



Radiologic Technology Program

**414 Common Street
Lawrence, MA 01840**

**Student Handbook
&
Clinical Policy and Procedure Manual**

**Graduating Class of 2026
(2024-2026)**

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Introduction: Welcome to the Northern Essex Community College (NECC) Radiologic Technology Program. The curriculum of the program is designed to provide a student upon graduation with the necessary knowledge and skills to perform as an entry-level technologist.

This student handbook is structured to assist a student with achieving his/her educational goals, by providing the necessary information on program requirements and policies and procedures relative to the NECC Radiologic Technology Program.

Northern Essex Community College

Mission of the College: At NECC, our mission is to educate and inspire our students to succeed. We provide a welcoming environment focused on teaching and learning—strongly committed to unlocking the potential within each student and empowering our diverse community of learners to meet their individual goals. We are a community college dedicated to creating vibrant and innovative opportunities that encourage excellence and enhance the cultural and economic life of our region.

Division of Health Professions

Mission: The Division of Health Professions contributes to and supports the mission of the College by providing high quality programs of study to educate competent entry level health care professionals.

Philosophy: The Division of Health Professions builds its philosophy on the College’s core values: Opportunity, Diversity, Student Success, Personal and Professional Growth, Respect, and Partnership. Therefore, we believe in and are committed to:

- providing access to the health programs for all students who are qualified for admission.
- providing educational pathways to enable students who need to take prerequisite courses, or to engage in preparatory coursework, an opportunity to establish and meet their educational goals.
- developing a health care workforce that mirrors the diversity of the communities we serve.
- providing a comprehensive system to facilitate achievement of the student’s educational goals.
- providing an educational environment that instills a passion for lifelong learning.
- creating an atmosphere of mutual respect and cooperation among our colleagues, and among the faculty, communities, and students we serve.
- developing, maintaining, and evaluating educational partnerships with our various communities of interest.
- creating diversity in the faculty and establishing a culture that recognizes and values the unique andragogical approaches to multicultural education.
- enhancing communication with our communities of interest, thus allowing us to respond to the needs of those communities.

Radiologic Technology Program

Mission: The mission of the Radiologic Technology Program is to graduate professional, skilled entry level technologists who meet and strive to exceed the healthcare needs of the diverse patient population in area facilities. The technologists will be prepared to provide high quality imaging and patient care in the current evolving healthcare environment.

Goals of Program

1. Students/Graduates will demonstrate clinical competence.

Student Learning Outcomes:

- Students will apply appropriate positioning skills to achieve diagnostics radiographs.
- Students will be able to apply knowledge in radiation safety practices.

2. Students will demonstrate problem solving and critical thinking skills.

Student Learning Outcomes:

- Students will be able to adapt to new circumstances, difficult cases or unusual situations to produce acceptable diagnostic images.
- Students will be able to adapt positioning and technical factors for trauma patients.
- Students/Graduates will adjust technical factors for varying patient conditions and pathologies.

3. Students/Graduates will communicate effectively.

Student Learning Outcomes:

- Students/Graduates will demonstrate appropriate oral communication skills.
- Students will demonstrate competent written & oral presentation skills.

Philosophy:

The most important responsibility of any healthcare professional is patient welfare. The NECC Radiologic Technology student must set personal and professional goals focused on this responsibility. Success in achieving these goals will depend on many factors, some of which are: personal/professional appearance, the ability to instill trust and confidence in patients, acquiring technical skills to minimize radiation exposure and maximize image quality, the ability and desire to function as a team member, and a desire to serve others to the best of the student's ability.

Accreditation

The College has regional accreditation from the New England Commission of Higher Education (NECHE) and the Radiologic Technology Program has programmatic accreditation from the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 N. Wacker Drive, Suite 2850, Chicago, IL, 60606-2901. Telephone (312) 704-5300. www.jrcert.org *

The NECC Radiology Technology Program has programmatic accreditation with the JRCERT. The program follows the six (6) standards to maintain program quality and program improvement. Any individual who should have a complaint with the program should directly file the complaint with the program through the Clinical Practicum Grievance Process Policy # 31. If the individual believes the complaint has not been resolved then he or she may submit allegations of noncompliance to the JRCERT. A copy of the JRCERT standards and contact information are kept in the radiology classroom.

Technical Standards for Radiologic Technology

Purpose:

The list of technical standards was designed to inform entering students of the skills required when performing the duties in Radiologic Technology and to assess a student's ability to complete such duties. These technical standards reflect performance abilities and characteristics that are necessary to successfully complete the requirements of the Radiologic Technology program at NECC. These standards are not conditions of admission to the program. Persons interested in applying for admission to the program must review this form to develop a better understanding of the physical abilities and behavioral characteristics necessary to successfully complete the program. The College complies with the requirements and spirit of section 504 of the Rehabilitation Act and the Americans with Disabilities Act (ADA) of 1990. Therefore, to the extent practical, the College will endeavor to make reasonable accommodation for an applicant with a disability who is otherwise qualified.

**Interested applicants can obtain NECC program statistics / effectiveness data-exam pass rates, job placement rates, and annual program completion rates from www.jrcert.org.*

Student Liability Insurance:

All NECC Radiologic Technology Students are required to carry liability insurance and may not participate in the Radiologic Technology Program without this coverage. This insurance is provided through the College and the premium must be paid prior to the beginning of classes.

Criminal Offender Record Information (CORI) and Sex Offender Registry Information Checks (SORI)

NECC students interested in participating in an academic program that involves working with children, the disabled, or the elderly, or includes a clinical or practicum affiliation with a private or public health care provider are required to undergo a Criminal Offender Record Information (CORI) check, a Criminal Records Central Repository (CHRI) check and/or a Sex Offender Registry Information (SORI) check.

A student's participation in an academic program or clinical or practicum affiliation may be denied depending on the contents of the student's CORI, CHRI, or SORI reports. CORI checks may be performed pursuant to Massachusetts General Law Chapter 6, Sections 172, and consistent with guidelines promulgated by Executive Office for Health and Human Services and/or the Commonwealth's Department of Public Health. SORI checks may be performed pursuant to Massachusetts General Law Chapter 6, Sections 178(J) & 178(K). CHRI checks may be performed pursuant to New Hampshire law.

Students with legal issues in their background will meet with a NECC CORI/SORI committee and based on the review of their records, students will receive guidance and counseling, and a determination will be made as to whether that student can be placed in a clinical setting. For additional information on CORI/CHRI/SORI visit the college website at <http://www.necc.mass.edu/cori-sori>

The NECC CORI/SORI committee may decide that a student's past legal issue(s) will not interfere with the student entering a NECC program and completing the required clinical practicum course/s.

The Radiologic Technology student must also present his/her specific case documentation to the American Registry of Radiologic Technologists (ARRT) Ethics Committee. The ARRT Ethics Committee will determine if an individual's past legal issue(s) will prevent eligibility to sit for the national certification exam. Individuals need to resolve any past legal issue(s) with the ARRT before entering any Radiologic Technology Program and/or resolve any legal issues that may occur while enrolled in the program.

Since eligibility for the ARRT certification examination requires that applicants be of good moral character any previous convictions of felonies or misdemeanors may prevent applicants from taking the ARRT examination. Anything less than complete and total disclosure of any and all convictions will be considered as having provided false or misleading information to the ARRT and is grounds for permanent denial of eligibility for ARRT certification.

The ARRT may be contacted for information by mail at 1255 Northland Drive, St. Paul, MN 55120-1155, by phone at (651) 687-0048 and via their website at www.rrt.org

Cardiopulmonary Resuscitation (CPR)

Prior to entering the clinical practicum course, RTA191, all Radiologic Technology students must hold current and valid CPR certification at the healthcare provider/professional rescuer level.

Students may obtain CPR certification through the American Red Cross, the American Heart Association, or the American Safety & Health Institute. All initial and recertification courses must include hands-on skills demonstration on a mannequin.

Students should plan on obtaining their CPR certification during the summer immediately before entering the program so that their certification will remain valid for the two years they are enrolled in the program.

Local area hospitals, fire departments or other qualified agencies often provide CPR certification training to members of their local community. NECC also offers CPR certification training courses.

Students must maintain valid CPR certification while enrolled in the NECC Radiologic Technology Program. Failure to maintain current CPR certification will result in the student being suspended from the clinical practicum course until the appropriate CPR certification is established.

Student Health/Immunization Requirements

Students entering Health Professions and Human Services programs at NECC are required to submit a completed health history and health evaluation signed by a licensed physician or nurse practitioner. Additional information regarding health and communicable disease is covered in policy and procedure four (4) of this manual.

Students should contact their health provider for any medical problems or health questions. Students are not to request care for themselves or other family members directly from interns, residents, or any other physicians that the student is in contact with while at their clinical site.

In the event of an accident or emergency that occurs while a student is at his/her clinical practicum site emergency care will be initiated at the clinical site. Students should notify their insurance provider at the earliest opportunity regarding any emergency medical care they receive while at their clinical site. Students will be held responsible for associated medical fees related to any care they receive at their clinical site.

Student Drug Screening Analysis

Students enrolled in the Radiologic Technology Program are required to undergo and pass a 10-panel urine drug screening analysis in order to be eligible for clinical placement. Students will be required to undergo and pass random drug screening analysis in order to remain at program clinical facilities.

If a student fails to report for the required drug screening analysis, or fails to report within the designated time frame, this will be interpreted as a failed test.

Students who fail to pass or refuse to submit to a drug screening analysis will be deemed ineligible for clinical placement. Results of students' drug screening analysis are sent to the office of the Dean of Health Professions. The Radiologic Technology Program Director will receive a list of those students who have successfully completed their drug screening requirements and are eligible for clinical placement from the Dean's office.

Since each Radiologic Technology Clinical Practicum courses is a co-requisite course with the other Radiologic Technology courses offered in each semester, a student's inability to be placed in a clinical placement will result in a student's inability to remain in the Radiologic Technology Program.

The Division of Health Professions commits to provide high quality education and excellent clinical experiences to students in the health professions. Students are expected to perform at their highest functional level during all educational and clinical experiences in order to maximize the learning environment and ensure patient safety. A student's performance at all times must be free of any impairment caused by prescription or non-prescribed drugs or alcohol use. Students enrolling in Health Professions programs are required to undergo and pass a drug and/or alcohol screening analysis in order to be eligible for placement in a clinical facility. Students assigned to clinical education experiences at our contracted facilities may also be required to undergo and pass random drug screening analysis in order to remain at that clinical facility and in the program. Students who fail a screening or fail to comply within the designated time frame will be ineligible for clinical placement, which will affect their status in the program.

A “negative-dilute” drug screening result is judged inconclusive and is not considered successfully meeting the drug screening requirement. Those students who undergo drug screening which results in “negative-dilute” will submit to a random drug test within 24 hours of the notification of the previous test result in order to confirm the negative status of the screening. This test can be repeated once. Any further “negative–dilute” results will be considered a failed drug screening. Only students who undergo and pass drug screening will be eligible for clinical placement.

Students who test positive for marijuana use are unable to continue in clinical placement which will affect their status in the health program. A student who has a prescription for Medical Marijuana and tests positive for marijuana will also be ineligible to participate in clinical placement due to the federal restriction on the use of marijuana. While the use of Medical Marijuana is permitted in Massachusetts, marijuana remains classified as a controlled substance under federal law and its use, possession, and/or cultivation at educational institutions remains prohibited.

For additional information regarding the Program’s drug screening requirements please refer to Policy and Procedures #35, Student Drug Screening.

Clinical Practicum Assignments

The Program Director and Clinical Coordinator will establish students’ clinical practicum assignments. Clinical assignments are random and designed to provide students with a range of diverse learning opportunities and experiences. Students are typically assigned to two (2) different clinical practicum sites during the course of their program of study.

To meet the educational needs of all students the clinical assignments may be changed at any time as determined by the Program Director, Clinical Coordinators and Clinical Preceptors.

A student’s clinical assignment(s) may be some distance from a student’s home and up to 60 miles from the Lawrence campus. Clinical sites are Nashoba Valley Medical Center, Lowell General Hospital, Lawrence General Hospital, Holy Family Hospital Methuen, and Anna Jaques Hospital. Each student is responsible for providing his/her own transportation to and from these clinical sites.

The clinical objectives for each clinical practicum course will determine the room rotation schedules within a clinical practicum site.

Students will be offered the opportunity to participate in gender specific imaging procedures (i.e., HSG, Mammography or any other procedure opposite of the patient). The program will not override hospital policies and procedures to participate in these imaging procedures; however, the program will make every effort to place students in gender specific clinical areas. Clinical rotations in these gender specific imaging areas are not guaranteed to any student. The mammography statement is based on the position statement with Mammography Clinical Rotations (Standard One- Objective 1.2) adopted by the Joint Review Committee on Education in Radiologic Technology (JRCERT) in October 2021.

In the event a student is suspended from a clinical practicum site the situation that resulted in the suspension will be investigated by the Program Director and Clinical Coordinator. If at the conclusion of the investigation it is determined that the student's suspension from the site was for valid reasons, or in the event of a suspension for valid reasons where the clinical site refuses to allow the student to return to the site following a clinical suspension, the Program and the College are under no obligation to assign that student to a different clinical site.

The suspended student has the right to initiate an appeal through the College's due process as outlined in the NECC Student Handbook. The results of the appeal process will determine the student's future status in the program and clinical placement.

Radiologic Technology Program Curriculum

The program's curriculum encompasses liberal art studies, physical and applied sciences, and radiologic technology courses that are designed to provide students with meaningful learning experiences and the skills necessary to perform as an entry level radiographer.

The program's course sequence is designed so that a full-time student can complete the program in 21 months. Some students who chose to complete some or all of the general education courses, before entering the program, to lessen their course load while enrolled in the program, further extend the length of the program.

In order to progress through the program a grade of "C" (73%) or higher is required in all of the Radiologic Technology courses in order to continue to the next semester. And students must earn a minimum grade of "C" in all required courses to graduate.

The curriculum closely integrates didactic and clinical course work to ensure that graduates of the program are ready to sit for the national certification exam, which is offered by the American Registry of Radiologic Technologists (ARRT). Integration of didactic and clinical courses further prepares graduates to enter the workforce as entry-level technologist. Successful completion of the ARRT certification exam in Radiography qualifies students to work as Registered Technologists in Radiography and to apply for a Massachusetts Radiologic Technologist license in Radiography.

Graduates of the NECC Radiologic Technology Program earn an Associate in Science (AS) degree in Radiologic Technology.

Radiologic Technology Program Curriculum

1st Semester Courses: Fall	Credits	2nd Semester Courses: Spring	Credits
BIO121 Anatomy & Physiology I	4	BIO122 Anatomy & Physiology II	4
ENG101 English Composition I	3	ENG102 English Composition II	3
HES 130 Introduction to Patient Care	3		
RTA110 Radiologic Procedures I	3	RTA120 Radiologic Procedures II	3
RTA111 Radiologic Exposure I	3	RTA121 Radiologic Exposure II	3
RTA191 Clinical Practicum I	2	RTA192 Clinical Practicum II	2
Computer Science Elective CIS110 or higher	3	RTA 125 Introduction to Radiologic Physics	3
Total credits for 1st semester	21	Total credits for 2nd semester	18

3rd Semester-Summer Session:	Credits
RTA220 Radiologic Procedures III: 6 consecutive weeks	3
RTA292 Summer Clinical Practicum III: 12 consecutive weeks	3
Total credits for 3rd semester	6

4th Semester: Fall	Credits	5th Semester: Spring	Credits
RTA201 Radiologic Equipment & Quality Assurance	3	RTA203 Radiobiology & Protection	3
RTA202 Advanced Radiographic Imaging	3	RTA204 Special Radiologic & Interventional Procedures	3
HES207 Clinical Pathophysiology	3	RTA205 Computer Imaging & Cross-Sectional Anatomy	3
RTA294 Clinical Practicum IV	3	RTA295 Clinical Practicum V	3
Behavioral Science Elective	3	Liberal Arts Elective	3
		Humanities Elective (Students must meet Global Awareness Core Academic Skill-Spanish Recommended)	3
Total credits for 4th semester	15	Total Credits for 5th semester	18

Total credits for graduation: 78 Credits

POLICIES & PROCEDURES

NORTHERN ESSEX COMMUNITY COLLEGE

Division of Health Professions

Radiologic Technology Program

**CLINICAL PRACTICUM
POLICIES AND PROCEDURES
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PURPOSE: Policies and procedures provide a guide for the radiographic clinical practicum courses. Policies are the "rules" or statements to guide conduct in specific situations. Procedures describe the method of policy implementation. Standard policies and procedures are useful in improving the clinical practicum experience by establishing specific expectations and assessment methods.

DISTRIBUTION: The Radiologic Technology Clinical Practicum Policies and Procedures are part of the NECC Radiologic Technology Student Handbook. Students are required to purchase this handbook as part of their Clinical Practicum courses. Students must purchase this handbook prior to the start of their first clinical practicum. Copies of the NECC Radiologic Technology Student Handbook are on Blackboard for Clinical Preceptors. As policies are updated and revised each student and each preceptor receives a copy of these revisions for placement in the NECC Radiologic Technology Student Handbook. Students and preceptors sign the acknowledgement form with the policy changes.

REVIEW OF POLICIES AND PROCEDURES: The Program Director, Clinical Coordinator and Clinical Preceptor review Policies and Procedures on a yearly basis and on an as needed basis. The policies and procedures identified in this handbook may be amended upon written notification of such changes to students and faculty. It is the responsibility of the Program Director to inform the students and faculty of changes in these policies and procedures in writing indicating the effective implementation date.

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**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 01

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, February 2023, March 2024

Revised: May 2006, May 2009, July 2013, January 2017, March 2021, February 2023, March 2024

**CLINICAL PRACTICUM ORIENTATION
POLICY & PROCEDURE**

POLICY

The NECC Radiologic Technology student will receive an orientation to their assigned clinical practicum site. This orientation may be provided by the Clinical Preceptor, designee, or other appropriate clinical supervisory personnel.

All clinical sites require students to complete the hospital orientation prior to the start of the student's first clinical rotation. Students must meet the orientation requirements of their clinical site.

PROCEDURE

1. Students are scheduled for orientation to their clinical practicum site and department by their Clinical Preceptor.
 - Clinical sites will require students to complete an orientation process prior to reporting for the first day of their clinical practicum course.
 - Students who are required to attend orientation on a date that is not a scheduled clinical day will be excused from clinical on an alternate day to be determined by the Clinical Preceptor.
2. Students must complete all orientation requirements of their clinical practicum site.
3. Failure to complete a facility's orientation requirements will result in the delay in the start of a student's clinical practicum course and may result in the student being unable to complete the clinical practicum course requirements.
4. Orientation to the student's clinical practicum site includes, but is not limited to a review of policies and procedures specific to that facility/department relating to: Infection Control, Reporting Health and Communicable Disease, Fire/Safety, Emergency/Code Situations, Incident Reports, Positioning Protocols, Lunch/Break Schedules, Departmental Phone Numbers for Call-in for Sick/Emergency Days, Identification Badges, Parking Restriction/Requirements, Health Insurance Portability and Accountability Act (HIPAA) training, Radiation Monitoring and Safety, etc.

5. The Clinical Preceptor will ensure that the first-year student documents completion of the orientation to the facility/department using the Trajecsys Report System™ during the Clinical Practicum I course.
6. When students rotate to a new clinical practicum site, the Clinical Preceptor is responsible for providing these new students with an orientation to their site within the first week of their rotation. Students will document the orientation using the associated lab in the Trajecsys Report System™.
7. Students will complete MRI education and screening prior to starting their clinical practicum experience, as stated in the MRI Policy #40.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 02

Created: January 2005

Reviewed: February 2019, March 2019, February 2020, January 2021, February 2023, March 2024

Revised: July 2013, February 24, 2014, March 2014, March 2015, January 2017, February 2019, March 2019, February 2023, March 2024

**CLINICAL PRACTICUM HOURS/ROTATIONS/HOLIDAYS/SNOW DAYS/EMERGENCIES
POLICY & PROCEDURE**

POLICY

Traditional clinical practicum hours are primarily based on either a 7:30 A.M. to 3:30. P.M. or 8:00 A.M. to 4:00 P.M. schedule, depending on the clinical site, with a 30-minute lunch break.

During the second year of the program students are required to complete a portion of their clinical hours during non-traditional clinical times such as evening and weekend hours to gain additional experience in trauma and pediatric radiography. Evening hours are defined as hours before 5:00AM or after 7:00PM on Monday through Friday, and weekend hours are defined as any hours on Saturday or Sunday. Non-traditional clinical hours cannot exceed 25% of the total clinical hours the student spends in the program. All students will be required to complete two evenings from 1pm-9pm or a 3pm-11pm shift and one weekend from 11pm-7am, and one Saturday or Sunday from 8am – 4pm shift. During the summer semester, students are required to complete two nontraditional shifts, one evening and one weekend day shift. One shift will be completed the first six weeks and the second shift will be completed the second six weeks. Fall or Spring semester two more nontraditional shifts will be completed, one evening shift and one overnight shift. Students will have a day off during the week for the nontraditional shifts.

Modifications or adjustments to the traditional clinical schedule will be documented through the use of the Student Conference form and/or the Alternate Shift form in Trajecsys. The Alternate Shift form will also need to be printed and signed by the supervising technologist for a full shift modification.

Students will be offered the opportunity to participate in gender specific imaging procedures (i.e., HSG, Mammography or any other procedure opposite the gender of the student). The program will not override hospital policies and procedures to participate in these imaging procedures; however, the program will make every effort to place students in gender specific clinical areas. Clinical rotations in these gender specific imaging areas are not guaranteed to any student. The mammography statement is based on the position statement with Mammography Clinical Rotations (Standard One- Objective 1.2) adopted by the Joint Review Committee on Education in Radiologic Technology (JRCERT) in October 2021.

The combination of clinical practicum hours and didactic course hours shall not exceed 40 hours per week.

All students shall follow the published NECC holiday schedule. Students are not allowed to schedule vacation time that conflicts with the NECC Radiologic Technology Program schedule.

In the case of severe weather, the clinical practicum is a NECC course, and, as such, will follow the College's decision for school closing or delayed openings.

PROCEDURE

1. Each semester students are assigned to a clinical practicum site by the Program in accordance with the NECC clinical affiliation agreements. Each student will be assigned to a minimum of two different clinical sites while enrolled in the program. Students will rotate to their new clinical site after the first six (6) weeks of summer.
2. To meet the educational needs of all students' clinical assignments may be changed at any time as determined by the Program Director, Clinical Coordinator and Clinical Preceptor.
3. Students are expected to arrive at the clinical facility on time and sign-in using a hospital computer and the Trajecsys Report System™ and report to the Clinical Preceptor/or designee before their scheduled start time.
4. Students must sign-out using a hospital computer and the Trajecsys Report System™ before leaving the clinical site at their scheduled dismissal time.
5. The Radiologic Technology Program schedule is based upon the NECC academic calendar. Additionally, radiologic technology students are assigned to clinical as outlined below:
 - The Clinical Practicum III Summer course involves a 12-week clinical assignment. For the first six weeks students are in clinical on Monday, Wednesday, and Friday and for the last 6 weeks students are scheduled in clinical Monday through Thursday.
 - Students may not be scheduled in clinical during school closures.
 - For the safety of students and patients, no more than ten (10) clinical hours shall be scheduled in any one day. Scheduled didactic and clinical hours combined cannot exceed forty (40) hours per week.
6. In the case of severe weather or emergency, the clinical practicum course is a NECC course, and thus will follow the College's decision for school closing or delayed openings.
 - It is the student's responsibility to monitor NECC closings and notify their clinical practicum site of any delayed openings or school closings due to severe weather conditions.
 - A delayed opening of two (2) hours is based on college classes routinely starting at 8:00AM, thus a two-hour delay means that students will not report to their clinical site until 10:00AM regardless of their normal clinical starting time. Students are required to notify their Clinical Preceptor at least one hour prior to their starting time.
 - When NECC classes are already in session the Program Director will notify the Clinical Preceptor when NECC classes are cancelled early, due to snow or other emergencies, to establish student early release time from the clinical site(s). Students may not continue to remain at their clinical site once the College has announced that classes are cancelled.

- In the absence of the Program Director or Clinical Coordinator, the Clinical Preceptor should use their own best judgment in releasing the students from their clinical sites during severe weather conditions (i.e., hurricanes, blizzards, etc.) or during other emergency situations (i.e., flooding, fire, etc.).

When students are scheduled for clinical experience during non-traditional clinical times or days when the college is not in session, the Program will provide the clinical practicum sites with the name and information of a program faculty member to be used as an emergency contact in the event of an emergency situation involving a NECC Radiologic Technology student.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 03

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: March 2017, March 2019, March 2021, March 2022, March 2024

CLINICAL ATTENDANCE/ABSENCE

POLICY & PROCEDURE

POLICY:

NECC Radiologic Technology students are required to attend clinical practicum throughout their program of study. Absence from the clinical practicum is strongly discouraged due to the time required to master the performance of a variety of radiographic procedures and the number of clinical competency evaluations that are required for each clinical practicum.

It has been determined that the established clinical time for each semester is the time required for each student to meet the clinical course objectives. Therefore, students are required to make up any missed clinical days. Make-up time must be completed within thirty (30) days of the absence or before the semester ends, whichever one occurs first. Students are allowed two (2) personal days per semester. Personal days will not be taken the last week of the semester.

Students who are unable to complete the clinical practicum objectives and clinical make-up days within the 30 days or before the semester ends will receive a grade of Incomplete (I) for their clinical practicum course and will be unable to continue in the program since each clinical practicum course is a pre-requisite to the next clinical practicum course.

The student will identify the procedures or area of practice that will be most beneficial to their learning prior to scheduling clinical make-up day(s)/time for their preceptor. The Clinical Preceptor will use the Conference Report for Clinical Absence form to document the area of focus for his/her clinical make-up time. The form is located in Trajecsys.

Students are not allowed to schedule vacation time that conflicts with the Radiologic Technology Program schedule.

Students are expected to develop a professional work ethic during their clinical practicum experience. Clinical attendance is one component of a professional work ethic. Students should keep in mind that their clinical attendance will reflect on future recommendations for employment after graduation.

Recognizing that all individuals may become unexpectedly ill, or encounter an unforeseen emergency situation, the procedures listed below outline the steps to be followed in the event of the student's absence from the clinical practicum site.

PROCEDURE

1. In the case of illness/emergency the student must call their clinical site at least one (1) hour before the start of the regularly scheduled clinical hours and speak with the Clinical Preceptor or designee, regarding their absence.
 - Failure to notify the Clinical Preceptor or designee of an absence, or to notify the Clinical Preceptor or designee of the absence in the appropriate time frame, may result in an unexcused absence (*See Policy #06, Un-excused absence*) at the discretion of the Clinical Preceptor, and Program Director.
 - At the discretion of the Clinical Preceptor, the Clinical Coordinator, and the Program Director an unexcused absence will result in a ten (10) point demerit for that semester.
 - In the event of a severe illness or accident in which the student was physically unable to notify the Clinical Preceptor, or designee, of their absence, the absence will not be considered an unexcused absence. Upon returning to the clinical site, the student must provide a physician note indicating the date of the absence and the reason for the absence.
2. If the Clinical Preceptor would prefer the student to notify them of a student's absence in a different manner, (i.e., e-mail or voice mail or within a different time frame) the Clinical Preceptor should instruct the student of the proper procedure to follow as part of the student's orientation to that clinical site.
3. It is not in the best interest of the student, nor of the patients, and other healthcare professionals for a student to report to their clinical site when they are ill.
 - In the event a student reports to the clinical site with an illness that can easily be spread to other students, patients, or staff, and/or when the student is unable to function at a level appropriate to a healthcare setting and appears to be a hazard to themselves or others, the clinical preceptor, and/or the preceptor's designee, has the authority to release the student from the clinical site for that day.
4. The student will clock in to the Trajecsyst clinical record system to record their absence before the start of the next clinical day.
5. The make-up time for absences will be performed at a time agreed upon by the student and the Clinical Preceptor. Make-up time must be completed within 30 days of the absence or before the semester ends, whichever one occurs first for the semester. The Clinical Coordinator must be notified in writing three (3) day prior to the arrangements for make-up time utilizing the Conference Report for Clinical Absence form located in Trajecsyst.
 - Students are allowed two (2) personal days per semester. These personal days do not need to be preapproved and can be used anytime, except the last week of the semester. Students must call their Clinical Preceptor one (1) hour before their start time to notify the preceptor they will be taking a personal day.
 - Students who do not use the two (2) personal days, have no demerits, or punctuality issues will receive three (3) merits on their final clinical practicum grade.

- Students must keep in mind that there is limited time in which to make up missed clinical time. Make-up time can be completed on weekends but cannot be scheduled on holidays and/or when the college is closed. To accommodate scheduling for the make-up time, if necessary, time can be split into smaller increments of two (2) hour blocks. A minimum of two (2) hours can be scheduled by extending their regular class or clinical day; however, a student cannot exceed a total of ten (10) hours a day with didactic courses and/or clinic courses. Make-up time on the weekends depends on the number of missed days and staff availability. Program faculty (Program Director and/or Clinical Coordinator) will discuss the situation to determine the possible options.
 - Students who schedule a make-up day with a Clinical Preceptor and don't attend the make-up day, it will be counted as an additional absence.
 - If the student fails to make up the scheduled missing clinical time as arranged, prior to the end of the semester, the grade of incomplete will prevent the student from continuing to the next clinical practicum course since each semester's clinical practicum course is a pre-requisite to the next semester's clinical practicum course. Thus, the student will be unable to remain in the program.
6. Once a student misses three (3) days during a semester the student will meet with their Program Director and/or Clinical Coordinator to discuss their situation and a Student Conference Report form will be completed documenting the meeting and the expectations for the student's improvement in attendance.
 - Students who have excessive absences (4 or more including their personal days) from clinical will receive five (5) demerits for each occurrence of four (4) or more.
 - If a student fails to meet the established expectations for improvement in attendance, the student will be placed on clinical probation.
 7. A students with extended absences (3 or more sequential days per semester) related to an extended illness or injury will be required to provide proof of medical clearance by a healthcare provider to be able to return to their clinical site.
 8. When a student must leave their clinical practicum site prior to their scheduled release time due to illness or emergency, the student's missed clinical hours will be documented, and cumulative missed hours will be totaled and must be made up within 30 days of the missed time or before the semester ends.
 9. Extended time missed from a clinical practicum due to a death in the family, jury duty, military duty, or extended illness may impact on the student's ability to meet clinical practicum course objectives. Extended time is defined as three (3) or more missed days.
 10. A student who requires extended time (more than 3 days) off from their clinical practicum for any reason must meet with the Program Director and Clinical Coordinator to discuss their situation then to develop a feasible plan for meeting the objectives of the clinical practicum course.
 - If a feasible plan to meet the clinical practicum course objectives cannot be developed, a student will be counseled by faculty to withdraw from the clinical practicum course, if it is still within the College's acceptable time frame to withdraw from a course.

- Withdrawal from a clinical practicum course will prevent a student from continuing in the program since the clinical practicum course in one semester is a pre-requisite to the clinical practicum course offered in the next semester.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 04

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: March 2016, January 2017, February 2019, January 2023

**PUNCTUALITY/TARDINESS
POLICY & PROCEDURE**

POLICY

A student is expected to arrive at their clinical site on time. If a student arrives at the clinical practicum site after the assigned scheduled start time the student must document their late arrival on the Daily Sign-In in the Trajecsys Report System™.

A student is expected to return on time to their assigned area at the clinical site following a break or lunch schedule. Failure to return on time to the assigned clinical area following a break and/or lunch schedule is also considered an occurrence of a student failing to be punctual.

Students are expected to develop a professional work ethic during their clinical practicum experience and punctuality is one component of a professional work ethic. Students should keep in mind that their punctuality will reflect on future recommendations for employment after graduation.

Students make up lost time due to lack of punctuality when either a single occurrence or cumulative occurrences total to 30 minutes of missed clinical time. Make-up time must be completed the same day of the missed time.

Continued issues with tardiness will reflect in the student's Clinical Practicum grade in the Professional Behavior Section as outlined in the procedures below.

Start times for traditional clinical practicum hours vary slightly between clinical practicum sites (i.e.: 7:30am-3:30pm or 8:00am-4:00pm). Example of a tardy: If a student start time is 7:30am, a clock-in at 7:30 is considered late.

When students are scheduled for non-traditional clinical practicum hours students are expected to arrive on time at their clinical site for the start of their non-traditional hours (i.e., 3:00pm to 11:00pm, or Saturday: 9:00am to 5:00pm, etc.)

Falsification of records, including signing-in or signing-out for another student or allowing another student to sign you in or sign you out for you will result in disciplinary action which will result in demerits and can include

clinical suspension, probation, or dismissal from the program. Sharing your unique username and password for Trajecsys is a violation of program and college policies. A minimum of five (5) demerits will be issued for each occurrence.

PROCEDURE

1. Ongoing problems with tardiness will affect the student’s grade point total for punctuality/tardiness on the Grade Report Form (**Form CP1-A, CP2-A, CP3-A, CP4-A, CP5-A**) in the Professional Behavior section based on the following standards:

Standard	Number of days/occurrences tardy in the semester	Point Deductions for Lack of Punctuality/Tardiness Issues
Meets Standards	0 to 2 days/occurrences tardy in a semester	0 points
Below Standards	3 days/occurrences tardy in a semester Student conference is scheduled	1 point
	4 days/occurrences tardy in a semester	4 points

2. When a student has four (4) occurrences, one (1) demerit will be deducted along with the four (4) point deduction from the Professional Behavior section on the Clinical Practicum grade sheet. Additional demerits will be deducted for any occurrences that continue with punctuality/tardiness. Any punctuality/tardiness over fifteen minutes, the student will receive one (1) demerit. In the event of extreme weather conditions, or unusual situations which may result in a student’s late arrival to the clinical practicum site, the point deduction for tardiness may be waived at the discretion of the Clinical Preceptor, Clinical Coordinator or Program Director.
3. When there have been three (3) occurrences of tardiness during a practicum, the student will meet with the Program Director (PD), Clinical Coordinator (CC), and/or Clinical Preceptor (CP) for a student conference.
 - The PD, CC and/or CP will advise the student as to the reason for the conference and will provide the student with the expectations of how the student’s tardiness will be addressed and resolved.
 - This meeting will be documented using the Student Conference Report form in the Trajecsys Report System™.
4. Continued issues with tardiness will not be tolerated.
 - Students will be placed on clinical probation when there are ongoing issues with tardiness.
 - A student will continue to be assigned demerit points on their clinical practicum grade sheet for lack of punctuality.
 - A grade below a “C” for a clinical practicum course is considered a failing grade.

- If a student receives a failing grade for a clinical practicum course the student will not be allowed to continue in the program, since each clinical practicum course is a pre-requisite to the clinical practicum course offered in the next semester.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 05

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2006, May 2008, October 2008, June 2010, January 2017, March 2024

**DEATH IN FAMILY/BEREAVEMENT
POLICY & PROCEDURE**

POLICY

In the event of a death in the immediate family of an enrolled NECC Radiologic Technology student, the student is granted an excused absence of three (3) consecutive days for bereavement in a semester. These three (3) bereavements days will not be considered as absence days.

The student may be required to make up clinical time for these three bereavement days only when a student fails to meet the clinical practicum course objectives because of this missed clinical time for bereavement.

A student may request additional time off for bereavement, but loss of additional clinical time could potentially affect the student's ability to complete the required clinical practicum course objectives.

Immediate family is defined as the student's spouse/partner, parent/guardian, grandparent, child, grandchild, sibling, or with the approval from the Program Director, another member of the student's extended family.

The bereavement policy does not extend to non-family members.

PROCEDURE

1. The student must notify the Program Director, Clinical Coordinator and their Clinical Preceptor in the event of a death in their immediate family.
2. The student must document the bereavement absences in Trajecsys.
3. Once the Radiologic Technology student or the Clinical Preceptor has notified the Program Director of the death of a student's immediate family member, the Program Director will notify the other Radiologic Technology faculty members of the student's absence from class.
 - Students are responsible for any missed class notes, assignments, or exams.

- Students will need to meet with their Radiologic Technology course instructor(s) to schedule any make-up time for missed work.
4. Students are responsible for notifying other Non-Radiologic Technology NECC faculty members of any non-RTA courses they are taking of their absence from class due to the death of a family member.
 - Students are responsible for any missed class notes, assignments, or exams.
 - Students will need to meet with their course instructor(s) to schedule any make-up time for missed work.
 5. Bereavement days off for Clinical Practicum course days will be documented in the student's clinical record as a clinical absence due to death in family (DIF).
 6. In accordance with Policy 03: Clinical Attendance/Absence, students must make up any absences that exceed the three bereavement days allowed in a semester.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 06

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2005, May 2008, May 2009, June 2010, March 2014, March 2016, January 2017, March 2021

**UNEXCUSED ABSENCE
POLICY & PROCEDURE**

POLICY

The NECC Radiologic Technology student is required to notify their Clinical Preceptor when unable to attend clinical due to an illness or unforeseen emergency situation.

If a student fails to appropriately notify their Clinical Preceptor or designee of their absence as outlined in Policy and Procedure 03, Clinical Attendance, and as outlined in the student's orientation to the clinical site this will result in the documentation of an unexcused absence.

The steps to follow for an unexcused absence are outlined in the following procedure.

PROCEDURE

1. In the event of an absence due to illness or unforeseen emergency, a student is expected to personally notify the Clinical Preceptor or their designee, of their absence as outlined in Policy and Procedure 03, Clinical Attendance and as outlined in the student's orientation to the clinical site.
2. If a student fails to notify the Clinical Preceptor or designee of their absence as outlined in Policy and Procedure 03, Clinical Attendance, unexcused absence may result in a ten (10) point demerit for that semester.
3. Unexcused absences must be made up prior to the start of the next semester, at a time agreed upon by the student, the Clinical Preceptor and Clinical Coordinator.
4. A student who fails to make up an unexcused absence before the start of the next semester will receive a grade of incomplete for that clinical practicum and will not be allowed to progress to the next clinical practicum course.
5. In the event of a severe illness or accident in which the student is physically unable to notify the Clinical Preceptor, or designee, of their absence, the absence will not be considered an unexcused absence.

6. In the event of severe illness or accident a student must, upon returning to the clinic practicum site, bring a healthcare provider's note indicating the date(s) of and reason for the student's absence to NECC.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 07

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2009, June 2010, July 2013, January 2017, March 2021

**TRANSPORTATION
POLICY & PROCEDURE**

POLICY

Students in the NECC Radiologic Technology program may be required to travel up to 60 miles from campus to their assigned clinical practicum sites and must provide their own transportation. Students must follow the parking regulations of their assigned clinical practicum site.

PROCEDURE

1. Students are responsible for arranging and paying for their transportation and any required parking fees at their clinical practicum sites.
2. Students in need of a parking space at their clinical practicum site will receive information on parking during their orientation to their clinical site and only if the clinical site has parking spaces available for students.
3. Some clinical sites may require students to park at an off-site location and/or may require students to pay parking fees.
4. Students who fail to follow the parking regulations of their clinical site will be issued a clinical warning.
5. A student who continues to violate the parking regulations of the clinical site after receiving a warning will be placed on clinical probation.
6. Violation of clinical probation expectations may result in dismissal from the program.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 08

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: October 2018, December 2018, March 2021

**SUPERVISION OF STUDENTS
POLICY & PROCEDURE**

POLICY

NECC Radiologic Technology students will be always supervised by a qualified staff technologist (radiographer), through direct or indirect supervision, as outlined in the procedures below. A qualified technologist is defined as a technologist who is certified by the ARRT in radiography and/or, for those technologists working in clinical practicum sites located in Massachusetts, holds a current license in radiography with the Commonwealth of Massachusetts Radiation Control Program.

PROCEDURE

1. Each student will be assigned to work under the direct or indirect supervision of a qualified staff technologist.
2. A student must have direct supervision while observing, practicing, or performing an exam in which the student has not yet achieved competency.
3. All mobile radiographic and mobile fluoroscopic procedures must be performed under direct supervision.
4. Direct Supervision is defined as a qualified technologist in the room overseeing all activities associated with a radiographic procedure including:
 - a. The qualified technologist reviews the procedure in relation to the student's level of experience and achievement.
 - b. The qualified technologist evaluates the condition of the patient in relation to the student's knowledge.
 - c. The qualified technologist is present during the performance of the procedure.
 - d. The qualified technologist will be next to the student and the patient. The qualified technologist will be next to the wall bucky, x-ray table, stretcher, or portable, and not behind a lead wall or lead window.
 - e. The qualified technologist reviews and approves the procedure along with the radiographic images that are produced.
5. After a student has achieved competency in a particular exam, the student may perform that exam with Indirect Supervision unless it is a mobile radiographic or mobile fluoroscopic procedure or if a radiographic image must be repeated then a student must be directly supervised.

6. Indirect Supervision is defined as a qualified technologist immediately available to assist a student, regardless of the level of the student's achievement or competency. Immediately available is interpreted as the presence of a qualified technologist adjacent to the room or location where a radiographic procedure is being performed.
7. In order to maximize radiation protection and safety for the patient, all unsatisfactory images must be repeated under the direct supervision of a qualified technologist who is licensed in radiography by the Commonwealth of Massachusetts Radiation Control Program and/or certified by the ARRT in radiography, regardless of the student's level of competency. For additional information on repeating unsatisfactory images refer to Policy #14, Repeating of Unsatisfactory Radiographic Images.
8. Under all circumstances, students must have images evaluated and approved before releasing any patient and sending the images to PACS.
9. Students who are in violation of the policy and procedures for supervision of students will meet with their Clinical Preceptor and Program Officials (Program Director, Clinical Coordinator). A Student Conference Report form will be completed to document the reason for the conference and the expectations that the student is to meet.
10. Violations in this policy will reflect in the student's clinical practicum course grade as point reductions in the category of professionalism.
11. Repeat violations or infractions of policies related to radiation safety policy or patient safety will result in the student being placed on clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 09

Created: January 2005

Reviewed: March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2008, May 2009, June 2010, February 2017, March 2021

**PROFESSIONAL BEHAVIOR & CONDUCT
POLICY & PROCEDURE**

POLICY

The students in the Radiologic Technology Program are expected to conduct themselves in a professional manner throughout their clinical training. Professional behavior and conduct include the use of common sense and common courtesy while interacting with program faculty, patients, patient's family members and other healthcare professionals.

The procedures below list some, but not all, of the expected professional behavior and conduct for student radiographers to follow, as it would be impossible to list every scenario that could occur in a clinical setting that would potentially involve a student's professional behavior and conduct.

PROCEDURE

1. The student will refer to patients in a formal and courteous manner in compliance with departmental confidentiality policies and with the Health Insurance Portability and Accountability Act (HIPAA).
 - a. When appropriate the student will refer to patients by their last name with the appropriate preface (i.e.: Mr., Ms., Mrs., Miss., etc.)
 - b. Students must follow the protocols of their department in ensuring patient identification for radiology procedures.
 - c. Use of expressions to address patients, such as "Sweetie", "Honey", etc., is inappropriate in the clinical setting.

2. The student is expected to treat all patients with dignity and respect while delivering care without prejudice to all patients.

3. Students must be certain to display an appropriate professional image and demeanor to all patients.
 - a. Students must be aware of the tone of their voice, facial expressions, and the body language projected while in the presence of patients, patient's family members and other healthcare professionals.
 - b. Students should not use unprofessional or inappropriate language, slang, or idioms while in the clinical setting.

- c. Students must be careful to speak clearly and with sufficient volume so that patients and their family members will understand instructions.
4. Students are expected to provide a caring and empathetic approach to all patients.
5. Students must work cooperatively with all clinical staff, presenting a courteous, professional manner, and using appropriate titles.
 - a. The student will refer to physicians by the last name with the appropriate preface (i.e., Dr.), unless directed to do otherwise by the physician.
 - b. When introducing a physician to a patient the student must always use the appropriate preface/title.
6. Students must demonstrate respect for, defer to the judgment of and follow the instructions of all clinical staff.
 - a. If students are confused by a staff member's instructions the student should wait until they are out of the patient's hearing distance to ask for clarification.
 - b. Challenging a technologist or staff member's instructions in front of the patient will make the patient feel unsure of the technologist or staff's abilities. This may make the patient feel insecure about the care that they are receiving.
 - c. Students should ask their clinical preceptor for clarification of information later if they feel there is conflicting information.
7. Students are expected to take initiative in applying the new skills they are learning in their didactic courses while in the clinical sites.
 - a. It is expected that while procedures are being performed, the student is an active participant in these procedures. Students must be observing, assisting, or performing procedures with the direct or indirect supervision of qualified technologists while procedures are being performed.
 - b. When radiology departments are slow, students should obtain permission from their Clinical Preceptor or the Clinical Preceptor's designee to use a radiology procedure room to practice patient positioning on fellow students or to use the time to review and study classroom material.
 - c. Students can also make use of slow time in their departments to continue to further their education by reading professional journal articles or reviewing professional textbooks but should first obtain permission from their Clinical Preceptor or in the Clinical Preceptor's absence designee to read professional journals or textbooks.
 - d. As members of the radiology team, students are expected to assist in, and perform other tasks required in the department such as, cleaning, organizing, and stocking x-ray rooms; filing; scanning documents; etc.
8. Students are expected to continue to apply and practice their radiography skills after successful completion of their competency evaluations, in order to become more proficient at these procedures.
9. Students will refrain from using any personal electronic devices while at their clinical site. Use of these devices could potentially prevent a student from hearing important instructions, a patient's cries for help, or other departmental or site broadcasted auditory signals or announcements. In addition, some electronic device may interfere with the operation of medical equipment.
10. Students not in compliance with the Professional Behavior & Conduct Policy and Procedure will meet with their Clinical Preceptor, Clinical Coordinator and/or Program Director to discuss the issues or concerns

regarding their professional behavior/conduct. This meeting will be documented using the Student Conference Report Form. If the behavior violates the NECC Code of Conduct, the issue will be referred to the Student Code of Conduct Administrator.

11. Students who violate the Professional Behavior and Conduct policy will receive clinical demerits in this category on their Clinical Practicum Grade Report form **(Forms: CP1-A, CP2-A, CP3-A, CP4-A & CP5-A)**.
12. Continued violations of three infractions of the Professional Behavior and Conduct Policy will result in the student being placed on clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 10

Created: January 2005

Reviewed: February 2018, February 2019, March 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: March 2015, February 2017, March 2021, March 2024

**PROFESSIONAL APPEARANCE/DRESS CODE
POLICY & PROCEDURE**

POLICY

NECC Radiologic Technology students are required to dress in a professional manner at all times while at their clinical practicum site. Good personal hygiene must be maintained at all times.

The student's appearance must not be distracting to others (i.e., co-workers, patients, visitors, etc.). A distracting appearance is defined as those styles or fashions that are not of a conservative nature appropriate to a healthcare environment, such as: facial piercing, including but not limited to, piercing of the tongue, nose, cheek, eyebrow, lip, chin, or multiple ear piercings and/or visible tattoos.

Massachusetts State law requires individuals in healthcare to wear identification badges that indicate their name and their credentials. In addition, State law protects the rights of the patients by stating patients may refuse to be treated by individuals in training without hindering their access to healthcare. Therefore, NECC students must always wear a NECC logo name pin, while at their clinical practicum site. The pin provides at a minimum of the student's first name and identifies them as a Northern Essex Community College (NECC) student.

The professional dress code, as outlined below, must be followed by all NECC Radiologic Technology students in the classroom and the clinical practicum sites.

PROCEDURE

1. Students are required to purchase and wear the approved program uniform.
2. The approved program uniform consists of the following:
 - Matching solid navy-blue colored scrub outfits.
 - For additional warmth students may wear either a short or long sleeve plain white or plain navy-blue shirt underneath their scrub tops.
 - Shirts worn under the scrub tops must be tucked into the pants.
 - The NECC Radiologic Technology Program emblem must be sewn to the right shirt sleeve.

- NECC logo name pin that includes a minimum the student's first name and indicates they are a student from NECC.
 - If a student chooses to wear a lab coat or scrub warm up jacket over their scrub outfit it must be a solid white color and the NECC program emblem must be sewn to the right sleeve of the jacket. An approved navy-blue fleece jacket with the NECC program emblem must be sewn to the right sleeve of the jacket may also be worn. Fleece jackets are custom designed and may be purchased through a designated local vendor. No other jackets are to be worn in class.
3. Uniform clothing must fit appropriately. Uniform clothing that is either too tight fitting or excessively large is unacceptable.
 4. Uniform clothing must be kept neat, clean and wrinkle free.
 5. Students must always wear acceptable footwear. Acceptable footwear includes the following:
 - Clean solid white or solid black shoes or sneakers with clean matching-colored shoelaces
 - Clean solid white or black clogs with heel straps (if allowed by the clinical site).
 - Clean socks or nylons/hose must be worn at all times.
 6. Strapless clogs, sandals or opened toed shoes are not allowed as these pose a safety risk.
 7. Hair must be kept neat and clean. Hair must be of a natural color that a person would be born with. No extreme colors such as blue, green, purple, pink, orange, etc. will be allowed. Hair longer than shoulder length must be tied up/back for safety.
 8. Beards, sideburns, and mustaches must be neatly trimmed.
 9. Moderate use of jewelry in the clinical site is acceptable (i.e., watch, wedding ring, single pair of small earrings).
 - No long necklaces or large hoop/dangling earrings are allowed in place at the clinical practicum site, as these can be a safety risk.
 - Multiple pierced earrings are not allowed in place at the clinical practicum site. One stud per ear is only accepted.
 - Ear gauges are not allowed and must be removed while the student is in clinical.
 10. Nails must be kept short and clean, and no long or false/acrylic or gel coat nails will be allowed due to potential infection control problems. Chipped polish is not acceptable, and nails must be no longer than ¼ inch over the fingertip.
 11. No gum chewing is allowed while working with patients in the clinical setting or in the classroom as this does not present a professional appearance.
 12. Students must wear a radiation monitoring device during their clinical practicum.

13. Operating room scrubs, that are the property of a clinical affiliate, are to be worn during an operating room clinical rotation only and may not be removed from the clinical site.
14. Discrete use of deodorant acceptable. Cologne is not acceptable.
 - Students must refrain from scented colognes, perfumes, aftershaves, body sprays and body lotions since these strong scents can be offensive to ill patients and may result in patients feeling nauseated or trigger allergic reactions of patients and/or staff.
 - Unscented or lightly scented deodorant is recommended.
15. Students are not permitted to have facial piercing jewelry in place during their clinical practicum, including, but not limited to jewelry for piercings of the nose, eyebrow, tongue, lip, chin, cheek, or multiple ear piercings, since these types of facial piercings may be upsetting to patients and their family.
16. Visible tattoos must be covered while the student is at their clinical site.
17. Students who are in violation of the dress code will meet with their Clinical Preceptor, Program Director, and/or Clinical Coordinator and a Student Conference Report form will be completed to document the reason for the conference and the expectations that the student is to meet. Violations in dress code will reflect in the clinical practicum course grade as point reductions in the category of professionalism.
18. Continued violations of three infractions of the dress code will result in the issue being referred to the Student Code of Conduct Administrator which could place the student on clinical probation.

Northern Essex Community College
Radiologic Technology Program

POLICY NUMBER: 12

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: June 2010, January 2017, March 2024

**CLINICAL MERITS
POLICY & PROCEDURE**

POLICY

Students may be awarded clinical merits when they exceed the expectations of a clinical performance, but clinical merits may not be used to increase the grade of a clinical competency evaluation, as those evaluations have an established grading scale.

Clinical merits will be added to the total point value for the Clinical Practicum grade. Clinical merits will be awarded at the discretion of the Clinical Preceptor, Clinical Coordinator and/or Program Director.

PROCEDURE

1. When a clinical merit is to be awarded the Clinical Preceptor /Clinical Coordinator/Program Director will complete the Student Conference Report Form indicating the specific reason(s) the student is earning the merit point(s).
2. One Clinical Merit point will be awarded for the following situations:
 - a. Case studies presented by a student at the clinical site for the benefit of the students and staff. The format and subject matter for a case study presentation must be approved by the Program Director, Clinical Coordinator and/or Clinical Preceptor in advance.
 - b. Written thank you notes or written commendations from patients, staff, supervisors, or physicians.
 - c. Verbal commendations from supervisors, physicians, technologists, or patients, made to the Clinical Preceptor about a specific student.
3. Additional merit points may be given when deemed appropriate by the Clinical Preceptor, Clinical Coordinator and Program Director.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 13

Created: January 2005

**Reviewed: February 2018, November 2018, February 2019, February 2020, January 2021, January 2022,
January 2023, March 2024**

Revised: February 2018, October 2018, November 2019, January 2023, March 2024

**CLINICAL DEMERITS
POLICY & PROCEDURE**

POLICY

Students may be assigned clinical demerits when they fail to meet the expectations and objectives of the clinical practicum or fail to follow the policies and procedures of the radiologic technology program or the policies and procedures and established protocols of the clinical site.

Clinical demerits are categorized as major or minor infractions as outlined in the policy below.

Clinical demerits may not be used to decrease the grade of a clinical competency evaluation, as those evaluations have an established grading scale.

Clinical demerits will be deducted from the student's final clinical practicum grade for that semester.

PROCEDURE

1. When a clinical demerit is to be assigned by the Clinical Preceptor, Clinical Coordinator or Program Director the Student Conference Report form or the Clinical Performance Assessment form is completed indicating the reason for the demerit(s). If the student fails to comply with policies and procedures and/or improve their behavior, then demerit points will result.
 - Demerit point(s) for an infraction cannot be deducted from a student's practicum grade if the issue for the demerits has not been documented using a Student Conference Report form and/or a Clinical Performance Assessment form.
2. Major infractions are any acts or behaviors that compromise patient, staff, or student safety. Also include any major violation of hospital, departmental or program policies and procedures and established protocols and will result in 5 demerit points for each incident from a student's final clinical practicum grade for that If

during the investigation it is found the incident occurred over multiple times, demerits will be assessed for each time a major infraction occurred.

3. The following are examples of major infractions and should not be considered an all-inclusive list:
 - Health Information Portability & Accountability Act (HIPAA) violations.
 - Failure to follow established radiation safety policies.
 - Failure to confirm patient identification and/or patient orders as required by the clinical site prior to performing a radiographic procedure.
 - Failing to provide a safe environment for the patient, their family members or other healthcare professionals.
 - Repeating radiographic images without direct supervision.
 - Releasing a patient without having images approved by a supervising technologist.
 - Performing radiographic images without direct supervision prior to full completion of the competency evaluation for that procedure with an established passing grade of 85% or higher.
 - Personal communication devices.
 - Falsification of records (Trajecsys records or hospital records).
 - Sharing username/passwords.

4. Minor infractions are any acts or behaviors including but not limited to: issues with dress code, lead markers, dosimetry badges, professional behavior, hospital computers, etc. and will result in the following point deductions:
 - First (1st) policy and procedure violation: 1 demerit point
 - Second (2nd) policy and procedure violation: 2 demerit points
 - Third (3rd) policy and procedure violation: 3 demerit points
 - If additional infractions occur resulting in the need for additional conferences additional demerit points will be deducted from a student's final clinical grade for that semester and a student may be placed on clinical probation.

5. If a student is suspended from their clinical site this will result in an additional 10 demerit point reduction for that student's clinical practicum grade if, after investigation of the suspension, the Program Director, in collaboration with the Student Code of Conduct Administrator, will determine if the suspension was for valid reasons.

6. Students have the right to implement the Program's Clinical Practicum Grievance Process (Policy & Procedure 31) and the College's Grievance Procedure to request reconsideration of awarded demerit points if they feel these demerits have been awarded unfairly.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 14

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: May 2006, May 2009, July 2013, July 2015, January 2017, February 2023, March 2024

**REPEATING OF UNSATISFACTORY RADIOGRAPHIC IMAGES
POLICY & PROCEDURE**

POLICY

Under no circumstances may a student repeat radiographic images without direct supervision. Students who repeat a radiographic image or images without direct supervision are in violation of the program's policy and are violating the Commonwealth of Massachusetts' regulations governing the licensing of Radiologic Technologists (see 105CMR 125.013, Student Clinical Education, www.mass.gov/dph/rcp/radia.htm) which states:

"Furthermore, if for any reason a student must repeat any radiographic exposure, a licensed Radiologic Technologist must directly supervise all activities associated with the repeat exposure. For the requirements of 105CMR 125.013, 'directly supervise' means the licensed Radiologic Technologist is present with the student, in the room, overseeing all activities associated with the repeat exposure."

Students who fail to follow this policy will be placed on clinical probation.

In the event a radiographic image produced by a student is unsatisfactory and must be repeated, the following steps will be followed as outlined in the procedure section below.

PROCEDURE

1. The student and the supervising technologist will review the unsatisfactory radiographic image to identify the unacceptable factors and needed corrections.
2. The student will then accurately identify to the supervising technologist how those corrections should be implemented.
 - If the student's correction plan is satisfactory continue to step 3.
 - If the student's correction plan is incorrect the qualified technologist will review step 1 with the student to help the student to determine the correct steps needed to correct the error.

- If student's correction plan is still unsatisfactory after review of step 1 the supervising technologist will identify the proper correction plan and continue to step 3.
3. The student implements the needed corrections, under the direct supervision of a qualified technologist. The qualified supervising technologist will place their lead marker on the image **with** the student's lead marker for the repeated image. The student will then make the exposure with the approval of the qualified supervising technologist.
 4. The supervising technologist initials and the number of repeated images is recorded in the repeat column of the Student's Daily Log for that procedure.
 5. Repeat competency evaluations should be completed within the same clinical practicum when possible.
 6. If the failed competency is a required competency evaluation for that clinical practicum, the student will receive a grade of incomplete for that clinical practicum until the competency evaluation is repeated.
 7. The student must return to the clinical site prior to the start of the next semester to complete the failed competency evaluation.
 8. Failure to meet all the competency requirements for a particular clinical practicum course will prevent the student from advancing in the program, since each clinical practicum course is a pre-requisite to the next one.
 9. In the event the repeat competency evaluation cannot be completed on an actual patient due to low patient volume a simulated competency evaluation may be completed with the prior approval of the Clinical Coordinator and/or Program Director.
 10. In the event it is not possible to repeat a failed competency evaluation that was not required for that clinical practicum within the same clinical practicum the student should repeat that failed competency evaluation within the first three (3) to four (4) weeks of the next clinical practicum.
 11. Students who fail a competency evaluation for a second time on the same procedure will be allowed one final attempt to successfully pass that competency evaluation.
 - The student must first complete a second remediation laboratory practice with the Clinical Coordinator and/or Clinical Preceptor and review the appropriate text or other available materials (slides, radiographs, handouts, video tapes, etc.).
 - The student is then re-assigned to the particular area in the radiology department where that procedure is performed in order to gain additional experience and practice pertinent to the competency.

12. Students who receive a second remediation lab for a second failed competency evaluation on the same procedure may repeat the competency evaluation for a third and final time with the Clinical Coordinator or Program Director. If the student's third attempt at competency evaluation is successful, the two initial failed competency evaluation grades and the third repeated competency evaluation grade will be included in the calculation of the student's final grade for that clinical practicum.
13. It is unlikely that students, who fail a competency evaluation on the same procedure for the third time, will be able to meet the requirements for passing that clinical practicum. The Clinical Coordinator, Program Director and Dean of Health Professions shall assess the overall academic and clinical status of the student and a decision shall be made as to the advisability of the student continuing in the program.
14. Students who fail a total of three competency evaluations for a clinical practicum course will meet with the Program Director and Clinical Coordinator and will be placed on clinical probation. The three failed competencies may not necessarily be the same procedures. Each student's issues that have resulted in the failed competency evaluations will be reviewed and used to determine the terms of the student's clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 15

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: May 2009, June 2010, December 2012, February 2017, February 2023

**CLINICAL PROBATION
POLICY & PROCEDURE**

POLICY

Clinical probation is designed to address ongoing concerns or problems with a student's performance and/or professional behavior while at the clinical practicum site.

Students are placed on clinical probation when serious or on-going violations of program, departmental or hospital policies and procedures occur.

PROCEDURE

1. When there are issues or concerns that have been addressed and documented using the Student Conference Report that remain unresolved (typically the issue/concern has been addressed three (3) times through the use of the Student Conference report) or when there are issues of a serious nature, a meeting will be held with the student the Clinical Coordinator and the Program Director, and in collaboration with the Student Code of Conduct Administrator, to place the student on clinical probation.
2. The student will be notified of their probationary status using the Student Conference Form.
3. The conference form will document program expectations for improvement and the time frame in which these expectations must be met.
4. A student placed on probation for serious or repetitive violations of program, departmental or hospital policies and procedures will have his/her probationary status reviewed at the end of the stated time frame and a determination will be made at that time as to whether the student's probationary terms have been met and probation will be ended.
5. If the student does not meet the required probationary expectations for improvement within the designated time frame, program faculty will meet with the Dean of Health Professions to review the probationary status of the student. At this meeting it will be determined whether:
 - The probationary status will be extended (if so, this will occur with a definitive end date that is before the end of the semester). If identified improvements are not made by this definitive end date, the

student will be dismissed from the program at that time. If this occurs a grade of "F" will be assigned for that clinical practicum course.

or

- The student is dismissed from the program. If this occurs a grade of "F" will be assigned for the clinical practicum course.

6. NECC students have the right to implement the Program's Clinical Practicum Grievance Process and the Student Grievance Procedure as outlined in the NECC Student Handbook, if they feel they have been treated unfairly by the college and/or any representatives of the college.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 16

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: May 2009, June 2010, December 2012, July 2013, February 2017, February 2023

**CLINICAL SUSPENSION
POLICY & PROCEDURE**

POLICY

If any concerns should arise relating to the conduct, behavior or manner of a NECC Radiologic Technology student or in a situation where the student appears to be a danger to him/herself, to other staff or to the patients (i.e.: student appears intoxicated, exhibits violent behavior, violates program or hospital policies), the Clinical Preceptor reserves the right to immediately suspend a student from the clinical practicum site, pending further investigation of the situation by the Program Director and Clinical Coordinator as outlined in the procedures below:

PROCEDURE

1. The reason for the student's suspension must be documented on Conference Report form and entered into Trajecsys. This form should be signed by the student. Lack of a signature by the student does not negate the implementation of the clinical suspension.
2. In the event a student is suspended from a clinical site because the student appears to be a danger to themselves, to other staff, or to the patients (i.e.: student appears intoxicated or exhibits violent behavior), or when the student is acting in an inappropriate manner, violating program or hospital policies, the Clinical Preceptor will discuss the situation with the Program Director, in collaboration with the Clinical Coordinator, other pertinent clinical staff members and supervisory personnel, and the Student Code of Conduct Administrator.
 - a. Depending on the circumstances of the suspension appropriate facility security officers and/or law enforcement personnel may need to be contacted to help assist with the situation.
3. The Dean of Health Professions, the Radiologic Technology Program Director, the Clinical Coordinator, the Clinical Preceptor and in collaboration with the Student Conduct Administrator will review the situation, which resulted in the clinical suspension, and a decision will be made regarding any future action that may be taken, including a student's dismissal from the program.
4. If at the conclusion of the investigation of the situation that resulted in the student's suspension from the clinical site, it's determined it is in the best interest of the student's education to remove the

student from the site (i.e., there is not a good “fit” between the student and the agency’s culture or personnel). The College will make a good faith effort to place the student at another clinical site without disrupting their education.

5. If at the conclusion of the investigation it is determined that the student’s suspension from the site was for valid reasons, or in the event of a suspension for valid reasons where the clinical site refuses to allow the student to return to the site following a clinical suspension, the Program and the College are under no obligation to assign that student to a different clinical site. The student will receive a grade of “F” for the clinical practicum and will be dismissed from the program.
6. The Clinical Practicum courses are co-requisite courses with the other radiologic technology courses offered during each semester, therefore, a student who is not enrolled in the clinical practicum course will be dismissed from or required to withdraw from the Radiologic Technology Program.
7. Dismissal from a clinical practicum course before a student has completed the required clinical course objectives will result in a student receiving an “F” grade. Infractions which occur even after all objectives have been satisfied can result in a grade of “F”, as stated in #5 above.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 17

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: May 2006, September 2006, May 2008, May 2009, June 2010, July 2013, January 2016, January 2017, March 2021, February 2023

**STUDENT DAILY EXAM LOG
POLICY & PROCEDURE**

POLICY

On a daily basis, students are responsible for accurately entering the procedures they observe, perform, or assist a technologist with, using the Daily Logsheet in the Trajecsys Report System™. In addition, students must document any clinical laboratory sessions or practice simulations on their Daily Log.

The purpose of a daily log sheet is to document that students are performing an adequate number and variety of exams, to establish and maintain competency, and those students are being provided with the appropriate level of supervision (i.e., direct or indirect supervision).

PROCEDURE

1. The student's Daily Log sheet is maintained in the Trajecsys Report System™. Falsification of records in Trajecsys records will result in five (5) demerits for each occurrence.
2. Upon program completion a student's clinical records are transferred to the Program Director at Northern Essex Community College.
3. The student's daily logs are regularly reviewed by the Clinical Preceptor, Clinical Coordinator and/or the Program Director to ensure that students are performing an adequate number and types of procedures.
4. If a student fails to accurately complete a daily log, demerits will reflect in their clinical grade in the section marked Student Documentation and a Student Conference Report form will be completed indicating the reason for the point(s) deduction.
5. The daily log sheet should be properly completed by the student including, but not limited to the following information:

- Procedure being performed.
- Level of Performance: For each procedure, a student checks off the appropriate column indicating their level of performance. Columns are labeled “O” for when the student observed the procedure, or “A” for when the student assisted the technologist with the procedure, or “P” for when the student performed the procedure with direct or indirect supervision. Explanations for Level of Performance are defined as below:

Explanation of Level of Performance for Daily Log Sheets

O/Observed

Students check this level of performance when they are not actively participating in a radiographic procedure and are only observing the actions of the technologist performing the procedure.

When a student is observing a procedure, they are being directly supervised by the qualified technologist performing the procedure.

Processing images is simply a task the student completes as a functioning team member of the radiology department. This may be considered part of observing a procedure only if the student was in the procedure room observing the radiographer performing the procedure. Simply processing images is not considered actively participating and assisting in a procedure, it is merely the student functioning as a team member of the radiology department.

A/Assisted the Technologist with the Procedure

Students check this level of performance when they are actively participating in a radiographic study and are assisting the technologist. The technologist is performing the majority of the steps in the procedure. The student may be assisting the technologist by performing any of the following steps:

- Instructing a patient in how to properly change into a hospital gown for a radiographic procedure.
- Bringing the patient into the x-ray procedure room and instructing the patient where to lie or sit for the procedure.
- Explaining the procedure/exam to the patient.
- Helping to position the patient for the procedure.
- Helping to position the radiographic equipment including the x-ray tube, the bucky tray, the image receptor and other ancillary equipment for the procedure.

When assisting with a procedure student are being directly supervised by the qualified technologist performing the procedure.

Note: When students simply process images without actively participating in the radiographic procedure, they are not assisting the technologist with the procedure. Students should not identify image processing as assisting the technologist with the procedure on their daily log sheet when this is their only level of participation in a procedure. Processing images is simply the student functioning as a team member of the radiology department.

P/Performed with Direct or Indirect Supervision

Students identify this level of performance under the following circumstances:

1. Performed with **Direct** Supervision: Prior to a student successfully completing a competency procedure he/she must be directly supervised while performing radiographic procedures or when repeating unsatisfactory radiographic images.
 - a. Direct supervision is defined as a qualified technologist in the x-ray procedure room overseeing all activities associated with that radiographic procedure.
 - b. Once a student begins to feel confident and is performing the majority of the steps in a procedure, they can indicate on their log sheet that they have performed the procedure with direct supervision. As compared to when the technologist is performing the majority of the steps in the procedure, and the student is assisting the technologist.

2. Performed with **Indirect** Supervision: After a student has achieved competency in a particular procedure, the student may then perform that exam with indirect supervision, unless an unsatisfactory image must be repeated or it is a mobile radiographic or fluoroscopic procedure, then a student must be directly supervised.
 - a. Indirect supervision is defined as a qualified technologist being immediately available, in the immediate adjacent area to where the procedure is being performed, to assist the student in the performance of a procedure when needed, regardless of the student's achievement or competency level.
 - b. Since a qualified technologist must be in the immediate adjacent area to help students when needed, students may not go to the operating room (OR) or mobile procedures by themselves.

- In the event a student must repeat a radiographic image, they must be directly supervised by a qualified technologist and the number of repeated radiographic images documented in Trajecsys.

6. Students must log their clinical laboratory sessions and any practice simulations in the Daily Log in the Trajecsys Report System™ as well as actual patient procedures by the next clinical day.

7. If a student fails to accurately record information in the Daily Logsheet in the Trajecsys Report System™ the Program Director and/or Clinical Coordinator will meet with the student and a Student Conference Report form will be completed to document the reason for the conference and the expectations that the student is to meet.

8. Violations in this policy will reflect in the student's clinical practicum course grade as point reductions in the category of clinical documentation. Additional deductions with demerits can be assessed if all points have been reduced to zero in the Professional Behavior section.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 18

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2007, May 2008, May 2009, June 2010, July 2013, January 2017, January 2023

**CLINICAL SIGN-IN/OUT
POLICY & PROCEDURES**

POLICY

Upon arrival at the clinical site, students are required to sign-in before beginning their clinical practicum day. Upon completion of their clinical practicum day, students are required to sign out before leaving the clinical site. Daily attendance is recorded in the Trajecsys Report System™.

Clinical Preceptors are responsible for ensuring that any early release from the clinical practicum is recorded on in the Trajecsys Report System™.

PROCEDURE

The student must sign in and out of their clinical site on a daily basis, using the Trajecsys Report System™. Students are required to sign-in on hospital computers before beginning clinical and sign-out on hospital computers before leaving their clinical site.

1. Any student who does not follow the established daily sign in and out procedure for their clinical practicum site will receive demerits for failure to follow policy regarding clinical sign-in/out procedures on the Clinical Practicum Grade Report form, (**Form CP 1-5-A**) in the category of Student Documentation.
2. Students caught falsifying their start or departure time will meet with program officials to discuss their inappropriate and unethical behavior. A Student Conference form will be completed indicating the reasons for the conference. In addition, the student will be placed on clinical probation, clinical suspension or dismissed from the program for this unethical behavior falsifying student documentation.
 - An investigation will determine the disciplinary actions for the student(s).
 - The student will also meet with the NECC Student Code of Conduct Officer.
 - Each case is unique, varying with the situation and individual(s) involved. If more than one student is involved the outcome with the disciplinary actions many vary.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 19

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2006, May 2008, June 2010, May 2011, July 2013, February 2017, February 2019

**PERSONAL COMMUNICATION DEVICES AND HOSPITAL COMPUTERS
POLICY & PROCEDURE**

POLICY

The use of cellular phones, smart watches, sport watches, and fitness trackers is prohibited in clinical practicum facilities. Cellular phones should be stored with the student's personal belongings and are never allowed in patient care areas. Student's may use their cellular phone in an emergency situation in an appropriate area at their clinical site, only if during their clinical practicum orientation the Clinical Preceptor indicates this is permissible. Smart watches, sport watches, and fitness trackers may not be accessed in clinical.

Students are not permitted to make or receive personal phone calls while at their clinical practicum site, except for in emergency situation. In an emergency situation students will be allowed to utilize the phones at their clinical practicum site after receiving permission from the Clinical Preceptor or other appropriate supervisory personnel.

Students must follow the policies of their clinical sites regarding the use of hospital computers. Most sites prohibit their staff and students from using hospital computers to access the internet or for personal use.

PROCEDURE

1. Students are to use the phones and computers at the clinical practicum site only for clinical business following the established policies and procedures and HIPAA regulations of their clinical site.
2. Students are not to use the phones at their clinical practicum site to make or receive personal phone calls.
3. In the event of an emergency situation the student may use the clinical practicum site's phones, with the permission of the Clinical Preceptor or designee.
 - The student should discuss the emergency situation with the Clinical Preceptor or designee, prior to making an emergency phone call.
4. Students are not to use the computers at their clinical site for their own personal use, unless this is permitted by departmental policies and procedures, or the student has asked for and received special permission to do so from their Clinical Preceptor or supervisor.

5. Inappropriate use of the clinical practicum site's phones or computers will result in the Clinical Preceptor, Program Director, and/or Clinical Coordinator meeting with the student to discuss the issues or concerns regarding the student's behavior. This meeting will be documented using the Student Conference Report Form.
6. Students who violate the policy on Personal Communication Devices and Hospital Computers will receive clinical demerits in the Professional Behavior section of their Clinical Practicum Grade Report form (**Forms: CP1-A, CP2-A, CP3-A, CP4-A & CP5-A**).
7. Continued violations of three infractions of this policy will result in the student being placed on clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 20

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2006, May 2008, January 2017

**CLINICAL INCIDENT REPORT
POLICY & PROCEDURE**

POLICY

In the event of an incident at a clinical education facility that concerns a student and/or patient, a formal incident report must be completed and filed at the clinical practicum site, according to the policies and procedures of that facility.

The NECC Radiologic Technology Program Director and/or Clinical Coordinator must also be promptly informed of the incident via phone call and a NECC Health Professions Division Incident Report form completed in Trajecsys.

In the event a NECC Radiologic Technology Student has been exposed to a patient with active Tuberculosis (TB) the NECC Health Professions Division Incident Report form should be completed in Trajecsys by the Clinical Preceptor. The preceptor will contact program faculty to discuss the incident.

PROCEDURE

1. Students are expected to read, be familiar with, and follow the policies and procedures for their clinical practicum sites, relating to incident reports.
2. An incident is defined as those occurrences or situations that are not within normal standards of operation. An incident may involve patients, staff, visitors, or students.
3. In the case of an incident involving a student the Clinical Preceptor of the clinical practicum site should be notified. In the absence of the Clinical Preceptor, the appropriate departmental supervisory personnel should be notified.
4. The Clinical Preceptor or supervisor will complete the required incident report documentation for that facility and for NECC.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 21

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2009, July 2013, January 2017, September 2019, January 2021, March 2024

**RADIATION PROTECTION/RADIATION SAFETY
POLICY & PROCEDURE**

POLICY

The NECC Radiologic Technology student is required to minimize radiation dose to patients, self, health care personnel and all others during all radiographic procedures following the ALARA (As Low As Reasonably Achievable) principle.

The NECC Radiologic Technology student is expected to be familiar with and apply the three key principles of radiation protection of time, distance and follow department policies/guidelines with shielding during their clinical practicum courses.

PROCEDURE

1. The **ALARA** (As Low As Reasonably Achievable) principle must be utilized in all radiographic procedures. This requires the proper use of shielding and collimation according to radiation protection regulations and recommendations, as well as, accurately setting proper technical factors and proper patient positioning.
2. Radiologic Technology students are required to follow department policies/guidelines with shielding for all patients, regardless of patient's age or sex.
3. All female patients of childbearing age (ages 12-55; or the childbearing age as defined by the student's clinical practicum site) will be questioned regarding possible pregnancy. If the patient indicates there is a possibility of pregnancy, the student should follow the clinical practicum sites established policies and procedures before beginning the procedure.
4. In the interest of radiation protection and under normal routine circumstances students are not permitted to hold patients for radiographic or fluoroscopic procedures. At no time will a student hold an image receptor for any radiographic procedure.

5. Radiologic Technology students are required to wear radiation monitoring devices while at their clinical internship site as outlined under Policy and Procedure 10, Radiation Monitoring Device.
6. Radiography students must, at all times, be under the supervision of a qualified technologist, who is a certified technologist with the American Registry of Radiologic Technologists and for those clinical sites located in Massachusetts, licensed by the Commonwealth of Massachusetts Radiation Control Program in Radiography.
7. A student must have **direct supervision** while observing, practicing, or performing an exam in which the student has not yet achieved competency.
8. **Direct Supervision** is defined as a qualified technologist in the room overseeing all activities associated with that radiographic procedure including:
 - a. The qualified technologist reviews the procedure in relation to the student's achievement.
 - b. The qualified technologist evaluates the condition of the patient in relation to the student's knowledge.
 - c. The qualified technologist is present during the conduct of the procedure. The qualified technologist will be next to the student and the patient. The qualified technologist will be next to the wall bucky, x-ray table, stretcher, or portable, and not behind a lead wall or lead window.
 - d. The qualified technologist reviews and approves the procedure.
9. After a student has achieved competency in a particular procedure, then the student may perform that procedure with **indirect supervision** with the exception of when a student needs to repeat any unsatisfactory radiographic images, then the student is required to have **direct supervision**.
10. **Indirect Supervision** is defined as a qualified radiographer immediately available to assist a student, regardless of the level of the student's achievement or competency. **Immediately available** is interpreted as the presence of a qualified technologist adjacent to the room or location where a radiographic procedure is being performed.
11. In order to maximize radiation protection, all unsatisfactory radiographs performed by a student radiographer must be repeated under the **direct supervision** of a qualified technologist regardless of the student's level of competency or experience.
12. The Commonwealth of Massachusetts' regulations governing the licensing of Radiologic Technologists (105 CMR 125.013, Student Clinical Education, www.mass.gov/dph/rcp/radia.htm) states that:

“Furthermore, if for any reason a student must repeat any radiographic exposure, a licensed Radiologic Technologist must directly supervise all activities associated with the repeat exposure. For the requirements of 105 CMR 125.013, ‘directly supervise’ means that the licensed Radiologic Technologist is present with the student, in the room, overseeing all activities associated with the repeat exposure.”

13. Students who are in violation of the policy and procedures for Radiation Protection/Radiation Safety will meet with their Clinical Preceptor, Program Director, and/or Clinical Coordinator and a Student Conference Report form (**Form G**) will be completed to document the reason for the conference and the expectations that the student is to meet.
14. Violations in this policy will reflect in the student's clinical practicum course grade as point reductions in the category of professionalism.
15. Repeat violations or infractions of policies related to radiation safety policy or patient safety will result in the student being placed on clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 22

Created: January 2005

Reviewed: February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: June 2006, May 2007, May 2008, May 2009, March 2015, January 2016, March 2016, February 2023

**RADIATION MONITORING DEVICE
POLICY & PROCEDURE**

POLICY

Since it is a legal requirement that all persons working in a radiation area wear radiation monitors, all students must wear a radiation monitoring device while at their clinical practicum site.

The Program's Radiation Safety Officer, Program Director, monitors the student's bi-monthly dosimetry reports to ensure that no student has the potential to reach their annual dose limitation of 5000 mrem.

PROCEDURE

1. Radiation monitoring devices (Landauer OSL dosimeter) are assigned to students by the college and are used according to state and federal regulations.
2. Students receive instruction from the college regarding the proper use and handling of the radiation monitoring device.
3. Students are responsible for ensuring the proper use and handling of their radiation monitoring device.
4. Students must always wear their radiation monitoring device while at their clinical practicum site (chest badge) or on campus (collar badge) with procedures or exposure labs.
5. The Clinical Coordinator and Program Director are responsible for reviewing and monitoring student's radiation monitoring device readings, as the reports are issued. These reports become part of the permanent radiation safety records for the college. A hard copy is in the Program Director's office.
6. If a student's bi-monthly dosimetry reading exceeds 40mrem for their deep dose the Program Director and Clinical Coordinator will meet with the student to discuss and review the student's radiation safety and protection practices.
7. Clinical Coordinator is responsible for logging the student's the student's bimonthly dose on the Radiation Monitoring Dose Report form in the Trajecsys Report System™.

8. Students are responsible for reviewing and electronically signing their reports in Trajecsys within a week of the Clinical Coordinator notifying the students reports are ready to be reviewed. Students may request a copy of their radiation exposure record at any time.
9. Students are responsible for changing the radiation monitoring device according to the scheduled maintained by the program faculty, to ensure accurate readings.
10. Students who report to their clinical practicum site without their radiation monitoring device will be asked by their Clinical Preceptor to leave and retrieve their monitoring device. Students who do not have their badge for campus labs will be sent home.
11. Time missed from the clinical site, due to retrieval of a radiation monitoring device will be made up.
 - Make-up time will be arranged between the Clinical Preceptor and the student.
 - The Clinical Preceptor will complete a Student Conference Report form indicating the reason that the student was sent home from the clinical site.
12. If a radiation monitoring device is lost or damaged the student must notify the Program Director immediately so that a replacement monitor can be ordered.
 - A replacement radiation monitoring device can be ordered for expedited delivery to the Program Director to help ensure that the student does not miss too much clinical practicum time.
 - There is an additional charge of \$188.00 for the badge and overnight delivery that the student will be responsible for paying.
 - A student may choose standard mail for delivery of the badge with a cost of \$64.00 that the student will be responsible for paying.
 - Until the radiation monitoring device is replaced, a student will not be allowed to perform radiographic procedures in which the student would be subject to scattered radiation: i.e., fluoroscopic exams, portable procedures, operating room, or c-arm procedures, etc.
 - When a monitoring device has been lost or damaged, an average of the student's previous three (3) dosimetry reports will be used to determine a reading for that missing badge's time frame. In the event a student does not have 3 previous badge reports, the previous 2 badge reports will be averaged to determine a reading for that missing badge's time frame.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 23

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2005, May 2006, May 2008, May 2009, December 2012, July 2013, May 2016, January 2017, January 2023

**CLINICAL PRACTICUM GRADING
POLICIES AND PROCEDURES**

POLICY

The clinical practicum grading policy which follows will apply to the following clinical practicum courses: RTA191: Clinical Practicum I, RTA192: Clinical Practicum II, RTA292: Clinical Practicum III Summer, RTA294: Clinical Practicum IV and RTA295: Clinical Practicum V.

Clinical practicum grades will be based on the student meeting the specific goals and objectives for that clinical practicum, including but not limited to: successfully completing a specific number of clinical competency evaluations; the student's overall clinical performance assessment; evaluation of a student's professional behavior as reflected by meeting established standards for that clinical practicum in the areas of attendance, punctuality, clinical documentation, and continuing education credits.

PROCEDURES

1. The grading system for the clinical practicum is a merit/demerit system. Students begin the practicum with the maximum point value in each category, and only decrease their point value by not meeting the stated objectives.
2. The Clinical Practicum grade is determined by the total number of points a student receives from the categories listed below, based on the student's cognitive, affective, and psychomotor domain skills and when all clinical objectives have been met:

- Clinical Competency Evaluations Maximum: 55 points
- Clinical Performance Assessment Maximum: 20 points
- Professional Behavior (total of 15 points)
 1. Punctuality
 2. Clinical Documentation
 3. Continuing Education Credits Maximum: 15 points
- Written Assessment Maximum: 10 points

Total Point Value*: 100 points

- *Additional Merit or Demerit Points may be applied.

3. Merits and/or demerits will be given at the discretion of the Clinical Preceptor, Clinical Coordinator(s) and/or Program Director and will be documented using the Student Conference Report Form.

- Note: See *Policy # 12, Clinical Merits and Policy #13, Clinical Demerits* for further information for additional information regarding merits/demerits.

4. Clinical evaluation includes assessment of a student's cognitive, affective, and psychomotor domains and evaluates a student's problem-solving and critical thinking skills when completing the required clinical competencies evaluations and when caring for patients.

5. Student clinical performance assessment will occur twice in a semester, typically at mid-semester and at the end of the semester. Clinical performance assessment will occur upon completion of a student's clinical rotation.

- The student completes a self-evaluation open-ended questions of their performance in Trajecsys.
- The Clinical Preceptor will elicit information on a student's performance from the staff technologists who provided the student with direct or indirect supervision.
- The Clinical Preceptor will review the performance assessment with each student providing feedback and suggestions for improvement.
- Each performance assessment form must be dated and signed by the student and the Clinical Preceptor.

6. The grading scale for the radiographic practicum is as follows:

<u>Total points</u>	<u>GRADE</u>	<u>QUALITY POINTS</u>
93-100 points	A	4.0
90-92 points	A-	3.7
87-89 points	B+	3.3
83-86 points	B	3.0
80-82 points	B-	2.7
77-79 points	C+	2.3
73-76 points	C	2.0

7. A grade below 73 points is a failing grade for a clinical practicum course.

8. The Clinical Practicum Grade Report form for each Clinical Practicum, (**Forms CP1-A, CP2-A, CP3-A, CP4-A, CP5-A**) is found in the Clinical Practicum Forms section of the Student Handbook.

9. In the event a student does not satisfy the required course objectives and complete all required competencies by the end of a semester the following will occur:

- That student may receive a grade of incomplete for that clinical practicum course.
- The student will then be assigned to a clinical practicum site prior to the start of the next semester, to provide the student with additional opportunities and experiences to meet the required course objectives.

- The assigning of a clinical practicum site prior to the start of the next semester is totally based on clinical site availability and the scheduled assignments of other pre-existing students.
- Prior to the student beginning this interim make-up time, the Clinical Coordinator and the Clinical Preceptor will set the parameters of time available for the student to make up the incomplete.

Or

- When it is determined by the Clinical Preceptor/Clinical Coordinator that a student has not completed all competency requirements due to low patient volume the Clinical Coordinator or Program Director may approve simulated competency evaluations as outlined in Policy 24.

10. When a student receives a grade of incomplete for a clinical practicum course and the student fails to complete the required competency evaluations and course objectives prior to the start of the next semester, the student cannot progress in the program. The student will receive a grade of "F" in the clinical course due to his/her inability to complete the requirements prior to the start of the upcoming semester.
11. If a students' behavior, professionalism, ethics, safety violations or other adverse actions cause the student to be removed from the clinical site, or the program, a grade of "F" will be recorded for the student in the clinical course.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 24

Created: January 2005

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Revised: May 2005, May 2006, May 2008, May 2009, June 2010, May 2011, July 2013, March 2016, January 2017

**CLINICAL PRACTICUM OBJECTIVES
POLICY & PROCEDURE**

POLICY

Students must complete the clinical practicum objectives for each clinical practicum course. In the event that a student's clinical practicum performance is unsatisfactory the Clinical Preceptor, Clinical Coordinator and/or the Program Director will meet with the student to discuss the area(s) of concern. This meeting will be documented using the Student Conference Report form and/or the Clinical Performance Assessment Form.

Each clinical practicum requires that students successfully complete a specific number of clinical competency evaluations, which are outlined in the clinical course syllabus. Failure to complete these competency requirements means the student has failed to meet the clinical practicum objectives. Students who fail to complete practicum objectives will receive a grade of incomplete for that practicum and/or may be placed on clinical probation.

Student must successfully complete the missing clinical practicum objectives prior to the start of the next clinical practicum course. Ultimately, failure to complete the clinical practicum objectives will result in a failing grade for that practicum course. Since the clinical practicum courses and didactic courses for each semester are co-requisites to each other, and since each clinical practicum course lists the previous clinical practicum course as a prerequisite, those students who fail a clinical practicum course cannot progress in the program.

PROCEDURE

1. At the start of each clinical practicum rotation, the Clinical Preceptor and/or program faculty will review the clinical practicum objectives, for that rotation, with the students.
2. Each practicum rotation contains a specific number and categories of competency evaluations that the student must complete.

3. The required competencies for each clinical practicum rotation (CP1-CP5) are outlined in each course syllabus (RTA191: Clinical Practicum I, RTA192: Clinical Practicum II, RTA292: Clinical Practicum III Summer, RTA294: Clinical Practicum IV, RTA295: Clinical Practicum V).
4. Clinical competency evaluations are to be performed on actual patients, whenever possible. The program strongly believes that students benefit more from competency evaluations completed on actual patient's than on simulated competency evaluations.
5. The American Registry of Radiologic Technologists (ARRT) mandates a minimum of 36 mandatory competency evaluations must be successfully performed and passed and up to ten (10) of these mandatory competency evaluations may be simulated if demonstration on patients is not feasible. The ARRT states that a minimum of 15 elective competency evaluations must be successfully completed from a list of 34 elective procedures as outlined in the American Registry of Radiologic Technologists' didactic and clinical competency requirements effective January 2021. Students must select one of the 15 elective procedure from the head section and must select two of the elective procedures from the fluoroscopy studies: one of which must be either an upper GI or contrast enema.
6. To ensure compliance with the ARRT competency requirements the Program allows simulated competency evaluations only with prior approval of the Clinical Coordinator and/or Program Director.
7. Simulated evaluations are performed using a technologist, another student, or other staff members as volunteers to act the role of the patient. Phantoms may be used in a simulated setting when appropriate.
8. Simulated evaluations require a student to perform the entire radiographic procedure short of taking the actual radiographic exposure when a student or a technologist or other staff member is acting the role of the patient.
 - Students perform film critique and anatomy review on teaching file radiographic images.
9. If a student performs an initial simulated evaluation for a mandatory competency the student must be re-evaluated for that simulated competency on an actual patient in the following semester if possible.
 - In the event that it is impossible to perform a re-evaluation on an actual patient, due to issues of low patient volumes for a particular procedure, that student is then re-evaluated on the procedure utilizing a simulated setting again.
10. Once competency has been established the student is allowed to perform that procedure with indirect supervision (Policy 6, Supervision of Students) unless a repeat radiographic image is needed. Then the student must be directly supervised when repeating an unsatisfactory radiographic image.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 25

Created: January 2005

Reviewed: February 2018, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: January 2021, February 2023, March 2024

**CLINICAL COMPETENCY EVALUATIONS
POLICY AND PROCEDURE**

POLICY

Students are **directly supervised** by qualified technologists in the clinical setting until they successfully complete a competency evaluation for a particular procedure with a minimum passing grade of 85%.

Once competency has been determined, a student is allowed to perform that procedure with indirect supervision (Policy 6: Supervision of Students), with the exception of an unsatisfactory radiographic image and mobile radiographic or mobile fluoroscopic procedures when a student must be **directly supervised**.

The following steps outline the procedure for a student to follow to complete a competency evaluation.

PROCEDURE

1. The Clinical Preceptor will conduct a laboratory session for each new radiographic procedure introduced in each clinical practicum course, as outlined in the course syllabus.
 - a. Students will indicate the date the lab is completed in the Merrill's Pocket Guide to Radiography, Eugene D. Frank, Bruce W. Long, Tammy Curtis, and Barbara J. Smith; the student knows the departmental requirements and are able to complete each task listed for the given procedure. The pocket guide book will be kept with the student in clinical in their pocket.
 - b. Students will also enter the completion of the lab on the daily log in Trajecsyst.
 - c. Students will record a student lab completion in Trajecsyst.
 - d. The Clinical Preceptor will validate the student lab completion in Trajecsyst.

2. The student must complete a minimum of one repetition of a particular radiographic procedure under direct supervision. A student's clinical laboratory demonstration of a procedure may count as their first repetition if the student performs that procedure at an acceptable level. The student may then request that they be evaluated on that procedure the next time it becomes available.

3. In most situations, once a student has performed two to four repetitions of a particular procedure, the student is ready to be evaluated on that procedure.
 - a. Once four repetitions of the same procedure have been completed, under direct supervision, the Clinical Preceptor may require the student to attempt a competency evaluation.
 - b. If a student indicates that they do not feel they are ready to be evaluated on that procedure after four repetitions, a clinical laboratory remediation session will be scheduled to ensure that the student has acquired the necessary skills to successfully complete that competency evaluation.
 - c. The Clinical Laboratory Remediation form will be completed by the Clinical Preceptor in the Trajecsys Report System™ documenting this remediation work.

4. In order to complete a competency evaluation for a particular procedure the student must follow the steps outlined below:
 - a. The student must declare their intent to be evaluated by completing the Request for Competency Evaluation form and submitting this form to the supervising technologist prior to performing the procedure (i.e., a student cannot perform a procedure and retrospectively say they wish to count that as a competency evaluation).

 - b. The student must ask the supervising technologist or Clinical Preceptor to observe and document their performance of the procedure.

 - c. The supervising technologist or Clinical Preceptor will evaluate the patient's condition in relation to the student's knowledge to determine if a competency evaluation should be attempted. If the supervising technologist or Clinical Preceptor determine that a patient's condition is beyond the ability of the student, they will indicate to the student that a competency evaluation should not be attempted for that patient.

 - d. The supervising technologist or Clinical Preceptor will observe the student's performance, intervening if needed, to ensure the patient's safety and care are being protected.

 - e. The student must record any alternate positioning or exposure methods utilized for the competency on the Request for Competency Evaluation form.

 - f. The student must document any repeated projections on the Request for Competency Evaluation form.

 - g. The students must submit all images for competency evaluation, if allowed to keep all images by department protocols.

 - h. The supervising technologist or Clinical Preceptor must sign and make any needed comments on the student's Request for Competency Evaluation form to indicate reasons that students received "no" on any of the evaluation criteria.

i. The completed Request for Competency Evaluation form is returned to the Clinical Preceptor or supervising technologist and then is placed in the NECC black locked box located in each department, in a manner that maintains student confidentiality.

5. The Clinical Preceptor or Clinical Coordinator will grade the competency evaluation using the criteria located in Merrill's Atlas of Radiographic Positioning & Procedures, Eugene D. Frank, Bruce W. Long, Tammy Curtis, and Barbara J. Smith along with department protocols and criteria. Specific patient identifiers such as patient name and/or medical record numbers will not be recorded in pocket guide or on the daily logs. Technical factors vary between clinical sites but should be set to meet optimal exposure values for that site and should not result in exposure values that are at the extreme ends of the acceptable range.

Competency evaluation grading Yes or No are outlined below:

- **Technologist**

1. Student prepared the radiographic room before positioning the patient.
2. Student set an average technique before positioning the patient.
3. Student properly verify the patient ID, procedure, accession number and MD order.
4. Student properly provide general patient care.
5. Student uses the correct SID and IR size/type.
6. Student provided appropriate shielding for the patient per department policy and verified pregnancy status.
7. Student properly completed the exam (discharge patient, process, and archive images).
8. Student performed repeat images. (Please provide explanation on back of form).
9. Student was able to execute any needed repeat images without assistance. (If no, please provide explanation on back of form).

- **Student**

1. Enter the techniques used if AEC identify the cells used.
2. Enter Initial S Value/EI.

- **Clinical Preceptor**

1. Complete Techniques/Exposure Values Recorded.
2. All anatomy seen on image.
3. Correct patient position.
4. Correct alignment of CR/IR.
5. Appropriate marker.
6. Image displays appropriate exposure index.
7. Image displays appropriate collimation/shielding.
8. Student is able to identify factors of image quality.
9. Student is able to ID required anatomy on image.

Competency Scoring

Passing score = **85%** or higher

Automatic Score = 75% if No is recorded for:

- Student properly verified the patient ID, procedure, accession number, and MD order?
- Student provided appropriate shielding for patient and self and verified pregnancy status?
- Technologist Intervention
- Appropriate Marker
- 50% or more of the exam repeated
- **Complete Techniques & Exposure Indicators Documented**

Number of times “No” is recorded

Use Table A

Automatic 75% for any of the bullets above

plus additional, deductions for “No’s” on competency form. Use Table B

Table A

0.	100%
1.	98%
2.	95%
3.	93%
4.	90%
5.	88%
6.	85%
7.	83%
8.	80%
9.	78%
10.	75%
11.	73%
12.	70%
13. Or more	60%

Table B

Automatic Score	75%
1	73%
2	70%
3	68%
4	65%
5	63%
6	60%
7	58%
8	55%
9	53%
10	50%
11	48%
12	45%
13 Or more	35%

Northern Essex Community College
Radiologic Technology Program

POLICY NUMBER: 26

Created: January 2005

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FAILED CLINICAL COMPETENCY EVALUATION

POLICY & PROCEDURE

POLICY

During each clinical practicum rotation, the student must demonstrate their competency for specific radiographic procedures with a pass rate of 85% or higher. When a student performs a competency evaluation with less than an 85% accuracy rate the student is required to follow the system of failure as outlined below.

PROCEDURE

1. At the start of each radiographic practicum the Clinical Preceptor and/or Program faculty reviews with the students the objectives and the competency evaluations that must be successfully passed for that practicum.
2. When a student feels they are ready to complete the competency evaluation for a specific exam the following steps are followed in Policy and Procedure 13: Procedure for Competency Evaluations.
3. Students who fail to receive a grade of 85% or higher for a competency evaluation will be required to complete remediation work for that procedure.
 - The student will initially review the procedure using appropriate text and/or other available materials (slides, radiographs, handouts, video tapes, etc.). In some cases, this review will occur during the competency evaluation.
 - When additional review and practice are needed the student will complete a remediation lab with the Clinical Preceptor and/or Clinical Coordinator.
 - Documentation of remediation is completed by the Clinical Preceptor or Clinical Coordinator in the Trajecsys Report System on the clinical laboratory remediation form.
 - When needed the student will be re-assigned to the particular area in the radiology department where that procedure is performed to gain additional experience and practice pertinent to that competency.

4. Students who have received remediation for a failed competency evaluation will repeat the competency evaluation for a second time. If the student's second attempt at competency evaluation is successful, the initial failed competency evaluation grade and the repeated competency evaluation grade will be included in the calculation of the student's final grade for that clinical practicum.
5. Repeat competency evaluations should be completed within the same clinical practicum when possible.
 - If the failed competency is a required competency evaluation for that clinical practicum the student will receive a grade of incomplete for that clinical practicum until the competency evaluation is repeated.
 - The student must return to the clinical site prior to the start of the next semester to complete the failed competency evaluation.
 - Failure to meet all the competency requirements for a particular clinical practicum course will prevent the student from advancing in the program since each clinical practicum course is a pre-requisite to the next one.
 - In the event the repeat competency evaluation cannot be completed on an actual patient due to low patient volume a simulated competency evaluation may be completed with the prior approval of the Clinical Coordinator and/or Program Director.
 - In the event it is not possible to repeat a failed competency evaluation that was not required for that clinical practicum within the same clinical practicum the student should repeat that failed competency evaluation within the first three (3) to four (4) weeks of the next Clinical Practicum.
6. Students who fail a competency evaluation for a **second time** on the same procedure will be allowed **one** final attempt to successfully pass that competency evaluation.
 - The student must first complete a second remediation laboratory practice with the Clinical Coordinator and/or Clinical Preceptor and review the appropriate text or other available materials (slides, radiographs, handouts, video tapes, etc.).
 - The student is then re-assigned to the particular area in the radiology department where that procedure is performed in order to gain additional experience and practice pertinent to the competency.
8. Students who receive a second remediation lab for a second failed competency evaluation on the same procedure may repeat the competency evaluation for a third and final time with the Clinical Coordinator or Program Director. If the student's third attempt at competency evaluation is successful, the two initial failed competency evaluation grades and the third repeated competency evaluation grade will be included in the calculation of the student's final grade for that clinical practicum.
9. It is unlikely that students, who fail a competency evaluation on the same procedure for the **third** time, will be able to meet the requirements for passing that clinical practicum. The Clinical Coordinator, Program Director and Dean of Health Professions shall assess the overall academic and clinical status of the student and a decision shall be made as to the advisability of the student continuing in the program.
10. Students who fail a total of three competency evaluations for a clinical practicum course will meet with their Clinical Preceptor, Clinical Coordinator and Program Director and will be placed on clinical probation. Each student's issues that have resulted in the failed competency evaluations will be reviewed and used to determine the terms of the student's clinical probation.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 27

Created: January 2005

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CLINICAL PERFORMANCE ASSESSMENT

POLICY & PROCEDURE

POLICY

A student's clinical performance is assessed twice during a clinical practicum course. Student assessment includes the student's performance in the cognitive, affective, and psychomotor domains relating to the standards of performance for the profession.

When a student is assigned to only one clinical site for the semester these assessments will be completed at mid-semester and at the end of the semester.

Students will perform a self-assessment and will be evaluated by their Clinical Preceptor(s) for each clinical practicum through feedback obtained from the supervising technologists and by the evaluation of the student's performance as observed by the Clinical Preceptor using the established program guidelines and rating scale.

Supervising technologists will provide the Clinical Preceptor(s) with feedback on a student's performance through the use of the Supervising Technologist's Student Evaluation form in the Trajecsys Report System™.

The student's clinical performance assessment is performed as outlined in the procedure below.

PROCEDURE

1. The student first completes open-ended self-evaluation questions in the Trajecsys Report System™.
2. The Clinical Preceptor will complete a Clinical Performance Assessment which consists of 18 categories: Radiographic Procedures, Patient Care, Collimation and Shielding, Initiative, Cooperation, Judgement (N/A for 1st year CPI and CPII), Confidentiality, Adaptability, Critical Thinking, Confidence/Independence, Communication Skills, Professionalism/Attitude, Appearance, Care of Equipment, Attendance, Punctuality, Dependability, and Supervision & Department Policies. Judgement category is not evaluated in Clinical Practicum I and Clinical Practicum II.
3. The Clinical Preceptor(s) solicits input on a student's performance from the technologists who have provided students with direct or indirect supervision, during clinical practicum using Clinical Performance Assessment, Supervising Technologist's Student Evaluation.

4. Clinical Preceptor utilize the technologist's input, as well as their own observations of a student's performance, to complete the Clinical Performance Assessment form.
5. The Clinical Preceptor may meet with the Clinical Coordinator for assistance in completing the Clinical Performance Assessment Form.
6. The Clinical Preceptor(s) and student meet to review the Clinical Performance Assessment form.
7. The grading and evaluation system for the clinical performance assessment is as follows: Outstanding (5), Above Average (4), Average (3), Below Average (2 & 1), and Unsatisfactory (0). The judgement category is not evaluated in Clinical Practicum I and Clinical Practicum II.
8. When students receive a rating of below average and unsatisfactory for a particular category the Clinical Preceptor and/or Clinical Coordinator must provide a written comment on the Clinical Performance Assessment form identifying what the student needs to do to improve their performance.
 - In addition, the student should identify a plan to be implemented to improve their clinical performance when category has not been met.
 - The Clinical Preceptor and Clinical Coordinator should review this plan with the student to assist the student in meeting the clinical performance standards for the future.
9. The Clinical Performance Assessment form is utilized to identify both a student's strengths in his/her clinical performance and to identify areas where improvement is needed.
10. Performance assessments are maintained in the Trajecsys Report System™.
11. The grades for the two Clinical Performance Assessments are averaged together and are used in the calculation of the student's clinical practicum course grade.

Northern Essex Community College
Radiologic Technology Program

POLICY NUMBER: 28

Created: January 2005

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Revised: May 2009, June 2010, July 2013, March 2024

**STUDENT CLINICAL RECORD STORAGE
POLICY & PROCEDURE**

POLICY

Student's clinical practicum records are stored in a secure area at the student's clinical practicum site until program completion. Upon completion of the program student's clinical practicum records are sent to the Radiologic Technology Program Director and are stored at NECC according to the following procedures:

PROCEDURE

1. The American Registry of Radiologic Technologists (ARRT) allows candidates who are eligible for a primary certification exam three attempts within a three-year period to pass the primary certification exam in Radiography.
2. These three attempts at the ARRT certification exam must be completed within a three-year time frame that begins with the candidate's initial ARRT examination window start date.
 - After three unsuccessful attempts or when the three-year window expires an individual is no longer eligible to take the ARRT certification exam in Radiography beginning January 1, 2015.
3. For the graduating class of 2026, in accordance with the ARRT's three-year time frame limitation at passing the ARRT exam, the Radiologic Technology student's clinical records will be kept on file at the college for a range of one year to three years.
4. Once a student successfully passes the American Registry of Radiologic Technologists (ARRT) Radiography certification exam or when eligibility time limit to take the exam has passed (the three or four years depending on the student's graduation date), the student's program records that include confidential and personal information will be destroyed by shredding to maintain the privacy and confidentiality of the student.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 29

Created: May 2009

Reviewed: February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: June 2010, May 2011, July 2013, May 2016, January 2017

**STUDENT CLINICAL DOCUMENTATION
POLICY & PROCEDURE**

POLICY

Student clinical documentation records are the official NECC records of a student's clinical practicum experience and are stored at the clinical site the student is assigned to while the student is enrolled in their clinical practicum courses.

Removal of clinical records from the clinical site and/or falsification of these clinical records by a student is considered unethical and unprofessional behavior and is grounds for dismissal from the program.

It is the responsibility of the Radiologic Technology student to maintain neat and accurate clinical records while enrolled in the NECC Radiologic Technology Program. Failure to keep accurate and neat clinical records will result in the student receiving demerit points in their clinical practicum grade.

PROCEDURE

1. At the start of Clinical Practicum I, the student must purchase the current version of the Merrill's Pocket Guide to Radiography. The students keep this book in clinic.
2. At the start of the first clinical practicum course, RTA191, Clinical Practicum I, a student is issued a clinical record book by their clinical practicum site. This is used in conjunction with the Trajecsys Report System™.
3. Forms and documentation are in:

Clinical Binder

- Student Contact Information (In case of emergency)
- Departmental Policies & Procedures
- Alternate Shift Form
- CP5- CT and Interventional Procedure Documentation
- Conference Reports/Incident Reports

- Request for Competency Evaluation
- Continuing Education Documentation
- Completed Semester Clinical Grade Sheets (**CP1A - CP5A**)

Trajecsys

- Radiation Monitor Reports
- Clinical Labs
- Alternate Shift Reports
- Daily Sign In and Record of Clinical Assignments
- Daily Exam Logs
- Clinical Lab Documentation
- Clinical Lab Remediation
- Student Master Clinical Competency Record
- Competency Evaluation Reports
- Clinical Performance Assessments

Blackboard

- Written Clinical Exams
- Clinical Course Syllabi
- Didactic Course Syllabi

4. It is the responsibility of the student to maintain neat and accurate clinical documentation.
5. Failure to maintain neat and accurate records will result in demerits for student documentation in the Professional Behavior Section of the Clinical Practicum Grade Report form (**CP1A - CP5A**).
6. When the Clinical Preceptor and/or Clinical Coordinator has identified issues/problems with student documentation a conference will be held with the student to outline expectations for improvement and this meeting will be documented on the Student Conference Report Form.
7. Students who exhibit unethical and unprofessional behavior by removing their clinical records from their clinical site and/or falsifying their clinical records may be dismissed from the program. Demerits will be assessed for this major infraction.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 30

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**PREGNANCY POLICY
POLICY & PROCEDURE**

POLICY

If a student becomes pregnant while enrolled in the NECC Radiologic Technology Program, the student is under no requirement to declare their pregnancy. Since there is a potential risk to the developing fetus from radiation exposure, in the event a Radiologic Technology student becomes pregnant the student may choose to declare their pregnancy.

Should a Radiologic Technology student choose to declare their pregnancy, the student will notify the Program Director in writing that they are pregnant and state the estimated date of conception. A copy of this declaration will be forwarded to the Clinical Preceptor and Department Manager of her clinical practicum site. Choosing not to declare a pregnancy will result in exemption from the specific state radiation protection regulations limiting the exposure to the embryo/fetus as outlined in the procedures below.

Should a pregnant student elect not to declare their pregnancy status it is understood the program is under no requirement to afford any measures with regard to radiation safety other than those which are routinely afforded to all students.

At any time after a student voluntarily declares their pregnancy status should the student wish to reverse that decision, the student may do so by submitting their intention in writing to the Program Director. At that time, their status will revert to that which was in effect before the declaration of pregnancy.

Students entering the Radiologic Technology program complete the Pregnancy Policy Form indicating they have been informed of the pregnancy policy and procedure as outlined below.

In accordance with Title IX of the Educational Amendments of 1972, absences due to pregnancy or related conditions, including recovery from childbirth, shall be excused for as long as the student's doctor deems the absences to be medical necessary. When the student returns to the College, the student shall be reinstated to the status the student held when the leave began, which includes the opportunity to make up any missed work. The College may offer the student alternatives to making up missed work, such as retaking a semester, taking part in on-line instruction, or allowing the student additional time in a program to continue at the same pace

and finish at a later date. For more information, please contact either the Registrar at registrar@necc.mass.edu, or the Dean of Academic Advising, Articulation, Transfer, Testing, and TRiO at advising@necc.mass.edu.

PROCEDURE

1. Once a student declares to be pregnant the Program Director will ensure that the student will be issued a second radiation monitor.
 - The student will be instructed that this second radiation monitor be worn at waist level while in the clinical practicum setting, during the declared pregnant student's gestation period, to serve as a measure of embryo/fetus exposure.
 - The radiation exposure criterion for this declared pregnant student will be to limit exposures to this waist level radiation monitor to less than 50mrem/month (0.5 millisievert/month) and limit total exposure for the pregnancy to 0.5 rem/500mrem (5 millisievert) in order to ensure compliance with the Commonwealth of Massachusetts' Department of Public Health's Standards for Protection Against Radiation: 105CMR120.218.

2. The Program Director will provide the declared pregnant student with the following information:
 - A copy of the applicable state regulations (105CMR 120.203, 105CMR120.218, 105CMR120.267) which deal with exposure to the embryo/fetus.
 - A copy of the U.S. Regulatory Guide 8.13 *Instruction Concerning Prenatal Radiation Exposure* and Guide 8.29 *Instructions Concerning Risks from Radiation Exposure*.
 - The student will be given an opportunity to discuss this material with the Radiation Safety Officer or their representative.

3. In order to adhere to the Commonwealth of Massachusetts Regulation 105CMR120.218, which requires that "the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 millisievert)", the declared pregnant student is offered the following options:
 - a. The student may continue in all program clinical and didactic courses, as long as her embryo/fetal exposures are in conformance with the requirements of 105CMR120.218. If the student chooses this option, the following procedures must be followed:
 1. All efforts must be made by the student to ensure that the exposure total to the waist badge does not exceed 0.5rem/500 mrem (5 millisievert) for the entire gestation period by following the ALARA (As Low As Reasonably Achievable) principles.
 2. The student will be notified by the Program Director in writing when over 80% of this dose (400 mrem) is received.
 3. The student will be notified by the Program Director in writing, if their monthly recommendation of 50 mrem is reached or exceeded.
 4. The student is expected to utilize their knowledge of radiation control principles at all times to further minimize the exposure and thus the fetal/embryo exposure to radiation.

5. If the maximum exposure total for the gestation period is reached, the student, the Clinical Preceptor, the Clinical Coordinator(s) and the Program Director must agree on an alternate option to the standard clinical practicum schedule in order to prevent further exposure to the developing fetus.
- b. Adjustments to clinical assignments and rotation schedules may be used to minimize participation in fluoroscopic, and mobile radiographic procedures if requested by the student.
 1. Adjustments to clinical assignments may result in delaying a student's progress through the program.
 - c. The student may request a leave of absence (LOA) of less than 1 year from the Radiologic Technology Program during the student's pregnancy. The student's return date to the program will be dependent upon:
 1. The completion date of the student's pregnancy.
 2. The availability of a vacancy at a clinical practicum site.
 3. The courses which were completed in the curriculum sequencing.
 4. The student will be re-evaluated in their previous course content through the use of final exams and a clinical competency evaluation in order to determine the student's retention of previously learned material and to determine the student's re-entrance point into the program.
- Note:** A student who fails to register for courses in the appropriate semester that follows the completion of her pregnancy must reapply for admission to the program after completing all program admission requirements.
- d. A student may continue with general education courses without modification or interruption during the course of her pregnancy.
 - e. The student may choose to withdraw from the Radiologic Technology Program by submitting a letter of withdrawal to the Program Director and completing the "Withdrawal from College" form available in the Registrar's Office.
 1. If readmission to the program is later desired, the student must re-apply to the program, completing all program admission requirements.
4. At the conclusion or termination of a declared pregnancy, the student should notify the Program Director in writing regarding their change of pregnancy status. The second radiation monitor used for the monitoring of the fetus/embryo exposure will be cancelled.

NOTE: Radiation workers generally receive well below 500 mrem per year (50 mrem per month) to the whole body, thus it is unlikely that student will exceed recommended fetal exposure limits.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 31

Created: January 2005

Reviewed: February 2019, February 2020, January 2021, January 2022, January 2023

Revised: April 2006, June 2010, February 2017, March 2024

**CLINICAL PRACTICUM GRIEVANCE PROCESS
POLICY & PROCEDURE**

POLICY

The Clinical Practicum Grievance policy enables students to work with program faculty to resolve problems that may arise at their clinical practicum site in a fair and unbiased manner. If a student has a grievance regarding decisions made during their clinical practicum an appeal should be initiated as outlined below.

PROCEDURE

1. The student should first make every effort to resolve the situation through open communication with the Clinical Preceptor, Clinical Coordinator, and the Radiologic Technology Program Director within three (3) days of the initial incidence.
2. If the student is not satisfied the situation has been resolved, the student should contact the Student Code of Conduct Administrator at NECC within five (5) days of the initial incidence.
3. NECC grievance process will begin as outlined in the NECC College policies.
4. If the complaining party has exhausted all College channels for resolution of a program-related problem the student should contact the JRCERT at:

**Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 900
Chicago, IL 60606-2901
Phone: (312) 704-5300
E-mail: mail@jrcert.org**

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 32

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: October 2006, May 2007, May 2009, June 2010, March 2014

**REPORTING HEALTH AND COMMUNICABLE DISEASE
POLICY & PROCEDURE**

POLICY

The NECC Radiologic Technology student will follow the policies and procedures of the clinical practicum site regarding issues related to infection control and reporting health and communicable disease.

PROCEDURE

1. Students are expected to read, be familiar with, and follow, the policies and procedures of their clinical site relating to infection control and reporting health and communicable disease.
2. Orientation to their clinical site provides students with a review of policies and procedures specific to that facility relating to infection control issues and reporting health and communicable disease.
3. All students in health science programs must provide documentation of receiving a two-step entrance tuberculosis (TB) Mantoux (PPD) test with an annual update. For those who are positive reactors to tuberculosis (TB) testing, a negative/normal chest x-ray report is required. Seasonal influenza vaccine is required for the academic year.
4. COVID-19 verification of full vaccination status is required for the college and clinical practicum sites. Students shall provide written proof of official record of full vaccination status to the college and clinical sites.
5. Students who participate in clinical areas in surrounding communities are also protected by observing "Standard/Universal Precautions" in caring for any patient regardless of diagnosis. NECC expects students in programs that include participation in clinical practicum settings to show respect for human dignity and the uniqueness of their clients without bias or consideration of socio-economic status, personal attributes, or the nature of their client's health problems

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 33

Created: March 2014

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: March 2015, March 2021

**Needle Stick Policy and Procedure
POLICY & PROCEDURE**

POLICY

Every effort should be made by students completing laboratory/clinical practicum/externship to prevent both injuries and exposure to communicable diseases or bloodborne pathogens. If an accident or an exposure incident affecting a student should occur it is the responsibility of the student to initiate the following actions:

PROCEDURE

1. Immediately report the incident to the on-site laboratory/clinical practicum/externship preceptor.
2. In the event of possible exposure to bloodborne pathogens (i.e., needle stick or puncture with other sharps) the student must seek immediate medical treatment. If a student seeks treatment at a local Emergency Department, he/she will be responsible for insurance co-payments and/or other charges not covered by insurance.
3. Following initial treatment, the student must then pursue follow-up care with his/her personal healthcare provider, consistent with the requirements of the latest OSHA Bloodborne Pathogens standards, and complete required procedures.
4. The student must complete and sign the NECC Incident Report form available from the laboratory, clinical practicum/externship preceptor or the Dean of Health Professions office at the Lawrence campus. In the event a student refuses medical care the preceptor should make a written notation of this on the NECC Incident Report form.
5. The NECC Incident Report form will be in Trajecsys for the student and the preceptor.
6. The Program Coordinator will forward a copy of the incident report to the office of Dean of Health Professions.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 34

Created: May 2007

Reviewed: February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2008, May 2009, May 2011, July 2013

**CARDIOPULMONARY RESUSCITATION (CPR) CERTIFICATION
POLICY & PROCEDURE**

POLICY

In order to provide effective patient care and ensure patient safety all students must hold current, valid CPR certification, at the healthcare provider level, prior to entering the first clinical practicum course, RTA 191, Clinical Practicum I. Students may obtain CPR certification through the American Red Cross, the American Heart Association, or the American Safety & Health Institute and all initial and recertification courses must include skills demonstration on a mannequin.

It is the responsibility of the students to continue to maintain valid and current CPR certification, at the healthcare provider level, while enrolled in the NECC Radiologic Technology Program to participate in the clinical practicum courses.

PROCEDURE

1. Prior to the start of the first clinical practicum course, RTA191, Clinical Practicum I, a student must provide the Program Director with a copy of his/her current CPR certification card, at the healthcare provider level.
2. In order to continue to participate in the clinical practicum courses Radiologic Technology students must continue to maintain current and valid CPR certification, at the healthcare provider level, while enrolled in the Radiologic Technology Program.
3. In the event a student's CPR certification expires while enrolled in the program, the student is responsible for obtaining CPR recertification, at the healthcare provider level, and providing the Program Director with a copy of their current CPR certification card.
4. In the event a student's CPR certification expires the student will be suspended from clinical practicum until CPR certification, at the healthcare provider level, has been re-established.
5. When a student's CPR certification expires the Program Director will notify the student via the NECC e-mail and notify the Clinical Preceptor(s). The student is suspended from clinical practicum until such time the student has re-established current CPR certification, at the healthcare provider level, and has provided the

Program Director with the appropriate documentation, i.e., a copy of the student's current and valid CPR certification card.

6. The Program Director may request to see a student's original CPR certification card, in addition to being provided with a copy of the CPR certification card.
7. Time missed from clinical, due to the lack of a valid CPR certification will be made up as outlined in the policy and procedure for Clinical Attendance (**Policy 3**).

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 35

Created: June 2010

Reviewed: February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2011, July 2013, January 2017, January 2023, March 2024

**STUDENT DRUG SCREENING
POLICY & PROCEDURE**

POLICY

Students enrolled in the Radiologic Technology Program are required to undergo and pass a 10-panel urine drug screening analysis to be eligible for placement in a clinical facility. Students assigned to clinical education experiences at the clinical facilities will be required to undergo and pass random drug screening analysis to remain at that clinical facility.

The Division of Health Professions commits to provide high quality education and excellent clinical experiences to students in the health professions. Students are expected to perform at their highest functional level during all educational and clinical experiences to maximize the learning environment and ensure patient safety. A student's performance at all times must be free of any impairment caused by prescription or non-prescribed drugs or alcohol use. Students enrolling in Health Professions programs are required to undergo and pass a drug and/or alcohol screening analysis to be eligible for placement in a clinical facility. Students assigned to clinical education experiences at our contracted facilities may also be required to undergo and pass random drug screening analysis to remain at that clinical facility and in the program. Students who fail a screening or fail to comply within the designated time frame will be ineligible for clinical placement, which will affect their status in the program.

A "negative-dilute" drug screening result is judged inconclusive and is not considered successfully meeting the drug screening requirement. Those students who undergo drug screening which results in "negative-dilute" will submit to a random drug test within 24 hours of the notification of the previous test result in order to confirm the negative status of the screening. This test can be repeated once. Any further "negative-dilute" results will be considered a failed drug screening. Only students who undergo and pass drug screening will be eligible for clinical placement. If a student has two negative dilute results, the student may elect, at their own expense, to submit for a hair follicle test (if available) to prove their negative status.

Students who test positive for marijuana use are unable to continue in clinical placement which will affect their status in the health program. A student who has a prescription for Medical Marijuana and tests positive for marijuana will also be ineligible to participate in clinical placement due to the federal restriction on the use of

marijuana. While the use of Medical Marijuana is permitted in Massachusetts, marijuana remains classified as a controlled substance under federal law and its use, possession, and/or cultivation at educational institutions remains prohibited.

By my signature below, I acknowledge that I have been provided information that I am required to undergo and pass a drug and/or alcohol screening analysis, and **I am aware that failure to pass, or failure to take a drug and/or alcohol screening analysis within the designated time frame will result in my being ineligible to participate in the practicum/externship/internship education component of my program.**

All students are notified during the application process of the drug screening requirement. Upon acceptance each student acknowledges that they have been provided with such notification and the impact their ability to participate in clinical education of: (1) failing to pass a drug screening analysis, or (2) refusing to submit to a drug screening analysis, or (3) failing to schedule and take a drug screening analysis within the designated time frame.

PROCEDURE

1. The following clinical courses will initiate drug screening analysis:
 - a. RTA191, Clinical Practicum I
 - b. RTA294, Clinical Practicum III
2. Each student registered for a clinical practicum course in the Radiologic Technology Program that initiates the requirement of the drug screening analysis will be notified of the requirement that the student is to report for drug screening.
3. Drug screening analysis for all students is completed at a facility designated by NECC.
4. Notification of the drug screening requirement is delivered to the students. This notification designates the time frame in which students must complete the required drug screening analysis. Students are provided with a link to the drug testing facility's website and may use that link to find a site that is most convenient for them to schedule their test.
5. Failure to report for a drug screening analysis or failure to report within the designated time frame will be interpreted as a failed drug test.
6. Once a student reports for drug screening analysis and fails to provide sufficient urine for the test and leaves the facility without providing a sufficient urine sample, this is interpreted as a failed drug test.
7. Students are responsible for paying the associated fee for the drug screening analysis and this fee is included in their NECC bill.

8. The Office of the Dean of Health Professions at NECC will receive notification of NECC student's drug screen results.
9. The Radiologic Technology Program Director will receive a list of those students who have completed their drug screening and are eligible for participation in clinical education.
10. Students who fail to complete, fail to pass, or refuse to submit to a drug screening analysis will be deemed ineligible for clinical placement. Since each radiologic technology clinical practicum course is a co-requisite course with the other radiologic technology courses in each semester, a student's inability to be placed in a clinical placement will result in a student's inability to remain in the radiologic technology program.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 36

Created: January 2005

Reviewed: February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2005, May 2008, May 2009, June 2010, July 2013, March 2021, March 2024

**CONTINUING EDUCATION REQUIREMENTS
FOR RADIOLOGIC TECHNOLOGY STUDENTS**

POLICY & PROCEDURE

POLICY

In order to promote life-long learning, and to encourage the students to actively pursue knowledge that will enhance their abilities, improve their skills and help them adapt to a work environment that inherently involves a rapidly changing technology, students are required to earn continuing education (CE) credits during each of their clinical practicum courses.

The CE credit requirement will be incorporated into the student's clinical practicum grade in the category of professional behavior. The specific requirements for CE credits are outlined in the procedure below.

PROCEDURE

1. The minimum number of CE credits that must be earned is as follows:
 - Four (4) CE credits must be earned for RTA191, Clinical Practicum I
 - Five (5) CE credits must be earned for each of the subsequent clinical practicum courses including: RTA192, Clinical Practicum II, RTA292 Summer Clinical Practicum III, RTA294 Clinical Practicum IV, and RTA295 Clinical Practicum V.
2. The total number of credits earned during the course of the program will be **24 CE credits**, which is what is required by the Radiation Control Program in Massachusetts (24/biennium) and the American Registry of Radiologic Technologists (ARRT: 24/biennium), for technologists to maintain licensure with the State and certification/registration with the ARRT.
 - Students may earn their CE credits during each of their clinical practicum courses or prior to the start of a clinical practicum (CP) course.
 - Example 1: Student A earns 14 credits during CP I. These credits complete the student's CE requirements for CP I, II, and III.
 - Example 2: Student B earns 5 credits in CP I and 7 credits during CP II. This student has met the CE requirement for CP I, CP II and has earned 3 credits towards the CE requirements for CP III.

3. CE credit criteria are based on the criteria outlined in the annual report to registered technologists by the American Society of Radiologic Technologists (ASRT) and the State of Massachusetts Radiation Control Program.
 - One CE credit is equal to 50 minutes of lecture time.
 - Lectures of 30-49 minutes are equal to one-half of one CE credit.
 - Lectures less than 30 minutes do not receive any credit.
 - CE credits must be pre-approved by a Recognized Continuing Education Evaluation Mechanism (RCEEM), such as the ASRT, ACR, AHRA, SDMS, SNMTS, SVT, and CAMRT or by an organization recognized by the State such as the MSRT, AMA, ANA.

4. Students may earn these CE credits through a number of mechanisms, such as:
 - Attending conferences, and seminars.
 - Attending in-service programs provided by their clinical site.
 - Completing the directed reading articles in the professional journals of the radiologic science professions, such as *Radiologic Technology* published by the ASRT and successfully passing the accompanying post-test for these readings.
 - Assisting in the organization and hosting of a continuing education activity at their clinical site or at the college campus.
 - Providing an in-service lecture at their clinical practicum site, (student must obtain prior approval from program director and clinical preceptor for topic of in-service).
 - Students who provide an in-service lecture at their clinical site will earn 5 CE credits for that practicum.
 - Program faculty can identify additional opportunities for students to earn CE credits.

Students must submit to their Clinical Preceptor a copy of the appropriate documentation showing they have completed their continuing education requirements for each clinical practicum and will record CE credits in the Trajecsys Report System™.

5. Examples of documentation include but are not limited to the following:
 - Certificate of attendance for attendance at conferences, seminars, in-services, and for successful completion of the directed readings post-test from professional radiologic science journals, etc.
 - Written documentation of student's role and responsibilities in organizing and hosting a continuing education activity such as:
 - create an advertising flyer or brochure (submit copy of flyer or brochure)
 - creating certificate of attendance (submit copy of certificate)
 - maintaining registration and attendance records, (submit copy of attendance records)
 - arranging for speaker(s), (submit copy of speaker's lecture outline and CV) and obtaining CE approval through the MSRT (submit copy of MSRT approval)
 - arranging for food and drinks for activity (submit documentation of arrangements and receipts), etc.

6. In the event a student does not complete the required number of CE credits for their clinical practicum, points will be deducted for each missing credit in the Professional Behavior Section of their Grade Report for that Clinical Practicum Grade sheet (**Form CP1-A, CP2-A, CP3-A, CP4-A & CP5-A**). The Continuing Education Credits section is based on the following criteria and not to exceed 5 points for continuing education requirements:
 - 3 points for each missing CE credit in Clinical Practicum I,
 - 5 points for each missing CE credit in Clinical Practicum II, Clinical Practicum III, Clinical Practicum IV, and Clinical Practicum V.
7. Students will be required to make-up any missing CE credits from one clinical practicum, during their next clinical practicum course, in addition to earning the required CE credits for that current clinical practicum. Failure to make up the missing CE credits, plus the required CE credits during the next clinical practicum will result in point deductions in the Professional Behavior section of the clinical practicum grade sheet.
 - Any make-up credits earned for missing CE credits in a previous clinical practicum will not count toward the total number of credits that must be earned in the next clinical practicum.
 - Example: Student A only earns 2 CE credits in Clinical Practicum III and 5 are required. This means that Student A will need to earn the 3 missing CE credits from Clinical Practicum III and the 5 CE credits needed for Clinical Practicum IV for a total of 8 credits during Clinical Practicum IV.
8. A student who fails to meet the CE requirements for CPV will not have an opportunity to make up the missing CE requirements in another clinical practicum course. The student will receive a 5-point deduction on their CP5 grade sheet in the category of Professional Behavior for the CE requirements regardless of how many CE credits are missing. In addition, if a student were missing additional credits from their previous clinical practicum course additional points would be deducted in the Clinical Merit/Demerit line of the grade sheet for the missing credit.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 37

Created: January 2005

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: May 2009, January 2017

**STUDENT CONFERENCES
POLICY & PROCEDURE**

POLICY

Student conferences will take place on a regular and as needed basis. Conferences may be requested by the Clinical Preceptor, the Program Director, the Clinical Coordinator, Radiology Supervisors/Managers, the student, and/or other program personnel.

Student conferences will be documented using the NECC Student Conference Form in Trajecsyst. Student conferences may be used to address issues or commendations in regards to a student's performance at their clinical practicum site.

Student Conference form is utilized for clinical make-up time.

PROCEDURE

1. Students conferences will be scheduled with the student, Clinical Preceptor, Clinical Coordinator and/or Program Director at mid-semester, and at the end of the semester as a part of the student's clinical performance assessment, using the NECC Clinical Performance Assessment Form.
2. Additional student conferences may be requested and scheduled throughout the semester on an as needed basis.
 - The NECC Student Conference Form will be used to document student conferences, separate from the student clinical performance assessment.
 - Student Conference form is utilized for clinical make-up time.
3. The NECC Student Conference Form will be completed in Trajecsyst for the student's file.
4. Students will be asked to sign the NECC Student Conference form indicating that they have read and understood the material presented on the form.
 - The student's signature does not necessarily mean that the student agrees or disagrees with the information presented on this form, only that the student has read and reviewed the information presented on the form.
 - If a student does not agree with the conference reason or the results of the conference the student must state their case in writing on the back of the conference report form or attach a separate sheet of paper to the conference report stating their case.

5. When there have been three repetitive issues, concerns, severe or serious violations of policy affecting patient care and safety addressed through the use of the student conference report a student will be placed on clinical probation (See Policy and Procedure # 15, Clinical Probation).

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 38

Created: July 2014

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: August 2014

**Guidelines for Use of Energized Lab Facility
POLICY & PROCEDURE**

POLICY

NECC Radiologic Technology students will be supervised by Program Faculty at all times through direct or indirect supervision, as outlined in the procedures below. Program Faculty is defined as the Program Director, Clinical Coordinator, Part-time Didactic Faculty and/or Part-time Lab Instructor who is certified by the Massachusetts Department of Public Health and faculty of NECC.

PROCEDURE

1. Students will be work under the **direct** supervision of Program Faculty of NECC.
2. A student must have **direct supervision** while observing, practicing, or performing a procedure in the lab.
3. **Direct Supervision** is under Program Faculty in the room overseeing all activities associated with that radiographic procedure including:
 - a. The Program Faculty reviews the procedure in relation to the student's level of experience and achievement.
 - b. The Program Faculty is always present during the performance of the procedure.
 - c. The Program Faculty reviews and approves the procedure and the radiographic images that are produced.
4. All x-ray exposures are to be made only at the direction of the Program Faculty.
5. The laboratory is to be kept locked when not in use.
6. Students must wear a radiation monitoring device during their didactic labs on campus. Didactic labs that have exposure labs with the course.
7. Program faculty will monitor the student's bi-monthly dose in the energized laboratory.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 39

Created: July 2015

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: August 2014

**Smoke-Free Environment
POLICY & PROCEDURE**

POLICY

Northern Essex Community College recognizes the medical evidence that indicates that smoking is a serious health hazard, and that this hazard includes those exposed to secondhand smoke. Where a primary responsibility of the College is to provide a safe and healthful working and learning environment.

Smoking is prohibited within the confines of all college grounds, buildings, and property including college vehicles. This smoke-free environment includes all clinical sites. The use of tobacco products (cigarettes, cigars, chewing tobacco, snuff pipes, electronic cigarettes, etc.) is prohibited at the hospitals.

PROCEDURE

1. Signs are posted at strategic locations around the hospitals. If student violates the policy, they are subject to disciplinary action.
2. No exceptions to this policy will be granted.
3. Any student found to be smoking on a NECC campus or clinical sites (other than in a personal vehicle) will be courteously reminded by Campus Security of the College policy and will be asked to extinguish their cigarette and refrain from smoking on campus in the future. Informal reminders, campus signs, and broadcast emails will continue throughout the year to foster awareness of the NECC Smoke-Free Environment Policy.
4. If a student is subsequently found to be smoking on campus an incident report will be filed by Security. The report will indicate the time and date of the offense and the full name and student ID number of the individual violating the policy.
5. A copy of the incident report will be forwarded to the College Discipline Officer.
6. Upon receiving an incident report from the NECC Security the process below will be followed:

First Violation: Written Warning

Upon receiving an incident report from Security, the student will be sent a written warning indicating that further violations of the NECC Smoke-Free Environment Policy will result in more severe sanctions. The exact nature of those sanctions will be stipulated. A discipline file will be established for the student and a copy of the letter of warning placed in the student's file.

Second Violation: Automatic Fine of \$25.00

Upon receiving a second incident report from Security indicating the student violated the policy a second time the student will be automatically fined \$25.00. The fee will be posted to the student's account. The student will be placed on registration "hold" and may not register for classes or graduate until the fee is paid. At this point the student will be given an option in writing to see the College Discipline Officer and sign a statement pledging to abide by the NECC Smoke-Free Environment Policy to avoid further disciplinary consequences. Once the pledge is signed the \$25.00 fee will be waived.

Third Violation: Automatic Fine of \$100.00

Upon receiving a third incident report from Security indicating the student violated the policy a third time the student will be fined \$100.00. The fee will be posted to the student's account and the student will be notified again in writing. The student will be placed on registration "hold" and may not register for classes or graduate until the fee is paid.

Fourth Violation: Automatic Suspension

Upon receiving a fourth incident report from Security that a student violated the policy a fourth time, the student will be automatically suspended and notified in writing.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 40

Created: May 2015

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, February 2023, March 2024

Revised: February 2020, March 2021, February 2023

**MRI SAFETY
POLICY & PROCEDURE**

The NECC Radiologic Technology student will view an MRI video orientation that meets current American College of Radiology (ACR) guidelines and complete an associated quiz prior to attending their assigned clinical practicum site/s.

This orientation will be provided by the NECC faculty, during the fall orientation at the NECC campus, for CP I and senior students before an MRI observation.

PROCEDURE

1. Students are scheduled for an orientation at NECC prior to attending clinical practicum.
2. Students must watch the MRI Safety Essential video, sign a documentation form acknowledging the student watched the video, and complete an associated quiz prior to attending their assigned clinical practicum site/s.
3. All students will also complete the MRI Observation Screening Document form provided by the college review it with a designated MRI technologist. Students will have the opportunity to ask any questions or address any concerns. A copy of the MRI screening form will be maintained in the student's clinical binder and the program office.
4. If the student has any changes on the MRI screening form (surgery, pregnancy and/or metallic object injury) the student is required to notify the Program Director immediately.
5. Failure to watch the MRI safety will result in the delay in the start of a student's clinical practicum course and may result in the student being unable to complete the clinical practicum course requirements.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 41

Created: February 2017

Reviewed: February 2018, February 2019, February 2020, January 2021, January 2022, January 2023, March 2024

Revised: July 2017

**Impaired Student in Off-Setting
POLICY & PROCEDURE**

Purpose:

It is the responsibility of the Division of Health Professions in conjunction with each academic program to protect patients/clients in off-site settings and support the health and well-being of the student in the Division of Health Professions.

The Division has the following expectations:

The student will be prepared to fully participate in off-site placement in all dimensions of learning: educational, emotional, and physical.

The student will be safe and competent for patient/client care.

Policy:

Any student enrolled in the Division of Health Professions who exhibits compromised performance or impaired behavior will be removed from the off-site setting and provided the guidance and direction for care.

Procedure:

1. The off-site preceptor will use the NECC Health Division Technical Standards for guidance in determining whether the student is appropriate for off-site education:

- Does the student show signs of impairment that may include but are not limited to indication of alcohol on the breath, slurred speech or balance instability?
- Is the student able to function safely, effectively, and calmly under stressful conditions?
- Is the student able to maintain composure while managing multiple tasks simultaneously?
- Does the student exhibit social skills necessary to interact effectively and respectfully with patients/clients, families, supervisors, and co-workers of the same or different cultures?
- Does the student maintain personal hygiene consistent with close personal contact associated with patient/client care?

2. Procedure for removal of the student from the off-site setting:

- Ensure the safety of the impaired student.
- Establish a means of safe transportation to an appropriate destination.
- Off-site educator will contact the course coordinator or clinical coordinator to advise the student of the student status.

- Course coordinator or off-site educator will complete the Care and Concern form online: <https://facstaff.necc.mass.edu/faculty-resources/care-and-concern-report-form/> which is received in the office of the Director of Student conduct.

3. The Director of Student Conduct will consult with the off-site educator and/or program coordinator regarding conditions for the student's return to the off-site placement.

4. The student may be eligible to return to an off-site experience under the following conditions:

- If the plan for return agrees with the program policies and procedures.
- If an off-site placement is available.
- The student may be required to complete a drug screening with negative results.
- The student may need to have an updated Technical Standards form completed by a health care practitioner.
- Student may be required to make up the missed off-site education time.

**Northern Essex Community College
Radiologic Technology Program**

POLICY NUMBER: 42

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**READMISSION POLICY
POLICY & PROCEDURE**

POLICY

The NECC Radiologic Technology Readmission Policy is designed to follow a standardized readmission into the program for any student who is dismissed or withdraws from the program. This policy will assure a fair and equitable process to apply for readmission into the program.

PROCEDURE

1. At the time of separation from the program, any student seeking readmission will be provided the following:
 - a. a remediation plan consisting of activities that are required and
 - b. the program's readmission standards will include the readmission application due date and be signed by both the student, his/her academic advisor, and the Program Coordinator.
 - c. readmission standards set by the program will be objective and measurable.
2. The Program Coordinator will maintain at least quarterly contact with the student(s) seeking readmission to provide support and reminders about due dates and content required for readmission.
3. Readmission applications will be received in the Division Office on or before the program readmission due date.
 - a. The application and evidence of compliance will be posted in the Readmission Committee folder in the Program Coordinators shared drive.
 - b. The student's name and identifying student ID will be obliterated or removed from the application and supporting materials.
4. Students applying for readmission to Health Professions programs will have their application evaluated by the Readmission Committee, which is composed of representatives from each program. A quorum for the Readmission Committee's decisions is 60% of the Health Program Coordinators.
5. Within two weeks after the due date of the readmission request, the division Readmission Committee will convene to assess the application(s) against the program standards for readmission.
 - a. The Readmission Committee reserves the right to request clarifying documentation.
 - b. Only submitted readmission materials will be used to decide about readmission; other factors will not be considered.
 - c. A decision will require agreement of the majority of the Health Profession programs present.
 - d. In the event of a tie, the dean or assistant dean will have the determining vote.
 - e. The student will receive a decision letter signed by the dean within ten days of the vote.

6. The student has ten school days in which to appeal the decision. The appeal will be addressed to the Vice President of Academic and Student Affairs or designee. At the time that the student returns to the program, the student, faculty, and college employees are assured that all will be treated fairly and with respect throughout the balance of the educational experience.