

CHI HEALTH  
SCHOOL OF  
RADIOLOGIC TECHNOLOGY

2024-2026

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## **CHI HEALTH MISSION STATEMENT**

As a division of CommonSpirit Health, CHI Health shares this Mission Statement with CommonSpirit healthcare ministries across the country.

### **Our Mission**

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

## **CHI HEALTH VISION STATEMENT**

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

## **CHI HEALTH CORE VALUES**

At CHI Health, our core purpose is to heal the body, mind and spirit. Our most important focus is to care for our patients and their families. To do this, all CHI Health employees are expected to serve others by incorporating specific behaviors into their day-to-day work. Our Core Values describe specific day-to-day work expectations based on our mission and values.

### **Compassion**

- Care with listening, empathy, and love.
- Accompany and comfort those in need of healing.

### **Inclusion**

- Celebrate each person's gifts and voice.
- Respect the dignity of all.

### **Integrity**

- Inspire trust through honesty.
- Demonstrate courage in the face of inequity.

### **Excellence**

- Serve with fullest passion, creativity, and stewardship.
- Exceed expectations of others and ourselves.

### **Collaboration**

- Commit to the power of working together.
- Build and nurture meaningful relationships.

## **PROGRAM MISSION**

To deliver accessible, high quality academic and clinical education within world-class facilities to prepare the next generation of medical imaging professionals, advocating for their communities and those they serve

## **PROGRAM GOALS**

Upon graduation, our students are:

- Clinically Competent
- Effective Communicators
- Critical Thinkers
- Competent in Safety Practices

The above goals will be measured by attainment of academic standards in all course assignments and testing, clinical performance and competency evaluations, CPR training, laboratory simulations, image critique assignments, critical thinking situations, case studies, research papers/reports, and scientific exhibits.

**PROGRAM ADMINISTRATION**

CHI Health Immanuel Medical Center sponsors CHI Health School of Radiologic Technology. The Board of Directors and Executive Officers govern the CHI Health System:

Sr. Maurita Soukup, RSM, RN, MSN, PhD  
Board Chair  
Omaha, NE

Bill Yates  
Board Vice Chair  
Omaha, NE

Bob Lanik  
Board Treasurer  
Lincoln, NE

Kevin Fitzgerald  
Board Secretary  
Omaha, NE

Suzanne L. Hruza, M.D.  
Radiology Consultants  
Omaha, NE

Jason Kruger, M.D.  
CHI Health – St. Elizabeth's  
Lincoln, NE

Barry G. Sandstrom  
President and CEO Home Federal Bank  
Grand Island, NE

Mardell Wilson, EdD  
Creighton University Provost  
Omaha, NE

Sr. Nadine Heimann  
President, Sisters of St. Francis

John Petersdorf  
SVP Operations, Common Spirit Health

Kirtibala Gupta, MD, PHD, FAAP  
CHI Health Clinics

Heather Morgan, MD  
CHI Health Clinics

Kelly Bacon  
Senior Partner, Gallup

Kent Barney  
Retired

Tim Bricker  
President and CEO, CHI Health

## MEDICAL ADVISOR

Andrew Frager, M.D.

## FACULTY

Robert Hughes, M.S., RT(R)  
Program Director

Krista Lewis, MS, RT(R)(CT)(M)  
Clinical Coordinator

Chelsea Muckey, BS, RT(R)(CT)  
Clinical Instructor

Emma Neely, RT (R)(CT)  
Clinical Preceptor – Immanuel Hospital

Shana Threats, RT (R)  
Clinical Preceptor – Immanuel Hospital

Deb Coughlan, RT(R)  
Clinical Preceptor – Midlands Hospital

Jill Schukar, RT(R)(M)  
Clinical Preceptor – Mercy Hospital

Brooke Hast, RT(R)  
Clinical Preceptor – CUMC Bergan Mercy

Regan Fredricksen, RT(R)  
Clinical Preceptor – CUMC Bergan Mercy

Beth Tweedt, RT (R)(CT)  
Clinical Preceptor – Lakeside Hospital

Ann Brizendine, RT(R)(CT)  
Clinical Preceptor – CUMC University

Shelby Martens, MS, RT (R)(CT), ARDMS  
Clinical Preceptor - Missouri Valley

Ashley Konwinski, BSRT, RT(R), ARDMS  
Clinical Preceptor – Schuyler

Jennifer Mincer, RT (R)(CT)  
Clinical Preceptor – St. Mary's Hospital

Jennifer Adams, RT (R)  
Clinical Preceptor - St. Francis

Erin Krause, RT (R)(CT)  
Clinical Preceptor - Good Samaritan

Additional guest lecturers from Children's Hospital and Medical Center, University of Nebraska Medical Center, Clarkson College, imaging modalities, and other areas of interest.

## ADVISORY COMMITTEE

**Purpose:** To provide continuous professional guidance for the school in maintenance of accreditation standards, make recommendations for improvement in the program, evaluate student development and capabilities, and equitably enforce all program policies.

**Members:** Program Director, Clinical Coordinator, Clinical Instructor, Clinical Preceptors, Operations Directors, and Service Line Director. Input is sought from various representatives of the radiation modalities, first and second year student representatives, clinic directors, Medical Advisor, radiology staff, employers of graduates, radiologists, HR representatives, and any other identified community-interest sources.

## ACCREDITATION

The CHI Health School of Radiologic Technology is licensed and authorized by the State of Nebraska Department of Education for Title IV funding, veteran, and other eligible persons' benefits.

Program Director, PPCS-VE  
301 Centennial Mall South  
P.O. Box 94987  
Lincoln NE 68509-4987

The School is fully accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT).

Joint Review Committee on Education in Radiologic Technology  
20 N Wacker Drive Suite 2850  
Chicago IL 60606-2901  
(312) 704-5300

The school is accredited as a four year institution to grant a Bachelor's of Science in Radiologic Science degree by the Coordinating Commission for Postsecondary Education within the State of Nebraska.

Coordinating Commission for Postsecondary Education  
P.O. Box 95005  
Lincoln, NE 68509-5005  
(402) 471-2847

## ADMISSIONS COMMITTEE

Purpose: To recruit new applicants, determine admissions criteria, and non-discriminately select new students based on established criteria.

Members: Program Director, Clinical Coordinator, Clinical Instructor, Clinical Preceptors.

## **GENERAL INFORMATION**

### **ADA Accommodations**

1. It is the policy of CHI Health School of Radiologic Technology to comply with all local, state, and federal laws concerning individuals with disabilities.
2. Students may request accommodations by submitting documentation from appropriate, licensed professionals including educational information such as Individual Education Plan (IEP), 504 plan, Summary of Progress (SOP) or other information about a student's education and accommodation history.
3. CHI Health School of Radiologic Technology will reasonably accommodate qualified individuals with a disability so that they can perform the essential functions of a radiographer unless doing so causes a direct threat to the individual, others in the workplace, or patients and the threat cannot be eliminated by reasonable accommodation or the accommodation creates undue hardship.

### **Campus Security**

The school and each clinical education site have 24-hour campus Security. If assistance is needed, you may call 402-717-4357 (HELP).

### **Distance Delivery**

1. Students enrolled at a distance education location will attend courses synchronously.
2. Students must have a computer with a webcam, microphone, and reliable internet to attend courses and complete assignments and exams.
3. Exams will be administered by a proctor, approved by program faculty, and completed on a computer with lock software enabled.
4. Assignments and exams will be submitted through an online education platform.
5. While primary clinical sites will be established at distance education locations, travel to other clinical sites may also be required.

### **Dress Code**

1. As a student of CHI Health School of Radiologic Technology, you are a representative of the program as well as each department and hospital and are expected to maintain a professional image in both manner and appearance.
2. All students should formulate and maintain an individual program of good grooming and personal hygiene. Scrub uniforms should be kept clean and neat at all times.

3. Hair (including facial hair) should be neatly trimmed, styled, and of a natural color. No extreme looks are allowed. Longer hair must be pulled back to maintain medical asepsis.
4. Fingernails should be neat, clean, and well maintained. Nails should be short (no more than 1/4 inch past the tip of the finger). Polish color will be traditional and maintained without cracks or chips. Artificial nails, nail enhancements, and enhancement products are prohibited.
5. Colognes/perfumes should be applied sparingly as patients may be sensitive to scents/odors.
6. Jewelry and other accessories may be worn in a moderate manner, must be small in size, must not present a safety hazard to the employee or patient, must not interfere with job duties and/or the delivery of patient care, and must not cover the identification badge.
7. Facial piercings are limited to one stud piercing and must not exceed 16 gauge. Ear piercings are acceptable and are limited to three pairs per ear. One gauge per ear is acceptable but may not exceed 10 mm or 00 gauge and a solid plug must be worn at all times while working. All dermal and subdermal (including facial) body piercing/implants must not be visible at any time.
8. No tattoos on the face or front of the neck will be permitted, with the exception of permanent make-up that is not extreme in nature. In adherence to CHI Health Core Values, tattoos deemed as inappropriate, vulgar, obscene, or in violation of our "Harassment-Free Workplace" policy, must be covered at all times while working.
9. Steel gray scrub pants and scrub top are required. A scrub jacket is optional and must also be steel gray. Students will be given School patches that are to be attached to the upper, left sleeve. T-shirts worn under scrub tops must be white, black, or gray and always tucked in. Mostly white, leather, walking shoes are suggested. Socks must cover the ankle.
10. When assigned to a surgical rotation, proper surgical attire, including scrubs, coverings, PPE, and removal of jewelry from the hands and wrist must be followed.
11. Surgical scrubs are worn only during Surgery rotations. Surgical scrubs cannot be worn as a substitute for a uniform. Surgical scrubs must be checked out and returned to the surgery department at the end of the day. Surgical scrubs may not be worn outside the hospital.
12. Identification badges are required for entrance to all clinical education sites as well as the classroom. Badges are to be worn at collar level and visible at all times. If lost or stolen, the student must immediately report the incident to program faculty and security so that the badge can be deactivated.
13. If a student comes in an improper uniform, he/she may be given a needs improvement and asked to go home to correct the improper uniform. Time missed will be deducted from the student's personal time.

### Graduation Requirements

1. Demonstrate knowledge and skills relating to verbal, nonverbal, and written medical communication in patient care intervention and professional relationships.
2. Demonstrate knowledge of human structure, function, and pathology.
3. Anticipate and provide basic patient care, comfort, safety, and other patient needs, as well as appropriate patient education.
4. Understand basic x-ray production/interactions and operate radiographic imaging equipment and accessory devices.
5. Complete ARRT clinical education competencies and document a minimum of 1800 exams.
6. Modify standard procedures to accommodate for patient condition and other variables.
7. Demonstrate knowledge and skills, exposure factors, processing techniques, and analysis relating to digital imaging and processing.
8. Problem solve exposure factors/positioning methods for various patient conditions, equipment, accessories, and contrast media to maintain appropriate radiographic quality.
9. Evaluate/critique radiographic images for appropriate positioning and image quality.
10. Practice radiation protection for the patient, self, and others.
11. Recognize emergency patient conditions and initiate first aid and BLS procedures.
12. Evaluate the performance of radiographic systems, know safe limits of equipment operation, recognize and report malfunctions to the proper authority, and all other aspects relating to quality assurance.
13. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
14. Support the profession's Code of Ethics and comply with the profession's Scope of Practice.
15. Return all books to the libraries.
16. Pay all tuition costs and complete financial aid exit counseling, where applicable.
17. Complete all required attendance and clinical education time.

### Harassment

1. Acts or threats of physical violence, including intimidation, harassment, or coercion, will not be tolerated. Threats include, but are not limited to, verbal threats, shoving, pushing, threats made via phone, fax, e-mail or conventional mail, or any other communication method.
2. Acts or threats of sexual harassment will not be tolerated. Harassment includes, but is not limited to, unwelcome physical contact, inappropriate touching, threats or rewards to solicit sexual favors, comments on appearance, sexual comments/jokes/stories, sexual advances, display of explicit material, or suggestive gestures.
3. Non-compliance will be subject to disciplinary action through the Advisory Committee.

### Health Policies

1. Students must obtain their own health insurance. No medical expenses incurred as a student in the program are covered by the School or CHI Health.
2. CHI Health is committed to a drug-free work environment. Students will be required to submit to a drug and/or alcohol test whenever actions, statements or appearance cause reasonable suspicion that the student is under the influence of illegal drugs, controlled substances, or alcohol. Students who refuse to submit to a drug or alcohol test, or have otherwise violated this policy, will be subject to corrective action that may include termination from the program.
3. CHI Health vaccinations and/or exemptions, medical records, and post-exposure follow-up are documented through Occupational Health. Universal precautions, use of warning labels, and personal protective equipment are employed and supplied.
4. If feeling ill, use discretion before attending clinical or academics to avoid exposing others.
5. If sick, the student must call the hospital before 7:00 a.m. and report to program faculty that you will not be in. A student may be required to furnish satisfactory medical proof of sickness, disability, or dental procedures at any time.
6. If the student is sick for three (3) consecutive days, a doctor's release must be presented to the Program before returning to school. If a student is absent for three (3) consecutive days without reporting in, it will be assumed that the student has left the program voluntarily.
7. If injured during class/clinical education, an incident report must be completed within 24 hours. If additional tests/treatments are ordered or the student uses the services of the ER/Occupational Health, it will be at the student's own expense.
8. If exposure occurs, follow the CHI Blood/Body Fluid Exposure Protocol found in the Emergency Preparedness Manual. A two-hour window is the recommended time allotment between exposure and treatment of the student with medication when required.

9. Depending on assessment for continued testing/treatment, the student may be financially responsible for further expenses beyond initial testing.
10. If a student is unable to participate in clinical duties because of injury, class may be attended on written permission of a physician.
11. All accidents, falls, etc. must be reported to the Radiology Manager, lead technologist, or program faculty immediately. All incidents should be reported on-line through IRIS. The report must be completed under direction of a RT or your clinical preceptor following an incident, and the Operations Director should be notified.

### Lead Markers

Each student will receive one set of 'R' and 'L' image identification markers. If lost, the student is responsible for replacing them.

### Library

Organizational library services are available to students.

### Lockers

Lockers are available to students for personal belongings, books, markers, etc. All private belongings should be kept with you or in the locker for safekeeping. The school/clinical education centers are not responsible for lost valuables.

### Non-discrimination

1. The CHI Health School of Radiologic Technology is committed to fostering an inclusive learning environment free from discrimination and harassment.
2. The CHI Health School of Radiologic Technology does not discriminate on the basis of race, ethnicity, color, national origin, sex, religion, age, disability, sexual orientation, gender identity, veteran status, marital status, and/or political affiliation. CHI Health complies with all local, state and federal laws prohibiting discrimination.

### Outside Activities

1. Outside activities should not adversely affect grades, class preparation, or assignments. Class or clinical education cannot be changed to accommodate outside activities.
2. Second year students employed as Temporary (Nebraska) or Limited (Iowa) technologists cannot count employment hours towards student clinical education time, exams towards the exam total, nor can CPEs be completed during working hours.
3. Any student hired as a student intern at CHI Health may not supervise another student.

### Parking

At all campuses, students will park in designated areas. A parking placard is required at some facilities, and will be provided. Areas closer to the hospital are for outpatients, families, and visitors. Parking in non-designated areas will result in tickets, boots, and/or towing.

### Professional Conduct

1. Professional address will be the use of Mr., Mrs., Miss, Ms., or Doctor when addressing patients, visitors, administrators, or physicians. Care must be taken to address all individuals by their preferred pronouns.
2. Students will follow AIDET procedures with all patients. Before taking an exposure, always check two identifiers (i.e. name and DOB) and look at their armband, per CHI Health policy.
3. Eating in view of the public and patients is prohibited. Chewing gum is discouraged.
4. All CHI Health facilities prohibit smoking or carrying weapons of any kind.
5. All records of all departments are legal documents. All precautions should be maintained to see that only proper personnel handle or access these records. Under no circumstances should any information be revealed to a family member, news media, or any unauthorized person without the patient's written permission. Only information relevant to the patient's care may be accessed. It is likely that situations or conditions will be discussed in class, but the patient's privacy will be maintained.
6. Information about a patient, including images of a patient, even if identification has been removed must never be disclosed to your family and friends or posted to social media outlets. In personal conversations, do not mention patients' names or conditions in front of others, both in and outside the hospital.
7. Undue noise, conversation, laughing, or gossip is unacceptable behavior in the clinical education areas, in front of a patient, or while walking through the halls of the hospital.
8. Personality conflicts should be brought to the attention of the clinical preceptor or program faculty immediately. Criticizing other students, technologists, physicians, nurses, or other health care personnel to each other is discouraged.

### Professional Societies

The School provides membership in the Nebraska Society of Radiologic Technologists (NSRT) and the American Society of Radiologic Technologists (ASRT).

### Registry Examination

After meeting specified criteria, students are eligible for the American Registry of Radiologic Technologists (ARRT) certification exam. Students will follow current application guidelines and eligibility requirements, and all protocols of the testing center.

### Security/Maintenance of Student Records

In compliance with Title 92, Chapter 41,004.15A5, CHI Health School of Radiologic Technology maintains, in a fire resistance area, permanent academic records for all students for fifty (50) years. Financial records for all students are maintained for five (5) years post-graduation.

In compliance with Title 92, Chapter 41, 004.15B, CHI Health School of Radiologic Technology secures all permanent student academic and financial records in a locked cabinet and office. All computer records are coded and safeguarded by the CHI Health System. The School will release, transfer, disclose or otherwise disseminate students' records, or information therein, only on the written request of the student, except to persons authorized or required to have such information by state or federal law or regulation, or pursuant to a court order.

### Telephone

1. Always identify yourself and the department when answering the phone. Calls should be handled with tact and courtesy. First-year students should direct all questions/messages to a RT.
2. Take messages accurately by recording the caller, time of call, pertinent information, and return number. Deliver all messages as promptly as possible.
3. Students may not use the hospital phone lines for personal and/or long distance calls. Cell phones should be kept in the student locker and any wearable devices should be set to silent. Text messaging and personal calls should be made during breaks and lunch.

### **ACADEMIC POLICIES**

1. The academic program will consist of six (6) semesters. Students must complete the program within 150% of the program length.
2. Academic and clinical progress reports/evaluations will occur at the end of each semester; or sooner if necessary. Grades and clinical exams are available in Trajecsys and Moodle.
3. The student must maintain an overall 2.8 GPA throughout the program. Students are required to receive a grade of 70% or better in each academic course.
6. Students are required to have all materials, completed assignments, and textbooks in class.
7. If class is missed, the student must contact the course instructor concerning make-up of any missed materials. Tests that are missed due to an absence must be scheduled within one week of returning to class, unless prior accommodations have been made with the instructor.
8. Studying is done primarily after academic and clinical education hours.
9. Tests will not be returned permanently to students until the completion of the academic year. Students may not actively seek old worksheets/tests from a second year student or graduate. This action is considered cheating and subject to disciplinary action.
10. If a student fails an individual examination, it will be at the discretion of the course instructor to allow a repeat exam, under the following conditions
  - A student may re-test only if they receive an 'F' (below 70%)
  - A student may repeat the test only once and averaged points will be recorded
  - A student may repeat no more than twice in any one subject, or 4 total tests, per year
11. Extra credit assignments in any course are left to the instructor's discretion. Extra credit assignments cannot be excessive as to artificially inflate grades.
12. Course syllabi will be distributed for each course and may contain guidelines in addition to the handbook and CHI Health policy manual.

### Disciplinary Action

1. Any student who infringes on the policies, rules, and regulations as stated in the Student Handbook or CHI Policy Manual is subject to a verbal warning/needs improvement form, written warning, probation, or dismissal.
  2. A verbal warning consists of a discussion with the student regarding a needs improvement form for unsatisfactory behavior.
  3. A written warning is a formal discussion with the student regarding continued needs improvement warnings, or more severe infractions. Two (2) needs improvement forms will automatically lead to a written warning.
  4. A probationary period is a set period of time with added criteria for improvement of unsatisfactory performance or behavior. The length of time will be determined by the frequency of the offense, circumstances surrounding the violation, and the student's prior record. Two (2) written warnings will automatically lead to a probationary period.
  5. The type of disciplinary action is determined by the offense and does not necessarily follow in a lock step order as written above. A cause for dismissal will be presented to the Advisory Committee for final determination.
3. On action of the Advisory Committee, a student may be disciplined or dismissed for any of the following reasons:
- Failure to maintain academic standards
  - Repeated clinical warnings/probation/suspensions
  - Insubordination or unprofessional conduct
  - Cheating, dishonesty, or stealing
  - Illegal use of drugs, intoxication, or absences as a result of intoxication or drug use
  - Disclosure of confidential information
  - Non-compliance with proper radiation safety and protection
  - Unsafe, immoral, or unethical practices/behavior
  - Unwillingness to progress from a directly supervised environment to an indirectly supervised environment
  - Any physical, verbal, or emotional abuse of another individual
  - Unwillingness to perform clinical education duties and class assignments
  - Unwillingness to improve behavior after suggestions for said improvements have been stated
  - Any other behavior warranting such action as stated in the Student Handbook or CHI Policy Manual

### Excessive Unexcused Absences or Tardiness

1. An unexcused absence is defined as non-attendance in academic or clinical areas without 12 hour notice to the program faculty
2. Tardiness is defined as not being in attendance at the scheduled site and at the scheduled time
3. Excessive is defined as 4 or more unexcused absences/tardiness in any one 30 day month OR 8 or more in any 12 calendar months

### Grading System

1. The grading system in use by the School is one of criterion reference. In order to evaluate student progress, regular examinations are an integral component in the evaluation process.
2. A point system determines academic course grades. Total course points are divided into the total points earned by the student.
3. The Academic point/percentage system guidelines are as follows:

<u>Percentage</u>	<u>Grade</u>
98-100	A+
90-97	A
88-89	B+
80-87	B
78-79	C+
70-77	C
Below 70	F

### Merits/Needs Improvement

1. Merits can be earned by volunteering a schedule change to aid a classmate or clinical site alterations, extra effort in getting to school on a bad weather day, assisting in any way beyond normally expected duties, etc.
2. The student will earn 1 hour personal time per merit received.
3. A needs improvement form may be given for failure to comply with any CHI Health or School policy.
4. For each clinical needs improvement form, 1% will be deducted from the weekly evaluation grade at the end of the semester. For each academic needs improvement form, 1% will be deducted from the overall grade.
5. Students will be required to sign all needs improvement forms.

## Students' Rights

1. Examination of their permanent education record.
2. Published program description - candid, complete, and accurate information.
3. Published admissions criteria and procedure: fair, equitable, and non- discriminatory.
4. Requirements for continuance, good-standing, and graduation.
5. Adequate, appropriate advisement/guidance, up-to-date accurate career information.
6. Accurate, complete information including annual program costs and financial aid responsibility.
7. Family Educational Rights and Privacy Act of 1974 - Buckley Amendment.
8. Inspection, challenge, hearing, submission of explanatory statement, prevention of disclosure of personally identifiable information, and security of records.
9. Due Process:
  - Every student is encouraged to try to resolve his/her issues/grievances directly with the other party prior to seeking formal mediation.
  - A student may petition the Advisory Committee at any time for any complaint, grievance, or concern. The Advisory Committee will respond within 72 hours.
  - Within 72 hours after notice of the Advisory Committee's action, the student must inform the Program Director, in writing, that he/she wishes to make an appeal
  - After receipt of a written request for an appeal, the Program Director will schedule a hearing within 5 days so that the student may appear before the Committee. A representative from Human Resources will be asked to serve as mediator.
  - Supportive documentation (not hearsay) shall be provided by the student relative to the appeal.
  - After hearing the student's appeal, the Committee will evaluate all documentation with a decision rendered within 48 hours. The student will be notified of the Committee's decision within 24 hours. The student may appeal this decision to a Human Resources representative within 24 hours. The external source's decision will be rendered within 48 hours and will be final and binding.

Procedure for addressing student complaints:

For those issues concerning non-compliance of JRCERT Standards, the School will conclude those concerns within 30 days (per JRCERT policy).

Address: Joint Review Committee on Education in Radiologic Technology  
20 N Wacker Drive Suite 2850  
Chicago IL 60606-2901  
(312) 704-5300

The student may also contact the Program Director of Private Postsecondary Career Schools at the Nebraska Department of Education, or the Coordinating Commission for Postsecondary Education of Nebraska.

Address: Program Director, PPCS-VE  
301 Centennial Mall South  
P.O. Box 94987  
Lincoln NE 68509-4987

Address: CCPE  
140 N. 8<sup>th</sup> St., Suite 300  
Lincoln, NE 68508

10. Education records do not include:

- Records which are in the sole possession of the maker and are neither accessible nor revealed to any other person
- Records maintained by campus security for the purpose of law enforcement.
- Records relating to an individual's employment at a CHI facility, when such employment is not based on the individual's status as a student.
- Medical and counseling records used solely for treatment.
- Records that only contain information about an individual after she/he is no longer a student (i.e. alumni records).

11. Consent to release records, or denial of release. The following circumstances allow for release of records without consent:

- Release to a school official if they are determined to have a legitimate educational interest in the information. School officials shall include committee members, members of the Board of Directors, employment or degree verification services, accreditation agencies, financial aid clearinghouse, and other contracted services employed for a specific task by the program or sponsoring institution.
- Lawful compliance with a properly issued subpoena or court order.
- A request of a parent of a dependent student, as established by Section 152 of the Internal Revenue Code of 1986.
- In case of emergency, if the knowledge of the protected information is necessary to protect the health or safety of students or other persons.
- A request from authorized state or federal representatives in relation to a state or federal audit of government supported programs.

## FINANCIAL AID

Any student accepted for admission or currently enrolled at CHI Health School of Radiologic Technology may be considered for financial aid. Upon completion of all necessary forms, the Financial Aid Office will determine the financial award and finalize a payment plan.

Students receiving financial aid must meet these eligibility requirements:

- Completed all necessary admission steps and be admitted into the program.
- Be in good academic standing and making satisfactory academic progress.
- Be a citizen or eligible non-citizen of the United States or Trust Territories.
- Not be in Default in the repayment of any educational loans or owe a refund on any Title IV grant program at any institution.
- Be registered with the Selective Service if you are a male. Any male born after January 1, 1960, must certify registration with the Selective Service before he can receive any Title IV funds. A signed statement to this effect is acceptable.

To be considered, the applicant must complete the following steps:

- Have gained admission into the program (See Admission Procedures)
- Complete and submit the Free Application for Federal Student Aid (FAFSA).
- Submit a signed copy of the student's federal Income Tax Return, with all W2s and attachments, or a signed completed Non-filer form with supporting documentation.
- Dependent Students Only: submit a signed copy of the parent's federal Income Tax Return (including all attachments and W2s, or a Non-Filer Form with supporting documentation).

### Disbursement

If a student is awarded Financial Aid, disbursements will be made in fall and spring. Be advised that the summer semesters do not have separate disbursements and students will be responsible for allocating funds from fall and/or spring or obtain other financing. If the student is a first-time loan borrower, there is a 30-day waiting period to show satisfactory academic progress before the first disbursement.

### Loan and Scholarships/Grants

When a student receives student financial aid (federal/state/institutional) funds to attend an institution and subsequently withdraws from the program, is dismissed, or fails to complete the period of enrollment for which the funds were received, federal law requires the institution to make a timely refund of "unearned tuition, fees, and other institutional charges" as assessed by the institution. The institution must also determine if the student owes a "repayment" of unearned funds that the institution either disbursed to the student directly or credited directly to the student's account for living expenses. Students receiving federal student financial aid are required to visit with the Office of Financial Aid prior to finalizing a withdrawal from semester coursework.

The Office of Financial Aid will provide you with a complete analysis of your rights and responsibilities as they pertain to the financial aid process when considering a withdrawal or LOA. Completion of refund repayment calculations and completion of the required exit paperwork takes approximately one hour.

### Professional Judgment

Professional judgment is defined as a discretionary action on the part of the Financial Aid Office to address unusual circumstances that affect a student's/parent's ability to pay for educational expenses. Professional judgment will be reviewed on a case-by-case basis. A committee will be formed to ensure consistency.

### Return of Federal Student Aid Funds

Federal student financial aid is provided to students to fund their direct and indirect costs of education as determined by the institutional cost of education. Failure to complete a required term of enrollment may result in the student's need to refund or repay federal student financial aid for costs not incurred.

If the withdrawing student received federal student aid, the Financial Aid Office follows the guidelines provided by the US Department of Education for repaying financial aid. This is a proportional calculation based on time enrolled during the semester, type of aid received, and direct costs (tuition/fees). Students should also refer to the Withdrawal/Refund Schedule for determination of the amount of tuition owed if they.

### Repayment of Student Financial Aid Funds

In addition to receiving funds for direct costs (tuition and fees), students may also be provided funds for living expenses. Failure to complete a term of enrollment will result in the "repayment" of funds for periods of non-enrollment. For this policy, financial aid is considered to be used first for payment of tuition, fees, and other payments to the Program. Therefore, all or part of any unearned funds will be used to reimburse financial aid programs. If a student withdraws from the Program for any reason, student financial aid dollars must be returned to the Office of Financial Aid for refund and repayment to the respective federal aid programs. In accordance with federal laws, the following fund priority listing will be used when refunding and repaying funds to Title IV aid programs for the academic term involved.

Federal Funds will be returned to the various federal aid programs in the following order:

1. Unsubsidized Federal Stafford Loan
2. Subsidized Federal Stafford Loan
3. Federal Perkins Student Loan (FPSL)
4. Graduate PLUS Loan
5. Federal Direct PLUS Loan (parent)
6. Federal Pell Grant
7. Federal Supplemental Educational Opportunity Grant (SEOG)

Students receiving federal student financial aid are required to contact the Office of Financial Aid prior to finalizing a leave of absence or complete withdrawal. Any student withdrawing from the Program, impacted by this policy, receives a worksheet detailing the federal calculations for the return of federal student aid.

### Satisfactory Academic Progress

Federal regulations require that policies for students receiving financial aid must be the same as, or stricter than, the institution's standards for a student enrolled in the same educational program who is not receiving assistance under the Title IV Programs. Students enrolled in the Radiography Program must meet the following requirements for satisfactory academic progress and be eligible for funds under the Title IV Programs:

- Be enrolled Full Time
- Maintain a minimum of a 2.8 GPA
- Complete 100% of attempted hours or progress to the next level of the program

Students required to repeat any academic year will not be eligible for federal financial aid for the "repeat" year unless granted an appeal.

### Separation of Duties

The Financial Aid office will process aid information and calculate awards. The Financial Aid Office will also provide to the student entrance and exit counseling regarding their tuition and repayment obligations. The Finance Department will disburse the awards as they become available.

### Verification

Verification is the process of verifying the reported information submitted by the student requesting Title IV Funds. If your application is chosen for verification, you must submit the verification worksheet (available in the Financial Aid Office), with all requested documentation.

- Verification worksheet and requested documentation must be returned within 3 weeks of notification.
- Students will be notified in writing, if the award amount changes as a result of the verification process.
- Students will be advised of any corrective measures necessary.
- Students will be advised of their responsibility to repay any overpayment resulting from the verification process.

### Veterans Affairs Benefits

Certification for Veterans Affairs Benefits, including but not limited to the Post 9/11 GI Bill®, will be completed each semester by the Program Director. Students are required to submit a letter of eligibility to the program prior to verification. Funds will first be applied to the student's account, and any remaining funds will be disbursed accordingly.

The program will not impose any penalty including: the assessment of late fees; the denial of access to classes; libraries or other institutional facilities; and/or the requirement that a Chapter 31 or Chapter 33 recipient borrow additional funds to cover the individual's inability to meet his or her financial obligations to the institution due to the delayed disbursement of a payment by the U.S. Department of Veterans Affairs.

### Veteran and Eligible Person Standards of Progress Policy

A veteran and/or eligible person must make satisfactory progress toward an approved educational objective leading to employment. Veteran and/or eligible person Standard of Progress will be determined utilizing the Satisfactory Academic Progress policy and Disciplinary Action policy in the college catalog as well as the Academic Policies and Disciplinary Action Policy in the college handbook.

### Veterans Benefits and Transition Act of 2018 Policy for Veteran Students Utilizing VA GI Bill® Education Benefits

Consistent with the Veterans Benefits and Transition Act of 2018, Section 3679 of title 38, United States Code, Section 103, CHI Health will not impose any penalties due to the delayed disbursement of a payment by the U.S. Department of Veteran Affairs on recipients of Chapter 31 and Chapter 33 VA Benefits. CHI Health will permit any covered individual to attend or participate in the course of education during the period beginning on the date on which the individual provides CHI Health a certificate of eligibility for entitlement to educational assistance under chapter 31 or 33, and ending on the earlier of the following dates: 1) The date on which payment from the VA is made to the institution or 2) 90 days after the date the institution certified tuition and fees following the receipt of the COE (Certificate of Eligibility). Additionally, CHI Health will not require that a covered individual borrow additional funds, on any covered individual because of the individual's inability to meet his or her financial obligations to CHI Health due to the delayed disbursement of funding from the Department of Veterans Affairs under chapter 31 or 33. A Covered Individual is any individual who is entitled to educational assistance under chapter 31, Vocational Rehabilitation, or chapter 33, Post 9/11 GI Bill® benefits, and has been verified by the school certifying official as benefit eligible. This requirement is limited to the portion of funds paid by VA.

"GI Bill®" is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at [www.benefits.va.gov/gibill](http://www.benefits.va.gov/gibill).

### Withdrawal/Refund Policy

1. A student who has not visited the School facility prior to enrollment will be given an opportunity to withdraw without penalty within three (3) business days following either the regularly scheduled orientation procedures or following a tour of the School.
2. If a student decides not to attend the program after signing the enrollment agreement, they have three (3) business days in which to cancel their enrollment and are entitled to 100% of their deposit back.
3. If a student chooses to withdraw from the program after the start of classes, a letter of resignation stating the reason for withdrawing should be submitted in person to the Program Director.
4. Effective at the start of classes each semester, a pro-rated, tuition refund policy exists:
 

● Withdrawal in the first week	-	100% of tuition
● Withdrawal weeks 2 through 4	-	60% of tuition
● Withdrawal weeks 5 through 6	-	40% of tuition
● Withdrawal after 6 weeks	-	No refund
5. A student will be considered officially withdrawn from the program within 7 days after receipt of the student's letter of withdrawal or the last date of academically related activity.
6. All refunds are made within 30 days of the determined date of withdrawal.
7. If a student wishes readmission to the program after withdrawal, the student must re-apply to the program and satisfy all admissions criteria. No credit will be granted for previously completed courses, competencies, or clinical education time.
8. No student will be re-admitted if any of the following situations have occurred:
  - Failure to maintain academic standards
  - Repeated clinical warnings/probation/suspensions
  - Insubordination or unprofessional conduct
  - Excessive or unexcused absences/tardiness
  - Cheating, dishonesty, or stealing
  - Illegal use of drugs, intoxication, or absences as a result of intoxication or drug use
  - Disclosure of confidential information
  - Failure to meet financial requirements
  - Any physical, verbal, or emotional abuse of a patient, visitor, peer, or superior
  - Non-compliance with proper radiation safety and protection methods
  - Unsafe, immoral, or unethical practices/behavior toward self, patients, or others
  - Or any other behavior that warranted disciplinary action as stated in the Student Handbook or CHI Policy Manual

## ATTENDANCE/PERSONAL TIME

### Personal Time

1. A time record has been established as all health professionals are accountable for punctuality and dependability to patients, staff, peers, and employers. Tardiness and absences will be deducted from personal time for clinical education and can affect clinical grades. The School utilizes an electronic clinical tracking system that includes a time clock. Students are expected to use a department computer to clock in and out for clinical assignments, and that time exceptions cannot be excessive.
2. Students are allowed 12 personal days during the length of the program. A request for personal time off must be submitted to program faculty at least 24 hours in advance to be considered excused.
3. Appointments should be made outside of clinical or academic time unless prior approval has been granted by the program faculty.
4. Students should not assume personal days will be granted before receiving approval by program faculty. Absences are discouraged while classes are in session and may adversely affect the student's grade.
5. A holiday occurring during personal time will not be counted as a personal day.
6. Students cannot carry over more than seven (7) personal days into their second year, unless there are extenuating circumstances and prior approval has been granted.
7. If the student exceeds 12 personal days at any time during the program, this time must be made up and completed after the program graduation date or during scheduled school breaks, with prior approval, but not during holidays or when faculty are not present. To complete clinical education time of less than one (1) full day, the student may stay beyond regularly scheduled hours with prior approval from program faculty.
8. Personal time that is made up on breaks or off hours cannot exceed 10 hours per day and must be approved by program faculty. The total hours per week should not exceed 40, including classroom time, unless voluntarily requested by the student.
9. Personal time taken on academic days will not count towards personal days, but may affect course grades. Refer to course syllabi for more information.

### Bereavement

1. Students who need time off to attend funeral services are allowed up to five (5) days for immediate family (spouse, parent, child, brother/sister; including step and half relations). Three (3) days will be given for extended family. Two (2) days will be granted for all other family funerals.

2. These are excused days and need not be made up. Personal days may be used for any absence beyond the given funeral leave.
3. Due to the sensitive nature of bereavement leave, any unusual circumstances or need for special considerations will be reviewed by the Advisory Committee.

#### Holidays/School Breaks

1. The School recognizes the following holidays each year and the student will not have academic classes or clinical education: New Year's Day, Martin Luther King Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas Day.
2. Official School breaks include semester breaks and a spring break in March.

#### Jury Duty and Military Service

The program recognizes the civil duties and obligations that may arise while enrolled. The school follows the policies of CHI Health.

#### Pregnancy

1. All students should be aware that radiation can cause genetic effects. The School follows the guidelines identified in NCRP Report #116, Section 10, "The NCRP recommends a monthly equivalent dose limit of 0.5 mSv (.05 rem) to the embryo-fetus (excluding medical and natural background radiation) once a pregnancy becomes known." Total dose equivalent limit to the embryo-fetus for the entire gestational period cannot exceed 5 mSv (.5 rem).
2. Notification of pregnancy is optional. If the student chooses to disclose a pregnancy, they must complete, in writing, the Declaration of Pregnancy Statement which includes an estimated date of conception. The student will review with the Program Director or Radiation Safety Officer the cardinal principles of time, distance, and shielding, and all other radiation safety policies and procedures.
3. Once pregnancy is declared, the student will be assigned a secondary dosimeter to be worn at waist level under the lead apron. Monthly doses will be closely monitored. The student may withdraw, in writing, her Declaration of Pregnancy at any time.
4. The student must submit a written statement from her physician giving her permission to continue in the program, identifying any restrictions or limitations. The Program Director will request a review by the Radiation Safety Officer or Radiation Physicist of the student's dosimetry history. Based on these findings and recommendations, the student may be reassigned or limited in her clinical education duties. If no restrictions are identified, the student will continue without modification to schedule or assignments. Any clinical competencies not allowed or not completed during pregnancy must be completed successfully prior to graduation.

5. Following delivery, the student may return to academic and/or clinical education courses as decided by the student and her physician. A written statement from her physician must be submitted indicating "return to class" status and "return to clinical" status, identifying any restrictions or limitations on each letter.
6. Maternity leave and make-up time will be decided on an individual basis by the Advisory Committee.

### Voting

In compliance with Executive Order 14019, CHI Health will make available to all enrolled students information and access to voter registration materials, including absentee ballots. The school will also grant up to 4 hours of personal time on Election Day to participate in the voting process at their designated voting site.

### Weather

1. In general, school is not canceled due to inclement weather. However, we do not expect or wish students to risk injury to reach the hospital in such conditions. Providing this is not the case, every reasonable effort should be made to arrive at the assigned time. If a student gets to the hospital but is tardy because of weather conditions, this is considered an excused tardy.
2. While the school may make its own weather related decisions, we will follow the weather cancelation decisions made by Universities/Colleges in the area of clinical sites.
  - Omaha Metro Area – Metropolitan Community College
  - Nebraska City – Bellevue University
  - Lincoln – Southeast Community College
  - Grand Island – Central Community College
  - Kearney – University of Nebraska at Kearney
3. In the event of weather cancellations, no students will attend clinical education in the designated area, but classes may be moved to an online delivery method.

## CLINICAL EDUCATION

1. Clinical experience is an essential component of professional education. Participation in clinical education carries inherent risk of exposure to infectious diseases, as well as other health hazards. Students will be instructed in proper infection control protocols, PPE usage, and other safety measures. While such practices cannot eliminate the risk completely, it greatly reduces the likelihood of an adverse event. Failure to follow all safety protocols of the school and the health system will lead to disciplinary action.
2. Preparation for Clinical Education begins in the classroom with an Introduction to Terminology and Basic Principles of Radiographic Positioning. The student will receive orientation and practice time in the different rooms in the clinical area.
3. The student begins their clinical participation by first assisting a registered technologist in the execution of duties. This participation moves from a passive mode of observation to a more active role of assisting the RT in radiographic procedures. The rate of student progress is dependent upon the student's ability to comprehend and perform the various tasks assigned to him/her within a flexible time period.
4. A written test will be given to the student in each positioning category. Students must successfully complete the test and lab practice prior to completing an exam in the clinical area.
5. After successful completion of lab practice and the written test in a category, the student will practice category procedures under direct supervision of a RT. When the student feels capable of proper procedure performance, they will ask for a Clinical Performance Evaluation (CPE) regardless of the difficulty of the patient. These evaluations may be completed by the clinical preceptor, supervising RT, or program faculty. Several procedures within each category must be completed within a designated time frame. Points will be deducted for late CPEs when there were opportunities to perform the CPE
6. If any projection must be repeated when performing a CPE, a deduction will occur. The student must receive a minimum grade of 85% in each category before performing those procedures under indirect supervision. The student must maintain an 85% overall in each category to remain under indirect supervision.
7. Direct supervision is defined as:
  - A qualified radiographer reviews the request for examination in relation to the student's achievement;
  - A qualified radiographer evaluates the condition of the patient in relation to the student's achievement;
  - A qualified radiographer is present during the conduct of the examination; and
  - A qualified radiographer reviews and approves the radiographs

8. Indirect supervision is defined as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement.
9. Unsatisfactory radiographs shall be repeated under direct supervision, regardless of the student's level of competency. The repeated image must have a signed repeat evaluation form (pink sheet) completed for documentation and recorded in the clinical tracking system.
10. The student will progress through the various areas of the department on a rotational basis. Weekly evaluations by the supervising RT or clinical preceptor will begin with the first rotation. All clinical evaluations will be reviewed by the student and program faculty.
11. Clinical progress guidelines are available at each clinical education site and in this handbook. The student should review these as the semester progresses.
12. The student records all exams completed on a weekly basis, with at least 50% participation. A minimum of 1800 exams must be documented to meet graduation requirements.
13. Good initiative, interest, and attitude will continuously be evaluated and reflected on weekly evaluations. Even if all CPEs have been successfully completed, active clinical participation is a must at all times.
14. The School has designed all student educational needs within a 40 hour week of academic classes and clinical education. Any time in excess of the 40 hour week is voluntary.
15. For the majority of the program, the clinical education schedule will be 7 a.m. to 3:30 p.m., but may vary if necessary for clinical capacity or exam performance. Class and clinical schedules will be posted at the beginning of each semester and/or rotation. Clinical education rotations may not necessarily coincide with the academic calendar.
16. The CUMC – University campus hours will be 9 a.m. to 5:30 p.m. and may be subject to change if determined by the clinical preceptors and program faculty.
17. Beginning in the second semester, clinical rotations will also include B-shifts during the week and full weekend rotations which will include one (1) B-shift and one (1) day shift. When non-standard shifts are completed, the student will receive compensatory time off to maintain the schedule less than 40 hours per week.
18. If a student has not completed competency testing in a category that is primarily seen on a B-shift/weekend, the student may request additional B-shift/weekend rotations.
19. Clinical education sites and room assignments will be arranged by the Clinical Coordinator. Students may not switch assignments unless prior approval has been granted by the program faculty. Proposed switches must be submitted for approval/rejection to your program faculty at least 2 weeks prior to the proposed switch.
20. Lunch periods will be 30 minutes. One 20-minute break can be taken each morning.

### Clinical Education Grading System

1. After practicing exams under direct supervision, the student must complete designated Clinical Performance Evaluations (CPEs) during a specified time frame. The student must achieve an 85% in a CPE category before performing those procedures under indirect supervision. CPEs validate competency and may be repeated in subsequent semesters.
2. A cumulative total of 85% must be maintained in each procedure category. If a student falls below 85%, additional CPEs must be completed in that category until the cumulative grade is above 85%. The student will be required to perform under direct supervision for exams in the noted category during this time, regardless of the clinical progress grid. The clinical site will be notified of this restriction.
3. After each semester, the student will be evaluated by two criteria: weekly evaluation and CPEs. Because CPEs validate competency and are considered an important aspect of the application of theory, they are double-weighted in grading. Before graduation, all mandatory and elective ARRT clinical competencies must be met.
4. The Clinical point/percentage system guidelines are as follows:

<u>Percentage</u>	<u>Grade</u>
98-100	A+
90-97	A
88-89	B+
80-87	B
Below 80	F

### Modalities

1. In the late third or early fourth semester, students will rotate through the various specialty areas associated with radiology. These will include, but are not limited to: Magnetic Resonance Imaging, Sonography, Radiation Therapy, Nuclear Medicine, and Mammography.
2. Rotations through Mammography will be available to both female and male students; however, due to the sensitive nature of the exam, permission from each patient must be obtained prior to entering the room.
3. Additional time in modality areas may be available as opportunity arises. The student must be in satisfactory academic and clinical standing to be eligible.
4. Computed Tomography is included as a general clinical rotation beginning in the second year.

## Radiation Protection

1. Radiology students should be acquainted with the danger of careless or accidental exposure to radiation.
2. Collimators must be used at all times. Shielding on patients should be used when it will not interfere with the examination or compromise the diagnostic quality of the image. Close all radiographic room doors before making an exposure.
3. Never may any person willfully expose him/herself or any other person to radiation unless such exposure is for diagnosis or treatment and ordered by a physician.
4. Students will not be in the radiographic or fluoroscopic room when an x-ray tube is energized.
  - A. Exceptions are authorized only when procedures necessitate the presence of a doctor, RT, student, and/or nursing personnel.
  - B. Students are never to hold an image receptor, and only hold patients when absolutely necessary.
  - C. Such designated personnel must wear a lead apron, thyroid shield, and gloves when holding patients or in the radiographic or fluoroscopic room.
5. Radiation is monitored by dosimeters. Records are kept on each person by the radiation safety officer at the site. Dosimeters are changed monthly at the clinical education sites. It is the students' responsibility to change their dosimeters. Students are also responsible for initialing the monthly report. An annual report will be given to the student each year.
6. Dose limits are monitored for excess radiation. The Program follows the excessive dose limit regulations in place for the CHI Health System. The following dose limit levels are identified and will initiate warnings when exceeded.

ALARA I is set at 10% of the quarterly allowable dose (125 mrem or 1.25 mSv)  
ALARA II is set at 30% of the quarterly allowable dose (375 mrem or 3.75 mSv)  
ALARA III is set at 80% of the quarterly allowable dose (1000 mrem or 10 mSv)
7. Dosimeters must be left in assigned areas at each clinical education site. Dosimeters should never leave the hospital. Students will be responsible for careful monitoring of dosimeters.
8. Your dosimeter must be worn at all times and positioned at collar level. When wearing a lead apron, the dosimeter must be outside the apron at collar level.
9. If your dosimeter is lost, destroyed or left in a room or on an apron unknowingly, notify the program faculty.

## CLINICAL PROGRESSION

<u>ACTIVITY</u>	<u>OBJECTIVE</u>
Positioning Lecture:	<p>Discuss the basic anatomy relative to the procedure.</p> <p>Describe the specific positioning necessary for the procedure and identify structures demonstrated on the image. Practice image analysis.</p> <p>Understand the principles of radiographic positioning and is able to apply these principles to both standard and nonstandard situations.</p> <p>Technique selection and patient care/education.</p>
Positioning Laboratory:	<p>Observe and practice a simulation of the procedure.</p> <p>Perform any procedure in any subsequent lab practice.</p>
Performance with Direct Supervision:	Perform the procedure as often as possible in the clinical setting under direct supervision of a radiographer.
Clinical Performance Evaluation (CPE):	A Clinical Performance Evaluation (CPE) is conducted at the student's request within a designated time frame.
Performance with Indirect Supervision:	Perform procedures after attaining 85% or better on category CPEs
Final Competency:	Perform a variety of procedures with competency and proficiency. This will be on-going during the program, but especially within the last six months of the program.

If failing any of the above steps, return to laboratory simulation and practice in the clinical education areas with direct supervision

**GUIDELINES FOR CLINICAL PROGRESS****First Year – August through December**

<b>Exam</b>	<b>Direct Supervision</b>	<b>Indirect Supervision</b>
Routine 2V Chest	X	
W/C – Cart Chest	X	
KUB/Routine Multi-abd.	X	
Multi-abd w/ decub	X	
Knees, Tib-Fib, Ankle, Foot	X	
Forearm, Wrist, Hand, Finger	X	
<b>ALL</b> Portables, Surgery	X	

**GUIDELINES FOR CLINICAL PROGRESS****First Year – January through May**

<b>Exam</b>	<b>Direct Supervision</b>	<b>Indirect Supervision</b>
Routine 2V Chest		X
W/C – Cart Chest	X	
KUB		X
Routine Multi-abd	X	
Multi-abd w/ decub	X	
Knees, Tib-Fib, Ankle, Foot, Toe	X	
Elbow, Forearm, Wrist, Hand, Finger	X	
IVP	X	
UGI	X	
Esophagram	X	
BE	X	
Pelvis, Hip, Femur	X	
Humerus, Shoulder girdle	X	
<b>ALL</b> Portables, Surgery, Pediatrics	X	

**GUIDELINES FOR CLINICAL PROGRESS****First Year – June through August**

<b>Exam</b>	<b>Direct Supervision</b>	<b>Indirect Supervision</b>
Routine 2V Chest		X
W/C – Cart Chest	X	
KUB		X
Routine Multi-abd		X
Multi-abd w/ decub	X	
Foot, Ankle		X
Tib-Fib, Knee		X
Pelvis	X	
Femur, Hip	X	
Wrist, Hand, Finger		X
Elbow, Forearm		X
Humerus, Shoulder	X	
IVP	X	
UGI, Esophagram	X	
BE	X	
Ribs	X	
C-spine/T-spine	X	
L-spine	X	
Skull (routine)	X	
Sinus (routine)	X	
Facial bones	X	
<b>ALL</b> Portables, Surgery, Pediatrics	X	

**GUIDELINES FOR CLINICAL PROGRESS****Second Year – September to December**

<b>Exam</b>	<b>Direct Supervision</b>	<b>Indirect Supervision</b>
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Routine 2V Chest		X
W/C – Cart Chest		X
KUB		X
Routine Multi-abd		X
Multi-abd w/ decub	X	
Foot, Ankle		X
Tib-Fib, Knee		X
Pelvis		X
Femur, Hip		X
Wrist, Hand, Finger		X
Elbow, Forearm		X
Humerus, Shoulder		X
IVP	X	
UGI, Esophagram		X
BE	X	
Ribs-Sternum	X	
C-spine	X	
T-spine	X	
L-spine (AP and Lateral)	X	
L-spine (complete)	X	
Sacrum - Coccyx	X	
Scoliosis Series	X	
Sinus – Nasal bones	X	
Skull – Facial bones	X	
Mandible/Orbits	X	
Trauma Exams	X	
<b>ALL</b> Portables, Surgery, Pediatrics	X	

**GUIDELINES FOR CLINICAL PROGRESS****Second Year – January to July**

<b>Exam</b>	<b>Direct Supervision</b>	<b>Indirect Supervision</b>
Routine 2V Chest		X
W/C – Cart Chest		X
KUB		X
Routine Multi-abd		X
Multi-abd w/ decub		X
Foot, Ankle		X
Tib-Fib, Knee		X
Pelvis		X
Femur, Hip		X
Wrist, Hand, Finger		X
Elbow, Forearm		X
Humerus, Shoulder		X
IVP	X	
UGI, Esophagram		X
BE	X	
Ribs-Sternum	X	
C-spine		X
T-spine		X
L-spine		X
Sacrum - Coccyx		X
Scoliosis Series	X	
Sinus – Nasal bones	X	
Skull – Facial bones	X	
Mandible/Orbits	X	
Trauma Exams	X	
<b>ALL</b> Portables, Surgery, Pediatrics	X	