



**RADIOLOGIC  
TECHNOLOGY**

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**Midland College Radiology Technology Student Handbook  
2025-2026**

This handbook is valid for the 2025-2026 academic year. All policies and procedures are consistent with Midland College Policies and Procedures, the Division of Health Sciences Policies and Procedures, Midland College Radiology Policies and Procedures, Midland Memorial Hospital Policies and are in alignment with JRCERT guidelines. The handbook can be updated at any time during the school year as needed, and will be disseminated to students through Trajecsys and in-person notification. (01/12/25)

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## **WELCOME!**

Midland College's administration, faculty, and fellow students are happy to warmly welcome each new student!

This handbook has been prepared and offered as a guide to assist students in adjusting to the Radiologic Technology Program and to present the rules and regulations. The student and faculty policies were developed to maintain an environment encouraging learning and student progress. The program rules and restrictions apply to all students and faculty regardless of the instruction location.

It is the responsibility of the student to read and abide by the Radiologic Technology policies and adhere to the rules and regulations outlined in the Midland College General Catalog and Radiology Student Handbook to achieve high standards of education. The handbook should offer guidance on any questions that may arise. If the handbook does not have guidance on particular issues, then the program director is your first point of contact when asking questions.

We are pleased that you have chosen Midland College to help you achieve your goal of becoming a Radiologic Technologist!

### **Equal Opportunity Statement**

Midland College does not discriminate based on race, color, national origin, sex, disability, or age in its programs and activities. The following individual has been designated to handle inquiries regarding the nondiscrimination policies: Amber Sims, Title IX Coordinator 3600 N. Garfield, SSC 125 Midland, Texas 79705 (432) 685-4781, email to [title9@midland.edu](mailto:title9@midland.edu) or see [Midland College's Nondiscrimination Statement](#). For further information on notice of non-discrimination, visit the ED.gov Office of Civil Rights website or call 1(800) 421-3481.

### **Title IX**

Midland College adheres to all federal, state, and local civil rights laws prohibiting discrimination in employment and education. Midland College does not discriminate in its admissions practices [except as permitted by law], in its employment practices, or its educational programs or activities on the basis of sex/gender. As a recipient of federal financial assistance for education activities, Midland College is required by Title IX of the Education Amendments of 1972 to ensure that all of its education programs and activities do not discriminate on the basis of sex/gender. Sex includes [sex, sex stereotypes, gender identity, gender expression, sexual orientation, and pregnancy or parenting status].

Midland College prohibits retaliation against any person opposing discrimination or participating in any discrimination investigation or complaint process internal or external to the institution. Sexual harassment, sexual assault, dating and domestic violence, and stalking are forms of sex discrimination that are prohibited under Title IX and by Midland College policy. [Midland College Sexual Misconduct Policy](#).

Any member of the campus community, guest, or visitor who acts to deny, deprive, or limit the educational, employment, residential, or social access, opportunities and/or benefits of any member of the Midland College community on the basis of sex is in violation of the [DIAA](#), [DIAB \(LOCAL\)](#) and [FFDA, FFDB \(LOCAL\)](#).

Any person may report sex discrimination (whether or not the person reporting is the person alleged to have experienced the conduct), in person, by mail, by telephone, by video, or by email, using the contact information listed for the Title IX Coordinator. A report may be made at any time (including during non-business hours) by filing an online complaint here: [Discrimination/Sexual Harassment Reports](#).

Questions regarding Title IX, including its application and/or concerns about noncompliance, should be directed to the Title IX Coordinator. For a complete copy of the policy or for more information, please visit the college policies here: [Texas Association of School Boards](#), or contact the Title IX Coordinator Andrea Sims.

Midland College has designated the following person to coordinate its efforts to comply with Title IX of the Education Amendments of 1972, as amended: Amber Sims, Title IX Coordinator 3600 N. Garfield, SSC 129 Midland, Texas 79705 (432) 685-4781 or email at [title9@midland.edu](mailto:title9@midland.edu).

### **ADA Compliance**

The Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act require that no otherwise qualified person with a disability be denied access to, or the benefits of, or be subjected to discrimination of any program or activity provided by an institution or entity receiving federal financial assistance. It is this Section 504 mandate that has promoted the development of disability support service programs in colleges and universities across the country. Subpart E of Section 504 deals specifically with this mandate for institutions of higher education. More information can be found at: [Accommodation Services \(midland.edu\)](#).

Midland College provides services for students with disabilities through Student Services. In order to receive accommodations, students must visit [Accommodation Services](#) and complete the *Application for Accommodation Services* located under the Apply for Accommodations tab. Services or accommodations are not automatic; each student must apply and be approved to receive them. All submitted documentation will be reviewed, and an “Notice of Accommodations” letter will be sent to instructors outlining reasonable accommodations. For more information or questions, please contact Bradley Gwatney at [bgwatney@midland.edu](mailto:bgwatney@midland.edu) or (432) 685-6467.

Complete the application for disability accommodation found on the MC website in the section for disability services under the major heading of services and resources. The form is a PDF

document that should be printed and filled out. Let your instructor know if you need assistance with this step. Provide supporting documentation for your application. Usually, this is an evaluation by a qualified professional, such as a medical doctor, diagnostician, or psychologist. We highly recommend that the evaluation is no more than five years old. It should show the current functioning of the student. Submit the completed application and supporting documentation one month before classes begin for review. After the qualified disabilities counselor reviews your requests and you are enrolled in classes, you will be contacted to discuss disabilities and accommodations for the upcoming semester. Meetings may occur face-to-face, via phone, or through email. Information is shared with instructors as necessary and appropriate. Accommodations must be requested each semester.

Pregnancy and pregnancy-related conditions are also covered by ADA Compliance accommodations and are outlined later in this handbook.

If a student believes an action or decision made by an instructor or staff violates their rights under the Americans with Disabilities Act, they may initiate a grievance procedure. The first step should be addressing the problem with the instructor or staff. Next, disability staff can be consulted to help resolve the issue. If not satisfied, the student should contact the Title IX Coordinator to learn how to file a grievance. Midland College has designated the following individual as the Title IX Coordinator: Amber Sims, Scharbauer Student Center Room, (432) 685-4781, [title9@midland.edu](mailto:title9@midland.edu), or you can file a [grievance online](#). If concerns are not resolved at this level, the Dean of Student Life can provide directions for the Student Due Process Appeal Procedure.

{JRCERT 1.1, 2.3, 5.1}[RADR Policy Title IX Accommodations]

### **Student Confidentiality/FERPA**

The Family Educational Rights and Privacy Act (FERPA) afford eligible students certain rights with respect to their education records. An “eligible student” under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution.

Midland College faculty and staff act in accordance with FERPA regulations. All confidential information will be kept private in accordance with FERPA stipulations, which include, but are not limited to, student files kept in a locked file, information on a server with restricted access, and password-protected laptops and/or desktops.

In certain situations, your private information will be shared with outside parties relevant to your clinical experience, such as vaccination records, drug tests, etc., that need to be on file at the hospital or clinical affiliates. A signed acknowledgment is required and is located in the appendix of this handbook.

For more information about your rights under FERPA, please visit the Midland College website at [Midland College FERPA](#).

{JRCERT 1.4} [RADR Confidentiality/FERPA]

## **Faculty and Staff**

Program Director: Tabitha Fuquay, MBA, BHCM, RT(R)(ARRT)

Clinical Director: Sabrina Piazza, R.T.(R)(CT)(ARRT)

In accordance with Standard Three, Objective 3.2 of the 2021 Standards For Accreditation of an Education Program, all faculty and staff are properly credentialed in radiography and have the qualifications to hold the positions they occupy.

{JRCERT 3.2}

## **Advisory Committee**

The Radiology Technology Program has an advisory board committee that helps determine the best course of action for the program, its members, and its students. The advisory committee meets at least twice yearly, once in the fall and again in the spring. Meeting agendas and minutes are available by contacting the program director. The advisory committee helps outline strategic goals and evaluate the program's mission statement, program goals, and student learning outcomes. This committee helps monitor the effectiveness of the MC Radiologic Technology Program and facilitates continuous quality improvement.

This advisory board consists of senior staff of Midland College, the faculty of the radiology technology program, a junior and senior student that has been elected by their peers, senior staff at Midland Memorial Hospital, a radiologist physician (or physician assistant) from Midland Memorial Hospital and administrative staff/faculty of Midland College. Additionally, community interests can serve on the advisory committee to allow input, opinions, and feedback regarding the Midland College Radiologic Technology Program. {JRCERT 4.1, Standard Six}

## **Accreditation Status**

Midland College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award certificates, associates, and baccalaureate terminal degrees.

Questions about the accreditation of Midland College may be directed, in writing, to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website ([www.sacscoc.org](http://www.sacscoc.org)). Midland College's accreditation status [is located here](#).

Core values, mission statement, and contact information can be found here: [Mission & Accreditation - Midland College - Acalog ACMS™](#).

{JRCERT 1.1}

## **Joint Review Committee on Education in Radiologic Technology**

Students are made aware that the Midland College Radiology Technology Program is not currently accredited by the JRCERT (Joint Review Committee on Education in Radiologic Technology), but will be seeking accreditation in the future. Accreditation of the Midland College Radiology Technology program by JRCERT is not mandatory, and this does not affect a student's ability to become a radiologic technologist or awarded a terminal degree. Students will

sign an acknowledgment that the program director has explained this during new student orientation.

[JRCERT Standards](#), Adopted April 2020. The JRCERT Standards outline the requirements for a program to promote academic excellence in radiologic technology. The contact information for JRCERT is:

20 N. Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
(312) 704-5300  
[mail@jrcert.org](mailto:mail@jrcert.org)

Contacting the JRCERT is not a formal step in the institutional or program grievance policy. Please see the grievance policy outlined later in this handbook.  
{JRCERT 1.5}

### **Curriculum**

The Midland College Radiologic Program's educational and clinical components have been modeled to conform to the standards set forth by the JRCERT, ARRT, ASRT, and the State of Texas. The [2022 Adopted Radiography Curriculum can be located here](#). Students are encouraged to view the curriculum outline.

{JRCERT 1.1, 1.5, 1.7} [RADR Accreditation Status]

### **List of Regulatory Agencies**

American Registry of Radiologic Technologists-[ARRT](#)

American Society of Radiologic Technologists-[ASRT](#)

Joint Review Committee on Education in Radiologic Technology [JRCERT](#)

Texas Medical Board-[TMB](#)

### **Licensure Eligibility**

Completion of Midland College degrees and/or certificates does not guarantee eligibility to take a certification/registry/licensure examination. Each person's eligibility is determined individually by the regulatory body of the specific discipline. If a student has a conviction of a crime other than a minor traffic violation, physical or mental disability/illness, hospitalization/treatment for chemical dependency within the past five years, current intemperate use of drugs or alcohol, or a previous denial of licensure or action by a licensing authority, you will need to contact the specific regulatory body for an individual ruling. Allied Health programs require a criminal background check and urine drug screen.

Allied Health students must sign the Licensure Eligibility Notification Form (found in the appendix of this handbook), which will be maintained in the student's file. If, at any time, a student's criminal or disciplinary history changes, this may significantly affect their eligibility to apply for and take licensing examinations. Any questions regarding the impact of a previous criminal or disciplinary matter should be directed to the appropriate licensing authority.

## **Conditions of Admission**

Acceptance to any Allied Health program is provisional and contingent on meeting all admission conditions. Failure to meet all conditions of admission disqualifies the student from admission into an Allied Health program.

In accordance with Clinical Affiliate agreements, Allied Health conditions of admission are as follows:

### **Drug Screening**

Allied Health students will be subject to a 10-panel drug screen. Negative results are required.

### **Background Clearance**

Midland College is committed to ensuring public and professional trust as well as providing safe patient care. A prospective student must consent to a background check before being accepted. The in-depth background check (FBI/National level) will be performed by Castlebranch. In the event that you do not clear the background check clearance, you will be disqualified from participation in the radiology technology program.

Adverse criminal history that will disqualify an individual from entering a Clinical Affiliate facility, thus disqualifying admission into a Health Sciences program include, but are not limited to:

- A felony violation of a statute intended to control the possession or distribution of a substance in the Government Code, Chapter 481, and (Texas Controlled Substance Act)
- Aggravated Robbery (Penal Code § 29.03)
- Agreement to Abduct from Custody (Penal Code § 25.031)
- Arson (Penal Code § 28.02)
- Assaultive Offenses (Penal Code Chapter 22)
- Burglary and Criminal Trespass (Penal Code Chapter 30)
- Computer Crimes (Penal Code Chapter 33)
- Criminal Homicide (Penal Code Chapter 19)
- Forgery (Penal Code § 32.21)
- Fraud (Penal Code Chapter 32)
- Indecency with a Child (Penal Code § 21.11)
- Indecent Exposure (Penal Code § 21.07)
- Kidnapping and Unlawful Restraint (Penal Code Chapter 20)
- Public Indecency (Penal Code Chapter 43)
- Public Lewdness (Penal Code § 21.07)
- Robbery (Penal Code § 29.02)
- Sale or Purchase of a Child (Penal Code § 25.11)
- Solicitation of a Child (Penal Code § 25.06)
- Theft (Penal Code Chapter 31)
- Weapons (Penal Code Chapter 46)

This list is not exhaustive. If a student is found having concealed a violation of the law other than non-moving traffic violations, that student will be removed from the program.

### **Required Immunizations/Screenings**

In accordance with [Title 25, Texas Administrative Code §97.64](#), all Allied Health students are required to have the following immunizations before they may engage in the course activities which will involve direct patient contact with potential exposure to blood or bodily fluids in educational and medical facilities. 5

- Hepatitis B
- Measles Mumps-Rubella
- Varicella (Chickenpox)
- Tetanus Diphtheria Pertussis (Tdap) (*expires after 10 years*)
- Bacterial Meningitis (*if required, according to Texas Enrollment Requirements, as listed in the Midland College Catalog*)

Clinical Affiliates require students to provide proof of the following, annually:

- Influenza vaccine
- Tuberculosis screening (*P.P.D. skin test or the QFT-Gold blood test is required. If there is a history of positive skin test, results of a current chest x-ray demonstrating clearance are required.*)

### **TOEFL**

Any student born and educated outside the U.S must take the TOEFL and pass with 79% or higher. Proof of the test must be submitted with your application. The test is valid for two years. If a student has an advance degree from an accredited institute within the U.S., this can be accepted in lieu of the TOEFL. Please speak with the program director if you have questions.

### **Health Insurance Requirements**

It is the student's responsibility to have current health insurance at all times during the Radiologic Technology program. A student is not covered by Midland College nor Midland Memorial Health Workman's Compensation insurance policies. A copy of the health insurance is required to be on file with the Division of Health Sciences Secretary. (Allied Health Policy: Health Insurance Requirements) {RADR Policy Health Insurance Requirements}

### **Physical Health**

Allied Health students must possess the physical abilities and characteristics required to meet the technical standards for the Allied Health program in which they are enrolled.

### **Cardiopulmonary Resuscitation (CPR)**

Allied Health students are required to maintain American Heart Association Basic Life Support Cardiopulmonary Resuscitation (CPR) certification throughout the duration of the program.

*Online certification and CPR certification through other providers is not accepted.*

**Failure to meet all qualifications will disallow a student to continue in the program.**

### **ARRT Standard of Ethics**

A copy of the ARRT Standards of Ethics will be presented to you within this handbook. A copy can also be found on Trajecsys. Students will be educated on the ARRT Standard of Ethics during new student orientation. The Standard of Ethics is also located here:

<https://www.rrt.org/pages/resources/ethics-information>. {Acknowledgement required}

### **Ethics Clearance from ARRT**

All alcohol—and/or drug-related violations must be reported. The ARRT must investigate all potential violations to determine eligibility. Individuals must file a pre-application with the ARRT to obtain a ruling on their eligibility for the examination. If a student cannot obtain eligibility through the ARRT, then, unfortunately, they will not be eligible for entry into the program.

Use the ethics review pre-application if you've faced:

- Misdemeanor or felony charges or convictions (other than traffic tickets)
- All alcohol or drug-related violations
- Military courts-martial
- Disciplinary actions taken by a state or federal regulatory authority or certification board
- Serious honor code (academic) violations as described in our Rules of Ethics, such as patient abuse, violating patient confidentiality, and cheating. You don't have to report offenses such as poor grades or falling asleep in class.

If any violations occur from the time a student is admitted to the program to the end, it is the student's responsibility to contact the ARRT for clearance. Students are encouraged to contact the program director for counselling and advisement; however, if the violations are deemed of a nature that would not allow them to sit for the ARRT exam, students will be dismissed from the program.

A non-refundable fee of \$100 is required for clearance from the ARRT. For more information or to obtain a clearance application, please visit: [ARRT Ethics Clearance](#),

Contact the ARRT at:

ARRT 1225 Northland Dr.

St. Paul, MN 55120-1155

Tel: (651) 687-0048

{Licensure Eligibility Acknowledgement Form, Allied Health Conditions of Admission}

## **Drug & Alcohol Testing**

### **Preadmission**

In accordance with Clinical Affiliate agreements, all Allied Health Students will be subject to a 10-panel drug screen at the student's expense. In accordance with the Allied Health Conditions of Admission policy, a negative result is required. The drug screening will be held after admittance to the program through the CastleBranch admission system. Students will not be allowed time off of class to take a test. Students will report to the designated clinic at the designated time to take the drug screening. A student must adhere to the date/time set. Repeated cancellations will result in additional charges that the student will then incur.

The program director will set a date by which the drug screenings are due. Compliance with this date is expected. All students in non-compliance will be removed from the program due to non-compliance with the Conditions of Admission Policy.

*Students in non-compliance will not be admitted to an Allied Health Program.*

### **Random Drug Testing**

All Allied Health students will be subject to random drug screening up to each semester at the student's expense. A negative result is required for progression.

*Students in non-compliance will be subject to disciplinary action as outlined in the Discipline Categories Policy.*

### **Additional Drug/Alcohol Screening**

Healthcare providers are entrusted with the health, safety, and welfare of patients. The safety and welfare of patients cared for by our students is of primary concern to all Allied Health programs and the Clinical Affiliates that provide essential clinical experiences for the students. Students will be asked to submit to additional drug screening, following the outlined procedures below, in the following circumstances:

1. Involvement in any accident during participation in clinical activities.
2. Observable indication of actual use or impairment as outlined in the Faculty Report of Drug/Alcohol Suspicion and Consent to Drug Screening Form.
3. Possession of drugs, apparent paraphernalia or alcoholic beverages while participating in lecture, lab, or clinical activities.

*Clinical affiliates may require additional drug screening in the event of any incident, patient complaint, or other adverse outcome. Refusal to consent or positive drug screening results would result in the student being unable to complete required clinical activities, and thus be subject to discipline as outlined in the Discipline Categories policy.*

### **Procedure:**

*All clinical activities are excused, with no penalty, pending drug screen results.*

1. Completion of Faculty Report on Drug/Alcohol Suspicion and Consent to Drug Screening Form.
2. Instructions for drug screening procedures will be given, including time frames for completion, if applicable.

3. If on-site drug screening is not available, transportation will be provided to a testing facility at the college's expense. *Refusal to accept transportation will be documented and Midland College Police Department will be notified.*

*Non-adherence to outlined procedures will result in immediate program dismissal, without the option for readmission to any Midland College Allied Health program for 3 years.*

### **Results**

Positive drug screen results, as indicated after Medical Review Officer review, will result in disciplinary action as outlined in the Disciplinary Categories policy. [Midland College Alcohol and Drug Prevention Program](#) Resources will be provided. Transportation to the clinic site for drug screening collection will be provided at the college's expense. Refusal of transportation will be reported to the appropriate authorities.

*Positive drug screening results will result in disciplinary action as outlined in the Disciplinary Categories policy and will be reported to the appropriate licensing board, when applicable.*

Negative drug screen results will result in immediate reinstatement with the opportunity to make up any missed assignments and/or clinical hours.

### **Students Requiring Medical Prescriptions**

Students will not be permitted to attend clinical when under the influence of any legally prescribed drug that interferes with the effective performance of the functions of his or her clinical duties or poses a direct threat to the safety or security of patients, themselves, or others. Students must willfully disclose that they are taking prescription medications. Students must prove that they are prescribed those medications through an authorized provider, with a recent (within the year) and up-to-date prescription. No exceptions will be made for the argument that narcotics, opioids, or any other altering medication are prescribed "as-needed" or "PRN." No exceptions will be made for taking medications for an "off-label" reason.

CBD, THC, gummies, candy, oils, mushrooms, psilocybin, etc., are mind-altering medications, and their use is prohibited.

If a student needs to take medication that can reduce their mental capacity in the event of an emergency (e.g., surgery, tooth extraction), they must immediately arrange a meeting with the program director to discuss alternative clinical arrangements and temporary accommodations if necessary.

### **Readmission Guidelines Related to Substance Abuse**

If a student wishes to attempt readmission to the radiologic technology program, they must wait at least 36 months from the original dismissal. See the Discipline Policy for more information.

## Emergency Procedures

### **Inclement Weather Policy**

Emergency Announcements: In emergency situations such as a weather-related closure, the announcement for the closure of the college will be made as soon as possible. Local media outlets will be made aware of the status. The program director and college staff will closely monitor the weather. Determinations of weather closure remain fully with the Midland College Chief of Police in coordination with Midland Independent School District by 6 AM. Be aware that different school districts can have weather decisions that are contrary to Midland College or MISD decisions. It is the student's responsibility to contact the program director in case of a difference or an emergency. Students are not excused from class or clinical for bad weather unless the college announces a closure.

To stay informed about weather conditions and college closures or delays, students should reference sources as outlined on the Midland College Extreme Weather Conditions webpage. Local news stations will scroll through information regarding closures at the bottom of the news screen.

**Rave Alerts**-Register for approved Midland College emergency communications and other important information via text message and email. <https://www.getrave.com/login/midland>. Emails will be sent to your student email address.

### **Emergency Closure-Operations**

In the event that the college must close or clinicals must be suspended for a period of time, Midland College Radiologic Technology faculty will outline procedures to ensure the continuation of a student's education. Clinical sites may be changed, additional time for competencies may be arranged, and alternative methods for didactic education may be utilized. {JRCERT 1.1} {RADR Policy-Emergency Operations}

### **Emergency Student Response**

In the event that an emergency situation occurs within a clinical affiliate or facility, the student is expected to act in accordance with local policy. For instance, in the event of a fire, RACE procedures should be activated. Students are not facility employees; however, they are able-bodied individuals who can help rescue patients if the event calls for it. In the event of a threat, students are instructed to act in accordance with the threat level at the direction of their supervising technologist, lead, faculty, or local official. Students are orientated to specific threat levels in the clinical facility as well as within the classroom. Students will be made aware of the exits, AED, fire extinguisher, and lockdown procedures. Students will receive this training during orientation.

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## **Midland College Mission, Values & Goals**

### **Midland College Mission Statement**

Midland College serves West Texas through exemplary teaching and dedicated public service.

We prepare and inspire diverse students to start, strive and succeed. We strengthen community through educational leadership and collaboration.

Midland College provides quality programs and courses, relevant workforce development and continuing education, valuable personal enrichment and cultural experiences, and community and student-centered services.

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### **Mission and Goals of the Midland College Radiologic Technology Program**

Aligned with the mission of Midland College, the faculty and staff of the Radiology Technology Program are dedicated to producing graduates who:

- Successfully completed their Associate in Applied Science degree in Radiographic Technology.
- Pass the ARRT certification exam on their first attempt.
- Enter the workforce as competent, entry-level radiographers.
- Demonstrate empathy, compassion, and respect for their patients.
- Exhibit strong communication and critical thinking skills.
- Commit to lifelong learning and professional growth.

### **Program Goals**

- Ensure students develop the practical skills necessary to become effective radiography practitioners.
- Foster professional, ethical, and empathetic attitudes that enhance the quality of patient care in the field of radiography.
- Cultivate critical thinking skills essential for success as a radiologic technologist.
- Develop strong communication skills for effective interactions with patients and healthcare team members.

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The radiography program has been developed according to the Standards of an Accredited Educational Program in Radiography published by the Joint Review Committee on Education in Radiologic Technology. The curriculum is derived from the 2022 ASRT Radiography Curricula.

The curricula can be found [ASRT 2022 Radiography Curriculum](#). The [ARRT Didactic and Clinical Requirements](#). {JRCERT 4.2, 4.5}

### **Program Effectiveness**

Various methods are used to determine program effectiveness, including summative and formative assessments to ensure student learning outcomes are reached. Ongoing assessment is critical to any educational program to provide evidence to foster ongoing program improvement. In accordance with JRCERT Standard Six, program effectiveness data will be published on the Midland College Radiologic Technology website and will be reported annually.

The program maintains the following program effectiveness data: a five-year average credentialing pass rate of not less than 75% at the first attempt within six months of completion, a five-year average job placement rate of not less than 75% within 12 months of graduation, and an annual completion rate. {JRCERT 1.6, 6.1, 6.2, 6.3, 6.4}

### **Student Learning Outcomes: Program Goals**

- Students will apply positioning skills.
- Students will practice radiation protection.
- Students will analyze radiographic images.
- Students will demonstrate professionalism in the clinical environment.
- Students will manipulate technical factors.
- Students will communicate effectively in the clinical environment.

Graduates will consider themselves adequately prepared to be entry level radiographers.

### **Explanation of Student Learning Outcomes**

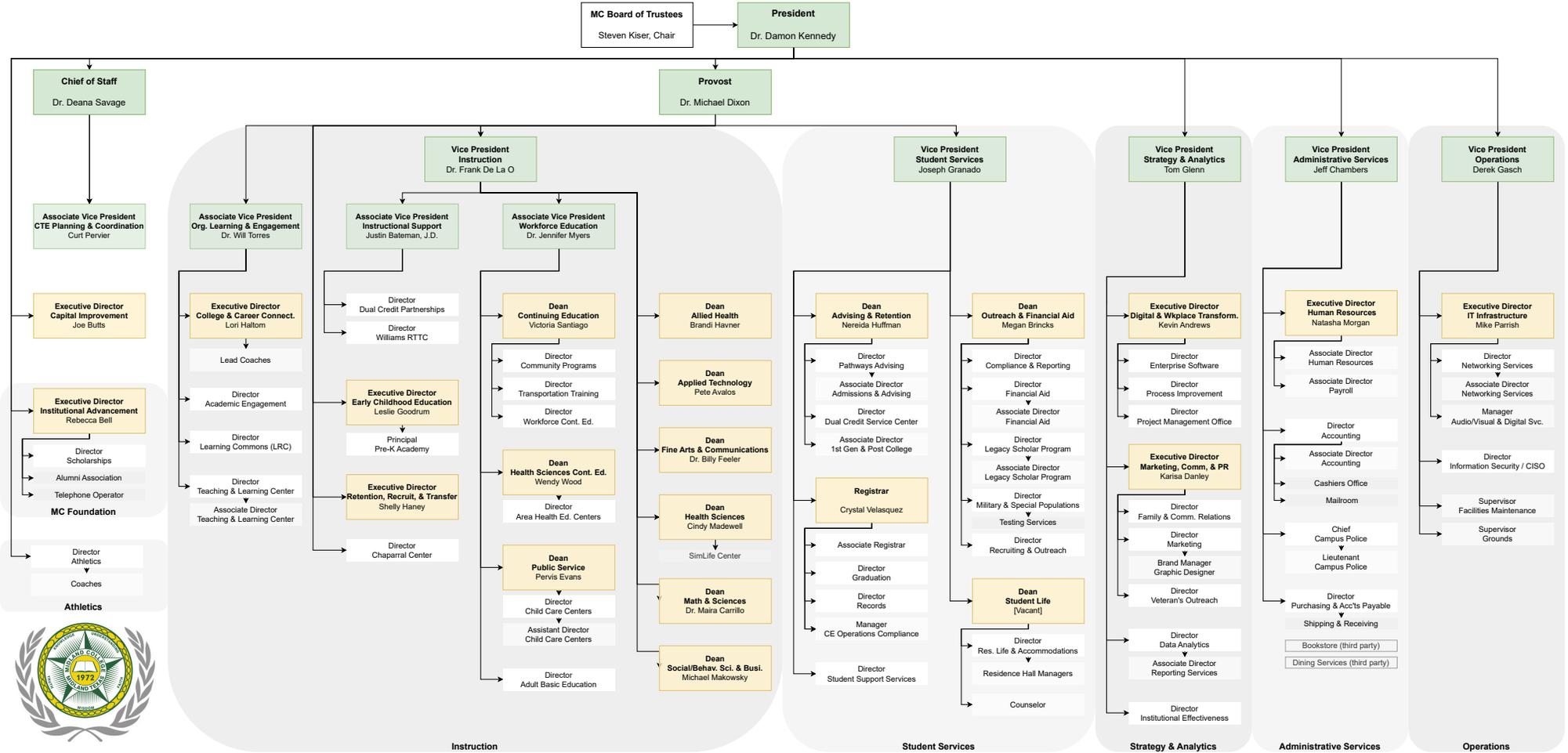
The Midland College Radiology faculty is responsible for developing a curriculum that prepares students to function competently, safely, and compassionately as entry-level radiographers. Each radiology course syllabus contains Student Learning Outcomes (SLOs). Test items, structured and purposeful learning activities, satisfactory performance of radiology skills, simulations, labs, and practicum competencies measure the achievement of course SLOs.

Student learning outcomes guide the faculty to prepare beginning radiographers to provide direct patient care in the form of radiologic exams or procedures in structured settings. Each course in the curriculum plan (e.g., course title/description, credit hours, contact hours, and learning outcomes) is found in the inventory of courses established by the Texas Higher Education Coordinating Board (THECB) in the Workforce Education Course Manual (WECM) and approved by the Midland College Curriculum Committee. Practicum courses are taken concurrently with corresponding didactic/lab courses. The practicum courses are designed to help the student achieve the required competencies by application of didactic content. Practicum and lab learning experiences are planned to increase patient complexity and expectations as the student progresses through the program. {JRCERT Standard Four}



# Midland College Organizational Chart

Last Update August 22, 2024



## Midland College List of Phone Numbers:

Kimberly Montalvo  
Allied Health Division Secretary  
(432) 686-4863

MC Police Department  
(432) 685-4737 (non-emergency)

Midland College Main Operator  
(432) 685-4500

Midland College Bookstore  
(432) 685-4546

MC Portal Instructions  
[MyMC1 Login](#)

IT HelpDesk  
432-685-4788

Tabitha Fuquay  
Program Director  
(432) 221-3417-Office

Sabrina Piazza  
Clinical Director  
(432) 221-3435-Office



# Attendance

The radiologic technology program strives to achieve high ethical and professional standards. In order to achieve these goals, these rules have been prepared to assist you with your educational success.

## Class/Lab Attendance

Class attendance is essential to a student's educational success. Student attendance will count towards your final course grade. See individual course syllabi for the dates and times for class meetings. The attendance requirements, dates, and times are outlined in each course syllabus.

Most classes within the Radiologic Technology Program have laboratory hours within the class component. These classes are listed within the degree plan outline (later in this handbook) and listed on the course schedule on the Midland College website. Course information is relayed as follows: RADR 1309, Patient Care and Introduction to Imaging Sciences (3-3-1). This corresponds to 3 credit hours, 3 didactic hours, and 1 laboratory hour. Class and Lab in Radiologic Technology will be referred to as the same for simplicity. {JRCERT 4.7}

## Laboratory Hours

Class duration has been calculated to include laboratory hours within the scheduled times. Laboratory activities might be planned on any given day during classes. You are expected to make up your laboratory activity if you miss a class. You can expect a separate laboratory grade for any activities. Failure to makeup or schedule laboratory activities will result in a failing grade for that activity. See Failures later in this handbook.

## Absence

Attendance is taken every class day.

You are allowed **ONE** class absence per semester. This does not mean one per class. This means only ONE day. Notification procedures (see notification procedures below) remain in place to notify the instructor/director. An instructor may allow you to link into Teams into the class at their discretion. Laboratory times cannot be obtained through Teams.

**Tardiness.** You are expected to be on time for your class. You are considered **LATE** if you are more than 5 minutes late. You will be considered tardy if you leave before the end of your assigned time unless dismissed by your instructor.

**3 tardies=1 absence.**

**More than 2 unexcused absences=Failure for the course and inability to progress in the program.**

## Clinical Attendance

Clinical rotations are imperative for gaining the skills, knowledge, and understanding necessary to succeed in radiology. You are expected to be in clinical rotations every scheduled day and for the entire shift assigned. You will be scheduled for various shifts, including evenings, nights, overnights, and weekends. Clinical rotations will be posted in advance and you should make all arrangements as needed before your clinical rotation. A student cannot trade rotations with another student. No accommodation for a student's outside work schedule will be made. Clinical attendance and tardies will be graded against the Trajecsys time clock system.

### Absences

Due to the rigorous nature of the program, a maximum of **one** clinical day per semester can be missed, but the time must be made up at the discretion of the program director/clinical director. Students will need to contact the clinical director to determine when they can make up the missed time. Students are not allowed to choose or request where they can do make-up time. *Failure to make up a clinical day missed due to absence will result in Disciplinary Action.*

**Tardiness.** You are expected to be on time to your clinical site. You are considered **LATE** if you are more than 5 minutes late to your clinical site. You will also be considered late if you leave before your assigned time ends unless the instructor dismisses you.

**3 tardies=1 absence.**

**More than 2 unexcused absences=Failure for the course and inability to progress in the program.**

### Clocking In/Out

You will have an orientation to the Trajecsys timekeeping system before clinical rotations begin. The clinical rotation locations are geofenced. You must clock in and out every clinical shift. You will be graded on your clock ins/outs. You do not need to clock in or out for lunch.

### Missed Punches

If a student fails to punch in or out, a missed punch form (found in Trajecsys and in this handbook) should be filled out. It should be:

- Signed by the lead technologist for the time IN and time OUT
- Student must sign the form
- Returned to the clinical director no later than 24 hours after the missed punch.
- Returned to the director either in hand or digitally. You can take an image and send it through Canvas to the clinical director.

If a student does not return the completed form within 24 hours, then the time will not count for the day, and the entire clinical day must be repeated. If the lead technologist is unavailable, the preceptors, director, or managers can sign the form.

Repeated missed punches will result in disciplinary action.

## **Illness**

If you are sent home due to illness, that is an excused absence. Only a lead, administrator, program, or clinical director has the ability to send a student home. Clinical time must still be made up.

## **Assigned Areas**

Leaving your assigned area will result in an absence. A student can leave **ONLY** to perform a competency that no other students need, and if it is within the main hospital. A student must then immediately return to their assigned area. Failure to do so is construed as patient abandonment and is subject to the Discipline Policy.

## **Call in Procedure Clinical & Class**

In the working environment, it is professional decorum to notify your supervisor if you intend to be out as soon as possible. It is considered a No Call-No Show if you do not call into work. As a student in a professional program, you are expected to act in a similar manner. If you are going to be absent, you will contact all of the following:

- *The clinical site.* Students are responsible for obtaining the clinical site numbers to inform the site of a tardy or absence.
- *The program director/clinical director.* **YOU MUST SEND** an email to the program director/clinical director through Canvas and in the email list whom you spoke with when you informed the site of your absence.

## **Timing**

If a student anticipates being absent, they should notify everyone **BEFORE** the shift begins. This does not mean five minutes before the shift begins; the expectation is at least an hour before the shift begins. The person that you will call will take note of the time that a student calls in and will report back to MC Radiology Directors.

## **Who to Contact**

When calling into a facility, you must speak with the lead technologist or a manager. In the case of DIA, you may talk with any technologist and make sure to get their name. Students will never text any technologist, lead, or administrator to inform them of a tardy or absence.

*Failure to comply with the No Call-No Show policy will result in disciplinary action. See the Disciplinary Action Policy.*

## **Emergencies**

Contact through the “Contact my instructor” in Canvas to reach the program and or clinical director.

### **Definitions of Excused vs Unexcused absence**

An excused absence is an absence for religious or bereavement leave only. Definitions for bereavement leave are listed below. An unexcused absence is any other reason. It is a student's responsibility to attend class and clinical. Your child, husband, or relative being sick is not an excused absence. Not having childcare for a known shift is not an excused absence.

Disciplinary action will be taken against students with excessive absences and/or tardies as outlined in the disciplinary policy. As a reminder, the absence policy is no more than 2 for the entire program.

### **Bereavement Leave-Excused**

Bereavement Leave (Funeral) Classroom and Practicum. A student may take up to three days each year for the death of an *immediate* family member. The time missed must be made up.

Immediate family members are defined as:

- Spouse, Mother, Father
- Brother, Sister
- Brother-in-law, Sister-in-law
- Stepparents, stepchild
- Grandparents
- Child

**Proof of bereavement will be required.**

### **Religious Holidays-Excused**

If at any time there is a religious holiday that conflicts with scheduled class or clinicals, you **must** notify the program director immediately. Under Texas Education Code 51.911, a student who is absent from classes for the observance of a religious holy day shall be allowed to take an examination or complete an assignment scheduled for that, say within a reasonable time after the absence if, not later than the fifteenth day after the first day of the semester, the student notifies the instructor of each class scheduled on the date that the student would be absent for the holiday. Notice shall be provided to the instructor in writing and delivered to the instructor personally. A student who is excused under this section may not be penalized for the absence. Still, the instructor may appropriately respond if the student fails to complete the assignment or examination satisfactorily.

### **Vacation**

The Radiologic Technology Program does not provide any vacation time to students in the program. The semester breaks are delineated on the college calendar with the start and end dates when the college will be closed. There will be no classes or clinical scheduled during a holiday, holiday break, or designated time that the college is closed. If a student misses clinical/class due to a vacation, they will be counted as absent and subject to disciplinary procedures. {JRCERT 4.4}

### **Doctor/Dentist Appointments**

A student is not in class all day, every day. There is ample time to schedule appointments around the clinical and classroom schedule. If a student leaves early or arrives late for an appointment, they will be considered tardy. See tardies in the attendance portion of the handbook.

### **Any Other Appointment**

These are not emergencies. Students must be responsible enough to schedule services around their clinical and class schedules.

### **Extended Illness**

A valid physician's note will be provided for any illness lasting longer than two days. Clinical time must be made up and will be arranged with the clinical director.



## **Student Requirements**

### **Transportation Requirements**

The student is responsible for their own reliable transportation to and from school, class, clinical sites, labs, field trips, ect. Acknowledgement required. {AH Travel}

### **Children in the Learning Environment**

The Health Sciences Division strives to provide an environment conducive to teaching and learning for all students. For the safety of all concerned, minor children are not allowed in F. Marie Hall SimLife Center, F. Marie Hall Outpatient Center, Midland Memorial Hospital, or any other clinical setting.

If a lack of childcare prevents attendance to lecture courses, it is the student's responsibility to notify the instructor to determine if an alternate method of participation is available. This would include a link for remote Teams attendance.

### **No alternative arrangements are available for laboratory or clinical experiences.**

The expectation of the students is that they are responsible for arranging childcare for lectures, clinicals, and emergencies. In the event that your child is sick, students have one available "free" absence per semester. A sick child is not an excused absence. A student is expected to arrange for childcare in this instance.

*For childcare resources, see "Child Care" in the [Midland College Student Handbook](#), or the [Midland College Child Care Centers webpage](#). For assistance with emergent, non-academic needs, such as daycare, contact the [Support Our Students \(SOS\) program](#).*

## **Technology Requirements**

- *Computer Access/Email*  
All students must be able to access the online teaching platform, Canvas, and their respective college email accounts. Canvas and email accounts should be checked frequently for assignments, announcements, and/or messages. It is your responsibility to contact the help desk for any issues.
- *Computer Skills*  
All students are required to demonstrate various computer skills through the length of the program. All clinical sites utilize computer systems for patient information. Radiology students must be able to use any clinical site's data/patient management system as permitted by the clinical site. A student who is unfamiliar with using a computer or who has limited computer skills is expected to seek instruction in computer programs and usage so that he/she will be able to meet the requirements of his/her courses.
- *Technical Standards and Essential Functions*  
Allied Healths Programs establish technical standards and essential functions that students have the ability to participate in and potentially be successful in all aspects of the respective program. Students are required to meet technical standards and essential functions of the Radiography Program.

## **Midland College Canvas System**

You will use and participate in your classroom, clinical, and other activities through Canvas. You must have access to the program and become familiar with how to use it. Communications, syllabi, instructions, assignments, quizzes, and some exams will be administered through Canvas. You are also required to upload documents to Canvas for assignments. Exams will be taken with the Lockdown Browser. Training and instructions for Canvas systems [Canvas \(midland.edu\)](https://www.midland.edu/canvas).

Canvas opens for students at midnight on the first day of classes. If you are having difficulty with the Canvas system, please check [Midland College Canvas System](https://www.midland.edu/canvas) for help and training or to reach out to technical assistance.

Students have access to a laptop within the learning lab available for their use, however, those laptops must remain at the F. Marie Hall campus.

## **Equipment in the Class/Lab**

Equipment within the classroom and laboratory includes skeletons, x-ray equipment, image receptors, simulation equipment, desks, and laptops. All equipment is expected to be returned to its rightful place whenever not in use. Expectations: if a student borrows a laptop, it should be returned to its place and plugged into the charger. Students will face disciplinary action if a student is found not to return or treat equipment properly.

## **Clover Learning Platform**

Students will be provided access to the CloverLearning Platform after the start of the program. Students are expected to use the CloverLearning Platform for several assignments, quizzes, exams, and instruction as assigned by the instructor. CloverLearning is the learning platform for “Rad Tech Boot Camp,” one of the most widely acclaimed radiology test prep services available. Be aware that the Clover Learning platform does keep track of time, time involved in videos, assignments and assessments. Students should not be opening the videos to play in the background. Radiology directors will monitor this time. Students will be responsible for the information within CloverLearning.

## **Appropriate Use of Social Networks**

Social networking websites provide unique opportunities for students to get to know one another, share experiences, and keep in contact. As with any public forum, it is important that users of these sites are aware of the associated risks and act in a manner that does not embarrass the students, the Radiography Program, or Midland College. It is also important to ensure patient information is not made publicly available. The Midland College Radiography Program has adopted the following guidelines to assist students in carefully using these sites.

### **A. Personal Privacy**

- Set students’ profiles on social networking sites so that only those individuals to whom students have provided access may see one’s personal information.
- Evaluate photos of students that are posted to these sites and “untagging” photos that depict the student in what may be construed as compromising situations.
- Be aware of the security and privacy options available to them at any sites where students post personal information. Keep in mind that privacy settings are not impervious, and information can be shared willingly or unwillingly with others, even with “Friends Only” access.

### **B. Protection of Patient Information**

- Comments made on social networking sites should be considered the same as if they were made in a public place in the clinical setting.
- HIPAA rules apply online, and students may be held criminally liable for comments that violate HIPAA.
- Remember that simply removing the name of a patient does not make images anonymous. Family members or friends of that patient or of other patients the student is caring for may be able to determine to whom the student is referring based on the context.
- No posting of patient records, including images from any modality. Doing so is a serious violation of HIPAA, subject to criminal action and dismissal from the program.

### **C. Professionalism**

- Use of these sites can have legal ramifications. Comments made regarding the care of patients or that portray the student, colleagues, other students, or Midland College in an unprofessional manner can be used in court or other disciplinary

proceedings. The same applies to pictures, group pictures, and posts tagged by friends or even comments in threads. Any comments or photographs that can be construed as criminal, hateful, discriminatory, slanderous, inciteful, or vitriolic will be examined.

Any platform is considered “online,” even if it is only sharing with another person via text, Snapchat, airdrop, or file transfer. Public forums, message boards, Reddit, TikTok, Instagram, Facebook, Snapchat, ect, are all considered public. **Under no circumstance** should you ever take a picture of a patient or image(s) on your phone. Doing so will result in disciplinary action and possible expulsion from the program. ***You should not have your phone on you during clinicals or class.***

### **HIPPA/Patient Confidentiality**

In accordance with the [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#), Allied Health students must maintain strict confidentiality of Protected Health Information (PHI). To maintain HIPAA compliance, Allied Health students are prohibited from the following:

- Discussing any patient information, including identifiers, care, diagnosis, and/or treatment outside of the educational environment, which is defined as a secure area or classroom, excluding any public area.
- Any unauthorized release of patient-related information
- Photocopying of any patient records in any setting
- Displaying any patient record in any setting, including social media.

You understand that if it is determined that a breach of confidentiality has occurred due to your actions, you can be held liable for repercussions from such actions. You will also be subject to the Allied Health Discipline Policy. {AH: Clinical Expectations, RADR: Discipline Categories. Acknowledgment Required}

### **Personal Electronic Communication Equipment**

Electronic communication devices (i.e., Cell phones, Apple watches, iPads, etc.) are distracting to self and others in classrooms, clinics, and labs. Use of personal electronic communication equipment is **prohibited** in Clinical Affiliate Facilities, the classroom or the lab.

The classroom and all Midland Memorial clinical affiliates or sites are designated as **Electronics-Free Zones**.

Students may provide the Allied Health Division Office contact number, (432) 685-4799, for emergency contact purposes.

*If a student is in non-compliance, disciplinary action will be taken as outlined in the Discipline Categories policy.*

### **Communication with Technologists**

Communicating with preceptors, technologists, leads, or admin staff through text messages is unprofessional. Students and technologists should not text each other. Do not share your information with technologists.

### **Outside Employment**

Working full-time while enrolled in the Radiography Program is difficult and is not recommended. Students in the program will NOT be excused from clinic or classroom activities in order to pursue employment. If students work, they should do so only during times when it does not conflict with program activities.

### **Midland Memorial Hospital Internship**

Students can apply for the Midland Memorial Hospital (MMH) Internship position. This is not required for conditions of admission to the MC Radiologic Technology program, and is completely voluntary on the student. MMH and Midland College are not affiliated together in this aspect. Students can choose from the available schedule to work. Midland College has no vested interest in where a student decides to work, when a student chooses to work, or any issues that may arise when the student is an intern. Should an issue arise from employment-related to MMH, a student should contact their immediate supervisor at MMH.

Students are reminded that while working for MMH, you are expected to act, speak, and be professional at all times. The internship time that is offered to you as a student is a privilege that not many students have the opportunity to receive. Administration is always mindful of students and their work performance.

Students in the program **will not be** substituted for regular clinical staff even though they may be competent in certain aspects of radiography. {JRCERT 4.4} Additionally, should a student be employed by a facility where clinical rotations are normally conducted; they may not use any employer time to substitute for program clinical requirements. A student will not wear Midland College scrubs, logos, or badges at any place other than clinical sites in the capacity of scheduled clinical time. No clinical assignments will be adjusted for a student's work schedule. Conversely, a student may not perform clinical competencies or check offs while performing as an intern on Midland Memorial Hospital Intern time.

When engaged in employment activities, a student must not represent themselves as a Midland College Allied Health student and may not wear any Midland College student identification.

*Students in non-compliance will be subject to disciplinary action as outlined in the Discipline Categories Policy.*

Conflicts of interest between student employment schedules and lecture, lab, or clinical schedules will not be considered. Lecture, lab, and/or clinical schedules will not be altered. Any deviation from assigned schedules will be treated as absent and subject to the attendance policy.

### **Emergency Contact Information**

An emergency contact information form must be on file with the Division of Allied Science Secretary and Radiology Program Director. If you need to change your emergency contact information at any time, please see the program director. A form is listed at the bottom of this handbook. This form should be updated after any change and at least once a year.

### **Allied Health Release of Information**

Students within Allied Health Programs at Midland College must give permission to submit to a criminal background check, proof of compliance with vaccinations and/or laboratory results proving immunity, as well as proof of a negative drug screening. In order to provide proof or an attestation of proof to clinical affiliates, the student must sign a Release of Information. This form is found in the appendix of this handbook. {AH: Conditions of Admission}

### **Scope of Practice**

Allied Health students must abide by the respective [Standard of Ethics](#) for the program in which they are enrolled. The ASRT has published information regarding the [Resources and Decisions Tree for Determining Scope of Practice](#) in the event of questions.

Additionally, Allied Health students are prohibited from performing any unassisted skill and/or procedure that exceeds their level of educational experience and/or is outside of the scope of practice. Failure to comply will result in disciplinary action. {AH: Scope of Practice}

### **Standard of Ethics**

The ARRT Standards of Ethics will be covered in great detail during orientation. This is the foundation document for radiologic technologists' scope, professionalism, and ethical standards. Students should become familiar with this document. A copy is provided to you in this handbook as well as found online in Trajecsyst. Acknowledgment is required.

### **Professionalism**

Allied Health students are prohibited from using any personal electronic communication device (i.e., cell phone, smartwatch, iPad, etc.) in any patient care area. {AH Student Conduct} Students are reminded to remain professional at all times if they can be seen or heard.



# Dress Code

## Personal Appearance/Uniform Expectations

In accordance with Clinical Affiliate agreements, all Allied Health students will be required to wear scrubs during class, lab, and all clinical activities. This will include extracurricular activities such as Career Fairs, Science Day, ect.

Health Sciences uniforms will consist of the following:

- Scrubs – each program has a designated color. (Radiology is dark gray).
- Health Sciences student badge
- Program patch
- Radiation dosimeter

If there is a discrepancy between Midland College, Midland College Health Sciences, and Clinical Affiliate policies, **the stricter policy will apply.**

**While at clinical practice, radiology classes and/or radiology lab**, students are expected to be in complete uniform. Uniforms consist of clean, closed-toe shoes, a dark gray scrub top with the student radiology patch on the **right shoulder**, and dark gray scrub pants. Scrubs must be neat, clean, wrinkle-free, without holes or frayed areas, free from offending odors, and fit properly. Scrubs must be of the appropriate scrub material, ie, no leggings, denim, or tights.

Scrubs will not have additional colors or two-tone scrubs. You must be able to stand, bend, squat, and move patients comfortably and effectively while wearing scrubs. No abdominal area, hip area, buttock area, or cleavage area is permitted to be shown.

Students with special uniform needs due to cultural or religious requirements should see the program chair before purchasing uniforms. Accommodations will be made for students' cultural, ethnic, or religious obligations. Head coverings must be solid black or white.

**Radiology Patch**-must be purchased at the Midland College bookstore and must be on your scrubs before starting clinical rotations. Your patch must be on the **right shoulder**, affixed permanently to the deltoid area. Do not use glue, as this will not last through washings.

**Cold Weather Clothing.** During the cooler months, you may wear a white or black logo-free long-sleeved undershirt. You may also wear a long-sleeved dark gray scrub jacket with the radiology patch on the right shoulder. No other colors of undershirts or outer jackets are acceptable.

While at clinicals: Students will not wear sweaters, jackets, or hoodies over their scrubs. Students must represent Midland College Radiologic Technology Program at all times during clinicals. If a student is cold, see the cold weather clothing policy listed above. Any student found wearing a non-conforming outerwear over their scrubs will:

- Be asked to remove the article and given a verbal warning
- A subsequent violation: the student will be asked to leave and will receive a written warning and a tardy
- Additional violation: The student will be sent home, given an absence, and disciplinary action will be taken

**Classroom Dress Code.** The clinical dress code applies to class/lab as well. Students are reminded that F. Marie Hall is an active patient care area. Students can wear a sweater or jacket to class, but the scrub top should be underneath it. Jackets or sweaters are not offensive, loudly colored, stained, frayed, or torn. You may be asked to remove your sweater or jacket to ensure you have a scrub top underneath. If a student is out of uniform, they will:

- Be asked to correct the situation and will be given a verbal warning and a tardy (as it is assumed they would need to leave to correct)
- A subsequent violation: the student will be asked to leave and will receive a written warning and a tardy
- Additional violation: The student will be sent home, given an absence, and disciplinary action will be taken

While in class, you are also expected to maintain your hair and uniform in a professional manner—no long earrings, perfume, clogs, Crocs, slippers, pajamas, sweats, leggings, hats, or jeans.

### **Flu Declination Additional Requirements**

Students who do not receive a yearly flu shot are subject to higher PPE requirements in order to remain in clinical facilities. If a student does not receive their annual flu shot, they must wear a mask **at all times** while in the facility. The mask is non-negotiable and is then considered part of the student's dress code. If a student is found in violation of the dress code, they will be subject to:

- Be asked to correct the situation, given a verbal warning and a tardy
- Subsequent violation will warrant an immediate removal from the facility, an absence, and immediate Category I discipline violation and dismissal from the program {AH: Failure to adhere to written policies of Midland College, Midland College Allied Health, Allied Health Program and/or Clinical Affiliate(s)}

If a student chooses not to take a flu vaccination for any reason, then that student is choosing to respect the formal policy in place at Midland Memorial Hospital. {MMH Flu Policy}

### **Dosimeter**

A dosimeter, or film badge, is worn on the shirt's collar outside of any lead aprons or thyroid shield. Film badges are mandatory and are considered part of your uniform. If you are at clinical

at any time without your film badge, you will be offered the opportunity to correct your uniform. However, you will be counted as tardy.

If you have not reported your film badge as lost or damaged, you will be subject to disciplinary action, as it is equipment leased to Midland College. Please see the equipment paragraph in the student requirements section. If you have lost or damaged your film badge, it will cost \$140 to replace.

Students must also wear their dosimeter badges at all times in class as we may use the energized lab at any time. {RADR: Radiation Monitoring, Dosimeter Acknowledgement}

Radiation monitoring procedures will be covered in a later section of this handbook.

### **ID/Student Badge**

Your picture ID is considered part of your uniform and must be on you at all times while in clinical, lab, and class. If you forget your ID, you can correct the situation and be counted as tardy. If you lose your ID, you must pay for a new one. It is the student's responsibility to arrange with MMH Human Resources to obtain a new badge. The student must contact the Allied Health Division office for an appointment to receive a new Allied Health badge. You will not be allowed time off from class or clinicals in order to obtain new badges.

Your student badge will always be worn with your name visible to patients and staff at eye level and always above the waist. A clip or breakaway lanyard is advisable.

**Surgical Clothes: UNDER NO CIRCUMSTANCE** are students allowed to wear light blue or green surgical scrubs, a blue surgical jacket, a white lab jacket, or a yellow isolation jacket outside of the surgical area (past the red line). You **will not** wear surgical scrubs/jackets unless you are in a rotation that requires it, i.e., surgery, Cath lab, interventional, etc.- **no exceptions**. Failure to comply with this will result in disciplinary action.

### **Facial Hair/Hair/Tattoos/Jewelry**

- Long hair will be pulled back and/or worn up at all times during clinical for both men and women. This does not mean "messy bun" on the top of your head. This implies a ponytail, large clip, French braid, or bun. Hair should remain out of your face if you move. A headband is allowed if it is black or white only. If you have weaved hair/braids, it must also be pulled back during clinical, class, and labs. **Be aware that alligator clips, weaves, and clip-in hair are usually made with metal. You will not be allowed to wear these items while near an MRI unit.**
- Hair, including facial hair, must be of a natural color, clean, and neatly styled. No mohawks, rainbow colors, shaved/unshaved styles. No checkmarks or designs on the scalp.
- Head/Hair coverings- the only allowed head or hair coverings are for religious or cultural reasons. Speak with the program director about this.

- Facial hair should be tidy-beards neat or you should be cleanshaven-no stubble. If you cannot wear an N-95 mask, then your facial hair is too long.
- Tattoos are allowed under limited circumstances. Tattoos are not allowed if they are visible on the face, the front of the neck, above the collar line, or on the head. Tattoos behind the ear, on the back of the neck, or visible above the collar line are expected to be covered at all times. {MMH Policy}
- Jewelry: No dangling earrings. Small studs are allowed. No gauges of any kind. Gauge holes will need to be covered with a flesh-colored band-aid. Ear bars are not allowed. Ear cuffs are not allowed. Necklaces are not allowed.
- Rings: Large rings or rings with tall settings are not allowed unless the jewelry is for religious or cultural reasons. Simple wedding bands are allowed.
- Nose Rings: **Small** nose rings, piercings or studs may be worn. No nasal septal piercings.
- No jewelry in the lips, cheeks, eyebrows, tongue, septum (nose), or other parts of the face are allowed.
- Cosmetics should be moderately applied to what is appropriate for daytime wear.
- Eyelashes-some eyelashes are magnetically applied. You need to be aware of this. **No magnetic false eyelashes will be allowed.** False eyelashes are allowed on the condition that they are within normal daytime wear. Extremely long eyelashes are not considered within professional expectations. If you are asked to shorten the length of your eyelashes you are expected to comply.
- Students are expected to demonstrate clean hygiene: bathe/shower before attending clinical and/or class. The use of deodorant/antiperspirant is expected.
- Perfume, cologne, or heavily scented hair products should not be used.
- Nails should be **short**, clean and neat. No acrylic, false or press-on nails. Nail polish, dip polish, and shellac polish on natural nails are allowed, provided no chips or cracks are present. Keep natural nails tips less than ¼ -inch long. Nails should be polished in natural colors.
- No gum chewing while in clinical or lab.

### Hickeys

- Hickeys can be considered offensive, unprofessional and distracting in nature and must be covered by bandages, clothing, or cosmetics.

### Hats

- Hats, caps, bandanas, doo rags/durags, sleep bonnets, etc. are not permitted. Religious head coverings are permitted; however, you must speak with the program director so that safety can be ensured in an active working environment.

Any student reporting to the clinical site in a uniform that is unacceptable will be

- Asked to leave, correct the issue, counted as tardy, and will receive a verbal warning. If the student is away from clinical for longer than thirty minutes, they will be marked as absent.

- Should an infraction happen again, the student will receive a written warning, be asked to leave the site, be marked as absent, and will be subject to the Discipline Policy.

Clinical preceptors, clinical directors, program directors, and MMH radiology administration staff have the final say regarding judging the student's uniform and personal appearance. The student is expected to comply and not argue the nature of the infraction. Arguing with an official can elevate the situation to disciplinary action.

### **Professional Image**

Students are reminded that they should portray a professional image at all times while on Midland College and Midland Memorial Hospital property, at all clinical affiliates, and at any Midland College-approved event.

## **Castlebranch System**

Midland College Radiologic Technology Program utilizes the CastleBranch system as a confidential depository for a student's medical records. A student will be given information for utilizing this system before clinicals begin. A student is expected to upload all requested information into the CastleBranch system, schedule their drug test, and complete their drug test. Be aware that rescheduling a drug test incurs a fee that is payable by the student. Castlebranch system fees are incorporated into a student's tuition. However, multiple reschedules are risk to the student.

A student can choose a location near them in order to perform the drug screening. Students must have a CLEARED drug screening, all immunizations, all CPR, and all TB information within CastleBranch before being allowed to attend clinical rotations. {AH Conditions of Admission}

CastleBranch will send email reminders to students if there is a vaccination or certificate that is about to expire. It is the student's responsibility to complete any and all requirements BEFORE the due date and upload the documents. Failure to do so will cause a student to be removed from clinical rotations, and they will be counted as absent until rectified. **There will be no time off from class or clinics in order to obtain vaccinations, CPR, or TB testing.**

### **Cardiopulmonary Resuscitation (CPR)**

All students are required to have current CPR throughout the entirety of the program. A CPR certification is valid for only two years. CPR must be:

- A continuing education from MC. Check here for classes offered: [Basic Life Support - American Heart Association](#)
- An accredited American Heart Association safety course from a local agency

- The Midland Memorial Hospital CPR training certification offered to employees

**Valid** documentation should be uploaded to the system. Valid documentation includes the date, class, and CEU hours offered, the course ID# and the AHA instructors' signature.

### **Tuberculosis (TB) Tests**

“Tuberculosis is the single most deadly disease known to man. Approximately 1.7 billion people are affected worldwide, representing one-third of the world’s population,” (Infection Control Today, May 2000). Tuberculosis screening is a clinical yearly mandate. The date of your reading is the day that it will expire in exactly one year. This test involves placing a small amount of purified protein derivative (PPD) in your forearm. You then must return when the facility instructs (within 48-72 hours) to read the results. If you do not return to the facility within the allotted time, the test is invalid and must be repeated.

There are some individuals who may have been born in other countries who have received the tuberculosis vaccination. If these individuals receive a PPD test, that test will return positive results. This does not mean that they have TB, this means that the test is reacting to the antibodies from the vaccination. These individuals must undergo a separate process to ensure clearance from tuberculosis. Either a student must have a QFT-gold blood test or current chest radiograph and report demonstrating clearance. Please check with the program director for further instructions if you have questions. The QFT-gold test is valid for one year, the chest radiograph results are valid for two years.

### **Flu Vaccination**

Clinical affiliates and Midland Memorial Hospital require a yearly flu vaccination. Flu shots for the year are available from September to October every year. Students are required to obtain a yearly flu shot when it is newly offered. The flu shot will expire exactly one year after you obtain the vaccination. You are required to upload the required proof to the Castlebranch system. The flu shot is mandatory for all clinical personnel. If a student chooses not to obtain the flu vaccination, then that student is subject to additional dress code requirements in the form of personal protective equipment (PPE). The student is subject to additional PPE requirements, such as wearing a **mask at all times** while in any clinical affiliate. The Clinical Affiliate holds the final say on whether or not they will accept the student. If a student is out of the dress code, they are subject to disciplinary procedures.

### **COVID-19**

COVID vaccinations are no longer required.

### **Childhood Vaccinations**

In accordance with [Title 25, Texas Administrative Code RULE §97.64](#), all Allied Health students are required to have the following immunizations before they may engage in the course activities which will involve direct patient contact with potential exposure to blood or bodily fluids in educational and medical facilities:

- Hepatitis B
- Measles Mumps-Rubella
- Varicella (Chickenpox)
- Tetanus Diphtheria Pertussis (Tdap) (expires after 10 years)
- Bacterial Meningitis (if required, according to [Texas Enrollment Requirements, as listed in the Midland College Catalog](#))

{[Texas Department of Health and Human Services, Vaccination Requirements](#)}

No student will be allowed to participate in clinicals who have not had their complete childhood immunizations, as well as the Midland College required Bacterial Meningitis vaccination, if required. Titers can/will be accepted in lieu of immunizations for certain vaccinations. Titers must be requested from your family physician.

Religious exemptions are **not available** for routine childhood/adult vaccinations.

Midland College Radiology Program reserves the right, in accordance with Midland Memorial Health and clinical affiliates to require additional vaccinations as necessary and/or mandated by the Centers for Medicare and Medicaid (CMS).

{Allied Health Conditions of Admission, updated 8/2024}[RADR: Immunizations & Screenings  
{JRCERT 5.3}

## Safety

### **New Student Orientation**

Before a student is allowed to participate in clinical experiences, they will undergo several orientation and safety training programs on various aspects of healthcare. This will include, but is not limited to, infectious disease, magnet safety, bloodborne pathogens, universal precautions, and proper handwashing techniques.

### **Clinical Participation**

It is your responsibility to have updated and complete vaccinations, TB screening, Flu, and CPR at all times during the entirety of the program. Students will be removed from clinical rotations if they are not in compliance. {RADR: Immunizations and Screenings} {Allied Health Policy-Immunizations and Screenings}

### **Facility Safety**

You will follow all safety policies of the facility that you are currently in. For instance, in the event of a fire, you will participate in the Rescue-Activate-Contain-Evacuate (RACE) procedures. In the event of a weather-related incident, you will participate in the alert level indicated. It is very important to learn your response to the codes/alerts and to know your role within the department. You will familiarize yourself with all exits, fire alarms, fire extinguishers, etc.

### **MRI Safety & Screening**

The MRI systems have very strong magnetic fields that may be hazardous to individuals entering the MR environment or room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. **Students will be required to complete the required MRI screening forms prior to participating in the MRI observation.**

Before entering any MR environment or MR system room, the student must remove all metallic objects including but not limited to:

- Hearing aids
- Dentures and/or partial plates
- Keys
- Mobile phones or electronic devices
- Eyeglasses
- Hairpins, clips, barrettes
- Jewelry, including any body piercing jewelry, watches
- Safety pins, paper clips, money clips
- Credit cards, bank cards, or any card with a magnetic strip
- Coins
- Pens, pocket knives, nail clippers, tools
- Clothing with metal fasteners and/or metallic threads
- Any loose metallic item

All students will complete an MRI safety evaluation and magnet awareness training before starting clinical rotations. The completion of this form will ensure all students are safe to enter an MRI area if required to do so. This form will be stored in the student's files for the duration they are in the program.

### **MRI Safety Orientation:**

Before being allowed into the facility, all students will have several safety orientation trainings. Students will complete the assigned training from Medical Center Hospital, which includes a post-test and acknowledgment. Students will also:

- 1) Watch the [Level 1 MRI Safety Training](#) video
- 2) Review the [American College of Radiology Safety Screening Form](#) (in the appendix) for MRI Procedures and Hazards
- 3) Review the "MRI Environment and Zone Safety" Form

**Students Requiring Additional Screening-**If you are identified for additional screening measures, an appointment will be made for you to receive a screening skull x-ray. Midland College will absorb the cost of the screening. The report will remain within your permanent file and will be released to any clinical affiliate upon request.

If you are identified to have unsecured metal in a sensitive area, you will NOT be allowed to enter the MRI suite. You will not participate in an MRI rotation during the entirety of the program. Alternative rotations will be provided.

**MRI Status Change.** If your physical status changes—you receive ANY surgery for an implantable device, and/or welding accident, ect\*\*\* **YOU MUST NOTIFY THE PROGRAM AND CLINICAL DIRECTOR** that your status has changed. There is a Change Status listed at the back of this handbook and within Trajecsys. We will evaluate the best options moving forward and/or provide screening for your safety. {JRCERT 5.1, 5.2, 5.3; RADR: MRI Safety} Acknowledgement required.

**Pregnancy & MRI.** Pregnant students (declared or not) should not perform duties within the MRI Suite. Pregnant students may remain in Zone 3 during active scanning. (ACR Manual on MRI Safety) {JRCERT 5.2} Acknowledgement required.

{JRCERT 5.1, 5.2}

# Radiation Safety

## Radiation Monitoring

All students will adhere to proper radiation protection and monitoring. Radiation monitoring badges are considered part of your clinical uniform. Radiation badges should be worn at the collar, outside of the lead apron, at all times. Failure to have your radiation badge will result in disciplinary action.

If a student loses or damages the radiation badge, they will need to notify the clinical or program director immediately. It will cost the student \$140 to replace.

Care must be taken to protect your badge from extreme temperatures, moisture, direct sunlight, and accidental exposure to radiation. If your badge is exposed to any of the previously mentioned exposures, report it to your clinical instructor immediately.

Dosimeters will be checked in class every quarter. Dosimeter files will be a) collected in your student file and b) sent to your email address within 30 days of receipt. Your complete radiation monitoring files will be kept in your student file and released to you upon graduation for lifetime monitoring.

{JRCERT 5.1}

## Radiation Limits

**Dose-**If a student exceeds the student radiation dose limit, they will be removed from the clinical setting. An investigation will be performed to determine the reason behind the readings, and a Student Exposure Report will be completed. The program director will examine the circumstances and make a decision regarding the student's program status.

Dosage: 1 mrem=0.01mSv=0.001 rem

Student Dose Limit: Quarterly	250 mrem (2.5 mSv)
Student Dose Limit: Annually	1000 mrem (10 mSv)
Pregnancy-entire gestation	0.5 rem (5 mSv) NRC 20.1208

{NRC 20.1208-Occupational dose for embryo; NRC 20.1201-Occupational dose for adults.}

{JRCERT 5.1, 5.3, 5.5; RADR: Radiation Monitoring, Documentation of Radiation Monitoring Readings}

## Radiation Safety

**Students will not hold the image receptor during any radiographic procedure. Students should not hold or immobilize a patient during any radiographic procedure.**

Students will never take the place of radiology personnel, regardless of their competency level.

Students are expected to protect themselves by wearing lead aprons, jackets, thyroid shields, and/or glasses where available. {JRCERT Standard Five}

### **Energized Labs (Clinical Affiliates)**

Midland College uses clinical affiliates for training with radiographic equipment. The proximity of the classroom in F. Marie Hall Outpatient Center warrants that radiology students can use either room one or room two in the Outpatient Diagnostic area if there is no patient flow. All radiographic equipment is in compliance with all applicable federal and state radiation safety laws, including updated Equipment Performance Evaluations (EPE) and FDA certificates. {JRCERT 5.2}. Students are expected to act appropriately at all times while in the energized lab. All students will wear their dosimeters or be asked to leave. All students will exercise radiation safety.

{JRCERT Standard Five}

## **Health & Safety**

### **Infection Control/Universal Precautions**

Students are advised that as part of the standard routine of performing clinical examinations on patients in medical facilities, exposure to contagious and pathogenic organisms may occur. Students will be required to abide by the safety rules and regulations that govern the clinical facility.

Students will be orientated to the hospital and the policies regarding infection control, universal precautions, proper handwashing, proper PPE donning, and doffing before attending clinicals. {JRCERT 5.3,5.5; RADR: Safety-Universal Precautions}

### **Bloodborne Pathogens**

An educational setting within a healthcare environment will pose certain risks to the student. With proper education and assurances that the students will comply with the policy, those risks can be mitigated. Students new to the program will be taught basic universal precautions and standard precautions before attending clinicals. Students will be taught how to properly wash their hands, don gloves, and wear appropriate PPE as needed for higher-level patients. Due to the nature of healthcare, students may be exposed to blood and/or bloodborne pathogens.

### **PPE**

A student will be orientated and taught how to don and doff PPE required for isolation procedures. A student cannot object to wearing the required PPE for a known pathogen. This includes, but is not limited to, face shields, masks, N-95, gloves, gowns, hair bonnets, or booties. A student cannot pick and choose what they wish to wear students will wear ALL REQUIRED

PPE for the precaution level indicated for the patient. Failure to do so will result in disciplinary action.

### **COVID/Airborne Diseases**

All students will be taught Universal Precautions. Universal precautions should be used with every patient, regardless of known or unknown health status. [Droplet Precautions](#) are routinely used within the facility.

**COVID/FLU Masking:** In accordance with state and Federal policies, the wearing of masks is dependent on several factors, including local transmission levels, hospitalization levels, etc. At any point in time, if a county or state is mandated to mask, all students will abide by the policies as set forth by the facility, including but not limited to surgical masks, N-95s, face shields, gowns, airborne precautions, droplet precautions, etc.

There are many other airborne diseases that require the use of masks and/or face shields. Discriminating against a patient or refusing to perform an examination based on a known or suspected disease is against the ARRT Standards of Ethics for radiologic technologists. *Please see the ARRT Standard of Ethics section in this handbook.* This will result in a Category I infraction: abandonment of patient care.

**COVID:** At this time, COVID-19 vaccinations are no longer required by CMS (Centers for Medicare and Medicaid) or Midland Memorial Hospital. Should a change occur where it once again becomes mandated and a student wishes to object- a medical or religious exemption form must be submitted and approved by the Midland Memorial Hospital Exemption Committee. No other objection other than the approved appropriate process will be considered.

### **Flu Objection**

If you have an exemption for the COVID or Flu vaccine, you are reminded that you are held to higher PPE standards, including- face shield, masking, and social distancing requirements. This will be considered part of your uniform. If you fail to adhere to your dress code, you will be in violation of the dress code policy and will be subject to the Disciplinary Categories Policy.

### **Exposures**

A student who has been potentially exposed to infectious diseases in the healthcare setting will be identified by the Infection Control Practitioner within Midland Memorial Hospital, the Protocol for their care and prophylaxis will be recommended by the Hospital Employee Health, and health care and prophylaxis will be supervised by the student's primary care physician. If after hours the student should immediately go to the emergency department for care. Students are reminded that they are NOT employees of Midland Memorial Hospital or Midland College and must maintain individual private health insurance at all times during the program.

## **Patient Care**

All students will be expected to provide appropriate care to all patients assigned to them in any healthcare setting. These assignments may include patients with medical diagnoses of MRSA, C Diff, COVID-19, tuberculosis (TB), hepatitis A or B, and/or AIDS. Additionally, it will be the responsibility of the student to implement universal precaution measures when providing care and adhere to all facility policies. {RADR Policy- Universal Precautions} Failure to do so will constitute a Category I infraction, abandonment of patient care.

The student also bears responsibility for minimizing transmissions of pathogens. Cleaning of rooms, beds, boards, lead, radiology equipment, furniture, high-touch areas, counters, desks, phones, etc, is expected.

## **Allied Health Incident Report**

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

1. Immediately notify the Clinical Preceptor
2. Notify the clinical site supervisor. If necessary, the physician will then be notified according to hospital protocol.
3. Be responsible for completing the incident report per facility protocol and placing it on the chart in accordance with hospital policy
4. Forward a copy of the incident to the Clinical Coordinator
5. Further discuss the incident with the Clinical Coordinator who will assign a subsequent Midland College Radiologic Technology Program Incident Report that explains:
  - The precipitating events that led to the incident
  - How and why the incident occurred
  - How the student intends to avoid this situation in the future
  - The commitment from the student to prevent this or similar incidents from happening
  - Follow up to the incident

A copy of an incident report is included in this handbook. Incident reports can also be found with the Program Director and within Trajecsyst. Incident reports are expected immediately following the incident, no later than 24 hours.

## **Pregnancy and Pregnancy-Related Conditions**

Title IX is a federal law that prohibits discrimination on the basis of sex in an education program. Among the types of gender discrimination covered by this statute, Title IX protects against discrimination related to pregnancy or parental status. Protection extends to students who are pregnant or who have either had a false pregnancy, termination of pregnancy, have gone through childbirth, or are recovering from any of those conditions. Title IX regulations also prohibit a school from applying any rule related to a student's parental, family, or marital status that treats students differently based on their sex.

Pregnant students are encouraged to notify their Program Director to be advised about necessary safety precautions that should be taken in the clinical setting due to the potential for exposure to various pathogens, mutagens, and carcinogens, as well as MRI and radiation safety.

It is important to note that students are not required to declare their pregnancy. A student can choose to declare pregnancy and then revoke that declaration at any time and no reason is needed. A student can also choose to remain undeclared for the entire duration of their pregnancy. {JRCERT 5.1, 5.3; RADR Pregnancy and Related Conditions}

*For information about accommodations related to pregnancy and childbirth, visit the [Midland College Title IX](#) webpage. To request accommodations related to pregnancy and childbirth, visit the [Midland College Accommodations](#) webpage.*

The 'Notice of Accommodation' form from Midland College Accommodation Services must be received before accommodations are provided. Allied Health faculty will provide accommodations as outlined on the 'Notice of Accommodation' form. Accommodations must be requested each semester.

The Pregnancy Policy is consistent with applicable federal regulations and state laws. Every effort will be made to protect the well-being and privacy of the student. All students are informed of the risks of radiation exposure during pregnancy.

- Declared pregnant students will be provided an additional personal radiation monitor to be worn at waist level under any lead apron and will be identified as the fetal dose monitor.
- Student radiation exposure will be continuously monitored. If the fetal dose monitor reaches 5 mSv,\* the student will be removed from clinical assignments in radiation areas.
- The student is responsible for the monitor. If lost, it will cost \$140 to replace.
- If the student exceeds the maximum permissible dose, she will be withdrawn from all clinical courses for the remainder of the pregnancy.
- A student may rescind a pregnancy notification in writing at any point for any reason without explaining the reason. The student must then return the fetal dose monitor to the program director.

“In accordance with NRC regulation 10 CFR 20.1208 “Dose to an Embryo/Fetus”,  
(a) The licensee shall ensure that the dose equivalent to the embryo/fetus during the entire pregnancy, due to the occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)”.

Declared pregnant students cannot revoke a declaration in order to obtain clinical experience in MRI.

A Pregnancy Declaration/Withdraw of Declaration form is found in the appendix of this handbook and online in the Trajecsys depository.

## Classroom Policies

You are expected to complete your assignments by the due date indicated. Late work will NOT be accepted and will result in a zero. If you miss class work due to illness, you are expected to contact the instructor for the information you missed. You are expected to complete any and all missing assignments.

Students should be aware that assignments are due by 8 AM. This includes all assignments, quizzes, tests, preceptor evaluations, clinical evaluations, exam logs, repeat logs, etc.

While in the classroom, a student is expected to remain attentive, engaged, and focused on the material. **Cell phones, iPads, and tablets are not allowed.** Laptops will be provided for in-class use only. Any tests taken will have a Browser Lockdown. All work is expected to be your own. Participation in group assignments as needed is expected. You are expected to remain professional and considerate of your classmates and instructors.

### Grading

Due to the close patient contact and a medical imaging technologist's scope of responsibility, mastery of academic material and technical competency is required. Students must maintain a grade of "C" or better in each course in order to progress through the program.

Letter grades will be assigned as follows:

A=90-100

B=80-89

C=70-79

D=60-69

F=Below 60

All courses must be completed with the minimum score for the student to progress to subsequent semesters. Any student having academic/clinical difficulty will be counseled during the semester. Each student will have an 8-week meeting with the program director in order to assess the midsemester status of grades and/or clinical competency.

Each class will have a syllabus available in Canvas that will outline the grading scale, breakdown, and expectations of the students. Students should expect attendance, professionalism, team communication, and class engagement to be a part of their grade.

The student will be notified of an academic/clinical deficiency in writing and counseled by the instructor of the specific course. **Students receiving a failing grade on any quiz or test must make an immediate appointment for advisement and counseling by contacting the instructor through Canvas within 24 hours. Failure to do so will result in disciplinary action.**

To ensure timely access to faculty for academic concerns and problems, please utilize instructor office hours which as posted on the faculty webpages and outside office doors.

Bonus points and extra credit should not be expected. It will be the choice of the individual instructor.

Test Challenge Forms are available (a copy is at the end of this handbook) in the instance there is a discrepancy about test questions.

### **Lab Area Policies**

Expectations of students will be the same as classroom and/or clinical guidelines. No food, drink, or gum chewing is allowed. You are expected to remain attentive, quiet, helpful, and engaging with your instructor. Absolutely no horseplay or inappropriate behavior. Professionalism is expected at all times.

## ***The Clinical Experience***

### **List of Clinical Sites**

Midland Memorial Hospital-400 Rosalind Redfern Grover Pkwy, Midland  
F. Marie Hall Outpatient Center-4214 Andrews Hwy, Midland  
DIA Legends-5615 Deauville Blvd, Midland  
DIA Main-200 Andrews Hwy, Midland  
West Texas Orthopedics-5615 Deauville Blvd, Ste 220 Midland  
Basin Orthopedic Surgical Specialists-1 Parks Legado Ct, Odessa  
Texas Oncology-Allison Cancer Center, 400 Rosalind Redfern Grover Pkwy, Midland  
OrthoMidland-4304 Andrews Hwy, Midland

### **Rotation Days/Times**

Rotation schedules will be posted within Canvas at the beginning of the semester. Subsequent schedules will be given to students several months before the next semester. No rotations can be switched with other students. Rotations are set well in advance of the upcoming semester. Clinical rotations will expose the student to a wide variety of experiences that are necessary for a radiologic technologist. You will be scheduled for various shifts, including weekends, evenings, early mornings, etc. You will also rotate through various departments and modalities to gain a better understanding of the way that diagnostic imaging is used. You will see a wide variety of areas at the hospital, and several rotations will be assigned at several different times. Higher level modalities will not be assigned until the second year and after a majority of your basic clinical competencies have been completed. Higher-level modality rotations include CT, MRI, Nuclear Medicine, Interventional Radiography, Cath Lab, and Mammography. {JRCERT 4.4}

## **Markers**

You will be provided with one set of lead markers with a unique identification code that is specified for you. Trading markers is not permitted. If you lose your first set of markers, another set will be \$30 payable to the program director. You can also purchase markers on Etsy relatively cheap. **The markers must have your unique number and be the customary red/blue (RED is right, BLUE is left) colors.** You can also choose to purchase a badge buddy. If a student does not use their marker in images they do not count for performance evaluations.

## **Lunches and Breaks**

Students are allowed a thirty (30) minute lunch break, which will be scheduled according to the shift the students are working and given at the discretion of the supervising radiologic technologist. Additionally, students may be permitted a fifteen (15) minute break for every four (4) hours they are in attendance, to be taken at the discretion of the supervising radiologic technologist. These are the only times at which a student may leave the assigned clinical area. Students should not visit other areas of the facility during break time or interfere with the educational experiences of other students during these times. Do not clock out for lunch, the time will be subtracted at the end of the semester.

## **Eating and Smoking**

While at clinicals, students shall only eat or drink during breaks and only in designated areas. Students will have a thirty (30) minute lunch break assigned at the discretion of the Clinical Preceptor. In accordance with Clinical Affiliate agreements, Allied Health students are prohibited from the use of any form of tobacco and/or e-cigarette while participating in clinical and/or lab activities.

## **Banking of Clinical Hours**

No banking of clinical hours is allowed. A student may not shorten the length of their clinical rotation by accumulating compensatory time during off days or by arriving early or staying late. Students are expected to arrive on time and leave on time. Students are expected to complete all assigned days of clinicals.

## **Holidays**

The current college schedule will outline the holidays that the college will observe. Midland College is also closed on Fridays during the summer semester. There will be no clinicals or classes scheduled on the observed holidays listed on the college schedule.

## **Clocking In/Out**

You will have an orientation to the Trajecsys timekeeping system before clinical rotations begin. It is very straightforward. The clinical rotation locations are geofenced. You must clock in and out every clinical shift. You will be graded on your clock ins/outs. You do not need to clock in or out for lunch.

## **Missed Punches**

If a student fails to punch in or out, a missed punch form (found in Trajecsys and in this handbook) should be filled out. It should be:

- Signed by the lead technologist for the time IN and time OUT
- Student must sign the form
- Returned to the clinical director no later than 24 hours after the missed punch.
- Returned to the director either in hand or digitally. You can take an image and send it through Canvas to the clinical director.

If a student does not return the completed form within 24 hours, then the time will not count for the day, and the entire clinical day must be repeated. If the lead technologist is not available, the preceptors, director, or managers can sign the form.

Repeated missed punches will result in disciplinary action.

## **Assigned Area**

In the instance there is a needed competency examination in an area (within the hospital, not outlying sites) by a student, then the student has permission to perform the comp and then immediately return to their assigned area.

If you are found to be away from your assigned area without the approval of both the program/clinical director AND your supervising technologist, you will be counted as absent for the day. You will also be subject to disciplinary action.

## **Assigned Area #2**

Students are not allowed to leave their assigned area, regardless of how busy or not the area is.

## **Down Time/Study Time/Materials & Expectations**

Radiology can sometimes be slow. There is no way to know how busy a rotation will be. You are expected to perform these tasks during downtime:

- Cleaning of the area
- Cleaning of the rooms, including walls, floors, and all areas within reach
- Cleaning of high traffic and touched areas
- Cleaning of lead aprons
- Stock the rooms with linens
- Stock the room with all accessories. If you do not know where they are or how to find them, you are expected to ask and learn
- Practice positioning with other technologists or students

When all of the above has been satisfied, then and only then can a student study. Study materials include: books, notes, and CloverLearning only. If a student is found to be participating in any other activity that is not CloverLearning, the program or clinical director will be notified. The student will then be subject to disciplinary actions.

### **Clinical Assignments/Grading**

Clinical assignments will vary depending on the class and semester. All clinical/class assignments will be posted on Canvas. The clinical classes within the Radiology Program are RADR 1260, RADR 1266, RADR 1167, RADR 2366, and RADR 2367. Grades and assignments required for the clinical classes are outlined in each class syllabus.

Each semester will consist of weekly rotations. In these rotations, you will clock in/out on time, submit a repeat log, submit your logs of exams performed, and complete any assignment designated by your instructor. You will submit your items into Trajecsys and Canvas as instructed.

Students will have a minimum number of competencies to complete for the entire semester, which will be a grade. For example, if students are required to complete 15 competencies, and only 11 are completed, that grade would be  $11/15=73\%$ .  $10/15=66\%$ . There is no rounding. If a student does not complete the required competencies required, the student will be subject to academic probation and/or further disciplinary procedures as outlined in the policy

You will also submit a rotation evaluation every week that a supervising technologist grades you on. It is your responsibility to ensure your supervising technologist submits your evaluation. This is done online through Trajecsys. There are also paper copies available for use in last resort. A copy is available in this handbook as well as on Trajecsys. An evaluation will be submitted every week, including transportation rotations.

You should expect that attendance is part of your grade, as well as professionalism, teamwork, communication, AIDET with a wide variety of evaluation methods.

### **Direct/Indirect supervision of students**

Direct supervision assures patient safety and proper educational practices. The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

- Reviews the procedure in relation to the student's achievement,
- Evaluates the condition of the patient in relation to the student's knowledge,
- Is physically present during the conduct of the procedure, and
- Reviews and approves the procedure and/or image.

**Direct supervision** is required for the following situations:

- All exams until competency is achieved
- All mobile exams
- All fluoroscopic exams
- All surgical exams
- All repeat exposures
- All patient transports between departments

- All observations in mammography exams (note: students are **not** permitted to perform mammography procedures)

**Indirect supervision** promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. The availability applies to all areas where ionizing radiation equipment is in use on patients.

Indirect supervision is required for the following situations:

- All exams except mobile, fluoroscopic, and surgical exams after competency has been achieved
  - All patient transports within the Imaging Department
- {JRCERT 5.1, 5.3, 5.4} {RADR Indirect/Direct Supervision} {Acknowledgement Required}

### **Supervision and Responsibilities of Students**

Standards for an accredited educational program require documentation and compliance for the following objectives by JRCERT. (See position description below.)

It is the student’s responsibility to follow the policies and procedures of clinical education sites and the Midland College Radiologic Technology Program.

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

The parameters of direct/indirect supervision are as follows:

- a. A qualified radiologic technologist reviews the request for examination in relation to the student’s achievement
- b. A qualified radiologic technologist evaluates the condition of the patient in relation to the student’s knowledge
- c. A qualified radiologic technologist is present during the conduct of the examination, and a qualified radiologic technologist reviews and approves the radiographs
- d. After demonstrating competency, students may perform procedures with indirect supervision.
- e. Indirect supervision is defined as supervision provided by a qualified radiologic technologist IMMEDIATELY AVAILABLE to assist students regardless of the level of student achievement.

f. “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed.

This availability applies to all areas where ionizing radiation equipment is in use, including mobile radiography, emergency department procedures, and procedures performed in surgery. Being available by phone, pager or other communication is NOT considered “immediately available”.

### **Radiograph/Image Repeat Policy**

The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must **be physically present** during the conduct of a repeat image and must approve the student’s procedure prior to the re-exposure. Failure to adhere to this policy will result in immediate disciplinary action.

{JRCERT: 5.1, 5.3, 5.4} {RADR Direct/Indirect Supervision}

### **Simulations**

Radiographic exams that are not performed frequently yet are essential to the student’s clinical training and may be simulated for competency. A *simulation* is defined as: The radiographic exam is positioned on a phantom or classmate. If the phantom is used, the student will be asked to make radiographic exposures and produce radiographs. When a classmate is utilized for simulation, the student will be asked to set the radiographic exposure without producing a radiograph. The student may be asked questions concerning their radiographic exposure or about the exam in general. If any exam needs to be simulated for verification or competency, students will inform the Clinical Coordinator so arrangements can be made to accommodate the student. Students may only perform a maximum of ten (10) simulations during the entire program. It is strongly recommended student simulations be reserved until the last semester to accommodate for infrequently performed radiographic exams.

### **Exam Log Report**

A logbook will be kept each day you are in a clinical rotation. The Trajecs system has the ability to log your exams, but you have to enter the information. You cannot enter this information on your phone during clinicals.

This log documents all the radiographic procedures experienced by the student and should reflect all experiences seen during the assigned clinical day. The logbook is expected to be completed on time when due at the end of each rotation. This log should include each exam the student assisted with, observed, or performed independently. No patient identifiers should ever be used. If you do a repeat examination, it must be noted. Please see the example below for how to maintain your log:

Date	Exam	Ped/Adult/Geri	Observe/Assist/Perform	Notes
5/14	L Elbow	Adult	Observe	Fractured
5/14	R Knee	Adult	Assist	Normal
5/14	R Calcaneus	Adult	Perform	*Repeated

All repeats need to be notated. This is to evaluate the reasons why the repeat happened.

You should be watching, participating, and performing numerous exams during the day and recording them. You will use your repeat logs for a project later in the program, so you should make your logs as accurate as possible.

### Venipuncture

Learning venipuncture is within the scope of practice for radiology personnel. Students in the professional curriculum may fill syringes and/or tubing with a contrast medium designated for an examination under direct supervision. Preparation of ready intravenous (IV) contrast medium may be set up for injection with appropriate IV tubing **under direct supervision**. Any additions of medication into IV flushing solutions are prohibited by the student. Venipuncture is a checkoff that qualified clinical preceptors will assist with teaching in the fourth semester. Students are **not allowed** to perform venipuncture at MMH, its affiliates, or any other clinical setting, regardless of their skill level. {MMH Policy, RADR Policy Venipuncture}

### Administration of Pharmacologic Agents: Intravenous and Oral Contrast Media

The goal is to ensure the highest quality of patient care and safety while providing maximum learning experiences. After *instruction and certification*, a student may introduce barium or an iodinated or non-iodinated type of contrast media for the purpose of gastrointestinal studies only. Students WILL NOT, UNDER ANY CIRCUMSTANCE, inject or otherwise “push” contrast media, radiopharmaceuticals, or any other type of medication as part of their clinical education, i.e., intravenous and/or intramuscular injections. Contrast agents are routinely used in the radiology practice.

### Trajecsys

Trajecsys is an online clinical management and tracking system for students of health-related programs. This program is mandatory for the students to purchase in order to participate in the practicum classes. The cost for Trajecsys has been embedded into your lab fees. The following will be documented in this system:

- All clock-ins and out for the day. You are allowed only 5 missed clockouts per semester. If a student exceeds this number, a letter grade will be deducted from the overall clinical grade, and you will be placed on probation. You will also have to submit “Missed Punch” forms to the clinical director.
- All clinical procedures
- All preceptor evaluations
- All attempted/assisted procedures
- All clinical competencies

- All student evaluations

### **Clinical Preceptor Evaluations**

Preceptor evaluation forms should be completed after the end of your weekly rotation. If you had more than one preceptor during your rotation, you should complete one for each technologist. This is part of your rotation grade. This information provides valuable insight to the Midland College Radiology Program about technologists and their interactions with students. Your information remains confidential and will only be evaluated by the Program and Clinical Directors. This is where you grade the technologists who were instructing or teaching you. Students should also complete evaluations for transportation rotations.

## Clinical Competency Map

To ensure that each student retains clinical competency in all radiographic procedures previously instructed, this system of competency checks has been initiated. The following outlines the chronology of the competency check portion of the radiography program:

### **First-Year Fall Practicum I Clinical Competency Evaluations = minimum of 15 (of 52)**

Clinical/Positioning Competency Exam #1

### **First-Year Spring Practicum II Clinical Competency Evaluations = minimum of 32 (of 52)**

Clinical/Positioning Competency Exam #2

### **First-Year Summer Practicum III Clinical Competency Evaluations = minimum of 45 (of 52)**

Minimum of One Spot Check Evaluation for Clinical Competency Second Year

Students are expected to demonstrate clinical skills required to progress to second year.

### **Second-Year Fall Semester Practicum IV Clinical Competency Evaluations = minimum of 52**

Minimum of One Spot Check Evaluation for Clinical Competency Second Year

### **Second Year-Spring Semester Practicum V Clinical Competency Evaluations= 10/Complete All**

Minimum of One Spot Check Evaluation for Clinical Competency

Students are expected to demonstrate clinical skills required for an entry level radiographer at the end of the program.

### **Required Competencies**

The minimum number of competencies for each semester are **required**. This counts towards your clinical class grade and being the minimum to sustain progressive development through the program. Suppose a student has not completed the minimum number of competencies required by the last rotation of the given semester. In that case, the student will be subject to academic probation and/or further disciplinary procedures as outlined in the policy.

### **Competency Lists**

Each student will be given their own copy of a competency list (seen below) for their own records. Each student is encouraged to make sure all competencies they perform are recorded.

### **Simulations**

Only 10 radiological exams are allowed to be simulated. Check the complete list of exams that are allowed to be simulated. Simulations are not allowed in order to fulfill required semester competencies. Simulations will only be allowed and scheduled in the final semester.

In addition to the ARRT 51 required exams (36 mandatory & 15 electives), Midland College requires a line placement confirmation. This is 52 exams in total. (The program director has decided to make specific electives mandatory. This does not change the number required; it simply makes specific elective exams mandatory.

This chart is from the [ARRT](#) and lists which exams are mandatory, elective, or eligible for simulation.



# Radiography

## 1. Introduction

Candidates applying for certification and registration under the primary eligibility pathway are required to meet the Professional Education Requirements specified in the *ARRT Rules and Regulations*. *ARRT's Radiography Didactic and Clinical Competency Requirements* are one component of the Professional Education Requirements.

The requirements are periodically updated based upon a [practice analysis](#) which is a systematic process to delineate the job responsibilities typically required of radiographers. The result of this process is a [task inventory](#) which is used to develop the clinical competency requirements (see section 4 below) and the content specifications which serve as the foundation for the didactic competency requirements (see section 3 below) and the examination.

## 2. Documentation of Compliance

Verification of program completion, including Didactic and Clinical Competency Requirements and all degree-related requirements including conferment of the degree, will be completed on the Program Completion Verification Form on the ARRT Educator Website after the student has completed the Application for Certification and Registration.

Candidates who complete their educational program during 2022 or 2023 may use either the 2017 Didactic and Clinical Competency Requirements or the 2022 requirements. Candidates who complete their educational program after December 31, 2023 must use the 2022 requirements.

## 3. Didactic Competency Requirements

The purpose of the didactic competency requirements is to verify that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice and hone affective and critical thinking skills required to demonstrate professional competence. Candidates must successfully complete coursework addressing the topics listed in the [ARRT Content Specifications](#) for the Radiography Examination. These topics would typically be covered in a nationally-recognized curriculum such as the ASRT Radiography Curriculum. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified in the content specifications and clinical competency documents.

## 4. Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified by the ARRT have demonstrated competence performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the certification examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.



General Requirement: Remote scanning is not acceptable for completion of ARRT Clinical Requirements. The candidate must complete the examination or procedure at the facility where the patient and equipment are located. The candidate must be physically present during the examination or procedure.

## **4.1 General Performance Considerations**

### **4.1.1 Patient Diversity**

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

### **4.1.2 Elements of Competence**

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the course of the candidate's formal educational program.

Remote scanning is not acceptable for completion of ARRT Clinical Requirements. The candidate must complete the examination or procedure at the facility where the patient and equipment are located. The candidate must be physically present during the examination or procedure.

### **4.1.3 Simulated Performance**

ARRT defines simulation of a clinical procedure routinely performed on a patient as the candidate completing all possible hands-on tasks of the procedure on a live human being using the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient.

ARRT requires that competencies performed as a simulation must meet the same criteria as competencies demonstrated on patients. For example, the competency must be performed under the direct observation of the program director or program director's designee and be performed independently, consistently, and effectively.

Simulated performance must meet the following criteria:

- Simulation of imaging procedures requires the use of proper radiographic equipment without activating the x-ray beam.
- A total of ten imaging procedures may be simulated. Imaging procedures eligible for simulation are noted within the chart (see section 4.2.2).
- If applicable, the candidate must evaluate related images.
- Some simulations are acceptable for General Patient Care (see section 4.2.1). These do not count toward the ten imaging procedures that can be simulated.

## **4.2 Radiography-Specific Requirements**

As part of the education program, candidates must demonstrate competence in the clinical procedures identified below. These clinical procedures are listed in more detail in the following sections:

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



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

#### 4.2.1 General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

<b>General Patient Care Procedures</b>	<b>Date Completed</b>	<b>Competence Verified By</b>
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

\*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

#### 4.2.2 Imaging Procedures

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:

- patient identity verification;
- examination order verification;
- patient assessment;
- room preparation;
- patient management;
- equipment operation;
- technique selection;
- patient positioning;
- radiation safety;
- image processing; and
- image evaluation.



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Chest and Thorax</b>					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
<b>Upper Extremity</b>					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
<b>Trauma:</b> Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
<b>Trauma:</b> Upper Extremity (Non-Shoulder)*	✓				
<b>Lower Extremity</b>					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		
Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
<b>Trauma:</b> Lower Extremity*	✓				

\* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Head</b> – Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
<b>Spine and Pelvis</b>					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
<b>Abdomen</b>					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		
Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Fluoroscopy Studies</b> – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus ( <i>NOT</i> Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
<b>Mobile C-Arm Studies</b>					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
<b>Mobile Radiographic Studies</b>					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
<b>Pediatric Patient</b> (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity		✓	✓		
Abdomen		✓	✓		
Mobile Study		✓	✓		
<b>Geriatric Patient</b> (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine		✓			
<b>Subtotal</b>					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		

Clinical Competency Exams will embody the student's knowledge regarding exam systems covered in the semester.

### **Competency Definitions**

*Mandatory:* This exam is required to be completed within the program.

*Elective:* This exam is not required; however, you must still obtain 10 different elective examinations to fulfill the required amount. Students have the choice to obtain whichever elective exams they may see in rotations.

*Geriatric patient:* A person who is 65 years or older AND physically and/or mentally impaired as a result of aging.

*Pediatric patient:* Age 6 years or younger.

*Head/Skull:* The skull is marked as mandatory; however, a student may choose ANY head examination within the section to use as the mandatory examination. Any additional head examinations will then be counted as electives.

*Neonates:* Do not comp examinations on newborns.

### **Trajecsys system**

The Trajecsys system is straightforward regarding competencies, however, there still can be issues. The program/clinical director retains an electronic and hard copy of all competencies as student receives. The only way we have this information is through Trajecsys. Throughout the semester, students will be updated regarding the number of competencies that Trajecsys shows that a student has obtained. It is a student's responsibility to ensure that the preceptor validating the check-off has put the correct information into Trajecsys.

If a student performs a competency on an already completed examination that new comp will not count for the semester required number, nor for the amount required for matriculation. A duplicate competency will be removed from the electronic and hard copy records but will not be removed from the student's Trajecsys account. It is the student's responsibility to ensure they have completed the required number of competencies for the semester.

There are examinations listed within Trajecsys that are not available for competency checkoff. Those examinations are listed within the system as Do Not Use (DNU) or NO COMP. A student is more than welcome to perform the exam. However, it will not count toward elective or mandatory examinations.

Examinations cannot be changed or elevated to a higher status to satisfy a requirement. If a student performs a higher-level examination and does not currently have the basic level examination, then that will satisfy the lower-level competency. Example: a student does not have an L-Spine competency. An order for a 5-view L-Spine is available. The student can perform the 5 view L-Spine and it would satisfy the lower-level L-Spine 3 view competency.

## **Radiographic Academic Progression Requirements**

Progression in Health Sciences programs requires an end-of-course grade for all RADR classes of “C” or better. An end-of-course grade of less than “C” will not be accepted as passing any required Allied Health degree course. {AH Academic Standards}

### **Grading Policy**

Due to the close patient contact and a medical imaging technologist’s responsibility, mastery of academic material and technical competency is required. Students must maintain a grade of “C” or better in each course upon program admission as required by the curriculum.

Letter grades will be assigned as follows:

A= 90-100

B=80-89

C=70-79

D=60-69

F=below 60

### **Rounding**

There will be no rounding for any grade. This means there will be no rounding up or down.

### **Extra Credit**

Bonus points and extra credit should not be expected. It will be the choice of the individual instructor. It is up to the individual instructor if they wish to allow students points back on major examinations for retakes or corrections.

### **Failing Grades**

**Students receiving a failing grade on any quiz or test should make an immediate appointment for advisement and counseling.** It is a student’s responsibility to make an appointment to speak with the instructor. If a student fails to do so, a verbal warning will be given the first time. Subsequent times will progress to disciplinary action.

### **Access to Examinations**

Access to tests and/or examinations will be through the instructor only. A student must make an appointment with the instructor to review your examination.

### **Mid Semester Meeting**

All students will have a midsemester meeting every semester to advise them of their status. The student will be notified of an academic/clinical deficiency in writing and counseled by the instructor of the specific course. All courses must be completed with the minimum score for the student to progress to subsequent semesters. Any student having academic/clinical difficulty will be counseled during the semester.

## Progression Examinations

At the end of semester two and semester four, students will be given an examination that will incorporate all the information taught to those points. Students must pass these examinations in order to progress through the program. **Students must pass these examinations with a 75 or better to progress to the next semester.**

## Student-Instructor Communication

To ensure timely access to faculty for academic concerns and problems, please utilize instructor office hours which are posted on the faculty webpages and outside office doors. The program director is available via Canvas messaging, Teams meetings, and by appointment.

Students are assigned a Midland College email address at the time of enrollment. All communication between Allied Health faculty and students will be conducted using the Midland College-assigned email addresses and/or Canvas.

Program announcements, course updates, and information will be delivered via Canvas and MC email. It is the student's responsibility to stay current with all posted communications from Midland College.

*Students in non-compliance will be subject to disciplinary action as outlined in [the Discipline Categories Policy](#).*

College-wide announcements and information are posted on the [Midland College webpage](#). Emergencies will be communicated via the [Midland College Chap Alert Messaging System](#). *For more information about accessing Canvas, MC email, or additional student resources, see the [Midland College Current Students webpage](#).*

Semester 1	Semester 2	Semester 3	Semester 4	Semester 5
Fall 1	Spring 1	Summer	Fall 2	Spring 2
RADR 1309	RADR 1313	RADR 2305	RADR 2217	RADR 1250
RADR 1311	RADR 2301	RADR 1167	RADR 2313	RADR 2335
RADR 1260	RADR 1266		RADR 2366	RADR 2309
			RADR 2331	RADR 2367
15 Comps	32 Comps	45 Comps	52 Comps	
	Progression Exam #1		Progression Exam #2	
Clinical Check #1	Clinical Check #2	Clinical Check #3	Clinical Check #4	Final Clinical Evaluation

### **Actions Related to Academic or Clinical Deficiencies**

As stated previously, under the subsection of “Grading Policy”, each student is required to score a minimum of C in order to pass all RADR classes. This aligns with the minimum standards set for the Texas Medical Board Jurisprudence Exam, ARRT National Registry, and JCERT Educational Standards. In the event a student is having difficulty, they are encouraged to notify their instructor immediately. A student must also schedule a counseling session with their instructor after any failed quiz or test to identify any necessary actions or interventions. A written action plan will be created for the student. If, after the interventions have not been successful, the student will be placed on probation. Once the student is on probation, any other academic or clinical failure will jeopardize the student's success and could constitute removal from the program.

### **Appeal of Academic Disqualification**

See Midland College Student Handbook and the Radiology Program Appeals procedure. No student dismissal is to be final until all the applicable procedures are observed, should the student wish to use them. In accordance with Midland College Student Rights and Responsibilities: Student Complaints Policy ([FLD Local](#)), Allied Health students should follow the Midland College chain of command to discuss program concerns. Any student who does not follow the proper procedure will be directed back to the correct sequence of procedures.

Grievances and/or complaints “should be expressed as soon as possible to allow early resolution at the **lowest possible administrative level**” in the order in which they are listed.

1. Instructor and/or Clinical Instructor
2. Program Chair
3. Dean of Allied Health
4. Vice President of Instruction
5. Provost

Course grade complaints shall be addressed in accordance with the Midland College Student Complaints: [Course Grade Complaints Form](#)

### **Reinstatement**

Students who receive a failing grade in any Radiography course or clinical practicum must schedule an exit interview with the program director to be considered for readmission through the next cycle application process. A failing grade consists of any score/grade below 70%. Acceptance into the program is NOT guaranteed and is based on JRCERT requirements regarding clinical assignment ratio; 1:1 student to technologist ratio for clinics.

## **Academic/Clinical Grievance Procedure**

In accordance with Midland College policies and procedures, any student has the right to file a complaint (also called a grievance). Please refer to the latest Midland College Handbook for more information on [how to file a complaint](#).

Students are encouraged to seek informal resolution to their concerns with the appropriate clinical coordinator or program director.

In accordance with Midland College Student Rights and Responsibilities: Student Complaints Policy ([FLD Local](#))<sup>1</sup>, Health Sciences students should follow the Midland College chain of command to discuss program concerns. Any student who does not follow the proper procedure will be directed back to the correct sequence of procedures.

Grievances and/or complaints “should be expressed as soon as possible to allow early resolution at the **lowest possible administrative level**,” ([FLD Local](#)), in the order in which they are listed.

1. Instructor and/or Clinical Instructor
2. Program Chair
3. Dean of Health Sciences
4. Vice President of Instructional Services

*For additional information about the formal complaint process, see the [Midland College Student Handbook](#).*

Course grade complaints shall be addressed in accordance with the Midland College Student Complaints: Course Grade Complaints Policy ([FLD Local](#)).<sup>2</sup>

## **Student Grievances**

More information can be found here: [Grievances/Complaints](#).

## **Joint Review Committee on Education in Radiologic Technology**

The Joint Review Committee on Education in Radiologic Technology (JRCERT) provides programmatic accreditation for schools and programs of Radiologic Technology in the United States. Midland College will be seeking JRCERT accreditation and will conform to the standards set forth by JRCERT for the educational, didactic, and clinical education requirements necessary for an accredited program.

“Accreditation is the process to ensure that school, post-secondary institutions, and other education providers meet, and maintain minimum standards of quality and integrity regarding academics, administration, and related services. The Council of Higher Education Accreditation (CHEA) defines accreditation as “A review of the quality of higher education institutions and programs. In the United States, accreditation is a major way that students, families, government officials, and press know that an institution or program provides a quality education”. ([JRCERT-About Accreditation](#))

The contact information for JRCERT:

[JRCERT | Joint Review Committee on Education in Radiologic Technology](#)

20 N. Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
(312) 704-5300  
Email: mail@jcert.org  
{JRCERT 1.5, 2.3, 4.8}

## ***Behavioral Conduct/Student Code of Conduct***

### **Professional Ethics and Confidentiality**

Students must always remember that the information in a clinical area is confidential. All radiology results are to be directed only to physicians for diagnosis and treatment. Students shall not tell patients, parents, friends, relatives, or non-hospital employees the results of tests or the nature of any illness. This information is given only by the physician to the patient or the patient's family. Failure to comply with the above is cause for immediate dismissal from the program.

### **Academic Dishonesty**

All work is expected to be your own. Any assignment that requires citation is expected to be properly cited in APA, 7<sup>th</sup> ed. format to give full credit to the author and to avoid the possibility of plagiarism. If you need help with citations, there are many online resources available, as well as asking your director.

Students should know that Respondus Browser Lockdown, testing formats in the Learning Center, or in-class tests may be administered. Clicking away from a test while it is being administered can result in an automatic failure of the test and a Category II Discipline Policy violation.

No ChatAI programs shall be used for an assignment and an automatic failure for the assignment will be given. Each student is charged with the responsibility of maintaining scholastic integrity. Any student violation of scholastic integrity for plagiarism or cheating falls within the realm of student/faculty relations and is subject to faculty recommendation to the College Administration for loss of credit for a particular assignment, examination, or unit of work; failure in a course; or dismissal from the College and/or Program.

Due to the unique nature of learning in healthcare, staff, and faculty are aware that learning in a group environment and from different team members can be beneficial. However, students are expected to perform their own work for projects, assignments, evaluations, examinations, and lab performances.

**Classroom Behavior-Talking & Phones**

It is disruptive to others and the instructor if there is excessive talking during a lecture. Students are reminded to please be respectful of others.

Students are also reminded that the classroom is an electronics-free zone.

If a student's phone is a distraction and interferes with the learning environment then the student will be subject to disciplinary action.

**Professional Conduct**

Professional conduct in all areas of academic experience (classroom, lab, and clinical) and safe implementation of patient care are essential.

All students shall obey the law, show respect for properly constituted authority, and observe correct standards of conduct. For a complete list of expected student conduct and prohibited behavior, see the Midland College Student Rights and Responsibilities: [Student Conduct Policy](#).

In accordance with Clinical Affiliate agreements, Allied Health students are prohibited from the use of any form of tobacco and/or e-cigarette while participating in clinical and/or lab activities.

**Policy Discrepancies**

Where there is a discrepancy between Midland College, Midland College Allied Health, and Clinical Affiliate policies, the stricter policy applies.

## Disciplinary Categories

Students in non-compliance of Midland College Student Conduct Policies, Allied Health Program Policies and/or Program-Specific Policies will be subject to disciplinary actions as follows.

This list is not meant to be inclusive of all offenses, but to be used as a guide in determining the severity of an offense and assessing appropriate corrective actions. Offenses not listed will be evaluated on a case-by-case basis by the Program Chair and Allied Health Division Dean.

All offenses are cumulative and progressive throughout the program.

### Category I

*The following offenses will result in immediate program dismissal, without the option for readmission to any Allied Health program for 1 year.*

#### **Falsification, Misrepresentation, and Fraud**

1. Falsification, incomplete, and/or alteration of patient, facility, student, college, or publisher records, as well as websites for resource materials.
2. Representing self as any person other than a Midland College Allied Health student to gain access to secured resources intended for instructor uses.
3. Intentional misrepresentation of self as Allied Health student in Clinical Affiliate facilities when not involved in college-sponsored activities.
4. Participating in any form of conduct that is fraudulent and/or defamatory.
5. Entering a clinical facility during unapproved hours representing self as a Midland College Allied Health student.

#### **Illegal and Unethical Acts**

1. Participating in illegal or unethical acts.
2. Theft of personal, college, or facility property
3. Any act that has the potential for results in harm to the patient.
  - a. Failure to provide a safe standard of care and/or providing unethical patient care as outlined by the respective Code of Ethics and Scope of Practice.
  - b. Insubordination (failure to adhere to direct orders from faculty and/or clinical instructors)
  - c. Failure to adhere to written policies of Midland College, Midland College Allied Health, Allied Health Program and/or Clinical Affiliate(s)
  - d. Physical and/or cognitive impairment
  - e. [HIPPA violation](#), which includes any unauthorized release of patient-related information or photocopying of patient records in any setting, including social media.
  - f. Giving medications or conducting diagnostic testing without consent of instructor/preceptor and/or without a physician order
  - g. Abandonment of patient care and/or other assigned responsibilities, including leaving the assigned area or facility without appropriate authorization according to program-specific

policies, which results in actual or potential harm to the patient and/or other healthcare professionals.

4. Substance Abuse
  - a. Any positive drug screen during the pre-admission process and/or throughout the duration of the program
  - b. Physical and/or cognitive impairment due to being under the influence of illegal drugs, controlled substances, and/or alcohol during any program-related activity (lecture, lab, and/or clinical)
  - c. Bringing illicit substances into the facility or consuming these substances while on facility property.
  - d. Refusal to consent to drug screening.
  - e. Any other violation of Midland College Student Conduct: Alcohol and Drug Use Policy ([FLBE Local](#))<sup>7</sup>
5. Change in criminal history:
  - a. A felony violation of a statute intended to control the possession or distribution of a substance in the Government Code, Chapter 481, and (Texas Controlled Substance Act)
  - b. Aggravated Robbery (Penal Code § 29.03)
  - c. Agreement to Abduct from Custody (Penal Code § 25.031)
  - d. Arson (Penal Code § 28.02)
  - e. Assaultive Offenses (Penal Code Chapter 22)
  - f. Burglary and Criminal Trespass (Penal Code Chapter 30)
  - g. Computer Crimes (Penal Code Chapter 33)
  - h. Criminal Homicide (Penal Code Chapter 19)
  - i. Forgery (Penal Code § 32.21)
  - j. Fraud (Penal Code Chapter 32)
  - k. Indecency with a Child (Penal Code § 21.11)
  - l. Indecent Exposure (Penal Code § 21.07)
  - m. Kidnapping and Unlawful Restraint (Penal Code Chapter 20)
  - n. Public Indecency (Penal Code Chapter 43)
  - o. Public Lewdness (Penal Code § 21.07)
  - p. Robbery (Penal Code § 29.02)
  - q. Sale or Purchase of a Child (Penal Code § 25.11)
  - r. Solicitation of a Child (Penal Code § 25.06)
  - s. Theft (Penal Code Chapter 31)
  - t. Weapons (Penal Code Chapter 46)

## Behavior

1. Disruptive or abusive behavior on or off campus during college related activities.
2. Verbal, mental, or physical abuse including sexual harassment to anyone on campus or in the Clinical Affiliate setting.
3. A verbal act or physical act of aggression against another person on facility or college premises

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<sup>7</sup> Midland College (2019, December 13). *FLBE — Student Conduct: Alcohol and Drug Use*. Board Policy Manual. Retrieved July 5, 2023, from <https://pol.tasb.org/PolicyOnline/PolicyDetails?key=885&code=FLBE#legalTabContent>

4. Deliberate destruction or damage to facility, college, patient, student, visitor, or employee property
5. Expulsion from the Clinical Affiliate due to failure to follow policy, unprofessional, unethical, or egregious behavior.
6. Any other disorderly conduct as outlined in the Midland College Student Rights and Responsibilities: Student Conduct Policy ([FLB Local](#))<sup>8</sup>

## Category II

*The following offenses will result in Academic Probation. Academic Probation is defined as a probationary period that persists through the duration of the Allied Health Program, in which a subsequent violation of any Midland College, Allied Health, or Program-Specific policy will result in immediate dismissal, without the option for readmission to any Allied Health program for 1 year. Students on academic probation must complete a mandatory review of the Allied Health Student Handbook and the Program-Specific Student Handbook and satisfactory completion of a Policy Assessment. Disciplinary actions are progressive in nature. Any additional infraction will escalate disciplinary measures to Category I.*

1. Academic dishonesty as outlined by Midland College policy [FLB \(Local\)](#). *Additionally, any instance of academic dishonesty will result in a grade of zero for the assignment/quiz/exam.*
2. Failure to demonstrate the ability to function as a team member in clinical.
3. Inappropriate display of anger, that does not result in physical harm.
4. No call, no show to any required college-sponsored and/or clinical activity.
5. Abandonment of patient care and/or other assigned responsibilities, including leaving the assigned area or facility without appropriate authorization according to program-specific policies, *which does not result in actual or potential harm to the patient and/or other healthcare professionals.*
6. Causing damage to college, Clinical Affiliate, or patient property through negligence
7. Causing injury or potential harm to a patient, staff, visitor, peer, or instructor through negligence
8. Insubordination or refusal to obey an order, *which does not result in actual or potential harm to the patient and/or other healthcare professionals.*
9. Removal from the Clinical Affiliate at the request of the Affiliate personnel with the possibility of transfer to another site or return later.

Solicitation of any physician or other licensed healthcare provider for any medical advice, consultation, and/or medication while participating in any clinical activities and/or representing self as a Midland College Allied Health student.

## Category III

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<sup>8</sup> Midland College (2021, November 22). *FLB — Student Rights and Responsibilities: Student Conduct*. Board Policy Manual. Retrieved July 5, 2023, from <https://pol.tasb.org/PolicyOnline/PolicyDetails?key=885&code=FLB#localTabContent>



*The following offenses are subject to disciplinary action in the form of a written warning. Disciplinary actions are progressive in nature. Any additional infraction will escalate disciplinary measures to Category II.*

1. Accepting any gifts of monetary value from patients and/or families.
2. Use of foul language while representing self as a Midland College Allied Health student.
3. Complaint from any Clinical Affiliate and/or college personnel of inappropriate, unprofessional behavior, and/or appearance, including personal hygiene and/or dress code concerns.
4. Any failure to follow program-specific policy and/or Clinical Affiliate rules and/or policies.
5. Failure to report an absence from clinical rotations in the appropriate manner as outlined in the program-specific policy, *which does not include a no call, no show.*



Midland College Radiologic Technology students shall be afforded equal, fair, and educationally valid experiences for all. {JRCERT 4.4}

### **Withdraw Procedure**

If a student determines that they wish to withdraw from the program, they must immediately make an appointment to speak with the program director. Every effort will be made to discuss the situation, the reasons for the withdraw, and if there are any available options to the student in order to remain in the program. It is up to the student to ensure that they are completely withdrawn from the program through the admissions office. The last day to withdraw is posted on the academic calendar on the Midland College website. Those who withdraw from the program will receive a “W” on their transcript. A student who fails a course or who withdraws after the last day to withdrawal for the semester will receive an “F” on their transcript.

### **Course Substitutions**

Course substitutions for supportive requirements may be carried out only if the course to substitute is equal or superior in content to the course that is required by the radiography program curriculum. The exception to this rule is the prerequisites are: MATH 1314-College Algebra and BIO 2401 & 2402, Anatomy and Physiology I & II. These courses cannot be substituted with any other course. Course substitutions must align with the [Midland College Core Curriculum](#), and must be approved by the program director. {JRCERT 1.1}

### **Transfer Credit**

Coursework from another program will be evaluated on an individual basis by the Program Director. A grade of C or better is required on all transferred prerequisite, general education, and program-specific courses. Transfer students from another program will be admitted on a space-available basis. Transfer students must: 1. Complete admission requirements to Midland College as well as the Program admission criteria. 2. Currently hold a C or better on transfer course work. 3. Submit course syllabi for review 4. Agree to complete a disclosure of information form. {JRCERT 1.1}

### **Course Evaluation**

Every student will be given the opportunity to evaluate the class and the instructors after each semester. We kindly request that you submit your evaluations as soon as possible to help improve the program or make adjustments as needed. These are not graded and are for informational purposes only.

\*If there is an immediate concern, please contact the program director immediately.

## Midland College 2025-2026 Midland College Degree Plan

**Prerequisite Courses:** Math 1314-College Algebra 3 hours. BIO 2401- Anatomy & Physiology I 4 hours.

### Semester I (Fall 1)

- RADR 1260-Clinical Radiologic Technology (2-0-8)
- RADR 1309-Introduction to Radiography and Patient Care (3-3-1)
- RADR 1311-Basic Radiographic Procedures (3-2-3)
- HPRS 1106-Medical Terminology 1 hour (Web based 8-week class)

Required Semester Credits: 9

### Semester II (Spring 1)

- RADR 1313-Principals of Radiographic Imaging I (3-3-1)
- RADR 2301-Intermediate Radiographic Procedures (3-2-3)
- RADR 1266-Practicum II (2-0-16)
- BIOL 2402 A&P II 4 hours
- English 101 3 hours

Required Semester Credits: 15

### Semester III (Full Summer)

- RADR 1167-Practicum III Radiology Technology (1-0-8)
- RADR 2305- Principals of Radiographic Imaging II (3-3-1)

Required Semester Credits: 4

### Semester IV (Fall 2)

- RADR 2217-Radiographic Pathology Online (2-2-0)
- RADR 2313-Radiation Biology and Protection (3-3-0)
- RADR 2331-Advanced Radiographic Procedures (3-2-2)
- RADR 2366-Practicum IV Radiology Technology (3-0-24)
- PSYC 2301/SOCI 1301 3 hours

Required Semester Credits: 14

### Semester V (Spring 2)

- RADR 1250-Radiographic Imaging Evaluation II (2-2-0)
- RADR 2335 Radiologic Technology Seminar (3-3-1)
- RADR 2309-Radiologic Imaging Equipment (3-3-1)
- RADR 2367-Practicum V Radiologic Technology (3-0-24)
- Humanities/Fine Arts 3 hours

Required Semester Credits: 14

**Total Credit Hours: 63**

The program director will ask every student before the next semester if there are any classes that I can have advising enroll them in. It is not required that you complete the additional classes in the order listed except for Anatomy and Physiology II. It is the student's responsibility to ensure they have completed all core classes with a C or better. It is the student's responsibility to ensure all outside transcripts are complete and transferred to the registrar's office.

### **Tuition and Fees**

Tuition is based on the number of credits taken during a semester. The latest tuition charges for in-district and out-of-district residents can be found at: [Midland College - Acalog ACMS™](#)

Fees are separate from tuition. Fees for the radiology program can include but are not limited to: technology and/or laboratory fees and are listed on the college website. Fees for various laboratory requirements, Trajecsys System, and CastleBranch System are attached to the individual classes listed within the college handbook.

Various Fees: If you lose your set of lead markers, a replacement set of markers can be found on Etsy for approximately \$20.00. Replacement lead markers must have your assigned student number and must be the customary colors-red for right, blue for left. Or, you can pay the program director \$30.

ARRT Registry Exam: \$225.

Texas Medical Board General Radiologic Technology License: \$80.00

Texas Medical Board Jurisprudence Exam: \$34.00. Fingerprinting: \$38.50. Graduation regalia as determined by the bookstore.

Additional Costs: Textbooks, scrub shirts, scrub pants, shoes. Lost or damaged radiation monitors are \$140. Lost ID's cost \$25.00. Badge Buddy. Marker glue or tape.

### **Financial Aid**

The financial aid program at Midland College attempts to provide financial assistance to those students who, without such aid, would not be able to pursue a higher education. The primary responsibility for financing an education rest with the student and his family; however, Midland College is aware that assistance beyond the family's resources sometimes becomes necessary. In cases where financial need for eligible students is documented, Midland College will assist, to the extent possible, using all available local, state, and federal funds. Financial assistance is offered in many forms such as grants, scholarships, loans, and employment, or a combination of these.

[The MC Enrollment and Aid Page](#)

[The MC Scholarships Page](#)

[Midland Memorial Hospital Radiology Legacy Scholarship](#)

Many resources are available from different agencies, particularly those found in the Support Our Students Section below. These agencies exist to help students succeed, so be sure to check out every opportunity you can.

## College Calendar

The most recent college calendar can be found on the Midland College website at [Academic calendar 2024-25](#)

All classes in the radiology program fall and spring semesters consist of 16-week classes. Summer classes are 12 weeks. There will not be clinicals or classes scheduled for college observed holidays or breaks. There will be no clinicals scheduled over the breaks between semesters or observed holidays.

## Student Services And/or Resources:

Perkins Resources, Support our Students, Testing Services, Mental Health Resources, Foster Care Students resources, and where to get an ID card. This information is linked here [Student Services \(midland.edu\)](#).

The contact information for:  
SHEP GRINNAN  
Counselor, Foster Care Liaison  
(432) 685-4505  
[sgrinnan@midland.edu](mailto:sgrinnan@midland.edu)

Foster Care Students: [Foster Care Students](#)

Chaps Helping Chaps: [Student Emergency Fund](#)

Perkins Resources: [Perkins Resources](#)

All mental health hotlines: Found here. [Mental Health Resources \(midland.edu\)](#)  
Permian Basic AHEC [Permian Basin AHEC \(midland.edu\)](#)

Texas Workforce Commission: [Texas Workforce Commission \(midland.edu\)](#)

Athletics, student discounts, bus transportation, clubs & activities, news, and information about living on campus found here: [Campus Life \(midland.edu\)](#)

Alcohol and Drug Abuse Prevention Program found here: [Midland College Alcohol & Drug Abuse Prevention Program](#)

Pathways Advising Team: [Pathways Advising \(midland.edu\)](#)

Fitness Center Information: [Fitness Center \(midland.edu\)](#)

Fasken Learning Resource Center: [Library \(midland.edu\)](#)

Scholarships offered through Midland College: [Scholarships](#)

Labs & Tutoring: [Labs & Tutoring \(midland.edu\)](#)

Testing Center: [Testing Services](#)

West Texas Food Bank: [West Texas Food Bank – A West Texas Without Hunger](#)

Main Campus Resources including Dollye Neal Chapel, cosmetology, map & floor plans, bookstore, campus tours, ect: [Main Campus Resources \(midland.edu\)](#)

June and Frank Cowden Dining Hall: [Dining on Campus \(midland.edu\)](#)

SafePlace Midland: [Contact Us – Safe Place of the Permian Basin](#)

**Safety:** MC Police Department: [Midland College Police Department](#)

On-Campus Emergency: 911. MCPD: 432-685-4734. They are available 24/7, 365. You will need to visit the police department to get a parking sticker, or else they will ticket you. The MCPD website is the latest crime statistics and safety protocols listed for Midland College.

While in class or lab at F. Marie Hall Outpatient Center, call 911 in an emergency. Both agencies will respond by letting the dispatcher know.

### **National Hotlines & Help Lines**

Alcohol Treatment Referral Hotline: 1-800-252-6465 Referrals available 24 hours a day.  
National Drug/Alcohol Treatment Referral Service: 1-800-662-4357 Referrals available 24 hours a day.  
National Council of Alcoholism and Drug Dependence (NCADD) – Helpline: 1-800-662-2255 Refers caller to local affiliate office of NCADD. Referrals available 24 hours a day.  
988 Lifeline-Suicide and Crisis line.

All of the resources listed will also be provided to you through Trajecsys.  
{JRCERT 2.3}

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### **Graduation**

To be eligible for graduation, students **must meet** the requirements for the Associates of Applied Arts and Sciences in Radiologic Technology Degree, as stated in the Midland College Catalog and Student Handbook, found online on the [Midland College](#) website. Graduation requires completion of all the required courses in the degree plan with a minimum grade of "C" in every course. The Midland College Radiologic commencement ceremony is scheduled in May. You will be responsible for purchasing your own regalia for commencement. Instructions for graduation will be provided to you.

### **Advanced Progression**

There is no fast-track or ability to progress faster in the program than the recommended degree plan that is outlined.

### **ARRT National Board Exam**

At the end of the program, eligible students earn an Associates of Applied Science in Radiologic Sciences degree. After verification of all competencies are complete, students are eligible to sit for the ARRT National Registry Board Exam. This exam has three attempts. If a student does not successfully pass after three attempts, the radiology program must be repeated. The board exam is \$225 and is payable by the student. For more information, please visit [Earn ARRT Credential](#).

### **Texas Medical Board Jurisprudence Exam**

The Texas Medical Board Jurisprudence Exam costs \$34 for each attempt, and a 75 or better is required for passing.

The licensing and application fee for the State of Texas is \$85.25 and is payable by the student.

“Please know in accordance with law passed by the 84th Legislature (SB 202), all Respiratory Care Practitioner, Medical Radiologic Technologist, Limited Medical Radiologic Technologist, and Non-Certified Radiologic Technician applicants who apply after August 31, 2019, will also now be required to successfully pass the Jurisprudence (JP) exam.

The JP exam is available for applicants with active, pending applications to take online through their My TMB account. Visit the online JP Exam page for more information:

<http://www.tmb.state.tx.us/page/licensing-jp-exam> (Texas Medical Board, accessed 4/8/2024)

A student must make an account through the Texas Medical Board and then a study guide is available to view online.

The information regarding the application and process for obtaining a State of Texas Medical Registered Technologist License can be found at: [Texas Medical Board \(state.tx.us\)](http://www.tmb.state.tx.us).

You will also need to obtain fingerprinting at an approved vendor and cost depends on the vendor. Licensure by the State of Texas requires some time, and it is the students' responsibility to submit all documentation to the agency. It is the student's responsibility to schedule fingerprinting, screening, and/or exams for submission to the State of Texas. Fingerprinting costs about \$35.00. All information will be covered in the fifth semester before graduation.

**Accreditation Status Midland College Radiology Technology Program**

**Midland College-Radiology Technology Program**

I understand that Midland College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award certificates, associate and baccalaureate degrees. Questions about the accreditation of Midland College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website ([www.sacscoc.org](http://www.sacscoc.org)).

I understand that the Midland College Radiology Technology Program is not currently accredited by the JRCERT (Joint Review Committee on Education in Radiologic Technology) but will be seeking accreditation in the future. I understand that accreditation of the Midland College Radiology Technology program is not mandatory. I understand that the educational and clinical components of the Midland College Program have been modeled to conform to the standards set forth by the JCERT, ARRT, ASRT and the State of Texas. I understand that not having JRCERT accreditation will not affect my ability to sit for the national licensure examination.

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

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

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

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

Updated: 12/17/2024	AH: N/A
JRCERT: 1.1, 1.5, 1.7	RADR: Statement in handbook

## Administration of Contrast Agents-Oral and Intravenous

Contrast agents are routinely used in radiography. You will be taught on the use, indications, contraindications, and proper administration of contrast agents.

There are two types of contrast agents: oral and intravenous. A student is prohibited from administering intravenous contrast agents.

Oral contrast agents may take several forms: pills, fluid, thick fluids. There are two types of oral contrast agents: barium mixtures and gastrografin. Students may only administer contrast agents under the direct supervision of a qualified technologist.

This policy has been explained to me and I agree to abide by the rules of MC Radiologic Technology, MMH, and its affiliates.

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

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

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

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

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

Updated: 12/15/2024	RADR Policy: Contrast Administration
JRCERT: N/A	AH: Disciplinary Categories



# ARRT<sup>®</sup> STANDARDS OF ETHICS

Last Revised: September 1, 2023

Published: September 1, 2023

## PREAMBLE

The *Standards of Ethics* of The American Registry of Radiologic Technologists (ARRT) shall apply solely to persons that are either currently certified and registered by ARRT or that were formerly certified and registered by ARRT, and to persons applying for certification and registration by ARRT (including persons who submit an Ethics Review Preapplication) in order to become Candidates. Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular-interventional radiography, breast sonography, and radiologist assistant. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

## STATEMENT OF PURPOSE

The purpose of the ethics requirements is to identify individuals who have internalized a set of professional values that cause one to act in the best interests of patients. This internalization of professional values and the resulting behavior is one element of ARRT's definition of what it means to be qualified. Exhibiting certain behaviors as documented in the *Standards of Ethics* is evidence of the possible lack of appropriate professional values.

The *Standards of Ethics* provides proactive guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. The ethics requirements support ARRT's mission of promoting high standards of patient care by removing or restricting the use of the credential by those who exhibit behavior inconsistent with the requirements.

## A. 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 Registered Technologists 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 Registered Technologists 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 Registered Technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The Registered Technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of humankind.
3. The Registered 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 Registered 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 Registered Technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

6. The Registered 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 Registered 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. Registered Technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The Registered Technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The Registered 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 Registered 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.

## **B. RULES OF ETHICS**

The Rules of Ethics form the second part of the *Standards of Ethics*. They are mandatory standards of minimally acceptable professional conduct for all Registered Technologists and Candidates. ARRT certification and registration demonstrates to the medical community and the public that an individual is qualified to practice within the profession. The Rules of Ethics are intended to promote the protection, safety, and comfort of patients. Accordingly, it is essential that Registered Technologists and Candidates act consistently with these Rules.

The Rules of Ethics are enforceable. Registered Technologists are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence or during their annual renewal of certification and registration, whichever comes first. Applicants for certification and registration are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence.

Registered Technologists and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

*The titles and headings are for convenience only, and shall not be used to limit, alter or interpret the language of any Rule.*

### Fraud or Deceptive Practices

#### Fraud Involving Certification and Registration

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain or reinstate certification and registration as issued by ARRT; employment in radiologic technology; or a state permit, license, or registration certificate to practice radiologic technology. This includes altering in any respect any document issued by ARRT or any state or federal agency, or by indicating in writing certification and registration with ARRT when that is not the case.

#### Fraudulent Communication Regarding Credentials

2. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding any individual's education, training, credentials, experience, or qualifications, or the status of any individual's state permit, license, or registration certificate in radiologic technology or certification and registration with ARRT.

#### Fraudulent Billing Practices

3. Knowingly engaging or assisting any person to engage in, or otherwise participating in, abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws.

## Subversion

### Examination / CQR Subversion

4. Subverting or attempting to subvert ARRT's examination process, and/or ARRT's Education Requirements, including the Structured Self-Assessments (SSA) that are part of the Continuing Qualifications Requirements (CQR) process. Conduct that subverts or attempts to subvert ARRT's examination, Education Requirements and/or CQR or SSA processes, includes but is not limited to:
  - i. disclosing examination and/or CQR SSA information using language that is substantially similar to that used in questions and/or answers from ARRT examinations and/or CQR SSA when such information is gained as a direct result of having been an examinee or a participant in a CQR SSA or having communicated with an examinee or a CQR participant; this includes, but is not limited to, disclosures to students in educational programs, graduates of educational programs, educators, anyone else involved in the preparation of Candidates to sit for the examinations, or CQR participants; and/or
  - ii. soliciting and/or receiving examination and/or CQR SSA information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations or CQR SSA from an examinee, or a CQR participant, whether requested or not; and/or
  - iii. copying, publishing, reconstructing (whether by memory or otherwise), reproducing or transmitting any portion of examination and/or CQR SSA materials by any means, verbal or written, electronic or mechanical, without the prior express written permission of ARRT or using professional, paid or repeat examination takers and/or CQR SSA participants, or any other individual for the purpose of reconstructing any portion of examination and/or CQR SSA materials; and/or
  - iv. using or purporting to use any portion of examination and/or CQR SSA materials that were obtained improperly or without authorization for the purpose of instructing or preparing any Candidate for examination or participant for CQR SSA; and/or
  - v. selling or offering to sell, buying or offering to buy, or distributing or offering to distribute any portion of examination and/or CQR SSA materials without authorization; and/or
  - vi. removing or attempting to remove examination and/or CQR SSA materials from an examination or SSA room; and/or
  - vii. having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination or CQR SSA of ARRT; and/or
  - viii. disclosing what purports to be, or what you claim to be, or under all circumstances is likely to be understood by the recipient as, any portion of or "inside" information concerning any portion of a future, current, or previously administered examination or CQR SSA of ARRT; and/or
  - ix. communicating with another individual during administration of the examination or CQR SSA for the purpose of giving or receiving help in answering examination or CQR SSA questions, copying another Candidate's or CQR participant's answers, permitting another Candidate or a CQR participant to copy one's answers, or possessing or otherwise having access to unauthorized materials including, but not limited to, notes, books, mobile devices, computers and/or tablets during administration of the examination or CQR SSA; and/or
  - x. impersonating a Candidate, or a CQR participant, or permitting an impersonator to take or attempt to take the examination or CQR SSA on one's own behalf; and/or
  - xi. using any other means that potentially alters the results of the examination or CQR SSA such that the results may not accurately represent the professional knowledge base of a Candidate, or a CQR participant.

### Education Requirements Subversion

5. Subverting, attempting to subvert, or aiding others to subvert or attempt to subvert ARRT's *Education Requirements for Obtaining and Maintaining Certification and Registration* ("Education Requirements"), including but not limited to, continuing education (CE), clinical experience and competency requirements, structured education activities, and/or Continuing Qualifications Requirements (CQR). Conduct that subverts or attempts to subvert ARRT's Education Requirements or CQR Requirements includes, but is not limited to:
  - i. providing false, inaccurate, altered, or deceptive information related to CE, clinical experience or competency requirements, structured education or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or
  - ii. assisting others to provide false, inaccurate, altered, or deceptive information related to education requirements or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or

- iii. conduct that results or could result in a false or deceptive report of CE, clinical experience or competency requirements, structured education activities or CQR completion; and/or
- iv. conduct that in any way compromises the integrity of ARRT's education requirements, including, but not limited to, CE, clinical experience and competency requirements, structured education activities, or CQR Requirements such as sharing answers to the post-tests or self-learning activities, providing or using false certificates of participation, or verifying credits that were not earned or clinical procedures that were not performed.

### Failure to Cooperate with ARRT Investigation

- 6. Subverting or attempting to subvert ARRT's certification and registration processes by:
  - i. making a false statement or knowingly providing false information to ARRT; or
  - ii. failing to cooperate with any investigation by ARRT in full or in part.

## Unprofessional Conduct

### Failure to Conform to Minimal Acceptable Standards

- 7. Engaging in unprofessional conduct, including, but not limited to:
  - i. a departure from or failure to conform to applicable federal, state, or local governmental rules regarding radiologic technology practice or scope of practice; or, if no such rule exists, to the minimal standards of acceptable and prevailing radiologic technology practice.
  - ii. any radiologic technology practice that may create unnecessary danger to a patient's life, health, or safety. Actual injury to a patient or the public need not be established under this clause.

### Sexual Misconduct

- 8. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to any unwanted sexual behavior, verbal or otherwise.

### Unethical Conduct

- 9. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm the public; or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established under this clause.

## Scope of Practice

### Technical Incompetence

- 10. Performing procedures which the individual is not competent to perform through appropriate training and/or education or experience unless assisted or personally supervised by someone who is competent (through training and/or education or experience).

### Improper Supervision in Practice

- 11. Knowingly assisting, advising, or allowing a person without a current and appropriate state permit, license, registration, or ARRT certification and registration to engage in the practice of radiologic technology, in a jurisdiction that mandates such requirements.

### Improper Delegation or Acceptance of a Function

- 12. Delegating or accepting the delegation of a radiologic technology function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not be established under this clause.

## Fitness to Practice

### Actual or Potential Inability to Practice

13. Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material; or as a result of any mental or physical condition.

### Inability to Practice by Judicial Determination

14. Adjudication as mentally incompetent, mentally ill, chemically dependent, or dangerous to the public, by a court of competent jurisdiction.

## Improper Management of Patient Records

### False or Deceptive Entries

15. Improper management of records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing, or permitting anyone to make false, deceptive, or misleading entry in any patient record and/or any quality control record.

### Failure to Protect Confidential Patient Information

16. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law, or viewing, using, releasing, or otherwise failing to adequately protect the security or privacy of confidential patient information.

### Knowingly Providing False Information

17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.

## Violation of State or Federal Law or Regulatory Rule

### Narcotics or Controlled Substances Law

18. Violating a state or federal narcotics or controlled substance law, even if not charged or convicted of a violation of law.

### Regulatory Authority or Certification Board Rule

19. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual's professional license, permit, registration or certification being denied, revoked, suspended, placed on probation or a consent agreement or order, voluntarily surrendered, subjected to any conditions, or failing to report to ARRT any of the violations or actions identified in this Rule.

### Criminal Proceedings

20. Convictions, criminal proceedings, or military courts-martial as described below:
  - i. conviction of a crime, including, but not limited to, a felony, a gross misdemeanor, or a misdemeanor; and/or
  - ii. criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld, deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters an Alford plea, a plea of guilty or nolo contendere (no contest); or where the individual enters into a pre-trial diversion activity; and/or
  - iii. military courts-martial related to any offense identified in these Rules of Ethics; and/or
  - iv. required sex offender registration.

## Duty to Report

### Failure to Report Violation

21. Knowing of a violation or a probable violation of any Rule of Ethics by any Registered Technologist or Candidate and failing to promptly report in writing the same to ARRT.

### Failure to Report Error

22. Failing to immediately report to the Registered Technologist's or Candidate's supervisor information concerning an error made in connection with imaging, treating, or caring for a patient. For purposes of this rule, errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper (commission). Errors also include behavior that is negligent or should have occurred in connection with a patient's care, but did not (omission). The duty to report under this rule exists whether or not the patient suffered any injury.

## **C. ADMINISTRATIVE PROCEDURES**

These Administrative Procedures provide for the structure and operation of the Ethics Committee; they detail procedures followed by the Ethics Committee and by the Board of Trustees of ARRT in administering challenges raised under the Rules of Ethics, and in handling matters relating to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *ARRT Rules and Regulations*, in which case, there is no right to a hearing) or the denial of renewal or reinstatement of certification and registration. All Registered Technologists and Candidates are required to comply with these Administrative Procedures. All Registered Technologists and Candidates are expected to conduct themselves in a professional and respectful manner in their interactions with the ARRT Board of Trustees, Ethics Committee and/or staff. Failure to cooperate with the Ethics Committee or the Board of Trustees may be considered by the Ethics Committee and by the Board of Trustees according to the same procedures and with the same sanctions as failure to observe the Rules of Ethics.

### 1. Ethics Committee

#### (a) Membership and Responsibilities of the Ethics Committee

The President, with the approval of the Board of Trustees, appoints three Trustees to serve as members of the Ethics Committee, each such person to serve on the Committee until removed and replaced by the President, with the approval of the Board of Trustees, at any time, with or without cause. The President, with the approval of the Board of Trustees, will also appoint a fourth, alternate member to the Committee. In the event that the full Committee is not available for a meeting, an alternate member may participate on the Committee. If an alternate member is not available, the remaining members of the Committee will hold the meeting and act irrespective of the composition of the Committee. The Ethics Committee is responsible for: (1) investigating and reviewing each alleged violation of the Rules of Ethics and determining whether a Registered Technologist or Candidate has failed to observe the Rules of Ethics and determining an appropriate sanction; and (2) periodically assessing the Code of Ethics, Rules of Ethics, and Administrative Procedures and recommending any amendments to the Board of Trustees.

#### (b) The Chair of the Ethics Committee

The President, with the approval of the Board of Trustees, appoints one member of the Ethics Committee as the Committee's Chair to serve for a maximum term of two years as the principal administrative officer responsible for management of the promulgation, interpretation, and enforcement of the *Standards of Ethics*. In the event that the Chair is not available for a meeting, the Chair may appoint any remaining member to act as Chair. The President may remove and replace the Chair of the Committee, with the approval of the Board of Trustees, at any time, with or without cause. The Chair presides at and participates in meetings of the Ethics Committee and is responsible directly and exclusively to the Board of Trustees, using staff, legal counsel, and other resources necessary to fulfill the responsibilities of administering the *Standards of Ethics*.

### (c) Preliminary Screening of Potential Violations of the Rules of Ethics

The Chair of the Ethics Committee shall review each alleged violation of the Rules of Ethics that is brought to the attention of the Ethics Committee. If, in the sole discretion of the Chair: (1) there is insufficient information upon which to base a charge of a violation of the Rules of Ethics; or (2) the allegations against the Registered Technologist or Candidate are patently frivolous or inconsequential; or (3) the allegations, if true, would not constitute a violation of the Rules of Ethics, the Chair may summarily dismiss the matter. The Chair may be assisted by staff and/or legal counsel of ARRT. The Chair shall report each such summary dismissal to the Ethics Committee.

At the Chair's direction and upon request, the Chief Executive Officer of ARRT shall have the power to investigate allegations regarding the possible settlement of an alleged violation of the Rules of Ethics. The Chief Executive Officer may be assisted by staff members and/or legal counsel of ARRT. The Chief Executive Officer is not empowered to enter into a binding settlement, but rather may convey and/or recommend proposed settlements to the Ethics Committee. The Ethics Committee may accept the proposed settlement, make a counterproposal to the Certificate Holder or Candidate, or reject the proposed settlement and proceed under these Administrative Procedures.

## 2. Hearings

Whenever ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *ARRT Rules and Regulations*, in which case there is no right to a hearing) or of an application for renewal or reinstatement of certification and registration, or in connection with the revocation or suspension of certification and registration, or the censure of a Registered Technologist or Candidate for an alleged violation of the Rules of Ethics, it shall give written notice thereof to such person, specifying the reasons for such proposed action. A Registered Technologist or Candidate to whom such notice is given shall have 30 days from the date the notice of such proposed action is mailed to make a written request for a hearing. The written request for a hearing must be accompanied by a nonrefundable hearing fee in an amount to be determined by ARRT. In rare cases, the hearing fee may be waived, in whole or in part, at the sole discretion of ARRT.

Failure to make a written request for a hearing and to remit the hearing fee (unless the hearing fee is waived in writing by ARRT) within such period or submission of a properly executed Hearing Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or the Board of Trustees pursuant to such notice. A Registered Technologist or Candidate who requests a hearing in the manner prescribed above shall advise the Ethics Committee of the intention to appear at the hearing. A Registered Technologist or Candidate who requests a hearing may elect to appear in person, via teleconference, videoconference, or by a written submission which shall be verified or acknowledged under oath.

A Registered Technologist or Candidate may waive the 30-day timeframe to request a hearing. To request a waiver of the 30-day timeframe, the Registered Technologist or Candidate must complete a Hearing Waiver form that is available on the ARRT website at [www.arrt.org](http://www.arrt.org). The Hearing Waiver form must be signed by the Registered Technologist or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Hearing Waiver form and may be assisted by staff members and/or legal counsel of ARRT. Any sanction proposed by the Ethics Committee would become effective on the date the hearing waiver is processed.

Failure to appear at the hearing in person or via teleconference, videoconference, or to supply a written submission in response to the charges shall be deemed a default on the merits and shall be deemed consent to whatever action or disciplinary measures that the Ethics Committee determines to take. Hearings shall be held at such date, time, and place as shall be designated by the Ethics Committee or the Chief Executive Officer. The Registered Technologist or Candidate shall be given at least 30 days' notice of the date, time, and place of the hearing. The hearing is conducted by Ethics Committee members other than any members of the Ethics Committee who believe for any reason that they would be unable to render an objective and unbiased decision. In the event of such disqualification, the President may appoint Trustees to serve on the Ethics Committee for the sole purpose of participating in the hearing and rendering a decision. At the hearing, ARRT shall present the charges against the Registered Technologist or Candidate in question, and the facts and evidence of ARRT in respect to the basis or bases for the proposed action or disciplinary measure. The Ethics Committee may be assisted by legal counsel. The Registered Technologist or Candidate in question, by legal counsel or other representative (at the sole expense of the Registered Technologist or Candidate in question), shall have up to 30 minutes to present testimony, and be heard in the Registered Technologist's or Candidate's own defense; to call witnesses; hear the testimony of and to cross-examine any witnesses appearing at such hearing; and to present such other evidence or testimony as the Ethics Committee shall deem appropriate to do substantial justice. Any information may be considered that is relevant or potentially relevant. The Ethics Committee will be afforded 15 minutes in addition to any unused time remaining from the Registered Technologist's or Candidate's time allotment, to ask questions and shall not be bound by any state or

federal rules of evidence. The Registered Technologist or Candidate in question shall have the right to make a closing statement before the close of the hearing. A transcript or an audio recording of the hearing testimony is made for in person, teleconference, and videoconference hearings only. Ethics Committee deliberations are not recorded.

In the case where ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the *Rules and Regulations* of ARRT) or the denial of renewal or reinstatement of certification and registration, the Ethics Committee shall assess the evidence presented at the hearing, or continue the matter and request the Registered Technologist or Candidate provide additional evidentiary information prior to making its decision, and shall subsequently prepare written findings of fact and its determination as to whether grounds exist for the denial of an application for certification and registration or renewal or reinstatement of certification and registration, and shall promptly transmit the same to the Registered Technologist or Candidate in question and to the Board of Trustees at the next Board of Trustees meeting.

In the case of alleged violations of the Rules of Ethics by a Registered Technologist or Candidate, the Ethics Committee shall assess the evidence presented at the hearing, or continue the matter and request the Certificate Holder or Candidate provide additional evidentiary information prior to making its decision, and shall subsequently prepare written findings of fact and its determination as to whether there has been a violation of the Rules of Ethics and, if so, the appropriate sanction, and shall promptly transmit the same to the Registered Technologist or Candidate in question and to the Board of Trustees at the next Board of Trustees meeting.

Potential actions available to the Ethics Committee are set forth in Section 4 (Range of Actions). Unless a timely appeal from any findings of fact and determination by the Ethics Committee is taken to the Board of Trustees in accordance with Section 3 below (Appeals), the Ethics Committee's findings of fact and determination in any matter (including the specified sanction) shall be final and binding upon the Registered Technologist or Candidate in question.

### 3. Appeals

Except as otherwise noted in these Administrative Procedures, the Registered Technologist or Candidate may appeal any decision of the Ethics Committee to the Board of Trustees by submitting a written request for an appeal within 30 days after the decision of the Ethics Committee is mailed. The written request for an appeal must be accompanied by a nonrefundable appeal fee in an amount to be determined by ARRT. In rare cases, the appeal fee may be waived, in whole or in part, at the sole discretion of ARRT.

Failure to make a written request for an appeal and to remit the appeal fee (unless the appeal fee is waived in writing by ARRT) within such period or submission of a properly executed Appeal Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or Board of Trustees pursuant to such notice.

A Registered Technologist or Candidate may waive the 30-day timeframe to request an appeal. To request a waiver of the 30-day timeframe, the Registered Technologist or Candidate must complete an Appeal Waiver form that is available on the ARRT website at [www.arrt.org](http://www.arrt.org). The Appeal Waiver form must be signed by the Registered Technologist or Candidate, notarized, and submitted to ARRT. The Chief Executive Officer of ARRT shall have the authority to receive, administer, and grant the Appeal Waiver form and may be assisted by staff members and/or legal counsel of ARRT. Any sanction proposed by the Ethics Committee would become effective on the date the appeal waiver is processed.

In the event of an appeal, those Trustees who participated in the hearing of the Ethics Committee shall not participate in the appeal. The remaining members of the Board of Trustees, other than any members who believe for any reason that they would be unable to render an objective and unbiased decision, shall consider the decision of the Ethics Committee, the files and records of ARRT applicable to the case at issue, and any written appellate submission of the Registered Technologist or Candidate in question, and shall determine whether to affirm or to modify the decision of the Ethics Committee or to remand the matter to the Ethics Committee for further consideration. In making such determination to affirm or to modify, findings of fact made by the Ethics Committee shall be conclusive if supported by any evidence. The Board of Trustees may grant re-hearings, hear additional evidence, or request that ARRT or the Registered Technologist or Candidate in question provide additional information in such manner, on such issues, and within such time as it may prescribe.

All hearings and appeals provided for herein shall be private at all stages. It shall be considered an act of professional misconduct for any Registered Technologist or Candidate to make an unauthorized publication or revelation of the same, except to the Registered Technologist's or Candidate's attorney or other representative, immediate superior, or employer.

## 4. Range of Actions

### (a) No Action

A determination of no action means that there is little or no evidence to substantiate that a violation even occurred. In a situation lacking even a preponderance of evidence, the complaint is determined to be unsubstantiated.

### (b) Clear

A determination that there was a violation of the Rules of Ethics but that no further action will be taken against a person's eligibility for certification and registration or for continued certification and registration. The determination of cleared/eligible can be made administratively by staff, by the Chair, or by the Committee depending on the nature of the violation and existing policies addressing authority for taking action. After a violation has been cleared, the applicant or registrant will not be required to report the violation in the future.

### (c) Private Reprimands

A private reprimand is a reprimand that is between the individual and ARRT and is not reported to the public. Private reprimands allow for continued certification and registration.

### (d) Public Reprimands

A public reprimand is a sanction that is published on ARRT's website for a period of one year. Public reprimands allow for continued certification and registration.

### (e) Conditional

Conditional status may be assigned administratively to Candidates and/or R.T.s in those cases where there are additional requirements that need to be met before the ethics file can be closed (e.g., conditions mandated by the court, regulatory authority and/or Ethics Committee). Conditional status is an administrative action and is not considered adverse.

### (f) Suspensions

Suspension is the temporary removal of an individual's certification and registration in all categories for up to one year.

### (g) Summary Suspensions

Summary suspension is an immediate suspension of an individual's certification and registration in all categories. If an alleged violation of the Rules of Ethics involves the occurrence, with respect to a Registered Technologist, of an event described in the Rules of Ethics, or any other event that the Ethics Committee determines would, if true, potentially pose harm to the health, safety, or well-being of any patient or the public, then, notwithstanding anything apparently or expressly to the contrary contained in these Administrative Procedures, the Ethics Committee may, without prior notice to the Registered Technologist and without a prior hearing, summarily suspend the certification and registration of the individual pending a final determination under these Administrative Procedures with respect to whether the alleged violation of the Rules of Ethics in fact occurred. Within five working days after the Ethics Committee summarily suspends the certification and registration of an individual in accordance with this provision, the Ethics Committee shall, by expedited delivery or certified mail, return receipt requested, give to the individual written notice that describes: (1) the summary suspension; (2) the reason or reasons for it; and (3) the right of the individual to request a hearing with respect to the summary suspension by written notice to the Ethics Committee, which written notice must be received by the Ethics Committee not later than 15 days after the date of the written notice of summary suspension by the Ethics Committee to the individual. If the individual requests a hearing in a timely manner with respect to the summary suspension, the hearing shall be held before the Ethics Committee or a panel comprised of no fewer than two members of the Ethics Committee as promptly as practicable, but in any event within 30 days after the Ethics Committee's receipt of the individual's request for the hearing, unless both the individual and the Ethics Committee agree to a postponement beyond the 30-day period. The Ethics Committee has the absolute discretion to deny any request for a postponement and to proceed to a hearing with or without the participation of the individual. The applicable provisions of Section 2 (Hearings) of these Administrative Procedures shall govern all hearings with respect to summary suspensions, except that neither a determination of the Ethics Committee, in the absence of a timely

request for a hearing by the affected individual, nor a determination by the Ethics Committee or a panel, following a timely requested hearing, is appealable to the Board of Trustees.

#### (h) Ineligible

An individual may be determined ineligible to obtain or renew certification and registration or ineligible for reinstatement of certification and registration. The time frame may be time limited or permanent.

#### (i) Revocation

Revocation removes the individual's certification and registration in all categories. The time frame may be time limited or permanent.

#### (j) Alternative Dispositions

An Alternative Disposition ("AD") is a contract between an individual and the ARRT (as represented by the Ethics Committee) that allows for continued certification and registration in lieu of revocation, provided the individual performs certain requirements, including, but not limited to, providing documentation, attending counseling and/or submitting to random drug and/or alcohol screening. A Registered Technologist or Candidate who voluntarily enters into an Alternative Disposition Agreement agrees to waive all rights set forth in these Administrative Procedures.

#### (k) Deny Removal of a Sanction

After a predetermined time, an individual may request removal of a sanction that had been previously imposed by the Committee. Sufficient compelling evidence must be provided to convince the Committee the sanction should be removed or modified. If evidence is not provided, the Committee may deny removal of the sanction. Situations that may result in denial of a sanction removal request include: additional violations of the Rules of Ethics after the sanction was imposed, failure to demonstrate that there has been adequate rehabilitation, and/or continued denial of responsibility.

#### (l) Civil or Criminal Penalties

Conduct that violates ARRT's Rules of Ethics may also violate applicable state or federal law. In addition to the potential sanctions under the *Standards of Ethics*, ARRT may, without giving prior notice, pursue civil and/or criminal penalties.

### 5. Publication of Adverse Decisions

Summary suspensions and final decisions (other than private reprimands and Alternative Dispositions) that are adverse to a Registered Technologist or Candidate will be communicated to the appropriate authorities of certification organizations and state licensing agencies and provided in response to written inquiries into an individual's certification and registration status. The ARRT shall also have the right to publish any final adverse decisions and summary suspensions and the reasons therefore. For purposes of this paragraph, a "final decision" means and includes: a determination of the Ethics Committee relating to an adverse decision if the affected individual did not request a hearing in a timely manner; a non-appealable decision of the Ethics Committee; an appealable decision of the Ethics Committee from which no timely appeal is taken; and, the decision of the Board of Trustees in a case involving an appeal of an appealable decision of the Ethics Committee.

### 6. Procedure to Request Removal of a Sanction

A sanction imposed by ARRT, including a sanction specified in a Settlement Agreement, specifically provides a sanction time frame and it shall be presumed that a sanction may only be reconsidered after the time frame has elapsed. At any point after a sanction first becomes eligible for reconsideration, the individual may submit a written request ("Request") to ARRT asking the Ethics Committee to remove the sanction. The Request must be accompanied by a nonrefundable fee in an amount to be determined by ARRT. A Request that is not accompanied by the fee will be returned to the individual and will not be considered. In rare cases, the fee may be waived, in whole or in part, at the sole discretion of ARRT. The individual is not entitled to make a personal appearance before the Ethics Committee in connection with a Request to remove a sanction or to modify a Settlement Agreement.

Although there is no required format, Requests for both sanction removal and Settlement Agreement modification must include compelling reasons justifying the removal of the sanction or modification of the Settlement Agreement. It is recommended that the individual demonstrate at least the following: (1) an understanding of the reasons for the sanction; (2) an understanding of why the action

leading to the sanction was felt to warrant the sanction imposed; and (3) detailed information demonstrating that the individual's behavior has improved and similar activities will not be repeated. Letters of recommendation from individuals, who are knowledgeable about the person's sanction imposed; and current character and behavior, including efforts at rehabilitation, are advised. If a letter of recommendation is not on original letterhead or is not duly notarized, the Ethics Committee shall have the discretion to ignore that letter of recommendation.

Removal of the sanction is a prerequisite to apply for certification and registration. If, at the sole discretion of the Ethics Committee, the sanction is removed, the individual will be allowed to pursue certification and registration via the policies and procedures in place at that time as stated in Section 6.05 of the *ARRT Rules and Regulations*.

If the Ethics Committee denies a Request for removal of the sanction or modification of a Settlement Agreement, the decision is not subject to a hearing or to an appeal, and the Committee will not reconsider removal of the sanction or modification of the Settlement Agreement for as long as is directed by the Committee.

## 7. Amendments to the Standards of Ethics

The ARRT reserves the right to amend the *Standards of Ethics* following the procedures under Article XII, Section 12.02 of the *ARRT Rules and Regulations*.

## ARRT Standards of Ethics Receipt

I, \_\_\_\_\_ (Print name) have received a copy of the ASRT Standards of Ethics. The standards have been explained to me, and I have read and understood the expectations of me in my student capacity and as a radiologic technologist once I have matriculated.

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

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

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

Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Updated: 12/15/2024	AH: N/A
JRCERT: N/A	Policy: RADR ARRT Standards of Ethics

# Student Information Computer Charting



Legal Name (include middle initial):

\_\_\_\_\_

(Print Name Clearly)

Last 4#'s of Social Security #: \_\_\_\_\_

Check One:

\_\_\_\_\_ RN Student

\_\_\_\_\_ LVN Student

\_\_\_\_\_ Medical Student

\_\_\_\_\_ Other (explain) \_\_\_\_\_

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

Anticipated Graduation Date: \_\_\_\_\_  
(month and year)

I have read the attached Midland Memorial Hospital's "Confidentiality and Security Agreement"  
[Confidentiality and Security Agreement](#)

I understand that a violation of this agreement will result in immediate suspension of access privileges, and my school will be notified. I understand that violation of this agreement may also result in conviction and/or other penalties under federal law.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Witness \_\_\_\_\_

Midland Memorial Hospital, Midland, TX 79701  
**Confidentiality and Security Agreement**

I understand that Midland Memorial Hospital (the "Hospital") for which I work, volunteer or provide services, or with which the entity (e.g., physician practice) for which I work has a relationship (contractual or otherwise) involving the exchange of health information with the Hospital, has a legal and ethical responsibility to safeguard the privacy of all patients and to protect the confidentiality of the patients' health information. In the course of my employment/assignment or working relationship with the Hospital, I understand that I may come into the possession of this type of Confidential Information. I will access, use and disclose this information only when it is necessary to perform my job related duties in accordance with the Hospital's Privacy and Security Policies. I further understand that I must sign and comply with this Agreement in order to obtain authorization for access to Confidential Information.

- (1) I will only access the Confidential Information for patients with whom I have a patient care relationship and for whom I have a need to access their Confidential Information in the course of such care. I will access only the amount of information necessary to perform my job related to the care of the patient, or for treatment, payment or healthcare operations. For any other access, I will obtain the express permission of the Hospital. I will only access or use systems or devices I am officially authorized to access, and will not demonstrate the operation or function of systems or devices to unauthorized individuals.
- (2) I will act in the best interest of the Hospital and in accordance with its Code of Conduct at all times during my relationship with the Hospital.
- (3) I will not disclose or discuss any Confidential Information with others, including friends or family who do not have a need to know it. I will not discuss Confidential Information where others can overhear the conversation. It is not acceptable to discuss Confidential Information even if the patient's name is not used.
- (4) I will not in any way divulge, copy, release, sell, loan, alter or destroy any Confidential Information except as properly authorized or allowed under the Texas Open Records Act.
- (5) I will not make any unauthorized transmissions, inquiries, modifications or purgings of Confidential Information.
- (6) I will practice good workstation security measures such as locking up portable media when not in use, using screen savers with activated passwords appropriately, and position screens away from public view.
- (7) I will practice secure electronic communications by transmitting Confidential Information only to authorized entities, in accordance with approved security standards.
- (8) I will:
  - a. Use only my officially assigned User-ID and password (and/or token) (e.g., SecurID card).
  - b. Use only approved licensed software.
  - c. Use a device with virus protection software.
- (9) I will never:
  - a. Share/disclose user-Ids, passwords or tokens with any other person.
  - b. Use another person's user-Id, password or token to access Confidential Information.
  - b. Use tools or techniques to break/exploit security measures.
  - c. Connect to unauthorized networks through any systems or devices.
- (10) I will notify my manager, the Hospital's Health Information Manager, or appropriate Information Services person if my password has been seen,

disclosed or otherwise compromised, and will report to such person any activity that violates this agreement, privacy and security policies, or any other incident that could have any adverse impact on Confidential Information. I understand that I am responsible and will be held accountable for any activity for which my User-Id, password or token is used by another party.

- (11) In the event of an unauthorized acquisition, access, use or disclosure of Protected Health Information (which generally includes individually identifiable health information transmitted or maintained in any medium) which compromises the security or privacy of such information (a "breach"), I will report the breach immediately to the Hospital's Privacy Officer.
- (12) I understand that I have no right to any ownership interest in any information accessed or created by me during my relationship with the Hospital. Furthermore, I understand that the Hospital has the right to audit any technology and processes I use to access Confidential Information, which may include, but not necessarily be limited to, any computer and files accessed by me, paper or electronic, related to such Confidential Information, and I will grant the Hospital access to such technology and files as requested to perform these audits.
- (13) I understand that I should have no expectation of privacy when using Hospital information systems. The Hospital may log, access, review and otherwise utilize information stored on or passing through its systems, including e-mail, in order to manage systems and enforce privacy and security.
- (14) I understand that a violation of this Agreement may result in disciplinary action, up to and including termination of employment, suspension and loss of privileges, and/or termination of authorization to work within or with the Hospital, in accordance with the Hospital's policies.
- (15) I agree that my obligations under this Agreement will continue after termination of my employment, expiration of my contract, or my relationship ceases with the Hospital. Upon termination, I will immediately return any documents or media containing confidential information to the Hospital.

The following statements apply to physicians using Hospital systems containing patient identifiable health information (e.g. CPRS, IDX, Cerner, CPN):

- (16) I will only access software systems to review patient records or Hospital information when I have a legitimate need to know in caring for and treating the patient, as well as any necessary consent. By accessing a patient's records or Hospital information, I am affirmatively representing to the Hospital at the time of each access that I have the requisite legitimate need to know and appropriate consent, and the Hospital may rely on that representation in granting such access to me.
- (17) I will insure that only appropriate personnel in my office will access the Hospital software systems and Confidential Information and I will annually train such personnel on issues related to patient confidentiality and access.
- (18) I will accept full responsibility for the actions of my employees who may access the Hospital software systems and Confidential Information, including any breach, and will remove an employee's access to Confidential Information if necessary.
- (19) I understand that the Hospital may decide at any time without notice to no longer provide access to any systems to physicians on the medical staff unless other contracts or agreements state otherwise. I understand that if I am no longer a member of the facility's medical staff, I may no longer use the facility's equipment to access the Internet. I further understand that the Hospital reserves the right to remove my and my employees' access to Confidential Information for violating this Agreement.

Signing this document, I acknowledge that I have read this Agreement and I agree to comply with all the terms and conditions stated above.

Employee/Consultant/Vendor/Office Staff/Physician/Volunteer Signature	Campus/Physician's Office/Vendor	Date
Employee/Consultant/Vendor/Office Staff/Physician/Volunteer Printed Name	Business Entity Name	

October 2011

## Disciplinary Categories

Students in non-compliance of Midland College Student Conduct Policies, Allied Health Program Policies and/or Program-Specific Policies will be subject to disciplinary actions as follows.

This list is not meant to be inclusive of all offenses, but to be used as a guide in determining the severity of an offense and assessing appropriate corrective actions. Offenses not listed will be evaluated on a case-by-case basis by the Program Chair and Allied Health Division Dean.

All offenses are cumulative and progressive throughout the program.

### Category I

*The following offenses will result in immediate program dismissal, without the option for readmission to any Allied Health program for 1 year.*

#### **Falsification, Misrepresentation, and Fraud**

6. Falsification, incomplete, and/or alteration of patient, facility, student, college, or publisher records, as well as websites for resource materials.
7. Representing self as any person other than a Midland College Allied Health student to gain access to secured resources intended for instructor uses.
8. Intentional misrepresentation of self as Allied Health student in Clinical Affiliate facilities when not involved in college-sponsored activities.
9. Participating in any form of conduct that is fraudulent and/or defamatory.
10. Entering a clinical facility during unapproved hours representing self as a Midland College Allied Health student.

#### **Illegal and Unethical Acts**

6. Participating in illegal or unethical acts.
7. Theft of personal, college, or facility property
8. Any act that has the potential for results in harm to the patient.
  - a. Failure to provide a safe standard of care and/or providing unethical patient care as outlined by the respective Code of Ethics and Scope of Practice.
  - b. Insubordination (failure to adhere to direct orders from faculty and/or clinical instructors)
  - c. Failure to adhere to written policies of Midland College, Midland College Allied Health, Allied Health Program and/or Clinical Affiliate(s)
  - d. Physical and/or cognitive impairment
  - e. [HIPPA violation](#), which includes any unauthorized release of patient-related information or photocopying of patient records in any setting, including social media.
  - f. Giving medications or conducting diagnostic testing without consent of instructor/preceptor and/or without a physician order
  - g. Abandonment of patient care and/or other assigned responsibilities, including leaving the assigned area or facility without appropriate authorization according to program-specific

policies, which results in actual or potential harm to the patient and/or other healthcare professionals.

9. Substance Abuse
  - a. Any positive drug screen during the pre-admission process and/or throughout the duration of the program
  - b. Physical and/or cognitive impairment due to being under the influence of illegal drugs, controlled substances, and/or alcohol during any program-related activity (lecture, lab, and/or clinical)
  - c. Bringing illicit substances into the facility or consuming these substances while on facility property.
  - d. Refusal to consent to drug screening.
  - e. Any other violation of Midland College Student Conduct: Alcohol and Drug Use Policy ([FLBE Local](#))<sup>13</sup>
10. Change in criminal history:
  - a. A felony violation of a statute intended to control the possession or distribution of a substance in the Government Code, Chapter 481, and (Texas Controlled Substance Act)
  - b. Aggravated Robbery (Penal Code § 29.03)
  - c. Agreement to Abduct from Custody (Penal Code § 25.031)
  - d. Arson (Penal Code § 28.02)
  - e. Assaultive Offenses (Penal Code Chapter 22)
  - f. Burglary and Criminal Trespass (Penal Code Chapter 30)
  - g. Computer Crimes (Penal Code Chapter 33)
  - h. Criminal Homicide (Penal Code Chapter 19)
  - i. Forgery (Penal Code § 32.21)
  - j. Fraud (Penal Code Chapter 32)
  - k. Indecency with a Child (Penal Code § 21.11)
  - l. Indecent Exposure (Penal Code § 21.07)
  - m. Kidnapping and Unlawful Restraint (Penal Code Chapter 20)
  - n. Public Indecency (Penal Code Chapter 43)
  - o. Public Lewdness (Penal Code § 21.07)
  - p. Robbery (Penal Code § 29.02)
  - q. Sale or Purchase of a Child (Penal Code § 25.11)
  - r. Solicitation of a Child (Penal Code § 25.06)
  - s. Theft (Penal Code Chapter 31)
  - t. Weapons (Penal Code Chapter 46)

## Behavior

7. Disruptive or abusive behavior on or off campus during college related activities.
8. Verbal, mental, or physical abuse including sexual harassment to anyone on campus or in the Clinical Affiliate setting.
9. A verbal act or physical act of aggression against another person on facility or college premises

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<sup>13</sup> Midland College (2019, December 13). *FLBE — Student Conduct: Alcohol and Drug Use*. Board Policy Manual. Retrieved July 5, 2023, from <https://pol.tasb.org/PolicyOnline/PolicyDetails?key=885&code=FLBE#legalTabContent>

10. Deliberate destruction or damage to facility, college, patient, student, visitor, or employee property
11. Expulsion from the Clinical Affiliate due to failure to follow policy, unprofessional, unethical, or egregious behavior.
12. Any other disorderly conduct as outlined in the Midland College Student Rights and Responsibilities: Student Conduct Policy ([FLB Local](#))<sup>14</sup>

### Category II

*The following offenses will result in Academic Probation. Academic Probation is defined as a probationary period that persists through the duration of the Allied Health Program, in which a subsequent violation of any Midland College, Allied Health, or Program-Specific policy will result in immediate dismissal, without the option for readmission to any Allied Health program for 1 year. Students on academic probation must complete a mandatory review of the Allied Health Student Handbook and the Program-Specific Student Handbook and satisfactory completion of a Policy Assessment. Disciplinary actions are progressive in nature. Any additional infraction will escalate disciplinary measures to Category I.*

10. Academic dishonesty as outlined by Midland College policy [FLB \(Local\)](#). *Additionally, any instance of academic dishonesty will result in a grade of zero for the assignment/quiz/exam.*
11. Failure to demonstrate the ability to function as a team member in clinical.
12. Inappropriate display of anger, that does not result in physical harm.
13. No call, no show to any required college-sponsored and/or clinical activity.
14. Abandonment of patient care and/or other assigned responsibilities, including leaving the assigned area or facility without appropriate authorization according to program-specific policies, *which does not result in actual or potential harm to the patient and/or other healthcare professionals.*
15. Causing damage to college, Clinical Affiliate, or patient property through negligence
16. Causing injury or potential harm to a patient, staff, visitor, peer, or instructor through negligence
17. Insubordination or refusal to obey an order, *which does not result in actual or potential harm to the patient and/or other healthcare professionals.*
18. Removal from the Clinical Affiliate at the request of the Affiliate personnel with the possibility of transfer to another site or return later.

Solicitation of any physician or other licensed healthcare provider for any medical advice, consultation, and/or medication while participating in any clinical activities and/or representing self as a Midland College Allied Health student.

### Category III

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<sup>14</sup> Midland College (2021, November 22). *FLB — Student Rights and Responsibilities: Student Conduct*. Board Policy Manual. Retrieved July 5, 2023, from <https://pol.tasb.org/PolicyOnline/PolicyDetails?key=885&code=FLB#localTabContent>



*The following offenses are subject to disciplinary action in the form of a written warning. Disciplinary actions are progressive in nature. Any additional infraction will escalate disciplinary measures to Category II.*

6. Accepting any gifts of monetary value from patients and/or families.
7. Use of foul language while representing self as a Midland College Allied Health student.
8. Complaint from any Clinical Affiliate and/or college personnel of inappropriate, unprofessional behavior, and/or appearance, including personal hygiene and/or dress code concerns.
9. Any failure to follow program-specific policy and/or Clinical Affiliate rules and/or policies.
10. Failure to report an absence from clinical rotations in the appropriate manner as outlined in the program-specific policy, *which does not include a no call, no show.*

Signature

*My signature below indicates that the information above is true, accurate, and complete to the best of my knowledge.*

Student Name (*print*): \_\_\_\_\_ Student ID: \_\_\_\_\_

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

## Direct/Indirect and Repeat Examination Verification

According to the 2021 JRCERT Standards for an Accredited Educational Program in Radiography:

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

JRCERT Objective 5.4 Assures that medical imaging procedures are performed under a qualified radiographer's supervision.

JRCERT Objective 5.4 Assures that students are **directly supervised** by a qualified radiographer when repeating unsatisfactory images.

Repeated images will be noted in the student's repeat log which must be submitted at the end of every rotation. Failure to do so may result in disciplinary action.

Clinical competency is gained throughout the program through education, skills checkoffs and formative and summative evaluations to ensure students are gaining and retaining competency. The clinical competency system is designed to allow students to progress through the program and gain the skills they need to practice as an independent and competent radiographer upon graduation and passing the national licensure. Students are not allowed to perform certain exams, regardless of their clinical competency, under INDIRECT supervision.

**Direct supervision** is required for the following situations:

- All exams until competency is achieved
- All mobile exams
- All fluoroscopic exams
- All surgical exams
- All repeat exposures
- All patient transports between departments
- All observations in mammography exams (note: students are not permitted to perform mammography procedures)

**Indirect supervision** promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. "Immediately available" is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. The availability applies to all areas where ionizing radiation equipment is in use on patients.

Indirect supervision is required for the following situations:

- All exams except mobile, fluoroscopic, and surgical exams after competency has been achieved
- All patient transports within the Imaging Department

By signing below, I acknowledge that I understand the JRCERT guidelines, as well as the Midland College Radiologic Technology Program policies regarding direct and indirect supervision, as well as the process for completing repeated radiographs. Failure to abide by this policy will result in disciplinary action.

Student Name (Print): \_\_\_\_\_

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

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

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

Updated: 12/15/2024	RADR Policy: Direct/Indirect Supervision
JRCERT: 5.1, 5.3, 5.4	AH: N/A

## Dosimeter Acknowledgment

I understand that the radiation dosimeter is assigned to myself alone and I cannot wear another student's dosimeter. I understand that I am responsible for the care of the equipment. I understand that I cannot wash or immerse in water nor leave it in the sun, car, or anywhere where it can become damaged. I understand that the dosimeter is not my personal property. I understand that if lost I am to pay a \$140 fee payable to the MC Radiology Program, Allied Health Division for a replacement. I understand that if I do not turn in the dosimeter at the end of the radiology technology program, a hold will be placed on my account with the registrar's office, possibly affecting the release of my transcripts.

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

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

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

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

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

Updated: 12/14/2024	RADR Policy: Radiation Monitoring
JRCERT: 5.1, 5.3, 5.5	AH: N/A

**HIPAA/Patient Confidentiality Acknowledgement**

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

In accordance with the [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#), Allied Health students must maintain strict confidentiality of Protected Health Information (PHI). To maintain HIPAA compliance, Allied Health students are prohibited from the following:

- Discussing any patient information, including identifiers, care, diagnosis and/or treatment outside of the educational environment, which is defined as a secure area or classroom, excluding any public area.
- Any unauthorized release of patient-related information
- Photocopying of any patient records in any setting
- Displaying any patient record in any setting, including social media.

You understand that if it is determined that a breach of confidentiality has occurred as a result of your actions, you can be held liable for repercussions from such actions. You will also be subject to the Health Sciences Discipline Policy.

Signature indicates you have read the above statement and understand your rights and responsibilities regarding HIPAA. You agree that you have been informed of HIPAA and the consequences for violating any patient confidentiality.

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

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

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

Updated: 12/15/2024	RADR Policy: Discipline Policy
JRCERT: N/A	AH: Code of Conduct



**Allied Health Incident Report Form**

This form is to be completed within 24 hours of any accident, injury, exposure to infectious/environmental hazards, and/or any other incident that occurs while in the lab or clinical setting. *This document will be retained in the student's file and a copy submitted to the Health Science's Division Office.*

**Program:**

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Incident Information**

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

Location of Incident

Description of Incident  
*Describe what happened, factors leading up to the event, etc. Be as specific as possible – attach additional sheets, as needed. Use only patient data that is pertinent to the incident, but do not include HIPAA identifiers.*

Were there any witnesses to the incident?  Yes  No

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

Did any injury occur?  Yes  No

*If yes, describe the injury, including location, type of injury, and/or any other known information regarding the injury.*

Description of Action Taken



Describe what happened when the incident was discovered, including actions taken in regard to the patient, student, staff and/or institution, including, but not limited to, incident reports, physician notification, patient care alterations, access to facility services and collaboration with instructor and staff.

Was medical attention provided?  Yes  No

If yes, where was treatment provided?

**Signatures**

My signature below indicates that the information above is true, accurate, and complete to the best of my knowledge.

Student Name (print): \_\_\_\_\_ Student ID: \_\_\_\_\_

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

The above items have been reviewed and discussed with the student and reported to the appropriate Clinical Affiliate, if applicable.

Program Chair Name (print): \_\_\_\_\_

Program Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If applicable:

Clinical Director/Instructor Name (print): \_\_\_\_\_

Clinical Director/Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

A copy of this document will be submitted to the division office.

**Immunizations and Screenings**

I understand that it is my responsibility to upload all of my shot records, TB screenings and CPR to Castlebranch. I also understand that Castlebranch will send me an email before I am due for a vaccination, TB update, or CPR update.

I understand that it is my responsibility to receive any vaccinations that I require on my own time and at my own cost. I understand that I will not be allowed time off class or clinicals to receive a vaccination, class, CPR, or TB screening.

I understand that if I am pulled from a clinical facility to obtain vaccinations, screenings, or any other required item, I will be counted as an unexcused absence.

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

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

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

Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Updated: 12/15/2024	AH: Conditions of Admission
JRCERT: N/A	RADR Policy: Immunizations and Screenings

**Licensure Eligibility Notification Form-Radiology Technology**

Completion of Midland College degrees and/or certificates does not guarantee eligibility to take a certification/registry/licensure examination. The eligibility of each person is determined on an individual basis by the regulatory body of the specific discipline. If you have a conviction of a crime other than a minor traffic violation, physical or mental disability/illness, hospitalization/treatment for chemical dependency within the **past five years**, current intemperate use of drugs or alcohol or a previous denial of a licensure or action by a licensing authority, you will need to contact the specific regulatory body for an individual ruling. Some programs require a criminal background check and urine and drug screen.

Health Sciences students will be required to sign the Licensure Eligibility Notification Form, which will be maintained in the student’s file. If, at any time, a student’s criminal or disciplinary history changes, this may significantly affect their eligibility to apply for and take licensing examinations. As outlined in the Health Sciences Policy-Any questions regarding the impact of a previous criminal or disciplinary matter should be directed to the appropriate licensing authority.

If a change in criminal status should occur, the student will be held to the Health Sciences Disciplinary Categories.

Students are responsible for ensuring pre-clearance, if required, through the American Registry of Radiologic Technologists. If clearance cannot be obtained, the student will be dropped from the program.

*For program-specific requirements and additional information, see the radiology program’s handbook.*

\_\_\_\_\_  
Student Print Name

\_\_\_\_\_  
Student ID #

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

\_\_\_\_\_  
Date

Updated: 12/25/2024	RADR Policy: ARRT Standard of Ethics; Discipline Categories
JRCERT: N/A	Allied Health Policy-Conditions of Admission Approved: 7/2023

**MRI Safety Status Change Acknowledgment**

I understand that in the event that I receive any implantable devices, pacemaker, aneurism clips, embolism clips, cochlear implants and/or hearing aid devices, I must update the program director and/or clinical director immediately. This is to ensure my health and safety around the MRI unit.

I understand that due to my implanted materials, if found to be incompatible with the MRI unit, I may not participate in any MRI rotations or transport of patients to or from the unit.

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

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

Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Updated: 12/24/2024	RADR Policy: MRI Safety
JRCERT: 5.1, 5.2, 5.3	AH: N/A

Pregnancy Declaration Procedure

I, \_\_\_\_\_, am aware of the Pregnancy Declaration Procedure and acknowledge my right to declare or not to declare any pregnancies or pregnancy-related condition, as well as the process of Declaring or Withdrawing Declaration of said condition.

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

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

Date \_\_\_\_\_

Program

Director: \_\_\_\_\_

Updated: 12/15/2024	RADR: Pregnancy Status, Declaration & Withdraw
JRCERT: 5.1, 5.3	AH: N/A

## Radiology Program Confidentiality Statement

In compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), the following types of student information may be released to the public unless the student desires to withhold all or any portion of it: student's name, address, email address, phone number, date, and place of birth, major, participation in activities and sports, semesters enrolled degrees, certificates, enrollment status and previous institutions attended.

Any student objecting to the release of all or any portion of such information must notify the admissions office in writing as soon as possible during each semester of enrollment. Release of any additional information pertaining to the student records must be authorized by the student (i.e., grades, transcripts). The student's parents may authorize release of information if the student is younger than 18 years of age and a dependent as defined by the IRS. Program files, which are maintained within the campus office or the clinical education settings, are kept in locked drawers or file cabinets. Access to these records is restricted and limited to the Program Director, Clinical Coordinator, Dean of Health Sciences or the faculty of the campus or clinical education setting.

More information regarding FERPA, your rights to release of information, and any additional questions can be found on the Midland College website at [Midland College FERPA](#).

### Signatures

*My signature below indicates that I have read and understand the information above, and give the Health Sciences program and/or division permission to release information related to health and safety in accordance to the requirements of the clinical affiliates.*

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

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

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

Updated: 5/1/2024	RADR Policy: Confidentiality/FERPA
JRCERT: 1.4	HS: Code of Conduct

## Allied Health Release of Information

Students admitted to Midland College Allied Health programs must submit to a criminal background check prior to being accepted into Allied Health program. The results of the criminal background check are provided to the Allied Health division secretary or program clerk. Background check reports will be reviewed by the department chair and/or Dean. The College President, Vice President of Instructional Services, and/or the College's legal counsel may also have access to the background check results in certain situations. Results of criminal background checks will be maintained in a locked space with immediate access only by the secretarial staff, department chair/or Dean.

Allied Health programs must provide the results of the criminal background check to participating clinical affiliates (hospitals, clinics, etc.), and that the student must be approved by those agencies before he/she is allowed to do clinical practice in the agency. Sufficient clinical practice is a requirement of the regulatory agencies governing health careers programs and students must have sufficient clinical practice to satisfy course and program objectives. Not being allowed to enter a clinical affiliate renders the student unable to satisfy course and program objectives and therefore unable to progress within the Allied Health program.

Clinical affiliates require proof of compliance with health and safety requirements including the individual's immunization record, which may include results of laboratory testing confirming immunity to certain diseases, results of urine drug screening, and results of testing for tuberculosis (skin test, blood test, or recent chest x ray). Additionally, proof of CPR training is required by clinical affiliates. The Clinical Director, or their designee, will provide this information, or an attestation, to the clinical affiliates which request that such information be provided.

### Signatures

*My signature below indicates that I have read and understand the information above and gives the Health Sciences program and/or division permission to release information related to health and safety in accordance to the requirements of the clinical affiliates.*

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

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

Updated: 12/14/2024	RADR Policy: Student Confidentiality
JRCERT: 1.4	AH: Release of Information Form, Conditions of Admission

**Safety-Universal Precautions**

Your signature indicates that you have been informed of the importance of universal precautions and hand hygiene in healthcare. You, as a student, are acknowledging that safety is paramount to yourself and your patients. You agree to perform Universal Precautions and understand your rights and responsibilities as a student radiographer in the Midland College Radiologic Technology Program is to protect yourself and your patients.

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

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

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

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

Updated: 12/14/2024	RADR Policy: Safety-Universal Precautions
JRCERT: 5.3, 5.5	HS: NA

Statement of Understanding Midland College-Radiology Technology

I have read and understand the information in the Radiologic Technology Program Handbook and agree to adhere to these stated policies, procedures and standards. I further acknowledge that I have received a written copy as well as information about online access of the Midland College Code of Student Conduct, the Health Sciences Policy Handbook, and of how to access a copy of the Radiology Technology Student Handbook at all times.

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

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

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

\_\_\_\_\_

Updated: 12/14/2024	
JRCERT: N/A	Policy: N/A



**Allied Health Student Information Form**

1<sup>st</sup> Semester     2<sup>nd</sup> Semester     3<sup>rd</sup> Semester     4<sup>th</sup> Semester     5<sup>th</sup> Semester

Name: \_\_\_\_\_ Student ID \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Local Emergency Contact**

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

**Physician Information**

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

**Please complete the following:**

**Race/Ethnicity**

- White/Caucasian (not Hispanic)
- African American/Black
- Hispanic/Latino
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian/Alaskan
- Other

**Gender**

- Male     Female     Other

**International Student**

- Yes\*     No

*\*Not a U.S. citizen or permanent resident; in U.S. on temporary basis*

**Age**

- 17-20 years old     26-30 years old     41-50 years old     61+ years old
- 21-25 years old     31-40 years old     51-60 years old

**Scholarship**

Do you receive a scholarship?     Yes     No    Source \_\_\_\_\_

**Insurance**

I understand that it is my responsibility to have health/accident insurance while enrolled in the nursing program as required by the clinical agreements with hospitals or healthcare agencies. My signature below verifies insurance and that all information on this form is true and correct. Failure to maintain insurance status may be grounds for program dismissal.

**Signatures**

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

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

## Student Services and Resources

Midland College has a variety of student resources available. As many resources as possible have been listed in the Radiologic Technology handbook.

Students are made aware that you can use the search function on the main Midland College website to find the contact information for any service listed.

The program director has reviewed the different services, the contact information for the school counselor, financial aid, pathways advisors, and various agencies within the campus. A copy of those agencies with contact information can be found in the Radiology Program Handbook. A copy of the handbook is presented to each student during orientation and is found online in Trajecsys.

The program director during new student orientation will ensure students are made aware that help is available to all students regardless of economic status, disability, race, religion, color, age, or any protected status.

The program director has also made you aware that the only way to seek help is by asking. The program director has made each student expressly aware that all faculty, staff, and administration are here to ensure student success.

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

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

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

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

Updated: 12/14/2024	RADR Policy: Student Services & Resources
JRCERT: 1.3, 2.3	HS Policy: None

**Midland College Radiologic Technology Program**  
**Student Translation**

In accordance with the Patient’s Bill of Rights, a patient has the right to have medical procedures, examinations, and results explained to them in their native language. Students are not designated medical translators that are certified through the sponsoring organization, namely, Midland Memorial Hospital. Students will not be used as, or in place of, qualified medical translators that have clearance from the hospital. This ensures patient safety, reduces confusion, and ensures that patients receive priority care in their native language.

Again, students will not take the place of designated medical translation services.

By signing below, you acknowledge that you have been made aware of the MC Radiology Policy regarding student translation.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Program Director: \_\_\_\_\_

12/15/2024	RADR: Student Translation
JRCERT: None	AH: N/A

## Allied Health Travel Acknowledgement

Participation in Health Sciences programs requires travel to and from clinical activities, and may include additional travel for trips, when applicable.

The student is responsible for transportation accommodation and understands that Midland College is not responsible for any accidents and/or bodily injury that may occur because of the travel required.

### Signatures

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

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

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

Updated: 12/14/2024	AH: Travel Acknowledgment
JRCERT: N/A	Policy: N/A

## Venipuncture

I understand that venipuncture is within a radiology technologist's scope of practice. Venipuncture requires didactic education as well as clinical laboratory practice. Venipuncture is not taught until the fourth semester in the radiology program.

It is the position of Midland Memorial Hospital (MMH) that students are not allowed to perform venipuncture, regardless of the skill level of the student. Students will not be allowed to perform venipuncture at MMH, its affiliates, or any other clinical site.

### Scope of Practice:

Allied Health students must abide by the respective Code of Ethics for the program in which they are enrolled.

Additionally, Allied Health students are prohibited from performing any unassisted skill and/or procedure which exceeds their level of educational experience and/or is outside of the scope of practice.

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

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

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

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

Updated: 12/15/2024	MMH Policy Venipuncture; AH Scope of Practice
JRCERT: N/A	Policy: RADR Venipuncture

## Verification of Health Insurance

Students must provide a current personal health insurance card. Students understand that they agree to maintain personal health insurance while in the program. Discount or sliding scale fee cards are not accepted.

I understand that:

1. In order to participate in any radiologic course with a clinical component, I must carry personal health insurance. **It is my responsibility to have current documentation of insurance in my master file in the department.**

2. By signing this verification, I am stating to the Radiologic Technology Program and the clinical agencies that I have personal health insurance.

3. I am aware that Midland College and Midland Memorial Hospital is not responsible for any accidents or injuries that occur while on their property, and that I am not covered under workman's compensation insurance.

3. Falsification of this document will result in my being processed through the Student Code of Conduct. If it is determined that a breach of confidentiality has occurred as a result of my action, I can be liable for damages that result from such a breach.

Signature indicates that you have read the above statement and understand your rights and responsibilities as a student radiographer in the Midland College Radiologic Technology Program.

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

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

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

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

Updated: 12/15/2024	RADR: Health Insurance Requirements
JRCERT Policy: NA	AH: Conditions of Admission: Health Insurance Requirements

**Pregnancy Declaration/Withdrawal Form**

This form is provided for your convenience. To make your written declaration of pregnancy, you may fill in the blanks in this form letter, you may use a form letter the licensee has provided to you, or you may write your own letter.

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 to be provided).

Estimated delivery date \_\_\_\_\_

I understand the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem (5 millisievert) (unless that does 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 or job responsibilities during my pregnancy.

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

Student MC I.D. \_\_\_\_\_

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

Date \_\_\_\_\_

WITHDRAWAL OF DECLARATION OF PREGNANCY

A student may withdraw her Pregnancy Declaration form at any time.

I choose to withdraw my Pregnancy Declaration.

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

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

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

Date \_\_\_\_\_

Updated: 12/15/2024	AH: Pregnancy & Pregnancy Related Conditions
JRCERT: 5.1	RADR: Pregnancy & Related Conditions

Missed Punch Form

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

Assigned Rotation: \_\_\_\_\_

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

Time in: \_\_\_\_\_ Lead/Preceptor signature: \_\_\_\_\_

Time out: \_\_\_\_\_ Lead/Preceptor signature: \_\_\_\_\_

I have missed clocking in/out on the above date and time. I understand that repeated missed punches can result in disciplinary and/or academic action.

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

This form must be turned into the program or clinical director within 24 hours so that your time can be recorded. If this form is not turned in on time, is not signed, or is not signed by designated staff, the missed punch form will not be accepted, and you will be counted as absent for the clinical day. You will have to make up your time.

Updated: 12/14/2024	RADR Handbook: Missed punch form
JRCERT: N/A	Policy: RADR Discipline Policy

## **Student Services And/or Resources:**

Perkins Resources, Support our Students, Testing Services, Mental Health Resources, Foster Care Students resources, and where to get an ID card. This information is linked here [Student Services \(midland.edu\)](#).

The contact information for:  
SHEP GRINNAN  
Counselor, Foster Care Liaison  
(432) 685-4505  
[sgrinnan@midland.edu](mailto:sgrinnan@midland.edu)

Foster Care Students: [Foster Care Students](#)

Chaps Helping Chaps: [Student Emergency Fund](#)

Perkins Resources: [Perkins Resources](#)

All mental health hotlines: Found here. [Mental Health Resources \(midland.edu\)](#)  
Permian Basic AHEC [Permian Basin AHEC \(midland.edu\)](#)

Texas Workforce Commission: [Texas Workforce Commission \(midland.edu\)](#)

Athletics, student discounts, bus transportation, clubs & activities, news, and information about living on campus found here: [Campus Life \(midland.edu\)](#)

Alcohol and Drug Abuse Prevention Program found here: [Midland College Alcohol & Drug Abuse Prevention Program](#)

Pathways Advising Team: [Pathways Advising \(midland.edu\)](#)

Fitness Center Information: [Fitness Center \(midland.edu\)](#)

Fasken Learning Resource Center: [Library \(midland.edu\)](#)  
Scholarships offered through Midland College: [Scholarships](#)

Labs & Tutoring: [Labs & Tutoring \(midland.edu\)](#)

Testing Center: [Testing Services](#)

West Texas Food Bank: [West Texas Food Bank – A West Texas Without Hunger](#)

Main Campus Resources including Dollye Neal Chapel, cosmetology, map & floor plans, bookstore, campus tours, ect: [Main Campus Resources \(midland.edu\)](#)

June and Frank Cowden Dining Hall: [Dining on Campus \(midland.edu\)](#)

SafePlace Midland: [Contact Us – Safe Place of the Permian Basin](#)

**Safety:** MC Police Department: [Midland College Police Department](#)

On-Campus Emergency: 911. MCPD: 432-685-4734. They are available 24/7, 365. You will need to visit the police department to get a parking sticker, or else they will ticket you. The MCPD website is the latest crime statistics and safety protocols listed for Midland College.

While in class or lab at F. Marie Hall Outpatient Center, call 911 in an emergency. Both agencies will respond by letting the dispatcher know.

**Title IX** [Title IX \(midland.edu\)](#). “Title IX of the Education Amendment of 1972 prohibits discrimination on the basis of sex in education programs and activities at federally funded institutions. Title IX protects students, faculty, staff from all forms of sex discrimination.

The Department of Education’s Office for Civil Rights (OCR), the Equal Employment Opportunity Commission (EEOC), and the State of Texas regard Sexual Harassment a specific form of discriminatory harassment and is unlawful discriminatory practice.” Students will be made aware of the procedure for contacting the Title IX designee:

**Andrea Sims**

Director of Student Support Services / Title IX Coordinator  
Scharbauer Student Center, Room 125  
Midland, Texas 79705  
(432) 685-4781  
title9@midland.edu

Title IX Policy is expressed in further detail in RADR Policy “Title IX Accommodations”.

**Request for Disability Accommodations:**

“The Americans With Disabilities Act (ADA) and Section 504 of the Rehabilitation Act require that no otherwise qualified person with a disability be denied access to, or the benefits of, or be subjected to discrimination of any program or activity provided by an institution or entity receiving federal financial assistance. It is this Section 504 mandate that has promoted the development of disability support service programs in colleges and universities across the country. Sub-part E of Section 504 deals specifically with this mandate for institutions of higher education”.

The contact information for the Director of Residence Life and Accommodations:

**BRADLEY GWATNEY**

Director Residence Life and Accommodations  
bgwatney@midland.edu  
(432) 685-6467  
Scharbauer Student Center, Room 135  
3600 N. Garfield

Midland, TX 79705

**National Hotlines & Help Lines**

Alcohol Treatment Referral Hotline: 1-800-252-6465 Referrals available 24 hours a day.

National Drug/Alcohol Treatment Referral Service: 1-800-662-4357 Referrals available 24 hours a day. National Council of Alcoholism and Drug Dependence (NCADD) – Helpline: 1-800-662-2255 Refers caller to local affiliate office of NCADD. Referrals available 24 hours a day.

988 Lifeline-Suicide and Crisis line. {JRCERT 2.3}



## Diagnostic Exam Protocols

EXAM	PROTOCOL	REFERENCE CODES
ABDOMEN 1 VIEW	1V • AP TO INCLUDE BLADDER (KUB)	2909185
ABDOMEN 2 VIEWS	2V • AP UPRIGHT TO INCLUDE DIAPHRAMS • AP SUPINE (KUB)	2909192
ABDOMEN SERIES	3V • PA CHEST (AP FOR STRETCHER/WC) • AP UPRIGHT ABDOMEN (INCL DIAPHRAGMS) • AP SUPINE (KUB)	2553941701
AC JOINTS (ACROMIOCLAVICULAR JOINTS)	2V • AP UPRIGHT WITHOUT WEIGHTS • AP UPRIGHT WITH WEIGHTS (AT LEAST 5 LBS)	2909203
ANKLE	3V • AP • INTERNAL OBLIQUE (MORTISE VIEW – ANKLE IS AT 15°-20°) • LATERAL	2909218 LT 2909221 RT
BONE AGE	1V • PA HAND AND WRIST OF NON-DOMINANT HAND	2909299
BONE LENGTH -LEG LENGTH	1V • AP HIP TO ANKLE (BILATERAL)	2909302
CALCANEOS	2V • DORSAL PLANTAR (40° CEPHALIC) • LATERAL	2909327 LT 2909331 RT
CERVICAL SPINE	3V • AP/PA (15° CEPHALIC/CAUDAL) • ODONTOID (FUCHES IF NEEDED) • LATERAL (SWIMMERS, IF NEEDED)	2909859
CERVICAL SPINE FOR DOWNS SYNDROME	4V • AP/PA (15° CEPHALIC/CAUDAL) • LATERAL (SWIMMERS, IF NEEDED) • FLEXION • EXTENSION	2909862
CERVICAL SPINE SERIES	5V • AP/PA (15° CEPHALIC/CAUDAL) • ODONTOID (FUCHES IF NEEDED) • BOTH OBLIQUES (45° PT WITH 15° CEPHALIC/CAUDAL) • LATERAL (SWIMMERS, IF NEEDED)	2909862
CERVICAL SPINE SERIES W/FLEXION/EXTENSION	7V • AP/PA (15° CEPHALIC/CAUDAL) • ODONTOID (FUCHES IF NEEDED) • BOTH OBLIQUES (45° PT WITH 15° CEPHALIC/CAUDAL) • LATERAL (SWIMMERS, IF NEEDED) • FLEXION • EXTENSION	2556213549
CHEST	1V • PA/AP VIEW SEE REFERRAL FOR SPECIFIC INSTRUCTIONS	2554640281
CHEST	2V • PA • LATERAL	2909341
CHEST	4V • PA • LATERAL • BOTH DECUBS SEE REFERRAL FOR SPECIFIC INSTRUCTIONS	2909354
CLAVICLE	2V • AP • AP WITH A 15° CEPHALIC ANGLE COLLIMATE TO CLAVICLE	2909385 LT 2909388 RT
CLUB FOOT	2V • AP WEIGHT-BEARING • LATERAL WEIGHTBEARING SIMULATED WEIGHTBEARING ON BABIES	2909510 LT 2909513 RT

COCCYX/SACRUM	3V	<ul style="list-style-type: none"> <li>• AP SACRUM (15° CEPHALIC)</li> <li>• AP COCCYX (10° CAUDAL)</li> <li>• LATERAL</li> </ul>	2909781
ELBOW	3V	<ul style="list-style-type: none"> <li>• AP</li> <li>• EXTERNAL OBLIQUE</li> <li>• LATERAL</li> <li>• IF FAT PAD VISUALIZED, RADIAL (45° CEPHALIC)</li> </ul>	2909428 LT 2909431 RT
FOREIGN BODY (ORBITS MRI)	1V	<ul style="list-style-type: none"> <li>• PA WATERS</li> </ul> <p>IF YOU SEE METAL IN EYE DO LATERAL</p>	2909537
FACIAL BONES	3V	<ul style="list-style-type: none"> <li>• PA</li> <li>• WATERS</li> <li>• LATERAL</li> </ul>	2909444
FEMUR	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL (INCL. PROXIMAL AND DISTAL JOINTS)</li> </ul>	274357209 LT 274357215 RT
FINGER	3V	<ul style="list-style-type: none"> <li>• PA HAND</li> <li>• OBLIQUE (FINGER IS AT 45°) – COLLIMATE TO FINGER</li> <li>• LATERAL – COLLIMATE TO FINGER</li> </ul>	2909459 LT 2909462 RT
FOOT	3V	<ul style="list-style-type: none"> <li>• AP (10° CEPHALIC)</li> <li>• MEDIAL OBLIQUE (FOOT IS 30°-40° INTERNAL ROTATION)</li> <li>• LATERAL</li> </ul>	2909519 LT 2909522 RT
FOREARM	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL (INCL. PROXIMAL AND DISTAL JOINTS)</li> </ul>	2909528 LT 2909531 RT
HAND	3V	<ul style="list-style-type: none"> <li>• PA</li> <li>• OBLIQUE (HAND IS AT 30°)</li> <li>• LATERAL</li> </ul>	2909558 LT 2909561 RT
HIP	2V	<ul style="list-style-type: none"> <li>• AP PELVIS</li> <li>• FROG LEG (MAY DO TOGETHER IF BILATERAL)</li> <li>(IF FX, DO GROIN LATERAL)</li> </ul> <p>INCLUDE END OF PROSTHESIS ON BOTH VIEWS</p>	274357123 LT 274357129 RT
HUMERUS	2V	<ul style="list-style-type: none"> <li>• AP (INCLUDE BOTH JOINTS)</li> <li>• LATERAL (INCLUDE BOTH JOINTS)</li> </ul> <p>IF FX, DO TRANS-THORACIC VIEW</p>	2909594 LT 2909597 RT
INFANT LOWER EXTREMITY (UNDER 1 YEAR)	2V	<ul style="list-style-type: none"> <li>• AP (HIP TO ANKLE)</li> <li>• LATERAL (HIP TO ANKLE)</li> </ul>	2909655 LT 2909658 RT
INFANT UPPER EXTREMITY (UNDER 1 YEAR)	2V	<ul style="list-style-type: none"> <li>• AP (SHOULDER JOINT TO WRIST)</li> <li>• LATERAL (SHOULDER JOINT TO WRIST)</li> </ul>	2910010 LT 2910013 RT
KNEE	3V	<ul style="list-style-type: none"> <li>• AP (USE APPROPRIATE ANGLE - 5°-10°)</li> <li>• OBLIQUE (USE APPROPRIATE ANGLE - 5°-10°)</li> <li>• LATERAL (USE APPROPRIATE ANGLE - 5°-10°)</li> </ul>	2909622 LT 2909625 RT
LUMBAR SPINE	3V	<ul style="list-style-type: none"> <li>• AP – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• LATERAL – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• L5/S1 SPOT</li> </ul>	2909877
LUMBAR SPINE (kids under 12)	3V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL</li> <li>• L5/S1 SPOT, IF NOT OPEN ON LATERAL</li> </ul>	2909877
LUMBAR SPINE	4V	<ul style="list-style-type: none"> <li>• AP – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• LAT – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• FLEXION – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• EXTENSION – CENTER 1" ABOVE THE ILIAC CREST</li> </ul>	2909889
LUMBAR SPINE	5V	<ul style="list-style-type: none"> <li>• AP – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• BOTH OBLIQUES (45°)- CENTER 1" ABOVE THE ILIAC CREST</li> <li>• LATERAL - CENTER 1" ABOVE THE ILIAC CREST</li> </ul>	2909889

		<ul style="list-style-type: none"> <li>• L5/S1 SPOT</li> </ul>	
LUMBAR SPINE	7V	<ul style="list-style-type: none"> <li>• AP – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• BOTH OBLIQUES (PATIENT IS ANGLED 45°)- CENTER 1" ABOVE THE ILIAC CREST</li> <li>• LATERAL - CENTER 1" ABOVE THE ILIAC CREST</li> <li>• L5/S1 SPOT</li> <li>• UPRIGHT LATERAL FLEXION – CENTER 1" ABOVE THE ILIAC CREST</li> <li>• UPRIGHT LATERAL EXTENSION – CENTER 1" ABOVE THE ILIAC CREST</li> </ul>	2909885
MANDIBLE	5V	<ul style="list-style-type: none"> <li>• PA</li> <li>• TOWNE'S</li> <li>• LATERAL OF AFFECTED SIDE</li> <li>• BILATERAL LAWS VIEWS</li> </ul>	2909661
MASTOIDS	5V	<ul style="list-style-type: none"> <li>• TOWNE'S</li> <li>• BILATERAL LAWS</li> <li>• BILATERAL MASTOID TIPS</li> </ul> <p>ASSIGN IMAGES TO DR. KUO</p>	2909679
NAVICULAR SERIES	5V	<ul style="list-style-type: none"> <li>• PA WRIST (ROLL FINGERS TO FLATTEN WRIST JOINT)</li> <li>• OBLIQUE WRIST</li> <li>• LATERAL WRIST</li> <li>• ULNAR DEVIATION (10° -15° CEPHALIC) (COLLIMATE TO NAVICULAR/SCAPHOID)</li> </ul>	2556213631 LT 2556213621 RT
NASAL BONES	4V	<ul style="list-style-type: none"> <li>• WATER'S</li> <li>• BOTH LATERALS</li> </ul>	2909700
NOSE TO RECTUM FOR FB	1V	<ul style="list-style-type: none"> <li>• AP</li> </ul>	2909543
ORBITS	5V	<ul style="list-style-type: none"> <li>• PA</li> <li>• WATER'S</li> <li>• LATERAL</li> <li>• BOTH REESES</li> </ul>	2909715
PELVIS COMPLETE	2V	<ul style="list-style-type: none"> <li>• AP PELVIS</li> <li>• BILATERAL FROG LEG (TOGETHER, IF POSSIBLE)</li> </ul>	2909736
PELVIS FOR TRAUMA		<ul style="list-style-type: none"> <li>• AP PELVIS</li> <li>• BILATERAL FROG LEG (TOGETHER IS POSSIBLE)</li> <li>• BILATERAL JUDET VIEWS (PT IS AT 45° ANGLE)</li> <li>• INLET (40° CAUDAL)</li> <li>• OUTLET(20-35° CEPHALIC MALE/30-45° CEPHALIC FEMALE)</li> </ul>	
RIBS (UNILATERAL)	4V	<ul style="list-style-type: none"> <li>• PA CHEST</li> <li>• AP LOWER RIBS</li> <li>• BOTH OBLIQUES OF THE AFFECTED SIDE (PATIENT IS 45°)</li> </ul> <p>PLACE THE AFFECTED SIDE CLOSEST TO THE DETECTOR PLACE A BB ON THE AREA OF PAIN</p>	2909757 LT 2909760 RT 2909754 BL
RIBS (BILATERAL)		<ul style="list-style-type: none"> <li>• PA CHEST</li> <li>• AP LOWER RIBS (BOTH SIDES ON ONE VIEW, IF POSSIBLE)</li> <li>• OBLIQUES (BOTH SIDES ON ONE VIEW, IF POSSIBLE). (PATIENT IS 45°)</li> </ul> <p>PLACE THE AFFECTED SIDE CLOSEST TO THE DETECTOR IF YOU CAN'T PLACE BOTH SIDE ON ONE OBLIQUE VIEW, YOU WILL NEED TO DIVIDE THE CHEST (4 OBLIQUE VIEWS) PLACE A BB ON THE AREA OF PAIN</p>	
SACROILIAC JOINTS	3V	<ul style="list-style-type: none"> <li>• AP SACROILIAC JOINTS</li> <li>• BILATERAL OBLIQUES OF SI JTS (PATIENT IS AT 25°-30°)</li> </ul>	2909775

SACRUM/COCCYX	3V	<ul style="list-style-type: none"> <li>• AP SACRUM (15° CEPHALIC)</li> <li>• AP COCCYX (10° CAUDAL)</li> <li>• LATERAL</li> </ul>	2909781
SCAPULA	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• SCAPULAR Y LATERAL</li> </ul>	2909796 LT 2909799 RT
SCOLIOSIS SURVEY	1V	<ul style="list-style-type: none"> <li>• PA</li> </ul>	274357221
SHOULDER	3V	<ul style="list-style-type: none"> <li>• AP INTERNAL ROTATION</li> <li>• AP EXTERNAL ROTATION</li> <li>• SCAPULAR Y LATERAL</li> </ul>	2909817 LT 2909820 RT
SHUNT SERIES (NO CONTRAST)	5V	<ul style="list-style-type: none"> <li>• AP SKULL</li> <li>• LATERAL SKULL TO INCLUDE C SPINE</li> <li>• AP CHEST</li> <li>• AP ABDOMEN</li> <li>• AP PELVIS</li> </ul> <p>MAY NEED TO DO C-SPINE INDIVIDUALLY IF UNABLE TO OBTAIN ON LATERAL SKULL VIEW</p>	
SINUSES	3V	<ul style="list-style-type: none"> <li>• CALDWELL</li> <li>• WATERS</li> <li>• LATERAL</li> </ul> <p>ALL IMAGES ARE UPRIGHT FOR FLUID LEVELS</p>	2909832
SNIFF TEST	2V	<ul style="list-style-type: none"> <li>• PA - DEEP INSPIRATION</li> <li>• PA - FULL EXPIRATION</li> </ul> <p>(FLUORO A CINE LOOP OF DIAPHRAMS IF RADIOLOGIST NOT PRESENT)</p>	24592427
SKELETAL SURVEY (adult)		PA CHEST, AP ABDOMEN (KUB), PELVIS, BOTH FOREARMS, HUMERUS, FEMURS, TIB/FIBS, LAT L-SPINE, LAT SKULL, PA SKULL	2553941957
SKELETAL SURVEY (infant/child) FOR METASTATIC DISEASE		LATERAL SKULL TO INCLUDE C-SPINE, AP CHEST(BONE TECHNIQUE), AP LONG BONES INCLUDING HANDS AND FEET, LATERAL T-SPINE AND L-SPINE, AP ABDOMEN TO INCLUDE PELVIS, AND L-SPINE )BONE TECHNIQUE)	2909308
SKELETAL SURVEY (POSSIBLE CHILD ABUSE) MAKE SURE THERE ARE NO CLOTHES, DIAPERS, SHEETS, OR ANYTHING IN THE WAY OF IMAGING. THESE MAY BE GOING TO COURT.		AP AND LATERAL SKULL, AP CXR(BONE TECHNIQUE), BILATERAL OBLIQUE RIBS, AP ABDOMEN TO INCLUDE PELVIS AND L-SPINE, LATERAL CSPINE, LATERAL T-SPINE AND L-SPINE, PA HANDS, AP AND LATERAL LONG BONES, (BOTH RIGHT AND LEFT HUMERUS, FOREARM, TIB/FIB, FEMUR, IMAGED SEPARATELY, AP FEET. (ANY ADDITIONAL VIEWS AFTER RADIOLOGIST REVIEWS IMAGES	2553941957
SKELETAL SURVEY FOR A BABY WITH DYSPLASIA – IE. DWARFISM  THEY WANT TO SEE THE WHOLE PICTURE SO IT IS NOT NECESSARY TO IMAGE THE LONG BONES SEPARATELY		AP AND LATERAL SKULL, AP CXR(BONE TECHNIQUE), BILATERAL OBLIQUE RIBS, AP ABDOMEN TO INCLUDE PELVIS AND L-SPINE, LATERAL CSPINE, LATERAL T-SPINE AND L-SPINE, PA HANDS, AP AND LATERAL LONG BONES, (BOTH ARMS, BOTH LEGS IMAGED TOGETHER, AP FEET. (ANY ADDITIONAL VIEWS AFTER RADIOLOGIST REVIEWS IMAGES)	2909308
SKULL	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL OF THE AFFECTED SIDE</li> </ul>	2909838
SKULL SERIES	4V	<ul style="list-style-type: none"> <li>• AP</li> <li>• TOWNES</li> <li>• BOTH LATERALS</li> </ul>	2909835
SOFT TISSUE NECK	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL - INSPIRATION</li> </ul>	2909703

SOFT TISSUE NECK (BRAY)	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• TRUE NEUTRAL LATERAL - INSPIRATION</li> <li>• TRUE EXTENSION LATERAL – INSPIRATION</li> </ul> SHOW TO DR. KUO BEFORE THE PATIENT LEAVES.	
STERNOCLAVICULAR JOINTS	3V	<ul style="list-style-type: none"> <li>• PA</li> <li>• BOTH OBLIQUES (PT IS ROTATED 10°-15°) - EXPIRATION</li> </ul> COLLIMATE TO STERNOCLAVICULAR JOINT	2909917
STERNUM	2V	<ul style="list-style-type: none"> <li>• RIGHT ANTERIOR OBLIQUE</li> <li>• LATERAL</li> </ul> COLLIMATE TO STERNUM	2909920
TEMPOMANDIBULAR JOINTS (TMJ's)	5V	<ul style="list-style-type: none"> <li>• AP/PA TOWNES</li> <li>• BILATERAL MODIFIED LAWS – CLOSED MOUTH</li> <li>• BILATERAL MODIFIED LAWS – OPEN MOUTH</li> </ul>	2909947
TIB/FIB	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL</li> </ul> INCLUDE BOTH JOINTS	2909941 LT 2909944 RT
THORACIC SPINE	2V	<ul style="list-style-type: none"> <li>• AP</li> <li>• LATERAL</li> <li>• SWIMMERS, IF NEEDED FOR T1</li> </ul>	2554640297
THORACOLUMBAR	2V	<ul style="list-style-type: none"> <li>• AP – CENTER 2-3" ABOVE ILIAC CREST</li> <li>• LATERAL – CENTER 2-3" ABOVE THE ILIAC CREST</li> </ul>	2553941981
TOES	3V	<ul style="list-style-type: none"> <li>• AP FOOT – 15° CEPHALIC</li> <li>• OBLIQUE – COLLIMATE TO TOE</li> <li>• LATERAL – COLLIMATE TO TOE</li> </ul>	2909956 LT 2909959 RT
WRIST	3V	<ul style="list-style-type: none"> <li>• PA – CURL FINGERS IN TO FLATTEN WRIST</li> <li>• OBLIQUE – WRIST IS 45° – FINGERS EXTENDED</li> <li>• LATERAL – FINGERS EXTENDED</li> </ul>	2556213631 LT 2556213621 RT

## Student Clinic Performance Evaluation

Student: \_\_\_\_\_ Site: \_\_\_\_\_

**Student Clinic Performance Evaluation**
**Performance Rating:**

- 1 = Never
- 2 = Seldom Performs/progresses
- 3 = Occasionally performs/progresses
- 4 = Often Performs/progresses
- 5 = Constantly Performs

**Professionalism**

 Always in uniform, meets dress code requirements-uniform is neat, shoes are clean. Always has ID & dosimeter 
 1    2    3    4    5
 

 Always maintains a positive and pleasant attitude 
 1    2    3    4    5
 

 Always maintains a professional dialogue when speaking about patients-avoids using demeaning or unprofessional words 
 1    2    3    4    5
 

 Maintains composure in difficult situations 
 1    2    3    4    5
 

 Keeps work area clean and organized 
 1    2    3    4    5
 

 Accepts constructive critique of performance with a positive attitude 
 1    2    3    4    5
 
**Dependability**

 Avoids unplanned absences 
 1    2    3    4    5
 

 Follows assigned schedule-does not leave early or arrive late 
 1    2    3    4    5
 
**Initiative**

 Student attempts new and challenging tasks 
 1    2    3    4    5
 

 Completes exams in a timely manner 
 1    2    3    4    5
 

 Starts the day by preparing rooms, cleaning 
 1    2    3    4    5
 

 Watches for exams, initiates without being told, self-starter 
 1    2    3    4    5
 

 Asks to do things, see different exams, participation 
 1    2    3    4    5

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

**Aptitude**

Retains information w/o the need to multiple repeated explanations  1  2  3  4  5

Demonstrates ability to apply previously gained knowledge  1  2  3  4  5

Self-critiques image quality  1  2  3  4  5

Adapts to other technologists and physician's styles and methods  1  2  3  4  5

Asks appropriate questions at appropriate times  1  2  3  4  5

**Communication**

Communicates with patients in a respectful considerate manner  1  2  3  4  5

Is able to collect appropriate clinical information in timely fashion  1  2  3  4  5

Communicates effectively with department and hospital staff  1  2  3  4  5

Appropriately communicated handoffs for patients  1  2  3  4  5

**Patient Care & Safety**

Adheres to HIPAA and confidentiality standards  1  2  3  4  5

Demonstrates ability to adapt to patient's physical & emotional needs  1  2  3  4  5

Demonstrates concern for patient's comfort and keeps patient covered  1  2  3  4  5

Assures patient safety  1  2  3  4  5

Appropriately shields patients of child bearing age and children  1  2  3  4  5

Assures safety for technologists, students, and others  1  2  3  4  5

Demonstrates appropriate infection control practices  1  2  3  4  5

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Evaluator Signature: \_\_\_\_\_  
Print: \_\_\_\_\_

Please allow student to return this form to the director. If you have immediate concerns, please notify Sabrina Piazza.



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Chest and Thorax</b>					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
<b>Upper Extremity</b>					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
<b>Trauma:</b> Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
<b>Trauma:</b> Upper Extremity (Non-Shoulder)*	✓				
<b>Lower Extremity</b>					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		
Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
<b>Trauma:</b> Lower Extremity*	✓				

\* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Head</b> – Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
<b>Spine and Pelvis</b>					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
<b>Abdomen</b>					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		
Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			



**4.2.2 Imaging Procedures (continued)**

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
<b>Fluoroscopy Studies</b> – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus ( <i>NOT</i> Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
<b>Mobile C-Arm Studies</b>					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
<b>Mobile Radiographic Studies</b>					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
<b>Pediatric Patient</b> (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity	M	✓	✓		
Abdomen	M	✓	✓		
Mobile Study	M	✓	✓		
<b>Geriatric Patient</b> (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine	M	✓			
<b>Subtotal</b>					
Total Mandatory exams required	36	42			
Total Elective exams required		15	10		
Total number of simulations allowed			10		

# Safety Screening Form for Magnetic Resonance (MR) Procedures

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

Name (first, middle, last): \_\_\_\_\_

Gender:  Male  Female Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

**If uncertain of any answer below, please circle and leave blank to discuss with the technologist.**

## Why are you having this examination (medical problem)?

\_\_\_\_\_

List current medications:

None

\_\_\_\_\_

\_\_\_\_\_

List all allergies:

None

\_\_\_\_\_

\_\_\_\_\_

Date of last menstrual period \_\_\_\_\_

Yes  No Is there a possibility that you are pregnant?

Yes  No Are you post-menopausal?

Yes  No Are you breast feeding?

## Please indicate if you have or have not had any of the following:

- Yes  No Previous MRI examination

Facility name and city: \_\_\_\_\_

Date of examination: \_\_\_\_\_

Body part imaging: \_\_\_\_\_ Reason for examination: \_\_\_\_\_

- Yes  No Surgery or medical procedure of any kind

If yes, list all prior surgeries and approximate dates: \_\_\_\_\_

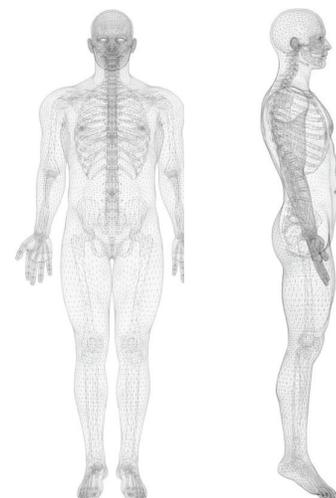
\_\_\_\_\_

\_\_\_\_\_

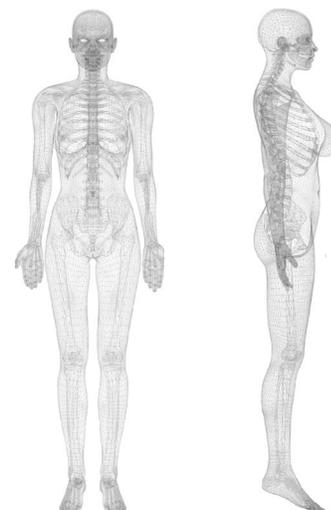
## MR Hazard Checklist

Please mark the location of any implant, device or metallic foreign body inside your body or site of surgical operation.

### Male:



### Female:



# Safety Screening for Magnetic Resonance (MR) Procedures

- Yes  No Injury by a metal object or foreign body (e.g., bullet, BB, shrapnel)  
If yes, explain: \_\_\_\_\_
- Yes  No Injury to your eye from a metal object  
 Yes  No If yes, did you see medical assistance?  
If yes, describe what was found: \_\_\_\_\_
- Yes  No Foreign body removed from eye  
If yes, describe what was taken out: \_\_\_\_\_
- Yes  No Asthma or other allergic respiratory disease
- Yes  No Kidney disease
- Yes  No Diabetes
- Yes  No Hypertension
- Yes  No Previously received contrast agent (dye) for a CT, MRI or other X-ray or study
- Yes  No Allergic reaction to CT, MRI, X-ray contrast agent (dye)  
If yes, explain: \_\_\_\_\_
- Yes  No Spinal fusion procedure
- Yes  No Endoscopy or colonoscopy in last three months

**The following items may be harmful to you during your MR scan and may interfere with the MR examination. You must provide a “Yes” or “No” answer for every item.**

**Please indicate if you CURRENTLY HAVE or HAVE EVER HAD any of the following:**

## Surgically implanted medical devices

- Yes  No Any type of electronic, mechanical or magnetic implant  
If yes, list type: \_\_\_\_\_
- Yes  No Cardiac pacemaker, defibrillator or other cardiac implant (in place or removed)
- Yes  No Aneurysm Clip
- Yes  No Neurostimulator, diaphragmatic stimulator, deep brain stimulator, vagus nerve stimulator, bone growth stimulator, spinal cord stimulator, or any biostimulator (in-place or removed)  
If yes, list type: \_\_\_\_\_
- Yes  No Any type of internal electrodes or wires
- Yes  No Cochlear implant
- Yes  No Implanted drug pump (e.g., insulin, baclofen, chemotherapy, pain medicine)

# Safety Screening for Magnetic Resonance (MR) Procedures

- Yes  No Spinal fixation device
- Yes  No Any type of coil, filter or stent  
If yes, list type: \_\_\_\_\_
- Yes  No Artificial heart valve
- Yes  No Any type of ear implant
- Yes  No Penile implant
- Yes  No Artificial eye
- Yes  No Eyelid spring and/or eyelid weight
- Yes  No Any type of implant held in place by a magnet
- Yes  No Any type of surgical clip or staple
- Yes  No Any IV access port (e.g., Broviac, Port-a-Cath, Hickman, PICC line)
- Yes  No Shunt  
If yes, type: \_\_\_\_\_
- Yes  No Artificial limb  
If yes, what and where: \_\_\_\_\_
- Yes  No Tissue Expander (e.g., breast)
- Yes  No IUD  
If yes, type: \_\_\_\_\_
- Yes  No Surgical mesh  
If yes, location: \_\_\_\_\_
- Yes  No Radiation seeds
- Yes  No Any implanted items (e.g., pins, rods, screws, nails, plates, wires)

## Removable medical devices

- Yes  No Hearing aid
- Yes  No Removable drug pump (e.g., insulin, Baclofen, Neulasta)
- Yes  No Any type of ear implant
- Yes  No Artificial eye
- Yes  No Any type of implant held in place by a magnet
- Yes  No Any type of surgical clip or staple
- Yes  No Medication patch (e.g., nitroglycerine, nicotine)
- Yes  No Artificial limb

# Safety Screening for Magnetic Resonance (MR) Procedures

If yes, what and where: \_\_\_\_\_

- Yes  No Removable dentures, false teeth or partial plate
- Yes  No Diaphragm, pessary

If yes, type: \_\_\_\_\_

- Yes  No Have you recently ingested a "pill cam?"

If yes, date "pill cam" was ingested: \_\_\_\_\_

## Personal

- Yes  No Body piercings

If yes, location: \_\_\_\_\_

- Yes  No Wig, hair implants
- Yes  No Tattoos or tattooed liner
- Yes  No Any hair accessories (e.g., bobby pins, barrettes, clips, extensions, weaves)
- Yes  No Jewelry
- Yes  No Metal-containing clothing material and/or underwear
- Yes  No Magnetic cosmetics and hair care (e.g., magnetic eyelashes, magnetic nail polish)
- Yes  No Electronic monitoring or tagging equipment (e.g., ankle monitor)
- Yes  No Fitness tracker/biometer (e.g., Fitbit)

Yes  No Any other type of surgically implanted medical devices, removable medical devices or personal items not covered above?

If yes, type: \_\_\_\_\_

# Instructions for Patients

1. You will be provided hearing protection during your scan. You are strongly urged to use the earplugs or headphones provided to you during your MR examination, since some patients find the noise levels unacceptable, and the noise levels may affect your hearing if these provided hearing protection devices are not utilized.
2. Remove all jewelry and piercings (e.g., necklaces, pins, rings)
3. Remove all body piercings
4. Remove all hair pins, bobby pins, barrettes, clips, etc.
5. Remove all dentures, false teeth, partial dental plates
6. Remove eyeglasses and hearing aids
7. Remove watches, cell phones and pagers
8. Remove all cards with magnetic strips (e.g., credit cards, bank cards, etc.)
9. Because some clothing may contain metal even when not apparent, the MR technologist will instruct you to remove all clothing and worn/removable items from your body. MR Safe clothing will be provided to you to wear during your MRI scan. This is being done to help ensure your safety during the examination.
10. If you are unable to remove any of the above items please notify the technologist.

**I have read and understand the entire content of this form.**

Patient signature: \_\_\_\_\_

MD/RN/RT signature: \_\_\_\_\_

MD/RN/RT printed name: \_\_\_\_\_

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

# Safety Screening for Magnetic Resonance (MR) Procedures

## FOR MR Office Use Only

Patient name: \_\_\_\_\_ Patient ID # \_\_\_\_\_

Referring Physician: \_\_\_\_\_

Procedure: \_\_\_\_\_ Diagnosis: \_\_\_\_\_

Clinical History: \_\_\_\_\_

### Hazard Checklist for Level 2 MR Personnel

- Yes  No Pulse oximetry device
- Yes  No EKG pads/leads
- Yes  No Endotracheal tube
- Yes  No Swan-Ganz catheter
- Yes  No Extra ventricular device
- Yes  No Arterial line transducer
- Yes  No Foley catheter with temperature sensor and/or metal clamp
- Yes  No Rectal probe
- Yes  No Esophageal Probe
- Yes  No Tracheotomy tube
- Yes  No Guidewires
- Yes  No Halo vest
- Yes  No Other

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

**If any Level 2 MR Personnel checklist items are answered yes, this should be brought to the attention to the covering MR Physician.**

- Yes  No Patient screened with ferromagnetic detector
- Yes  No eGFR indicated for contrast

eGFR value: \_\_\_\_\_ Results date: \_\_\_\_\_

- Yes  No If required, the patient was provided the Medication Guide

### Cleared by:

MR Technologist: \_\_\_\_\_

Physician/Radiologist (if required) \_\_\_\_\_