site
8. Students will be allotted one (1) time error without penalty once per semester.

Approved by Advisory Committee, October 2023

LANIER Technical College

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Clinical Probation

POLICY:
To describe the circumstances in which a student receives an incomplete grade and the requirements for appropriate resolution.

PROCEDURE:
An incomplete grade is given when a student fails to complete the required number of clinical hours or course diagnostic competencies within the semester. Any student earning a grade of incomplete (I) for a clinical grade shall be placed on Clinical Probation. In such circumstances, the student will be granted until mid-term of the following semester to complete the previous semester's requirements **in addition** to the current semester's requirements. The incomplete grade must be converted to a grade before mid-term of the following semester or the grade will be converted to an "F". Once the requirements are completed and verified, the student's grade is calculated according to the percentage of the student's completed work and the required completed work needed for that semester. (i.e. if the student only obtained seven (7) clinical diagnostic competencies by the end of the semester and the requirement for the course was ten (10), then the grade for that category is 70. **If a student receives an incomplete grade due to missing clinical hours, the student's final grade for that semester will automatically be reduced by ten (10) points.**

Students are only allowed one incomplete grade during the entire four (4) semester program. Regardless of the situation, any additional incomplete grades will result in dismissal from the program.

Revised: August 2017

LANIER Technical College

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Clinical Competencies and Simulation Requirements

PURPOSE:
To define the requirements for graduation from the Radiologic Technology Program regarding completion of competencies and simulations.

POLICY:

1. Students are required to complete a total of sixty-one (61) competencies in order to graduate.
    1. Fifty-one (51) competencies are clinical radiographic competencies
    2. Ten (10) competencies are patient care related competencies
2. Students are required to complete a minimum of two (2) successful Venipuncture Competencies each semester of the program that are to be performed on live patients; a minimum total of eight (8) venipuncture competencies are required for each student. This will occur once the venipuncture skill has been demonstrated in RADT 1010 Fall Semester, Term One, where students have an opportunity to practice venipuncture on simulated arms. Students are not permitted to practice venipuncture on each other.
3. At the completion of the student's final term, he or she may only simulate one (1) mandatory exam and one (1) elective exam.
    1. Students may **NOT** simulate:
        1. Fluoroscopy Exams
        2. Pediatric Exams
        3. Mobile Exams
        4. Surgery Exams
        5. Any special situation exam (i.e. trauma, wheelchair, stretcher, etc.)
4. Students must have successfully completed two (2) participation exams of the intended simulated exam. Undocumented completion of a participation form of the intended simulation requires the student to return to clinic until all required participations of the exam are completed and documented.
5. Any student lacking the required number of competencies (NOT simulations) must return to clinic to achieve the competencies.
6. Any student exceeding the maximum number of allowed simulations must return to clinic until such a time that the student satisfies the necessary requirements necessary to simulate the remaining competencies.

FALL - TERM ONE	
NUMBER OF CLINICAL RADIOGRAPHIC COMPETENCIES COMPLETED	
< 2 comps	65%
2 comps	70%
3 comps	75%
4 comps	80%
5-7 comps	85%
8-11 comps	90%
12-15 comps	95%
16+ comps	100%

SPRING - TERM TWO	
NUMBER OF CLINICAL RADIOGRAPHIC COMPETENCIES COMPLETED	
16 or less	65%
17-20	70%
21-25	75%
26	80%
27-34	85%
31-40	90%
41-45	95%
46+	100%

SUMMER - TERM THREE	
NUMBER OF CLINICAL RADIOGRAPHIC COMPETENCIES COMPLETED	
25 or less	65%
26-29	70%
30-34	75%
35	80%
36-39	85%
40-45	90%
46-50	95%
51	100%

FALL - TERM FOUR	
NUMBER OF CLINICAL RADIOGRAPHIC COMPETENCIES COMPLETED	
48 or less comps, missing two or more of the following: all continued comps, Clinical Skills/patient care comps; this includes a minimum total of eight (8) venipuncture competencies (2 per semester) by last day of clinical rotations.	65%
48 or less comps, missing one of the following: all continued comps, Clinical Skills/patient care comps, this includes a minimum total of eight (8) venipuncture competencies (2 per semester) by last day of clinical rotations.	70%
49 comps, all continued comps, Clinical Skills/patient care comps, & Venipuncture; 2 Simulated Comps OR 51 comps, but missing two or more of the following: all continued comps, Clinical Skills/patient care comps; this includes a minimum total of eight (8) venipuncture competencies (2 per semester) by last day of clinical rotations.	80%
50 comps, all continued comps, Clinical Skills/patient care comps, & Venipuncture; 1 Simulated Comp OR 51 comps, but missing one of the following: all continued comps, Clinical Skills/patient care comps; this includes a minimum total of eight (8) venipuncture competencies (2 per semester) by last day of clinical rotations.	90%
51 comps, all continued comps, Clinical Skills/patient care comps; this includes a minimum total of eight (8) venipuncture competencies (2 per semester) by last day of clinical rotations.	100%

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Radiologic Technology Program
MRI Safety Policy

MAGNETIC RESONANCE IMAGING (MRI) AND FERROMAGNETIC SAFETY POLICY

Students are advised that although the majority of their observation and clinical experience will be in general diagnostic radiology, you may be provided with the opportunity to observe, tour, or complete a special rotation in the Magnetic Resonance Imaging (MRI) area. In order to ensure student safety, and the safety of others in the department, it is important that students respect the following rules at all times while in the MRI environment:

1. Each facility's MRI clinical and safety policies and screening requirements must be followed and/or completed
2. Do not enter the MRI suite unless cleared and accompanied by an MRI technologist
3. Assume the magnet is always ON
4. Carrying ferromagnetic items or equipment into the MRI suite is strictly prohibited because these items can become projectiles, causing serious injury or death and/or equipment failure these items include, but are not limited to, most metallic items such as: oxygen tanks, wheelchairs, carts, monitors, IV poles, laundry hampers, tools, and furniture. MRI-compliant medical equipment is available for use in the MRI department; do not borrow or use this equipment for general use in other areas of the medical imaging department.
5. Personal ferromagnetic items must be removed prior to entering the MRI room. These include the following:
    - Purse, wallet, money clip, credit cards or other cards with magnetic strips, electronic devices such as beepers or cell phones, hearing aids, metallic jewelry (including all piercings) and watches, pens, paper clips, keys, nail clippers, coins, pocket knives, hair barrettes, hairpins, shoes, belt buckles, safety pins, and any article of clothing that has a metallic zipper, buttons, snaps, hooks, or under-wires
6. If applicable, disclose or ask about all known indwelling metallic device(s) or fragment(s) to the supervising technologist or program faculty prior to entering an MRI scan room to prevent internal injury as described below.
7. In addition to the personal items listed, **students are advised that any metallic implants, bullets, shrapnel, or similar metallic fragments in the body pose a potential health risk in the MRI suite** because they could change position in response to the magnetic field, possibly causing injury. In addition, the magnetic field of the scanner can damage an external hearing aid or cause a heart pacemaker to malfunction.
    - **Examples of items that may create a health hazard or other problems in the MRI examination room include:** • Cardiac pacemaker, wires, heart valve(s) or implanted cardioverter defibrillator (ICD) • Neurostimulator system • Aneurysm clip(s) • Metallic implant(s) or prostheses •

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Radiologic Technology Program
MRI Safety Policy - Continued

Implanted drug infusion device • History of welding, grinding or metal injuries of or near the eye • Shrapnel, bullet(s), BB's, or pellets • Permanent cosmetics or tattoos (if being scanned) • Dentures/teeth with magnetic keepers • Eye, ear/cochlear, or other implants • Medication patches that contain metal foil (i.e., transdermal patch)

8. Items that are allowable in the MRI suite, and that generally do not pose a hazard to the student or other persons include:

- Intrauterine devices (IUD's)
- Gastric bypass devices (lap bands)
- Most cerebrospinal fluid (CSF) shunts.

9. The presence of in-dwelling or external ferromagnetic devices or objects does not disqualify a student from entering the radiography program. However, accepted students will be required to complete an MRI Safety Clearance Form as part of the pre-entrance physical to verify that it is either: 1) Safe for them to enter the scan room's magnetic field, or 2) Ensure that a radiography student with any indwelling or external ferromagnetic devices or objects is not inadvertently placed at risk during their clinical rotations while in the program.

For more information regarding MRI Safety, please refer to the American College of Radiology's MR Safety Guidelines available at: https://www.acr.org/Clinical-Resources/Radiology-Safety/MR-Safety

The current MRI Screening Form (JRCERT Approved) used by the Lanier Technical College Radiologic Technology Program can be found via the link below:

JRCERT Approved MRI Screening Form

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Progressive and Terminal Competency Exams

The purpose of these exams is to reinforce what the student has already learned in the laboratory and classroom. Progressive Competencies are held in the student's second (2nd) and third (3rd) clinical semesters and terminal competencies are held in the student's fourth (4th) clinical semester. These tests also ensure that the student continues to progress to a deeper understanding of each position as they move along in the clinical portion of the program. The exam will consist of an ordered procedure at the clinical site*. Points will be deducted if the student makes errors during the test. Each grading criteria on the electronic grading sheet in Trajecsys is assigned a specific number of points for grading. Students must pass with an 80% or better.

1. The procedure will be performed in the radiology department on a patient.
2. The examination must be completed within 15 minutes.
3. Anatomy discussion and image analysis relative to the particular examination:
    a. Each examination will necessitate a discussion relative to that examination.
4. In the event that a student does not pass a progressive or terminal competency on the first attempt, a second attempt may be made if the following conditions are met:
    a. Scheduled remediation in areas of weakness causing failure will be performed with the Clinical Coordinator.
    b. The second attempt will be performed with two members of the faculty.

Should you have questions regarding the nature of these instructions, please contact the Clinical Coordinator.

*The test must consist of at least two (2) views. A 1V Portable Chest, 1V KUB, 1V Pelvis, or 2V routine chest x-ray will not be evaluated for progressive or terminal competencies.

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Progressive and Terminal Competency Exam Specifications

1. Required: Bontrager's Handbook of Radiographic Positioning and Techniques 11th Edition
2. **The test is timed**. Each student has 15 minutes to complete the test from start to finish. If not finished in 15 minutes, unfinished items will be deducted from the test score.
3. **Communication skills** score includes the following areas:
    - Calling patient by name, checking ID band, asking DOB
    - Introducing yourself and explaining the radiographic exam as needed
    - Asking females LMP and pregnancy question in private
    - Instructing patient clearly and concisely during radiographic exam
    - Focusing your attention on the patient and the radiographic exam
    - Professional manner during the radiographic exam
    - Talking only as necessary to complete task and maintain cooperative patient relationship
    - Asking patient history

4. **Patient Care skills** score includes the following areas:
    - Clean pillowcase
    - Clean table/wall bucky
    - Washing hands before and after exam
    - Donning gloves & appropriate PPE
    - Patient safety considerations:
        1. Tube out of way so patient doesn't bump head
        2. Not leaving patient standing while getting the tube ready
        3. Using the step stool to assist patient on and off of table
        4. Locking stretchers and wheelchairs
        5. Applying the appropriate lead shielding to the patient for the exam

5. **Positioning skills** score includes the following areas:
    - IR size and placement
    - Identification markers—appropriate side selected, placement/utilized
    - Tube/Bucky alignment and proper distance, central ray direction and angulation, and collimation
    - Patient Positioning

Trajecsys.com (Example of Terminal Competency Requirements - Hand)

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Progressive and Terminal Competency Grading and Re-Test Procedure

Progressive (2nd and 3rd Term) and Terminal Competency Testing (Final Term). Progressive and Terminal Competency exams reinforce what the student learned in the laboratory and classroom. The exams also ensure the student continues to progress to a deeper understanding of each position and projection as he/she continues through the clinical portion of the program. Each exam will consist of an ordered procedure at the clinical site administered by the LTC Clinical Faculty. The student must complete the first order printed at the clinical site once the LTC Clinical Faculty arrives. Subsequent examinations may be permitted for progression testing in the event the student has not yet proven competence on the examination initially ordered, if the examination ordered is a two-view chest x-ray, or if the x-ray is fewer than two views. Points will be deducted for errors during the test. Each criterion on the grading sheet is assigned a specific number of points.

Failure of a Progressive or Terminal Competency will occur if the student fails to: obtain two (2) patient identifiers (i.e. full name & date of birth AND check wristband), appropriately practice proper shielding, employ correct anatomic marker placement, manually set technique, or if the LTC Clinical Faculty stops the exam and is required to step in to complete the exam; failure of a Progressive or Terminal Competency exam will result in a recorded grade of zero (0) in the gradebook. Students will be allotted one (1) opportunity per exam to correct and repeat one (1) projection/image that does not meet the image quality standards in positioning, anatomy demonstration, or exposure factors (kVp, mA, or time) with five (5) points off the grade for the Progressive Competency or ten (10) points off the grade for the Terminal Competency. If a student repeats more than one (1) projection/image during the Progressive or Terminal Competency, it will result in failure of the Progressive or Terminal Competency and a recorded grade of zero (0) in the gradebook. **Students must pass with an 80% or better;** students that do not earn a minimum grade of an 80% will result in a recorded grade of zero (0) in the gradebook. Students failing to pass with an 80% or better will require remediation at the discretion of the LTC Clinical Faculty. Remediation will include a scheduled LTC Clinical Faculty Assessment and competency exam review along with *revocation of the respective exam competency, exam participations, and a Progressive or Terminal Re-Test*. The final grade for these criteria will be derived by an average of the failed test and the re-test. The Progressive or Terminal Re-Test will be administered with two (2) LTC Clinical Faculty members present (i.e. Clinical Coordinator and Clinical Lab Assistant). For the Progressive or Terminal Re-Test, the student must complete the first order printed at the clinical site once the LTC Clinical Faculty arrives. Students must pass the Progressive or Terminal Re-Test with an 80% or better.

Failure to meet the standards of the Progressive or Terminal Competency Re-Test will result in failure of the Progressive or Terminal Competency Re-Test and will result in a recorded grade of zero (0) in the gradebook. Students will be allotted 2 Progressive or Terminal Competency attempts and both attempts will be averaged together for a final Progressive or Terminal Competency Exam grade (i.e. if both [2] attempts are failed, the grade will be recorded as a zero [0]).

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Radiation Protection and Safety - Students

POLICY:
To determine the policy relating to radiation protection and safety of students during clinical rotations.

PROCEDURE:

Lead Apron: All students must wear an approved lead or equivalent apron while in the fluoroscopic room, during special procedures, in OR procedures, and while on portable examinations. Lead aprons are to be tied or otherwise secured while worn. Lead aprons are to be returned to the hanging position when not in use.

Thyroid Shield: Thyroid shields are available for student use but are not mandatory. It is recommended that lead or lead equivalent thyroid shields should be worn whenever in the fluoroscopic rooms, special procedures, or in the OR.

Students shall not hold patients during examinations. Students shall not hold image receptors during examinations.

When not assisting in a procedure, the student should remain behind the protective lead barrier or outside the room.

Dosimetry badges must be worn at all times during all clinical rotations. Failure to wear a dosimetry badge will result in the student being dismissed from clinic *(see Participation Plan, p. 41)* until the time he or she returns with the furnished dosimetry badge. Badges are to be worn in accordance with the policies and procedures of Imaging Services. Badges are changed monthly. A student who fails to return a monthly badge will be placed on probation. If a student fails to return a second badge, the student will be suspended. Upon failure to return a third badge, the student will be dismissed from the program. Disciplinary action will be taken on students who fail to wear lead aprons appropriately, consistently hold patients for examinations, or fail to return dosimetry badges.

In the event a dosimeter is lost or damaged, it is the responsibility of the student to replace the dosimeter. The Clinical Coordinator must be notified of such an event **immediately**.

It is strictly against clinical site and school policy for students to irradiate each other or a "non-patient" for any purpose including obtaining a clinical competency. Failure to adhere to this policy is grounds for immediate dismissal from the program.

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Radiation Monitoring Dosimetry Badge

POLICY:
The purpose of the policy is to identify general rules for radiation monitoring.

PROCEDURE:

1. The students pay for dosimetry badges from their student fees. Dosimetry badges are to be worn by all students working in areas where ionizing radiation is in use, in accordance with the judgment of the Radiation Safety Officer. Lost or damaged dosimeters are to be reported immediately. Additional radiation dosimeters will be purchased at the expense of the student.

2. A student's dosimetry badge will be processed immediately when it is suspected that he/she might have received a single exposure greater than 1 mSv (100 mRem) or an accumulated exposure greater than 3 mSv (300 mRem) in one week.

3. At no time will a dosimetry badge be exposed to radiation unless worn by the individual to whom it is issued. An infraction of this rule will result in immediate dismissal from the program.

4. Collection and distribution of the dosimetry badges for routine processing will be the responsibility of the Clinical Coordinator. However, it is the responsibility of the student to ensure the badge is returned to the Clinical Coordinator.

5. Pregnant students are urged to declare their pregnancy to the Program Director and Clinical Coordinator so measures may be taken to reduce the student's exposure during the pregnancy to fewer than 5 mSv (500 mRems).

6. In the event the dosimeter is lost or laundered, it must be replaced at the expense of the student.

7. Students are to wear dosimeters during all clinical rotations and lab assignments.

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Radiation Monitoring Dosimetry Badge - Continued

8. The estimate of radiation exposure made from the monitoring devices will only be correct if these rules regarding the wearing of the badges are observed:
    a. The badge shall be worn at all times while working at the hospital or assigned clinical rotations.
    b. The badge shall be worn at all times while in the energized laboratory.
    c. Badge is worn at the collar level outside the lead apron. (Current badges indicate body placement on the back of the badge.)
    d. Never wear a dosimetry badge issued to another person.
    e. Care of the dosimetry badge is the student's responsibility.

9. Badges must be turned in to the Clinical Coordinator at the end of the monitoring period. Lost or late badges will result in disciplinary action.
    a. Do not tamper with the dosimetry badge.
    b. Report loss of badge immediately to the Clinical Coordinator.
    c. Report any other incident relative to the wearing of the dosimetry badge (such as possible accidental exposure when badge is not worn) to the Clinical Coordinator.
    d. The Lanier Technical College dosimetry badge is not to be worn while on duty at another facility.

10. It is the responsibility of the Clinical Coordinator and the Program Director to see that the above rules are observed.
    a. Flagrant violations of this policy will result in disciplinary actions and possible dismissal from the program.

11. A fetal radiation dosimetry badge will be provided to the pregnant student in addition to the student's whole-body badge upon request by the student. The fetal dosimetry badge will be worn for the duration of the pregnancy. **This badge is to be worn under the lead apron on the abdomen.**

Radiation Monitors: Radiation monitoring dosimeters will be worn at all times during clinical rotations/assignments. Students must initial radiation reports each month. All radiation dosimetry reports are contained in the binder in the clinical coordinator's office. **Students may not participate in laboratory or clinical assignments without a radiation monitor.** In the event a dosimeter is lost or damaged, the student must report the loss or damage to the clinical coordinator and pay for a replacement. Points will be deducted from the student's final clinical grade for each day the student is unable to participate in clinical assignments in accordance with the Participation Plan (p. 41)

Radiologic Technology Program
Radiation Protection Policy and Procedure (Threshold Dose)

Policy:
The purpose of this policy is to identify the criteria for the student Threshold Dose.

Procedure: Any dose above .2 mSv (20 mrem per month) will result in a discussion with the student and possibly with the preceptor; student will also complete a Radiation Exposure Counseling Record form and assignment.

DOSIMETRY PROGRAM

Radiation Exposure Records:
Student/Faculty radiation exposure will be monitored during the entirety of the program and will be maintained by the program as part of the students' permanent file. These reports are stored indefinitely in the Program Dosimetry Report binder which is kept in the office of the clinical coordinator. The clinical coordinator reviews the reports each month. Infractions are dealt with in accordance with *Radiation Monitoring Devices* below. This program does not accept students under the age of eighteen (18).

Student and Staff Radiation Monitoring Devices:
Students and Faculty are equipment with Monthly Dosimeters

To assure compliance:

Students SHALL NOT:

- hold patients under any circumstances
- hold image receptors during examinations.
- use fluoroscopy to position patients
- allow their body to be in the path of primary beam

Students will:

- Take the extra time to ensure they are properly protected under all circumstances (portable, fluoroscopy, etc.)
- Practice ALARA time, distance and shielding concepts
- Always wear dosimeter at neck level and **OUTSIDE** the apron
- Not allow the body to be in the primary beam
- Take proper precautions with dosimeters; do not leave it in the radiation area

Radiologic Technology Program
Radiation Protection Policy and Procedure (Threshold Dose) - Continued

- Report lost or damaged dosimeters to the instructor of record immediately
- Report to the program director about any event involving byproduct, source, or special nuclear material used by the student that may have caused or threatens to cause any excess exposure to student, staff or the public.

Program Staff will:

- Order, cancel, and monitor dosimeter reports.
- Require students to review each monthly report and initial by their name indicating they have viewed their results. Review each student's report in order to determine the student did not exceed .2 mSv (20 mrem) during that previous month
- Counsel students should badges exceed allowable amount of .2 mSv (20 mrem) within one (1) week of badge report review and utilize a Radiation Exposure Counseling Record form and remediation assignment form; both to be kept in the student's clinical file
- Complete a remediation plan should the reading continue to be high after the discussion and require discussion with the site preceptor.
- Maintain Dosimetry Audit Reports
- Report all infractions (variances) to the program director.

Created April 2017
Revised June 2025

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Radiation Exposure Counseling Record

(To be completed by any student receiving an assigned dose of **.2 mSv** (**20 mrem)** or more in **1 month**)

Student Name: _____ Date: _____
Month of Exposure: _____
Reported Exposure: _____
Rotation Site(s): _____
Area(s) of assignment: _____

Potential sources/areas of additional exposure (i.e. left in fluoroscopy room on apron, worn while at job, etc.):
_____
_____

Comments:
1. Radiation protection was covered during presentation of student handbook
2. Chapter 3, Radiation Effects and Safety, from Erhlich: Patient Care in Radiography was presented in RAD 1010 Introduction to Radiology

Action Taken:
1. Students are required to read Chapters 1 and 14, Statkiewicz: Radiation Protection in Medical Radiography.
2. After reading the assigned chapters, the student will submit a written summary (within 2 weeks from this date) discussing the basic principles of radiation protection for the technologist/student that includes proper care of dosimeters.
3. Subsequent high readings may result in disciplinary action.

_____
Student signature date

_____
Program Director date

One copy of this form will be given to the student, and a second copy will be maintained in the student's administrative file.

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Radiation Protection and Safety - Patients

POLICY:
The purpose of the policy is to identify general rules for radiation safety for patients.

PROCEDURE:

1. In order to meet the requirement of the ALARA policy, student technologists should make every effort to reduce patient dose and therefore operator dose.
2. It is the responsibility of the student technologist to be certain he/she understands:
    - What examinations are to be performed
    - All special instructions before an exposure is made.
3. Appropriate technique must be used for all examinations.
4. The student technologist should collimate the x-ray beam to the area of interest.
5. The student technologist should carefully position the patient over the ionization chambers if "AEC" is being used.
6. Student technologists should shield the reproductive organs of all patients unless exams are of the abdominopelvic region. This is in accordance with the ASRT Shielding Task Force.
7. Mechanical devices should be used to hold patients when possible.
8. All non-occupationally exposed personnel shall remain at least six feet from the patient during mobile radiography.
9. Protective shielding should be used at all times.
10. Radiographic procedures shall be performed only upon the prescription of a physician.
11. Student technologists shall perform repeat exposures only under the **direct** supervision of a technologist or radiologist.
12. All radiographic rooms will be considered restricted areas.
13. Only the technologist, student technologist and patient shall be allowed in a room when radiographic procedures are performed. (Exceptions must be cleared by a radiologist or the lead technologist). Protective lead aprons and gloves must be worn.
14. Student technologists should inquire if the patient is or may possibly be pregnant. Under no circumstances shall any x-ray procedure be performed on a female of childbearing age unless it is previously determined that she is not pregnant. If there is any question concerning pregnancy, it must be resolved by a physician. If the examination is deemed necessary by the referring physician, then shielding should be used for protection of the fetus, unless it interferes with the examination. **Student technologists may not** perform radiographic examinations on a pregnant individual unless ***directly supervised*** by a technologist regardless of education level.
15. All doors to a radiographic room must be closed when radiographic or fluoroscopic procedures are being performed.

Radiation Protection and Safety – Patients Continued

16. Gonadal shields must be used on all patients of childbearing age and on all children except exams of the abdominopelvic region. This is in accordance with the ASRT Shielding Task Force.
17. A collimator will be used on each radiographic unit to restrict the radiation field to the size necessary for the image receptor being used during a radiographic exposure.
18. A fluoroscopic timer and dose calculator will be used during each fluoroscopic procedure.
19. No patient will be left alone on a stretcher or x-ray table without restraint in the form of side rails or at least a compression band.
20. Anyone holding a patient (such as an aide, family member or nurse) must wear a lead apron and lead gloves (if available). It is important to determine beforehand that any female rendering such help is not pregnant and it is preferable that any females be past childbearing age.
21. No portable radiographic examination will be performed on a patient where a second occupant is in the same room, unless a portable lead shield is provided for the protection of the second patient.
22. Average doses from common radiologic procedures are evaluated annually by the Radiation Physicist and posted in each Radiographic Room.
23. Fluoroscopic outputs are posted in each room, as determined by the Radiation Physicist.

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Radiation Protection and Safety - Fluoroscopy

POLICY:
The purpose of the policy is to identify general rules for radiation safety during fluoroscopy.

PROCEDURE:

1. Only persons whose presence is needed should be in the fluoroscopy room during x-ray exposure.
2. Each person (except the patient) should wear protective aprons. The apron shall be at least 0.5mm lead equivalent.
3. Thyroid shields are available for student use but are not mandatory. It is recommended l thyroid shields should be worn whenever in the fluoroscopic rooms, special procedures or in the OR.
4. "Beam-On" time shall be kept to a minimum by utilizing the 'off position' of the live fluoro switch.
5. The hand of the imaging technologist or any other person shall not be placed in the useful beam unless the patient attenuates the beam, and a protective glove of at least 0.25mm lead equivalent is worn.
6. In fluoroscopy, special care should be taken to employ the 0.5mm lead equivalent protective drape available on the image intensifier. The image intensifier shall be placed as close to the patient as is practical during the procedure.
7. All personnel shall position themselves as far as practical from the image intensifier.
8. Each student assigned duties in the fluoroscopic room shall wear dosimetry badges at the collar level OUTSIDE their lead apron. All diagnostic equipment shall be used under the direction and/or supervision of a diagnostic radiologist.
9. Only certified personnel (ARRT) or in training for ARRT certification (diagnostic radiography students) shall be authorized to make radiographic exposures of a patient.
10. It is strictly against clinical site and school policy for students to irradiate each other or a "non-patient" for the purpose of obtaining a clinical competency. Failure to adhere to this policy, for any reason, may result in dismissal from the program.
11. **Students shall not hold patients during examinations.**
12. **Students shall not hold image receptors during examinations.**

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Radiation Safety Rules

POLICY:
The purpose of this policy is to identify general rules for radiation safety.

PROCEDURE:

1. Dosimeter badges must be worn at all times in the laboratory and clinical environments.
2. Collimation to the minimum field size necessary for the examination is required.
3. Gonadal shielding of the patient is required in all cases where it does not interfere with the acquisition of the desired diagnostic information; this is in accordance to the ASRT Patient Shielding Task Force.
4. Whenever possible, mechanical devices only (i.e. tape, Velcro straps, sand bags, etc.) shall be utilized to immobilize patients during radiology procedures. In those circumstances when mechanical immobilizers are impractical and human intervention is necessary, the individual restraining the patient:
    1. Shall wear a 0.5mm lead equivalent protective apron during the x-ray exposure. If the restrainer's hands might be in the primary x-ray beam, leaded gloves of 0.25mm lead equivalent shall also be worn.
    2. Shall wear a personal radiation monitoring device (OSL dosimeter) outside the lead apron at the collar level.
    3. Should maximize the distance separating himself/herself and the x-ray beam as far as possible.
    4. Shall not be a student in the Lanier Technical College Radiologic Technology Program
5. All personnel present during a fluoroscopic examination must wear lead aprons of 0.5mm lead equivalent.
6. The imaging technologist must wear a leaded glove whenever his/her hand is in the primary beam.
7. X-ray room doors **must be closed** when x-rays are being produced.
8. Always stand inside the shielded control booth when initiating an exposure.
9. Utilize lead drapes whenever possible for fluoroscopic exams.

Great Careers Begin Here

Supervision of Students in the Clinical Setting

POLICY:
To establish guidelines for the supervision of students in the classroom, laboratory, and in a clinical environment in the Imaging Services Department.

PROCEDURE:
Radiologic Technology Students shall be supervised at all times. While in the Clinical environment, all students shall be under supervision of a staff technologist, preceptor, radiologist or a lead technologist.

1. No student shall be allowed to perform any radiographic examination without a preceptor, staff technologist or lead technologist present.
2. Any examination performed by a student for which they do not have a competency in shall be under **direct*** supervision.
    1. When the student has documented thorough clinical competency that he/she is competent in the particular examination, the student will be allowed to perform the examination with **indirect**** supervision. In such an incidence, the student's work shall be verified and approved by a staff technologist, preceptor, or the lead technologist prior to submitting the radiographs to the radiologist for interpretation.
3. No student shall assist a radiologist during an examination or procedure without supervision by a technologist. A student shall be allowed to participate in such examination if:
    1. A staff technologist, preceptor, or lead technologist is present even though they do not participate in the examination.
    2. The radiologist approves a student under his supervision.
4. A student may assist a radiologist only when he/she has documented clinical competency in the examination.

***Direct Supervision**: Student supervision by a qualified practitioner, who reviews the procedure in relation to the student's achievement, evaluates the condition of the patient in relation to the student's knowledge, is present during the procedure and reviews and approves the procedure. A qualified radiographer is present during student performance of a repeat of any unsatisfactory radiograph and when students are imaging pregnant patients.

****Indirect Supervision**: For radiography, indirect supervision is provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. It is unacceptable for the practitioner to have the student contact them via phone; this is a non-supervision situation and is unacceptable. This availability applies to all areas where ionizing radiation equipment is in use.

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Repeat Radiographs Policy

POLICY:
It is the policy of the Radiologic Technology Program of Lanier Technical College to provide for the utmost in quality patient care by ensuring **Direct Supervision** (p. 102) during repeat radiographs.

PROCEDURE:

- **ALL repeat radiographic exposures shall be performed in the presence of a REGISTERED RADIOLOGIC TECHNOLOGIST.** The technologist shall be present in the radiographic room and/or the control room during the repeat procedure regardless of the reason for the repeat.
- This repeat procedure consistently applies to all students, **regardless** of junior or senior-student status and **regardless** of whether prior proficiency has been obtained.
- Students who knowingly repeat a radiograph with a technologist in the vicinity, but not in the actual room during the repeat procedure shall be liable for disciplinary action.
- Students in direct violation of the repeat policy shall be subject to disciplinary action as outlined in the Radiologic Technology Program Code of Conduct, p. 35
- **ALL students will be required to put the technologist's full name and email address in the Log Sheets on Trajecsys whenever a repeat exposure is performed.**

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Student Lead Marker Policy

POLICY:
To ensure students are equipped with the proper lead markers to legally identify (mark) radiographs.

PROCEDURE:

1. Students will purchase a minimum of two (2) sets of R & L markers prior to their clinical rotations.
2. Students may not participate in clinic without their personal markers. Any student who is without his or her own personal markers will be sent home from clinic until such a time as the student is prepared, and the clinical site approves the student's return. Points will be deducted for lack of participation in accordance with the Participation Plan (See Student Handbook, Page 41).
3. All students must have and use the approved style of lead markers while in their clinical rotations. If a student loses his or her marker(s) then the following applies:
    a. The student must immediately notify the Clinical Coordinator and order new markers.
    b. A student may under no circumstances borrow a marker from another student or technologist.
4. Students may not use temporary disposable markers unless assisting in a trauma case where there is a risk of the marker being contaminated by bodily fluids.
5. A clinical competency (check-off) may be achieved ONLY with radiographs demonstrating the appropriate lead marker bearing proper student identification.
6. Students may be subject to disciplinary action if he/she habitually loses or is not in possession of his/her markers.
7. **No student may participate in clinic without his or her assigned/approved anatomic markers**.

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Surgical Attire

STATEMENT OF PURPOSE:
To establish a dress standard that will project a professional image for students performing an Operating Room (OR) rotation.

POLICY:
Students assigned to the Operating Room must have the responsibility to portray a professional image and minimize any risk of contamination to our patients. Clothing and jewelry should conform to the best standards of business and professional attire.

PROCEDURE:

1. Student scrubs, or facility designated OR scrubs, will be worn in the Operating Room and thus should be neat and **clean**.
2. Shoe covers, hats and masks will be worn within the restricted areas of the Operating Room. All facial hair will be covered by a surgical hat or hood. These items should be removed upon completion of each case.
3. Closed toe shoes will be worn at all times. Tennis shoes are acceptable if they conform to student uniform policy. Shoe covers should be utilized to protect shoes while in the operating room. White socks or hose must be worn with clogs or shoes at all times.
4. Fingernails must be kept short, clean, and healthy. Nails should also be free of polish and adornments.
5. Jewelry and watches should be removed and/or confined by individuals in restricted areas.
6. Student technologists are expected to maintain good personal hygiene and be well groomed at all times. Perfumes and colognes should be avoided.
7. Earrings may be worn but are to conform to the student dress code policy p. 45 and should be kept within the cap while in the operating room.
8. Protective barriers should be available and used to reduce the risk of exposure to potentially infectious materials.
9. Students not respecting operating room etiquette will fall subject to the Code of Conduct, p. 35. Failure to comply with established surgical environment site protocols can result in suspension or termination.

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Technique Charts

POLICY:
Each radiographic unit, including mobile, surgical and emergency room, should have its own technique chart.

PROCEDURE:

1. Students must not use anatomical programming during any clinical examination **except** routine chest procedures. Students are **required** to set their own techniques (kVp, mAs, focal spot size) when performing radiographic clinical competencies.
2. Technique charts should be developed utilizing optimum kVp and lowest mAs possible.
    a. Note: Optimum kVp refers to the use of the highest possible kVp which will maintain subject contrast and remain within the parameters recommended by the manufacturer. The use of optimum kVp reduces skin dose and is therefore good practice in the interest of radiation safety. In addition to dose reduction, shorter exposure times may be used, therefore reducing motion on the image. With respect to economics, optimum kVp impresses less heat upon the x-ray tube, thus prolonging tube life.
3. Students are responsible for developing their technique chart. A preliminary chart can be developed by using the technical factors found in the procedures textbook.
4. Technique charts should be used as a guide by the student technologist in selecting primary exposure factors. They should use judgment to vary from the chart when considering anatomic abnormalities, disease process, patient age, weight, height, and physical condition.

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Clinical Assignment Verification Forms

POLICY:
This policy describes the mechanism of documenting student's hours and class participation throughout the program. To meet the minimum graduation requirements, students must document clinical hours spent in the program.

PROCEDURE:
The program utilizes the online Trajecsys Documentation system.

1. Students will turn in online clinical assignments per syllabus dates.
2. All clinical assignment documents must be signed by a preceptor or technologist. Electronic signatures are accepted.
3. Forging a clinical assignment verification form is a violation of the Code of Conduct. Students in violation of the code will be dismissed from the program.
4. Failure to properly sign in and sign out of clinical sites and maintain correct hours may result in suspension or dismissal from the program.
5. Students should make every effort to schedule medical and dental appointments outside of clinic/classroom time. If a student needs time away from clinic for any reason, including medical or dental appointments, students must follow the proper sick leave or PLT approval procedures. Students who do not follow the sick leave or PLT procedure will be subjected to a grade deduction as outlined in the Participation Plan (pg. 41).
6. Failure to accurately sign in and sign out (utilizing the appropriate geofence GPS location) will be considered an occurrence of non-participation, and respective point deductions will be assessed (see Participation Plan on pg. 41).

Students must achieve a minimum of 1170 documented clinical hours by the completion of the 4-semester program to meet State standards and JRCERT accreditation requirements.

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Venipuncture Policy

POLICY: To establish the criteria to perform venipuncture and achieve competency requirements.

PROCEDURE: The venipuncture competency will be demonstrated by the student in class on simulation mannequins only. Students may **not** practice venipuncture on each other in any circumstance.

The training for venipuncture will be conducted by a Radiography Program faculty member, a Registered Nurse faculty member, or a Simulation Lab faculty member. Additionally, a student must have **direct supervision** by a registered nurse or registered radiologic technologist when performing venipuncture and/or administering contrast intravenously.

A venipuncture competency check-off form must be filled out for each patient when a student performs a venipuncture at a clinical site.

1. Students are required to complete a minimum of two (2) successful Venipuncture Competencies each semester of the program that are to be performed on live patients; a minimum total of eight (8) venipuncture competencies are required for each student. This will occur once the venipuncture skill has been demonstrated in RADT 1010 Fall Semester, Term One.

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RADIOLOGIC TECHNOLOGY PROGRAM VENIPUNCTURE/INJECTION WORKSHEET

STUDENT'S NAME _____ **SEMESTER** _____

S - Successfully Demonstrated **U- Unsuccessfully Demonstrated**

ALL CRITERIA MUST BE SUCCESSFULLY DEMONSTRATED TO PASS A PRECEPTED VENIPUNCTURE PROCEDURE

Preparation:	**S**	**U**
1. Reviews patient's order.		
2. Introduces self to patient and identifies patient (2 identifiers). ***Informs patient that he/she is a student and receives at least a verbal consent from patient to let student perform the venipuncture**.		
3. Explains procedure to patient. Asks patient about known allergies, including contrast allergies.		
4. Instructs patient about possible adverse reactions.		
5. Demonstrates aseptic technique and follows Standard Precautions.		
6. Washes hands and assembles equipment/supplies.		
7. Applies gloves and preps site with alcohol prep pad, scrub, and allows to dry.		
8. Applies tourniquet. Selects uncompromised vein proximal or as appropriate for radiopaque dye.		
9. Inserts needle and catheter properly		
10. Releases tourniquet & flushes site with 2mL of saline solution and applies transparent dressing.		
11. Performs injection of contrast material. Please write "N/A" if not applicable.		
12. Observes for adverse reaction.		
13. Properly disposes of used equipment using Standard Precautions.		
14. Following procedure, properly discontinues catheter and dresses site with sterile 2 x 2, or if cap left in place, flushes with 2 mL of saline solution and checks dressing.		
15. Removes gloves and washes hands.		

Circle One: PASS FAIL

Improvement Action Required/Comments: _____

_____

Accession Number: _____ Modality/Area: _____

RN or R.T. Printed Name: _____

RN or R.T. Signature: _____ Date: _____

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Telephone and Social Media Policy

Personal phone calls, emails, and/or messaging are prohibited (both incoming and outgoing) while in the classroom, laboratory, and/or clinic other than in an emergency. Cell phones must be turned off while in the classroom, laboratory, and/or clinic. Cell phones must be stored in a place away from regular classroom, laboratory, and/or clinical activities. Points may be deducted from grades and/or disciplinary action may be taken if cell phone use violates the telephone policy in accordance with the Participation Plan, p. 41.

While social media networks (e.g., Facebook, Instagram, SnapChat, Twitter, TikTok, etc.) are very popular, the posting of images (photographs or videos) or instant messaging of any classroom, laboratory, or clinical activity is strictly forbidden without prior approval of the program faculty. Students found to have texted or posted such images without approval may be subject to disciplinary action up to and including dismissal from the program. In addition, students should recognize they are on the brink of entering a profession and as such, should exercise good judgment and professionalism when posting in these forums. **The preservation of patient and client confidentiality is of utmost importance.** Students found to have breached this confidence are not only subject to dismissal from the Radiography Program but may find him/herself open to legal action.

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Telephone and Social Media Policy Acknowledgement

I, _____ have received and read the "Telephone and Social Media Policy." The Director of the Radiologic Technology Program and/or Faculty has discussed and answered questions about these policies. My signature below indicates I have read and understand the contents and will abide by the rules and regulations. My signature indicates my understanding of the seriousness and severity of these violations, and the consequences associated with any violation of this policy. I have also had an opportunity to discuss the code with the program director. I understand that a signed copy of this form will remain in my administrative file throughout the duration of the program. I also understand that I will have a copy of this form in my current student handbook.

_____
Student Name (Please Print)

_____
Student Signature

_____
Date

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Professional Boundaries – Clinical Staff

The program **strongly discourages** starting romantic relationships and/or communicating via Social Media applications (Facebook, Instagram, TikTok, SnapChat, WhatsApp, Dating apps, etc.) with clinical personnel e.g. preceptors, staff technologists or other individuals involved with the student's supervisory or instructional training. **There is an intrinsic conflict of interest to the student's education and a risk of harassment and harm to the student.** These situations can result in favoritism to the student (both real and perceived) or the opposite, in situations where the relationship sours and the student is retaliated against. Such relationships may be initiated after the supervisory or instructional relationship has clearly ended; specifically, after the student graduates from the program and passes the ARRT National registry exam.

Students can report instances of inappropriate or unwarranted communication or contact, both in-person and digital, via the Clinical Concern Form on Trajecsys.

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Tobacco Policy

PURPOSE:
To establish a policy regarding smoking during hours of clinical rotation.

POLICY:

Students are given a meal break during their clinical rotation; since our current clinical sites are non-smoking, tobacco free facilities – students may only leave the premises to smoke/use tobacco products during their meal break; this also includes e-cigarettes, vapes, chewing tobacco etc. Tobacco use of any kind is not allowed within common, didactic, or practical teaching areas.

ADVANCED MODALITY ROTATION OBJECTIVES

General Radiography Room Rotation Objectives

By the completion of each rotation, the student should be able to (on a particular piece of equipment):

1. Locate and accurately manipulate the kVp setting.
2. Locate and accurately manipulate the mAs setting.
3. Identify the ionization chambers.
4. Identify the rotor switch and discuss its proper use.
5. Describe the difference between rotor and exposure.
6. Manipulate table controls to move the tabletop laterally and superior to inferior.
7. Describe and demonstrate the controls for inclining the table and identify the method for ascertaining the degree of incline.
8. Demonstrate the proper method for removing and replacing the footrest, and checking the security of its attachment.
9. Locate and properly open and close the bucky tray, while locking an image receptor(IR) into position for exposure.
10. Identify the collimator controls and accurately manipulate them to produce fields of varying sizes.
11. Center the tube to the bucky (detent controls) for table and upright exposures.
12. Demonstrate the proper method for adjusting SID for table and upright bucky exposures.

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Patient Transport Rotation Objectives
(RADT 1320 - Clinic I)

By the completion of this rotation assignment, the student should be able to:

1. Given a patient transport request, the student can locate the patient room on the floor.
2. Given a specific patient for transport, the student is able to locate and obtain the correct patient chart.
3. Properly sign the patient out from the nursing station (or notify the appropriate nurse if a formal log is not kept)
4. Safely assist the patient from bed to wheelchair.
5. Safely and efficiently assist the patient back into the bed.
6. Safely transfer the patient from bed to stretcher with assistance as necessary.
7. Safely and efficiently transfer a stretcher patient back into the bed with assistance as necessary.
8. Safely and efficiently transport patients (both stretcher and wheelchair) to the Radiology Department.
9. Upon completion of the necessary procedure, the student is able to safely and efficiently return the patient to their room.
10. Upon return to the floor, the student is able to sign the patient in (or notify the appropriate nurse while returning the patient chart to the appropriate location).

***Per program policy, students are NOT allowed to transport patients without direct supervision.**

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Operating Room Rotation Objectives

By the completion of this rotation assignment, the student should be able to:

General Orientation

1. Identify the location of the master board of OR cases.
2. Explain how cases are tracked on the master board, and when x-ray cases are scheduled to begin.
3. Locate the appropriate location for image receptors(IR), grids, and the IR stand.
4. Identify the location of the OR darkroom, if applicable.

Equipment

1. Identify the proper location for portable radiographic machine storage when not in use.
2. State the proper location for C-Arm storage when not in use.
3. Move the C-Arm from room to room without damaging other equipment or contaminating a sterile field.
4. Accurately manipulate the C-Arm from superior to inferior.
5. Accurately manipulate the C-Arm laterally.
6. Correctly demonstrate the method for entering new patient information into the C-Arm prior to starting a procedure.

Radiation Protection

1. Locate the proper location for storage of lead aprons, mobile shields, and thyroid shields when not in use.
2. Follow the proper procedure for ensuring others in an OR room are shielded before exposing.
3. Demonstrate proper lead apron storage and care to prevent damage to the lead.
4. Describe and demonstrate proper techniques for avoiding sterile field contamination.

Procedures

1. Observe and gradually participate in surgical procedures requiring x-ray.
2. Assist the surgical technician in placing a sterile C-Arm cover over the machine without contamination.
3. Describe the protocol for obtaining a “STAT” or “Wet reading” for an OR film, and follow that protocol if necessary.

Cysto Room

1. Describe the method for turning the unit on and off.
2. Given technical factors, accurately manipulate the kVp and mAs.
3. Demonstrate the method for activating fluoro and changing to overhead projections, as needed.

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Magnetic Resonance Imaging Rotation Objectives (Observation only)

By the completion of this rotation assignment, the student should be able to:

1. List and discuss the patient contraindications for MRI procedures.
2. Describe the patient history information unique to MRI scanning.
3. Explain necessary patient preparations for MRI scans including the need to disrobe.
4. Identify the main components of an MRI scanner.
5. Discuss the role of MRI in the diagnostic process.
6. List the differences between CT and MRI scanning.
7. Identify the basic principles of MRI scanning.
8. Describe safety precautions unique to an MRI department.

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Mammography Rotation Objectives**
(Observation only)

By the completion of this rotation assignment, the student should be able to:

1. List and discuss exposure factors to include characteristics such as patient age, breast density, and equipment limitations, which may affect the technique used.
2. Evaluate images to ensure they contain pertinent anatomy and are of good image quality
3. Participate in the performance, evaluation, and recording of applicable QC testing (daily, weekly, monthly, quarterly, annual)
4. List and describe at least two of the following diagnostic procedures:

a. Breast MRI
b. Needle localization
c. Ductogram/Galactogram
d. Stereotactic Procedure
e. Tissue Marker Clip Placement
f. Diagnostic Mammogram
g. Callback Screening Mammogram

5. Identify pertinent equipment to include at minimum the compression plates and image receptor.
6. Describe the patient history information unique to mammography.
7. Explain necessary patient preparations for mammography scans including the need to disrobe.
8. Discuss the role of mammography in the diagnostic process.

Students will be permitted to observe in a mammography rotation at the discretion of each facility

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Radiation Therapy Rotation Objectives (Observation only)

By the completion of this rotation assignment, the student should be able to:

1. Discuss the use of radiation therapy in the treatment of disease.
2. Describe the process by which a treatment plan is created.
3. Discuss patient positioning considerations and ancillary devices used.
4. Explain what records are kept for patients and the reason(s) for daily updates.
5. List some of the more common side effects of radiation therapy treatments.
6. Explain the purpose for a treatment "simulator" and its role.

Special Procedures Rotation Objectives
(Interventional/Cardio-Vascular/Cardiac Cath Observation Only)

By the completion of this rotation assignment, the student should be able to:

1. Assist in setting up and maintaining a sterile field.
2. Add instruments, needles, and other supplies to the sterile field without contamination.
3. Describe patient exam preparations for commonly performed procedures.
4. Describe the proper method for selecting and preparing contrast media for angiographic procedures.
5. Demonstrate the proper method for drawing contrast media into the auto injector and arm the injector.
6. Explain the difference between a guide wire and a catheter.
7. List the contraindications for invasive procedures.
8. Discuss patient positioning considerations for commonly performed procedures.
9. Identify and describe the role of each individual present during a procedure.
10. Manipulate the tube position for various projections.

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Ultrasound Rotation Objectives
(Observation only)

By the completion of this rotation assignment, the student should be able to:

1. Discuss the role of ultrasound in diagnostic imaging.
2. Describe the basic principles of ultrasound imaging.
3. Identify the limitations and advantages of ultrasound imaging.
4. Define the terms transducer, echo, and doppler.
5. List and discuss common patient preps for ultrasound imaging.
6. State the proper sequence of exams regarding ultrasound imaging and other imaging modalities.

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Nuclear Medicine Rotation Objectives (Observation only)

By the completion of this rotation assignment, the student should be able to:

1. Discuss the role of nuclear medicine in the diagnostic process.
2. Describe common patient preparations for nuclear medicine studies.
3. Identify any contraindications to performing nuclear studies.
4. List common time frames for commonly performed nuclear studies.
5. Explain patient history information necessary when performing nuclear medicine studies.
6. Discuss safety measures to observe while working in the "hot lab."
7. Identify contrast media, pharmaceuticals, and other substances that may adversely affect nuclear studies.

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Computed Tomography Rotation Objectives (Observation only)

By the completion of this rotation assignment, the student should be able to:

1. Define the terms scout, slice, image acquisition, image reformat, and image reconstruction.
2. Discuss the effects of manipulation the window and level settings on a displayed image.
3. Identify the various scanner components and state the function of each.
4. Explain the differences between conventional and spiral CT scanners.
5. List the advantages and limitations of spiral CT scanners.
6. Identify common patient preps for CT examinations.
7. List the contraindications for CT scanning and the use of IV contrast.
8. Describe the differences between the barium used in general x-ray and the barium used in CT.
9. Discuss the proper sequence of examinations relative to CT and other imaging modalities.
10. Participate to the level of his or her ability under direct or indirect supervision.